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Journal

Queer Cats Journal of LGBTQ Studies, 2(1)

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Publication Date

2018

DOI

10.5070/Q521038308

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PERFORMING RESEARCH IN
THE CLOSETED CITY:
One Lesbian Researcher's Autoethnographic
Journey Toward LGBTQ-Inclusive Sex
Education in Atlanta, Georgia

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Picture this. I'm sitting in my mother's house in suburban Georgia, just down the street from my old high school. It is 2:00 pm and I'm camped out in front of my laptop still wearing my pajamas. I've been in Georgia for two and a half weeks for dissertation fieldwork. I've spent the past month trying to speak to key people about sex education implementation there. Up to this point, as you could probably tell by the pajamas, I've been only mildly successful, with three pro-comprehensive sex education conversations under my belt. So far, I've interviewed (1) a good friend who is a high school teacher, (2) a friend of a friend who works for the governor (that interview was anonymous, of course) and (3) staffers of the state's premier comprehensive sex education non-profit. But amongst my countless emails, voicemails, and resurrected networks, I have been unable to secure an interview with anyone *opposed* to comprehensive sex education, who would speak in support of the abstinence-centered and abstinence-only sex education curricula which are prevalent there. I am anxiously awaiting a confirmation email from my first pro-abstinence-centered sex education informant,

the connection who will hopefully get my foot in the door with other abstinence advocates, when the following email arrives in my inbox.

Hi Amy,

It was a pleasure speaking with you briefly yesterday as well. I've actually been thinking quite a bit about this interview and have done some research of my own. And now after reading through the consent form, I realize that I am not the best candidate to participate in your study, due to your study's focus on comprehensive sex education. . . . Given that we are on opposite ends of the spectrum in terms of our views, I just think I would prove a complete waste of your time.

Thank you for understanding.

Sincerely,

"Veronica"¹

Reading this email, I feel deflated. I wonder: How am I to determine a clear picture of sex education implementation in Georgia if no one who advocates for abstinence will speak with me? Why is abstinence-only education so pervasive if its most ardent supporters remain silent? And what about her turning the research tables on me? What did she find out that made her unwilling to speak with me? Did she see that I work with a sex-positive sex education curriculum at UCLA? Did she detect that I am, in fact, a lesbian interested in LGBTQ-inclusive sex education? Or is the giveaway of my political position simply found in the verbiage of my consent form? Even if she found out all of these things, why did they deter her from speaking to me at all?

"Veronica" is the assistant of a well-known abstinence-centered motivational speaker, based in Atlanta, who declined to speak with me or allow me to attend any of her events. When Veronica relayed this message from the speaker, I asked, "What about you, will you talk to me about sex education?" Then, probably out of guilt, and because I asked nicely, she reluctantly agreed to talk to me "for 15 minutes in the carpool line."² I was gleeful. After weeks of reaching out, someone finally agreed to an interview. I raced home to send her my consent form believing that our brief and seemingly low risk phone meeting would work out—"low risk" meaning our meeting length would be on her terms, she could choose to be anonymous, and she could decline to be recorded. Given her response, it seems that "low risk" for me was still "high risk"—or at least "no gain"—for her.

I turned inward. My inability to schedule interviews with anyone just right of comprehensive sex-ed became one of my primary research questions and greatest insecurities. I asked every interviewee I spoke with if they knew any abstinence-only-leaning people that I could contact. My initial pro-comprehensive sex-ed informants shared a general sentiment that there were a slew of opponents and specific gatekeepers to be understood and assuaged. They expressed an uncertainty (or reluctance) to share who these individuals were, but a certainty that these individuals would also decline an interview request from me.

As I reached out to every lead, my emails and voicemails were left unanswered and when answered, they directed me to other sources, usually dead ends. I was communicating in circles. Dizzy from the repetition, I slowly realized that my informants were right, that these abstinence advocates were not going to speak with me. Moreover, to my surprise, I came to realize that these abstinence advocates were not just refusing to speak with me, but they seemed to be refusing to speak with anyone publically about their views. In my numerous searches and personal prodding, I couldn't find anyone openly advocating for abstinence-centered sex education outside of a glib comment here and there in a comments section of an online news article. What were these abstinence-centered advocates so afraid of? It was as if abstinence sex-ed advocates were closeted, unwilling to come out publicly about their abstinence-centered sex-education stance.

Throughout my fieldwork, it became clear that my inability to speak with abstinence-centered advocates was not only significant but that it was synecdochal for the state of sex education in Atlanta. I could not find any organization that was working on this issue on the policy-level nor could I find anyone right-of-center, politically speaking, who was outspoken about sex education. The overwhelming majority of the people with whom I spoke proceeded to discuss sex education with caution and few, if any, wanted to discuss LGBTQ inclusivity in sex education—especially not in public, or on the recording device of an eager graduate student. Performances of silence permeated people's disclosure, or lack of disclosure, about their sex education position. Analyzing these performances reminded me of coming out stories characterized by a reluctance to reveal one's identity due to fears of disapproving parents, job security, and social stigma. Views about sex education seemed deeply personal in Atlanta, guarded in the private space of the closet. Like the silences which constitute "coming out"

of the queer closet, the silences which constitute “coming out” of the sex education closet speak volumes.

