

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943-PP  
Judge Pamela Pepper

**PLAINTIFF’S MOTION FOR PRELIMINARY INJUNCTION**

Plaintiff Ashton (“Ash”) Whitaker, by and through his mother and next friend, Melissa Whitaker, moves this Court to enter a preliminary injunction against Defendants Kenosha Unified School District No. 1 Board of Education and Sue Savaglio-Jarvis, in her official capacity as Superintendent of the Kenosha Unified School District No. 1 (the “District”). Plaintiff, who is a transgender boy, has suffered and continues to suffer irreparable harm based on Defendants’ discriminatory refusal to permit him to use boys’ restrooms at school under the threat of disciplinary consequences, as well as the repeated use by District administrators and staff of Plaintiff’s female birth name and female pronouns (*i.e.*, she, her) when addressing or referring to Plaintiff.

Through this motion, Plaintiff requests that this Court enjoin Defendants and their employees, agents, and representatives, by the beginning of the 2016-2017 school year on

September 1, 2016, or as soon thereafter is reasonably practicable, and thereafter during the pendency of this litigation, from:

(1) enforcing against Plaintiff any policy, practice, or custom of the District and/or the District's George Nelson Tremper High School that denies Plaintiff access to boys' restrooms at school and school-sponsored events;

(2) taking any formal or informal disciplinary action against Plaintiff for using boys' restrooms at school and school-sponsored events;

(3) using, or causing or permitting to be used by District employees, Plaintiff's female birth name and female pronouns when addressing Plaintiff or referring to Plaintiff in front of other students or District personnel; and

(4) taking any other action that would reveal Plaintiff's transgender status to others at school, including through the use of any visible markers or identifiers (*e.g.*, wristbands, stickers) issued by District personnel to Plaintiff and other transgender students.

In support of this motion, Plaintiff submits the accompanying memorandum of law and the following exhibits:

Ex. 1 – Declaration of Ashton Whitaker

Ex. 2 – Declaration of Dr. Stephanie L. Budge, Ph.D.

Ex. 3 – Declaration of Dr. R. Nicholas Gorton, M.D.

Ex. 4 – Declaration of Melissa Whitaker

Ex. 5 – Declaration of Jenifer McGuire, Ph.D.

Ex. 6 – U.S. Department of Education & U.S. Department of Justice, Dear Colleague Letter on Transgender Students (May 13, 2016)

Ex. 7 – Declaration of Tim Kenney

Ex. 8 – Declaration of Dr. Bryan Davis, Ph.D.

Ex. 9 – Declaration of Judy Chiasson, Ph.D.

Ex. 10 – U.S. Department of Education, *Examples of Policies and Emerging Practices for Supporting Transgender Students* (May 2016)

Plaintiff requests that the Court enter the requested preliminary injunction by the beginning of the new school year on September 1, 2016, to avoid the significant educational, psychological, and physical harms to Plaintiff that he will suffer if he cannot obtain the relief from the District’s discriminatory policies, practices, or customs, as specified above, by the beginning of the new school year. Plaintiff therefore requests an expedited briefing schedule and hearing on this motion.

Based on the foregoing, Plaintiff respectfully moves this Court to grant this motion.

Dated: August 15, 2016

Respectfully submitted,

Ilona M. Turner\*  
Alison Pennington\*  
Sasha J. Buchert\*  
Shawn Thomas Meerkamper\*  
TRANSGENDER LAW CENTER  
1629 Telegraph Avenue, Suite 400  
Oakland, CA 94612  
Phone: (415) 865-0176  
Fax: (877) 847-1278  
ilona@transgenderlawcenter.org  
alison@transgenderlawcenter.org  
sasha@transgenderlawcenter.org  
shawn@transgenderlawcenter.org

/s Joseph J. Wardenski  
Joseph J. Wardenski  
Michael Allen\*\*  
RELMAN, DANE & COLFAX PLLC  
1225 19th Street, NW, Suite 600  
Washington, DC 20036  
Phone: (202) 728-1888  
Fax: (202) 728-0848  
jwardenski@relmanlaw.com  
mallen@relmanlaw.com

Robert (Rock) Theine Pledl  
PLEDL & COHN, S.C.  
1110 N. Old World Third Street, Suite 215  
Milwaukee, WI 53203  
Phone: (414) 225-8999  
Fax: (414) 225-8987  
rtp@pledcohn.com

\* Application for admission to this Court to follow

\*\* Application for admission to this Court pending

# **EXHIBIT 1**

## **DECLARATION OF ASHTON WHITAKER**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943-PP  
Judge Pamela Pepper

**DECLARATION OF ASHTON WHITAKER**

1. My name is Ashton (“Ash”) Whitaker. I am the plaintiff in the above-captioned action. I have actual knowledge of the matters stated in this declaration.
2. I was born on August 24, 1999. I live in Kenosha, Wisconsin with my mother, Melissa Whitaker.
3. I am a student at George Nelson Tremper High School (“Tremper”). I will begin my senior year of high school on September 1, 2016. I am ranked in the top five percent of my high school class and hope to attend the University of Wisconsin-Madison and study biomedical engineering after graduation. In school, I am involved in a lot of activities: orchestra, theater, tennis, National Honor Society, and Astronomical Society. Outside of school, I work part-time as an accounting assistant in a medical office.
4. I was designated “female” on my birth certificate, but I realized I am a boy in middle school and began to experience growing discomfort with being viewed as a girl by others.

5. At the end of eighth grade, in spring 2013, I told my parents that I am transgender and a boy. Not long after that, I told my older brothers.

6. During the 2013-2014 school year, my freshman year at Tremper, I began telling my close friends that I am a boy. At that point, I began transitioning more publicly: I cut my hair short, began wearing more masculine clothing, and began to go by a masculine name and pronouns.

7. In fall 2014, the beginning of my sophomore year, I told my classmates and teachers that I am a boy and requested that they refer to me with male pronouns and by my new name. On Christmas Day of 2014, I told my extended family that I am a boy.

8. Around the time of my public transition, I began seeing a therapist, who diagnosed me with Gender Dysphoria. In April 2016, I began seeing an endocrinologist at Children's Hospital of Wisconsin to discuss hormonal therapy. In July 2016 I started hormone replacement therapy (testosterone).

9. On August 2, 2016, I submitted a petition for a legal name change to the Kenosha County Circuit Court to change my name to my traditionally masculine first name, Ashton. I have a court date of September 15, 2016 at which I expect the petition will be granted.

10. My transition has been accepted and respected by most people at Tremper. My friends and classmates have been very supportive and treat me as a boy. To my knowledge most of my teachers also respect my gender identity. For example, at an orchestra performance on January 17, 2015, I wore a tuxedo, just like all the other boys, and was supported by my orchestra teacher, Helen Breitenbach-Cooper. It was accepted without incident and has never been a problem even amongst the audience.

11. In spring 2015, during my sophomore year, my mother and I had several meetings with my guidance counselor, Debra Tronvig. At these meetings, we asked that I be allowed to use the boys' restrooms at school. At a meeting in March 2015, I was told by Ms. Tronvig that school administrators had decided that I could only use the girls' restrooms or a gender-neutral restroom in the school's main office. This meeting was very upsetting to me. I did not want to use the girls' restroom, because I had publicly transitioned in school and using the girls' restroom would communicate to other people that I am "really" a girl—which isn't true—and should be treated like a girl. If I used the office restroom, other students and office staff would ask me questions about why I was using it. The office restroom is also far from my other classes and I would miss class time if I used it.

12. I was also worried that I would be disciplined if I used the boys' restroom, which would hurt my chances of getting into college. Because of this, I did my best to avoid using any restrooms at school for the rest of the school year.

13. In order to avoid using the restrooms, I drank less liquid than I normally would. I have been diagnosed by my pediatrician with vasovagal syncope, which means I am susceptible to fainting and/or having seizures upon certain physical or emotional triggers. If I am dehydrated, my condition is triggered, so my doctor requires that I drink 6-7 bottles of water a day and a bottle of Gatorade. I also get stress-related migraines.

14. When I avoided using the restrooms, I had more symptoms of vasovagal syncope and more migraines. I also felt increasingly depressed and anxious.

15. In July 2015, I went to Europe with my school orchestra group. I asked if I could room with boys, but my orchestra teacher, Ms. Breitenbach-Cooper, told me school administrators had decided I would have to room with girls. We were at times divided by gender

for activities and I would be grouped with girls. I found this demeaning and humiliating. During this trip, feeling a bit freer because of being in another country and knowing I was less scrutinized than at school, I began using men's restrooms. On that trip I also saw a news story about a lawsuit against the Gloucester County School District in Virginia brought by another transgender student who was not allowed to use the boys' restroom. In that story I learned that the U.S. Department of Justice had said that transgender students have the right to use restrooms in accordance with their gender identity under Title IX. I was thrilled to learn that I had this legally protected right.

16. When my junior year started in September 2015, I only used boys' restrooms. No one said anything, and for seven months, I had no issues with other students or staff when I used the restrooms. I did not discuss my decision to use the boys' restrooms with any teachers or administrators because I knew that using the boys' restrooms was my legal right.

17. One day in late February 2016, I was washing my hands in the sink in the boys' restroom when a teacher walked in who had known me my freshman year. He gave me a funny look. A week or two later, just after I finished taking the ACT test, my mom told me that administrators had decided that I would only be permitted to use the girls' or single-user gender-neutral restrooms. Never before had I felt scrutinized and degraded to such an extent in just using the boys' restroom.

18. Hearing that news, I was incredibly upset, uncomfortable, and embarrassed. I am not a girl, and because of that I hadn't used a girls' restroom in months anywhere. If I used the girls' restrooms, that would totally confuse classmates who see me as the boy that I am, and make them think that I'm not a "real" boy and they don't need to respect my identity. I knew they would look at me strangely, ask me intrusive questions, and some would probably laugh at

me and bully me. The idea of using the girls' restroom was humiliating and there was no way I could do it. If I were to use the gender-neutral restrooms, I would also stand out from everyone else with a big label on me that said "transgender." It was humiliating to think of being singled out in that way, which I knew would make other students look at me strangely, ask me intrusive questions, and some would make fun of me and bully me. Having to use a single-user restroom separate from all other students would send the message that I am so different from other students that I need to be separated from everyone else. I was also afraid of getting in trouble if I didn't go with one of the school's options. I had never experienced any disciplinary trouble at school and I was very worried about that possibility.

19. Despite these fears, for the rest of the school year, I kept using the boys' restrooms when I needed to go, because to me, the only other option was to never use any restrooms at school. With my after-school activities, a typical school day for me is about 10 hours. I also know that using the boys' restroom is my legal right. Feeling trapped and having no choice but to break the school's rules or do things I knew were putting my health at risk (trying not to drink liquids during the school day) made me more anxious and depressed. I had trouble completing my schoolwork and sleeping at night. I felt so hopeless, I even had thoughts about suicide.

20. Around March 10, 2016, my mother and I met with my counselor, Ms. Tronvig, and Holly Graf, an assistant principal. During this meeting, Ms. Graf would only call me by my birth name. She told us that I couldn't use the boys' restrooms because my gender is listed as female in the school's official records. She said they wouldn't change that unless they received legal or medical documentation. My mother explained that I was too young for transition-related surgery, but had my pediatrician fax a letter stating that I am a transgender boy and I should be

allowed to use the boys' restrooms. Despite this, I was still not allowed to use the boys' restrooms.

21. Around March 17, 2016, when I went into the boys' restroom, I saw an assistant principal, Mr. Geiger, watch me. When I exited the restroom, I saw Mr. Geiger typing an email. I assumed that he was emailing the other administrators to report me. A short time later Ms. Graf called me in to her office to meet with her, and proceeded to lecture me for half an hour about my restroom use. Ms. Graf told me that I would be subject to disciplinary action if I kept using the boys' restrooms—she said I would have to “go down to 109 or 203” which could lead to in-school suspension. 109 and 203 are discipline offices at school. She asked me why I was not using the girls' or a single-user restroom, and I told her that I wouldn't use the girls' restroom because that would not be appropriate because I'm not a girl. She asked me to compromise and use the single-user restroom in the office. I refused because it was still far from my other classes and it would still make me stand out as different from my classmates. I also told her that the school's policy violated my rights under Title IX.

22. At this meeting and in general, Ms. Graf has almost exclusively referred to me by my female birth name and female pronouns even when I asked that my new name and male pronouns be used instead. When I became upset in our March 17 meeting, she said condescendingly, using my birth name, “S-----, calm down.” I felt angry and humiliated by this and I left the office.

23. After this meeting, I started crying in the hallway. The rest of the day, I couldn't focus in any of my classes, and just kept having flashbacks about how awful that meeting was and fighting back tears. After school, I skipped work and just lay in bed, exhausted and depressed and not wanting to move, because of the stressful situation I had been forced into.

24. I continued to use the boys' restroom when necessary during the rest of the school year. I met with Ms. Graf alone or with my mother several times because I kept using the boys' restroom. The meetings with Ms. Graf felt invasive and embarrassing. I was mortified that school staff were clearly watching and reporting on my every move. Since these meetings happened during class time, I knew other students and teachers were wondering why I was getting pulled out of class so much, and I felt embarrassed having to explain it to them when they asked. I was also worried that being pulled out of class so much would hurt my performance in school. I was also worried about disciplinary action hurting my ability to get into college.

25. I also learned from my mother that the school security guards had been asked to monitor my restroom use. I felt so embarrassed and stressed by this scrutiny and surveillance.

26. On April 6, 2016, I attended a meeting with my mother, Ms. Graf, Susan Valeri from KUSD, and Richard Aiello, Tremper's principal. At this meeting, I was given the further option of using two single-gender restrooms on the opposite sides of campus. They had installed new locks and I would be the only student who had a key to open them. These restrooms were not near my classes and I would have had to miss class time to use them. I was also embarrassed frustrated at the idea of needing to be assigned personal, separate restrooms, unlike any other students at Tremper. I knew that other students would be curious and annoyed that I was the only person who had access to these locked restrooms. I knew if I used those restrooms some students would not just ask questions but talk about me, make fun of me and bully me.

27. At the April 6 meeting, I asked Ms. Valeri what the school's reason was for not letting me use the boys' restrooms that did not have anything to do with my anatomy. Ms. Valeri essentially said, "Well, we've never had a student who identifies as male but was born female." I told them that Title IX prohibits discrimination based on sex, and that this protects transgender

students and means that schools have to let students use restrooms consistent with students' gender identity. Ms. Valeri said that Title IX did not protect transgender students' access to restrooms consistent with their gender identity. When I asked Valeri to explain what she thought Title IX meant, she refused. When I asked why, she said something like, "I don't think I'm going to give you any reasons."

28. After this meeting, I continued to avoid using the restrooms as much as possible. I have never used the single-user restrooms that I was given special keys for because I did not want to call attention to myself by using them.

29. My depression, anxiety, and gender dysphoria have become worse because of these experiences of negotiating using the bathroom at school, and all the other ways that they school has refused to acknowledge or respect my gender identity and treat me differently just because I am transgender. A lot of times I didn't even want to get out of bed in the morning and go to school, even though I always used to love school. I also have experienced more migraines, fainting, and dizziness because I was attempting to avoid using any school restrooms. I considered withdrawing from Tremper and finishing high school online, but decided not to because I would miss out on my after school activities and because transferring would make me fall even more behind on classwork.

30. In March 2016, I learned that Tremper's junior prom advisor had nominated me to be on the prom court for prom king. At Tremper, nominations for prom court are based on students' community service hours.

31. Around March 22, 2016, my mom was called in to meet with Mr. Aiello and Ms. Graf. They told her that they would allow me to be a candidate for prom court, but only as prom queen, not prom king. When my mom told me about their decision, I was humiliated by the idea

of running for prom queen when my classmates know me as the boy that I am. I felt disrespected by the administration and angry that they did not seem to realize how hurtful they were being.

32. On April 4, 2016, my friends and I showed administrators a MoveOn.org petition demanding that I be allowed to run for prom king and use the boys' restrooms. The petition was signed by thousands of people around the country and many members of the Tremper community. The following day, on April 5, 2016, 70 students had a sit-in at Tremper's main office to show their support for me and for equal rights for transgender students.

33. After the sit-in and the media attention it received, I was told that I would be allowed to run for prom king after all. I was glad to have this opportunity and grateful for the support of my classmates, but I continue to feel upset about the way I was treated by the administration and the fact that they only backed down because of that public attention.

34. Throughout my time at Tremper, most of my teachers have referred to me by my male name, but since KUSD has not changed my name on official records, I have to tell my teachers at the beginning of each term about my preferred name and pronouns. Every time I have a substitute teacher, I have to tell that teacher before class starts that my real name is Ash and that they should call me by that name, not the name on the roster. Even then, some substitute teachers still refer to me by my birth name in class. Sometimes I forget to tell a substitute teacher before class starts about my name, and those teachers will almost always use my birth name in front of other students. Having to correct this in front of everyone reveals to everyone or reminds them of my birth name and is humiliating.

35. At an orchestra rehearsal at school on May 11, 2016, I was approached by the orchestra's volunteer pianist, who put her hands on my shoulders and said something like, "Ash, honey, this isn't about you, this is bigger than you. I'm praying for you." This volunteer also

created a Facebook group called “KUSD Parents for Privacy,” which has posts that are critical of transgender students’ rights and has mentioned me by name numerous times. My mother and I brought this incident to Mr. Aiello, who requested that the orchestra teacher call the volunteer and tell her not to talk to students like that. It didn’t seem like anything changed, though. That woman is still a regular volunteer with the orchestra, and I feel awkward and embarrassed and angry when she’s around, because it felt like she got away with deliberately attacking me online, even though Mr. Aiello had explicitly said that was unacceptable.

36. In May 2016, I learned from my mother that school administrators had told guidance counselors to distribute bright green wristbands to transgender students so that their use of the restrooms could be monitored more easily. This made me feel sick and scared. I told my mom there was no way I would agree to wear one, but I was afraid that the school would make me do so. I knew that wearing something like that would single me out for more questions, harassment, or even violence for being transgender.

37. From June 12-16, 2016, I participated in a five-day, school-sponsored summer orchestra camp at the University of Wisconsin-Oshkosh campus. I signed up to stay in a boys’ suite with one of my best friends, who is a boy. I was told by Ms. Breitenbach-Cooper that school administrators had decided that I had to either stay in a suite with girls or stay alone. I was definitely uncomfortable staying with girls, so I reluctantly agreed to stay in a double-bedroom suite alone so that I could participate in the program.

38. Staying in a suite alone meant that I could not socialize often with other students in the evenings, since students were not allowed to enter each other’s suites. Each evening while everyone else was having fun with their friends, I stayed in my room, either sleeping or practicing my violin. That whole trip I felt lonely and depressed, and disappointed that I wasn’t

able to share those fun experiences with my classmates and have happy memories of my last year at camp. I was also hurt and embarrassed. Even though the school did not explain why I could not stay with boys, I understood that they still did not consider me a real boy—and it was degrading and humiliating to think that my teachers and administrators were thinking of me—and no other students—in those terms.

39. I have suffered both physically and emotionally by being separated from and being treated differently than my male classmates. Physically, I have experienced dehydration, dizziness, fainting or nearly fainting, and migraines as a result of limiting my liquid intake to try not to have to use the restroom at school. I have felt increasingly depressed and anxious over the last months due to the discriminatory actions taken by Tremper's administration. These have hurt my ability to focus in class and perform well in school.

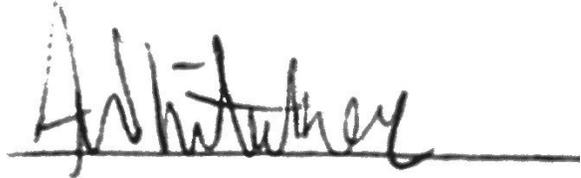
40. The level of attention and scrutiny has made me feel unsafe and scared being outside of my house. I'm constantly afraid that I will be targeted for an assault by someone who knows I am transgender. I try to avoid ever going out alone or even with just one other friend, only going out in groups, so that I'll be protected.

41. If I am not allowed to use the boys' restrooms during my senior year of high school, I know I will experience the same embarrassment, anxiety, and depression as I did last year. I am also worried that my symptoms of vasovagal syncope—fainting and migraines—will continue to get worse. I am continuing to think seriously about transferring to an online school if Tremper and KUSD keep refusing to respect my identity and doing things that single me out and label me as different from all the other boys.

42. I just want to live as who I am—a boy—and go to school without being harassed, discriminated against, demeaned, and humiliated by my school.

Pursuant to 8 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 14, 2016

A handwritten signature in black ink, appearing to read "Ashton Whitaker", is written over a solid horizontal line.

By:

Ashton Whitaker

## **EXHIBIT 2**

**DECLARATION OF DR. STEPHANIE L. BUDGE, Ph.D.**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943

**Declaration of Stephanie L. Budge, Ph.D.**

**PRELIMINARY STATEMENT**

1. I have been retained by counsel for Plaintiff as an expert in connection with the above-captioned litigation. I have actual knowledge of the matters stated in this declaration.

2. The information provided regarding my professional background, experiences, publications, and presentations are detailed in my curriculum vitae. This is included as an accurate and true copy and is attached as Exhibit A to this declaration.

3. I received my Ph.D. in Counseling Psychology from the University of Wisconsin-Madison in 2011, with focuses on lesbian, gay, bisexual, and transgender (“LGBT”) issues and psychological assessment. I am a tenure-track Assistant Professor of Counseling Psychology at the University of Wisconsin-Madison (“UW-Madison”) in the School of Education’s Department of Counseling Psychology. I was a visiting assistant professor at UW-Madison from 2014-2016 and received a tenure-track appointment in 2016. I was previously an assistant professor at the

University of Louisville in the Department of Educational and Counseling Psychology, Counseling, and College Student Personnel from 2011 to 2014. I have been a mental health professional since 2006 and I hold a license to practice psychology in the State of Wisconsin. The focus of my academic and clinical work is on the emotional and coping mechanisms of transgender adolescents and adults.

