Health Breast Cancer Screening

by Alicia Matthews, Ph.D. During the past 50 years,

women's health status has improved a great deal.

However, cancer continues to be a significant health threat. Breast cancer is the most common cancer among women. It is estimated that one in nine women will develop breast cancer at some time during their lives. The primary risk factor for breast cancer is increasing age. Additional risk factors include family history, prior history of benign breast tumors or a previous diagnosis of breast cancer, reproductive history (e.g., older age at time of first child), postmenopausal estrogen replacement, and dietary factors.

Despite the high rate of breast cancer, 93 percent of women whose cancers are diagnosed at an early stage survive their illness. While breast cancer survival rates are improving for most patients, poor, non-white, and other underserved populations are not experiencing these positive gains. For example, African American women, on average, are less likely to develop breast cancer than white women; yet are more likely to die from the disease once diagnosed. Studies suggest that the major contributor to lower breast cancer survival rates in African American women is cancer stage at time of diagnosis. Compared to other women, African Americans are more likely to be diagnosed at a later, more advanced, stage of cancer.

To date, methods to prevent breast cancer do not exist. However, early detection techniques are effective in the fight against breast cancer; these include mammography, clinical breast examinations, and breast self-examinations. Historically, African American and other women of color have not participated in cancer early detection programs. Barriers to cancer screening have included lack of



knowledge about cancer screening, emotional issues such as fear or embarrassment, perception of low risk, lack of access to healthcare services, misinformation, and the reduced likelihood of being referred for screening by medical providers.

Despite these barriers to early detection, some important strides are being made. In the last decade, mammography rates for white women increased from 30 percent to 61 percent; for Black women from 24 percent to 64 percent; and for Hispanic women, from 18 to 52 percent. An increase in screening among low-income women--- who have been part of the focus of recent public efforts to increase breast cancer screening-has significantly contributed to the overall rise in mammography rates for African American women.

Although breast cancer screening rates have increased, additional efforts are needed to improve participation in early detection screening by lesbians and women of color. Several area community agencies, including the Lesbian **Community Cancer Program** (773-561-4662), Howard Brown Health Center (773-388-1600), and the Chicago Women's Health Center (773-935-6126), provide breast cancer screening in a sensitive and supportive environment. Cancer screening is an important and proactive step that will improve the health of our communities.

Dr. Alicia Matthews is an assistant professor at the University of Chicago. She is currently conducting a study exploring quality of life in lesbians who have either a current diagnosis or history of breast cancer. For further information call

Intersex Feminism The gray area of gender:

Gender Identity by Lynnell Stephani Long

With the proof that Intersex children are born everyday, and most of us that were born in the '60s are alive and well, I think it would be hard for anyone to say who is a man or woman and who isn't.

No one wishes to become a victim of the medical profession, but it is happening beyond our control, and that of the Intersex Society of North America. Intersex activists are working hard to educate the medical profession about the needs of Intersex children. If a child is born hermaphrodite, or with ambiguous genitalia, who should decide if that child is male or female?

For decades the medical profession has relied on their own judgment as to who are boys and who are girls. The decision to assign someone male or female lies strictly in how large your clitoris or penis is. There are stories

(<http://www.isna.org/>www. isna.org) where girls with enlarged clitorises were assigned as boys until they reached puberty when many of them started menstruating.

There is a gray area in regards to gender, whether you wish to accept it or not! Nothing is as black and white as it seems.

There are those among us who have a hard time fitting into this society because there are only two boxes, male and female, in which to fit. After reading Stone Butch Blues, by Leslie Feinberg, I am convinced that the struggle for gender identity is as old-if not older-than the gay movement. In the '50s butch lesbians struggled with the fact that there was no room for them in a society of feminine women. Many of them were seen as women wanting to be men, even if they were only expressing their desire to wear masculine



clothing. Butch lesbians have always had it hard. If they wear men's clothing most of them are told that they should transition to female-to-male transexuals, even if their desire was not to be a man. In the '60s, at the start of the women's movement, a lot of butch lesbians were out-cast even more so because "real" women didn't act like men.

The point I'm trying to make is simple: we live in a society that for decades, for some reason, has decided to turn its back on gender outlaws. While today it may be acceptable for butch lesbians to wear men's clothing, it's still not acceptable for Transexuals to express their feminine side, or for gay men to wear women's clothing and not be considered a Transexual.

We still have yet to discuss those individuals whose gender, not genitalia, is both male and female, Bigender! Because we live in a strictly male/female society those individuals continued to be closeted because of their gender identity.

With all the technological advances in the medical profession, we as a society still have not evolved enough to accept the many facets of gender. What are we afraid of? Why are we holding on to a portrait of gender that no longer exists? What will we lose if we accept the gray area of gender? We will lose nothing, but we will gain a sense of freedom. No longer do we have to exist within a box that doesn't fit our personality or gender identity. Whatever we decide our gender to be, even just for that day, is OK. We could exist in a world where our gender can be as fluid as what clothes we wear, or don't wear. The gray area of gender exists.