In this paper, I explore how closeting affects research about sex education and its implementation in Atlanta, Georgia. I am inevitably influenced in this endeavor by Eve Kosofsky Sedgwick’s *Epistemology of the Closet*,³ using her theorization of the closet to consider the many silences simultaneously operating around sex education and LGBTQ-inclusive topics in sex education. I will briefly examine my own past as a closeted lesbian, and views about Atlanta as a closeted city for LGBTQ people, as I take a close look at abstinence-centered advocates as closeted professionals who are reluctant to engage in public dialogue about sex education. I argue that the multiple performances of silence that emerged during my fieldwork revealed an intricate web of closets concerning LGBT-inclusivity in sex education, which call for a new metaphor to describe sex-education in Atlanta, the two-level house metaphor. Saturated with homophobia as well as fears of disclosing a highly politicized yet infrequently examined topic of sex education and adolescent sexual health, this house may offer a way to think about how LGBT-inclusive sex education works in the context of the South. Looking to Sedgwick, I examine how queer closeting is similar and different to sex education stance closeting and how the two work together, contributing to the critical youth HIV epidemic and negligent health education policies in Atlanta.^{4,5}

As a decidedly interdisciplinary researcher, I tell my own stories in the field as a political act and as an analytical tool to reveal public health realities. I look towards autoethnography to place myself solidly in the frame of analysis of my research, to connect my experiences in the field with the realities of sex education implementation and to consider ways to create a dialogue across the political spectrum for comprehensive sexual health education. According to professional storyteller and scholar Heather Forest, the act of writing creatively, of telling one’s story, is an artistic act and process that offers insight into the subject matter explored. She claims that by “telling stories and being aware of the powerful forces at play in storied interaction,” one engages in a “creatively charged social, educational, and political act.”⁶ Influenced by Forrest, I look to my experiences during interviews (and trying to schedule interviews) to guide my investigation—the moments I felt the most uncomfortable about my own queer identity and the most hopeful about connections between

public health statistics and sex education practices coming to fore. I use my own stories and reflections from the field in order to make sense of the current networks of communication surrounding comprehensive sex education and as a springboard for further questioning.

In her generative work, *The Epistemology of the Closet*, Sedgwick deconstructs the concept of “the closet” to reveal the incoherencies and contradictions which form our current understanding of homosexual and heterosexual identity. She demonstrates how, through the concept of the closet as a way of knowing, a false binary is constructed which informs the way identities are socialized, and in the case of homosexuals, consequently stigmatized. She traces multiple histories to destabilize queer stereotypes, which she claims are culturally accepted as innate qualities of character and then used to create false binaries. She argues that the concept of the closet is ignited and sustained through performative speech acts that vary depending on social context. Ultimately, she offers the closet as a way to think about identity maintenance. Although the concept can be used to describe the creation of non-homosexual identities, she insists that it “is indicative for homophobia in a way it cannot be for other oppressions.”⁷ In other words, the closet as a mechanism of identity analysis is rooted in the hetero/homo definition which it performs, and must be related back to performances of homophobia in its application to other identities.

For Sedgwick, closets represent and assert binary constructions. She evokes D.A. Miller’s work on secrecy to demonstrate how the closet, like the open secret, does not collapse binaries, but to quote Miller, “attests to their fantasmatic recovery.”⁸ I interpret this to mean that the open secret affirms binary constructions as its very definition relies on the binary construction of knowing and not knowing.

Closets also refer to space and place. A powerful visual, closets have an “in” and an “out.” The “in” is associated with secrecy, silence, darkness, and stigma, whereas the “out” is associated with lightness, freedom, and open communication. Not only are the connections between these two spaces and the lives and visibility of queer people evident, but the relationship of “in” and “out” can be applied to communication about sexual health, the many silences (which speak magnitudes) and messages that permeated my research process.

According to Sedgwick, silence is a multi-dimensional speech act, which shapes the closet. She claims, “‘Closetedness’ itself is a performance

initiated as such by the speech act of a silence—not a particular silence, but a silence that accrues particularity by fits and starts, in relation to the discourse that surrounds and differentially constitutes it.”⁹ Thus, Sedgwick claims there is not one silence, but many silences that may be performed to shape and sustain the closet depending on the space, place, and situation. In the case of my fieldwork in sex education, these silences look like unanswered emails and phone calls, vague policies, referrals to other organizations and individuals, as well as politically correct and non-descriptive answers to direct questions about sex education and LGBTQ inclusivity.

I focus on Sedgwick’s theorization of the closet as a way to understand communication around the topic of sex education and LGBTQ inclusivity. For Sedgwick, the closet represents the construction and maintenance of social boundaries as a “fundamental feature of social life” that expands beyond gay identities.¹⁰ I agree that the closet is a useful (and powerful) image to use when discussing distinctions between public and private speech acts. I also take note from Sedgwick and apply the concept to the abstinence-centered advocates I encountered during my fieldwork in Georgia and imagine how these multiple closetings connect and are ultimately fueled by systemic homophobia. However, I wish to take the closet one step further to insist that not only does it represent relationships between the public and the private through speech acts, but that in the case of the silences surrounding sex education in Atlanta, the closet is far more complex.

