

**LGBT CAMPUS  
HISTORICAL  
COLLECTION**

**2016-2017 General**

**Part 1:  
End of 2015– March 2017**

**XXXV**

**LGBT Resource Center  
Historical Collection**



**2016-2017**

**Part 1!**

**UNIVERSITY OF CALIFORNIA, SAN DIEGO**

*I believe*

*comfort*

*peace*

I believe  
that  
hope survives,  
love  
prevails,  
tears  
cleanse,  
memories  
comfort,  
faith  
soothes,  
good thoughts  
reassure,

*faith*

*comfort*

*faith*

*hope*

*peace*

Best wishes to  
the LGBT Community.  
I see solidarity  
come from

Our thoughts are with you  
and hope that our community  
at UCSD stays safe during  
this time.

-Wic Dyer-

The LGBT community are  
in my thoughts and will  
always have my support.  
We are all one.  
Kristen

Our thoughts are with  
you! Very important what  
happens but we stand  
together!  
Richard

I stand  
in support  
of the community  
because we are all one!  
-Kourtni

My heart & support  
is with the LGBT community  
Best wishes

Shaun thinking of you and your team and community during  
this horrible tragedy. Best wishes  
Our thoughts are with you & the LGBT community  
in this time of  
tragedy.

Richard  
Bathburn

and that our  
belief in a  
better place  
calms the heart.

In deepest  
sympathy.

The Career  
Center stands &  
supports the  
LGBTQ community -  
our deepest  
condolences.  
Katherine

My heart is saddened  
by the event that  
took place in Orlando  
on Sunday. We stand  
united with you!

Our thoughts are with  
you & we stand in  
solidarity with you!  
Julia

We support  
you & your  
community  
we are here for  
you, all the  
time

My thoughts and  
support are with  
the LGBT Community.  
Our thoughts are with  
the LGBT Community &  
our members that  
love us.  
In solidarity,  
Anahis Mendez

Our thoughts and prayers  
are with you during these  
difficult times. Stay strong  
Albert

My heartfelt thoughts  
and prayers for the  
LGBTQ community  
♥♥♥

I am deeply  
saddened by the  
events this past  
weekend. I stand  
in solidarity with  
the LGBTQ community.  
Sending love & endless  
support.

Best wishes to the  
LGBT community.  
In solidarity and  
pride. Bill Kingard

My prayers and  
thoughts are with  
you all in this  
time of tragedy.  
-Sean Burns

