

WHAT'S MISSING? ANTI-RACIST SEX EDUCATION!

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Abstract

Contemporary sexual health curricula in Canada include information about sexual diversity and queer identities, but what remains missing is an explicit discussion of anti-racist sex education. Although there is official federal and provincial support for multiculturalism and anti-racism in schools, contemporary Canadian sex education omits crucial anti-racist work and foundational anti-racist education frameworks are silent on sex education curriculum.

Although anti-racism should be infused into all school curricula, sex education represents an especially vital subject for anti-racist education, for sex and sexuality have been racialized in a variety of ways. As sexual health topics are increasingly added into health and physical education curricula across Canada, it is vital to appraise their contents critically. This lack of attention paid to race, racism and racialization leads to the appearance of a raceless sex education and this “racelessness”—a reinforcing of whiteness and white bodies as the standard—is what I am investigating in Ontario and Canada sex education government documents.

In order to show the ways that racism and racialization work to produce a raceless sex education, I employ a content analysis based on a key word search of Ontario public secondary school health provincial curricula and the federal sex education policy. Public school curricula were selected based on their sexual health content. English language curricula were selected from Ontario and Canada to maximize the congruency of politics and country of origin. All documents examined were created within the same nine-year range (1999–2008) to maximize similarity in social climate surrounding the documents. Two health and physical education curricula from Ontario were selected as a sample of public school curricula, one of the Grade 9/10 curricula and one of the Grade 11/12 curricula. One set of federal sexual health guidelines, the most recent version of the *Canadian Guidelines for Sexual Health Education* (2008), was selected as a

sample of government policy devoted to sex education. This content analysis provides the basis for anti-racist sex education policy recommendations organized around three vital objectives to be infused into existing Ontario public school sex education curriculum. As anti-racism critically examines the education institution and sexual health curricula are an increasingly politicized example of potentially transformative education, anti-racism must be incorporated into sex education.

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Introduction: One Step Forward, Two Steps Back

In 2010, headlines across Ontario illustrated the ongoing controversies around sex education in Ontario public schools. From “Ontario’s sex-ed battlefield: Saving lives or encouraging early sex?” (Humphreys, 2010) to “Sex-ed battle in Ontario: New twist on old story: Critics say schools imposing morality” (Cohen, 2010a) and “Sex-ed opponents claim victory in Ontario” (Canadian Press, 23 April 2010), Ontario sex education programs are in the media crosshairs.

In April 2010, there was media flurry around the release, approval and subsequent backtracking of the new Ontario Ministry of Education sex education curriculum. This new curriculum introduced topics such as gender identity, sexual orientation and masturbation and met with resistance from a small but vocal group from the religious right. Some media outlets portrayed the curriculum as “teaching homosexuality” (OPHEA, 2011), which fuelled a backlash against the curriculum from religious organizations. In late April 2010, after mounting pressure from religious groups, Premier Dalton McGinty discarded the entire 2010 Health and Physical Education curriculum, leaving students and teachers with the edition that was last updated in 1998. Currently, there are no consultations or initiatives planned for a revised sex education curriculum.

Despite the attention paid to sex education, one critical variable is routinely omitted in sex education curricula: race. Although there have been numerous studies showing the importance of an anti-racist framework in school curricula, the topic of race is left untouched by current federal and provincial sex education guidelines and policies. This omission of race from sex education curricula is especially critical, as the population of both Canada and Ontario grows more ethnically diverse. Ontario is the most diverse province in Canada. More than half (52.3%) of the

1.1 million newcomers to Canada between 2001 and 2006 settled in Ontario and more than half of these people settled in areas outside of Toronto. Furthermore, the Aboriginal population in Ontario grew almost five times faster than that of the non-aboriginal population. Ontario recently reported that residents of the province claimed more than two hundred different languages as their “mother tongue” (Census of Canada, 2006, as cited by Ministry of Education and Training, 2009). Census data indicate that a majority of people (about 2.7 million) who live in Ontario identify themselves as “racialized,” and represent more than half of Canada’s total “racialized minorities” (Census of Canada, 2006). Toronto District School Board (TDSB) data indicate the changing composition of classrooms: of all TDSB elementary students, 29% are white, 27% are South Asian, 15% are East Asian, 10% are black, 9% are bi-racial, 4% are Middle Eastern, 4% South-East Asian, 2% are Latin American and 0.1% are Aboriginal (Smith, 2010). The religious composition of Ontario citizens and schools is also changing, with the largest increases between 1991 and 2001 represented by the Muslim, Sikh, Hindu and Buddhist faiths (Statistics Canada, 2003).

Given the lack of attention paid to race in sex education curricula in Ontario, I examine why an anti-racist education framework is crucial to sex education. I then suggest ways in which anti-racism education may be incorporated into public school sex education and explore how anti-racist sex education curricula can address the sexual and reproductive health needs of youth in the province’s public schools.

I use a content analysis based on a key word search of contemporary Ontario public school sex education curricula to assess the role of race in relation to broader federal sexual health guidelines. Although federal, provincial and territorial governments are officially committed to multiculturalism and an Ontario Anti-Racism and Ethnocultural Equity in School Board (1992) policy document does exist, contemporary sex education curricula, despite moving

toward the inclusion of GLBTQ issues, omit anti-racist perspectives. I posit that Ontario public school sex education curricula fail youth in the province because of the lack of attention paid to race. This omission translates into what I call a “raceless” sex education that upholds norms of white supremacy.

Documents of Study

I focus on two sets of documents. The first is the Ontario Ministry of Education Public Secondary School Grade 9/10 curriculum and the Grade 11/12 curriculum, hereafter referred to as “provincial documents.” These curricula documents are used across Ontario and cover over 700,000 students across 850 public high schools (Ministry of Education Ontario, 2010a). The second set of documents consists of the *Canadian Guidelines for Sexual Health* (Public Health Agency of Canada, 2008), hereafter referred to as the *Guidelines*. Previous editions of this document will be identified by their full title and year. These federal *Guidelines* are recommended in all settings where sex education is carried out even though education is a provincial and territorial responsibility. All documents were created within the same nine-year range (1999–2008) and were selected because they provide an appropriate comparison between provincial and federal environments.

Key Words

There are numerous terms, strategies, goals and principles for the teaching of physical, mental and emotional processes related to reproduction, puberty, sexuality and sexual health for youths. Terms such as reproductive health, sexual health, sexuality education and sex education are among the most prevalent in education settings.

Reproductive health is defined within the World Health Organization (WHO) definition of health. Reproductive health addresses the “reproductive processes, functions and systems at all stages of life, striving to allow people to be able to have responsible, satisfying and safe sex lives, including the capability to reproduce and the freedom to decide when and how often to do so” (World Health Organization, 2011). The International Planned Parenthood Federation (IPPF) (2011) states further that reproductive health implies the rights of men and women to be informed, have access to safe, effective, affordable and acceptable methods of family planning of their choice and access to appropriate health care services that enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.

Sexual health education involves the “enhancement of life and personal relations and not merely counseling and care related to reproduction and sexually transmitted diseases” (IPPF, 2011). WHO states that sexual health is the state of physical, mental and social well being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, in addition to an opportunity to have pleasurable and safe sexual experiences that are free of coercion, discrimination and violence (World Health Organization, 2011).

Sears (1992) uses the term sexuality education to describe the methods of sexual and social control where program’s effectiveness is measured on the basis of sexual behaviour and its observable consequences: adolescent pregnancy rate, per capita abortions and rate of sexually transmitted infections. Sears (1992, 2002) argues that sexuality education must involve a critical

analysis of race, class, gender and sexual preference and must incorporate the ways in which these factors are experienced in multiple forms in order to remain relevant and interesting to students. Sexuality education is also a foundational concept of IPPF, which defines sexuality education as a model that “considers the various inter-related power dynamics that influence sexual choices and the resulting emotional, mental, physical and social impacts on each person’s development (p. 4).” Sexuality education includes a focus on sexual expression, sexual fulfillment and pleasure (IPPF, 2006).

I use the term sex education due to its prevalence in literature, curricula, media and society, as well as its broad encompassing nature. I also use the term to represent numerous disciplines, viewpoints and components. Sex education is more than the study of human sexuality in a biology or social science course. Its’ aim includes encouraging certain kinds of skills, attitudes, dispositions, behaviours and a critical reflection on personal experiences (Halstead & Reiss, 2003). The term sex education encompasses instruction on the biological, psychological, cultural, social, ethical and spiritual aspects of human sexuality and reproduction and addresses knowledge, attitudes, feelings and behaviours. Sex education may be formal (in schools, churches or organizations) or informal (by parents, peers and the media) (Cornog & Perper, 1996). I also use sex education because of my professional and community experience, where I am labeled and perceived as a sex educator.

Putting the Educator in Sex Education

I come to this investigation from several personal, volunteer and academic experiences. I believe that a focus on race is critical to pedagogy. I also attest that people of colour must have the space, place and power to name their own realities and solutions (Dei, 1996; Dei & Calliste, 2000). Therefore, I hold that anti-racism is for everyone, for anti-racism works to establish social institutions that address the pervasive effects of racism and interlocking social oppressions. Anti-racism encourages educational institutions to view students as more than neutral, context-free youth and to expose the ways in which education shapes them based on their race, class, gender, sexuality and location. These fundamentals of anti-racist education overlap with sex education curricula as sex education also crucially shapes and impacts youth. This overlap is further significant because race and racialization touch upon sexuality and sexual health, childcare, sexual violence (Smith, 2005), contraception (Roberts, 1997; Sethna, 2006), abortion and HIV/AIDS (Farmer, 2002). Sex education provides a vital site where the inclusion of anti-racist education objectives in sex education curricula can begin to address the concerns and aspirations of all youth. People of colour must have the space, place and power to name their own realities and solutions (hooks, 1989, 1994; Dei, 1996; Dei & Calliste, 2000).

As I self-identify as a sex educator who is white, this investigation intersects directly with my contemporary positioning in society and with the legacy of white supremacy that places white women in positions of power and privilege over non-white men and women. I know that I can exercise this power and privilege in this investigation. As well, I realize that my personal and professional experiences can be seen as contributing to racialized and gendered perceptions. As Calliste and Dei (2000) state:

The historical construction of the health and helping professions in Canada, shaping the white woman as a professional helper of others has been dependent on the presence of the racial other. It is through an ongoing hierarchy of race, class and gender shaped

throughout Canadian history that white women have attained an elite and elevated status within the helping professions. It is through the ongoing economic subordination of the woman of colour as a less-elite helping professional that other white women have been able to become more elite and gain status within imperialism (p. 35).

Therefore, as a white woman it is essential for me to reflect first on the fact that whites have been advantaged personally and politically by the conquest of Aboriginal lands. My family, home and university remain on unceded lands due to the part that my English white settler ancestors played in the colonization of this country (Dei, 1996; Dei & Calliste, 2000; Smith, 2005; Yee, 2009). Moreover, the relationship between white women and women of colour has a long and complicated history (e.g., Dei, 1996; Roberts, 1997; Dei & Calliste, 2000; hooks, 2002; Mohanty, 2003). White women like me have benefitted from the oppression and marginalization of women of colour. For example, women of colour have been used as test subjects for birth control technologies such as the pill, for predominantly affluent white women's consumption of these technologies in the name of autonomy and freedom. Forced sterilization and abortion undertaken in the name of eugenics and population control, concern over the putative hyperfertility of women of colour, the downloading of cast-off contraceptives to the developing world and fears about a jump in immigrants and refugees to Western countries like Canada are examples of longstanding sexual and reproductive health inequalities between white women and women of colour. I am acutely aware of these inequalities while being complicit as a beneficiary of sexual and reproductive health technologies in my own life (Roberts, 1997; hooks, 2002). I call attention to these direct acts of domination in order to underline the process of white supremacy itself, to embody them onto my personal responsibility and life to avoid reinforcing the innocence of whiteness (Leonardo, 2004).