Atlanta’s sex education closet is more like a two-story home with many rooms and many doors, each room shifting and contingent on the décor of each neighboring room. This house comes complete with a front porch and a back porch (we Southerners love our porches) on both the lower and upper floor—both in-between spaces where sex education talk happens. On the front porches, queerness can be mentioned in “politically correct” terms, because after all, the whole street might hear you. On the back porches, conversations can be more honest, the neighbors might hear you, but they won’t be able to see you. People feel free to talk off-the-record or anonymously. In the house, conservatives manage the top floor and liberals maintain the bottom without a staircase or elevator to connect them. The neighbors identify the house by its recognizable top floor and assume that all domestic decisions contribute to its notable appearance. The top floor of the house is the most visible part

from all neighborhood perspectives. Neighbors assume that the underlying bottom floor does not have much use or purpose, but in fact, it is the foundation of the home where much work occurs. In Atlanta, the sex education closet is not one room creating a simple binary between “in” and “out,” abstinence-centered sex education or comprehensive sex education, but rather the closet is transformed into a two-story home, reflecting multiple performances of silence, homophobia, and ignorance which contribute to the absence of bi-partisan dialogue for meaningful education policy change.

PROJECT BACKGROUND: WHY COMPREHENSIVE SEX EDUCATION AND WHY ATLANTA?

I am a sex educator, researcher, and advocate. I specifically look at how the arts, personal narrative, and humor can be used for comprehensive sex education initiatives. One of the main reasons I started on this path leads back to East Cobb, a small suburb of Atlanta, Georgia, where I grew up. I remember sitting in a classroom, my face heating up, as a guest speaker awkwardly spoke about how easy and freeing it was to become a “born again virgin.” She described a tragic tale of sex with her boyfriend that happened on her old basement couch and ended in heartbreak. She knew it was wrong, she did not enjoy it, and he broke up with her a week later. This was the extent of my seventh grade sex education: “born again virginity”—the spiritual choice of every good, sweet Southern girl. Suffice it to say, this information was never very useful for me, but whenever I would recall my experiences in sex education, I would always think of that old basement couch reeking of shame and regret.

Of course, comprehensive sex education is more than stories of fear, disappointment, and abandoned couches. It is more than the fear-based and shame-inducing sex education messaging introduced to us in a hot gym at a Thursday afternoon assembly. I define comprehensive sex education as sex education that uses a holistic approach to provide people with medically accurate, inclusive, diverse, and thorough information about sexual health and sexual reproduction, including such topics as sexual development, contraception, pregnancy options including abortion, STI prevention, and healthy relationships and communication skills. Influenced by the Sexuality Education Information and Education Council of the United States (SIECUS), my definition of comprehensive

sex education specifically encompasses LGBTQ inclusivity, which I describe as material that addresses the sexual education and health needs of LGBTQ people. LGBTQ inclusivity incorporates language and examples that feature and specifically name LGBTQ people as part of the sex education curriculum. For my summer research project, my goal was to curate a profile of attitudes on comprehensive sex education implementation in Atlanta with a particular interest in current attitudes and practices surrounding the LGBTQ-inclusive component of comprehensive sex education.

Significantly, I am not the only person who considers LGBTQ inclusion an important component of comprehensive sex education. In fact, in the first week of October 2015, California Governor Jerry Brown signed bill AB 329 (Now referred to as the California Healthy Youth Act), which mandates that comprehensive and LGBTQ-inclusive and *affirmative* sexual health education be taught in all public California middle and high schools, making the compulsory California education code the most inclusive (and progressive) in the country.¹¹ And California is not the only state on board. Nine other states require positive LGBTQ messaging as a part of sex education curricula.¹² Georgia is not one of them.

Due to the lack of public attention, many people do not know that youth are one of the most at-risk populations for HIV, with 39 % of all new cases occurring among people ages 13–29 in the United States.¹³ According to the Centers for Disease Control, youth ages 13–24 are disproportionately affected by HIV.¹⁴ From 2007–2010, young people ages 15–19 and 20–24 were the only age groups that experienced an *increase* in the rate of diagnoses of HIV infection.¹⁵ Described by Georgia Health News as “one of the most intense epidemics in the country,” Atlanta’s HIV epidemic features the sixth highest rate of adolescent HIV transmission of all US metropolitan areas.¹⁶ Notably, Georgia also has the fifth highest rate of new HIV infections overall in the United States.¹⁷ Public health scholar Travis Sanchez writes that, within youth populations, Atlanta’s HIV crisis is distinct due to the severe concentration of new HIV diagnoses in populations of young black men who have sex with men.¹⁸ Low rates of condom use along with declining rates of HIV education in schools are likely contributors to the staggering rate of over 50% of HIV positive youth who are unaware of their HIV status.¹⁹ These risk factors are directly addressed in LGBTQ-inclusive comprehensive

sex education, which can be utilized as a key component of STI/HIV prevention efforts.

