

*Out/Closeted in the Quadrangles:  
A History of LGBTQ Life at the University of Chicago*

**ORAL HISTORY PROJECT**

**INTERVIEW #61  
ZHOU, NING (1986 - ) MD 2014**

*At U of C: 2010-2014*

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*Interviewer: Molly Liu*

*Transcript by: Molly Liu*

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**Interview (August 16<sup>th</sup>, 2013) in E 58<sup>th</sup> St & S Ellis Ave, Chicago, IL:**

[47:26]

ML: Yeah. Just to start off with, how did you come to the University of Chicago?

NZ: So I came here for medical school, and at the time I was trying to decide between coming here and going to St. Louis, going to Washington University in St. Louis. I ultimately decided that I really enjoyed the program here—I was also looking at Northwestern as well. I ultimately decided that the program at Pritzker, I really liked. I liked the atmosphere here, the people I met, Chicago as a city I really liked. And partly because there's a very active gay scene here in Boystown. I thought that would be—I thought that Chicago would be a fun place to live for medical school.

ML: Yeah. So I guess your sexuality was already kind of a consideration for you when you came to medical school?

NZ: I think so. It was—when I came to interview, I—or when I came to revisit, I made it a point to go to Boystown and check out what the scene was like. I was impressed by how in this neighborhood there are so many bars and restaurants. It seemed like a really nice place to be. St. Louis didn't have anything remotely similar to it. There were a few gay bars but they were kind of really scattered. It was definitely an attraction I think of coming to Chicago.

ML: Do you think it was an important part of your decision to come here?

NZ: I think it was a factor. It probably wasn't—it definitely was not the only factor. You know, other than the gay night life scene here, Chicago is a beautiful city. I really liked the university here. There are things about the curriculum here that are different. It's pass/fail here every year except for the third year, whereas at Wash U it was only pass/fail the first year. They give a—the financial aid package was much nicer here as well. There were

multiple factors involved. Kind of a plus that it was a big city and had a good gay life.

ML: Yeah, you mentioned—you mention the atmosphere of Chicago a couple of times when deciding to come here. Can you talk I guess more specifically about what?

NZ: Yeah, the students I met, I really enjoyed kind of spending time with them. It seems like because the University of Chicago is located in a low-income poorer part of Chicago, there's a lot of emphasis on community service work and working with the underserved, a focus on health care disparities, which is actually the first class we take when we come to med school. I really like that. And I felt like that was a big difference. I didn't get the same sense at Northwestern. There's a very different patient population up where they are downtown. It didn't seem to me that they were making as much of an effort to reach out to underserved populations and do community work that way.

ML: Yeah. It's always striking to hear med school students talk about being in Hyde Park, I guess, and serving underserved populations. Coming from the college, we're in the same place, but the emphasis can feel pretty different. [NZ: Yeah.] Have you done anything in medical school besides that class?

NZ: There are four or five student-run free health clinics. Several of them are here on the South Side, a couple of them are in other places in Chicago. So I've done volunteer work with those organizations. I've been a part of—I've also helped organize medical student volunteers to help out at flu shot drives, administering flu shots to the community. That's been a lot of fun. So you know, I definitely feel, especially the first couple of years, that I've been pretty active in community service work. After the first two years, during the third year, it's much more difficult to do that.

ML: I've heard that third year is really, really busy for med school.

NZ: It is very busy, and the biggest part is that our schedule is very unpredictable and it's hard to plan anything outside of third year. It's a very rewarding year, on the other hand. But the hours are very long. We get here really early in the morning and stay late at night, and work six days a week.

ML: Yeah. What other organizations have you been a part of in medical school?

NZ: I was pretty heavily involved my first year. I was one of the co-leaders of several organizations. One of them is OUTPatient, the LGBT medical student organization. One of them was APAMSA, the Asian Pacific American Medical Student Association. Another was the Pritzker Dance Group, another was the Integrative Complementary, and Alternative Medicine Interest Group.

