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Dangerous pleasures: Risks associated with the silencing and invisibilising of LGBT youths in life orientation

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Abstract

South Africa has had numerous workshops and training programmes to educate learners about the human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) as a means to fight and take control of the disease in the absence of a cure (Dube & Ocholla, 2005). It is estimated that in 2023 approximately 8,000,000 people in South Africa were living with HIV and AIDS, with 232,400 new infections in the same year alone. Nineteen per cent of the new infections were adolescents between 10 and 16 years old (Joint United Nations Programme on HIV/AIDS [UNAIDS], 2023). Statistics reveal that 50,000 school youths between the ages of 10 and 16 were infected with HIV in 2023 (UNAIDS, 2023). The possibility of contracting HIV makes all humans vulnerable regardless of their sexual orientation (Brown, 2016). Unfortunately, schools do not educate learners on issues of safe sex in life orientation (Ngabaza & Shefer, 2019). This leaves non-heterosexual school youths inadequately equipped to protect themselves and make informed decisions. In this article we report on the post-school experiences of lesbian, gay, bisexual and transgender (LGBT) youths about what they have learned about HIV and AIDS in life orientation. We employed qualitative methodology, drawing, telling and focus group interviews. The findings reveal that sexuality education in relation to HIV and AIDS is not taught in schools due to homophobia, a lack of knowledge on the part of the teachers, ignorance, and stereotyping of gender and sexuality. The silencing of gender sexual diversity in schools perpetuates compulsory heteronormativity. It is with these statistics that we aimed to render learners with diverse sexual orientations visible and make their voices heard.

Keywords: heteronormative; heterosexist; heterosexual; homophobic; LGBT; non-heterosexual; sexual orientation

Introduction

Schools are considered safe places where learners are taught about HIV (United Nations Educational, Scientific and Cultural Organization [UNESCO], 2012). The school-based education programme is very important and an effective way to provide all learners with knowledge, and teach attitudes and behaviour about sex-related health issues. Yet, school spaces have been depicted as more heterosexist, homophobic and heteronormative than social settings (Kjaraan, 2017). The school-based education programme is a very important and effective way to equip all learners with knowledge, attitudes and behaviour about sex-related health issues. Maree and Ebersöhn (2002) assert that teachers are the first line of defence after medical professionals in the fight against HIV and AIDS. Life orientation teachers need to teach about safe and responsible sexual behaviour as well as a healthy lifestyle (Ahmed, Flisher, Mathews, Mukoma & Jansen, 2009). Rooth (2005) contends that teachers may not be able to play their role and use the subject to include HIV and AIDS programmes due to their personal values and beliefs.

Statement of the Problem

Schools are considered to be spaces where all bodies are believed to be heterosexual and the teaching and learning involving human learning assume a heteronormative base (Bhana, 2014; Brown, 2016; Brown & Diale, 2017; Francis, 2019; Mayeza & Vincent, 2019; Ngabaza & Shefer, 2019). Schools have a responsibility to disseminate accurate and reliable information about HIV and AIDS through the subject, life orientation. Teachers are, however, ill-prepared to teach LGBT youths (Mkhize, Bennet, Reddy & Moletsane, 2010) about these issues. Blum (2007) argues that HIV education must be presented with respect and acceptance beyond teachers' personal feelings and reservations. Schools are contested places where the power of heterosexuality operates at various levels (Kjaraan, 2017). The effective teaching of life orientation has the potential to enable awareness of contemporary issues such as sexually transmitted diseases, HIV and AIDS and how it affects the youths' diverse sexual orientation (Department of Education [DoE], 2003). Considering these dissonant realities for LGBT school youths in South Africa, we investigated their experiences of HIV education in a compulsory heteronormative environment. It is unclear how and where LGBT youths obtain the knowledge that enables them to make critical life decisions regarding sexual behaviour.

Main Research Question

With regard to instruction and learning in life orientation, what skills, experiences and reflections can LGBT post-school youths connect with sexuality, and HIV and AIDS education?

Research Sub-question

- 1) What suggestions did LGBT post-school youths have for the transformation of HIV education in the life orientation curriculum?
- 2) How do LGBT post-school youths want HIV education to change to meet their needs in life orientation?

Objectives of the Study

Main research objective: To collect information, analyse and describe experiences and understand HIV and AIDS education in life orientation.