4. I have expertise working with adolescents and adults whose assigned sex at birth is incongruent with their gender identity (hereafter referred to as transgender or trans individuals). Many of these individuals have met the criteria for Gender Dysphoria. I have been a mental health provider to transgender individuals since 2007 and the majority of my caseload over the 10 years since I have been a mental health professional has been trans-identified individuals. The majority of my caseload (around 80%) since 2011 has included transgender youth (ages 13-24). In 2008, I received a year of specialized training in a forensic setting to evaluate adolescents. I also sought and received specialized training as a graduate student in psychological assessment and teach psychological assessment courses to graduate students.

5. I have published 53 peer-reviewed journal articles and book chapters, with the majority of these focusing on transgender individuals. Notably, several of these publications are specifically focused on evaluating transgender individuals to assess their eligibility for transition-related care, including hormone treatment and surgery; how to engage in clinical decision-making related to mental health care for transgender individuals; and effective psychotherapeutic treatment for transgender individuals.

6. I am on the editorial board for three peer-reviewed academic journals: *Psychology of Sexual Orientation and Gender Diversity*; *Archives of Sexual Behavior*; and the *International*

*Journal of Transgenderism*. Researchers in the United States and internationally have sought my assistance as an expert reviewer for research focused on transgender individuals.

7. I have been involved in over 97 academic presentations (internationally, nationally, and locally). The majority of these presentations have been focused on transgender individuals.

8. I have conducted and analyzed research with over 8,000 transgender individuals. I am currently completing a longitudinal study focused on transgender youth and their families, specifically focusing on their mental health and emotional/coping processes when experiencing discrimination, harassment, and barriers in institutional settings, including schools. The co-principal investigator (Sabra Katz-Wise, PhD) and I have two publications under review that highlight the experiences of these youth and their families. I am also conducting research with the Pediatric and Adolescent Transgender Health clinic in Madison, Wisconsin focusing on transgender youth access to mental and physical health care and the barriers involved in the process of obtaining treatment.

9. I am a member of the World Professional Association of Transgender Health (WPATH). WPATH (formerly known as the Harry Benjamin International Gender Dysphoria Association) is an interdisciplinary professional and educational organization of individuals worldwide who specialize in research and practice on transgender health and with transgender individuals. The organization's mission includes supporting clinical and academic research to develop evidence-based, high quality health care for transgender and gender-nonconforming individuals. WPATH's leadership and many of its members are widely considered experts in this field. As explained further in paragraph 23 below, WPATH publishes the Standards of Care (SOC) for the Health of Transsexual, Transgender, and Gender Nonconforming People, which

are considered the authoritative health care standards for transgender individuals. As a WPATH member, I attend conferences that focus on transgender adults and transgender youth and present my own research to provide trainings to other professionals.

10. I am also a member of the Society for Lesbian, Gay, Bisexual, and Transgender Issues (Division 44) within the American Psychological Association (APA) (of which I am also a member). I am co-chair of the Science Committee for Division 44. The Science Committee is charged with ensuring that the most relevant and up-to-date research regarding LGBT individuals is disseminated through Division 44 and to full membership of the APA. We provide programming at the annual APA convention to disseminate cutting edge research on the best psychological practices and evidence-based treatments with LGBT individuals. At the 2016 APA annual convention, I was charged with disseminating information about evidence-based treatments for transgender individuals, as part of my role as co-chair of this committee.

11. I have received several awards for my expertise in the science and practice of working with transgender individuals, including the 2015 American Psychological Association Early Career Award for work with LGBT populations from the Society for Counseling Psychology and I was the first recipient of the APA Transgender Research Award in 2010. Locally, I am also a member of the Wisconsin Trans Health Coalition, which is an organization focused on decreasing violence and discrimination against transgender individuals within Wisconsin. As such, I am routinely sought out by school districts, service providers, and others as an expert on mental health and transgender issues within Wisconsin.

12. In preparing this declaration, I reviewed A.W.'s medical and therapy records. I also reviewed the seminal and influential psychological and public health research on

transgender individuals published over the past decade, including the most current research published as recently as this year. A bibliography is attached as Exhibit B.

13. I personally met with A.W. and his mother, Melissa Whitaker, on August 2, 2016, to conduct a clinical assessment of A.W. The purpose of this meeting was to administer psychological testing and to review records from his pediatrician and therapists. Based on that assessment, I render the following opinions, with a reasonable degree of professional certainty in my field of psychology.

14. I understand that this declaration will be submitted in support of A.W.'s motion for preliminary injunction in this case. I am prepared to testify about the information and conclusions contained in this report at a hearing. I may prepare a full expert witness report, as appropriate, during this litigation.

15. I am being compensated at an hourly rate of \$150/hour for actual time devoted for my expert services and testimony in this case, as well as expenses and costs. My compensation does not depend on the outcome of this litigation, the opinions I express, or the testimony I provide.

#### **SEX, GENDER IDENTITY, AND GENDER DYSPHORIA**

16. "Gender identity" is a term that has broad psychological and medical consensus to mean a person's internal sense of one's own gender. All human beings have a gender identity. Gender identity is innate and generally considered an immutable characteristic. Gender identity for all human beings usually begins to become clear around the age of three (with some variation around this age), although many transgender individuals may not begin to recognize or express their gender identity until later in life.

17. The majority of individuals born with external female genitalia (i.e., vaginas, clitorises, vulvas), internal female reproductive organs (i.e., ovaries, uteruses), and XX chromosomes, will identify as women and experience themselves as female. Conversely, the majority of individuals born with penises, testes, and XY chromosomes will identify as men and experience themselves as male. However, there are many variations that may differ from that typical course, such as transgender people and those with intersex conditions and sex chromosome conditions (e.g., Turner Syndrome, Klinefelter Syndrome).

18. There is no single anatomical or physiological characteristic that defines a person's sex. When sex-related characteristics such as internal or external genitalia, reproductive capacity, chromosomes, or gender identity are inconsistent—as with many transgender people and people with intersex conditions—it is most appropriate to define sex based on the person's gender identity.

19. A transgender person is someone whose experienced gender identity differs from, or is incongruent with, their sex assigned at birth.

20. Gender Dysphoria is the medical and psychiatric term for that gender incongruence. The psychiatric diagnosis is codified within the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5), and the medical diagnosis is included within the World Health Organization's International Classification of Diseases (ICD-10) (under the now-outdated name Gender Identity Disorder). Individuals who are diagnosed within these classifications present with a variety of symptoms, and typically indicate an intense need to present themselves and be viewed by others in accordance with their gender identity (that differs from their sex assigned at birth). When clients with gender incongruence do not obtain competent and necessary treatment, serious and debilitating

psychological distress (depression, anxiety, self-harm, suicidal ideation/attempts, etc.) often occurs. True and correct copies of the relevant portions of DSM-5 and ICD-10 are attached to this declaration as Exhibits B and C, respectively.

21. Under the DSM-5, the criteria for identifying Gender Dysphoria in adolescents and adults (302.85) are:

a. A marked incongruence between one's experienced/expressed gender and assigned gender, of at least 6 months' duration, as manifested by at least two of the following:

(1) A marked incongruence between one's experienced/expressed gender and primary and or/secondary sex characteristics (or in young adolescents, the anticipated secondary sex characteristics);

(2) A strong desire to be rid of one's primary and/or secondary sex characteristics because of a marked incongruence with one's experienced/expressed gender (or in young adolescents, a desire to prevent the development of the anticipated secondary sex characteristics)

(3) A strong desire for the primary and/or secondary sex characteristics of the other gender.

(4) A strong desire to be of the other gender (or some alternative gender different from one's assigned gender)

(5) A strong desire to be treated as the other gender (or some alternative gender different from one's assigned gender)

(6) A strong conviction that one has the typical feelings and reactions of the other gender (or some alternative gender different from one's assigned gender)

22. Gender Dysphoria is associated with clinically significant distress or impairment in social, occupational, educational, or other important areas of functioning.

23. WPATH publishes the Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People ("SOC") that are considered the international standards for medical and mental health treatment for transgender individuals. The foremost medical and mental health organizations within the United States, and internationally, recognize the SOC as the authoritative standards for treatment of Gender Dysphoria. Those include the American Psychological Association, the American Psychiatric Association, the American Counseling Association, and the American Medical Association. WPATH has published the SOC since 1979. The Seventh Version of the SOC was published in 2012. A true and correct copy of the SOC, Seventh Version, is attached to this declaration as Exhibit D.

24. The SOC provide evidence-based protocols for mental health and medical providers to follow in determining the specific treatment regimen that will best fit the needs of the transgender individual. It has been well-established from the SOC and experts in the health care of transgender individuals that each transgender person has their own specific transition needs and that not every transition will look the same. Treatment generally consists of social, psychological, and/or medical support, as needed, that allows the individual to live and be integrated into society in accordance with their gender identity, thus relieving the distress that results from gender incongruence. Treatment interventions do not "prove" a person's gender

identity; instead, they help to bring the person's external appearance and gender role in line with who the person really is.

25. For most transgender individuals an important piece of treatment to reduce dysphoria is to engage in a social transition—i.e., non-medical processes taken to ensure that the individual can live in the world in a manner fully consistent with the individual's gender identity. As part of a social transition, an individual will typically tell others of their gender identity, go by a new name, use pronouns congruent with their gender identity, wear clothing typically associated with their gender identity, change their hairstyle, and use restrooms that fit their gender identity, among other things. To be clinically effective at alleviating the distress associated with Gender Dysphoria, a social transition must be respected consistently across all aspects of a trans individual's life—for example, at home, in school, and at work.

26. Psychotherapy to reduce the harmful effects of stigma and improve resiliency, hormone therapy, and/or surgeries can all be very effective ways to treat an individual's dysphoria; as noted, however, there is no “one size fits all” medical regimen. In addition, individuals may be constrained by practical limitations—for instance, age, medical contraindications, or cost—on the ability to obtain medical treatment such as hormones or surgeries. Surgeries and other treatments related to gender transition are frequently excluded from coverage under health insurance plans.

27. Before transgender identity and Gender Dysphoria were well understood by the medical community, there had been a short history of considering these as disorders to be “cured” through therapy that attempted to reverse the individual's gender identity. This has been referred to as “reparative therapy” in much of the academic and clinical literature. There is a

medical and psychological consensus that reparative therapy is, in fact, unethical (i.e., causes harm) and ineffective.

28. Under the SOC, medical transition is not appropriate for pre-pubertal transgender children. For transgender adolescents, hormone therapy may be prescribed—either puberty-blocking hormones designed to delay the onset of physical changes associated with puberty and/or hormones designed to masculinize or feminize the individual’s appearance. Genital surgery is not advised by the SOC until after the adolescent has reached the age of majority.

29. Virtually all transgender adolescents, however, will undergo some type of social transition. Current evidence-based treatment indicates that mental health/medical providers and social supports should affirm an adolescent through a social transition to ensure that their gender identity is part of their lived experience in all aspects of their lives. It is the aim of treatment to assist the adolescent in successfully integrating their internal identity into a life that allows them to function consistently in accordance with that identity and not feel shame for who they are. It is inconsistent with evidenced-based practice to discourage or impede an adolescent from moving forward with any aspect of their transition; if clinically-indicated aspects of transition are impeded, it is likely that critical levels of distress will result. For example, impeding access to a restroom that is in alignment with an adolescent’s gender identity will likely result in clinical distress. For transgender adolescents, it is critical that all aspects of social transition are supported by their family, school, work, and community.

#### **IMPACT OF EXCLUSION AND NON-AFFIRMATION**

30. In the United States, public restrooms are often separated based on gender (women’s and men’s restrooms), unlike most other spaces. When restrooms are gendered and a transgender individual is restricted to the restroom based on their assigned sex at birth, they are

being told unmistakably that their understanding of their own gender is invalid. In addition, when “accommodations” are offered to transgender individuals that allow them to either use the restroom of their assigned sex at birth or a restroom that is not usually designated for their group (e.g., sending a high school student to a faculty restroom), that individual is being told not only that their gender is invalid, but that they are something “other” and must be separated from all their peers. Numerous research studies have confirmed the negative psychological impact of being invalidated and “othered” in this way. Specifically, for transgender individuals, such exclusion fundamentally impedes the process of social transition because it prevents the positive integration of their gender identity through affirmation and instead sends a strong message to the individual—that this is a shameful aspect of their identity—that they are likely to internalize.

31. The *gender minority stress and resilience* model provides an explanation for the mental and physical health disparities between transgender and non-transgender populations. This model identifies four common external stressors: gender-based victimization (verbal or physical acts of hostility based on transgender status), gender-based rejection, gender-based discrimination, and identity non-affirmation. These external gender minority stress factors can lead to three types of internal stressors: negative expectations for future events, internalized transphobia, and non-disclosure of one’s identity. Negative expectations for future events represent the belief that one may experience prejudice events, discrimination, and social rejection. These beliefs may be based on prior similar personal experiences and/or awareness of general societal stigma against transgender individuals. Internalized transphobia is the adoption and internalization of negative societal attitudes toward transgender individuals. Identity non-disclosure is an effort to conceal one’s transgender status.

32. Studies examining external stressors in the transgender community have demonstrated that transgender people face high levels of discrimination and victimization and that exposure to these external stressors is associated with serious psychological harms including anxiety, depression, suicidal ideation, and suicide attempt. For example, one study (Boza & Perry, 2014) found that nearly 70% of transgender and gender non-conforming people had experienced at least one form of victimization or discrimination related to their gender identity, including social discrimination (55%) and harassment (43%). These types of discrimination events are strongly related to suicidality. For example, Goldblum et al. (2012) and Testa et al. (2012) found that individuals who have experienced prejudice events such as these are three to four times more likely to have a history of suicide attempt compared to those who have not had experiences of gender-related victimization and violence. Studies show that rates of ideation for transgender and gender non-conforming individuals with histories of victimization ranged from 33-47% in the past year (Scanlon et al., 2010) and 82-97% over the lifetime (Testa et al., 2012). These rates are consistently and strikingly higher than the estimated lifetime prevalence of suicidal ideation and suicide attempts in the general population of 13.5% and 4.6%, respectively (Kessler, Borges, & Walters, 1999).

33. One study examined the relationship between suicidal behavior and gender-based hostility and insensitivity experienced in high school (Goldblum, Testa, Pflum, Hendricks, Bradford, & Bongar, 2012). Transgender and gender non-conforming participants were asked if they had experienced hostility or insensitivity from fellow students, teachers, or school administrators in their high school as a result of their gender identity or expression. Those who reported having been the victim of gender-based hostility were approximately four times more likely to have made a suicide attempt than those who did not report being so victimized.

34. It is clear that serious harms can result when transgender individuals are not allowed to use restrooms corresponding to their gender identity. Most transgender individuals begin using restrooms consistent with their identity after completing other aspects of social transition (wearing clothing associated with their gender, changing their hair, etc.). Transgender and gender non-conforming people regularly face harassment and victimization in restrooms when they are perceived not to belong (Herman, 2013). Excluding transgender individuals from restrooms that correspond to their gender identity following a social transition thus subjects those individuals to increased risk of actual victimization as well as the realistic fear of such victimization, with the accordant harms resulting from that stress.

35. Predictably, to avoid the harmful effects of non-affirmation or fear of victimization, transgender individuals will often avoid using the bathroom in any public space. This can lead to significant health consequences. First, transgender individuals will often avoid an intake of fluids to avoid the necessity to urinate; this can have significant health consequences related to dehydration. Even if transgender individuals do not avoid fluid intake, they will often hold urine in their bladders to avoid using the bathroom; this can also cause negative health consequences such as urinary tract or kidney infections. Transgender individuals may also avoid eating certain foods (or restrict food in general) to circumvent defecation, leading to constipation and muscle damage/weakness.

36. Although many transgender individuals report negative consequences when they are restricted from using bathrooms consistent with their identity, this exclusion may be particularly damaging during adolescence. Adolescence is marked by a time of development where individuals' attention and awareness are particularly heightened related to looks, "fitting in," and navigating complex social interactions. Transgender adolescents are typically acutely

self-conscious of the ways they may be perceived as different from their peers of the same gender. An internal consequence of that “not fitting in” is often internalized shame and sometimes diagnosable social anxiety and depression. External consequences can include experiences of bullying, harassment, and discrimination by peers and adults within school institutions.

37. Research shows that the mental health consequences of discrimination and disaffirmation for transgender youth are dire: transgender adolescents experience depression, anxiety, self-harm, and suicidal ideation/attempt(s) at two to three times the rates of cisgender (non-transgender) adolescents (Reisner et al., 2015). Indeed, research released in 2013 indicates that more than 50% of transgender youth report attempting suicide at least once in their lifetime (Mustanski & Liu, 2013).

38. Numerous retrospective and contemporaneous studies have noted the difficulties that transgender adolescents experience while in school. For example, a 2009 report (Greytek et al., 2009) noted that two-thirds of transgender youth feel unsafe at school because of their gender identity and almost all (89%) transgender youth reported being verbally harassed at school. The report indicates that 39% of school staff had commented negatively about someone’s gender expression over the past year. Participants also indicated that it was rare for school personnel to intervene when seeing transgender adolescents victimized at school—no intervention occurred 89% of the time. These negative experiences can cause feelings of shame, stigma, and unworthiness, and can lead to psychological distress. This stress can be overwhelming, distracting transgender students from the ability to concentrate on schoolwork, and can even lead students to drop out of school. A study published just prior to the writing of this report indicates that experiences of discrimination and stigmatization related to transgender identity can

frequently cause post-traumatic stress disorder, even when controlling for previous and/or non-trans-related trauma (Reisner et al., 2016).

39. In addition to the links between harassment and discrimination from peers and clinical distress in transgender adolescents, it can be even more harmful when adults in power perpetuate notions that isolate and stigmatize transgender adolescents. Research on *social identity theory* describes the harm that results when people of higher status—usually people in power such as, in the case of students, school administrators—fail to affirm or actively disaffirm lower-status individuals with a marginalized identity. This often leads to external forms of harm such as ostracizing and discrimination against the individual by peers and others, as well as internal harms such as internalized shame and self-hatred. These internal and external factors can be directly related to psychological distress, such as post-traumatic stress disorder, depressive disorders, anxiety disorders, and hypertension, amongst myriad other health concerns.

#### **CLINICAL ASSESSMENT OF A.W.**

40. I met with A.W. and his mother, Melissa Whitaker, on August 2, 2016 to conduct a psychological assessment.

41. I used the following Instruments used for the clinical assessment of A.W.: Schedule for Affective Disorders and Schizophrenia for School Age Children (K-SADS-PL), Kutcher Adolescent Depression Scale, Kutcher Generalized Social Anxiety Disorder Scale for Adolescents (K-GSADS-A), Severity of Posttraumatic Stress Symptoms-Child Ages 11-17 (NSESSS), Severity Measure for Social Anxiety Disorder (Social Phobia)-Child Ages 11-17, Severity Measure for Generalized Anxiety Disorder-Child Ages 11-17, Patient Health Questionnaire for Adolescents (PHQ-9), Multidimensional Scale of Perceived Social Support (MSPSS), and Transgender Outness Inventory (TOI).

42. A.W. is a 16 and 11/12ths year old white transgender boy (who also identifies as “female-to-male,” or “FTM”).

43. A.W. reported a lack of significant psychological history until he reached 6th and 7th grade. He reported that he began experiencing bullying around 7th grade and also began to “feel different.” Around that time he stated he began experiencing symptoms congruent with Major Depressive Disorder, specifically feeling down, losing interest in usual activities, difficulty concentrating, feeling a lack of motivation, having difficulty sleeping, and experiencing suicidal ideation. He indicated that as he began to learn more about transgender identity, toward the end of middle school, he felt motivated to come out to his parents. He said he “tested the waters” with his mother in July 2013 by asking about insurance coverage for treatments for transgender individuals. A.W. reported that his distress increased at this time, primarily due to expectations of rejection from peers and loved ones.

44. A.W. stated that once he was able to start transitioning and started experiencing more family support, he began to experience increased psychological well-being. He indicated that he was feeling less anxiety and depression, as well as a complete lack of suicidal ideation during this time. Once he was specifically instructed to not use the boys’ bathroom at school, however, his distress increased again, dramatically.

45. Based on the clinical assessment, A.W. meets criteria for several mental health diagnoses.

46. First, he meets all 6 of the criteria under category A in the Gender Dysphoria diagnosis.

- The first symptom under category A includes a marked incongruence between one’s experienced/expressed gender and primary and/or secondary sex

characteristics. A.W. reported that he experiences a marked incongruence between his sex assigned at birth (female) and his internal sense of gender identity (male) and gender expression (masculine).

- Symptoms 2 and 3 include the desire to be rid of one's primary/secondary sex characteristics from one's sex assigned at birth and to obtain the primary/secondary sex characteristics typically associated with one's gender identity. A.W. indicated that he experiences discomfort with his chest and with menstruation and strongly desires male secondary sex characteristics (e.g., deep voice, facial hair, redistribution of body fat).
- The fourth symptom in the DSM-5 is a strong desire to be of the other gender. He stated that he has had a strong desire to identify as a boy—and understanding that he is a boy—since 2013, far exceeding the 6-month minimum in the DSM-5 criteria.
- Symptoms 5 and 6 within this diagnosis are a strong desire to be treated as the other gender and a strong conviction that one has the typical feelings and reactions of the other gender. He stated that it is essential for others to see him and treat him as a boy, otherwise he experiences an increase in dysphoria. He said that he clearly feels that he is like any other boy and relates to others as a boy. He recently started hormone therapy (testosterone) and reported that this momentarily assisted with some gender dysphoria, but that his experiences of external rejection often increase his dysphoria.