ML: Wow! You did everything, it seems like. That's impressive.

NZ: It's very—it's very easy to be involved. They were things I was interested in. I also knew that I like to get involved. Initially I was like, I need to be careful not to get overinvolved,

but it happened how it happened, and I still—I don't regret any of it. Because they were all in things I enjoy doing. I had some really incredible opportunities as part of those organizations.

ML: Right. And you're still alive today, despite being a med student and co-leaders of four organizations or something in your first year. [NZ: Yeah, I am.] Can you talk a little about being co-leader of OUTPatient?

NZ: Yeah. It was—so the purpose of the group was to provide kind of a community within the medical school to be supportive of LGBT medical students and health-related issues. We organize a couple of social mixers with the medical students and the residents and attendings at Chicago. And also mixers with other medical schools in Chicago. We've co-sponsored events. It was easy to co-sponsor events with other organizations, especially if I was a leader in another organization. For example, with PAMSA, we sponsored an Asian LGBT film soiree. We watched the film *Saving Face*. I don't know if you've heard of that.

ML: I think I've heard of that. Taiwanese film?

NZ: I think so. It's kind of a comedy, Chinese-American comedy, about a girl who I believe was a surgical resident at the time. She develops a relationship with a dancer. It's very humorous. The mom manages to get pregnant at the same time. There definitely—there are definitely—there's a lot of humor with respect to Chinese-American culture and sexuality.

ML: That's really neat! I feel that as a—as a gay Asian-American it can be hard to find people to who are like that too.

NZ: Yeah. And I would say with the OUTPatient group, with other events that the group has done that I may not have been directly involved in, is doing short film screenings of LGBT-related themes, short films, and organizing talks on gender reassignment surgery and getting one of the plastic surgeons here to give that talk. There have been a lot of support and interest in LGBT health and issues in the community and also with the medical students.

ML: Right. It seems like you were thinking about the gay scene of Chicago while you were applying here, and you were co-chair your first year of medical school of OUTPatient. [NZ: Mm-hm.] So it seems like you were pretty confident in your sexuality when you came here. Had you been out for a while?

NZ: I guess so. I guess I first came out when I was 20. So it's been a while. It's been quite a few years. Initially at the beginning there was definitely a period where I wasn't as comfortable being so out. But after a few years—and when I was applying to medical schools I was definitely out in the process. I didn't want it to be something I was ashamed of or—and I wanted to know that where I was going was supportive of LGBT issues.

ML: Did you come to medical school right after undergrad, or did you spend—?

NZ: No, I spent a year, I took a year—I deferred medical school for a year and taught English in China.

[10:01]

ML: Oh! That's really cool.

NZ: Yeah. It was a lot of fun. I'm glad I did it. Also had the chance to travel a bunch while I was in Asia and that was an incredible experience.

ML: Yeah. So can you talk about the social atmosphere at Pritzker, and the atmosphere towards LGBTQ issues while here?

NZ: Yeah. I feel like Pritzker has been really supportive of LGBTQ issues, and the atmosphere here is—I've been out since my first year of medical school, and I've never really felt like there's been any issues. There are—in my class of 88, there are probably 5 or so people who are openly out. There was kind of a small community. And across other class years, and among the MD/PhD students, there are definitely a lot of other people who are out. One thing that the administration did to show their support is that they had us record—they have the Pritzker Podcast, and they had one focused on LGBT themes. Got a group of us together and basically had us talk about our experiences. This is for future prospective medical students who were interested and maybe applying to Pritzker to come here for medical school. So I feel like it's been a very supportive atmosphere.

ML: Yeah. So I've heard that Pritzker is pretty supportive, but medicine itself—medicine has a reputation of being a conservative profession, I guess. Do you think that's true about medicine as a profession as opposed to med school?