Sexuality Education in the South African Context

There have been calls, internationally and locally, for the introduction of sexuality education in the curriculum. Almost every country in sub-Saharan Africa has introduced sexuality programmes (McCauley & Satter, 1995; Smith & Harrison, 2013). School-based sexuality education and sexual health are considered important to help learners make healthy choices. However, there is a notable gap in how sex education addresses sexuality in various countries (Francis & DePalma, 2014). Life orientation was introduced by the DoE in 2000 to try to assist learners to make informed decisions. Sexuality education is problematic for sexual minorities due to its heteronormative nature, which results in the marginalisation of LGBT learners and their sexual needs. HIV education has been offered in schools but a high rate of HIV infection among learners still occurs. Teachers' perceptions, experiences, and attitudes also affect how they approach sexuality education (Helleve, Flisher, Onya, Kaaya, Mukoma, Swai & Klepp, 2009). It has been reported that in life orientation there is a tendency to normalise heterosexuality when issues on dating, sex, marriage and family are raised (Francis, 2017). Denial and silence around HIV and AIDS create conditions for the epidemic to flourish, since the transmission of HIV and AIDS thrives on ignorance and misinformation (Holderness, 2012).

Sexuality education is located in the outcome on personal well-being in the syllabus, is compulsory for Grades 10 and 11, and accounts for 17% of the time allocated to life orientation (Department of Basic Education [DBE], Republic of South Africa [RSA], 2011). Sexuality education comprises six components: 1) gender differences and inequalities; 2) physical development during puberty; 3) sexual health and sexually transmitted diseases; 4) relationships and sexual activities; 5) gender and sexual violence; and 6) traditional and cultural sexual approaches (DBE, RSA, 2011). Sexuality education aims to address gaps in the teaching but the question that comes to mind is whether life orientation teachers are able to translate this curriculum into classroom teaching.

The Experiential Learning Theory

The study reported on here was underpinned by the experiential learning theory proposed by psychologist, Kolb, and influenced by other theorists like Dewey, Lewin, and Piaget. According to Kolb (2015:38), "experiential learning is the process whereby knowledge is created through the transformation of experience." It is a method of educating learners through first-hand experience. This takes place beyond the traditional classroom and enhances learners' personal and intellectual growth (Katula & Threnhauser, 1999). Experiential learning provides learners with the opportunity to directly apply the information they have gained in order to build self-efficacy and learn from the experiential undertakings (Loo, 2002).

Teachers should present learners with real-life problems and guide them in solving the problems by providing them with hands-on activities. Deep learning encourages mistakes leading to solutions. Life orientation teachers need to present activities that are relevant to the learners' lives and experiences. Learners' hands, just as their minds, need time to learn basic techniques. In order for learners to learn, teachers need to break down knowledge and skills into digestible sections and concentrate on discrete bits of mastery. Learners need to construct knowledge for themselves, and in many cases, effective learning would be better described as a process of active engagement and self-direction. The experiential theory is represented by a four-stage learning cycle, which includes (i) concrete experience, featuring new experiences or encounters, (ii) reflective observation of the new experience, (iii) abstract conceptualisation where reflection gives rise to new ideas, (iv) active experimentation, where the learners apply their knowledge to real-world situations. Mayeza and Vincent (2019) found that life orientation teachers defied the DBE's instructions to affirm and teach learners about non-heterosexual identities in their classrooms. Inclusive education of diverse sexual orientations is necessary to prepare learners for an inclusive society.

Methodology

In this study we used the qualitative research design as we wanted to understand the youths' experiences.

Sampling

This study was carried out at the Faculty of Education at a university in the Gauteng province of South Africa. Purposive sampling was used to select participants as they had to meet the criterium of being a member of the LGBT community at the participating institution.

Participants' Profiles

Seven (four male and three female) participants between 20 and 24 years participated in the study.

Instruments

Data were produced through draw-and-tell sessions and focus group interviews. Participants came up with drawings and had to explain the meaning thereof. It assisted participants, especially learners with diverse sexual orientations, to use both imagery and words to express their lived experiences. Participants had to write brief notes on the reverse side of their artworks to elaborate and explain the meaning.

The set of questions was facilitated by an interview schedule in which the focus was on their knowledge of HIV, their views about LGBT, and the teaching and learning content in the school and classroom setting.