Since 2007, I have been actively involved in sex education as a community volunteer educator. I lead presentations on topics such as contraception, pregnancy options, sexually

transmitted infections, HIV/AIDS, healthy relationships, sexual diversity and sexuality through a sex-positive, pro-choice comprehensive sex education framework. I have taught sex education classes to thousands of children, youths and adults in the Greater Ottawa Area in Ottawa, Ontario. Once I delved into sex education as a volunteer via the local arm of International Planned Parenthood Federation, the size, complexity and contradictions of this always-controversial field of sex education were illuminated. As a young, university-educated, white woman, I had the flexibility to lead countless workshops, many of them in low-income housing co-ops, transitional homes for “at-risk” youth and alternative schools for individuals who, in the words of Dei (1996), have been “pushed out” of traditional Ottawa education institutions.

In each setting, I was exposed to the dramatic gap regarding sexual and reproductive health information. The reality is that misinformation about sexual and reproductive health is rampant in all youth. I heard youths repeat countless myths about contraceptives, STIs and nearly every other aspect of sexual and reproductive health. Yet the differences in misinformation were noticeably racialized, even politicized. Numerous white youths were misinformed about how to use condoms and other contraceptives or how to access sexual and reproductive health services. I also witnessed numerous racialized youths discuss in accurate detail their knowledge of unsavoury state involvement in sterilization, abortion and child rearing, yet at the same time were convinced that a cure for AIDS existed and that pregnancy was impossible through first intercourse. In addition, I heard countless blaming and shaming comments regarding sexuality from adults of all backgrounds. I know teachers, self-declared leaders of community groups, social workers and parents who banned dialogue or even mention of contraception and abortion, while at the same time touted their role as “safe” persons to whom youths could divulge their sexual and reproductive health needs. All these instances occurred as I watched the rate of chlamydia, gonorrhoea and syphilis in Ottawa rise to a ten-year high (Chianello, 2011).

Simultaneously, my undergraduate and graduate education in the Faculty of Health Sciences and the Institute of Women's Studies at the University of Ottawa led me to the social determinants of health, information about women's health and the relationship of state control, eugenics and population control to white women and women of colour.

This investigation is not involved in youth-specific experiences of racism in regard to the documents I use. Rather, I attempt to fulfill the requirements of many scholars of colour who insist that white people must educate themselves about race, racism and anti-racism instead of continually burdening people of colour with the additional task of educating whites (Freire, 1970; hooks, 1994 Yee, 2009). My experiences in sex education have led me to consider the possibilities of de-centring whiteness as the mode of normalcy in education and to examine how sex education curricula address or fail to address, issues of race and racialization for youths.

“You are either racist or you are Anti-Racist” (Dei, 2011): The Theory of Anti-Racism

In examining race and anti-racism in the context of the selected federal and provincial documents, I must define what is meant by race, anti-racism and other inseparable and interdependent terms. These definitions, however difficult to determine, are vital because the denial of race is ongoing. Dei and Simmons (2010) emphatically state “Race is conveniently denied. There is a discomfort of speaking race. We want to wish it away without addressing the problem” (p. 116).

Naming the Undefined: What is Race?

The definition of race varies in many disciplines. Broadly speaking, race is real and imagined, phenotypic and systemic. Race is also fluid, as “ideas of race, racisms and anti-racisms are in constant motion and our understanding evolves as they take new forms” (Lee, 2005 p. 14).

Amidst this fluidity, scholars draw attention to the saliency and visibility of skin colour, while taking into account the fluidity of skin colour itself. Dei (1996) refuses to deny the way skin colour is a salient indicator of race, writing that race and social racism:

Have everything to do with skin colour differences, but they involve more than skin colour. While definitions of race and racialized behaviour are historically specific and continually changing, we must be cautious of an uncritical post-modernist stance that will deny the saliency of skin colour in our lives (p. 53).

In other words, skin colour is a central component of race, but race *must* include crucial systemic factors. Macchiusi (1993 p. 60) underlines how “modern concepts of race do not always have to do with phenotypical differences between peoples [and that] contemporary racism is a conflation of class, religions and broad cultural concerns and definitions.” Terms used to talk about race are themselves contested. Lee (2005) draws attention to the problems that can arise from these specific labels “that accepted terms and concepts for talking about race, racisms and anti-racisms are problematic, because meanings attached to words form a system of representation about people that comprise racial ideologies (p. 4).” There is also complexity around who can speak or be heard, when speaking of race. Amin and Dei (2006) draw attention to this reality:

Not everyone who speaks about race is heard. In fact, racial minority bodies speak race all the time but are heard differently. Some get legitimacy and others are vilified. In order for certain issues about the experiences of racism to be accepted in public consciousness, they must be raised by a dominant body (p. 15)

Race, despite its contestation, fluidity and contextual nature, still cannot be discussed without mentioning ethnicity. Ethnicity is a word increasingly used as a politically correct stand-in for race when discussing differences due to geographic origin/heritage and/or perceptions of skin colour (James, 1996). I use ethnicity as a key word because of its recent ubiquity in policy and education documents that fully exploit its improper use. Using ethnicity to speak for race only further complicates ethnicity’s definition. Dei (1996 p. 47) alludes to this complexity and states that ethnicity as “a social relational category [is] defined by socially selected cultural

characteristics [and] increasingly appear[s] in contemporary race relations discourse[s] to capture the myriad forms of identity formation to which a simplistic definition of race fails to speak.”

James (1996) recalls that ethnicity is seen as something non-whites have, but whites do not possess. Both race and ethnicity are incredibly difficult to define and now are often used to define each other, only highlighting the intricacies of examining how racism and anti-racism work.

Racism is a critical term that evades an agreed-upon definition. It is a systemic, purposeful and ubiquitous element in societies, institutions and individuals. There are multiple components and actions of racism (Dei, 1996; James, 1996). For James (1996), racism is “reflected in social conditions that serves to disadvantage people because of their race or ethnicity and are manifested in institutional policies and in the allocation of social, economic and political rewards and resources (p. 156).” Stanley (2000) outlines how racism structures and impacts social experience and interactions with others, suggesting that it is not only the by-product of the national politics of the moment, but a major influence on it.

Racism is inherently systemic and goes far beyond the false binary of black vs. white. Dei reminds us to refute the notion that racism is an experience that affects only the “object of its wrath” (Dei, 1996 p. 30). Racism takes numerous forms and continues to shift based on political, temporal and spatial meanings. Racism needs to be understood as exclusion; in the case of sex education the fundamental failure to take an anti-racism approach means that certain communities will be excluded from representation in the curriculum (Goldberg, 2009).

“Democratic racism” is a contemporary form of racism that is especially embedded into society and often is played out in policy and discourse. Dei et al. (2007) states,

Democratically framed discourses [of racism] attribute racial stratification to cultural problems, the refusal of minorities to fit into Western society and other conventional explanations that seek to pathologize the oppressed. ... Through these formulations, democratic racism permits people to maintain racist beliefs and behaviours while appearing to hold a positive notion of democratic values (p. 110).

Mohanty (2003) contextualizes racism in the broader colonial and imperial aims of nations.

Racism, she contends “takes the form of simultaneous naturalization and abstraction. It works by erasing the economic, political and historical exigencies that necessitate the essentialist discourse of race as a way to legitimate imperialism in the first place.” The naturalization of which Mohanty speaks relates to the naturalization of the process of attributing race or racial characteristics—i.e., the normalization of racialization in society.

In addition to race, ethnicity and racism, the term racialization is relevant to anti-racist work. Lee (2005) defines racialization as a way of thinking about the social production of race consciousness ... [defined as] a process whereby social and “racial” significance is attached to certain biological (usually phenotypical) human features. These characteristics defined as racial vary over time and are not restricted to physical features. Scholars argue that invoking the term racialization focuses on the historic and contemporary creation of racial categories instead of just accepting race as a given (Miles, 1989). Smith (2010) extends racialization to refer to “broad social processes” that include

[c]olonialism and cultural privileging, through which racialized “others” are constructed, differentiated, stigmatized, and excluded. To say that society is racialized suggests that it is systemically arranged around beliefs about race; and that the distribution of power, resources, images and ideas closely corresponds with membership of racialized groups. Furthermore, it moves scholarship away from the discredited biological construct of race to the sociologically more powerful notion of a racialized ideology or ideological process (p. 12).

The complexity of these shifting definitions is compounded by their common omission in texts. Dei (1996 p. 27) reinforces this point, stating “[A]t times there is a deliberate omission in texts of the implications of race and ethnicity and, more principally omission of racism from the interpretive and analytical frames found in academic discourses.” This omission contributes to what I refer to as raceless sex education.

Moving from ideas of anti-racism and racialization brings us to an outcome of these concepts, the notion of racelessness. Backhouse (2007 p. 14) asserts “The ideology of racelessness, a hallmark of the Canadian historic tradition is very much in keeping with our national mythology that Canada is not a racist country.” The literature shows that racelessness is either a deliberate or unconscious removal, an ignorance or a silencing of race and racial differences, both real and perceived. The term originates in education literature and Fordham’s (1988) investigation of black youths’ academic success in the United States in the 1980s. Racelessness was viewed as a survival strategy in education for racialized youth in the US of the 1980s. Fordham describes racelessness as an ineffective, psychologically detrimental strategy employed by black youths who pursue academic success by distancing themselves from their community and assimilating into the dominant one by adopting a raceless identity. Similarly, Smith and Lalonde (2003) argue that racelessness is not effective for improving academic success in Canadian contexts. I invoke racelessness in the same fashion as Razack (2002). She defines it as “ignoring everyone’s race (p. 154).” This silence, ignorance and removal of race upholds the normalcy and invisibility of whiteness, underestimating the significant power it holds.

In examining racelessness, I aim to de-centre the normalcy, invisibility and power of whiteness. Discussing the meaning of whiteness, Dyer (1997) states that it is everything and nothing, fluid and unstable. It is a hue, an eye colour, hair texture, body parts and an identity. Anti-racism does not exclude whites. James (1996) insists that whites are an ethnic group even though ethnicity is perceived as something that non-whites have and whites emphatically do not possess. White skin is racialized—it has been racialized for power and privilege.

hooks (1981) argues that the category white is itself transitory, as preferential treatment to white skin is organized and complicated along gender and class lines. The construction of white femininity, for example, has involved the “exalting of white women and conversely the

debasement of women and men of colour” (hooks, 1981, as cited by Dei & Calliste, 2000 p. 31). Colonial regimes typically deploy white femininity in opposition to a sexualized, barbaric or oppressed group of racialized women who need to be saved (Dei & Calliste, 2000).

McIntosh (1990) underscored how the privilege of white skin is taken for granted and perceived as normal, neutral, desirable and the universal standard. Dei and Calliste (2000) echo this point, stating that a primary principle of anti-racist practice is the questioning of white power and privilege and the supposed rationality for white dominance in society. Whiteness is a category often produced in opposition to its referential “other,” citing itself as the universal marker of civility and “racelessness” (Dei & Calliste, 2000; McIntosh, 1990). Examining whiteness is a task that seeks to undermine power relations, false binaries imbued by Eurocentric norms, perspectives and traditions and to rupture the false duality that anti-racism is simply about “black vs. white” (Dei & Calliste, 2000). These false binaries are a product of white supremacy that works by simultaneously reinforcing divisions and social stratifications while making its process silent, invisible and normal.

hooks (1989) consciously speaks of white supremacy in place of racism to focus on its effect on white and non-white people. She argues,

“White supremacy” is a much more useful term for understanding the complicity of people of color in upholding and maintaining racial hierarchies that do not involve force (i.e. slavery, apartheid) The term “white supremacy” enables us to recognize not only that black people are socialized to embody the values and attitudes of white supremacy, but we can exercise “white supremacist control” over other black people (p. 113).