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CODES: ISO = In Search Of LTR = Long Term Relationship

Those who have VOICE following their printed introductions have also left recorded introductions, Dial 1 (900) 454-0101.

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BIBM top 5'9", 155#, 25 y/a discreet, nice body/ looking, military seek slim guy any race under 37 y/o. Lao (poger).

(10)

Seeks professional BTM GEM: GWM, 50, 5'10". 185#, Professional, HVbrown/blue top, boyish looking seeks similar bottom boyish looking GBM 25-40 for permanent relationship. Write Tom, PMB, d

(10)

Cute Latino jock, tennis, soliboli, etc, 5'8" 180# HIVseeks tall handsome hung man for possible LTR. Voice (10)

GEM 25 who is a funny, caring down-to-earth guy, looking for long term relationship... Must be in apod shape. Send photo. (10/4)

BiBA top 5'9", 155#, 25 y/o discreet, nice body/ looking, militory seek slim guy any roce under 37 y/o. Leo

(pager).

(10)

GWM, 50, 5'10", 185#, Professional, HIV-, brown/blue top; boyish look ing seeks similar bottom boyish looking GBM 25-40 for ermanent relationship. Write Tom, PMB,

(11)

Black attractive gay 20 y/o handsome, submissive, versatile in bed, with smooth attractive chocolate body, visiting USA. soon, seeks genuine gay partner, seriously, for long term relationship, age unimportant. Philip

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	Phone:	Use own PO/Beeper/VM/e-mail, \$5	\$
	Signature:	Total Amount Enclosed: Send to: BLACKlines/Outlines, Belmont, Suite 2-D, Chicago, I	

Surryani, Ghano. If interested, e-mail me of

GWM, 42, looking for LTR wants versatile black male. Exchange photos or call VM (9)

PERSONA

Classified

WOMEN

SBF seeking 5BF age 37 to 39 starting out as friends and working slowly to a LTR. No games, no drugs, no bi's. Looking for a soft sery woman, someone who is hanest, coring and willing to shore. Poger (10)

GWF, butch, top, 30's ISO femme blande bamb! (Doesn't have to be natural). You must be open minded, kinky, nasty and sassy, yet sweet and funny, with many interests. No bi's or game players please Pager (10)

SF, 28, 5'0", 180#, has children, looking for that special someone who remem bers and enjoys the "little things" that can make a milationship so special. I enjoy movies, walks, private pionics, reading, and especially evenings at home. I bok forword to hearing from you and if you are not interested good luck in your search for that someone special and remember always be true to yourself.

BLACKLINES

SBF seeks same for fun and maybe LTR. Roce not important. No drugs or crazies. Poge

Delightful, delicious, de-

lovely. Dynamic, progressive, queer, out lesbian, fairly fit, 30-something grad student with an intellectual bent, touch of whimsy and quirky sense of humor, ns/nd, loves Cole Porter, theatre, music (world, jozz), guitar (dassical, Spanish), dancing (club, salsa, swing, ballroom). Seeking possionate, self-assured, women for city highlinks, adventure and cerebral yet piquant conversation. NL/Voke

SEGF Feminine non-

smaker is ISO of some. Someone who is financially and mentally stable. Am also spiritual, intelligent and very honest. Am looking for friendship and possible LTR. Race unimportant. Studs or butch need not respond, please. Age oetween 36-50. VM (9)

Block attractive sincere famale. Seeking other block lemoles for a lasting relationship and friendship Interests ore reading, music, movies, some sports, etc. Mature-mindd ladies. NL Box/Voice (9)

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LYNNELL from 23

Unfortunately many people in the gray area continue to live in shame, fear, and uncertainty. For if they came out, who will understand them? How will their choice for gender be accepted in a world where everything is black and white, male and female?

There's a saying that old dogs can't learn new tricks! This isn't a trick; this is a matter of life or death. Whether we as African-Americans choose to accept the gray area or not it will not disappear. We are being forced to face a new generation of Lesbian, Gay, Bisexual, Transexual, Intersex, Bigender, and etc. young adults. Their politics, choice for clothing, and gender identity is different from what we once believed. Instead of fighting the future, I say we embrace it with open arms.

You can learn more about gender identity at <http://www.ifge.org/>www.ifge.org, <http://www.isna.org/>www.isna.org, <http://www.gender.org/>www.gender.org or <http://www.genderpac.org/>www.genderpac.org. Email Lynnell Stephani at

<mailto

Enjoying Northalsted Market Days. Photo by Preston Shumaker



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Black & White Men Together

Marking 20 years

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