Data Collection Process

We sought ethical clearance from the ethics committee of the university where these youths attended and permission was granted. We issued consent forms which were signed by the participants. We assured the participants of confidentiality and their anonymity. We employed Braun and Clarke's (2006) thematic analysis, and analysed data using a step-by-step procedure, which began by understanding the meanings of the drawings and the interviews conducted with the participants. Emerging patterns of meaning in their experiences of HIV education in life orientation were important as participants showed how they perceived non-normative sexualities in the school setting. In the second part of the analysis, codes were produced to highlight patterns. To ensure confidentiality, we used pseudonyms for each participant in reporting on the findings. Focus group interviews were conducted after the draw-and-tell session. The discussions enabled the participants to reflect on the images they had captured and what the images meant to them (Whitfield & Meyer, 2005). Focus group interviews were conducted after each data collection session to identify the unit of analysis to understand the meanings and experiences of learners with diverse sexual orientations in life orientation. Using content analysis, the narratives had to be coded, categories created, and interpretations made, highlighting the themes that emerged (Creswell, 2014). Data were then coded to identify the main themes.

Findings: Discussion of Themes

We identified three themes that frame the discussion that follows. These themes are dangerous pleasures (dangerous desires), the silencing of homosexuality in schools, and information about HIV and AIDS being a

heterosexual virus.

Dangerous Pleasures (Dangerous Desires)

All the participants, except one, had engaged in sexual intercourse while at school and confirmed that it was mainly without any form of protection. Lesbian women do not always have access to sexual health information leading to them indulging in risky sexual behaviour. Fikile (gay identity) said the following:

I was warned by my friend who was my (cousin) and also a lesbian about having numerous girlfriends. She told me that I would die if I continue having numerous girlfriends, since I was mugging, I won't notice if my partner has a cut and during mugging, I can contract the disease, she never went deep.

Komano (gay identity) added:

It was my first time in Johannesburg and it was easy to get a male friend the man will be like I like you and I will be I like you too and things will happen. So, when I got to university and went to IOHA [Institutional Office for HIV and AIDS] I didn't want to test, actually I have always been scared of testing for HIV. Later on, I was tested and was given pamphlets and enlightened of what was happening in the community. We were also taught about prep.

There is little information about whether HIV education is reaching gay youths, which could avoid risky sexual behaviour.

Shakes (lesbian identity) shared her experience:

With the things we have to use to protect ourselves some of the nice positions are not done using dental dam, you can't just throw on a dental dam during scissoring never ... because it's the juices that help us through the process. Scissoring is two women in an entangled position and their organs meet, so there's no need for dental dams. You just have to ignore it. There are numerous positions that don't require dental dams only when you are mugging.

Kamano (gay identity) added: "when I was in grade 8 at the time penetration was not easy, we used to be naked and a lot of things was going around our genitalia, I never believed that there was a risk."

Fikile (lesbian identity) expressed:

During sex 'kwaiwa', we are moving so the dental dams and finger condoms kills the fun. Let's say you are using a dental dam and in the process, you decide to finger your partner so you have to take off the dental dam and put on the finger condom the mechanisms are just too much for us to consider. It spoils the fun and kills the momentum.

Kamano (gay identity) emphasised: "Sex is spontaneous; if you stop to put the dental dam it kills the mood, 'wafa-wafa' if you die you [die], and it's the adrenalin." Shakes (lesbian identity) ended up saying: "But dangerous fun is the nicest."

With the scissoring position the participants are at risk of contracting HIV because there is direct contact with vaginal fluids.

The Silencing of Homosexuality in Schools

Homosexual behaviour is viewed as “threatening the power of institutions such as the family and the state in which heterosexuality is viewed as natural as opposed to a cultural phenomenon” (Wells & Polders, 2006:21). There is a saying that all animals are equal and some are more equal than others – heterosexual learners are more privileged than LGBT learners. This exclusionary environment can lead to increased vulnerability, bullying, and marginalisation of LGBT learners, negatively affecting their mental health and well-being.

Shakes (lesbian) said: *“There was never a time in life orientation that the teacher [] about relationships concerning girl and girl, it was always boy and girl.”*

Teety (gay) added by saying: *“Even in the life orientation textbooks it’s only boy and girl.”*

Fikile (lesbian) stated as follows:

We have horrible teachers in life orientation, when it came to same sex relationships the teacher would mock you in front of other learners. The teacher will be like so and so why are you a lesbian why are you doing that to your parents? As if it’s a choice as if they gave me a list and I chose to be lesbian.