White supremacy has a systemic and persistent reach (James, 1996). It is especially critical to education, as Eurocentric practices leave little room for alternate or additional values and perspectives. For Dei (1996), the danger of Eurocentricity is that it is viewed as the only centre, as the only valid perspective achieved through the constant devaluation and delegitimizing of other ideas and values. This far reach of white supremacy is a target of anti-racism.

Anti-racism begins with a commitment to fight racism (Stanley, 2000). It questions the role that social institutions (including education) play in reproducing intersectional inequalities based on race, gender, sexuality and class (Dei, 2000 p. 34). Gilborn (2006) warns of the danger arising from proposing a clear theoretical map of anti-racism, but because race is an imaginary yet dynamic category, anti-racism must have three broad goals.

First, it must examine and highlight the consequences of race and racialization. Anti-racism examines race and social differences as issues related to power and social equity, rather than as issues of cultural and ethnic variety; challenging the view that skin colour is the only signifier of difference (Dei, 1996). Second, anti-racism must incorporate an analysis of intersecting social oppressions to understand and expose how perceptions of race and their related effects do not occur in a vacuum, but are related to gender, class, religion, sexuality, (dis)ability, geography and other social oppressions. In examining power and equity, anti-racism provides an interlocking lens for addressing the many facets of social oppression that work through institutions and individuals (Dei, 1996). Third, anti-racism must apply this analysis to the study of individual, social and systemic practices through which these oppressions—including race and racialization—operate. Anti-racism works to expose ideologies of racism and interlocking social oppressions through critical appraisal of social institutions and their policies, practices and guidelines. Anti-racism underlines how institutions and individuals are not neutral or innocent (James, 1996). Lee (2005) echoes these fundamentals of an integrative anti-racist framework as acknowledging that we are all gendered and racialized subjects who do not participate as equals. Racism, sexism and other forms of oppression are systemic. Eliminating racism, then, is a collective, not an individual project (Lee, 2005). This underlines the importance of social institutions to use anti-racism to resist these systemic oppressions and the role of anti-racism into collective projects such as education.

Critical Race Theory

Anti-racism is linked theoretically and practically to critical race theory (CRT), which is rooted in left legal scholarship. CRT questions the ways that race and power are constructed and represented in society (Gilborn, 2006). The fundamentals of CRT involve interrogating race through the normalization of racism in society. CRT is rooted in the idea that racism is not an aberrant feature of society, but rather acts and looks ordinary and natural. Due to this normalization of racism, CRT posits that formal institutional policies that insist on treating members of different racialized groups the same way as whites can fix only the most obvious forms of racism (Gilborn, 2006). CRT has aimed to counter the political and legal implications of multiculturalism and their resulting impact (e.g., on education). Razack (2008) has cited CRT to also encompass the interactions of race in courtrooms, classrooms and the persistent effects of colonization in these encounters. Anti-racism in Canada builds on this point to problematize multiculturalism.

Multiculturalism

When Liberal Prime Minister Pierre Trudeau introduced multiculturalism as an official federal policy in 1971, criticizing the dominant assimilationist ideology operating in Canada, he called for a Canada that was proud of its multicultural diversity (Rezai-Rashti, 1995 p. 3).

Trudeau (1971) proclaimed:

There cannot be one cultural policy for Canadians of British and French origins and one for aboriginal people and yet a third for all others. For although there are two official languages there is no official culture, nor does any ethnic group take precedence over any other. No citizen or group of citizens is other than Canadian, and all should be treated fairly (p. 1).

The move towards multiculturalism as a federal policy was primarily related to French Canada

and the tensions surrounding cultural and linguistic differences and sovereignty.

The term “multiculturalism” initially focused on indigenous people and minorities, particularly francophone Quebecers, although such groups prefer to be considered “nations” rather than “cultures.” Therefore, this term has come to mean the accommodation of ethno-religious groups formed by immigration in the past 50 years (Kymlicka, 1996). Despite the nation-building attempts behind multiculturalism, all Quebec governments (federalist and sovereignist alike) have resisted multiculturalism because, they argue, it makes Francophones but *one* ethnic group among many across Canada (Bouchard, 2011).

Canadian multiculturalism is rooted in the idea that there is no majority culture and that diversity defines the country (Bouchard, 2011). It is built on the erroneous premise that liberal societies are democratic and egalitarian and that all citizens have a freedom of choice.

Multiculturalism holds that culture is a set of visible practices (such as dress, food or religion) and that cultural groups are static and monolithic. It suggests that prejudice is a cultural problem and the solution is the equal treatment of all regardless of race, ethnicity, gender, class or (dis)ability and the toleration of differences. The failure of multiculturalism is viewed as an inability to see the relationship between choice, access and the impact of social structures in enabling or disabling choice and access to individuals and communities. Multiculturalism falls short by refusing to recognize the existence of social stratification based on the intersection of gender, race, ethnicity and (dis)ability. It also posits that individual difficulty in society is a failure of the individual to successfully to become multicultural or is a result of bad individual choices (James, 1996). The ideology, intended goals and practices of multicultural education are intrinsically different than that of anti-racist education.

Multicultural education started from a liberal understanding of racism, while anti-racist education came from the work of racial minorities struggling against imperial, colonial and neo-

colonial experiences. The central assumption of multicultural education is that being made aware of and celebrating surface differences among different races and ethnicities can counteract racially prejudiced attitudes amongst Canadians. Multiculturalism also celebrates the superficial or enjoyable aspects of culture, such as dress, dance and food, while avoiding painful discussions of resistance, colonialism or imperialism (Dei & Calliste, 2000). Anti-racist education, conversely, examines the histories and practices that prejudice upholds and closely examines the ways that racism originates (Rezai-Rashit, 1995 p. 6). There are also fundamental differences in the intended outcomes of these education strategies. Multicultural education intends to ameliorate prejudices between individual Canadians, whereas anti-racist education looks to transform institutions that perpetuate and create racism, ultimately seeking to improve the lives of all students.

Sites of Resistance: Anti-Racism and Education in Canada

Implementing anti-racism in education has a complex history in Canada, one intrinsically linked to the policy of multiculturalism. Canadian school boards and provincial education systems have attempted to include some anti-racist policies. McCaskell (2010) recounts examples from the former Toronto Board of Education, which produced reports on “Multiculturalism” (1975) and “Race Relations” (1979). These reports led to the creation of the Equal Opportunity Office and an Advisor on Race Relations. Anti-racist education also began to take hold in various provincial education systems as school boards started to react to parents’ demands to instigate race relation policies and programs in the early 1990s. However, Ontario was the only province that implemented official anti-racist education through various initiatives in the early 1990s. An in-depth analysis of these programs is beyond the scope of this paper. It is worth noting, however that the government of Ontario created the Ontario Anti-Racism Secretariat (OAS), contributed to the enactment of the Employment Equity Act, established the Ontario Ministry of Education and

Training and established *An Act to Amend the Education Act in Respect of Education Authorities and Ministers' Powers*, which required school boards to develop anti-racist and ethno-cultural equity policies for elementary and secondary schools. This act resulted in the Ontario Ministry of Education and Training releasing two sets of guidelines: *Changing Perspectives: A Resource Guide for Antiracist and Ethnocultural-Equity Education* and *Antiracism and Ethnocultural Equity in School Boards: Guidelines for Policy Development and Implementation* (1992).

The ministry launched eight initiatives and provided \$1.4 million in funding over the course of two years. The dramatic changes to anti-racist programs made under Ontario's New Democratic Party government ended with the election of a Conservative government in 1995. The new government dismantled all policies, the OAS and all curriculum changes that had reflected an anti-racist framework. Regardless, anti-racist education practices are still being applied, especially in the amalgamated Toronto District School Board (Amin & Dei, 2006). Implementing anti-racist education policies province-wide, however, will likely prove to be difficult, as Liberal Premier Dalton McGinty's recent backtracking on the new sex education curriculum indicates the strength of resistance from a powerful vocal minority.

In the contemporary environment, the Ontario Ministry of Education and Training has developed new programs on diversity, equity and inclusive education for implementation by the provincial school boards. However, most of these new initiatives are embedded under the rubric of school safety and consist of measures to monitor student behaviour. These programs also focus on sexual harassment and homophobia. While praiseworthy, these initiatives and programs omit specific mention of race because examining race would expose inequitable economic, structural and institutional factors upon which the education institution itself is founded (McCaskell, 2010). A raceless curriculum is the opposite of an anti-racist education. It is necessary to note that Ontario curriculum today has limited anti-racist education elements and instead maintains

raceless equity and anti-discrimination values that do little to address racism. A raceless curriculum is blind to and omits discussion of difference and social issues, while anti-racist education (and anti-racist sex education) is built on interrogating systemic factors. Anti-racist education scholars offer advice for realizing this strategy into the classroom. By building on this work and collaborating with sex education research, the actual implementation of anti-racist sex education can begin.

Implementing Anti-Racist Sex Education

Amidst a growing body of work on anti-racist education and numerous calls for this framework to be integrated into education institutions, anti-racism education has fallen short with regards to sex education. The recent focus of school safety programs on sexual harassment and homophobia notwithstanding, these programs omit any relationship to race or any dimension of sexuality or sexual health. Foundational anti-racist education frameworks are silent on sex education curriculum and contemporary sex education omits crucial anti-racist work. This omission leads to a raceless form of sex education that must be transformed. Anti-racist education and sex education literature provide numerous opportunities and examples for implementing anti-racist sex education policy.

hooks (1994) reminds us that education is never politically neutral and that consistent work needs to be done to resist the inherent racism and oppression operating in education institutions. Anti-racist education theorists such as Ng, Staton and Scane (1995), Dei (1996, 2000), Sears (2002) and Lee, (2005), provide principles to implement anti-racist education. These principles include: grounding education in the intersecting experiences of oppressed groups; exploring various manifestations of difference among students; inclusivity; teaching alternative knowledge and histories; questioning privilege, power and whiteness; including the context of the school environment; interacting with the community; and selecting texts, resources and teaching

strategies that are student-centred.

Bruner (1992) shows that, after examining progressive elements of the Canadian education system “no material on alternative sexuality education could be found.” While feminist and anti-racist education material encompasses many subjects, there was no feminist sex education material (Bruner, 1992). Phillips and Fine (1992) probe deeper into sex education curricula, making vital connections to the system of oppressive school system practices. While there is minimal anti-racist work being done within sex education, the implications of sex education, race and other types of oppression are numerous and intertwined. Phillips and Fine (1992) underscore how sex education in public schools is often formulated around an official curriculum that:

“structures in” hegemonic silences orchestrates the preservation of cultural power arrangements, and denies social taboos in the name of being value-free. As a consequence, taboos include the naming and exploration of abortion, masturbation, adolescent (particularly female) desire, homosexuality, and despite the rhetoric of concern around teen pregnancy, contraception. Even as educators strive to push beyond the official curriculum, we know from reports of public school teachers that they are evaluated on the basis of a “value-free” discourse that privileges and naturalizes chastity, marriage and heterosexuality; that denigrates teen motherhood; and that hesitates to discuss abortion (p.95).

This official and implicit curriculum translates into discourses, conversations and lessons that further marginalize these practices, realities and expressions of sexuality and sexual health.