As an educator, I am most interested in education as prevention and, for me, these statistics suggest that when sexual health material is not inclusive and supportive of non-heteronormative sexual behaviors and identities associated with LGBTQ lives, adolescents are less likely to engage in sexual health education in the classroom. Heteronormativity is a term used to discuss the ways in which gender and sexuality are organized into hierarchically organized binaries in which men are the opposite (and superiors) of women, and heterosexuals are the opposite (and superiors) of homosexuals. Within heteronormative systems, which dominate social institutions, including public education, the former is acknowledged as normal and natural while the latter is considered abnormal and inferior. Heteronormativity functions as a cultural bias which privileges “opposite-sex” couplings.²⁰

The traditional practice of providing exclusively heteronormative education not only affects LGBTQ youth, but heterosexual youth as well.²¹ Health educators John P. Elia and Mickey Eliason claim that when heterosexual youth receive only heteronormative education, they are less likely to fully understand the range of sexual health risks. For instance, providing heteronormative sex education often excludes the discussion of STI risks and safer sex practices for sexual behaviors which many students engage in whether they are LGBTQ-identifying or not, such as anal sex. Additionally, centering conversations about sexual health around heterosexual couples reasserts the idea that LGBTQ people are “other” and “not normal” which disserves all youth. However, Elai and Eliason stress that when sex education is LGBTQ-inclusive, all students can benefit and make healthier choices.

Needless to say, growing up in my suburb of Atlanta, I did not receive comprehensive and LGBTQ-inclusive sex education and, in the past fifteen years, it seems that not much has changed in Georgia. For instance, several counties still actively and enthusiastically implement abstinence-only or abstinence-centered education.²² Founded by Atlanta native Bruce Cook, *Choosing the Best* (CTB), the self-proclaimed “Leader in Abstinence-Centered Education,”²³ has a strong following in Georgia.^{24,25} CTB is a non-evidence-based curriculum that has been widely critiqued for being medically inaccurate, heteronormative, and blatantly

sexist by organizations working in sex education, including the Sexuality Information and Education Council of the United States (SIECUS).²⁶

In a comprehensive review of “Choosing the Best Journey,” the fourth part of the series designed for ninth and tenth grade students, SIECUS analyzes the curriculum based on their Guidelines for Comprehensive Sexuality Education, K–12.²⁷ The review was originally published in 2006 and although adaptations have been made to the *Choosing the Best* series, these critiques remain relevant as many schools use old editions of the curriculum. Additionally, I have been unable to locate edits made after 2006, but based on my interviewees’ recent work with the CTB curriculum, SIECUS’s concerns have not been adequately addressed. According to SIECUS, “The fundamental flaw of “Choosing the Best Journey” is that it aims to push a singular agenda, what it calls the ‘best’ choice, while convincing students that they are making their own choices. The curriculum relies on messages of fear and shame and biased views of marriage, gender, and sexual orientation.”²⁸

According to the SIECUS review, when it comes to LGBTQ inclusivity, “Choosing the Best Journey” “simply ignores the existence of same-sex couples or gay, lesbian, and bisexual individuals.”²⁹ All references to sexual activity are specific to heterosexual couples including a virginity-until-marriage pledge in which marriage is defined as a union between members of the “opposite sex.”³⁰ This is especially disconcerting as LGBTQ youth experience increased risk of STIs, including HIV. “Choosing the Best Journey” fails to provide students with any realistic strategies for protecting themselves from negative sexual health outcomes.

An investigation of *Choosing the Best* is not the goal of this paper, but is an important topic of future inquiry. I mention it briefly here to demonstrate the incoherence between public health statistics and sex education in Georgia. Despite my repeated calls and voicemails, my attempts to talk to anyone from Choosing the Best Inc. proved unsuccessful. Significantly, obtaining a copy of their curriculum is difficult. I learned that in order to obtain a copy of their curriculum, I would need to personally email them describing my interest and then purchase it.

In any case, the situation in Atlanta is dire. In the midst of a youth HIV crisis, many Atlanta schools pursue abstinence-only or abstinence-centered curricula which exclude vital and inclusive information about safer sex barriers that prevent HIV. Neither the Atlanta Board of Education nor the local Fulton County Board of Education, which govern

most Atlanta schools, require comprehensive sex education.³¹³² Thus, the very school boards meant to enhance and protect the lives of Atlanta students are failing to provide them with vital STI/HIV prevention information, leaving them at-risk for engaging in unsafe sexual behaviors and inhibiting their healthy development and academic success. With vague policies open for interpretation and a public health crisis, I thought that many professionals in both education and public health fields would be eager to discuss the topic and that there would be many debates in local publications and among colleagues in health and education fields. I was wrong.

GOING EASY ON THE CLOSETED CITY

I'm sitting in a small office in downtown Atlanta with Emily Brown. According to Brown, she is the only person paid to do LGBTQ youth advocacy in all of Atlanta, with its population of 5.7 million³³ and an estimated 4.2 % who identify as gay or lesbian.³⁴ Notably, I could not find a statistic on the transgender population of Atlanta, but a recent study (2016) by the UCLA Williams Institute states that .75% of Georgia's population identifies as transgender which is the 4th highest percentage in the United States.³⁵ Brown's official title is Field Organizer for Georgia Equality and facilitator of the Atlanta Coalition for LGBTQ Youth, a coalition of youth-serving providers in Metro Atlanta, working to improve the services they provide to LGBTQ youth. This is one of the first times I've felt truly comfortable in my series of interviews in Georgia about sexual and reproductive health. Our scheduled hour interview lasts two and a half hours because Brown explains that these are questions and concerns that she is very passionate about, yet rarely has a chance to talk about. I'm thrilled.