NZ: I think there's a perception that medicine is conservative. I think it's probably true in some places. And definitely it varies depending on attending and probably specialty as well. I have heard of instances of out students who go back in the closet in medical school because they're worried about them being out affecting their medical career. But I haven't really seen any of that here. I've been out to attendings and residents and other medical students, and I've never really experienced any discrimination for that or felt uncomfortable for doing that. I would imagine surgery to be maybe the most unfriendly towards LGBT people, but actually when I was on my surgery I had a resident who was openly gay, she was married to her wife, who was also going to be a resident also. She was saying how supportive the whole surgery department was. [ML: That's really great to hear!] It was really great. Actually, yeah, I could probably give you her information, you could talk to her.

ML: Yeah! That would be great, actually. After the interview. What sort of—you're going to be a fourth year?

NZ: Yes. I am a fourth year now. I'm in my second month. We started our fourth year in July.

ML: Okay. But yeah, so do you have an idea of the sort of medicine you're interested in practicing?

NZ: Yeah. I'm interested in doing psychiatry, specifically child and adolescent psychiatry.

ML: Can you talk a little about why you're interested in that?

NZ: I've always been really interested in the brain and the mind. I studied neuroscience as an undergraduate, and actually came to medical school thinking that for sure I wanted to be a neurologist, because I thought that neurologists were doctors that deal with the brain. But then as I did my neurology and my psychiatry rotations, really what I was interested in was the brain, and neurologists didn't deal with the—sorry, what I was really interested in was the mind, and neurologists don't deal with the mind. Really that's the domain of psychiatry. I got the sense that neurologists treat the brain like tissue, and they work very hard to preserve that tissue whether you're talking about the blood supply or the ventricles. But they didn't really think too much about I think the higher functioning of the brain, which is what I was really interested in. I had done some work as an undergraduate on social emotions, admiration, compassion, and I realized what I was really interested in was the mind. And what I was interested in was wellness and resiliency, and how to—and this idea of positive psychiatry, how to not just help people exist but really thrive. Quote “reach their full potential.” I felt that psychiatry was a lot more optimistic, because in psychiatry you see patients improve, and you can offer interventions that really help patients. I didn't see as much of that in neurology. I know that that's starting to change, but you know, that's traditionally not been the case in neurology. You can diagnose patients but you can't offer as much in terms of therapy in helping them to get better.

ML: Yeah. I guess therapy is mostly the domain of psychiatry, right? [NZ: Yeah.] So can you point to any professors or classes here that have been influential in shaping your approach to psychiatry or to medicine in general?

NZ: Well, as a second year we take a course called “Human Behavior in Health and Illness,” which is kind of an introduction to psychiatry and principles in psychiatry and theories of it. I found that really interesting. And I also—we took neurobiology, which I also really enjoyed. During our clinical pathophysiology class we have modules on neurology and psychiatry. I think during our psychiatry module, what was really fascinating was that we have lab time every day, and during that lab time we usually will do—it's like case-based learning. But for psychiatry they actually brought in patients and they interviewed them in front of us. It was just so interesting, how they brought patients in and interviewed them, and I was really captivated by the whole process. And I realized as we were studying neurology that I wasn't as interested in neuropathology. A lot of the diseases in neurology didn't strike me as interesting—I wasn't as interested in them as I was the diseases in psychiatry.

ML: Right. Yeah, that's makes sense. So we've talked a little bit about your background, but do you want to talk a little bit more about it? Where did you go for undergrad before coming to med school?

NZ: Sure. I went to the University of Southern California in Los Angeles. I studied neuroscience there. Before California I was born and raised in Salt Lake City, Utah. Which at the time I didn't realize how different Utah was from everywhere else, until I left Utah for California. That was such an eye-opening experience. Incredible. The diversity and openness towards homosexuality. Where I grew up, it was a pretty homophobic environment. Where it was—Mormon culture was the majority and kind of, homophobia was kind of the norm. I myself didn't realize how ingrained the homophobia was in me until I left Utah and actually spent a year in Los Angeles. Before that I was planning on marrying a woman and having a traditional family. I never even considered—before, I never considered that it was even possible to live, to lead a life with a same-sex partner and have that be okay.