Jessica Kang



Brian Burns George Harris



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FLUID ATTRACTION  
GROUP

2016 - 2017





P



BOOKS FOR

Goodnight  
Moon



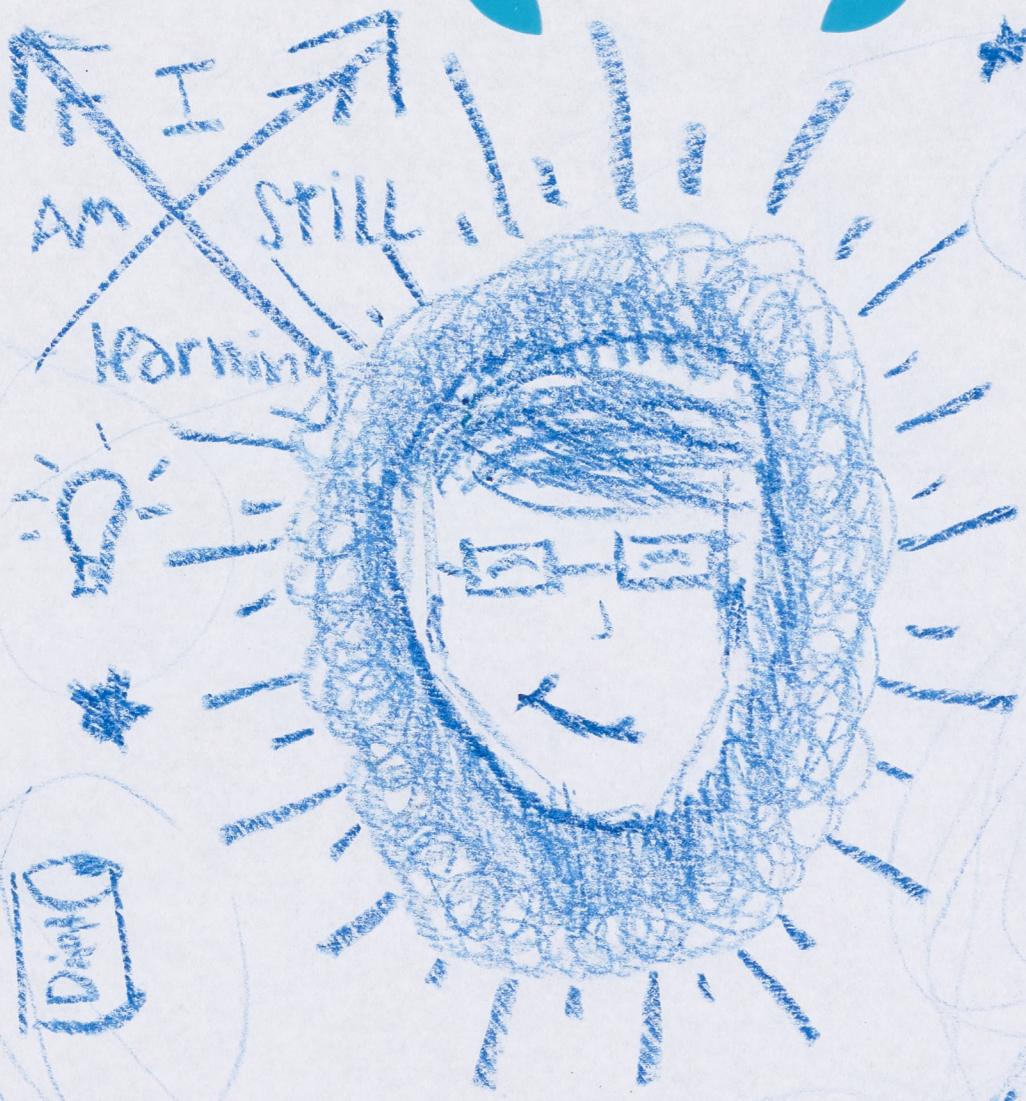
*I am not an  
inconceivable.*



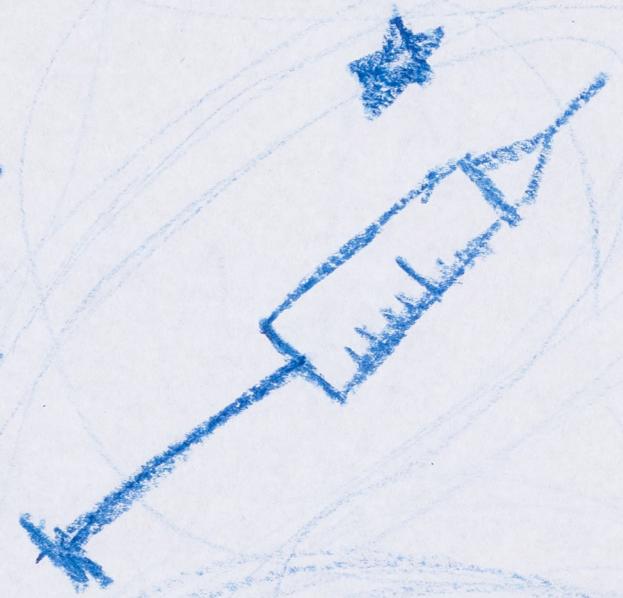
ANIMALS







FIGHT ME



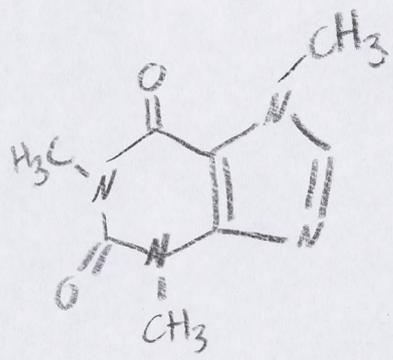
DANCE





I CAN'T ART!

BUT I TRY...



**CONTENTS**

♀ The biological mechanisms of transgenderism

♂ The healthcare of the LGBTQIA community

♀ Resources to become involved in the LGBTQIA community

# INSIDE: LGBTQIA

In this issue of the Insider, we look into the LGBTQIA community in order to examine the connections between transgenderism, healthcare and biology.

**A**sk any UC San Diego student who Caitlyn Jenner is, and most people will know the answer. The media has highlighted Caitlyn Jenner ever since she announced her identity as a woman this year. This spotlight on Jenner has helped bring attention to differences in gender identity.