At the beginning of the interview, Brown expresses a distinct need for LGBTQ-inclusive sex education as "a structural intervention for HIV prevention in youth,"³⁶ coupled with hopelessness for its practice in Atlanta. At this point in my research, I feel the same way. I feel dismayed that LGBTQ inclusivity seems to be accepted as an empty concept (if at all) in most Atlanta schools and non-profits I've contacted, yet certain that LGBTQ-inclusive messaging should be a part of sex education curricula due to the city's dismal health statistics.

I question her about my perceived feeling that even comprehensive sex education advocates are not concerned with LGBTQ inclusivity. She responds that several local sex education non-profits were “basically forced” to address LGBTQ issues as part of their Office of Adolescent Health funding applications.³⁷ She explains that in order to do this, each of the three organizations arranged Memorandums of Understandings with Georgia Equality. Part of the US Health and Human Services Department, the Office of Adolescent Health is the primary federal funding resource for non-profits providing services for youth. So in order to get federal funding, they had to present a grant that addressed direct efforts to include LGBTQ youth. She continues to tell me that, unfortunately, all three organizations failed to receive this funding. This was a huge blow for youth service providers. She remarks that perhaps the Office of Adolescent Health did not believe that they were actually equipped to do the work. Whatever the reason, we agree that lack of funding negatively contributes to the existing invisibility of LGBTQ health advocacy in Atlanta.

Brown is very concerned with the lack of advocacy and people’s unwillingness to speak up for LGBTQ inclusion within the sex education field in Atlanta. She explains, “Being transformative in sex-ed in this environment seems really difficult, because our staunchest allies are people who are afraid to talk about our existence. So that’s terrible.”³⁸ I can see where she is coming from. During my time in the field, I noticed that none of the teachers or non-profit professionals I interviewed had a direct interest or plan of action concerning LGBTQ inclusion in the sex-ed classroom. In fact, I received Brown’s contact information from a comprehensive sex education non-profit that advised me that she would really be the best person to talk about LGBTQ inclusion. From where I was standing, LGBTQ inclusivity in these contexts was acknowledged as important, but not really supported in implementation practices or advocacy efforts.

Brown explains that several service providers who are distinctly positioned to work with LGBTQ populations in Atlanta have a lack of basic knowledge about LGBTQ-inclusive practices. She asserts, “Atlanta is a closeted city.”³⁹ I am nodding my head because I think she is right. It is. Although LGBTQ rights have shifted significantly in the last few years with the federal legalization of same sex marriage, queer public displays of affection still feel like something only accepted in certain “gay

spaces” and neighborhoods of the city for many Atlantans. As a matter of fact, just this past March, the Georgia General Assembly passed the “Free Exercise Protection Act” also known as the “religious liberty bill” and/or House Bill 757. Under the bill, business owners and employees can refuse to serve LGBT people on religious grounds.⁴⁰ Self-identified faith-based organizations which often receive public funding, such as food pantries, adoption agencies, social service providers, and homeless shelters would be free to refuse service to LGBT people and fire LGBT employees.⁴¹ Ultimately, under escalating threats from large corporations to withdraw business from Georgia, Conservative Christian Governor Nathan Deal vetoed the bill.

Brown’s description of Atlanta as a closeted city sheds light on many people’s reluctance to talk about LGBT youth in the context of sex education. For Brown, the performance of Atlanta’s closet is not binary, but layered, multiple, and intersectional. She says:

Service providers are another layer of that [closeted nature of Atlanta]. Of course, on paper and in person many sex education providers will tell you that they’re allies, and people express themselves as allies. “We have rainbow crosswalks here in Atlanta now, blah blah blah,” but we’re not . . . we’re still a closeted city. I mean that, like, there’s an economic, upwardly mobile status of mostly gay white men, who are doing great things, and that’s what everyone sees of Atlanta. It’s like the Chamber of Commerce folks. But when push comes to shove, there’s an underclass—which is hugely queer and trans, and hugely made up of people of color here—that’s what nobody wants to deal with.⁴²

Brown illustrates how people are not just “in” and “out” in Atlanta. Her analysis sparks the question, how “in” is “in” and how “out” is “out”? Her analysis suggests that there is a spectrum between in-ness and out-ness that is dependent on race and class. Thinking about her concept in the context of the two-level home, there might be a rainbow welcome mat at the doorway of the front porch, but no actively engaged allies inside, no warm and inclusive reception despite the sign at the door.

Using the metaphor of the closet in the realm of service providers in Atlanta poses the question, how do practitioners in Atlanta create space for out-ness? And how do race and class inform those spaces? Brown reflects, “I realized that service providers who are dealing with youth in Atlanta—these are housing shelters, clinics, social services organizations in general—are absolutely not prepared or comfortable dealing

with the number of LGBTQ youth that they're dealing with."⁴³ She tells me an anecdote to illuminate her point:

The stories that are coming out of the homeless shelters and the schools and the clinics would just shock you. We have a trans-friendly youth shelter here, and I got a call from someone the other day who just started working there, who moved here from Boston.[. . .] She's like, "you know, I started working here, 'cause this is supposed to be a trans-friendly environment. I don't know who to tell about this, I don't want to get fired, but apparently this transwoman"—young transwoman, like teen, like 19—"was trying to wear her wig and nails and heels in the group home that she was living in, in this teen homelessness environment, and the social workers in the group home wouldn't let her dress that way for her 'own safety,' and so they were forcing her to dress like a boy for her own safety." At its most basic level, that just shows a complete lack of knowledge of trans issues. In the funded specifically for trans people shelter here, bad things are happening. So, if you put that in the mix of things . . . you know, it's hard. When people talk about cultural barriers and adapting curricula to the South, I think on some level what they're getting at is like, "Go easy on us, you know?" But that's—we're in the middle of a huge crisis.⁴⁴