ML: Before you came to California, had you been kind of aware that you were attracted to—?

NZ: Yeah, I knew since I was in elementary school that I was attracted to other—to men. But I think I just repressed it. I knew that I had those feelings and attractions. I knew that I was never sexually attracted to women, but I was able to become really emotionally close to women. I had lots of close female friends, so I thought maybe that would be good enough. You know, maybe I could be happy being married to a woman. It was not until my second year of college that like—I went through a period of questioning. I think I was still in denial but kind of knew. Then when I met my first boyfriend, I just kind of—nothing else mattered. I knew I liked him and that was it.

ML: Right. I guess in Chicago—if you want to talk about it, you mentioned that you were partnered on the form. Where have you met people to date while you've been here?

[20:01]

NZ: So there—when I first came here there were mixers at the—I can't remember what it's called, but the LGBT center here on campus, there were social mixers. I went to those and met law students and other graduate students in the social science programs. And so through that made some friends. Through those friends was invited to a law mixer in Boystown at a bar in Boystown, Sidetrack. At that bar was introduced to my current boyfriend, my current partner. Who actually was a—so I was a first-year medical student and he was a second-year law student, and he was one of the leaders of OutLaw, which is the law school organization. He had actually organized this six-school OutLaw mixer, and that's where we met. And I guess the rest is history.

ML: Right. Has it been interesting, I guess, dating between the med school and the law school? Both super intense schools, I guess.

NZ: But my boyfriend is very not. He's an atypical law student in that—like, he did well, but

he didn't kill himself to be at the top of law school. He thought that he was actually very relaxed during law school, actually much more relaxed than I was. I guess he noticed early on that the amount of time he studied didn't correlate with his performance on his exam. [ML: May as well not study for it then!] Exactly! That was his kind of mentality. Or he would just cram before. He did well. He's also very bright, and I think had I been in law school, I wouldn't have been able to pull that off.

ML: Right. In general, where has your social circle in Chicago been drawn from?

NZ: I think a large part of it would be my med school classmates. My classmates are amazing people and I've got lots of great friends in the class. Through that, through my boyfriend, his friends as well. That would probably be the majority of the social network here.

ML: Where have you lived during the time that you've been in Chicago?

NZ: During my first year I lived in Hyde Park, I lived over in Regents Park. And then my second year I lived in River North. During my third year I moved to the Loop, in the theater district, and that's been where I've lived ever since.

ML: Nice! How have you enjoyed living in those three places?

NZ: I—so living at Regents Park, the best part of that was that most of my classmates lived in Regents Park too, so it was a very social experience. I didn't like living in Hyde Park that much, and Regents Park I felt was far enough away from the medical school that I would still have to take a bus to get to school, and sometimes in morning that would take 20 minutes because there were so many people on the bus and it would have to stop so many times. I didn't have a car and I felt kind of trapped in Hyde Park at times. Chicago is such an incredible city, and you know, I wanted to be in the city. Once I moved out of Hyde Park, we moved to River North, with my boyfriend. I really liked living there, right above the State and Grand Red Line stop, next to the Hotel Palomar. Really loved that location. The space—we loved that location and loved that apartment, but it was very small and kind of very cramped. Then my boyfriend's sister got a job teaching on the South Side and would be moving in with us, and that's why we moved to the Loop, because we wanted another bedroom. Our current place is a beautiful apartment, we've got a lot more space, which is nice. The location is great, we've got a great view. It's right kind of next to all of the transportation, all the—every line passes by within a block of where we live, which is really convenient. We live right about a Walgreen's, there's the city Target like two blocks away, and all the shops on State across the street. So there's Zara and H&M, great shopping. It's great. It's quieter at night. Things tend to close down a lot earlier than they did in River North, but we also kind of enjoyed that it was more quiet at night. It was very easy to cross the river and go to restaurants, and usually if we go out we go out in Boystown. So it's pretty convenient to get up there too.