The narrow definition of sexual health and sexuality in Ontario’s sex education curriculum should be scrutinized. Connell (2005) calls attention to the differences between the Ontario Grade 11 sex education course profile and the World Health Organization’s (WHO) definition of sexual health. The definition used in the Ontario course profiles focuses on appropriateness, responsibility, avoidance and dangerous consequences—that is, adolescent sexuality is something that should be contained. This definition imposes certain values on adolescents, that they are encouraged to enjoy sexual feelings without necessarily acting on them.

The WHO definition focuses on holistic, enriching and pleasurable sexuality and relationships and acknowledges sexuality as an integral and inherent part of being human (Connell, 2005).

Bruner (1992), Phillips and Fine (1992) and Connell (2005), underscore the narrow, imposing, value-laden sexual health definitions and practices that fundamentally operate by imposing norms and morals to students of sex education. While anti-racism education has narrowly explored the domain of sex education, academics have envisioned what could be included in anti-racist sex education. Kehily (2002) seeks a sex education curriculum that incorporates alternative knowledge of sexuality and sexual health practices and is shaped in collaboration with members of students' cultures and communities.

Building on the literature of anti-racist education theories and the repeated calls for reformed sex education, the following next steps are envisioned. These are organized around nine essential themes of anti-racist sex education:

1. A grounding in intersecting experiences of oppression.
2. Exploring manifestations of difference and identity.
3. Learning and teaching alternative knowledge and histories.
4. Questioning privilege, power and whiteness.
5. Including the context of the school environment.
6. Interacting with the community.
7. Incorporating resources.
8. Using student-centred approach.
9. Employing diverse teaching strategies.

Intersecting Experiences of Oppression

Anti-racist education in every form must provide a global and holistic understanding and appreciation of the human experience, including social, cultural, political, ecological and spiritual domains. Anti-racist education rests on the basis that no individual can fully understand the social ramifications of race without a comprehension of the intersections of all forms of social oppressions, including how race is mediated with other forms of social difference (Dei, 1996, 2002). This integrative or intersecting element of anti-racism must also be extended to discussions of “how current processes of globalization relate to questions of identity and social practice in Euro-Canadian/American contexts” (Dei, 1996 p. 68). Anti-racist education involves the intersection of the numerous components of identity to address the various sources of oppression that work through education institutions.

Exploring Manifestations of Difference and Identity

Any anti-racist education must focus on an exploration of identity and its connection to formal schooling. Dei (1996 p. 31) states that “it is necessary for educators to understand and reflect on how students’ racial, class, gender, disability and sexual identities affect and are affected by the schooling process and learning.” A classroom or school environment must enable students from all backgrounds to participate fully. These settings must explore the many manifestations of difference in the classroom to foster individual reflections on their own identity and improve understanding of each student’s contributions to the learning environment (Amin & Dei, 2006). Kehily (2002) connects this to the sex education curriculum, underlining the importance of exploring local values, identities and differences in the development of “sensitive” and “culturally specific sex education.” While anti-racist sex education diverges from culturally sensitive or specific sex education, it echoes the importance of reflecting on how students’ racial,

class, gender, disability and sexual identities affect and are shaped by the sex education process.

Learning and Teaching Alternative Knowledge and Histories

Content, creation and source of knowledge plays a role in fostering inclusive education. Anti-racist education calls for the questioning of the systemic marginalization of certain voices in society and works to undermine the historic and contemporary delegitimizing of knowledge and experience of subordinated groups in the education system. When proposing an anti-racist sex education framework, the social construction and source of the knowledge must be examined. Thus, it is crucial for all histories of oppression to be discussed in classroom teaching of sex education and for pedagogy to emanate from multiple knowledge sources.

Strategies include learning the achievements of all groups in ways that address questions of inclusivity and the validation of alternative knowledge (Dei, 1996). In the development of an anti-racist sex education curriculum, this includes examining the sexual health, contraceptive and sexuality rights achievements of the many social, ethnic and sexuality communities in Ontario and Canada. Dei (1996) emphasizes the importance of this strategy. It highlights the moments of political resistance to enslavement, domination and subjugation. The discussion of alternative sexual knowledge and histories also requires input from all youth and not solely examined from the oppressor's stance. The involvement of marginalized history and knowledge in anti-racist sex education is not simply a time for racialized youth to participate. It is an active strategy to question power, privilege and whiteness and to draw attention to the voices and sources of knowledge that are systematically silenced or minimized in traditional sex education.

Questioning Power, Privilege and Whiteness

Anti-racist education questions the role, invisibility and normalcy of whiteness, power and privilege and the rationality behind their dominance in society. An anti-racist education approach focuses on the relative power and privilege constituted around notions of race, class, gender, sexuality and other forms of historically oppressed identities. Anti-racist education avoids encouraging a “race to innocence,” where experiences of oppression are implicitly or explicitly ranked or compared. Instead, it emphasizes the importance of assemblages of identity in a complicity of power, privilege and oppression (Fellows & Razack, 1998). Puar’s (2007) concept of assemblage—the awareness of the interwoven forces that merge and dissipate time, space, linearity and permanency in identities—instead of the fixed categories such as race, gender, sexuality and ability provides a foundation for interrogating whiteness, privilege and power in the classroom. Viewing identity as an assemblage is useful in anti-racist sex education because it draws attention to the ways that race, gender, class, disability and sexuality change in relation to our environmental and experiential values. Social environment shapes perceptions of identity and the social environment of sex education in the school and classroom.

Context of the School Environment

Anti-racist education principles include exposing the role of learning, the school environment and educators. The education system produces and reproduces racial, gender, sexual and class inequalities in society and so these must not go unexamined in the practice of anti-racist education. Dei (1996) introduces the term “deep curriculum” as a theoretical entry into the implicit and subtle formulations of regulations, rules and protocols of a school environment as a whole. Deep curriculum examines the practices that both constitute a school’s tone and character and present students with “acceptable” values and standards. The role of anti-racist education as a

systemic strategy is to address problems of exclusion in the school system by targeting all students, teachers and staff. Curriculum design, reform and management should have input from all stakeholders in the educational system. An inclusive anti-racism approach to education seeks to rupture the school's deep curriculum and transform it. A primary objective of the structural change of the current school system should be to allow students to develop some sense of responsibility to a larger global citizenry.

Dei (1996, 2010) and Dei & Calliste (2002) emphasizes the important roles that teachers play, for their reflection and understanding of their own cultural background and bias may interfere with efforts to teach critical pedagogies. As such, there is a need for diversity and multiple perspectives in academic discourse, knowledge and texts.

This deep curriculum is also represented through sex education. Anti-racist sex education speaks to the role of the educator, the staff and curriculum and their relationship to maintaining traditional power and the deep curriculum. Addressing issues of exclusion in schools must encompass all students, teachers and staff and so a foundational goal of the structural change via anti-racism education is to foster students' sense of responsibility and commitment to the local and global community.

Connection to Community

Anti-racism education must be connected to the community, for any issues at school experienced by youth cannot be separated or isolated from their material and ideological circumstances (Dei, 1996). The importance of a community connection is interactive. It is imperative for anti-racist education to be mindful of the influences that a community has on individual student experience and success while simultaneously questioning pathological explanations of family as the source of "problems" that some youth experience concerning

schooling (Dei, 1996). It must also be open, welcoming and responsive to input from parents, community workers or interested organizations. Incorporating community members' knowledge, networks and perspectives provides a uniquely positive strategy, pedagogical tool and source of cultural information. Teaching an anti-racist sex education curriculum would allow students to examine their own education histories and experiences of living in communities and relating to each other.

Incorporation of Resources

Incorporating anti-racism into sex education requires logistical and material concerns. Anti-racist education must continually question racist, sexist, classist, homophobic and otherwise oppressive and stereotypical resource materials, yet also reflect on responses and approaches to these texts (Dei, 1996). As sex education is resource dependant, anti-racist sex education questions the messages, tone and values represented in these materials.

Student-Centred Approach

In establishing anti-racist sex education curriculum, Kehily (2002) posits that a student-centred approach may be helpful for educators to recognize student cultures as a starting point for teaching. The importance is to be mindful of the existing sexual health knowledge of students. Whether or not students are sexually active, all will be aware of the importance of sexual culture to their lives and identities. This approach is a strategy for reinforcing the importance of marginalized voices, histories and knowledge and to question power, privilege and whiteness that can be upheld through educator-centred or top-down approaches. A student-centred approach is the basis of teaching strategies for anti-racist sex education that can enhance other tools for student involvement and hearing marginalized voices.

Teaching Strategies

Anti-racist education theorists provide a multitude of practical and logistical teaching strategies for achieving these thematic goals. hooks (1994), for example, argues the importance of dialogue across differences in creating anti-racist and transformative education settings. In an effort to provide student-centred learning, teaching could occur through storytelling and student-directed journaling. Popular culture can also be utilized as a resource for talking about potentially difficult sexual or sexuality topics.

Educators can initiate an encouraging climate for anti-racist education and learning by promoting discussion amongst students. For example, they could provide working definitions of key concepts such as: inclusive, race, gender, sex, sexuality, difference, ethnicity, knowledge production, Eurocentric knowledge, equity, anti-racism, anti-racist education, sex education, ethno-cultural, equitable, power relations, multiculturalism, bias, prejudice and stereotype. These can be written down and posted around the classroom to reinforce a climate of inclusivity and collective self-reflection (Amin & Dei, 2006).

Lindo (2010) also suggests the possibility of using humour and comedy to expose assumptions of race and make racial stereotypes visible, so as to encourage more equitable interactions in the classroom. Lindo's call for humour is echoed in hooks' (1994) assertions that education and teaching be reciprocal and enjoyable.

In integrating these nine themes into traditional sex education curricula, I attempt to bridge the theory and practice of anti-racist work. As a starting point, I provide anti-racist sex education policy recommendations as additions to the current sex education curricula. The policy recommendations are structured as specific learning objectives with examples of knowledge goals for students to achieve. These policy objectives encompass three diverse objectives: socio-

biological and political aspects of sexual health and sexuality; interactions with the community; and the recognition of multiple knowledge centres and sources of sexual health information.

Sexing Anti-Racism: The Intersections of Anti-Racism and Sex Education Theory

While most anti-racist education scholars emphasize the importance of integrating anti-racism into all curricula, there is little scholarship linking anti-racism to sex education. This lack of scholarship is especially interesting given the relationship between sex education and race (Valvere, 1992; Sethna, 2006). Anti-racist education must be incorporated into sex education because racism impacts sexual health. Discussions of sex education and anti-racism are especially relevant given the many ways that sexuality is racialized and race is sexualized. Nagel (2003) emphasizes that sexuality is a core constitutive element of race, ethnicity and the nation and that race, ethnicity and nationalism are crucial components of sexual and moral boundaries. Various feminist scholars, such as Smith (2005) and Yee (2009), have exposed the role of racism in sexual violence. Links between race and racism have also been investigated in relation to contraception use and abuse (Roberts, 1997; Sethna, 2006) and HIV/AIDS infections (Farmer, 2002).

Sex education researchers have begun to call for increased cultural sensitivity of sexuality programs to ethnic, racial or religious groups. Sears' (2002) work with Cherokee sexuality education in North Carolina and the research of Omordion et al. (2007) of HIV risk among African youth living in Windsor, Ontario further support the necessity of sex education to be responsive, inclusive and contextual, echoing foundations of anti-racist education. Scholars have also underlined the inequities in Canadian sexual health. For example, Aboriginal youth continually have the highest burden of poor sexual health (Canadian Federation for Sexual Health, 2007; Devries, Free, Morison, & Saewyc, 2007), immigrants and their children face unique challenges responding to Canada's dominant sexual mores and both Aboriginal people and immigrants have difficulties accessing sexual health services (Shirpak, Maticka-Tyndale, &

Chinichian, 2007).