Kamano (gay) went on to say:

I adopted hetero norms as it has been imposed on us, so I thought my sexuality was not a normal thing, because what is defined to be abnormal is not discussed in class. I thought it was demonic and wanted a pastor to pray for me.

Teachers deprived participants of vital information that they required to equip them with the necessary knowledge. Teachers exercised power over the participants in life orientation. Participants needed to be empowered as it would raise their confidence about sexuality and enable them to make good choices.

HIV and AIDS Information as a Heterosexual Virus

The participants portrayed HIV and AIDS as a heterosexual virus and thought that non-heterosexuals were safe from the virus.

Fikile (lesbian) said:

While watching a movie that’s when I found out that a lesbian is HIV positive and then the question which got into my mind was ‘njani’ how. How did a lesbian get infected as HIV is transmitted between a man and a woman, she was having sex with a woman. In school we were taught that HIV and AIDS is about boys and girls having unprotected sex, as I was not having sex with boys so I won’t get HIV or AIDS. When HIV topics were discussed in class it was not mentioned about girls having sex with girls or boys having sex with boys. Obviously, it’s not spoken about, I thought I was on the safe side. That was the mentality I had from school. I did my things and got the information later.

Lesbians believed they would not be infected with HIV and were thus ignorant about or rejected safer sex strategies (Reddy, Sandfort & Rispel, 2009).

Lesbians are perceived as not being at risk of HIV infection because it is assumed that they engage in sexual activity only with other women (Reddy et al., 2009). Richardson (2000:45) states that lesbians “rely on notions of the safety of ‘lesbian sex’ or they may emphasise identity over behaviour.” Formby (2011:1172) argues that “this is a false sense of security that demonstrates a lack of knowledge on the part of lesbians themselves as well as health providers and the general public.” Hodes and Gittings (2019) note that “the South African school curriculum does not venture into aspects of sex or the ‘discourse of erotic’” (p. 439).

Teety (gay) added the following:

If teachers taught us about HIV, they will be saying don’t touch someone’s blood it was more of the clinical stuff they never talked about relationships. If it was about getting sick, they would say you don’t want to be slender if there’s a slender pupil in class, they would use them as an example you can’t be that weight.

Donald (gay) explained:

HIV and AIDS topics taught in school only spoke about the heterosexual community and never about queer relationships so I told myself I can’t contract HIV as I was having sex with another boy. Most of the time I felt left out in the classroom.

Kamano (gay) reflected:

In high school they taught us that HIV is contracted between a boy and girl. We were only taught to have one sexual partner. Around the issue of HIV, I have never thought much about it until when one guy was raped. That’s when they spoke about it. They took a bashed approach to homosexuality saying it’s not something that is not supposed to happen and had to call the pastor to pray for him as he was gay.

Cookie (lesbian) shared:

At school they didn’t really talk about sexual intercourse, it was more on mother-to-child-transmission; an unborn child can get AIDS from the mother. Sex was about a boy and girl so I never paid attention as it did not involve me. I was having sex with a woman. With a girl I did not need any protection with boys I needed condoms. At varsity when I heard about lesbians getting HIV, I was like aaaaaah how come.

Teety (gay) simply answered:

In high school there’s never a time where LGBT people are recognised and acknowledged as people. Everyone gets the same information from the teacher, and even textbooks don’t have that information for gays or lesbians. It’s about men and women.

Shakes (lesbian) bluntly said:

At school it was you can kiss them both but you can’t have sex with girls if you are a girl. If you have sex with a boy, you get pregnant, in a heterosexual relationship it is the tediousness of condom. In Grade 10 I was at boarding school and it was a girls’ school. I see girls in the shower and knew I don’t want to kiss them anymore and moved to having sex. I felt it was a free space to be there’s no need for condoms, no need for protection. The risk of pregnancy was zero and being with girls

was the way to go. I got to first year and heard about dental dams and got to know that you get HIV. Now I'm worried about my pleasure since it is not as safe as I thought.