47. He meets the criteria for category B on three levels: 1) he experiences significant and constant distress related to how he has been treated by school staff and peers related to his

gender identity, 2) he continues to have some internalized stress related to his gender identity, and 3) he experiences distress related to barriers in accessing local trans-competent medical and mental health care.

48. In addition to my assessment that A.W. meets the criteria for Gender Dysphoria, according to his records, he was also diagnosed with Gender Dysphoria by his medical provider (Sheryn Abraham, MD) on 06/30/14 and by his therapist (Tara Rullman, MA, LPC) on 09/06/14.

49. The overarching diagnosis that subsumes several of the diagnoses that will be discussed below is post-traumatic stress disorder (PTSD with panic attacks; 309.81). During the diagnostic interview, A.W. endorsed 8 out of the 8 criteria in the DSM-5 for a diagnosis of PTSD. He reported experiencing several traumatic events, the majority of which include verbal harassment and discrimination at school. These experiences have led to intrusion symptoms, such as recurrent, involuntary, and distressing memories of these events; several flashbacks; and intense distress in situations that remind him of experiences of verbal harassment and discrimination. Primarily he reports persistent avoidance of thoughts and memories as well as avoiding people, places, and situations that remind him of these experiences (or avoiding these situations due to a very real fear that the harassment and discrimination may occur again). Out of the seven criteria focused on negative alterations in mood, where a minimum of two is needed for diagnosis, A.W. endorsed all seven. For the criteria relating to alterations in reactivity, where a minimum of two is needed for diagnosis, he endorsed five out of six criteria. Those included irritability and anger, self-destructive behavior, hypervigilance around using restrooms or going out in public, problems with concentration on schoolwork, and sleep disturbance.

50. Depression and anxiety are often comorbid disorders when an individual meets criteria for PTSD. A.W. meets criteria for Major Depressive Disorder (moderate; 296.33). He

endorsed experiencing 8 out of 9 symptoms. Many of these symptoms overlap with his PTSD symptoms, such as feelings of worthlessness, lack of concentration, difficulty with motivation, psychomotor agitation, and loss of interest in things. He reported that he often has difficulty getting out of bed and feels tired “all of the time.” He also indicated that he has lost interest in things he used to find enjoyable and that his level of irritability is much higher than usual. He reported current thoughts of suicide, but does not have any plan or intent. He reported that his suicidal thoughts are passive and that they are usually thoughts that “come up” when he is feeling particularly hopeless. He indicated that he copes with many of these symptoms (but most specifically his suicidal ideation) by talking with a friend about them. He stated that his depressive symptoms for his most recent depressive episode began around four months prior to this assessment. He indicated that his depressive symptoms worsen each time he meets with school officials and is confronted with a similar outcome about his bathroom access, when he is treated “like a girl,” or when school staff see how he is being treated and do not step in.

51. A.W. also meets criteria for several anxiety disorders, such as Social Anxiety Disorder (300.23) and Generalized Anxiety Disorder. (300.02) He reported complete avoidance of social gatherings, changing/showering in locker rooms, initiating conversations with strangers, and asking someone out on a date. He also reported in the last week, that he has “all of the time” felt: anxious/worried/nervous, spent a lot of time making decisions/putting off decisions/ preparing for situations due to worry, and sought reassurance from others due to worry. In the last week, he reported having moments of sudden terror, heart racing, sweating, trouble breathing, and feeling faint. He also reported that over the last four years, he has had several incidences of panic, some of which meet criteria for a panic attack; he does not report concern or worry about having panic attacks or changing his behaviors because of the panic attacks.

Because of the comorbid nature of PTSD and these symptoms, it is my clinical opinion that these experiences of anxiety are directly attributable to PTSD and are not derived from other isolated events. According to the DSM-5, individuals with PTSD are 80% more likely than those without PTSD to present with symptoms for depression and anxiety; thus it is often a complex process of determining the course and nature of these disorders. Although it is possible for a transgender person to experience these diagnoses without the cause of the diagnoses being focused on how one is treated as a transgender person, it is my clinical opinion that A.W. meets criteria for these diagnoses based on his hypervigilance around how he will be treated as a transgender person. In order to navigate the world to stay safe, it is actually protective for A.W. to be mindful and somewhat fearful of social situations, due to a high likelihood of experiencing rejection or discrimination. A.W.'s fears have been reinforced by school administrators making clear their view that he does not belong in situations where any other boy would be allowed, thus creating a situation where he constantly has to notice his own level of difference and to read social situations to find out if he will be treated with respect.

52. Because A.W.'s anxiety and depression first started based on his experiences of bullying and continued when he began to experience internalized shame related to his gender identity, this can be conceptualized within the Cultural Formulation of Stress (DSM-5) model: when individuals from marginalized groups experience discrimination based on their marginalized identity, PTSD can result.

53. It is my assessment that the specific ways that A.W. has been treated have significantly and negatively impacted his mental health and overall well-being. A.W. described symptoms of trauma, depression, and anxiety that related to being treated differently because he is a transgender boy. A.W. reported that he lives in fear at school and that this fear has started to

translate to other areas outside of school. He stated that he avoids using the bathroom during the day. He stated that this causes physical discomfort, but also perceives that this is not good for his physical health. After leaving meetings with school staff regarding his treatment, A.W. indicates he has spent tearful nights at home and regularly has difficulty sleeping, especially on evenings when an incident at school has occurred. A.W. reported, “It is a miracle that I have been able to keep my grades up” and said that his only motivation to be successful in school is so he can leave school to attend a university environment that will accept him fully for who he is, as a boy.

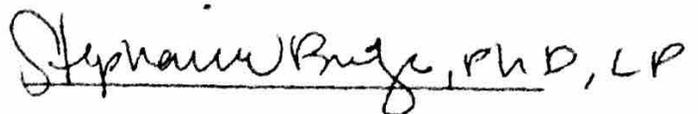
54. In addition to the negative psychological effect of not being able to use the boys’ bathroom at school, A.W. related that he experienced psychological distress directly related to school staff not using he/him/his pronouns, not using his male name, isolating him to a gender-neutral single room on a school trip, and refusing to let him run as prom king (despite his stellar grades and meeting all required criteria). In contrast to his psychological distress experienced from not being able to use the restrooms, A.W. indicated that he experiences some anxiety, but primarily experiences depression from being misgendered. He stated that it causes him to feel like there is something “wrong with me” and further perpetuates his feelings of shame.

55. Based on the assessment results, it is my strong recommendation that A.W. be allowed to use the boys’ restrooms at school and otherwise be allowed to participate like any other boy at gender-segregated events, without being singled out or marked as different from other students. The school’s persistent messages to A.W. that he is not a “real” boy in their eyes—excluding him A.W. from the boys’ restrooms, requiring him to room with girls or alone on school trips, barring him from running for prom king, and repeatedly calling him by his birth name and female pronouns—are having deeply harmful and stigmatizing effects, causing him to feel consistent isolation, shame, humiliation, anxiety, and depression, as well as fear for his

safety. These actions and policies contribute to his anxiety, depression, and PTSD, and directly undermine the social transition that is medically necessary to treat his Gender Dysphoria. It is my clinical opinion that, while psychotherapy can assist transgender individuals in coping with discrimination and being ostracized, it is difficult (if not impossible) to improve mental health in the wake of concurrent trauma. It is my clinical opinion, based on clinical experiences and scientific findings, that if these exclusionary, isolating, and stigmatizing practices are allowed to continue, there will be immediate and long-term significant consequences for A.W.'s mental health.

56. It is my professional opinion that the Kenosha Unified School District's treatment of A.W. and its policies regarding his bathroom use, separating him from other students during school trips, refusal to require consistent use of his male name and pronouns by school staff, and other actions that single him out as transgender and treat him differently from other boys, are directly causing significant psychological distress and place A.W. at risk for experiencing life-long diminished well-being and life-functioning.

57. Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.



Executed on 8/11/2016.

# **EXHIBIT**

## **A**

**Stephanie L. Budge, PhD, LP**  
**Curriculum Vitae**

---

Department of Counseling Psychology, School of Education, Room 309, University of Wisconsin-Madison, Madison, WI 53706, 608-262-4807, [budge@wisc.edu](mailto:budge@wisc.edu)

**PROFESSIONAL EXPERIENCE**

- 8/2016- **Assistant Professor**, tenure-track, Department of Counseling Psychology, University of Wisconsin-Madison
- 8/2014-7/2016 **Assistant Professor**, visiting, Department of Counseling Psychology, University of Wisconsin-Madison
- 8/2011-8/2014 **Assistant Professor**, tenure-track, Department of Educational and Counseling Psychology, Counseling, and College Student Personnel, University of Louisville
- 9/2011-6/2014 **Postdoctoral Clinical Training**, University of Louisville Counseling Center (9/2011-8/2012) and University of Louisville Transgender Project (7/2013-6/2014)
- 8/2010-8/2011 **Predoctoral Internship**, University of Minnesota, University Counseling and Consulting Services, APA-Accredited, APPIC listed predoctoral internship

**LICENSURE**

- 2/2015-current Licensed Psychologist in Wisconsin—3244-57
- 8/2011-6/2014 Licensed Psychologist (under supervision to gain hours for Health Service Provider status) in Kentucky—2012-42

**EDUCATION**

- 8/2006-8/2011 **Doctor of Philosophy**. University of Wisconsin-Madison. APA Accredited Counseling Psychology Program. Dissertation Title: *Distress in the transition process for transgender individuals: The role of loss, community, and coping*. Dissertation successfully defended in April, 2010.  
Minor: Psychological Assessment.
- 8/2004-5/2006 **Master of Arts**. University of Texas at Austin. Degree in Educational Psychology. Thesis Title: *Sexual pressure in gay, lesbian, and bisexual relationships*.

1/2003-12/2003  
9/2000-12/2002  
**Bachelor of Science.** University of Utah.  
Pace University, New York, New York, credits toward Bachelor of Science degree. Major: Psychology, Minor: Women's and Gender Studies.

## RESEARCH GRANTS

06/2016 Wisconsin Partnership Program, Community Opportunity Grant, \$50,000—**funded**, *Transgender Health—A New Horizon in Equity in Health Care*. Role: Contributor.

06/2016 UW Institute for Clinical Research (ICTR) Health Equity and Diversity (AHEAD) research pilot award, \$10,000--**funded**, *Advancing Wisconsin Survey of Transgender Youth: An Assessment of Resources and Needs*. Role: Collaborator

05/2016 Patient Centered Outcome Research Initiative (PCORI) Engagement Award, \$250,000—**submitted**, *Collective for Integrating Psychological Health, Education, and Research for LGBTQ Therapies (CIPHER LGBTQ)*. Role: Co-PI.

03/2016 National Institute of Health, NICHD, K23, \$666,769—**scored** grant. *The effects of pubertal suppression on affect and emotion regulation for transgender youth*. Role: PI.

10/2012 College of Education and Human Development Faculty Research Development Grant, \$2,200—**funded**. PI on research project testing psychotherapy process and outcomes for transgender individuals.

9/2011 College of Education and Human Development Faculty Research Development Grant, \$2,260—**funded**. PI on research project regarding positive experiences of transgender identity and intersectionality of identities with genderqueer individuals.

6/2010 Charles J. Gelso Research Grant, \$2,000—**funded**. PI on a research project regarding personality disorders and treatment effectiveness.

## EDITORIAL RESPONSIBILITIES

**Associate Editor:** Psychotherapy

**Editorial Board:** Psychology of Sexual Orientation and Gender Diversity, Archives of Sexual Behavior, International Journal of Transgenderism

**Ad Hoc Reviewer:** Journal of Consulting and Clinical Psychology, Clinical Psychology Review, Journal of Counseling Psychology, The Counseling Psychologist, Feminism and Psychology, Psychology of Religion and Spirituality, Psychology of Women Quarterly, Journal of GLBT Family Issues, BioMed Central Journal, The Cognitive Behavior Therapist, Psychotherapy Research, Routledge Publishers, Harvard University Press

## JOURNAL PUBLICATIONS

\*Denotes student

1. **Budge, S.L.**, Orovecz, J.\*, Owen, J.J., & Sherry, A.R. (In Press). The Relationship Between Conformity to Gender Norms, Sexual Orientation, and Gender Identity for Sexual Minorities. *Counselling Psychology Quarterly*.
2. **Budge, S.L.** (In press). To err is human: An introduction to the special issue on clinical errors. *Psychotherapy*.
3. **Budge, S.L.** & Pankey, T.L.\* (In press). Ethnic differences in gender dysphoria. *Current Psychiatry Reviews*.
4. **Budge, S.L.** & dickey, l.m. (In press). Barriers, challenges, and decision-Making in the letter writing process for gender transition. *Psychiatric Clinics*.
5. Katz-Wise, S.L., Reisner, S.L., White, J.M., & **Budge, S.L.** (In press). Sexual fluidity and social determinants of mental health in gender minority adults in Massachusetts. *Archives of Sexual Behavior*.
6. dickey, l.m., **Budge, S.L.**, Katz-Wise, S.L., & Garza, M.V. (2016). Health disparities in the transgender community: Exploring differences in insurance coverage. *Psychology of Sexual Orientation and Gender Diversity*.
7. Barr, S.M.\*, **Budge, S.L.**, & Adelson, J.L. (2016) Transgender community belongingness as a mediator between strength of transgender identity and well-being. *Journal of Counseling Psychology*.
8. Nienhuis, J. B.\*, Owen, J., Valentine, J. C., Black, S. W.\*, Halford, T. C.\*, Parazak, S. E.\*, **Budge, S.**, & Hilsenroth, M. J. (2016). Therapeutic alliance, empathy, and genuineness in individual adult psychotherapy: A meta-analytic review. *Psychotherapy Research*.
9. **Budge, S.L.**, Thai, J.L.\*, Tebbe, E., & Howard, K.H. (2016) The intersection of socioeconomic status, race, sexual orientation, transgender identity, and mental health outcomes. *The Counseling Psychologist*.
10. Tebbe, E.A. & **Budge, S.L.** (2016) Research with transgender communities: Applying a process-oriented approach to methodological considerations and research recommendations. *The Counseling Psychologist*.
11. Moradi, B., Tebbe, E., Brewster, M., **Budge, S.L.**, Lenzen, A., Enge, E...Painter, J. (2016). A content review of transgender research: 2002-2012. *The Counseling Psychologist*.
12. Tebbe, E.A., Moradi, B., & **Budge, S.L.** (2016). Introduction to the Major Contribution on Research with Transgender Populations. *The Counseling Psychologist*.
13. **Budge, S.L.** (2015). Psychotherapists as gatekeepers: An evidence-based case-study highlighting the role and process of letter-writing for transgender clients. *Psychotherapy*.
14. Kopta, M., Owen, J.J., & **Budge, S.L.** (2015). Measuring psychotherapy outcomes with the Behavioral Health Measure-20: Efficient and comprehensive. *Psychotherapy*.
15. Watkins, C.E., **Budge, S.L.**, & Callahan, J.L. (2015). Common and specific factors converging in psychotherapy supervision: A supervisory extrapolation of the Wampold/Budge psychotherapy relationship model. *Journal of Psychotherapy Integration*, 25, 214-235.

16. Owen, J.J., Adelson, J.L., **Budge, S.L.**, Wampold, B.E., Kopta, M., Minami, T., & Miller, S.D., (2015). Trajectories of change in short-term psychotherapy. *Journal of Clinical Psychology, 71*, 817-827.
17. **Budge, S.L.** (2015). The effectiveness of psychotherapeutic treatments for personality disorders: A review and critique of current research practices. *Canadian Psychology, 56*, 191-196.
18. Owen, J.J., Adelson, J.L., **Budge, S.L.**, Reese, R.J., & Kopta, M.M. (2015). Good-Enough Level and Dose-Effect Models: Variation Among Outcomes and Therapists. *Psychotherapy Research.*
19. Katz-Wise, S.L. & **Budge, S.L.** (2015). Cognitive and interpersonal identity processes related to mid-life gender transitioning in transgender women. *Counselling Psychology Quarterly, 28*, 150-174.
20. **Budge, S.L.**, Orovecz, J.\*, & Thai, J.L.\* (2015). Transgender men's positive emotions: The interaction of gender identity and emotion labels. *The Counseling Psychologist.*
21. **Budge, S. L.**, Keller, B.L.\*, & Sherry, A. (2015) A qualitative investigation of lesbian, gay, bisexual, and queer women's experiences of sexual pressure. *Archives of Sexual Behavior.*
22. **Budge, S.L.** (2014). Navigating the balance between positivity and minority stress for LGBTQ clients who are coming out. *Psychology of Sexual Orientation and Gender Diversity, 1*, 350-352.
23. **Budge, S.L.**, Rossman, H.K.\*, & Howard, K.H. (2014). Genderqueer individuals' mental health outcomes: The impact of gender socialization, coping, and perceived loss. *Journal of LGBT Issues in Counseling, 8*, 95-117.
24. **Budge, S.L.**, Moore, J.T.\*, Del Re, A.C., Wampold, B.E., Baardseth, T.P., & Nienhuis, J.B.\* (2013). The effectiveness of evidence-based treatments for personality disorders when comparing treatment-as-usual and bonafide treatments. *Clinical Psychology Review, 33*, 1057-1066.
25. **Budge, S.L.** (2013). Interpersonal psychotherapy with transgender clients. *Psychotherapy, 50*, 356-359.
26. Katz-Wise, S.L., **Budge, S.L.**, & Hyde, J.S. (2013). Objectified body consciousness and the mother adolescent relationship. *Psychology of Women Quarterly, 37*, 366-380.
27. **Budge, S.L.**, Adelson, J.L., & Howard, K.H. (2013). Anxiety and depression in transgender individuals: The roles of transition status, loss, social support, and coping. *Journal of Consulting and Clinical Psychology, 81*, 545-557.
28. **Budge, S.L.**, Owen, J.J., Kopta, S.M., Minami, T., Hanson, M.R., & Hirsch, G (2013). Differences among trainees in client outcomes associated with the Phase Model of Change. *Psychotherapy, 50*, 150-157.
29. **Budge, S. L.**, Katz-Wise, S. L., Tebbe, E., Howard, K.A.S., Schneider, C. L., & Rodriguez, A. (2013). Transgender emotional and coping processes: Use of facilitative and avoidant coping throughout the gender transition. *The Counseling Psychologist, 41*, 601-647.
30. Valdez, C. R. & **Budge, S.L.** (2012). Addressing adolescent depression in schools: Effectiveness and acceptability of an in-service training for school staff in the United States. *International Journal of Educational Psychology, 1*, 228-25.

31. Wampold, B.E., & **Budge, S.L.** (2012). The relationship—and it's relationship to the common and specific factors of psychotherapy. *The Counseling Psychologist, 40*, 601-623.
32. Wampold, B.E., **Budge, S.L.**, Laska, K. M., Del Re, A.C., Baardseth, T.P., Fluckiger, C., Minumi, T., Kivlighan, M., & Gunn, W. (2011). Evidence-based treatments for depression and anxiety versus treatment-as-usual: A meta-analysis of direct comparisons. *Clinical Psychology Review, 31*, 1304-1315.
33. Valdez, C. R., Dvorscek, M., **Budge, S.L.**, & Esmond, S.L. (2011). Provider perspectives of Latino patients: Determinants of care and implications of treatment. *The Counseling Psychologist, 39*, 497-526.
34. Wampold, B.E., Benish, S.G., Imel, Z.E., Miller, S.D., Laska, K., Del Re, A.C., Baardseth, T.P., & **Budge, S.L.** (2010). What works in the treatment of PTSD? A response to Ehlers et al. *Clinical Psychology Review, 30*, 269-276.
35. **Budge, S. L.**, Tebbe, E. N. & Howard, K. A. S. (2010). The work experiences of transgender individuals: Negotiating the transition and coping with barriers. *Journal of Counseling Psychology, 57*, 377-393.
36. Howard, K. A. S., **Budge, S. L.**, Gutierrez, B., Lemke, N. T., & Owen, A. D. (2010) Academic and career goals of high school youth: processes and challenges. *Journal of Career Development, 57*, 377-396.
37. **Budge, S. L.**, Baardseth, T. P., Wampold, B. H., & Fluckiger, C. (2010). Researcher allegiance and supportive therapy: Pernicious affects on results of randomized clinical trials. *European Journal of Counselling and Psychotherapy, 12*, 23-39.
38. Howard, K. A. S., **Budge, S. L.**, & McKay, K. M. (2010). Youth exposed to violence: The role of protective factors. *Journal of Community Psychology, 38*, 63-79.
39. **Budge, S. L.** (2006) Peer mentoring in post-secondary education: Implications for research and practice. *Journal of College Reading and Learning, 37* (1), 71-85.

## BOOK CHAPTERS

1. **Budge, S.L.** & Orovecz, J.J.\* (In press). Gender Fluidity. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
2. **Budge, S.L.** (In press). Genderqueer. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
3. **Budge, S.L.** & Pankey, T. L.\* (In press). Interpersonal therapies and gender. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
4. **Budge, S.L.** & salkas, s.\* (In press). Experiences of transgender people within the LGBT community. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
5. **Budge, S.L.** & Thai, J.L.\* (In press). Coming out processes for transgender people. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
6. **Budge, S.L.** & Sinnard, M.\* (In press). Trans\*. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
7. **Budge, S.L.** & Snyder, K.E. (In press). *Sex-related differences research*. Encyclopedia of Gender and Sexuality Studies.