These disparities in sex education and sexual health services impact everyone, but they challenge racialized communities in particular. An anti-racist sex education curriculum addresses these realities in numerous ways. For example, the high rate of HIV infection for First Nations people in Ontario and the difficulty they have accessing culturally sensitive services intersect with numerous objectives in my curriculum recommendations. An example of these objectives include exploring the impact of individual and systemic discrimination on access to sexual health care and information; understanding specific histories of power, oppression and resistance to sexual health technologies; and understanding the interactions of consent with histories of sexual violence and abuse on an individual and state level. These curriculum objectives would work to re-orient the individualism of contemporary biomedical sex education discourse as well as the stigma of STIs toward a fuller understanding of social, political and systemic elements that collude to harm the sexual health of First Nations communities. These anti-racist sex education curriculum recommendations are a starting point. Ideally, they could be the foundation of classroom discussions that explore the disparity in, amongst and between specific racialized communities in accessing sex education and sexual health services.

Contemporary Sex Education in Canada and Ontario

The teaching of sex education in Canada has developed rapidly in the past century. From the late nineteenth century onwards, sex education was provided at home and then at school, often via the teachings of “purity education” (Sethna, 2010). This teaching included information about reproduction, venereal disease and the distinction between normal and abnormal sexual practices, with an emphasis on the control of youths’ sexual behaviour (Bashford & Strange, 2004).

Formal education is currently a provincial/territorial responsibility in Canada, with all provinces and territories providing sex education, often as a component of health and physical education in public schools (Constitution Act, 1982). Barrett (1994) and Maticka-Tyndale, McKay and Barrett (2001), as cited by Connell (2005), state that the content and extent of implementation of sex education varies considerably between provinces, school boards and schools. The federal role in sex education involves publishing guidelines and informational material that serve as resources and a suggested framework for all formal and informal sex education across Canada.

In Ontario, education is provided primarily in Catholic and public schools, although Catholic institutions also receive public funding. The Ontario Ministry of Education and Training directs the Ontario public school education system, consisting of four board jurisdictions: English Public, English Catholic, French Public and French Catholic boards. I only examine the role of sex education curricula in English public schools in Ontario.

Ontario was the first province where the Ministry of Education provided curriculum guidelines, but not curricula, for sex education. As recently as the early 1990s, the Ministry relied on local boards of education to develop and implement sex education curricula consistent with the ministerial guidelines. Barrett (1994) expands on the recent history of sex education in Ontario schools:

The two guideline documents, *Physical and Health Education: Senior Division 1975* and *Physical and Health Education: Intermediate Division 1978* (pertaining to grades 7–10) provided the early foundation for the sexuality education components of health education ... offered in the majority of Ontario schools. These guidelines suggest[ed] grade levels at which to introduce particular topics, including topics in sexuality education; a 1987 directive further mandated AIDS education in grade 7 or 8 with a second unit in grades 9 or 10. Guidelines for family studies issued in the same year (*Family Studies: Intermediate and Senior Divisions and OAC*, 1987) add[ed] a further component with possible sexuality-related content (p. 204).

An example of these guidelines was the Ontario Ministry of Education's 1988 *Physical and Health Education Validation Draft*, which included the topic of sexual orientation in the senior grades. The former Toronto Board of Education (now the Toronto District School Board) produced a companion (*Sexual Orientation: Focus on Homosexuality, Lesbianism and Homophobia*, 1992) for secondary school teachers on the topic of sexual orientation, which was one of the few—perhaps only—guides on this topic in Canada at the time (Barrett, 1994).

The early 1990s in Ontario featured growing support for the development of a sex education curriculum for all Ontario schools. A 1991 Ontario Boards of Education survey indicated that the majority of reporting school boards approved of a curriculum that integrated sexuality topics, with 100% support from reporting Catholic boards and 78% support from reporting public boards (Orton & Rosenblatt, 1993).

At the federal level, the first edition of the *Canadian Guidelines for Sexual Health* was published by Health Canada (1994). The 1994 *Canadian Guidelines for Sexual Health* included the principles of accessibility, comprehensiveness, inclusivity and respect for diversity as foundational to the teaching of sex education (McKay & Barrett, 1995). The similarity of these principles to the 2008 *Guidelines* are underlined by the near exact wording on the stated philosophy of sex education:

In terms of access and content, effective sex education does not discriminate against race, gender, sexual orientation, religion, ethno-cultural background or disability. ... Effective sex education enhances sexual health within the context of an individual's values, moral beliefs, religious or ethno-cultural background, sexual orientation or other such characteristic (Health Canada, 1994 p. 8).

The principle of inclusivity, accessibility and non-discrimination as stated in the latest 2008 edition strongly correlates with the principles from the 1994 edition, replacing “ethno-cultural” with the more contemporary term “ethnicity.” The initial 1994 *Canadian Guidelines for Sexual*

Health was revised in 2003, echoing the previous principles and incorporating the importance for sex education programs to be appropriate and “culturally sensitive” (McKay, 2004).

The *Canadian Guidelines for Sexual Health* (Health Canada, 2003) was heralded as a progressive policy document intended to create “culturally sensitive” sex education programs. Contemporary answers to calls for inclusivity and diversity in education programs, including sex education, resulted in the development of numerous sex education activities and programs that have an explicit “cultural sensitivity” element. A recent trend has emphasized “culturally sensitive” sex education programs. This is especially apparent in federally produced materials like all editions of the *Guidelines* themselves. “Culturally sensitive,” however, is a term frequently meaning “ethnic” or “racial,” and such programs can be problematic as they often reaffirm discourses of multiculturalism, relying on stereotypes of differences among cultural groups, viewing cultural groups as monolithic and static and decontextualizing their experiences from a history of colonization, racialization and persistent inequity (Dei and Calliste, 2002). As Farmer (2002) argues, culturally sensitive programs often obscure the differences in sexual health and behaviours due to social inequities rather than the absence of factual sexual health information.

In 2003, the Ontario Ministry of Education and Training began a seven-year process to review the 1998 edition of the health and physical education public school curriculum. This involved a two-year consultation and focus group process that involved external groups such as students, teachers, parents and religious and cultural groups. The revisions were released in January 2010. They included new topics in the sex education aspect of the curriculum, such as HIV/AIDS, relationships, bullying, gender identity, sexual orientation, stigma and stereotypes. There were also various explicit references to anti-discrimination, respect, tolerance, inclusivity and equity. Particular controversy arose around topics such as gender identity and sexual

orientation. Many media outlets portrayed the curriculum as “teaching homosexuality,” (OPHEA, 2011). In fact, the curriculum itself focused on identity and gender identity, which was examined in the context of differences amongst individuals that require respect. This curriculum was also the first to mention masturbation at the Grade 6 level as a pleasurable, common and not harmful way of learning about your body (Ministry of Education and Training, 2010b).

Despite overwhelming support from a number of social, education and health organizations, including the Ontario Public School Board Association, the Ontario Teachers Federation, the Ontario Public Health Association and the Children’s Hospital of Eastern Ontario, among over 740 others, Ontario Premier Dalton McGinty reversed the decision to approve the revised 2010 health and physical education curriculum (OPHEA, 2011). In late April 2010, after mounting pressure from religious organizations such as the Institute for Canadian Values and Canadian Christian College, McGinty tabled the entire revised 2010 health and physical education curriculum, leaving students and teachers with the 1998 edition. This retreat was perhaps unsurprising, as McGinty was “not the first politician cowed by vocal minority” (Cohen, 2010b). Currently, there are no consultations or initiatives planned for a new sex education curriculum.

In public school education in Canada, sex education is usually embedded within health and physical education courses (Sethna, 1998). Health Canada (2003) has outlined why sex education in schools is important. Schools are the only formal educational institution to have meaningful contact with nearly every young person. Thus, they are in a unique position to provide children, adolescents and young adults with the knowledge and skills they will need to make and act upon decisions that promote sexual health throughout their lives (Health Canada, 2003).

In Ontario, the Grade 9 health and physical education curriculum has six, the Grade 10

curriculum has four, the Grade 11 curriculum has five and the Grade 12 curriculum has six objectives related to sexuality and sexual health. As current educational policy mandates compulsory enrolment in Grade 9 health and physical education, this curriculum may be the only sex education information that Ontario public secondary school students receive. This Grade 9 curriculum covers developmental stages of sexuality, responsible sexual relationships, effectiveness of contraceptive methods, STI and pregnancy avoidance, decision-making skills to avoid negative outcomes of sexuality and to have healthy relationships, discussion of the pressure on teens to be sexually active and to identify community services related to sexual health (Ministry of Education and Training, 1999a).

Some scholars have investigated the gaps present in existing Ontario sex education. Meaney et al. (2009) and Connell (2005) note that the sexes may experience the curriculum differently, for Ontario curriculum emphasizes sexuality as risky and dangerous for women. In addition, sex education may give girls messages of negative responsibility and consequence of sex more so than boys (Meaney et al., 2009). Martinez and Phillips (2008) note that in their discussions of gender, teachers tend to perpetuate stereotypes of “sexually aggressive boys” and “submissive, easy to please girls.” Such distorted perceptions of sexuality work to reinforce sexual health inequity. Martinez and Phillips (2008) argue that Canadian sexual health education programs also tend to understate the social determinants of sexual health. A pronounced example of this understatement is that teachers generally have difficulty associating race/ethnicity with sexual health. Martinez and Phillips (2008 p. 153) conclude that “what was missing was a clear intersectional approach to discussions of adolescent sexualities within the context of race/ethnicity and sexual identities.” The lack of discussions of the relationship between race/ethnicity and sexual health is especially pertinent to newcomer youth who may have limited knowledge of or access to other community programs, so for whom school and school-provided

sex education is a vital point of contact (Salehi et al., 2010). While the Ontario sexual health curricula objectives are broader than medical or anatomical information, they appear to be devoid of discussions on race, gender or class.

Researching Sex Education

Research on sex education in Canadian public schools has focused on the meanings of oral sex (Malacad, 2010), the effect of participatory education on sexual health content (Ponzetti et al., 2009), the role of sex education in addressing potential fatherhood for vulnerable heterosexual men (Manseau et al., 2007), students' own perceptions of Canadian sexual health curricula (Noon & Arcus, 2002) and Ontario sex education curriculum (Meaney et al., 2009). There is very little research calling for anti-racist sex education. The most common research trend, however, is on "culturally competent" or "culturally sensitive" sex education, as most recently emphasized in literature on the sexual behaviours of Chinese newcomers to the West (Yu, 2010), sexual health behaviours of Indigenous girls on Vancouver Island (Banister & Begoray, 2006) and sexual health education amongst newcomers (Salehi et al., 2010).

Sex education is a controversial, complex and dynamic set of pedagogies that are influenced by and, in turn, alter our understandings of race, class, gender and sexuality. Epstein and Johnson (1988) state that the difficulty of sex education is that it is often "marked by a series of constraints and adversity, often under the gaze of a critical and scandal-hungry tabloid press." Coupled with media attention is the implicit sense of immorality intertwined with sexuality and, accordingly, with sex education. Wolpe (1988) argue how the ideology on sex and sex education and its relationship to the moral order, structure the official ways in which these topics are handled in the school environment. (as cited by Mac an Ghail, 2000). This combination pressures administrators, educators and teachers to privilege certain topics, while silencing other

components of sex education.

Longstanding debates over the content, context, timing and sources of sex education continue, even though sex education remains an essential subject for youth and society (Valverde, 1992; Sethna, 2010). Fields (2008) draws attention to the potential of sex education to be transformative:

Sex educators have the capacity to foster in their students a sense of sexual entitlement and rights, an appreciation of sexual pleasure and a critical understanding of sexual danger. Sex education offers students an opportunity to grasp sexuality's place in the context of gender, racial and class inequities and to gain an awareness of sexual pluralism (p. 17).