ML: Yeah, it sounds really nice, living in the Loop. [NZ: Yeah, it is. It is.] So I'm not sure med students have any free time, but if you do, what sorts of things do you like to do?

NZ: So med students have a lot of free time their first and a little bit in their second year. Third year not so much. Fourth year, depending—fourth year is very elective-based, so depending on what you're doing you may or may not have a lot of free time. I haven't had a lot of free time so far because I've been on my sub-internships, been pretty busy. What I like to do in my free time...I like to do yoga, take fitness classes. Right now I'm really into mindfulness meditation. I like to go to the beach, I like to go to concerts at Millennium Park. Go to explore restaurants. My boyfriend and I really enjoy going out to eat at different places. And Chicago has so many great restaurants to offer, so that's endless. We like to watch lots of movies. Like to go see shows, musicals, plays, going on in the city. And then we like to—we'll go out in Boystown and go out dancing too.

ML: Yeah. So I guess—fourth year, you're probably applying for residencies now, right?

NZ: I am.

ML: What sorts of places are you looking at?

NZ: I'm going to apply broadly. I'm really looking at—I think I'm really seriously looking at New York and California as places that I'd really like to be. Mainly because they have really strong psychiatry programs. So that's kind of my—but I'm going to apply to places outside of those areas too. Keep my options open.

ML: Besides the strength of the psychiatry programs, is there anything that you're looking for, in the place that you might be?

NZ: Yeah. I know that I want to be in a big city. And...you know, and I do think, I do want to be able to be openly out and not have that be an issue. I know that places like New York and San Francisco, there's lots of—the gay scene is very active, and that's not an issue at all. I don't think I'd go to a small town rural area at this point.

ML: Yeah. It's probably hard to go back to a Salt Lake City-type place.

NZ: Yeah, it is. It is. And you know, I really like everything that big cities have to offer in terms of diversity and cultural events, things in the arts. Just the kind of richness of things that you can do in a big city is so much more than you can in a small town or rural area. Not to say that those areas are bad, but what I'm looking for is to be in a big city.

ML: Yeah. So I guess, looking back, what role do you think Pritzker has played in your life? Or looking now, I suppose, since you're still in medical school.

NZ: What role has Pritzker played in my life? It's where—it's played a big role. This is where I came for medical school, so it'll always—I'll always have fond memories of here. The faculty and the staff have all been so supportive and kind, and here on rotations, the attendings and residents are very interested in education. It's been a great experience and I really don't have too much to complain about. I'll always have fond memories of this place.



ML: Do you think your experience here has been pretty typical?

NZ: I think so. I think Pritzker has so much to offer, so many resources. Just from the sense that I get from my classmates, people do take advantage of the resources that they have, and they do find great mentors. I guess I don't feel like I'm an anomaly or anything. I feel like my other classmates were motivated driven people who are doing amazing things. Yeah. I will say that I don't think my experience is unique. Of course my specific experience is unique to myself, and it's my experience, but I don't think that it's difficult to have a great experience at Pritzker.

ML: That's really great to hear, actually. Do you think that things are different for med students of the time that you entered compared to those who entered before or after, in that short time?

[30:54]

NZ: Are you talking specifically in terms of LGBT? [ML: Yeah.] I feel like in the class above me, there was only one person who was openly out. Our class is small, there are only 88 people, so depending on how many people tend to come, I think it's hit-or-miss how many people are LGBT, openly out, that kind of stuff. I feel like, I do feel like at the time, that the administration has been equally supportive from when I first got here to now. I think if things are changing, they're only changing for the better. I think the hospital is starting to realize the importance of LGBT health and issues. I have been a part of a group looking at how to incorporate more LGBT health and issues into the medical school curriculum, how to do that.