*Illustration by Connie Mach | SQ Staff Illustrator*

*Continued on the next page...*

## Transgender Identity: An Investigation for a Biological Mechanism

A significant change regarding gender identity has occurred in the University of California system this year. Beginning this fall, students applying to a University of California school have the opportunity to choose among 6 gender identities: male, female, transgender male, transgender female, gender non-conforming and different identity. With the broadening of choices previously limited to male or female, the University of California aims to gain a better understanding of the student population.

Changes like that of the University of California application tied with Jenner's spotlight in the media have stimulated debate over the relationship between physical sex and gender identity. Physical sex refers to the biological status of being male or female and is determined by physical characteristics, such as reproductive anatomy and sex hormones, and chromosomes. In comparison, gender identity is the gender a person identifies with, and encompasses the behavior, roles, and activities attributed to certain sexes. If one's physical sex and gender identity are the same, the term one might use to describe themselves is cisgender. If one's physical sex from birth is different from one's gender identity, the term one might use to describe themselves is transgender.

By investigating gender determination and the brain, biology researchers are trying to answer this hot question of today's changing society: Does gender identity have a biological basis independent of one's chromosomes or physical anatomy?

Studies suggest a possible neurological basis for gender identity separate from physical sex. A study from 2014 by brain researcher Georg S. Kranz of the Medical University of Vienna suggests that the gender identity of a human being could be identified in the microstructure of the brain's white matter. The method Kranz and other researchers used was diffusion-based magnetic resonance tomography, a method that reveals brain structure by observing the movement of water molecules. By comparing the brains of 23 transgender men and 21 transgender women to those of 22 cisgender men and 23 women, Kranz and other researchers showed significant

differences between the microstructures of white matter tracts in cisgender male and female subjects. However, transgender male and female subjects showed an intermediate structure in white matter tracts. The study further detected that these differences in microstructures may be related to the testosterone levels in blood. Rupert Lanzenberger, one of the researchers involved in this study, stated, "These results suggest that the gender identity is reflected in the structure of brain networks which form under the modulating influence of sex hormones in the course of the development of the nervous system." Could a distinct gender identity be based in differences between the brain's microstructure? In order to confirm a neurologically-based gender identity, more research needs to be conducted.



**TRANSGENDERISM** Through her fame, Caitlyn Jenner is drawing attention to the expanding transgender community in hopes of eradicating any negative stigma against transgender individuals.

Illustration by April Damon | SQ Staff Illustrator

Psychologist Kristina Olson of the University of Washington conducted a study in 2014 investigating gender identity by analyzing subtle behavioral cues of 32 transgender children ages 5 to 12 years. By using these implicit measures, Olson could better assess the children's automatic gender associations and gender identity. Results showed that transgender children identified with their expressed gender rather than their physical sex. The data pattern for both transgender girls and transgender boys showed strong similarities to the data pattern of cisgender girls and cisgender boys, respectively. The results suggest that transgenderism in children is a total change in response that contrasts with their physical sex. Though this study needs further investigation, the evidence of a total change in behavior further suggest a possible biologically-based gender identity.

Based on this research, is there a biological mechanism for gender identity separate from physical sex? Whether gender identity is biologically separate from physical sex is a question that cannot be answered definitively yet. However, with the greater publicity for transgender identity from individuals like Jenner, it is likely that more research that focuses on biological mechanisms for gender identity will be conducted. These ongoing studies on gender identity not only offer a promising beginning, but also are feats that celebrate the burgeoning harmony between biology research and gender identity.

Rachel Sebastian | UTS Staff Writer  
For further investigation, read:  
*On the Necessity of Gender Reassignment Surgery*  
Available at [sqonline.ucsd.edu](http://sqonline.ucsd.edu)

## LGBTQIA: Hindered by Hurdles in Healthcare

Since the Supreme Court's recent affirmative ruling on gay marriage in July 2015, cities across America have been celebrating with vibrant citywide parades, colorful support speeches from prominent politicians, and arms opened wider than ever to the LGBTQIA (Lesbian, Gay, Bisexual, Transsexual, Queer, Intersex, Asexual) community. Although the court decision is a monumental stride of progress

towards equality for the United States, members of the LGBTQIA community are still subject to negative stigmas associated with an individual's sexual orientation or gender identity that lead to discrimination from medical professionals, inequality in health insurance sectors, or even outright denial of care. There are several overlooked healthcare issues that those of the LGBTQIA community encounter, and the discourse surrounding such issues should be better understood.