Sex education curricula in Canada are informed by evidence-based research. Such research in the United States is primarily conducted on white populations and the two largest racialized groups, Hispanics and blacks (Yu, 2010). Little research has examined the best approaches to sex education for youth. Banister (2006), as well as Shoveller, Johnson, Prkachin and Patrick (2007) note the particular challenges of Aboriginal and/or rural youth in accessing sex information and education. If the research that serves as the foundation of sex education itself is not representative of the diversity of youth, how can the sex education curriculum accurately and effectively address racialized students' concerns?

The work of Fields (2008) on North Carolina schools' sex education classes affirms the implicit and explicit racial stereotypes underpinning the foundation of sex education curricula. This is evident from her observations in school board meetings and debates that “[f]eatured heated explicit racial division—but not when the topic was sex education ... [where] officials acted on behalf of race-less children” (p. 50). Fields shows that the sex education texts and audio-visual material used contributed not only to a sense of racelessness, but also to an overall privileging of white bodies in public school education. Images of pink-skinned, slender, able-bodied females uphold normative racialized and gendered ideas about sexuality and mute the

differences that race makes to bodily experiences (p. 112). These images are parallel to the largely pink, able-bodied and muscular images of males that are depicted in sex education materials. While some may argue that Ontario public school education differs in many ways from that of North Carolina, what remains consistent is the rendering of white bodies and whiteness as the neutral, normal standard for all.

Reading But Not Seeing: A Content Analysis of Canadian Public Sex Education Curricula

McKay (2009 p. 37) notes that in “recent years the sexuality education controversy has centred more on the content and methodology of the programs, rather than whether there should be a program.” There is actually little debate over whether schools should provide sex education. Over 85% of adults and 92% of high school youth have stated their support for the sex education provided in schools (Byers, Sears, Voyer et al., 2003; Langille, Langille, Beazley, & Doncaster, 1996; McKay, 1996; McKay, Pietrusiak, & Holowaty, 1998; Weaver, Byers, Sears, Cohen, & Randall, 2002, as cited by McKay, 2004). The past and present debate around sex education has been one of concerns over the topics being taught in sex education. Sex education controversies are not unique or spontaneous occurrences. McKay (2009) explains:

Although people often assume that bitter debates about sexuality education are spontaneous uprisings of outraged citizens, they are usually not. They are public arguments that are provoked by conservative national advocacy organizations that are actively committed to shaping sexual values and influencing education policies in communities (p. 39).

Sex education is situated at the centre of many conflicts around the source of the sex education ideology. While these ideologies often shift and change over time and context, three fundamentally different sex education ideologies can be identified. Kidger (2006 p. 291) classifies these conflicting ideologies as *moralistic*, *harm reductionist* and *empowering*.

The *moralistic ideology* is characterized by strong perceived or actual associations between politics and religion. Moralistic sex education views the sexual behaviour of unmarried youth as wrong and responsible for the breakdown of traditional families. Furthermore, there is a fear that any sex education will encourage sexual activity among youth (Sethna, 1998, 2010). The moralistic ideology accepts only a narrow curriculum that equates sex with reproduction and teaches abstinence outside of heterosexual marriage. In this strategy, the knowledge that is valued

is that of moral and/or religious leaders, which establishes a power imbalance whereby the educator provides information and youth-as-student is a passive receiver of knowledge (Kidger, 2006 p. 291). Particular data are based on socially conservative and/or religious teaching because knowledge of these leaders is highly valued and absolutely unquestioned. Moralistic sex education excludes aspects such as queer sexualities, sex-as-pleasure or any health promotion activities such as risk reduction. The primary aim of the moralistic ideology is abstinence and is measured through changes in knowledge and behaviours.

Associations with biomedicine and concepts of science, health and disease characterize the *harm reductionist ideology*. Harm reductionist education views youth sexuality as problematic due to the possible harmful health outcomes, namely teenage pregnancy and STIs. Sex education is portrayed as significant to society because it gives information and skills to youth to prevent unwanted outcomes of sexual activity, particularly by emphasizing barrier contraceptive methods and delays in participating in sexual activity (Kidger, 2006). This ideology produces categories of risk and associates sexual acts with differing levels of risk. It also associates certain sexual behaviours and groups of people and individuals with risk.

The *empowering ideology* sees sexuality as a key part of youth identity and sex education as a right. The central goal in empowering sex education is to give youth the resources and knowledge to take control of their sexual lives and aid in experiencing sexuality in a positive way. The empowering ideology is linked to notions of human rights, health promotion and political organizations. While the term empowering has various definitions, in health promotion literature it is associated with taking control of one's life and working collectively for positive change (Kidger, 2006).

In Canada, these approaches are especially pertinent as sex education in public schools is embedded within curricula of health and physical education, indicating a context of medical

health and well-being. Ivinson (2007) states that the limitation of teaching sex education through health and physical education courses is “furnished by the tacit mode of transmission that makes it difficult to articulate relations between mind and body.” Broadly speaking, sex education in the context of school education also tends to lend itself towards scientific knowledge and discussions, as schools are modernist institutions that privilege scientific or specialist discourses (Ivinson, 2007).

Method

I investigated sex education documents in Ontario and Canada using content analysis based on a key word search. Content analysis is the systematic study of texts and other cultural products and can be employed to effectively engage with governmental policy (Leavy, 2007). Content analysis is guided by identification of major categories and relevant themes in cultural artifacts (Clover, 2010). It is also applied to study all forms of cultural artifacts, including policy documents. The strength of this method lies in the power of these artifacts to be influenced by and to shape social norms and values (Reinhartz, 1992 p. 151). Employing a content analysis to these documents is my tool for investigating the apparent racelessness of sex education.

These data are pre-existing and thus contribute a built-in authenticity. Content analysis encompasses multiple specific investigation styles, such as, but not limited to, textual analysis, linguistic analysis and audiovisual analysis, which can all be employed quantitatively or qualitatively. Content analysis can also be a tool for deconstruction through post-modernism or post-structural theory (Leavy, 2007). This research method is appropriate for governmental policy analysis as it involves one of my key objectives: investigating and deconstructing appearances of race in governmental health curricula. This deconstruction also aims to expose what is absent from these observations of race. The content analysis method allows for

identification of themes that emerged and through critical examination allows the occurrence of these key words to make issues of race, racism and racelessness to become more visible.

I selected content analysis to examine the appearances of race in governmental documents that discuss sexual health. Currently, the entire grade and subject-based objectives are listed in Ontario curriculum documents and educators are required to strictly adhere to these objectives. Exploring the ramifications of curriculum objectives on the actual content of class discussions is beyond the scope of my research, but I argue that these educational documents have a direct impact on the content of lessons. Planar underlines the importance of race in curricula, because curricula themselves must be understood as racial texts that determine who is being taught about and who is learning (1995). Therefore, looking at the appearances of race in these documents could be a measure of how race is treated in teaching sex education curricula.

I applied a content analysis based on a key word search of Ontario Ministry of Education and Training health and physical education Grade 9/10 and Grade 11/12 curricula and the *Guidelines*. The key words I selected were: *race*; *culture*; *ethnicity*; and *religion*. I then counted the key words in various forms (e.g., *race/racial*; *ethnic/ethnicity*; *culture/cultural*; *religion, religious*), one per each individual appearance in each unit of analysis. The terms *racism* or *anti-racism* were included, but yielded no occurrence in any of the documents of study. The number of key words is depicted in Table 1: Appearances of Key Words in Policy Documents. Additionally, the numbers in parentheses represents the frequency that these key words were seen in a single sentence with one or more of the other key words.

I selected these keywords based on their common interchangeability with the term race. James (2006) explains how “ethnic” is often used interchangeably with “race” and “culture” to try to socially define or locate people. Indeed, the literature points to the contemporary social unease around using race or racial to describe or define individuals and its conflation with culture

(Henry, Tator, Mattis, & Rees, 2009). This conflation draws attention to the societal shift from scientific racism—racism built on physical, biological or genetic differences—to that of a cultural or democratic racism (Dei, 1996 p. 45). There are distinct and operational differences between race, ethnicity, culture and religion and I do not intend on conflating them or to uphold notions of cultural racism. These words were selected because of their common conflation within the documents of interest themselves and the pertinence of the subtly of cultural racism.

Table 1.
Appearances of Key Words in Policy Documents

Policy Document	Key Word					
	Race	Culture	Ethnicity	Religion	Racism	Anti-Racism
Ontario Curriculum Grade 9/10 Health and Physical Education	0	2	0	1	0	0
Ontario Curriculum Grade 11/12 Health and Physical Education	0	13	1 (1)	2 (1)	0	0
Canadian Guidelines for Sex education	7	21(1)	11 (6)	16(7)* (6 in two other places; Race and Ethnicity)	0	0

Content Analysis: An Appropriate Tool?

Assessing the tone and context of these key words and the broader discussion of race in each of these curricula was central to providing an avenue for future research.

My research scope was purposeful; I focused only on Ontario provincial documents to provide ease of comparison between sex education and anti-racist education initiatives in Ontario. I included a federal sexual health document to compare discourses between federal and provincial sex education objectives. Each document was analyzed in its entirety. The subset of data in this analysis was each document and one unit of data was considered to be the sentence in which each key word was found. I examined each subset of data initially to generate codes, from literal to abstract and then further analyzed them to refine code specificity and generate themes. These themes are listed in Table 2: Themes of Key Words. Eight themes emerged from the data: *cultural competency; informing definitions; influencing decision making; accessibility; conflict; environment; difference; and norms*. These themes were not universally represented in each of the provincial and federal documents. The themes present in both sets were cultural competency, informing definitions, influencing decision-making, conflict and environment. The theme present in only the provincial documents was norms. The themes present only in the federal *Guidelines* were *accessibility* and *difference*. These themes are listed in Table 2: Themes of Key Words, in order of their prominence in the documents, along with illustrative quotations for each theme.

Table 2.
Themes of Key Words

Themes	Illustrative Quotation Provincial Documents	Illustrative Quotations Federal Document
Informing Decision Making	“Evaluate the factors (e.g., personal responsibility; the influence of peers, culture and the media) that influence personal choices with regard to health-related products and services” (p. 14 Gr 11/12 Curriculum)	“The ability to recognize the effect that religious, ethno-cultural and other variables may have on an individual’s values and beliefs about sexuality” (p. 31 <i>Canadian Guidelines for Sexual Health Education</i>)
Cultural Competency	“Educators should provide learning opportunities that allow students to recognize and develop a sensitivity to cultural differences as they relate to health and physical education.” (p. 34 Gr 11/12 Curriculum)	Effective sex education should be provided in an age-appropriate, culturally sensitive manner that is respectful of individual sexual diversity, abilities and choices. (p. 11 <i>Canadian Guidelines for Sexual Health Education</i>)
Informing Definitions	“Describe how society and culture affect individual perceptions and expressions of sexuality.” (p. 22 Gr 11/12 Curriculum)	“Individuals or groups that suggest a particular definition of sexual health are likely to appear to have good reasons for their selection. However, these reasons are often informed by cultural practices that, as a result, produce a definition that uncritically fits the existing society” (p. 7 <i>Canadian Guidelines for Sexual Health Education</i>)
Environment	“Describe environmental influences on sexuality (e.g., cultural, social and media influences) “(p. 15 Gr 9/10 Curriculum)	“Recognize the behaviours, resources and supports that can help them to attain Positive sexual health outcomes, as well as potential personal, cultural and/or societal barriers to sexual health that they may experience and need to address.” (p. 16 <i>Canadian Guidelines for Sexual Health Education</i>).
Accessibility	N/A	“It is thus important that health promotion programs focusing on enhancing positive sexual health outcomes and reducing negative sexual health outcomes are

		available to all Canadians regardless of their age, race, ethnicity, gender identity, sexual orientation, socioeconomic background, physical/ cognitive abilities, religious background or other such characteristics.” (p. 2 <i>Canadian Guidelines on Sexual Health Education</i>)
Conflict	“ Nevertheless, on the written request of a parent or of a student aged eighteen or older, the right to withdraw from any component of a health and physical education course shall be granted, where such a component is in conflict with a religious belief held by the parent or student” (p. 5 Gr 9/10 Curriculum)	“This aptitude is based on sensitivity to the diverse cultural norms, beliefs, attitudes and goals of various racial, ethnic, socio-economic, gendered, sexual minority and religious groups, as well as to persons with disabilities as they relate to human sexuality. This sensitivity often involves the ability to address issues surrounding conflict management and resolution.” (p. 28 <i>Canadian Guidelines on Sexual Health Education</i>)
Difference	N/A	“This document recognizes and embraces these differences which can arise from diversity in cultural, environmental and community norms and values” (p. 4 <i>Canadian Guidelines for Sexual Health Education</i>)
Norms	“[A]nalyse the factors (e.g., culture, media) that affect gender roles and sexuality.” (p. 22 Gr 11/12 Curriculum)	N/A