Brown's story reflects blatant incompetence to create trans-inclusive spaces and support transgender folks at a shelter specifically funded under the premise that it is a trans-friendly environment. Maybe some aspect of this environment is trans-friendly, but compared to what? Are these providers gay-friendly or LGBTQ-inclusive in name only? Does this instance Brown describes happen due to the culture of the organization or a lack of education and training? Perhaps both. Regardless, it depicts a more complex closet, one where providers are not completely "out" about providing LGBTQ-inclusive, friendly, and affirming services. They are semi-out, or out in concept and grant application, but not out in practice. Out on the front porch where passersby can see, but not in the house where the work happens.

Brown raises an important concept I encountered throughout my research—"going easy" on the South. "Going easy" connotes that communities in other regions of the United States are more culturally equipped to include and accommodate LGBTQ people than the South, so we should adjust our expectations of the South's capacity accordingly. Yet, should we be "going easy" on the South when it comes to sex education? During my time in the field, I found the lack of knowledge about LGBTQ-inclusive practices troubling. I couldn't even find statistics

about LGBTQ inclusivity in classrooms or any studies linking LGBTQ youth and LGBTQ-inclusive sexual health on a national-level either. The scarcity of LGBTQ statistics only further reflects the dire state of negative health realities for LGBTQ youth.

One of the few stories I encountered about LGBTQ inclusivity in the sex education classroom in Atlanta was written by journalist Jim Burress, Kaiser Health News/NPR fellow for Atlanta's NPR news station WABE. Burress's story, "Despite High HIV Rates, Georgia Schools Ignoring LGBT Sex Ed" was the only news story I found that directly voiced the need LGBT inclusivity in Atlanta's sex education curricula.⁴⁵ As Atlanta has one of the highest youth HIV rates in the country with young black gay men who start having sex at age 18 having a 60% chance of becoming HIV-positive by the age of 30, Burress tells me that this is a highly under-reported public health crisis.^{46 47}

Burress specializes in HIV/AIDS reporting; he is also a self-identified gay man. From the beginning of our interview, I felt that we clearly shared many of the same concerns about sex education in Georgia. His main concern is that no one is talking about the HIV crisis for young gay men in Atlanta. I explain to him that I have found many statistics about HIV transmission among young men in Georgia, but few people who were willing to speak to me about them. I was in the process of emailing Atlanta Public School employees, Atlanta Board of Education members, and teachers in the Atlanta metro area. Emailing in circles, I was either receiving silence or being pushed along the bureaucratic chain. When I exhaustively explain this to him, he responds, "Good, I'm glad to know that, you know, they don't just hate *me*. I'm not an . . . isolated case."⁴⁸ We both laugh at his response. With this admission, I also begin to feel slightly better about what I am describing to my friends and family as "my failures in the field." If an established Atlanta reporter cannot speak to anyone about this issue, how could I expect that anyone would talk to me?

Burress connects our supposed "failures in the field" to the fact that there are not many statistics to analyze linking local STI/HIV transmission with accompanying sex education implementation. Burress offers a line of reasoning:

I think that it is indicative of this state's stance, not only on Sex Education but specifically LGBT-inclusive education, that we're not even talking about it. And to collect data, we would be talking about it. To report these

type of things, we would be talking about it. And that's just my theory, OK?
I—you know, I don't have anything to back it up, but, it is one of the more
challenging things . . . that I've tried to cover.⁴⁹

Burress's reasoning centers on communication, a re-emerging theme in my research, and, more specifically, talking about sex. Is talking about sex in general something that belongs in the realm of the closet? In my experience, it was not that people in Atlanta were not talking about sex or young people who have sex, or young gay people who have sex. It was more that they would not *officially* talk about sex. Most Atlantans I contacted did not want to be on-the-record, to be publicly identified as a person who was heard talking about sex aired on mainstream media channels or recorded on my iPhone as a part of my dissertation research. But Burress has a point: If we can't talk about HIV transmission among LBGQT youth publicly, how can we ask the right, specific questions about transmission in order to prevent it? Furthermore, how can we allocate *public* funds and *public* education towards an issue that is not being *publicly* discussed?

During my time with Burress, I quickly realized that the varying silences I was receiving from the people I was trying to interview, such as interviewees avoiding the subject of LGBTQ-inclusive education or neglecting to respond to an interview in the first place, were more complicated than I'd originally imagined. Instead of a fixed and off-limits boundary, silence was a living, breathing, malleable, multilayered, and multifaceted entity. Burress says, "It's a veil of secrecy in general. And I don't know if that's because we're talking about sex. I don't know if it's because we're talking about gay youth. Both? Or, or what. But . . . people aren't talking about it. And the numbers reflect that."⁵⁰