ML: That's really interesting. Can you talk more about that committee? What sort of LGBT issues—?

NZ: Yeah. Unfortunately one of the main people who was involved in that left—faculty. Is not here anymore. But basically, we were looking at where we could integrate LGBT health issues within the existing curriculum, where it would make sense. The director of our clinical skills program was very supportive and was very open to adding things. For example, as a part of our clinical skills, we have standardized patient experiences. There are a couple that are LGBT health-focused, but we also talked about you could also just randomly make some of the patients gay or lesbian or transgendered and have that completely unrelated to the health problem that they're presenting with, just to make it—make it so that you'll have LGBT patients, and they won't always have an LGBT-specific issue that they're coming in with. They may have an issue and just happen to be LGBT. Normalize that experience, I guess.

ML: Sure. What are some of the challenges that you see for LGBT patients who are coming in for problems that are or are not related to them being LGBT?

NZ: I think that LGBT patients may not be aware of all the resources that are available to

them and may not know if their physicians or providers, how open and accepting they are. I think UChicago, for the most part, has been very supportive. But I imagine there are some people in Chicago who are not as open and not as supportive. I imagine that, as an LGBT person, not knowing, that uncertainty might be a factor. And not knowing what is available, and that it's open and accepting. I don't know. From what I've seen—and I've had patients that are LGBT and it hasn't been an issue at all. I think at times there does need to be more education, especially among older physicians. Yeah. Did I answer your question?

ML: Yeah. It's good to hear that things are improving though, as wider attitudes change about LGBT people.

NZ: Yeah. I recognize that this is also my own perspective. Being an out gay male, maybe my perception has been biased. Maybe it's different for someone who's in the closet still, and maybe they're more aware of prejudice. But I really haven't seen much of that, actually at all.

ML: And coming from a pretty conservative milieu, Salt Lake City, you're probably more aware of the challenges than someone who's grown up in a big city or something like that.

NZ: Yeah. No, definitely. I think it would be difficult to be this openly out in Salt Lake City.

ML: So there's a question that we like to ask in these interviews, which is why did you decide to be interviewed for the project?

NZ: I think that your project is a great project, and I'd like to contribute what I can. It's also cool, the idea of being a part of this project and being part of the history and the narrative here at UChicago. So I guess, I'm very supportive of the project, and I just wanted to help out if I could. Yeah. I don't know if many other places are doing things like this, but I think it's great.

ML: Thank you! Yeah, we really appreciate you talking to us. Yeah. So we're always on the lookout for memorabilia from your time at UChicago, or any other people that you think might be good for us to interview. Do you have anything from OUTpatient or anything like that? Or people that we should—

NZ: Yeah, I can definitely think of some names. Lots of people to recommend. [redacted], she's currently a second-year surgery resident. She actually got married to her wife in the spring, and her wife is going to be an intern in the EMT department. She's offered to talk to the medical school if they had questions about applying to residency and surgery and being out, so she would definitely—though I imagine she's really busy, being a surgery resident, so scheduling might be a challenge. But I imagine she'd be open to speaking with you.

ML: Yeah, that's really great. We haven't managed to talk to—we've only talked to med school

students within Pritzker, so it's good to have a resident to talk to.

NZ: There are a lot of them. Have you talked with Phillippe?

ML: Yes. I haven't, but I transcribed his interview [Interview #17], and he seems really great.

NZ: He is. If I think of others—you've talked with Nathan [Interview #42], you've talked with...who else? I have another class—have you talked with [redacted]?

ML: We have not.

NZ: He might be willing. He started in my class but is currently a third-year now. Yeah. [redacted].

ML: Was he also one of those people who was in the Pritzker podcast? His name seems familiar.

NZ: Yes. In the class below me, [redacted]. She was in charge of OUTpatient the year after us. And in the first-year class, I guess he's a second-year now. His name is [redacted]. Those are some people in the medical school. Trying to think...yeah. If I think of any more, I guess I can let you know.