Themes

Informing decision-making

Informing decision-making was the most common theme, appearing in every document analyzed. In this theme, the key words were found in the context of how they act as components that influence decisions made concerning health and sexuality. The discourse from this analysis is that race, ethnicity, culture or religion are factors that influence individual decisions and not that individuals make decisions regarding sexual health in terms of, or in the context of, race, ethnicity, culture or religion. The sex education objectives of provincial documents include evaluating “the factors (e.g., personal responsibility; the influence of peers, *culture* [emphasis added] and the media) that influence personal choices with regard to health-related products and services” (Ministry of Health, 1999b p. 14). This theme broadly places race, ethnicity, culture or religion as entities that mask individual agency or individual diversity of decision making. This theme also underscores the omission of what shapes these “influencing factors,” and treats race, ethnicity, culture and religion as individual entities not affected themselves by inseparable components such as colonization, racialization or assimilation.

The provincial documents contained appearances of cultural norms that influence individual health decisions, but only on the broad topic of health. The provincial documents contained two observations in the Grade 9/10 curriculum and five in the Grade 11/12 curriculum. The provincial documents frequently linked the key word culture to societal and religion/religious.

The *Guidelines* contained six occurrences explicitly about sexual health and how the key words impact sexual health choices, views and behaviours. Each key word emerged only with every other key word—for example “race, ethnicity, ... religious background,” or “religious,

etho-cultural and other variables”—a trend apparent in every theme.

While race is widely interpreted to be an influencing factor in society, any mention of racialization was completely omitted from these documents. This theme reinforces the idea that race, culture, ethnicity and/or religion are elements that work separately in a vacuum, masking societal processes such as racialization, racism or colonialism that may be critical factors themselves in sexual health.

Cultural competency

Cultural competency was another frequent theme, encompassing the importance of sensitivity to cultural/racial/ethnic differences and the importance of health programs being culturally sensitive and/or appropriate and/or competent.

Despite its prevalence in other documents, this theme was entirely absent from the Grade 9/10 curriculum and only the *Guidelines* included any example of what it is to be culturally competent or culturally sensitive. These included “for example, a safer sex promotion program might identify risky behaviour—rather than membership in a sexual or ethnic minority—as the basis for the practice of prevention” (p. 38).

The Grade 11/12 curriculum contained four appearances, all from a specific unit on leisure and recreation, stating the importance of activities planned to be responsive to “culture diversity” or “culturally diverse populations.”

The *Guidelines* contained eight observations, represented in the key concepts and foundational principles of this document, which indicate its centrality. These observations were explicit about the ways that sex education delivery and programming must be “sensitive to cultural diversity,” and be provided within “the context of the individual’s” culture, religion, race or ethnicity. This theme also stated the importance of including evidence-based or research-backed information with sex education.

This theme alludes to a discourse of multiculturalism, where the emphasis is on nondiscrimination, respecting differences and sensitivity to “other” races, cultures or ethnicities (James, 1996 p. 28). While these are key components, analysis of accessibility or inclusion of diversity is entirely omitted, especially from the Ontario curricula. Objectives of sensitivity and non-discrimination are, in practice, empty if these are void of any instructive directives related to these ideas.

Informing definitions

Informing definitions made numerous appearances, but were present only in the Grade 11/12 curriculum and the *Guidelines*, with the majority occurring in the latter. This theme is also interestingly diverse in terms of its discourse. The key words here represent the context of how culture affects individual perceptions and expressions of sexual health or sexuality.

In the *Guidelines*, the informing definitions theme included the key words in the context of defining sexual health or sexuality and how race, ethnicity, culture and religion impact these definitions for individuals. The context of the keywords in this theme also shows how such definitions vary between individuals and over time and space. Further occurrences of the key words offer examples of sexual identities or expressions that are affected by race, ethnicity, culture or religion, such as definitions of intersexed and two-spirited.

This theme is one of few that provide space for individual diversity of expressions or influences of race, ethnicity, culture or religion. This theme also features a representation that explicitly states that definitions of sexual health are “often informed by cultural practices ... that *uncritically* fit the existing society” (Public Health Agency of Canada, 2008, emphasis added). This illustrative example echoes perceptions that cultural practices are uncritical, traditional or repressive (James, 1996).

Environment

The environment theme represented the appearances of race, ethnicity, culture or religion with regard to their role in the social environment of individual sexual health. The illustrative quote in Table 2: Themes of Key Words is an example of this theme, which emerged in the two provincial documents and the *Guidelines*.

The provincial documents contained four occurrences, one of which explicitly covered how culture is an environmental factor affecting sexuality. Other examples included how culture differences broadly impact group dynamics in health and sport.

The *Guidelines* included three appearances, including how race, ethnic, cultural or religious organizations can be potential partners in creating “environments conducive to sexual health” (Public Health Agency of Canada, 2008). In the *Guidelines*, the keywords often emerged as essential aspects of an educational environment that affect sexual health knowledge and learning. The key word “culture” was also represented as a potential barrier to sexual health knowledge. This again echoes the implicit separated binary of sexual knowledge and cultural identity.

Accessibility

The theme of accessibility was only present in the *Guidelines*, as a key concept. This theme represents the nondiscriminatory goal of the *Guidelines*, meaning that access to sex education should be provided “regardless of” the key words of race, ethnicity, culture or religion. The context of these appearances is in the key concepts, philosophy and first guiding principle of the *Guidelines*, indicating its core importance to the document. There is only one example of how to not discriminate based on these key words, but it falls short of actual instruction. This one example from the *Guidelines* states that “ethno-cultural minorities ... are among the groups that require improved and non-judgmental access to sex education” (Public Health Agency of Canada,

2008 p.19). However valid the point may be, there is no information as to how to provide sex education that is “improved and non-judgmental towards minorities.”

These findings, although not advocating equality amongst all students, primarily identify students of colour through their membership in an ethno-cultural group, conflating the differences that class, gender identity, sex, (dis)ability and other factors have on these students (James, 1996 p. 28).

Conflict

Conflict was an explicit theme featured in the provincial documents and the federal *Guidelines*. In the two Ontario curricula, there are similar addenda that allow parents, guardians or students over eighteen years of age the right to withdraw from any part of health education “where such component is in conflict with a religious belief” (Ministry of Education and Training, 1999a p. 5, 199b p. 6). The examples from the *Guidelines* indicate that sensitivity to race, ethnicity, cultural or religious difference requires conflict management skills that allow educators to address issues related to these differences. This theme relates strongly to the theme of difference and its thrust is that racial, cultural, ethnic and religious differences may lead to conflict, although these documents again omit any concrete or instructive examples of how to address these issues.

This theme of conflict is congruent with theories of racism, specifically the historical “structural functionalist paradigm [that] views race and ethnic relations in society as potentially antagonistic and full of conflict ... and posing a threat to the goals of maintaining equilibrium” (Dei, 1996 p. 45). Maticka-Tyndale (2008 p. 91) comments on the potential for improvement in dealing with ideological disagreements over sex education delivery and the challenges of dealing with conflict in sex education:

All too often we respond to disagreements by allowing parents to restrict their children's access to education and services. This reinforces divisions between groups and detracts from the weaving of a cohesive social fabric by creating two classes of adolescents (and future adults): those who have had education and access to care and those who have not (p. 91).

Similarly, while this analysis produced themes of difference and conflict, the key words never appeared in positive contexts in terms of diversity in sex education settings.

Difference

Difference was a less common theme, with only three appearances in the *Guidelines*. This theme represents sex education in the context of multiple cultures, ethnicities or religions.

Incidences of this theme are characterized by the insistence that sex education should embrace “differences which can arise from diversity in cultural, environmental and community norms and values” amongst diverse ethnicities, religions or races. However, they also fail to operationalize how this policy should be enacted (Public Health Agency of Canada, 2008 p. 4).

Norms

The least common theme was that of norms, with appearances only in the Grade 11/12 curriculum. These were featured in the context of race, ethnicity, culture or religion “affecting gender roles and sexuality” (Ministry of Education and Training, 1999b). Of note, there was no explicit reference to gender norms or norms related to sexuality.

Discussion: Comparing the Sex Education Curricula

Provincial Documents

Of the twenty-five pages and 8,450 words of the Grade 9/10 Ontario health and physical education curriculum and the forty-two pages and 12,440 words of the Grade 11/12 Ontario health and physical education curricula, only 314 words in the Grade 9/10 and 690 words in the Grade 11/12 specifically relate to sexual health and sexuality. Of these, only 92 words and 397 words, respectively, mentioned race, culture, ethnicity or religion (Ministry of Education and Training, 1999b). It is clear that, quantitatively, the words race, culture, ethnicity or religion are not significant parts of these documents. This is despite these documents' repeated learning objectives for students to include "describ[ing] how society and culture affect individual perceptions and expressions of sexuality" (Ministry of Education and Training, 1999b p. 22).

Individual appearances of race, culture, ethnicity and/or religion are also unevenly distributed between the Grade 9/10 and Grade 11/12 curricula. There are no observations of the key word race (or derivatives like racial or racialized) in either the Grade 9/10 or Grade 11/12 documents. The terms racism or anti-racism are included, but yielded no occurrence in any of the documents under study. There are two occurrences of the key word culture in the Grade 9/10 curriculum and thirteen in the Grade 11/12 curriculum. There are no appearances of the key word ethnicity in the Grade 9/10 curriculum and one in the Grade 11/12 curriculum. There is one incidence of the key word religion in the Grade 9/10 curriculum and two in the Grade 11/12 curriculum, one of which appears alongside ethnicity in the Grade 11/12 curriculum. The entire Ontario Grade 9/10 health and physical education curriculum contain three appearances of race, culture, ethnicity, religion, whereas the entire Grade 11/12 health and physical education curriculum contain sixteen examples of these key words.

It is critical to emphasize that at the time of this investigation, Grade 9 health and physical education is the only health and physical education course requirement for graduation in Ontario public secondary schools. Thus, the sexual health content of Grade 9 health and physical education is the only required sex education for Ontario public secondary school students.

The Ontario health and physical education curricula feature appearances for the themes of *informing decision-making; cultural competency; informing definitions; environment; conflict; and norms*, with none for the themes of *accessibility* or *difference*. Overall, these provincial documents do emphasize the role of culture, race, ethnicity and/or religion as amongst important factors influencing youths' lives.

The provincial documents emphasize race, culture, ethnicity or religion as elements that are essential to youths' lives and are portrayed as factors that must be overcome. For example, the key words in the provincial documents emphasized that cultural norms may create difference or inevitable conflict that must be overcome in the classroom. This conflict must too be overcome in order to teach sex education.