One of the goals of my formative research has been just that, to find out why people are not talking about sex education. Is it because of the stigma of HIV, gay youth, or sex in general? What is it? After my multiple interviews with informants from different sectors, hours of interview analysis, policy analysis, and endless online research, I posit that the answers (or traces of answers) lead back to closets and the performances of silence that shape them. Even my interviewees, who I would consider advocates of comprehensive sex education, spoke off-the-record or cryptically about identities of opponents of comprehensive sex education, especially when LGBTQ inclusivity in sex education was mentioned. Silence performs and it is dynamic. When referring to

sexuality, Sedgwick asserts, “Of course silence on these issues performs the enforcing work of the status quo more predictably and inexorably than any attempt at analysis.”⁵¹

PERFORMING SILENCE, WHAT SILENCE REVEALS

So far, I have described an elaborate two-level house metaphor, one that has enough rooms, entrances and exits, and contingencies to represent the many layers of closeting information and communication around sex education in Atlanta. In line with Sedgwick, the many closets I have described spring forth from sexuality and LGBTQ identities. I would now like to return to what I described as the closeting of abstinence-centered advocates as I experienced it. So, back to “Veronica.”

“Veronica” expressed that we were on “opposite ends of the spectrum” and thus speaking to me would be a “complete waste of my time.”⁵² When I responded that one of the goals of the research was to understand a broad range of perspectives and create a dialogue, she still refused, saying, “she has yet to read a report by comprehensive advocates that was even remotely respectful or complimentary of any risk-elimination programs out there.”⁵³ Based on her response, I interpreted that “Veronica” did not want to go on the record as an abstinence-centered educator, whom I might critique or ridicule. In her emailed response, she briefly alluded to past experiences when she was “looked down upon” for focusing on abstinence.⁵⁴

Sedgwick contends that the metaphor and mechanism of the closet can be used to portray any “potent crossing and re-crossing of almost any politically charged lines of representation.”⁵⁵ For “Veronica” the line of representation is about how she is perceived as an inadequate sex educator in the broader context of sex education, a context in which she has experienced disrespectful treatment for her position. Yet, abstinence-centered educators are in the majority in Georgia and are in good favor with the conservative policies and government. So why hold back?

Sedgwick explains that people want to stay in the protection of the closet to avoid “distorting stereotype,” “insulting scrutiny,” and “simple insult.”⁵⁶ Even though “Veronica’s” perspective holds more weight in the context of current sex education practices, in the context of talking to me, a comprehensive sex education advocate (I assume she discovered

this through a simple Google search), she wanted to avoid scrutiny and the public record of the exchange.

Yet, I cannot completely appropriate the closet to abstinence-centered advocates without acknowledging some of the distinctions. For instance, the closet, Sedgwick argues, is in fact distinctly gay in many ways. Sedgwick claims that the closet is uniquely gay due to the possible invisibility or passing of sexual orientation (as opposed to fixed visible difference, “ancestral linearity,” and “answerability”) coupled with the legal inequalities and constant threat of violence that many LGBTQ people encounter.⁵⁷ Simply put, outing must be strategic or your rights may be taken away. Although abstinence advocates like “Veronica” may “pass” for comprehensive sex education advocates, the “outing” of their stance does not put them at-risk for losing their human rights.

My process of receiving rejection or silence to my many inquiries reminded me of Esther Newton’s experiences as a lesbian anthropologist in “Too Queer for College: Notes on Homophobia.”⁵⁸ In this essay, she describes a series of rejections, most of which are unsaid rejections. She describes rejection based on “phony standards” and “personality differences.”⁵⁹ Through these trails, she affirms that she has “found a voice in the silence society tried to impose on me.”⁶⁰ In silence, she discovered an ability to analyze the traces of discrimination surrounding differences in gender and sexuality, to theorize how social structures were really working in the U.S. Similarly, I have found traces of discrimination in the ways in which people in Atlanta talk (or do not talk) about sex education—homophobia which conveniently avoids talking openly about LGBTQ youth, the youth most affected by these sex education polices.

CONCLUSION

From silence to dismissal to deflection, I found that many Georgians are not yet ready to discuss LGBTQ-inclusive sex education and that their reluctance to do so manifests in a house metaphor. A metaphor which reveals homophobic attitudes and practices in Atlanta happening in the silences of the in-between spaces of the front and back porch. Yet, an exploration of these silences with attention to how they depend on one another have the potential to advise LGBTQ-inclusive (and affirmative) policy efforts in Georgia.

Perhaps my own feelings of nervousness and my inclination to keep my own sexuality unnamed, even when related, reflects a greater trend of many Atlantans who cling to the safety and security of keeping a once very stigmatized (and a now significantly less so) identity out of the realm of their livelihoods. But, more importantly, what are the costs? In a foreword to Newton's collection of essays, *Margaret Meade Made Me Gay*, Jack Halberstam writes, "We have to confront medical opinion and mainstream doctrines of pathology and only then can we identify the vibrant vernaculars and inventive subcultures of queer lives."⁶¹ Although much progress has been made in LGBTQ rights liberation movements, based on my experiences in the field, I wonder how much has really changed. Is the new homophobia admitting there is a problem and sending that problem in the direction of a different non-profit/bureaucracy? Have we found the words to articulate our history of pathologization and how it can be redressed in health education environments?