8. **Budge, S. L.**, & Wampold, B. E. (2015). The relationship: How it works. In O. C. G. Gelo, A. Pritz, & B. Rieken (Eds.), *Psychotherapy research: Foundations, process, and outcomes* (pp. 213-228). Dordrecht: Springer.
9. Akinniyi, D.\* & **Budge, S.L.** (In press). Biological sex and mental health outcomes. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
10. Lam, J.\* & **Budge, S.L.** (In press). Help-seeking behaviors and men. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
11. Jones, T.\* , Chin, M.Y.\* , & **Budge, S.L.** (In press). Sororities. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
12. Sun, S.\* & **Budge, S.L.** Women's group therapy. (In press). In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
13. Sun, S.\* , Minero-, L.\* , & **Budge, S.L.** (In press). Multiracial People and Gender. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.
14. Alexander, D.\* , Hunter, C.\* , & **Budge, S.L.** (In press). Experiences of women in religious leadership. In K. Nadal (Ed.) *The SAGE Encyclopedia of Psychology and Gender* (pp. xx). Thousand Oaks, CA: SAGE.

## PUBLICATIONS IN REVISION AND UNDER REVIEW

\*Denotes student

1. **Budge, S.L.**, Chin, M.Y., & Minero, L.P. (In Revision). *Transgender individuals' facilitative coping: An analysis of internal and external processes.*
2. **Budge, S.L.**, Katz-Wise, S. L., & Owen, J.J. (Under Review) *Sexual minorities' sexual communication, internalized homophobia, and conformity to gender norms.*
3. Hambrick, M., Cintron, A., Apegoraro, L., & **Budge, S.L.** *I Am Cait: An analysis of the top-down and bottom-up framing of Caitlyn Jenner's ESPY Awards speech.*
4. Thai, J.L.\* , **Budge, S.L.**, & Adelson, J. L. (In Revision) *The impact of family and identity on suicidality and substance abuse in trans\* Asian and Pacific Islander individuals*
5. Katz-Wise, S.L., **Budge, S. B.**, Orovecz, J.O., Ngyuen, B., & Thompson, K. (Under Review). *Imagining the Future: Qualitative Findings of Future Orientation from the Transgender Youth Family Study.*
6. Walinsky, D. & **Budge, S.L.** (Under Review) *Gender Binaries, Workplace Discrimination and Satisfaction, and Delayed Gender Transition*

## MANUSCRIPTS IN PROGRESS

1. **Budge, S.L.**, Sinnard, M.T.\* , & Rossman, H.K.\* *Queering emotions: A content analysis of non-binary and genderfluid individuals' experiences of affect*
2. **Budge, S.L.**, Rossman, H.K.\* , & Sinnard, M.T.\* *A grounded theory analysis of the relationship between emotions and internal identity processes for non-binary and genderfluid individuals*

3. **Budge, S.L.**, Katz-Wise, S.L., Conniff, J.,\* Braden, T.\*, Belcourt, W.S.\*, Parks, R. L. *Coping processes for transgender youth.*
4. Rossman, H.K.\* , Sinnard, M.T.\* , Salkas, s.\* , & **Budge, S.L.** Genderfluid and non-binary individuals' experiences of external identity processes and emotion labels.
5. **Budge, S.L.**, Orovecz, J.O.\* , Barr, S.M.\* , & Keller, B.L.\* *Affirmative emotional processes for transgender women: A qualitative analysis.*
6. **Budge, S.L.**, Stahl, A.\* , Alexander, D.\* , salkas, s.\* , Orovecz, J.\* . *The identity formation of genderqueer individuals.*
7. **Budge, S.L.**, Akinniyi, D.\* , Alexander, D.\* , Stahl, A\* ., Salkas, S\* ., Orovecz, J\* . Analyzing the understanding of multiple identities for genderqueer individuals.
8. **Budge, S.L.** Barr, S.M.\* , & Snyder, K. & *A dynamic systems approach to exploring the development of transgender identity.*
9. Rossman, H.K.\* , Eleazer, J.\* , Gervasi, C.,\* & **Budge, S.L.** *A qualitative analysis of transgender individuals' perceptions of privilege.*
10. Hunter, C.\* & **Budge, S.L.** *The moderating effect of race related to discrimination for transgender individuals.*
11. Alexander, D.\* & **Budge, S.L.** *The impact of partner support on symptoms of anxiety for transgender women, transgender men, and genderqueer individuals.*
12. Eleazer, J.\* & **Budge, S.L.** *Transgender military service-members' experiences of identity and vocational integration.*
13. Solberg, V.S., **Budge, S.L.**, Phelps, A., Durham, J., Haakenson, K., & Timmons, J. *The perceived utility and value of Individualized Learning Plans: Parent, educator, and student perspectives.*
14. Solberg, V.S., **Budge, S.L.**, & Halverson, E. *Identifying the nature of career decision-making patterns and their impact on career, academic and social/emotional outcomes: A mixed-methods approach.*

## MINOR PUBLICATIONS AND TECHNICAL REPORTS

1. Solberg, V. S., Gresham, S. L., & **Budge, S. L.** (2009, December). *ECDM validation study-II*. Center on Education and Work (CEW), University of Wisconsin – Madison. Submitted to Guidance Branch, Singapore Ministry of Education
2. Solberg, V. S., Gresham, S. G., **Budge, S. L.**, Phelps, A. L., Haakenson, K., & Durham, J. (2009, September). *NCWD/Youth research and demonstration project on Individualized Learning Plans*. Center on Education and Work (CEW), University of Wisconsin-Madison. Submitted to the National Collaborative on Workforce and Disability/Youth.
3. Solberg, V. S., Lindwall, J., **Budge, S. L.**, Schneider, C. L., Deloya, J., Halley, K., & Hatfield, P. (2009, August). *Report on the Mental Health Concerns among the Students in the Madison Metropolitan School District*. Center on Education and Work (CEW), University of Wisconsin – Madison. Submitted to the Madison Metropolitan School District.
4. Solberg, V. S., **Budge, S. L.**, Phelps, L. A. (2009, August). *Phase II Portal: Focus Group Discussion*. Center on Education and Work (CEW), University of Wisconsin – Madison. Submitted to Guidance Branch, Singapore Ministry of Education

5. Valdez, C. R., & **Budge, S. L.** (2008). *Program evaluation of "It's Time! Adults Addressing Youth and Teen Depression."* In Health Wisconsin, Milwaukee, WI.
6. Lin, M. & **Budge, S.** (2007). Exploring the impact of race and class on the First Year in Counseling Psychology 115. *Our First Year Experience*, 2, 3-4.

#### **INTERNATIONAL PRESENTATIONS (Peer-reviewed)**

1. **Budge, S.L.** & Katz-Wise, S.L. (July, 2016). *Emotional expression of transgender youth and their families: A cross-comparison of familial cultures for gender and emotions.* Paper to be presented at the International Congress of Psychology Conference, Yokohama, Japan.
2. Chin, M.Y.\*, Minero, L.\*, & **Budge, S.L.** (July, 2016). *"This is me, and I am happy. I love it": Understanding Internal Coping Processes of Trans-identified Individuals using Grounded Theory.* Paper to be presented at the International Congress of Psychology Conference, Yokohama, Japan.
3. **Budge, S.L.**, Katz-Wise, S.L., Conniff, J.\*, Belcourt, S.\*, & Parks, R\*. (June, 2016). *Developmental processes of coping for transgender youth: Results from the Transgender Youth and Family Study (TYFS).* Paper to be presented at the World Professional Association for Transgender Health Biannual Conference, Amsterdam, The Netherlands.
4. Sinnard, M.\*, Raines, C.\*, & **Budge, S.L.** (June, 2016). *Effects of location and transition status on anxiety and depression in transgender individuals.* Paper to be presented at the World Professional Association for Transgender Health Biannual Conference, Amsterdam, The Netherlands.
5. Salkas, S.\* & **Budge, S.L.** (June, 2016). *An Overview of Non-binary gender identities in the National Transgender Discrimination Survey,* Paper to be presented at the World Professional Association for Transgender Health Biannual Conference, Amsterdam, The Netherlands.
6. Orovecz, J.\*, Salkas, S.\*, & **Budge, S.L.** (June, 2016). *External Identity Processes for Individuals with Non-Binary Identities.* Paper to be presented at the World Professional Association for Transgender Health Biannual Conference, Amsterdam, The Netherlands.
7. Rossman, K.\*, Sinnard, M.\*, & **Budge, S.L.** (June, 2016). *The Externalization of Affect for Individuals with Non-binary Gender Identities.* Paper to be presented at the World Professional Association for Transgender Health Biannual Conference, Amsterdam, The Netherlands.
8. **Budge, S.L.** (February, 2014). *Developmental processes of positive emotions for trans\* individuals: The interplay of interpersonal emotions and transition appraisal.* Paper presented at the World Professional Association for Transgender Health Biannual Conference, Bangkok, Thailand.
9. **Budge, S.L.**, Adelson, J.L., & Howard, K.A.S. (February, 2014). *Transgender and Genderqueer individuals' mental health concerns: A moderated mediation analysis of social support and coping.* Paper presented the World Professional Association for Transgender Health Biannual Conference, Bangkok, Thailand.

#### **NATIONAL PRESENTATIONS (Peer-reviewed)**

1. **Budge, S.L.** (August, 2016). *Psychotherapy Interventions, Process, and Outcome with Transgender and Gender Non-Conforming Clients*. Chair of invited symposium for Division 29 at the Annual Meeting for the American Psychological Association, Denver, Colorado.
2. **Budge, S.L.** (August, 2016). *The impact of minority stress interventions on psychotherapy outcomes with a transgender client*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
3. Minero, L.M., Chin, M.Y., & **Budge, S.L.** (August, 2016). *Transgender Clients Reports of Characteristics of Effective and Trans- Competent Therapists*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
4. **Budge, S.L.** (August, 2016). *The State and Future of Psychotherapy Research with Transgender Clients*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
5. Minero, L.M., Chin, M.Y., & **Budge, S.L.** (August, 2016). *Understanding External Coping Processes of Trans-identified Individuals using Grounded Theory*. Poster to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
6. Salkas, S. & **Budge, S.L.** (August, 2016). *An overview of US population-based data on individuals with non-binary gender identities*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
7. Alexander, D., Orovecz, J., Salkas, S., Stahl, A., & **Budge, S. L.** (August, 2016). *Internal Identity Processes for Individuals with Non-Binary Identities*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
8. Rossman, K., Sinnard, M., & **Budge, S.L.**, (August, 2016). *The "Queering" of Emotions-Using Non-binary Gender Identity to Label Emotional Processes*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
9. Barr, S. M. & **Budge, S.L.** (August, 2016). *Experiences of self esteem and well-being for individuals with non-binary gender identities*. Paper to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
10. Chase, A., Lam, J., & **Budge, S.L.** (August, 2016). *Culture and Masculine Ideology: Measuring Masculinity Among Japanese American Men*. Poster to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
11. Akinniyi, D. & **Budge, S.L.** (August, 2016). *The Student-Athlete Experience: Multiple Minority Statuses and Discrimination*. Poster to be presented at the Annual Meeting for the American Psychological Association, Denver, Colorado.
12. **Budge, S.L.** (August, 2016). *Identity Processes, Well-being, and Emotional Processes for Individuals with Non-Binary Identities*. Chair of symposium at the Annual Meeting for the American Psychological Association, Denver, Colorado.
13. Akinniyi, D.A.\* and **Budge, S.L.** (August, 2015). *Genderqueer individuals' conceptualizations of multiple identities: A qualitative investigation using identity maps*. Paper presented at the Annual Meeting for the American Psychological Association, Toronto, Canada.
14. Sinnard, M.\* and **Budge, S.L.** (August, 2015). *Effects of Location and Transition Status on Anxiety and Depression in Transgender Individuals*. Poster presented at the Annual Meeting for the American Psychological Association, Toronto, Canada.

15. Watkins, C.E., **Budge, S.L.**, & Wampold, B.E. (August, 2015). *Extrapolating the Wampold/Budge Psychotherapy Relationship Model to Psychotherapy Supervision*. Paper presented at the Annual Meeting for the American Psychological Association, Toronto, Canada.
16. **Budge, S.L.** (June, 2015). *The effectiveness of psychotherapeutic treatments for personality disorders: A review and critique of current research practices*. Paper presented at the Annual Meeting for the Society for Psychotherapy Research, Philadelphia, PA.
17. Kring, M.\* & **Budge, S.L.** (June, 2015). *Re-evaluating outcomes in psychotherapy: Considerations beyond self-report*. Paper presented at the Annual Meeting for the Society for Psychotherapy Research, Philadelphia, PA.
18. Owen, J. J., Wampold, B.E., Miller, S.D., **Budge, S.L.**, & Minami, T. (June, 2015). *Trajectories of change in short-term psychotherapy: Lessons from growth curve mixture modeling*. Paper presented at the Annual Meeting for the Society for Psychotherapy Research, Philadelphia, PA.
19. Katz-Wise, S.L. & **Budge, S.L.** (April, 2015). *Imaging the future: qualitative findings of future orientation from transgender youth and parents/caregivers in the Transgender Youth Family Study*. Paper presented at the Annual Transgender Health Summit, Oakland, CA.
20. **Budge, S.L.** (August, 2014). *The Other Side of the Story: Trans\* Individuals' Experiences of Positivity and Resilience*. Symposium chair for the Annual Meeting for the American Psychological Association, Washington, DC.
21. **Budge, S.L.** (August, 2014). *Lessons learned from NIH-grant submission for LGBTQ research*. Invited panelist for the Annual Meeting for the American Psychological Association, Washington, DC.
22. **Budge, S.L.** & Katz-Wise, S.L. (August, 2014). *Emotional and interpersonal experiences of trans\* youth and their caregivers*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.
23. Eleazer, J.L.\*, Ngyuen, Y.\*, **Budge, S.L.** (August, 2014). *"I'm afraid of my therapist": Military Policy and Access-to-Care for Transgender US Service Members*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.
24. Thai, J.L.\* & **Budge, S.L.** (August, 2014). *Mental health outcomes for trans\* Asian American, Asian, and Pacific Islander populations*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.
25. Alexander, D.\* & **Budge, S.L.** (August, 2014). *The impact of partner support on symptoms of anxiety for transgender women, transgender men, and genderqueer individuals*. Poster presented at the Annual Meeting for the American Psychological Association, Washington, DC.
26. Barr, S.M.\* & **Budge, S.L.** (August, 2014). *Transgender identity salience as a predictor for well-being and body control beliefs for trans\* individuals*. Poster presented at the Annual Meeting for the American Psychological Association, Washington, DC.
27. Keller, B.L.\*, Barr, S.M.\*, & **Budge, S.L.** (August, 2014). *Trans\* women's emotional resilience: Reactions to the intersection of sexism and transphobia*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.

28. Rossman, H.K.\*, Sinnard, M.\*, **Budge, S.L.** (August, 2014). *Adapting a three-tiered model of emotions to genderqueer individuals' identity processes*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.
29. Thai, J.L.\*, Orovecz, J.\*, **Budge, S.L.** (August, 2014). *Trans\* men's experiences of positive emotions: An examination of gender identity and emotion labels*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, DC.
30. Tebbe, E.N., Brewster, M., **Budge, S.L.** (August, 2014). *A content analysis of transgender psychological literature*. Poster presented at the Annual Meeting for the American Psychological Association, Washington, DC.
31. Thai, J.L.\* & **Budge, S.L.** (March, 2014). *Family relationships and outness for transgender Asian Pacific Islander individuals*. Paper presented at the Society of Counseling Psychology Conference, Atlanta, GA.
32. Hunter, C.\* & **Budge, S.L.** (March, 2014). *The moderating effect of race related to discrimination for transgender individuals*. Paper presented at the Society of Counseling Psychology Conference, Atlanta, GA.
33. Alexander, D.\* & **Budge, S.L.** (March, 2014). *The impact of partner support on symptoms of anxiety for transgender women, transgender men, and genderqueer individuals*. Paper presented at the Society of Counseling Psychology Conference, Atlanta, GA.
34. Barr, S.M.\* & **Budge, S.L.** (March, 2014). *Validation of the Objectified Body Consciousness Scale for transgender individuals*. Paper presented at the Society of Counseling Psychology Conference, Atlanta, GA.
35. **Budge, S.L.** (October, 2013). *Addressing grief and role transitions for transgender clients experiencing gender identity incongruence*. Paper presented at the Biennial North American Society for Psychotherapy Research Conference, Nashville, TN.
36. **Budge, S.L.**, Barr, S.M.\*, Katz-Wise, S.L., Keller, B.L.\*, & Manthos, M.\* (2013, June). *Incorporating positivity into psychotherapy with transgender clients*. Workshop presented at the Annual Philadelphia Transgender Health Conference, Philadelphia, PA.
37. **Budge, S.L.** & Barr, S.M.\* (2013, April). *Emotional and identity processes of trans\* youth: A developmental approach*. Paper presented at the Biennial Society for Research on Child Development Conference, Seattle, WA.
38. **Budge, S.L.**, Thai, J.\*, Rossman, H.K.\* (2012, August) *Intersecting identities and mental health outcomes for transsexual, cross-dressing, and genderqueer individuals*. Poster presented at the Annual Meeting for the American Psychological Association, Orlando, Florida.
39. **Budge, S.L.** & Keller, B.L.\* (2012, August). *"She felt pressured, I felt neglected": LGBTQ individuals' experiences of sexual pressure in relationships*. Poster presented at the Annual Meeting for the American Psychological Association, Orlando, Florida.
40. **Budge, S.L.**, Moore, J.\*, Neinhuis, J.\*, Baardseth, T., & Wampold, B.E. (2012, June). *The relative efficacy of bona-fide psychological treatments for personality disorders: A meta-analysis of direct comparisons*. Paper presented at the Annual Meeting for the Society for Psychotherapy Research, Virginia Beach, Virginia.
41. **Budge, S.L.** & Katz-Wise, S.L. (2012, February). *Trans-Affirmative Therapy: Focusing on Emotional and Coping Processes Throughout Gender Transitioning*. Workshop presented at the Transgender Spectrum Symposium, Annual Meeting of the Gay and Lesbian Affirmative Psychotherapy Association, New York, New York.

42. **Budge, S.L.** & Katz-Wise, S.L. (2011, November). *Transgender emotional and coping processes: Facilitative and avoidant coping throughout the gender transition*. Paper presented at the Annual Meeting for the Society for the Scientific Study of Sexuality, Houston, Texas.
43. **Budge, S.L.** & Howard, K.H. (2011, August). *Gender socialization and gender queer individuals: The impact of assigned sex on coping and mental health concerns*. Paper presented at the Annual Meeting for the American Psychological Association, Washington, D.C.
44. Tebbe, E.L., **Budge, S.L.**, & Fischer, A. (2011, March). *Transforming the research Goliath: Reflections on research with transgender communities*. Roundtable presented at the Bi-Annual Meeting of the Association for Women in Psychology, Philadelphia, Pennsylvania.
45. **Budge, S.L.** & Howard, K.A.S. (2010, August). *Coping, social support, and well-being in the transition process for transgender individuals*. Paper presented at the Annual Meeting for the American Psychological Association, San Diego, California.
46. Baardseth, T.P., **Budge, S.L.**, & Wampold, B.E. (2010, August). *Allegiance and psychotherapy research: The effectiveness of supportive therapy as a control*. Poster presented at the Annual Meeting for the American Psychological Association, San Diego, California.
47. Solberg, V.S., Gresham, S.L., **Budge, S.L.**, & Phelps, A.L. (2010, August). *Impact of Learning Experiences on Students With Disabilities Career Development*. Poster presented at the Annual Meeting for the American Psychological Association, San Diego, California.
48. Katz-Wise, S.L., **Budge, S.L.**, & Hyde, J.S. (2010, August). *Individuation or identification? Objectified body consciousness*. Poster presented at the Annual Meeting for the American Psychological Association, San Diego, California.
49. Solberg, V.S., Gresham, S.L., **Budge, S.L.**, & Phelps, A.L. (2010, August). *Impact of Exposure to Quality Learning Experiences on Career Development*. Paper presented at the Annual Meeting for the American Psychological Association, San Diego, California.
50. **Budge, S.L.** & Fluckiger, C. (2010, June). *Comparison of Evidence-Based-Treatments versus Treatment as Usual: A meta-analysis*. Paper presented at the Annual Meeting for the Society for Psychotherapy Research, Asilomar, California.
51. **Budge, S.L.** & Howard, K.A.S. (2010, April). *Career decision-making in the transgender population: The role of barriers and discrimination*. Paper presented at the Annual Meeting for the American Educational Research Association, Denver, Colorado.
52. **Budge, S.L.**, Solberg, V.S., Phelps, L.A., Haakenson, K., & Durham, J. (2010, April). *Promising practices for implementing Individualized Learning Plans: Perspectives of teachers, parents, and students*. Paper presented at the Annual Meeting for the American Educational Research Association, Denver, Colorado.
53. Solberg, V.S., Gresham, S.L., Phelps, L.A., & **Budge, S.L.** (2010, April). *Identifying decision-making patterns and its impact on career development and workforce readiness*. Paper presented at the Annual Meeting for the American Educational Research Association, Denver, Colorado.
54. Katz-Wise, S.L., **Budge, S.L.**, & Hyde, J.S. (2010, March). *Objectified body-consciousness and the mother-adolescent relationship*. Poster presented at the Biennial Meeting for the Society for Research on Adolescence, Philadelphia, Pennsylvania.