Appearances of race, culture, ethnicity and/or religion are situated as difficulties to surmount, reinforcing the normalcy and invisibility of whiteness in education. These findings correlate with anti-racist analyses of privilege and power in the educational system. Such analysis underlines the invisibility of whiteness as working through the ascription of race to non-white "others" but not to the dominant group (Dei, 1996). Whiteness is understood as a universal marker for being civilized (Giroux, 1994 p. 75). Dei (1996) underscores the importance of questioning the institutionalized standard of Euro-Canadian norms, values, perspectives and traditions, including educational practices:

Many racial minority youth have to contend with a dominance of "Whiteness" in the schools that, historically, has left no room for alternative ideas to flourish. The danger of Eurocentricity is that it is the only centre; it is presented as the only valid knowledge form

through the constant devaluation and delegitimation of other forms of ideas. It is this process which is systemic in formal education (p. 30).

Observations of race in the provincial sexual health documents reinforce dominant notions of racialized groups as “other” and whiteness as the normal but invisible standard. The *Guidelines* differ from the provincial documents in their explicit focus on accessibility, yet the appearances of race highlight many areas for improvement.

Canadian Guidelines for Sexual Health.

The *Guidelines* (Public Health Agency of Canada, 2008) contains sixty-two pages and over 15,000 words, of which 2,617 words relate to race, culture, ethnicity and/or religion. Quantitatively, *race*, *culture*, *ethnicity* and/or *religion* are substantially more apparent in the *Guidelines* than in the provincial documents. These key words are represented in many of the core elements of these documents, such as the repeated key concept requiring “effective sex education [to be] age-appropriate and responsive to an individual’s age, race, ethnicity, gender identity, sexual orientation, socioeconomic background, physical/ cognitive abilities and religious background and reflects different social situations and learning environments” (Public Health Agency of Canada, 2008 p. 19).

Individual appearances of the key words are much more evenly distributed than in the provincial documents, but discrepancies were visible between each of the key words. There are seven appearances of the key word *race* (plus derivatives such as racial and racialized). The terms racism or anti-racism are included, but was not present in in any of the documents being studied. There are twenty-one occurrences of the key word culture, one of which appears in connection to a representation of religion. There are eleven representations of the key word *ethnicity*, six of which also emerge in an appearance of *religion*. There are sixteen observations of the key word *religion*, one of which appears in the context of *ethnicity*. The entire *Guidelines*

contains fifty-five appearances of *race*, *culture*, *ethnicity* and/or *religion*, substantially more than the three observations each in the Grade 9/10 and Grade 11/12 curricula.

The *Guidelines* featured examples of the following themes: *informing decision-making*; *cultural competency*; *informing definitions*; *environment*; *accessibility*; *conflict*; and *difference*. There are no examples for the theme *norms*. The federal document emphasizes that sexual health must be sensitive, respectful and inclusive of culture, race, ethnicity or religion. Overall, the *Guidelines* document places explicit emphasis on the *accessibility* and *cultural sensitivity* of sex education. This document further discusses how culture, race, ethnicity or religion impact the environment of sex education, but also represents them as potential barriers to be overcome for youth to receive sex education.

The theme of *accessibility* is foundational to the *Guidelines* and is represented in numerous forms. Accessibility is the first guiding principle of the *Guidelines*, although there is no mention of how sex education can actually be accessible. The discourse of the key words in the *Guidelines* is similar to that of the provincial documents, specifically in the themes of informing sexual decision-making and impacting definitions of sexual health. However, the *Guidelines* do discuss how an individual's culture, religion, race and/or ethnicity influence expressions of sexuality and how these manifestations are spatially and temporally contingent.

This discourse is an important departure from dominant multiculturalism rhetoric that views culture, race, ethnicity and/or religion as monolithic and static (James, 1996). Additionally, the *Guidelines* also feature appearances of key words in regards to race, culture, religion and/or ethnicity causing possible conflict, which correlate strongly with the difference theme of the provincial documents. The difference theme in the *Guidelines* diverges in context from the same theme in the provincial documents. The *Guidelines* repeatedly emphasizes the importance of sex education programs to "embrace difference," but fails to provide any concrete examples or

instruction as to how this can be achieved.

Appearances of race, culture, ethnicity and religion in the *Guidelines* provide significantly more nuances to the discourses of race, ethnicity, culture and/or religion than the provincial documents. Multiple statements outline the importance of diversity, importance of community members to be involved in sex education and the value of culturally sensitive and/or competent teaching. Some observations from the *Guidelines* echo certain discourses of multiculturalism, consistently underlining the importance of individual tolerance of diversity or difference in race, culture, religion and/or ethnicity. However, these occurrences omit any mention of systemic or structural barriers that sex education programs may pose to racialized or oppressed individuals and youth. The *Guidelines'* only reference to accessibility or non-discrimination involves the three appearances present in the theme of environment. These examples, however, only imply an importance for school or sex education environments to be conducive to sexual health learning. Despite the *Guidelines'* pledge to cultural sensitivity, culture in these sex education documents is viewed only as what is present and visible inside the classroom, completely omitting the longstanding systemic factors that shape these cultures.

These findings in the *Guidelines* correlate with the literature, where multiculturalism emphasizes tolerance of, rather than valuing, differences (Dei, 1996; James, 1996). Multiculturalism is distinct from anti-racism. Discourses of multiculturalism, as evident through the appearances of the key words in the *Guidelines*, work to reinforce the national project of maintaining “peace order and good government,” instead of considering issues of systemic racism and racialization that would be fundamentally disruptive to the status quo (Mackey, 2002, as cited by Schick, 2010).

Investigating the occurrence of race in multiple forms in Ontario sexual health curricula through content and thematic analysis was an effective preliminary examination of this expansive

topic. The scope and the nature of the results provide critical direction and findings for future study. While content analysis is often critiqued, its value in providing tools of deconstruction, especially in anti-racist research, cannot be ignored. Drawing on this investigation and the canon of anti-racist education work, policy recommendations for integrating anti-racism education into sex education can be envisioned.

Conclusion

Anti-racism works to influence social institutions to address persistent effects of racism and interlocking social oppressions. Anti-racism interacts with education to shape education to see students as more than neutral, context-free youth and to expose the ways that education influences understandings of race, class, sexuality and gender. These fundamentals of anti-racist education are related to sex education curricula, for sex education affects all youth. This overlap between anti-racism and sex education, then, is crucial. Sex education provides a vital opportunity for an injection of anti-racist education objectives, which can address the concerns and aspirations of all youth.

Anti-racism is intrinsically related to sex education due to the inherent interlocking framework of anti-racist theory. Anti-racism examines the intersectionality of race, class, gender and sexuality, which is directly embedded in the curricula of ideal anti-racist sex education. Anti-racism works to problematize race, but also investigates the very real implications of racism, racialization, racelessness and white supremacy. In Canada, anti-racism is inherently interconnected with critical race theory, a framework born of work by legal scholars of colour. In Canada, critical race theory works to counter multiculturalism and its ripple effects on education. Anti-racism in Canada resists multiculturalism policies and resists the invisibility of racialization and systemic processes that contribute to racism. This racialization overlaps with sex education in Ontario public schools as sex education tools themselves continually include white, able-bodied figures, upholding such racial standards of “normal” bodies. Sex education in public schools in Canada does not merely focus on biomedical or anatomical objectives, but continues to maintain a genderless, classless and raceless framework. The omission of issues of race, racism and racialization creates a raceless sex education. Policy recommendations for incorporating anti-

racism education into a sex education curriculum aim to provide a basis for future teaching to incorporate socio-biological and political aspects of sexuality and sexual health, to involve the community and for this education to embrace diverse knowledge centres. An integrative anti-racist sex education framework is necessary for anti-racism education as well as sex educators.

A tragic extreme example of the importance of anti-racism today is the shocking murders in Oslo and Utoya Island, Norway, on July 22, 2010. When a white Christian supremacist can murder 77 people, many of them just teenagers and justify his crime out of love for his country and fear of multiculturalism, the importance of anti-racism cannot be further illuminated (Egan, 2011)

As the effects of race and racism are very real, so too are the consequences of denying their existence. This racelessness—the denial of race and racism—must be countered in the classroom if education can ever truly transform society for the better.

Policy Recommendations for Anti-Racist Sex Education Curriculum

Objective: To understand elements of socio-biological and political aspects of sexual health and sexuality

Students will:

- Explore the effects of gender, race, ethnicity, religion and (dis)ability and their impact on access to contraception, reproductive health services and prenatal care;
- Gain an understanding of how components of sexuality and sexual health change in regard to culture, politics, time and space;
- Investigate how sexual health concepts have changed throughout history and location, including concepts of pregnancy, fertility, sterility, motherhood, sexually transmitted diseases and HIV/AIDS ;
- Learn about the relationship of individual and systemic discrimination on access to sexual health knowledge, information and healthcare access;
- Identify specific histories of power, oppression and resistance as related to sexual health technologies including, but not limited to, contraceptives, sterilization and abortion;
- Explore the relationship of consent, information and access to sexual health information, sexual health and contraceptive technologies and healthcare services in regard to histories of power, oppression and resistance; and
- Understand the interactions of consent with histories of sexual violence and abuse on an individual level and histories of state-structured violence and cultures of violence as they relate to sexuality, sexual health, sexual identities and sexual decision-making.

Objective: To connect with the community

Students will:

- Gain an understanding of the implication of current economic and global structures that impact sexual health, such as:
 - The history and role of population control conferences and their impact on sexual health information and birth control technologies;
 - The role of globalization in changing access to sexual health and birth control technologies and resources;
 - The changing roles in Canada's health care systems in delivering sexual health services, birth control technologies and resources;
- Participate in discussions of sexual health and sex education that highlight the multiple, flexible and contextual roles of sexuality and sexual health across one's lifespan and time and space;
- Participate in discussions of sexual health and sex education that welcome, encourage and foster discussions of alternative sexualities and a multiplicity of sexual values;

- Gain an understanding of questioning sexual roles and norms of sexuality; and
- Meet with community members and local sexual health organizations with sexuality and health mandates, which share commitments to inclusivity, anti-oppression or non-discrimination, to facilitate the learning and teaching of sexual health.

Objective: To recognize multiple knowledge centres and sources of sexual health information

- Teaching materials, lesson plans and class discussion topics will actively expose stereotypical or oppressive images of particular populations as found in traditional resources, discourses and media;
- Students will gain an understanding of implicit sexual stereotypes, including, but not limited to “dangerous black men,” “hypersexual women of colour,” “fragile women,” “men as sexual animals,” and “women as asexual or passive”;
- Teaching materials, lesson plans and class discussion topics will present diverse body types, in relation to shape, ability, skin colour and gender expression;
- Teaching materials will show a wide range of human anatomical and bodily structures; and
- Sexual health and sexuality information will be taught using a variety of theoretical frameworks, including harm reduction and sex-positivity.

Specific Teaching Strategies

Educators will:

- Encourage student-led and -focused lessons; and
- Employ specific strategies to incorporate student input, such as:
 - Encouraging anonymous, reflective journal writing;
 - Establishing anonymous question box periods to initiate class dialogue;
 - Using plays, skits and storytelling to act out sex education and sexuality topics, including diverse experiences of oppression related to sexual health and/or sexuality;
 - Harnessing subjects or events in popular culture as a starting point for discussion of sex education topics;
 - Encouraging alternative and more equitable strategies for class discussion, such as students giving input on all questions in a roundtable format, with the option to pass or to be skipped; and
 - Educators reflecting on their own power, privilege, experiences with oppression, bias or discomfort in issues of sexuality and sexual health.

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