POST SCRIPT

Two weeks after I left the field in September 2015, I received an email from my mother containing a video clip from Atlanta CBS news.⁶² The news clip reported that Atlanta Public Schools had adopted a new sex-ed curriculum: the abstinence-centered, heteronormative, and medically incorrect *Choosing the Best* series. One teacher I interviewed in the field told me that the *Choosing the Best* instructors told her to respond to any student's question about homosexuality with a direct referral to their parents or their "religious leader."⁶³ The *Choosing the Best* instructors insisted that she could not provide any information that related to these questions. Since then, I have desperately tried to get my hands on this new curriculum and research any information I could about *Choosing the Best* with no results. Regardless, with silences at every turn, I will forge a path forward in this maze of closets.

NOTES

1. "Veronica," e-mail message to author, August 27 2015.
2. "Veronica," in phone conversation with the author, August 26 2015.
3. Eve Kosofsky Sedgwick, *Epistemology of the Closet* (Berkeley: University of California Press, 1990).

4. Maithri Vangala, "Metro Atlanta at the Center of Burgeoning HIV Crisis," *Georgia Health News*, June 12, 2015, accessed May 10, 2016, <http://www.georgia-healthnews.com/2015/06/metro-atlanta-center-burgeoning-hiv-crisis/>.
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6. Heather Forrest, "Artful Leadership for Creating Positive Social Change: Reflections on an Arts-Based Autoethnography," *Storytelling, Self, Society* 5, no. 2 (2009): 72-89.
7. Sedgwick, *Epistemology of the Closet*, 75.
8. *Ibid.*, 67.
9. *Ibid.*, 3.
10. *Ibid.*, 68.
11. California Healthy Youth Act, Assembly Bill 329, 2014-2015 Reg. Sess. (Cal. 2015), codified at CAL. EDUC. CODE §§ 51930-51939.
12. Alexandria Temblador, "Why Is LGBT-Inclusive Sex Education Still So Taboo," *The Huffington Post*, October 10, 2015, accessed May 10, 2016, http://www.huffingtonpost.com/2015/03/07/lgbt-inclusive-sex-education-_n_6819854.html.
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16. Vangala, "Metro Atlanta at the Center of a Burgeoning HIV Crisis."
17. "HIV/AIDS: Statistics Overview," *Centers for Disease Control and Prevention*, March 26, 2016, accessed May 11, 2016, <https://www.cdc.gov/hiv/statistics/overview/>.
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19. "HIV, Other STD, and Teen Pregnancy Prevention and Georgia Students." *Centers of Disease Control*, 2013, accessed October 10, 2015.
20. Linda Holtzman, Leon Sharpe, and Joseph Farand Gardner, *Media Messages: What Film, Television, and Popular Music Teach Us About Race, Class, Gender, and Sexual Orientation*, 2nd ed. (New York: Routledge, 2015), 477-478.
21. John P Elia and Mickey Eliason, "Discourses of Exclusion: Sexuality Education's Silencing of Sexual Others," *Journal of LGBT Youth* 7, no.1 (2010): 29-48.
22. Kim Nolte (CEO of Georgia Campaign for Adolescent Power & Potential), Interview by author, August 5th 2015, transcript.
23. "Choosing the Best: About Us," last modified 2017, <http://www.choosingthebest.com/about-us>.
24. Nolte, interview.
25. Vivian Baldwin (retired Nurse and Health Education Teacher), in discussion with the author, July 2015.

26. SIECUS, “Summary: SIECUS Review of Choosing the Best Journey,” *Sexuality Information and Education Council of the United States: Community Action Kit*, 2008, accessed October 10, 2015, <http://www.communityactionkit.org/index.cfm?fuseaction=Page.ViewPage&PageID=1179&stopRedirect=1>

27. Guidelines for Comprehensive Sexuality Education, K–12, were developed by a task force of professionals from the fields of education, medicine, youth services, and sexuality education. The Guidelines are a framework for comprehensive sexuality education programs and represent a consensus about the necessary components of such programs. Abstinence is one of the 39 topics included in the Guidelines. From, http://www.siecus.org/_data/global/images/guidelines.pdf.

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35. A.R. Flores et al. “How Many Adults Identify as Transgender in the United States?,” Los Angeles, California: The Williams Institute 2016.

36. Emily Halden Brown (Advocacy Field Organizer for Georgia Equality), Interview by author, August 27th 2015, transcript.

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39. Ibid.

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44. Ibid.

45. Jim Burrell, “Despite High HIV Rates, Georgia Schools Ignoring LGBT Sex Ed.” *WABE (90.1 FM) Atlanta*, September 2nd, 2013, accessed October 10, 2015, <http://news.wabe.org/post/despite-high-hiv-rates-georgia-schools-ignoring-lgbt-sex-ed>.

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48. Burress, interview.
49. Ibid.
50. Ibid.
51. Sedgwick, *Epistemology of the Closet*, 21.
52. “Veronica,” e-mail message to author.
53. Ibid.
54. Ibid.
55. Sedgwick, *Epistemology of the Closet*, 71.
56. Ibid., 68.
57. Ibid., 75.
58. Esther Newton, “Too Queer for College: Notes on Homophobia,” *Margaret Mead Made Me Gay: Personal Essays, Public Ideas* (Durham, NC: Duke University Press, 2000).
59. Newton, “Too Queer for College: Notes on Homophobia,” 223.
60. Ibid., 224.
61. Jack Halberstam, “The Butch Anthropologist out in the Field.” Foreword, *Margaret Mead Made Me Gay: Personal Essays, Public Ideas* (Durham, NC: Duke University Press, 2000), xii.
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