Members of the LGBTQIA community exhibit specific health risk profiles—gay men are twice as likely to have cancer and make up two-thirds of all new HIV infections each year; lesbian and bisexual women have higher rates of breast, ovarian, endometrial, and cervical cancers than heterosexual women; and transgender individuals reported

more frequent cases of "depression, anxiety, suicide ideation, and lifetime violence victimization" in comparison to cisgender people. Such disparities in overall

health can be attributed not only to social factors, but also to the reception of unequal general health care or lack of specialized healthcare for the LGBTQIA community.

Ted Canterbury, the Assistant Chief of Clinical Social Work and active member of the LGBT Workgroup at the Veterans Affairs Hospital in San Diego, CA, contends that transgender individuals experience the most severe healthcare disparities:

"specifically for transgender folks, there are insurance issues and legal issues that inhibit their ability to get comprehensive health care. Not just [in relation to gaining coverage for] gender assigned surgeries, but primarily with care associated with the transgender process." The primary pitfall of currently existing transgender healthcare is not the unequal provision of general health care—it's the lack of specialized healthcare for LGBTQIA folks. A transgender male, for example, may still need screening for breast or cervical cancer—if a healthcare provider treated him strictly as a biological male, significant aspects of his health could be overlooked and cause serious health problems

down the road. Specialized LGBTQIA healthcare training would increase health care providers' awareness to specific risk profiles and significantly

aid them in providing comprehensive health care to LGBTQIA patients.

Although work remains to be done towards alleviating the gap in healthcare access and delivery for the LGBTQIA community, recent changes, such as the increase of national attention to LGBTQIA rights through the recent passage of marriage equality, may be helping to reduce healthcare disparities for lesbians and gay men by providing greater access to health insurance. Furthermore, making changes such as actively striving to deliver equally routine screening tests to the LGBTQIA community, creating LGBTQIA work groups or committees at hospitals, providing information to LGBTQIA patients about existing LGBTQIA health clinics, and consciously striving to integrate LGBTQIA education into undergraduate, nursing, and medical school can be utilized to aid in providing equal healthcare access to all. By piquing the U.S.'s social conscious to the health care disparities experienced by the LGBTQIA community and taking the actions delineated above, health care personnel, health insurance policy makers, and the general public can work together to provide equal, accessible, and beneficial healthcare to all.

Anika Ullah | SQ Staff Writer  
For more stories, visit [sqonline.ucsd.edu](http://sqonline.ucsd.edu)

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## SQ INSIDER

Visit the LGBT Resource Center, which hosts many different talks and seminars about LGBT equality in the social context.

Join one of the various LGBTQIA clubs on campus! To find out which organization fits you, visit the LGBT resource center's website for a full list.  
lgbt.ucsd.edu

## UCSD CLASSES

Ethnic Studies  
142-Medicine, Race, and the Global Politics: focusing on how external characteristics (ethnicity, class, sexuality, etc.) shape and are shaped by the social construction of health and disease.

CGS  
105. Queer Theory: Studies different histories and methodologies that relate gender, race, class, and nation to construct the evolving interpretation of queer.

# LEARN ABOUT THE LGBTQIA COMMUNITY

## CAREER SENSITIVITY

American Medical Association (AMA) has online resources to help physicians make their practices LGBT friendly, and provides materials for all to spread awareness of LGBT health issues.

The San Diego LGBT Community Center, located in Hillcrest, provides many direct services to the LGBT community, such as counseling, HIV, youth, and Latino services.

## UCSD RESOURCES

Parents, Families and Friends of Lesbians and Gays (PFLAG) offers educational brochures and programs, as well as support meetings for people of all ages.

GLAAD is an organization for allies to help spread acceptance and show empathy towards all people, with plentiful tips on how to stay inclusive and compassionate.

## COMMUNITY RESOURCES

## Get Involved with Saltman Quarterly

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[sqonline.ucsd.edu](http://sqonline.ucsd.edu)

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**Statement from the Editor:** In light of recent events that brought more media coverage to LGBTQIA issues, SQ decided to explore the connections between biology, transgenderism and healthcare. These articles may not be based on the staff's personal experiences, but they reflect the experiences of those interviewed as well as the countless hours of research.

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