55. **Budge, S. L.**, Tebbe, E. N., Katz-Wise, S. L., Schneider, C. L., & Howard, K. A. S. (2009, August). *Workplace transitions: Work experiences and the impact of transgender identity*. Paper presented at the Annual Meeting of the American Psychological Association, Toronto, Ontario, Canada.
56. Katz-Wise, S. L., **Budge, S. L.**, & Schneider, C. L. (2009, August). *Navigating the gender binary: A qualitative study of transgender identity development*. Paper presented at the Annual Meeting of the American Psychological Association, Toronto, Ontario, Canada.
57. Nelson, M. L., Thompson, M. N., Huffman, K. L., & **Budge, S. L.** (2009, August). *Development and further validation of the social class identity dissonance scale*. Paper presented at the Annual Meeting of the American Psychological Association, Toronto, Ontario, Canada.
58. Dvorscek, M., **Budge, S. L.**, Bluemner, J. L., & Valdez, C. R. (2009, August). *Health care provider perspectives on Latino patients with depression*. Poster presented at the Annual Meeting of the American Psychological Association, Toronto, Ontario, Canada.
59. Neumaier, E. R., **Budge, S. L.**, Bohlig, A. J., Doolin, E. M., & Nelson, M. L. (2009, August). *I feel masculine but they think I'm feminine: Toward measuring experienced gender role*. Poster presented at the Annual Meeting of the American Psychological Association during the Division 17 Social Hour, Toronto, Ontario, Canada.
60. Doolin, E. M., Graham, S. R., Hoyt, W. T., **Budge, S. L.**, & Bohlig, A. J. (2009, January). *Out and about in the South: Defining lesbian communities*. Poster presented at the National Multicultural Conference and Summit, New Orleans, LA.
61. **Budge, S. L.**, Tebbe, E. N. & Howard, K. A. S. (2009, January) *Transgender individuals' work experiences: Perceived barriers, discrimination, and self-efficacy*. Paper presented at the Annual Meeting of the Career Conference, Madison, WI.
62. Howard, K. A. S., **Budge, S. L.**, Jones, J., & Higgins, K. (2009, January). *Future plans of urban youth: A qualitative analysis of influences, barriers, & coping strategies*. Paper presented at the Annual Meeting of the Career Conference, Madison, WI.
63. **Budge, S. L.**, Schneider, C., Rodriguez, A., Katz-Wise, S., Tebbe, E., & Valdez, C. (2008, August). *The emotional roller coaster: Transgender experiences of positive and negative emotions*. Poster presented at the Annual Meeting of the American Psychological Association, Boston, MA.
64. Nelson, M. L., Huffman, K. & **Budge, S. L.**, (2008, August). *Initial validation of the Social Class Identity Dissonance Scale*. Poster presented at the Annual Meeting of the American Psychological Association, Boston, MA.
65. **Budge, S. L.**, Schneider, C., Rodriguez, A., & Howard, K. A. S. (2008, January) *What about the "T"?: Career counseling with transgender populations*. Paper presented at the Annual Meeting of the Career Conference, Madison, WI.
66. Howard, K. A. S., McKay, K. M., & **Budge, S. L.** (2007, August) *Adolescents' use of SOC strategies: The interaction with low-income and high violence contexts*. Poster presented at the Annual Meeting of the American Psychological Association, San Francisco, CA.
67. **Budge, S. L.** & Sherry, A. (2007, August) *The influence of gender role on sexual compliance: A preliminary investigation of LGB relationships*. Poster presented at the Annual Meeting of the American Psychological Association, San Francisco, CA.

68. Howard, K. A. S., Solberg, V. S., & **Budge, S. L.** (2007, August). *Designing culturally responsive school counseling career development programming for youth*. Paper presented at the Annual Meeting of the American Psychological Association, San Francisco, CA.
69. Howard, K. A. S., Jones, J. E., **Budge, S.**, Gutierrez, B., Lemke, N., Owen, A., & Higgins, K. (2007, April). *Academic and Career Goals of High School Youth: Processes and Challenges*. Paper presented at the Annual Meeting of the American Educational Research Association, Chicago, IL.

#### **REGIONAL PRESENTATIONS (Peer-reviewed)**

1. **Budge, S.L.** (November, 2013). *Incorporating an IPT approach with transgender clients*. Paper presented at the Annual Kentucky Psychological Association Conference, Lexington, KY.
2. **Budge, S.L.** (April, 2013). *Using interpersonal therapy with transgender clients*. Workshop provided at the Annual University of Florida Interdisciplinary Conference on LGBT Issues.
3. Barr, S. M.\* & **Budge, S. L.\*** (2013, April). The role of identity integration in the emotional well-being of post-transition individuals. Poster presentation at the Kentucky Psychological Association Student Research Conference, Louisville, KY.
4. Orovecz, J.\*, Thai, J.L.\*, & **Budge, S.L.** (2013, April). I'm stoked about life: The emotional processes of transgender men through a qualitative lens. Poster presented at the Spring Research Conference, Lexington, Kentucky.
5. Rossman, K.\* & **Budge, S.L.** (2013, April). Genderqueer individuals' mental health concerns: The relationship between social support and coping. Paper presented at the Spring Research Conference, Lexington, KY.
6. Barr, S. M.\* & **Budge, S. L.** (2013, April). The role of identity integration in the emotional well-being of post-transition individuals. Poster presented at the Spring Research Conference, Lexington, KY.
7. Rossman, K.\* & **Budge, S.L.** (2013, June). *Just the fact that I commanded that respect - I got the privilege: Qualitative Examination of Privilege in the Trans\* Community*. Paper presented at the Spring Research Conference, Lexington, KY.
8. Keller, B. L.\*, Barr, S. M.\*, & **Budge, S. L.** (2013, April). "For every bad, there's 40 good things that happen: A qualitative approach to understanding the positive emotional experiences of trans\* women. Poster presentation at the Spring Research Conference, Lexington, KY
9. Orovecz, J.\*, Thai, J.L.\*, & **Budge, S.L.** (2013, April). I'm stoked about life: The emotional processes of transgender men through a qualitative lens. Presented at the Spring Research Conference, Lexington, Kentucky.
10. Orovecz, J.\*, Thai, J.L.\*, & **Budge, S.L.** (2013, March). "I'm me, and I'm proud to be me": A grounded theory analysis of transgender men's emotional processes. Presented at the Kentucky Psychological Association Foundation Spring Academic Conference, Louisville, Kentucky.
11. Eleazer, J. R.\*. & **Budge, S. L.** (2013, March). "It Would be Better for Them to Have a Dead Hero for a Father than a Freak." Suicidality and Trans\* Military Service. Poster

presented at the Kentucky Psychological Association Spring Academic Conference, Louisville, KY.

12. Sinnard, M. \*, Rossman, K. \*, & **Budge, S. L.** (2013, March). "Positive emotional experiences of gender non-binary identified individuals. Poster presentation at the Kentucky Psychological Association Student Research Conference, Louisville, KY.
13. Barr, S.M. \*, Stahl, A. \*, Manthos, M. \*, & **Budge, S.L.** (2012, November). "*It means there aren't rules and you don't have to ascribe to a specific binary*": A qualitative examination of genderqueer identity. Paper presented at the **Chicago LGBTQ Health and Wellness Conference, Chicago, IL.**
14. Thai, J.L. \*, Orovecz, J. \*, & **Budge, S.L.** (2012, November). *Transgender men and positivity: Emotional processes related to identity.* Paper presented at the **Chicago LGBTQ Health and Wellness Conference, Chicago, IL.**
15. **Budge, S.L.**, Barr, S.M. \*, Orovecz, J. \*, & Rossman, H.K. \* (2012, November). *Clinical work with LGBT youth.* Workshop provided at the Annual Kentucky Psychological Association Conference, Louisville, KY.
16. **Budge, S.L.**, Lee, S., & Monahan-Rial, V. (2011, February). *Bridging institutional gaps: Utilizing transgender-affirmative therapy with college students.* Workshop presented at the Annual Meeting for the Big 10 College Counseling Center Conference, Minneapolis, Minnesota.
17. Lee, J., **Budge, S.L.**, Wilson, J.L., & Roper, J.M. (2011, February). *The Korean Conundrum: Managing stigma in the recruitment of group counseling members.* Workshop presented at the Annual Meeting for the Big 10 College Counseling Center Conference, Minneapolis, Minnesota.
18. **Budge, S.L.** & Katz-Wise, S.L. (2010, February). *Transition to adulthood: Developmental steps for transgender individuals.* Workshop presented at the Conference on Transgender and Gender Variant Youth, Madison, Wisconsin.
19. **Budge, S.L.** (2009, October). *Individualized Learning Plans: Parent, student, and educator focus groups.* Paper presented at the Fall Institute for the National Collaborative on Workforce and Disability/Youth, Charleston, South Carolina.

## INVITED KEYNOTE PRESENTATIONS

1. **Budge, S.L.** (March, 2016). *Understanding, acknowledging, and responding to LGBTQ microaggressions in health care settings.* Keynote to be provided at the Florida Area Health Education Center, Gainesville, Florida.
2. **Budge, S.L.** (September, 2014). *Positivity in transgender populations: Implications for vocational psychology.* Boston University, Boston Massachusetts.
3. **Budge, S.L.** (April, 2013). *Future Directions for Research and Therapy with Trans\* and Gender Diverse Individuals.* Keynote Address provided at the Annual University of Florida Interdisciplinary Conference on LGBT Issues.
4. **Budge, S.L.** (March, 2013). *The Psychology of Sexual Orientation and Gender Identity: Future Directions and Implications.* Keynote provided at the East Texas Psi Chi Student Research Conference, Tyler, Texas.

## NATIONAL RESEARCH BRIEFINGS

1. **Budge, S.L., & Solberg, V.S.,** (2010, March) *Career exploration and the use of career narrative data for high school students' career exploration processes: A United States Sample.* Research briefing presented at the Department of Labor, Washington, D.C.
2. **Budge, S.L., Solberg, V.S., & Phelps., A.L.** (2010, March) *Individualized Learning Plans within a community-oriented approach: The usefulness of focus group data with parents, teachers, and students.* Research briefing presented at the Department of Labor, Washington, D.C.

## **INTERNATIONAL RESEARCH BRIEFINGS**

1. **Budge, S.L., & Solberg, V.S.,** (2010, February) *A three-tiered approach to analyze the career decision making processes using focus group data with Singaporean parents, students, and staff.* Research briefing presented at the Ministry of Education, Singapore.
2. **Budge, S.L., & Solberg, V.S.,** (2010, February) *Use of narrative analysis for high school students' career exploration processes: A Singapore Sample.* Research briefing presented at the Ministry of Education, Singapore.

## **MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS**

American Psychological Association (APA)

Society of Counseling Psychology (Division 17)

Division of Psychotherapy (Division 29)

Society for the Psychology of Women (Division 35)

Society for the Psychological Study of Lesbian, Gay, Bisexual, and Transgender Issues (Division 44)

Society of Clinical Child and Adolescent Psychology (Division 53)

World Professional Association for Transgender Health (WPATH)

Society for Psychotherapy Research (SPR)

## **TEACHING AND INSTRUCTION**

### **University of Wisconsin-Madison Courses:**

CP 805: Microskills of Counselors

CP 806: Pre-practicum

CP 900: Foundational Practicum

CP 903: Advanced Practicum

CP 990: Independent Research

### **University of Louisville Courses:**

ECPY 780: Advanced Practicum

ECPY 648: Intellectual Assessment

ECPY 663: Multicultural Issues

ECPY 629: Theories and Techniques of Counseling

ECPY 621: Differential Diagnosis

ECPY 793: Gender and Queer Issues In Psychology  
ECPY 793: Advanced Multicultural Psychotherapy  
ECPY 700: Supervised Research

**Graduate-Student Teaching:**

**University of Wisconsin-Madison (2006-2009)**

CP 804: Research Methods  
CP 994: Personality Assessment  
CP 650: Interviewing Skills  
CP 115: First Year Experience

**University of Texas at Austin (2005-2006)**

PSY 301: Introduction to Psychology

**DISSERTATION COMMITTEES**

Kinton Rossman (University of Louisville; Chair, Proposed)  
Kathleen Barnett (University of Louisville; Chair)  
Danielle Alexander (University of Louisville; Chair)  
Jake Nienhuis (University of Louisville; Defended)  
Kelley Quirk (University of Louisville; Defended)  
Keldric Thomas (University of Louisville; Defended)  
Johanna Strokoff (University of Louisville; Defended)  
Elise Romines (University of Louisville; Proposed)  
Julia Benjamin (University of Wisconsin-Madison; Proposed)  
Craig Hase (University of Wisconsin-Madison; Proposed)  
Sarah McArdeell Moore (University of Wisconsin-Madison, Proposed)  
Noah Yulish (University of Wisconsin-Madison, Proposed)  
Nick Frost (University of Wisconsin-Madison, Proposed)  
Lindsey Houghton (University of Wisconsin-Madison, In preparation)  
Shufang Sun (University of Wisconsin-Madison, Proposed)  
Joe Orovecz (University of Wisconsin-Madison, In preparation)

**MASTERS THESES**

Dylan Hiner (University of Louisville; Chair)  
Dorcas Akinniyi (University of Wisconsin-Madison; Chair)

**UNDERGRADUATE THESES**

Morgan Sinnard (University of Louisville; Chair, defended)

**AWARDS**

7/2015	Early Career Award for work with LGBT populations from the Society for Counseling Psychology--Division 17 SLGBTI Group
5/2015	Early Career Award for the Society for the Advancement of Psychotherapy (Division 29, APA)
1/2014	Runner Up for the Most Valuable Paper Award for a 2013 article published in <i>Psychotherapy</i>
2/2013	Nominated for the University of Louisville Trustees Award—provided to faculty for excelling in mentoring students.
7/2010	Society for Counseling Psychology--Division 17 LGBT Outstanding Graduate Student Award for community contributions with the LGBT population during my doctoral program.
7/2010	Society for Vocational Psychology/ACT Graduate Student Research Award, \$500.00 for career research regarding transgender individuals.
6/2010	Society for the Psychological Study of Lesbian, Gay, Bisexual, and Transgender Issues—Division 44: Transgender Research Award, \$500.00 for dissertation research.
2/2010	John W. M. Rothery Memorial Research Award \$150.00.
8/2009	Outstanding Student Poster Award, APA Convention 2009.
8/2008-8/2011	APA Student Travel Award, \$300.00 (four years in a row).

## **WORKSHOPS/TRAININGS PROVIDED**

3/2016	Invited to provide a community-based training at the University of Florida to teach balance in being an academic and an activist
3/2016	Invited to provide a training to women's and gender studies students at the University of Florida regarding gender and sexuality in psychiatric diagnosis
1/2016	Invited to provide a workshop to veterinary students regarding LGBTQ competent care at the University of Wisconsin-Madison
11/2015	Provided a workshop on genderqueer and non-binary individuals' gender identity development to the Institute of Sexuality Series at the University of Wisconsin-Madison
10/2015	Provided a workshop on transgender adults' facilitative coping mechanisms to the Institute of Sexuality Series at the University of Wisconsin-Madison
8/2015	Provided a Transgender 101 workshop to undergraduate students in a multicultural seminar at the University of Wisconsin-Madison
4/2014	Provided a workshop for 8-10 year old boys at St. Joseph's Children's Home to provide skills for how to talk about gender and comprehend transgender issues.

2/2014	Provided a training to medical students at the University of Louisville for trans-competent medical care.
11/2013	Provided a workshop to school psychologists and guidance counselors for cultural competence training working with LGBTQ youth. Continuing Education credits provided.
7/2013	Provided a workshop to the Campus Health Services at the University of Louisville to address LGBT-friendly health practices and language for medical practitioners.
4/2013	Provided an invited workshop at the University of Florida regarding transgender affirmative therapy and positive emotional processes for gender-diverse clients; located with the Department of Psychology, Gainesville, Florida.
3/2013	Provided an invited workshop at the University of Texas-Tyler related to empowering gender-diverse clients; located with the Department of Psychology, Tyler, Texas.
11/2012	Provided a workshop to the College of Education and Human Development at the University of Louisville regarding support for transgender students on college campuses
10/2012	Provided a workshop regarding specific processes to support transgender clients through the therapeutic process. Workshop provided to the Psychological Sciences Clinic for Continuing Education Credits; located at the University of Louisville
1/2012	Provided a workshop regarding transgender-affirmative therapy to the Psychological Sciences Clinic for Continuing Education Credits; located at the University of Louisville
12/2011	Provided training to pre-doctoral psychology interns regarding therapeutic work with LGBT youth; training was located at the Department of Child and Adolescent Psychiatry, University of Louisville
10/2011	Provided training on stress and anxiety to LGBTQ students for the Center for Health Promotion and Prevention Science at the University of Louisville
8/2010-8/2011	GLBTA office liaison from the University Counseling and Consulting Services at the University of Minnesota-Twin Cities.
4/2011	Facilitated a 3-hour training to counseling psychology students at the University of Minnesota on how to work clinically with LGBTQ populations
1/2011	Provided a 2-hour long training to the psychological staff at the University Counseling and Consulting Services regarding how to conduct trans-positive therapy with transgender clients.
10/2010	Facilitated a 2-hour social justice training based on the film "Diagnosing Difference," regarding DSM-IV diagnoses of Gender Identity Disorder.
10/2010	Facilitated a 1 ½ hour training for a Career Counseling course at the University of Minnesota-Twin Cities on how to work with transgender individuals in career counseling.

9/2010 Facilitated a 2-hour training on conducting intake interviews for first year PhD practicum students at the University Counseling and Consulting Services at the University of Minnesota-Twin Cities.

3/2010 Facilitator of an inservice training for pre-doctoral interns completing their internship at the Wisconsin Internship Consortium.

11/2008 Co-facilitator for Diversity Dialogues, Madison, Wisconsin.

11/2008 Co-Facilitator for LGBT Brownbag for the department of counseling psychology at the University of Wisconsin-Madison

11/2008 Guest Speaker for LGBT Support Group, Counseling and Consultation Services, University of Wisconsin-Madison,

**SERVICE**

Department	-Doctoral Training Committee (2015-current) -Master’s Training Committee (2014-2015) -Doctoral Admissions (2015-current) -Master’s Admissions (2014-2015) -Social Justice Committee (2014-current)
SOE	-Technology Committee (2014-current)
University	-Faculty Senate (alternate) (2016-current) -Microaggressions training for the UW Vet school (2016) -Microaggressions training for the School of Social Work (2016)
Community	-Wisconsin Transgender Health Coalition (2015-current) -Data team -Convening team -Transgender Youth Resource Network (2014-current) -Facilitate Transgender Youth Therapy Group at the CPTC (2015-current) -Coordinate Transgender Youth Conference for the greater Wisconsin community (2015-current)

**CONFERENCES ORGANIZED**

9/2009-current Co-Coordinator for the Transgender and Gender Non-Conforming Youth Conference, Madison, Wisconsin, Chair: Jeannette Deloya, LCSW.

Responsibilities: Attend meetings for a planning committee to coordinate annual conferences about the concerns of transgender youth. Helped develop an agenda for the conference, planned speakers, coordinated a budget, and decided on special topics for the conference. Introduced the keynote speaker at the conference and provided project

management during the day of the conference.

8/2010-2/2011

Co-Coordinator for the Big 10 College Counseling Center  
Conference, Minneapolis, Minnesota. Chair: Glenn Hirsch, Ph.D.

Responsibilities: Attended weekly meetings for a planning committee to coordinate a conference regarding issues related to college counseling centers and counseling college students. Provided ideas for funding and programming. Provided support with logistics of the conference, such as setting up rooms and directing attendees to programming.

# **EXHIBIT**

## **B**

## BIBLIOGRAPHY

American Psychiatric Association. Diagnostic and statistical manual of mental disorders (DSM-5). American Psychiatric Pub; 2013 May 22.

Boza C, Nicholson Perry K. Gender-related victimization, perceived social support, and predictors of depression among transgender Australians. *International Journal of Transgenderism*. 2014 Jan 2;15(1):35-52.

Coleman E, Bockting W, Botzer M, Cohen-Kettenis P, DeCuypere G, Feldman J, Fraser L, Green J, Knudson G, Meyer WJ, Monstrey S. Standards of care for the health of transsexual, transgender, and gender-nonconforming people, version 7. *International Journal of Transgenderism*. 2012 Aug 1;13(4):165-232.

Goldblum P, Testa RJ, Pflum S, Hendricks ML, Bradford J, Bongar B. The relationship between gender-based victimization and suicide attempts in transgender people. *Professional Psychology: Research and Practice*. 2012 Oct;43(5):468.

Greytak, E. A., Kosciw, J. G., and Diaz, E. M. Harsh realities: The experiences of transgender youth in our nation's schools. New York: GLSEN. 2009.

Herman JL. Gendered restrooms and minority stress: The public regulation of gender and its impact on transgender people's lives. *Journal of Public Management & Social Policy*. 2013 Apr 1;19(1):65.

Kessler RC, Borges G, Walters EE. Prevalence of and risk factors for lifetime suicide attempts in the National Comorbidity Survey. *Archives of general psychiatry*. 1999 Jul 1;56(7):617-26.

Mustanski B, Liu RT. A longitudinal study of predictors of suicide attempts among lesbian, gay, bisexual, and transgender youth. *Archives of sexual behavior*. 2013 Apr 1;42(3):437-48.

Reisner SL, Veters R, Leclerc M, Zaslow S, Wolfrum S, Shumer D, Mimiaga MJ. Mental health of transgender youth in care at an adolescent urban community health center: a matched retrospective cohort study. *Journal of Adolescent Health*. 2015 Mar 31;56(3):274-9.