[40:14]

ML: Sure. This is really helpful. Thanks! But yeah, that's actually all of the questions that I can think of to ask...

NZ: What are you interested in—what's the scope of this project. Is it all of the University of Chicago?

ML: Yeah. Anyone affiliated—

NZ: Have you interviewed anyone in the law school?

ML: We've interviewed a few people in the law school. I don't think we've had anyone who's graduated later than 2005 or so, but we've interviewed a couple of people from the '80s or the 2000s. If you have names, we'd be happy to add them too.

NZ: Yeah. You can reach out to OutLaw, that's their organization. I can ask my boyfriend, he used to lead it, so he would know.

ML: Yeah. And if your boyfriend wants to be interviewed too, that would be cool.

NZ: Although it might be hard. He's working downtown so it might be hard to get him to come here. But yeah, I can ask him.

ML: We do interviews everywhere. I remember going to Ravenswood, biking up to the Loop to talk to Nathan, so location is not—

NZ: Oh, if location's not an issue, than I'm sure—and he has other law school friends too.

ML: Yeah, that would be fantastic.

NZ: I think I have some friends, I know some people in the, who are in other graduate programs. [Redacted]. He's in developmental biology. And then are you also wanting to talk to attendings and faculty and stuff?

ML: That would be really great too. Like I said, we haven't had anyone who's an attending or a resident, or anyone in the hospital staff really, so that would be valuable to talk to as well.

NZ: Hm. [Redacted] left. I know that there are LGBT attendings, I'm just kind of blanking at the moment. Did Philippe offer any other—? I feel like Philippe would know.

ML: I think the person who interviewed Philippe forgot to ask him, but I can always follow up.

NZ: Yeah, I think Philippe, he's a second-year psychiatry resident, and he did medical school here at Pritzker too. So he would—he would know people.

ML: If you think of anyone afterwards, you can always—

NZ: And you interviewed Dr. Mason [Interview #40].

ML: Yeah.

NZ: I don't know, she might know other people too, in terms of faculty. Otherwise I can't really think of anyone off the top of my head. Right now. Trying to think of all the rotations I did. Oh, in pediatrics, one of the chief residents, [redacted]. I think he would definitely be open. Yeah.

ML: So yeah, we covered a lot of group pretty quickly. Is there anything that you want to add about your life, for the record?

NZ: Yeah, I feel like we did cover a lot of ground. I've been really happy here at Pritzker, at the University of Chicago. I think it's really nice that the hospital is on the same campus as the undergraduate and the other graduate schools. It seems like it's easy to meet people in other departments here. In other schools the medical school and the hospitals are on a separate campus, so it's not as easy to—to make those connections. But I've had a great experience here. Are you—are you interested in talking to people who don't identify with LGBT but who are supportive?

ML: While there are—we still have a pretty big pool of LGBTQ people to interview, but we

might branch out to allies at some point. So if you can think of any notable straight allies...

NZ: I was thinking of my mentor, John Schneider. He's an HIV doctor. I did research with him in India, studying social networks and HIV prevention in the men who have sex with men community. He does a lot of work on the South Side too. Every year he helped organize, it's a ball—do you know about voguing? [ML: Yeah, the dance thing.] There's a ball here every year, it's held at the Social Service School, and he's a judge at it. It's incredible seeing the dancing and all that. And that happens here on campus, so I think that's something that's really cool. There are so many people from the community who come to that too.

ML: Yeah. He seems like a cool person to interview too.

NZ: He's involved with a lot of HIV initiatives and research. I think he's also well-connected too. So he'd be able to offer other resources and suggestions too.

ML: And I guess as a straight person doing a lot of queer work and advocacy, it's an interesting perspective.

NZ: Could be, yeah. I think that's it for me.

[47:13]

***End of Interview***