Discussion

Paschen-Wolff, Reddy, Matebeni, Southey-Swartz and Sandfort (2020) found that, in Southern Africa, women who have sex with women face a unique, yet under-researched set of risks related to HIV and AIDS. This led to these women believing that they were safe and could not be affected by HIV. Matebeni, Reddy, Sandfort and Southey-Swartz (2020) state that many lesbian and gay, bisexual, and transgender people has scant access to credible information on HIV and AIDS and safe-sex practices, resulting in the proliferation of various and dangerous (mis)conceptions. Healthcare providers are often under-prepared or unwilling to adequately cater for the needs of women who have sex with women. This leads many women who have sex with women to believe that they cannot be affected by the illness. These silences mask the fact that there is indeed a need for equitable access to sexual health information and services (Matebeni et al., 2020).

Education is viewed as an “act of depositing piecemeal information which is divorced from reality and disconnected from each other.” The learner is a receiver “receiving, filing, and storing the deposits” (Freire, 1970:72). The concept of empowerment was not implemented with dangerous pleasures. The promotion of empowerment has been the basis for HIV prevention programmes for youths who experience oppression related to their gender, sexual orientation, and race or ethnicity (Harper, 2002). The observation is that teachers have not been empowering learners by providing the necessary information, but have merely been spoon-feeding learners with whatever is in the curriculum.

Conclusion and Recommendations

In schools, sexual pleasures and other positive aspects of romantic relationships and intimacy are being silenced (Francis, 2012; Mayeza & Vincent, 2019; Smith & Harrison, 2013). Teachers' resources such as personal examples and textbook references centre on heterosexuality (Francis, 2017), which silence and make LGBT youths invisible. Teachers should engage in the teaching of comprehensive sexuality education in a more positive, less fatalistic way and not let their personal convictions interfere with what needs to be taught. In a study of three training programmes in South Africa, Johnson (1995) observed that content on diverse sexual orientation was absent from the curriculum. As a result, pre-service teachers were not prepared to teach about gender and sexual diversity. Research has also shown that in-service education that includes gender and

sexuality diversity is also lacking (Bhana, 2012; Francis & DePalma, 2014). This sends a message that queer youths don't belong or that their identities are not valid. More research needs to be done to dig deeper into the training of pre-service teachers in order for them to teach. The following questions now arise: Is the problem not also at the in-service level? Why only focus on pre-service teachers? The classroom thus reflects South Africa's socio-political context and this complicates the manner in which content is taught, as knowledge should ideally be dynamic and continuously reconstructed (Francis & DePalma, 2014). The curriculum may serve the interests of adults and not the young people for whom it is needed. Leaving safe sex instruction for learners with diverse sexual orientation out of the curriculum will increase the likelihood of health problems making them vulnerable to the risk of contracting HIV/AIDS as they do not know how to engage in safe sex. It is important for young people to be equipped with appropriate and accurate knowledge of their sexual and reproductive health and rights (UNESCO, 2018). School spaces often neutralise gender and sexuality, desexualising learners, and in turn, creating perceptions of retaining learner innocence through silencing the topics of sex and sexuality (Shefer & Ngabaza, 2015). It is suggested that incorporating critical learning theory could benefit participants, as it bridges the gap between thought and action, potentially reducing risky sexual behaviour. Freire (2000) states that schooling could be used as a change agent where learners come to understand social systems of oppression and equip them to act to change those situations. The behaviour is the result of learning, which did not occur in life orientation, as they had to transform what they had learnt into practice. Critical consciousness is necessary to renegotiate stigmatised identities so that the youth can be empowered to change their sexual risk behaviour (Campbell & MacPhail, 2002). According to Freire (2000), education can be a powerful tool for social change, enabling learners to understand and challenge oppressive systems. It is essential to see the participants not merely as “spectators” but as “re-actors” of the world. The capability approach focused on enabling participants to enjoy positive experiences, avoid harm, and exercise agency over their sexual and reproductive well-being. With this study we illustrated how LGBT post-school learners are othered, discriminated against and isolated because of their gender expression that does not conform to heterosexuality, which is considered to be the norm and is, therefore, preferred. Education systems (schooling in particular) need to create the means for a supportive and enabling environment to accommodate learners who do not ascribe to the norms of heterosexuality.

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Authors' Contributions

CRM was responsible for drafting the manuscript. AB conducted the interviews and both authors contributed to the review and approval of the final manuscript.

Notes

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