Reisner SL, White Hughto JM, Gamarel KE, Keuroghlian AS, Mizock L, Pachankis JE. Discriminatory Experiences Associated With Posttraumatic Stress Disorder Symptoms Among Transgender Adults. 2016.

Scanlon K, Travers R, Coleman R, Bauer G, Boyce M. Ontario's trans communities and suicide: transphobia is bad for our health. *Trans PULSE E-Bull* 2010;1 (2):1-2.

Testa RJ, Sciacca LM, Wang F, Hendricks ML, Goldblum P, Bradford J, Bongar B. Effects of violence on transgender people. *Professional Psychology: Research and Practice*. 2012 Oct;43(5):452.

World Health Organization. International statistical classification of diseases and related health problems, 10th revision. Geneva: World Health Organization; 1992.

# **EXHIBIT 3**

## **DECLARATION OF DR. R. NICHOLAS GORTON, M.D.**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943

**Declaration of Dr. R. Nicholas Gorton, M.D.**

1. I have been retained by counsel for Plaintiff as an expert in connection with the above-captioned litigation. I have actual knowledge of the matters stated in this declaration.

2. The information provided regarding my professional background, experiences, publications, and presentations are detailed in my curriculum vitae. This is included as an accurate and true copy and is attached as Exhibit A to this declaration.

3. I received my medical degree from the University of North Carolina, School of Medicine and completed my residency and chief residency in emergency medicine at Kings County Hospital in Brooklyn, New York. I am a licensed physician in California with expertise in the treatment of transgender patients. I am board certified in Emergency Medicine and also have expertise in the primary care and hormonal treatment of transgender people. For the past decade I also have served as a primary care physician at Lyon-Martin Health Services in San Francisco, CA. Lyon-Martin is a historically LGBT clinic that has been serving transgender

patients for over 30 years. In that role, I have been the attending physician for 300-400 transgender patients. Lyon-Martin also has one of just a handful of sites in the United States that trains medical students, residents, and fellows to provide transgender primary care, and I have been a primary clinical instructor for over 75 trainees during my time at the clinic.

4. In addition to providing services at Lyon-Martin, I serve as a consultant for Trans Line, a national transgender medical consultation service for clinicians needing expert advice about the care of their individual patients. I also am an active member of the World Professional Association for Transgender Health (“WPATH”) and serve on the organization’s research committee. The WPATH Standards of Care are the internationally recognized standards for providing health care for transgender people. I formerly served on the medical advisory board of the University of California San Francisco Center of Excellence for Transgender Health and have served on the American Medical Association’s LGBT Advisory Committee.

5. As detailed in the attached curriculum vitae, I have presented lectures and grand rounds at numerous medical school and residency programs throughout the United States as well as national and international conferences. I have published articles in peer-reviewed journals and in professional texts on transgender health.

6. As part of my practice, I stay familiar with the latest medical science, research, and treatment protocols related to transgender people and gender dysphoria. In preparing this declaration, I relied on my experience, training, and review of research over the past decade of treating transgender patients.

7. I have been retained as an expert witness in two cases in the last four years: *Norsworthy v. Beard* (N.D. Cal. 2015) and *Cruz v. Zucker* (S.D.N.Y. 2016).

8. I understand that this declaration will be submitted in support of A.W.’s motion for preliminary injunction in this case. I am prepared to testify about the information and

conclusions contained in this report at a hearing. I may prepare a full expert witness report, as appropriate, during this litigation.

9. I will receive no compensation for my expert services and opinion in this case, regardless of the outcome.

### **Determination of Sex**

10. “Sex” includes a multitude of factors including one’s chromosomal make-up, hormonal variations, anatomy, and gender identity.

11. Gender identity is each individual’s internal sense of themselves as belonging to a particular gender, such as male or female.

12. For purposes of designating sex on a birth certificate, physicians and midwives almost always base their assessments upon a cursory examination of external anatomy. This assessment is made because it only requires seconds to examine the newborn’s anatomy.

13. This assessment is usually congruent with the individual’s overall sex: most infants who have female external genitalia and are assigned a female sex at birth will grow up to be people who have a female gender identity. However, sometimes the visual assessment is actually incorrect: for example, for individuals with differences of sexual development (DSD)—also known as intersex people—or transgender people.

14. The term “transgender” refers to people whose gender identity does not match the sex that they were incorrectly assigned at birth based on an examination of the external genitals.

15. For example, some infants who have female external genitalia and are therefore assigned a female sex at birth may have a male gender identity and/or other sex-related characteristics not traditionally associated with girls or women. In such a case, the only way to identify the person’s true sex is to know the person’s gender identity.

16. From a medical perspective, the most accurate and appropriate determinant of sex is the person's gender identity.

17. No assessment other than gender identity can provide an accurate measure of an individual's sex. Attempting to rely on any other sex-related feature would raise intractable problems. For example, relying on chromosomes, while clearly impractical, would also yield inaccurate results in some cases.

18. For example, infants born with Complete Androgen Insensitivity Syndrome (CAIS) have a mutation in the androgen receptor. While they have male typical chromosomes (XY), they are born with female external genitalia (so these newborns are assigned female sex at birth), internal testicles instead of ovaries, and male hormones (testosterone) although their body is unable to respond to testosterone. So despite having testes, XY chromosomes and normal male levels of testosterone, these newborns are assigned female at birth and raised as girls. Children with CAIS are so typically female appearing and acting that they often are only diagnosed at puberty when they fail to develop breasts (because they lack estrogen) and do not menstruate (because they do not have uteruses). Because the disorder is not apparent at birth, despite the presence of testes, XY chromosomes, and testosterone, assignment based on an examination of the external genitals is generally accurate because these children almost always develop female gender identities. The reason this happens is that just as their developing external genitals are unable to respond to testosterone because of a mutation in the testosterone receptor, the developing brain also cannot respond to testosterone and so develops as a normal female brain. Often these girls are only diagnosed when they fail to go through female puberty.

19. Similarly, boys born with severe congenital adrenal hyperplasia (CAH) are born with fully formed penises and typically have a male gender identity. They are only

distinguishable from typical male infants in that they appear to have undescended testes. They in fact they lack testes and have internal ovaries and XX chromosomes.

20. If we used sex chromosomes as the basis to determine sex we would assign girls with CAIS (who are indistinguishable from girls without the condition until puberty and nearly all of whom identify as female) as male, and would assign boys with CAH (who are indistinguishable from boys without the condition and nearly all of whom identify as female) as female.

21. Therefore, an individual's sex can only be accurately identified by reference to the individual's gender identity.

### **Etiology of Gender Identity and Treatment of Gender Dysphoria**

22. While the research is still developing, a growing body of studies provides significant evidence that gender identity is a biological characteristic of the brain influenced significantly by genes and by the prenatal environment—specifically, what hormones or chemicals the developing brain is exposed to.

23. We have sufficient information from the research to understand that gender identity is fixed at an early age and cannot be changed.

24. We also have sufficient information to understand that attempts to convince or coerce gay and lesbian children and adults to pretend that they are heterosexual or to convince or coerce transgender children and adults that they are cisgender—often referred to as “reparative therapy”—do not work and are highly damaging to these individuals. For this reason, a United Nations report on torture described reparative therapy for LGBT people as “unscientific, potentially harmful and contributing to stigma” and called on member countries to outlaw this

coercive practice.<sup>1</sup> In California and several other states this practice has been outlawed in the case of transgender, gay, and lesbian children.<sup>2</sup>

25. Rather, medical science now recognizes that when an individual's gender identity does not align with the sex assigned at birth, the only effective and ethical treatment is to re-classify the person's sex to correspond to the person's gender identity. A physician's role is to assist the person in transitioning to living in accordance with their true sex.

26. Gender Dysphoria is the clinical term, defined in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition (DSM-5), to describe transgender people, who may experience clinically significant distress due to the incongruence between their gender identity and birth-assigned sex, if not appropriately treated. Such distress can include depression, suicidal thoughts, or impairment of functioning in their daily lives. Appropriate treatment is therefore critical.

27. Both youth and adults may experience Gender Dysphoria. Studies show that treatment of youth with Gender Dysphoria is significantly more effective than treatment for adults. That is in part because the level of dysphoria is influenced by the multiple large and small traumas that transgender people experience when expression of their gender identity results in negative social and psychological consequences, or when their gender identity is rejected or denied. The accumulation of those traumas throughout childhood and adolescence can be ameliorated by allowing children to socially transition and allowing older youth, if appropriate, to undergo medical treatments that can support a transition.

---

<sup>1</sup> See Juan E. Méndez, *Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment*, United Nations General Assembly Human Rights Council (2013), [www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session22/A.HRC.22.53\\_English.pdf](http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session22/A.HRC.22.53_English.pdf).

<sup>2</sup> See Cal. Bus. & Prof. Code § 865.2; D.C. Code Ann. § 7-1231.14(a); 405 Ill. Comp. Stat. Ann. 48/20; N.J. Stat. Ann. § 45:1-55(a); Or. Rev. Stat. Ann. § 675.850(1); Vt. Stat. Ann. tit. 26, § 3210(13).

28. While my practice is generally limited to those 18 years and older, I have treated a number of young adult patients and have observed the outcomes of those who were able to transition during childhood or adolescence and those who were not. My patients who were allowed to transition at young ages show far more resilience, health, and well-being than those who were forced to live in accordance with their birth-assigned sex.

29. In sum, it is my professional opinion that gender identity is the most accurate measure of sex; that gender identity is a biological and immutable characteristic; and that the only ethical and effective treatment for Gender Dysphoria is facilitating a transition to permit the individual to live fully in accordance with the person's gender identity.

30. Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on 8/11/16.

Dr. Costan MD

# **EXHIBIT**

## **A**

## **Ryan Nicholas Gorton, MD, DABEM**

901 Douglass Ave, Davis CA 95616

(504) 261-8379 (mobile)

(530) 297-7880 (home)

[nickgorton@gmail.com](mailto:nickgorton@gmail.com)

### **Professional Practice**

February 2005 – Current      Emergency Medicine Physician  
Sutter Davis Hospital  
Davis, CA

July 2002 – February 2005      Emergency Medicine Physician  
St Tammany Parish Hospital  
Covington, LA

### **Professional Practice: Volunteer Activities**

March 2005 – Current      Primary Care Provider and Clinical Instructor  
Lyon-Martin Health Services  
San Francisco, CA.

August 2005 – February 2006      Acting Medical Director  
Lyon-Martin Health Services  
San Francisco, CA.

September 2008 – Current      Executive Committee Member and Lecturer  
Project HEALTH <http://www.project-health.org/>  
San Francisco, CA.

January 2011 – Current      Consultant TransLine National Clinical Consultation Line

Medical-Legal Consultant:      Sylvia Rivera Law Project, New York, NY  
Lambda Legal Defense and Education Fund, Inc., New York, NY  
Transgender Law Center, San Francisco, CA  
National Center for Lesbian Rights. San Francisco, CA  
Northwest Justice Project, Seattle, WA  
The Legal Aid Society, New York, NY  
National Center for Transgender Equality, Washington, DC  
TGI Justice Project, Oakland, CA.

### **Post Graduate Training**

June 2001 – June 2002      Chief Resident, Department of Emergency Medicine  
Kings County Hospital Center/SUNY Downstate  
Brooklyn, NY

July 1998 – June 2002      Emergency Medicine Residency

Kings County Hospital Center/SUNY Downstate  
Brooklyn, NY

### **Education**

August 1994 – May 1998      Doctor of Medicine  
University of North Carolina School of Medicine  
Chapel Hill, NC

August 1988 – August 1991      Bachelor of Science in Biochemistry, Summa Cum Laude  
North Carolina State University  
Raleigh, NC

### **Professional Affiliations**

World Professional Association for Transgender Health (formerly HBGDA)

- ◆ Transgender Medicine and Research Committee
- ◆ Institutionalized Persons Committee

American College of Emergency Physicians  
University of California at San Francisco Center of Excellence for Transgender Health

- ◆ Medical Advisory Board 2010-2013 (during development of current publication of Primary Care Protocols)

American Medical Association

- ◆ GLBT Advisory Committee 2009-2011

Gay and Lesbian Medical Association

- ◆ LGBT Medical Experts Panel

### **Licensure/Certification**

Nov 2003 – Present      Diplomate American Board of Emergency Medicine  
Nov 2004 – Present      CA State Medical License A89440  
Feb 2002 – 2009      LA State Medical License 14466R  
June 2001 – 2010      NY State Medical License 221808

### **Publications and Papers**

Gorton, R, and Erickson-Schroth, L. *Hormonal and Surgical Treatment Options for FTMs*. Psychiatric Clinics of North America. (In Press).

Ingram, N., Pratt V., and Gorton, R. *Counting trans\* patients: A Community Health Center Case Study*. TSQ: Transgender Studies Quarterly. 2(1): 136-147. 2015.

Gorton, R and Grubb, M. (2014), General, Sexual, and Reproductive Health In Erickson-Schroth, L (Ed) *Trans Bodies, Trans Selves: A Resource for the Transgender Community*. New York, NY: Oxford University Press.

Gorton R. Transgender as Mental Illness: Nosology, Social Justice, and the

Tarnished Golden Mean. In Stryker S and Aizura A (Eds.), *The Transgender Studies Reader, Vol 2*. New York, NY Taylor and Francis. 2013.

Ehrbar R, Gorton R, and Winters K. Sugerencias para la revisión de los diagnósticos relacionados con el género en el DSM y el CIE. In Miquel Missé and Gerard Coll-Planas (Eds.), *El Género Desordenado - Críticas en torno a la patologización de la transexualidad*. Madrid: EGALES. 2010.

Ehrbar R, and Gorton R. *Exploring Provider Treatment Models in Interpreting the Standards of Care*. International Journal of Transgenderism, 12(4):198-210. 2010.

Pittsburgh Transgender Health Research Summer Institute: *A Review and Guidance for Future Research—Proceedings from the Summer Institute at the Center for Research on Health and Sexual Orientation, University of Pittsburgh t*. International Journal of Transgenderism, 12(4):211-229. 2010.

Haraldsen I, Ehrbar R, Gorton R, and Menvielle E. *Recommendations for Revision of the DSM Diagnosis of Gender Identity Disorder in Adolescents*. International Journal of Transgenderism, 12(2):75-79. 2010.

Gorton R. *Transgender Health Benefits: Collateral Damage in the Resolution of the National Health Care Financing Dilemma*. Sexuality Research and Social Policy: Journal of NSRC. 4(4):81-91. Dec 2007.

Gorton R. *Health Care and Insurance Issues for Transgender Persons*. American Family Practitioner. 74(12):2022. December 2006.  
<http://www.aafp.org/afp/20061215/letters.html>

Gorton R. *Current Summary of the Medical Knowledge Base and Current Clinical Standards Surrounding the Treatment of Patients with Gender Identity Disorder*. Report prepared for the Lambda Legal Defense Fund. May 2005.

Gorton R, Buth J, and Spade D. *Medical Therapy and Health Maintenance for Transgender Men: A Guide For Health Care Providers*. Lyon-Martin Women's Health Services. San Francisco, CA. 2005. ISBN 0-9773250-0-8 ([www.nickgorton.org](http://www.nickgorton.org))

Gorton R. *A Critical Analysis of the Hayes Report: "Sex Reassignment Surgery and Associated Therapies for Treatment of GID."* Report prepared for the Lambda Legal Defense Fund. May 2005.

*Greenberg's Text Atlas of Emergency Medicine*, Michael Greenberg Ed. Lippincott Williams & Wilkins. ISBN 0-7817-4586-1 2004. Contributing

Author: Chapter 4 – Eyes/Ophthalmic.

Gorton R. “Toward a Resolution of GID, the Model of Disease, and the Transgender Community.” MAKE. March 2005.  
<http://www.makezine.org/giddisease.htm>

Sinnert R, et al, Gorton R. “The ratio of ionized calcium to magnesium modifies the bronchodilatory effects of magnesium therapy in acute asthma.” *Acad Emerg Med* 2002 9(5) 436-437.

Morris D, Rosamond W, Hinn A, Gorton R. “Time delays in accessing stroke care in the emergency department.” *Acad Emerg Med* 1999 Mar; 6(3) 218-23.

Rosamond W, Gorton R, Hinn A, Hohenhaus S, Morris D. “Rapid response to stroke symptoms: the Delay in Accessing Stroke Healthcare (DASH) study.” *Acad Emerg Med* 1998 Jan; 5(1) 45-51.

#### **Selected Conference Presentations and Invited Talks**

Gorton, R. “Acute and Long Term Complications of Silicone Pumping: Primary, Secondary, and Tertiary Prevention”. WPATH Symposium. Amsterdam, The Netherlands. June, 2016.

Gorton, R, Ettner, R, Brown, G, Bermudez, F, Orthwein, J and Mazur, T. “Orange isn’t the New Black (Yet)”. WPATH Symposium. Amsterdam, The Netherlands. June, 2016.

Gorton R. “Transgender Patient Care in the Emergency Department”. American Academy of Emergency Medicine Scientific Assembly. Las Vegas, Nevada. February 2016.

Gorton R. “Transgender Patients in the Emergency Department”. Stanford University Department of Emergency Medicine SimWars. Stanford, CA. February 2016.

Gorton R. “History of Transgender Medicine”. UCSF School of Medicine Transgender Health elective. San Francisco, CA. February 2016.

Gorton R. “Free Silicone Complications and Management”. National Transgender Health Summit. Oakland, CA. April 2015.

Gorton R. “History of Transgender Medicine”. UCSF School of Medicine Transgender Health elective. San Francisco, CA. March 2015.

Gorton R. “Transgender Healthcare”. UC Davis School of Medicine. Sacramento, CA.

December 2015.

Gorton R. "Engaging and Retaining Transgender Patients in Ongoing Primary Care". National Association of Community Health Centers Health Institute and Expo. San Diego, CA. August 2014.

Gorton R. "Sexual and Reproductive Health: A Focus on Transgender Patients". California Family Health Council. Webinar. March 2014.

Gorton, R, Green, J and Tescher, J. "California Dreaming: Two Decades of Change in Health Insurance Law and Policy". WPATH Symposium. Bangkok, Thailand. February, 2014.

Gorton, R and Chung, C. "From Grassroots Health Advocacy to Expanding Clinician Competency: Project HEALTH (Harnessing Education, Advocacy & Leadership for Transgender Health)". WPATH Symposium. Bangkok, Thailand. February, 2014.

Gorton, R and Tescher, J. "Minding the Gap: Development and Implementation of a  
Clinical Rotation in Transgender Health". WPATH Symposium. Bangkok, Thailand. February, 2014.

Gorton R and Keenan C. "LGBT Sexual and Reproductive Health Issues". California  
Family Health Council Women's Health Update. San Francisco, CA. April, 2013.

Gorton R. "Transgender Medicine". California AHEC Webinar. San Francisco, CA. April, 2013.

Gorton R. "Transgender Aging Issues". Institute on Aging Conference on LGBT Aging. San Francisco, CA. November, 2012.

Gorton R and Branning N. "Transgender Primary Care". California Academy of Physician Assistants Annual Conference. Palm Springs, CA. October, 2012.

Gorton R. "Primary care and Hormonal Treatment for Transgender Clients".  
Samuel Merritt University. Oakland, CA. June 2012.

Gorton R. "Primary care and Hormonal Treatment for Transgender Clients" Grand Rounds for the VA Medical Center. San Francisco, CA. June 2012.

Gorton R and Wertz K. "Transgender Health Care" Webinar for the California Family Health Council. San Francisco, CA. June, 2012.

- Eichenbaum J, Gorton R and May A. "Transgender Health, the VA, and Barriers to Care." San Francisco Veterans Administration Mental Health Services Grand Rounds. San Francisco, CA. May, 2012.
- Gorton R and Wertz K. "Working With GLBT Clients" California Family Health Council Webinar. Los Angeles, CA. May, 2011.
- Gorton R. "Improving Access to Transgender Health Care: Outcomes from Project HEALTH" World Professional Association for Transgender Health. Atlanta, GA. September, 2011.
- Gorton R and Wertz K. "Trailblazing for Transgender Health" Southern Comfort Conference. Atlanta, GA. September, 2011.
- Gorton R. "Nuts and Bolts of Transgender Primary Care" Gay and Lesbian Medical Association Annual Conference. Atlanta, GA. September, 2011.
- Gorton R. "Transgender Medicine and Cultural Competency" Kaiser Department of OB/Gyn Grand Rounds. San Francisco, CA. April, 2011.
- Gorton R. "Evidence Based Transgender Medicine" Opening Plenary UCSF National Transgender Health Summit. San Francisco, CA. January, 2011.
- Green J and Members of the Center of Excellence for Transgender Health Medical Advisory Board. "Primary Care Protocols" Morning Plenary UCSF National Transgender Health Summit. San Francisco, CA. January, 2011.
- Freshel K, Gorton R, Hansom C and Barnes A. "Communities Working Together to Become Culturally Competent" California State Rural Health Association Conference. Sacramento, CA. November, 2010.
- Gorton R, Spade D and Wilkinson W. "Transposium: Healthcare Access and Quality For Transgender Individuals" Shaking the Foundations: The West Coast Conference on Progressive Lawyering, Primary Care Associate Program, Stanford School of Law. Stanford CA. October, 2010.
- Gorton R. "Improving Access to Transgender Healthcare: Outcomes from Project HEALTH (Harnessing Education, Advocacy, and Leadership for Transgender Health)" Gay and Lesbian Medical Association Annual Conference. San Diego, CA. September 2010.
- Gorton R, Gould D and Wertz K. "Trailblazing for Transgender Health" National Gay and Lesbian Task Force Creating Change Conference. March 2010.

- Gorton R. "Grand Rounds: Transgender Medicine" Highland General Hospital Department of Internal Medicine. Oakland, CA. January, 2010.
- Gorton R. "Grand Rounds: Transgender Medicine" Kaiser Permanente Department of Internal Medicine. San Francisco, CA. December, 2009.
- Keatley J and Gorton R. "Transgender Health Care Issues in California Today" Equality California and the California LGBT Legislative Caucus Briefing on LGBTI Health Care Issues. Sacramento, CA. December 2009.
- Ehrbar R, Winters K, and Gorton R. "Revision Suggestions for Gender Related Diagnoses in the DSM and ICD" WPATH XXI Biennial Symposium. Oslo, Norway. June, 2009.
- Gorton R. "A Place at the Table" American College Health Association Annual Meeting. San Francisco, CA. May, 2009.
- Famula M, Hall A, Pardo S, Gorton R. "Providing Trans-Specific Health Care to Transgender Students in the College Setting." American College Health Association Annual Meeting. San Francisco, CA. May, 2009.
- Gorton R. "Transgender Health" American Medical Student Association: Regional Conference. Lubbock, TX. March, 2009.
- Gorton R. "Medical Ethics and Evidence Based Transgender Medicine" Equality and Parity II: A Statewide Action for Transgender HIV Prevention and Care. Los Angeles, CA, January 2009.
- Gorton R. "Transgender Medicine 101" AMSA Regional Conference. Lubbock, TX. December, 2008.
- Gorton R, Djordjevic M, and Brownstein M. "Female to Male (FTM) Health Update" (Provider Session) The 7<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. May 2008.
- Gorton R. "FTM Hormones 201." (Community Session) The 7<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. May 2008.
- Green J, Gorton R, Razza R, and Tamar-Mattis A, "Healthcare and Access Issues Panel." University of California Hastings College of the Law Transposium Conference. April 2008.
- Arkles G, Gorton R, Sanchez D, Suarez C. "Trans Issues in Health Care Panel." Harvard Law School Lambda Legal Advocacy Conference. February

2008.

- Gorton N, Thaler C, and Keisling M. "Drawing the Curtain: An Overview of Medical Privacy Protections and Risks for Transgender Patients and Providers " WPATH Symposium, 2007, Chicago.
- Gorton R. "Transgender Medicine 2007: A Medical Ethics and Evidence Based Paradigm Shift." (Provider Session) The 6<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. April 2007.
- Gorton R. "FTM Hormones 201." (Community Session) The 6<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. April 2007.
- Gorton R. "Medical Ethics and Evidence Based Transgender Medicine." FORGE Forward. Milwaukee WI. March 2007.
- Gorton R. "FTM Hormonal Treatment: Beyond 101." FORGE Forward. Milwaukee WI. March 2007.
- Gorton R. "Transgender Healthcare in 2007: Its Time to Take it Seriously." Humboldt State University 13<sup>th</sup> Annual Diversity Conference and Education Summit. Arcata CA. March 2007.
- Spade D, Gehi P, Arkles G, and Gorton R. "Barriers to health care access for transpeople." UCLA School of Law, Williams Institute Annual Update. Los Angeles, CA. February 2007.
- Marksamer J and Gorton R. "Legal Support and Advocacy for Transgender Youth and Their Families." Gay and Lesbian Medical Association Annual Conference. San Francisco, CA. October 2006.
- Gorton R. "Hormone Therapy 101." FTM-Gender Odyssey 2006. Seattle, WA. September 2006.
- Gorton R. "Hormone Therapy 201." FTM-Gender Odyssey 2006. Seattle, WA. September 2006.
- Gorton R. "Transgender Medicine." California Department of Health Early Intervention Program Statewide Conference. May 2006.
- Gorton R. "Primary Care and Hormonal Therapy for Transgender Males." (Provider Session) The 5<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. March 2006.

Gorton R. "Health Maintenance for Transgender Men." (Community Session) The 5<sup>th</sup> Annual Mazzoni Center Trans-Health Conference. Philadelphia, PA. March 2006.

Gorton R. "Primary Care and Hormonal Therapy for Transgender Males." The 23<sup>rd</sup> Annual Conference of the Gay and Lesbian Medical Association. Montreal, Canada. September, 2005.

Spade, D, and Gorton R. "Medical-Legal Policy Update in the Quest for Trans Health Care and Justice." The 23<sup>rd</sup> Annual Conference of the Gay and Lesbian Medical Association. Montreal, Canada. September, 2005.

Arkles Z, and Gorton R. "Medical-legal Collaboration in the Quest for Trans Health Care and Justice" The 19<sup>th</sup> Biennial Symposium of the Harry Benjamin International Gender Dysphoria Association. Bologna, Italy. April, 2005.

### **Professional Advocacy**

Supported as physician member of the American Medical Association for adoption of inclusive language for transgender people within AMA policy. "Recommendations to Modify AMA Policy to Ensure Inclusion for Transgender Physicians, Medical Students and Patients." Accepted by the AMA Board of Delegates July 2007. See "AMA Meeting: Anti-discrimination policy extended to transgendered." AMA News July 16, 2007.  
<http://www.ama-assn.org/amednews/2007/07/16/prsk0716.htm>.  
Policy amendment available at:  
<http://www.ama-assn.org/ama1/pub/upload/mm/467/bot11a07.doc>

Authored and proposed with Vernon A, and Maxey K. *Resolution to amend the American College of Emergency Physicians 'Code of Ethics for Emergency Physicians.'* Accepted as policy October 2005. Now reads (amended language underlined): "Provision of emergency medical treatment should not be based on gender, age, race, socioeconomic status, sexual orientation, real or perceived gender identity, or cultural background."

### **Awards**

Claire Skiffington Vanguard Award. Transgender Law Center. San Francisco, CA. 2012.

# **EXHIBIT 4**

## **DECLARATION OF MELISSA WHITAKER**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943-PP  
Judge Pamela Pepper

**DECLARATION OF MELISSA WHITAKER**

1. My name is Melissa Whitaker. I am the mother of Ashton (“Ash”) Whitaker, the plaintiff in the above-captioned action. I have actual knowledge of the matters stated in this declaration.

2. I live in Kenosha, Wisconsin with my son, Ash Whitaker.

3. I am employed by the Kenosha Unified School District No. 1 as a high school teacher at George Nelson Tremper High School (“Tremper”).

4. Ash was designated “female” on his birth certificate, but in spring 2013, he told me that he is transgender and a boy. After this, he slowly began transitioning publicly by cutting his hair short, wearing more masculine clothing, and going by a masculine name and masculine pronouns. A recent photo of Ash is attached to this declaration as Exhibit A.

5. Ash was diagnosed with Gender Dysphoria by his pediatrician and his therapist, whom he began seeing around the time of his transition. He currently sees a clinical psychologist

to support him in his transition and has begun consulting with a pediatric endocrinologist at Children's Hospital of Wisconsin. He started hormone therapy (testosterone) in July 2016.

6. On August 2, 2016, I took Ash to the Kenosha County Circuit Court and he filed a petition for a legal name change to his traditionally masculine first name, Ashton. He has a court date of September 15, 2016 at which I expect the petition will be granted.

7. Ash's gender transition has been largely accepted and respected by the school community. Many newer students or students who did not know him well, did not even know that Ash was transgender, and just saw him as any other boy, until the school's treatment of him put a spotlight on his transgender status.

8. In spring 2015, during his sophomore year, Ash and I met with his guidance counselor, Debra Tronvig, and requested that he be permitted to use the boys' restrooms. In March 2015, Ms. Tronvig told us that the administration had decided Ash could use either the girls' restroom or a single-user, gender-neutral restroom in the main office. Being offered these two "options" made my son visibly overwhelmed and upset, as either option seemed impossible. As a boy, he cannot use the girls' restrooms. And using the main office restroom would raise too many questions from staff and his peers and is stigmatizing by labeling him as different from all other students.

9. Due to the school's policy, Ash tried to avoid using the restrooms at school for the rest of that school year by restricting the amount of liquids he drinks. This was especially dangerous because Ash suffers from vasovagal syncope, a medical condition that can result in fainting due to certain physical or emotional triggers. His physician has recommended that he drink 6-7 bottles of water and a bottle of Gatorade every day, since dehydration and stress can cause him to faint.

10. Ash has also experienced symptoms associated with Gender Dysphoria, such as depression and anxiety. These symptoms have gotten worse due to the anxiety caused by the school's policy and how disrespected and humiliated it makes him feel to be treated this way.

11. From September 2015 onwards, during Ash's junior year, he used the boys' restrooms, after having learned during a trip to Europe in the summer of 2015 that it was his legal right to do so.

12. In February 2016, two assistant principals, Brian Geiger and Wendy LaLonde, learned from a Tremper teacher that Ash was using the boys' restroom. They decided that, consistent with the previous year's decision, Ash would not be allowed to use the boys' restroom. I received a call in late February 2016 from Ms. Tronvig letting me know that the school administration had decreed that Ash was not to use the boys' restrooms and could only use the single-user, gender neutral restroom or the girls' restrooms.

13. Around March 10, 2016, Ash and I met with Ms. Tronvig and assistant principal Holly Graf. At this meeting, Ms. Graf referred to Ash by his birth name and used female pronouns. Ms. Graf said that Ash could use the boys' restrooms only if his gender was changed in the school's official records. In order to do that, Ms. Graf told me that she would need to see legal or medical "documentation." She did not explain what she meant by that.

14. I explained to Ms. Graf that Ash was too young for transition-related surgery. Ms. Graf would not give me more guidance on what kind of documentation was needed to change Ash's gender in the school records.

15. After that meeting, I contacted Ash's pediatrician and requested that she send a letter to the school explaining why Ash needs to use the boys' restroom. The pediatrician faxed a letter confirming that Ash is a transgender boy and that he should be allowed to use the boys'

restroom. When Ms. Graf told me that the first letter was not sufficient, I asked the pediatrician to send a second letter reiterating the above, which she did.

16. Despite the letters, I received an email from Richard Aiello, the Tremper principal, stating that Ash would not be allowed to use the boys' restroom because the letter was not acceptable. He did not explain why.

17. When I met with the administrators on March 6 and March 22, 2016, I asked that they change Ash's name and gender in the school records to avoid issues where he had to request at the beginning of every term that teachers change his name in the roster. At both meetings, Ms. Graf told me that medical or legal documentation was needed to do this. After the pediatrician sent the letters, she told me the documentation was not enough, but she would not tell me what would be sufficient.

18. Ash continued to use the boys' restroom, but he generally tried not to use the restrooms at school at all. I became even more worried about his emotional and physical health. He began showing increased anxiety and depression. He experienced more symptoms of vasovagal syncope, including dizziness, fainting, and migraines. In March 2016, I took him to see his pediatrician about these symptoms, and she told him to drink and eat regularly to avoid those symptoms. During the day at school, I would often hand him a bottle of water to drink to avoid dehydration, but he would refuse it because he did not want to have to use the school restroom.

19. Throughout the rest of the school year, Ash continued to use the boys' restroom when he had to, and I was called into multiple meetings with him in Ms. Graf's office. During these meetings, Ms. Graf would repeat that the school's policy was that Ash could not use the

boys' restroom and should only be using the girls' restroom or single-user restrooms. I know Ash found these meetings intrusive, demeaning, and embarrassing.

20. In April 2016, I learned that the school administrators had emailed the school's security guards and told them to notify administrators if students were seen going into the "wrong restroom." I was told by individual security guards that this was targeted at Ash. When Ash found out about this, he was humiliated that he was being monitored like that.

21. On April 5, 2016, I was pulled out of my classroom and brought to a meeting with Dr. Bethany Ormseth, KUSD's Chief of School Leadership, and Susan Valeri, KUSD's Chief of Special Education and Student Support. I asked them whether KUSD had adopted any policies about transgender student bathroom use, and they told me a policy was being created by a committee. I told them, "You don't need a policy—it's a federal law."

22. Throughout the 2015-2016 school year, I repeatedly requested to see a written policy about transgender students' bathroom use, but have not been provided a policy by any school official. I believe that there is no formal written policy and that the Tremper administration invented one because they are uncomfortable with Ash.

23. On April 6, 2016, Ash and I attended a meeting with Mr. Aiello, Ms. Graf, and Ms. Valeri. At this meeting, Ash was offered the option of using two single-user restrooms on the opposite sides of the campus. Only Ash would have a key to these restrooms, which were far from his classes.

24. During this meeting, Ash asked Ms. Valeri why he wasn't allowed to use the boys' restrooms. She said something like, "Well, we've never had a student who identifies as male but was born female." Ash told her that he is protected by Title IX, which prohibits discrimination based on sex and requires that transgender students be allowed to use school

bathrooms that match their gender identity. Valeri disagreed with Ash that Title IX protects transgender students' access to bathrooms that match their gender identity. When he asked her to explain what she thought Title IX meant, she said, "I don't think I'm going to give you any reasons."

25. I have observed Ash's physical and emotional health worsen as a result of the school's actions. He has suffered more dizziness and near-fainting as he has continued to avoid using the restrooms. He has also become more anxious and lethargic. There are an increasing number of mornings that he does not want to go to school. He has even been considering transferring to an online high school to get away from the overwhelming scrutiny and stigma he feels from the Tremper administration.

26. Around March 22, 2016, I met with Mr. Aiello and Ms. Graf. At this meeting, I was told that Ash had been nominated for prom court, but could only be a candidate for prom queen, not prom king. When Ash learned about the school's decision, he was devastated by the administrators' disrespect and humiliated by the idea that, as a boy, he would have to run for prom queen.

27. Ash and his friends then started an online petition that generated thousands of signatures urging the school to allow Ash to run for prom king and use the boys' bathrooms. Ash's friends also held a sit-in in to protest the administrators' discriminatory policies. On April 6, 2016, school administrators told us that Ash would in fact be allowed to run for prom king.

28. When I met with the administrators on March 6 and March 22, 2016, I asked that they change Ash's name and gender in the school records to avoid issues where he had to request at the beginning of every term that teachers change his name in the roster. At both meetings, Ms. Graf told me that medical or legal documentation was needed to do this. She told me the letter

we sent—from Ash’s pediatrician—was not enough, but she would not tell me what would be sufficient. She has never told me what, if anything, would change the school’s position.

29. On or about May 11, 2016, Ash told me about an incident at school where the orchestra’s volunteer pianist said to him, “Ash, honey, this isn’t about you, this is bigger than you. I’m praying for you.” This woman’s husband has spoken out against transgender students being able to use the bathroom of their gender identity in KUSD board meetings, and she runs a Facebook group called “KUSD Parents for Privacy,” which is critical of transgender students’ rights. I brought the incident to the attention of Mr. Aiello, but it hasn’t made a difference. I was told that Ash’s orchestra teacher was asked to call the volunteer and to tell her not to talk to students like that. However, the woman is still a volunteer, and having her continue has made it difficult for Ash to enjoy orchestra, which used to be one of his very favorite activities.

30. In May 2016, Ms. Tronvig, Ash’s guidance counselor, showed me what she described as and what I understood to be a neon green wristband that the school was planning to ask transgender students to wear to monitor their bathroom use. She gave me several of the wristbands to keep; they look like strips of neon green stickers. A photograph of one of these strips is attached to this declaration as Exhibit B. To my knowledge, the school’s plan is still in place and guidance counselors will be providing these green labels to transgender students or any student uncomfortable using the public restrooms in the upcoming school year.

31. When I told Ash about the green wristbands, he felt scared and humiliated. He was adamant that he would refuse to wear that kind of label, as it would serve to stigmatize him and mark him out as different from all his peers, and he was also extremely worried and scared that the school might require him to do so anyway.

32. Ash and I have repeatedly told KUSD officials that their actions violate Title IX and Ash's right to attend school free from discrimination. They have not responded.

33. Ash has suffered physically and emotionally from KUSD's actions. I have seen his symptoms of depression and anxiety increase over the past two years as the school's actions have taken more and more of a toll. He has difficulty sleeping and difficulty focusing in class, and feels unsafe leaving the house by himself, as he worries he will be targeted by people who know he is transgender and may target him for violence.

34. I have seen the turmoil my son has going through. I have been heartbroken and angry at the thought that he went through this treatment by the school district, but I fear and stress at the thought that in his senior year, he may once again been subjected to discriminatory, hurtful, and unnecessary treatment by a few who feel justified in doing so. I try to keep a brave front for his sake and bring up only the positives that he should experience in his last year, but I hear him say how much he dreads this year and just wants to move on to the next step where he knows he will not have to endure such treatment. Disheartening is not strong enough to explain what I know he has gone through; what we have both endured is more than we ever expected. I pray for my son to be strong and stay focused on his goals, his friends, his family, and of who he is as a person and not to let the negativity of a few tear him down.

35. Over the summer, when he has not been in school, I have seen his symptoms of anxiety, depression, dehydration, dizziness, fainting, and migraines decrease substantially. I believe this is because he does not face daily scrutiny and stress at home that he does at school and where he is not worried about having to use the bathroom.

36. If he is not able to use the boys' restroom next year and if school administrators and staff continue to refer to him as a girl, I believe Ash will experience the same or worse harm to his health, wellbeing, and ability to learn.

Pursuant to 8 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 14, 2016

By:



A handwritten signature in black ink, appearing to read "Melissa Whitaker", is written over a horizontal line.

Melissa Whitaker

# **EXHIBIT**

## **A**



# **EXHIBIT 5**

## **DECLARATION OF JENIFER MCGUIRE, Ph.D.**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943-PP  
Judge Pamela Pepper

**Declaration of Jenifer McGuire, Ph.D.**

**Preliminary Statement**

1. My name is Jenifer McGuire, Ph.D. I have been an Associate Professor (with tenure) of Family Social Science in the College of Education and Human Development, University of Minnesota, Twin Cities Campus, St. Paul, Minnesota, since July 2014. University of Minnesota, Twin Cities Campus is a leading research-intensive public institution in the United States. I was previously an Associate Professor of Human Development at Washington State University in Pullman, Washington, from 2006 to July 2014. In this research-intensive university, I am a tenured professor engaged in a considerable research agenda, as well as teaching and community extension activities. The information provided regarding my professional background, experiences, publications, and presentations are detailed in my curriculum vitae. This is included as an accurate and true copy and is attached as Ex. A to this declaration.

2. I earned my Ph.D. in Human Development and Family Studies at The University of Arizona, 2003. I additionally earned a Master's of Science in Human Development and Family Studies, 1998, and a Master's in Public Health, 2001, also at The University of Arizona.

3. I am a social scientist who studies the development of individuals within contexts. I have done extensive research on transgender youth and schools, as described in more detail below. I am not a clinical provider. My empirical research areas include development of the person over the lifespan, adolescent development, parent-adolescent relationships, program evaluation and adolescent sexuality. I employ both qualitative and quantitative research designs using statistics programs such as SAS, SPSS, and M-Plus to analyze large scale data sets.

4. I specifically have extensive research background in transgender youth studies. My post-doctoral position focused on the school climate for lesbian, gay, bisexual, transgender and queer (LGBTQ) youth, and from that I developed a specific focus area on transgender youth. I visited and collected data with transgender youth in community centers in nine U.S. cities, Canada, and Ireland. I also completed a one-year visiting scientist appointment at the Center for Expertise in Gender Dysphoria at the Vrije University Medical Center (VUMC) in Amsterdam, NL. My research specifically with transgender youth has included large school-based surveys, focus groups in community youth centers, work with secondary datasets, in depth individual interviews, and work with medical records data. I have published over 35 journal articles and book chapters, with 20 of those being LGBTQ-specific (and 15 transgender-specific). Recently, I have consulted with the Minnesota Department of Education in research and curricular inclusion for transgender youth, as well as the Center for Sexual Health, Transgender Clinic at the University of Minnesota.

5. I have been engaged by counsel for Ash Whitaker and his mother, Melissa Whitaker, to provide an evaluation of the negative consequences to Ash as a result of his treatment in his school setting in Kenosha Unified School District (KUSD) in relation to Ash's status as a transgender boy based on the social science regarding transgender youth in schools. I have actual knowledge of the matters stated in this declaration. I was compensated \$1,200 to prepare this report and will be paid \$150/hour for any additional services or testimony. My compensation does not depend on the outcome of this case, the opinions I express, or the testimony I provide.

6. My evaluation activities are separate from and unrelated to my position at the University of Minnesota. Evidence in this report in no way reflects the opinion or positions of the University of Minnesota.

7. For this declaration, I reviewed the relevant developmental research literature and applied my knowledge of that literature to the unique developmental concerns of Ash. Research articles are taken from respected, peer reviewed, scientific journals in the areas of lifespan development, family studies, developmental psychology, education and public health. Some studies are specific to transgender or gender nonconforming youth, and other studies examine LGBTQ students as a group. In the text, reference is made to the population of each study using labels of sexual and gender minority (LGBTQ), sexual minority (LGB), transgender, or gender non-conforming. To the greatest extent possible, labels are used consistently with the study they come from, while also working to consistently identify populations throughout this declaration. A list of the research literature I relied upon in preparing this declaration is attached as Ex. B.

### **Factual Background**

8. I have been provided a copy of the complaint recently filed in the United States District Court, Eastern District of Wisconsin, titled: *A.W. v. Kenosha Unified School District*, Civil Action No. 2:16-cv-00943. This complaint contains an extensive factual summary of Ash's

experiences in school. I have gathered additional facts from Ash and his mother, via a telephone interview I conducted with two of his attorneys. I have also reviewed the expert declaration and clinical assessment of Ash by Stephanie Budge, Ph.D. I will assume the facts in the complaint, the additional facts obtained from Ash and his mother, and the facts contained in Dr. Budge's report are true for purposes of this analysis.

9. The following report utilizes the facts of this specific case, in conjunction with existing developmental research regarding transgender youth, to render an opinion as to whether KUSD's failure to fully include and support transgender students (including use of restrooms consistent with their gender identity) contributes to developmental harm for those students and specifically Ash, and whether KUSD's policies and practices would impact the functioning of all students. This report also explains the processes of medical intervention with gender-variant youth to clarify why reliance on medical milestones as a prerequisite to providing equal treatment consistent with gender identity is developmentally inappropriate and financially discriminatory.

### **Relevant Research Findings**

10. My review of the research reveals three general findings:
  - a. Negative school climates are harmful to transgender youth.
  - b. Schools with inclusive practices experience benefits for all students in attendance, achievement, and sense of safety.
  - c. Transgender and gender variant youth may not have access to hormonal medical care due to the exorbitant cost, and are often not eligible for surgical care until age 18.

### **Minority Stress as a Guiding Framework**

11. A minority stress framework describes the negative impact that environmental conditions have on a person with a minority (or reduced power) status within a system. Meyer (2003) elucidated this framework for LGB persons. Since then a minority stress framework has dominated the research and understanding of LGBTQ health and well-being disparities. Simply stated, the enacted stigma of discrimination and differential treatment wears away at the resilience of an individual, and becomes internalized through processes such as concealment of identity or internalized shame. These processes put LGBTQ persons at risk for negative outcomes, and explain the discrepancy in well-being between LGBTQ persons and their heterosexual, cisgender (i.e., non-transgender) counterparts. In 2013, Bockting further developed the concepts of minority stress specifically for transgender persons. The minority stress model has proved to be an incredibly powerful and effective tool in helping to understand why LGBTQ persons fare worse than their non-LGBTQ counterparts.

### **Educational Harm to Ash Whitaker as a Result of the School's Actions**

12. Ash reports a significant history of punitive and limiting interactions with school personnel including being threatened with discipline, being separated from peers, having unwanted attention drawn to his transgender status, and a social media page hosted by a school volunteer that includes derogatory comments about him and his mother alongside arguments against schools treating transgender students equally.

13. Ash reports specific harm as a result of these actions. For instance, his academics suffer after he is pulled out of class and disciplined, or otherwise singled out. He is made to feel that he does not have the same worth as other students because he is required to walk a good distance out of his way simply to use the toilet. The notoriety of his situation resulting from the

school's actions has caused other students and personnel to start asking him invasive personal and medical questions, which he finds exhausting. He has been directly limited in opportunities for relationships and socialization with other students because he was required to be housed individually at orchestra camp and restricted to single-user restrooms. He is uncomfortable and risking his physical health when he waits hours or all day to use the toilet. Generally, he is also thrust into the position of constantly being a social advocate, which limits his opportunities for social interactions or relationships about things other than his gender identity.

14. School climates are an important contributor to the possible negative outcomes faced by transgender youth, specifically in the risks for mental health problems, victimization, school truancy or dropout, criminal justice involvement and suicide attempts. A growing body of evidence documents the harm caused to transgender students when they experience the kinds of negativity and social stigma to which Ash has been exposed. The National Research Council has concluded from decades of research that a safe learning environment is a key component of positive youth development, (Eccles & Gutman, 2002).

15. Studies have consistently reported a high rate of negative and victimizing behaviors towards transgender youth in schools (McGuire, Anderson, Toomey, & Russell, 2010; Greytak, Kosciw, & Diaz, 2009; Greytak, & Kosciw, 2013, Toomey, Ryan, Diaz, Card, & Russell, 2013). Some studies have also reported that school personnel can often contribute to the negativity and engage in harassment (McGuire, et al., 2010; Greytak & Kosciw, 2013). Evidence shows that adults often engage in harassing or unwelcoming gestures, which contribute to educational disparities (Greytak & Kosciw, 2013). Other sources of negativity from school officials include increased use of disciplinary practices aimed at LGBTQ students (Snapp, Hoenig, Fields, & Russell, 2015; Poteat, Mereish, & Birkett, 2015). Sexual and gender minorities

experience disproportionately greater discipline, which contributes to criminalization and involvement with the criminal justice system, contributing to what has been termed the school-to-prison pipeline (Snapp et al., 2015). Many experience discipline for gender non-conformity in the form of things like wearing opposite gender clothing or makeup, showing affection to someone who appears as the same gender, or grouping with the preferred gender for activities. (Snapp et al., 2015). Poteat, Scheer, and Chong (2016) found that sexual minority youth experienced disproportionate disciplinary responses from school personnel.

16. Each of these studies is illustrative of and consistent with the experiences Ash reports. Ash described difficulty concentrating on academics after “being pulled out of class and lectured” which is consistent with the inhibited learning students often experience in uncomfortable environments (Eccles and Gootman, 2002). He described being uniquely targeted for discipline in that administrators and security staff were told to carefully watch students’ use of restrooms in a thinly veiled attempt to single him out for scrutiny and surveillance and punish his restroom use. He was threatened with detention and/or suspension if he continued to use the boys’ restroom, despite the fact that he had been using the boys’ restroom for seven months prior with not a single concern or incident. Repeatedly, Ash shared examples of student acceptance contrasted with personnel (administrative or staff) engaging in rejecting, isolating or punitive actions based on his transgender status. Consistent with other reports in the research, Ash reported discipline or generally being singled out for disparate treatment for ordinary student activities such as using the restroom, running for prom king, or wanting to share a suite with people he knows at orchestra camp. He was denied the opportunity to do these typical things based solely on his transgender status, and then faced possible discipline if he did them anyway.

17. The experience of a negative climate has profound implications for student well-being. In most studies, it is victimization exposure rather than sexual orientation or gender identity alone that accounts for differences in well-being between LGBTQ students and heterosexual cisgender students. More discrimination is associated with more distress. Specifically, discrimination contributes to shame, loneliness, and interferes with close connection to peers and the LGBTQ community, which in turn increases distress. (Mariesh and Poteat, 2015). Another study found differences between LGBTQ and non-LGBTQ students in truancy, achievement and graduation, however, when they included the role of victimization in the model, there were smaller or no differences between LGBTQ and non-LGBTQ students in truancy, achievement or graduation. (Snapp, et al., 2015). Further studies have confirmed that it is victimization that is associated with reduced grades, more truancy, and increased health risk behavior. In fact, when victimization is accounted for, LGBTQ students are similar to their non-LGBTQ counterparts in grades, truancy and health risk behavior (Russell, Ryan, Toomey, Diaz, & Sanchez, 2011). Taken together, the converging evidence reveals that problems that LGBTQ students report in well-being have little to do with being LGBTQ, and more to do with the victimization they experience at school. Longer term studies confirm that it is experiences of victimization that predict young adult psychosocial difficulties as well, and that when adolescent victimization is accounted for there are not differences in psychosocial well-being for gender non-conforming (Toomey et al., 2013) and LGBTQ (Russel, DP) young adults. Viewed from another vantage, these data suggest that if we can eliminate victimization of LGBTQ adolescents, we should see reduction in the young adult mental and physical health problems reported by this population. The most current research is finding a similar pattern of risks based on victimization specifically among transgender and gender non-conforming youth. In a large

(5,500) survey of high school students, gender minority students reported increased substance use. However, when victimization was accounted for, there were no longer differences in substance use. Thus it is experiences of victimization, and not transgender status that puts someone at risk for substance use (Reisner, Greytak, Parson, & Ybarra, 2015). Current studies report that 41% of transgender adults report a history of a suicide attempt (Haas, Rodgers, Herman, 2014), and increasing evidence finds that this outcome is likely to be a byproduct of the extensive victimization to which transgender people are routinely exposed (Glodblum, Testa, Pflum, Hendricks, Bradford, & Bongar, 2012).

18. The experiences Ash reports regarding social isolation—for example, at the orchestra camp—are consistent with other studies’ findings about missed opportunities for social development. He reports that since the school began to single him out for differential treatment from other boys, many of his peers went from unquestioning acceptance of him as a boy and treating his transgender status as a “non-issue” to significantly greater curiosity and questioning, leading him to feel scrutinized and viewed as notably different from other students. He also reports that he lost “some friends” when he transitioned. When a social group has higher levels of prejudice against LGBTQ people, the social relationships of peer group members become more stressed over time. This means that the overall context of the peer environment matters for the opportunity for all group members to develop strong interpersonal relationships, a critical developmental task of adolescence. (Poteat, et al., 2015). Furthermore, having a stronger positive climate makes it more possible for other school supports to be more useful. (Poteat, et al., 2015) For example, youth in more supportive school contexts reported healthier outcomes in response to participation in further supports such as Gay-Straight Alliance (GSA) clubs.

## Overall School Climate in KUSD

19. Ash reports a history of significant bullying by another student in middle school, as well as harassing conduct by personnel at Tremper High School (Tremper). He also reports that there is considerable bullying of other students with little or no response by school personnel, at Tremper and elsewhere in KUSD. He reports hearing from other transgender and gender non-conforming students, both at Tremper and elsewhere in KUSD, that significant bullying, and even physical assault were not addressed by administrators.

20. Ash's reports of negative comments regarding LGBT people from students and being singled out by personnel are consistent with other studies of school climate. His report of lack of response from school personnel is also consistent with other studies of schools that are not responsive to safety and climate issues for transgender students. In particular, in one study we found that transgender youth were as likely to hear a teacher or staff person make a negative comment about gender expression as they were to hear a teacher or staff step in to correct a fellow student making such a statement (McGuire, et al., 2010). The bullying Ash experienced in middle school, while not directly related to transgender identity, was associated with other elements of gender expression such as size and appearance, not having a feminine enough gender role, and a masculine body frame.

21. Ash described his efforts to seek support from school personnel in middle school: "In middle school I reported bullying to teachers, the principal and vice principal, and the girl was never punished. I tried moving out of her classes. I wanted to be in the same house [set of students] but they moved me entirely [into a different house]. Nothing was ever done even though she threatened physical abuse. They said, 'It's he said/she said. We can't prove it, so we can't do anything.'"

22. Ash also reports that one assistant principal consistently calls him by his birth name and female pronouns, despite his repeated requests to be called Ash and by male pronouns. Additionally, due to his birth name remaining on class rosters, he must approach each new teacher at the beginning of the semester to inform them of his preferred name and appropriate pronouns. He must repeat that process with substitute teachers whenever they fill in for his regular teachers throughout the year. He reported that some of his regular teachers would attempt to spare him that burden by crossing out his birth name on class rosters and hand-writing in the name Ash, but many do not. On one occasion, he reported that he had to repeat that conversation with four substitute teachers in a single day. While substitute teachers often respected his name and pronouns, some would ignore his requests, and call him by his birth name in front of the entire class, embarrassing him and revealing his transgender status to all the other students.

23. Ash reports that a Tremper parent who volunteers as a piano accompanist with the school orchestra formed a Facebook group called “KUSD Parents for Privacy” that has posted derogatory comments aimed at Ash and his mother. These posts are easily publicly accessible. I accessed them, and they clearly make reference to a specific student, Ash. It appears that derogatory comments and posts have been allowed to remain public for weeks or months. For instance one participant posted that “only a sick unloving parent would allow ...” in response to a story about Ash and the lawsuit he had filed. In another case, a story about Ash was shared, and the group’s post to that share was to define the word “pawn.” In both cases, Ash’s identity was an element of the post and derogatory content that personally demeaned him and/or his mother. Ash complained to the school principal about the website, and the principal assured him that “once a website mentions a particular student, it has to be taken down.” When that website

mentioned Ash specifically, Ash sent the principal multiple screenshots of the posts, but nothing was done.

24. Ash also reports that the same parent volunteer approached him at an orchestra rehearsal toward the end of the school year. She put her hands on his shoulders and said she was “praying” for him. She said that she hoped he understood that comments made at a school board meeting and on her Facebook page that make arguments to deny Ash restroom access were not “personal” and were “bigger than” Ash. He complained to the school administration about her comments and touching him, but it did not appear that anything was done, and the parent continued as a volunteer.

25. Ash’s mother, Melissa Whitaker, who is also a teacher at Tremper, reported receiving corrective intervention by the school principal to ensure that she did not use her classroom to advance her own “agenda,” which she understood to mean discussing Ash or transgender issues with her students—despite the fact that she had been careful never to raise the issue in any of her classes, for fear of exactly that kind of reprimand.

26. All of these factors are consistent with the profile of schools that allow bullying and discriminatory treatment and evade efforts to provide an inclusive and safe environment for all students. Considerable research has found that schools with negative school climates overall are harmful for all students, not just the ones directly targeted by the harassment. This is known as the bystander effect. When students (or anyone) exist in a context where any individual is singled out, treated unequally, harassed, or bullied, the experiences of all students are diminished.

27. Research specifically on school climates for LGBT students has found that when efforts are made to improve the climate for LGBT students, all students in the system benefit.

Specifically, studies have identified five approaches that individually and in combination improve school climates for LGBTQ youth: 1) inclusive non-discrimination and anti-harassment policies, 2) including LGBTQ issues in the curriculum, 3) providing resources specific to LGBTQ students, 4) intervening to stop harassment and bullying, and 5) improving social inclusion with groups like GSAs. Restroom policies that allow students to use the accommodations that match their identities send a message to the entire school that the school is a welcoming and affirming environment for a diverse range of people. Evidence from studies of other sorts of inclusive practices shows overwhelmingly that the student body as a whole benefits from the improved social climate of inclusive policies. Allowing bathroom use that matches a student's identity supports diversity, provides an equitable experience for a diverse range of students, and sends a strong message to the community that the administration respects and supports transgender students and expects that same level of respect from other students. This overall package of school responsiveness has been found time and again to improve the functioning of the entire system (Russell & McGuire, 2008).

28. A growing body of evidence finds that when schools take action to improve circumstances for gender and sexual minorities, all students and the climate as a whole experience the benefit. One study I co-authored found that when teachers step in to stop harassment and negative comments, everyone feels safer, not just LGBTQ students. One way to examine school safety is to consider the average level of safety within a school, and then examine individuals' feelings of safety with regard to how much and in what direction they deviate from the average for their school. This approach takes into account that schools vary in safety, and that individuals' experiences within a school vary. Our studies confirmed that schools vary with regard to how safe they are overall, and that for a given individual, about 10% of their

feelings of safety was determined solely by the overall safety of the school (Russell & McGuire, 2008). When schools enact the five safety strategies described above, the overall reports of anti-LGBTQ slurs goes down. For example, when more students know where to get information, have LGBTQ issues covered in the classroom, see teachers and staff intervening to stop harassment, or know openly LGBTQ teachers and students, the overall report of slurs goes down, even by those students who did not personally experience the protective interventions. In a profile analysis of schools, we identified three distinct profiles of schools, which we referred to as *Hostile High*, *Typical High*, and *Safety High*. *Hostile High*, *Typical High*, and *Safety High* have differences in slurs, LGBTQ curricula, and how many students report knowing an out LGBTQ teacher. A *Hostile High* experiences more slurs, less LGBTQ inclusive curricula, and fewer openly LGBTQ staff. The types of school varied in academic performance and students' feelings of safety. Overall school safety was linked to school level performance: students from a *Safety High* had higher academic performance (API and SAT scores), even after controlling for socioeconomic status and ethnic makeup (Russell, McGuire, & Laub, 2009).

29. Specific aspects of inclusive environments have been linked to different outcomes at the school level in a variety of studies. Schools with GSA clubs report better health outcomes for all students (even those not in the GSA), with an even stronger benefit for LGBTQ students (Poteat, et al., 2015). Horn and Szalach (2009) and Snapp, et al., (2015) likewise reported that overall levels of safety were higher among schools with LGBTQ-inclusive policies. Basically, in schools with inclusive policies, the overall student average for safety is higher than schools without policies. This finding holds true even among students who do not know about the policy, are not LGBTQ, and don't directly experience other aspects of the environment. Schools with LGBTQ-inclusive curricula and GSAs had reports of a safer climate for gender non-conforming

students, even among students who did not experience the curriculum or the GSA (Toomey, McGuire, Russell, 2012). Russell, et al. (2014) further confirmed this finding that schools with LGBTQ-inclusive policies have a weaker association between bullying and safety, based on teachers' reports, suggesting that such policies provide a protective effect on the climate for LGBTQ students (Russell, et al., 2015). Essentially, when the overall climate is better managed, even students who do get bullied fare better due to the protective factor of the other LGBTQ-supportive structures.

30. Conversely, no published empirical studies have shown any harm to students when schools practice more inclusive policies. Specifically, no studies have found increased reports of bathroom violence in connection with inclusive policies. To the contrary, study after study finds that greater inclusion on the part of the school translates to fewer incidences of violence and improved feelings of safety for all students, with an enhanced benefit for LGBTQ students.

31. Although Tremper High has an active GSA club, the specific actions taken by the administration to limit the access of transgender students to bathrooms, lodging, and school activities concordant with their gender identity, proposal of a system to visibly mark out transgender students for easier identification and scrutiny, and failure to intervene in harassment, anti-LGBTQ slurs, and bullying, render the school climate closer to the profile of a "hostile high." Ash described the curriculum for sexuality education and education in general at Tremper as one that includes no mention of LGBTQ people. Further evidence of a hostile environment exists in the measures needed to ensure that Ash could run for Prom King (instead of Queen). Administrators ignored a petition and finally responded only after a sit in by students that got local and national media attention. Meanwhile, Ash was told by school personnel that he was

ruining prom for others by running for Prom King and that fewer students would attend prom as a result. This prediction was not borne out, as tickets for prom sold out.

32. Ash and his mother report a particularly disturbing experience regarding a proposed program to offer transgender students green wristbands in order to better monitor their bathroom usage. A guidance counselor told Ms. Whitaker that an administrator had distributed the wristbands to all the school's guidance counselors in a meeting and asked the counselors to distribute them to transgender students so that school personnel could more easily ensure that transgender students were using the "right" bathroom. Such action amounts to a particularly blatant example of enacted stigma, as described in the Minority Stress Model (Meyer, 2003), and is particularly harmful to transgender persons (Bockting, 2013).

33. When schools take action to improve environments, evidence finds that all students benefit. Specifically, with regard to transgender students, interventions to prevent bullying and mistreatment of transgender students are associated with enhanced benefits for transgender students (Greytak, et al., 2009), as well as the entire school community, as described above. My own research found that enacting interventions was particularly important in the ability of transgender youth to develop connections to at least one supportive adult at school—a critical protective factor in development—and ultimately to feelings of safety (McGuire, et al., 2010). Increasingly, specific resources are available to train educators, administrators and other school staff (Greytak, Kosciw, Boesen, & Madelyn, 2013; Russell 2014) and to show the enhanced benefits for students when such training occurs (Greytak, Kosciw, & Boeson, & Madelyn, 2013).

### **Demands for Medical Documentation**

34. Administrators have required documentation of Ash's transgender status as a way to avoid providing accommodations such as changing his gender in the electronic system. Exactly what is required has been unclear and appears to have shifted as Ash and his mother have attempted to comply.

35. In the treatment of children and adolescents with gender dysphoria, it is typical to engage in a period of waiting and support to allow development before attempting medical interventions. Around the time of puberty or after, if an adolescent is identifying as a different gender from that presumed at birth, all available evidence suggests the transition is likely to be long-standing (de Vries, Kreukels, Steensma, & McGuire, 2014; Steensma, McGuire, Kruekels, Beekman & Cohen-Kettenis, 2013). With proper support, transgender adolescents grow up to be psychologically healthy young adults in their gender, with a psychological profile similar to the population at large for the same age group (de Vries, et al., 2014).

36. In the United States, most insurance policies do not cover adolescent or adult treatment for gender reassignment. Ash and his mother report that their insurance does not cover treatments related to gender transition and would not have covered puberty blockers if they had been needed. The management and care for medical treatments related to gender transition can be quite expensive, especially before age 16 when puberty blockers are typically the only intervention available under the standard of care. Puberty blockers cost upwards of \$1,000 per month, a prohibitive cost for many Americans, including Ash's family. Ash has now started taking testosterone, as he has just this year become eligible for this intervention by his age and the prevailing standards of care (WPATH). Any system that requires a young person to "medically prove" their transgender status or gender identity is both medically inappropriate and

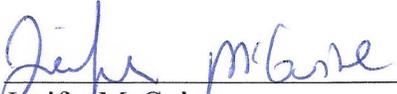
entirely out of reach for many who cannot afford medical treatments. For children under 18, many will not receive any medical intervention, as only the most well-to-do or well-insured Americans can afford such intervention. Moreover, for many transgender people, including adults, medical intervention is not necessary to resolve gender dysphoria; for many people, social transition may be the only step needed to complete the person's gender transition and allows them to live fully and successfully in accordance with their gender identity.

### **Conclusion**

37. In sum, it is my professional opinion, based on the available research, as well my own existing research program on these subjects, and my knowledge of the circumstances related to Ash's educational environment as it relates to his gender identity, that the actions of KUSD have served to marginalize and stigmatize Ash. These actions on the part of the school are harmful to Ash and other transgender students. Additionally, the actions of KUSD to target and treat transgender students differently from their peers create a hostile environment that interferes with the safety, well-being, and achievement opportunity of all youth in the school. Based on available research, the best interests of the school would be served by allowing students full inclusion in activities and access to facilities based on their gender identity, without regard to their birth-assigned gender. Ash has asked repeatedly to be allowed to use the restroom and other accommodations consistent with his experienced gender identity. He reports significant harm due to not being allowed to use the boys' restroom in the form of stress, not using the restroom all day, limiting his water even though he has a medical condition requiring him to hydrate, and being isolated and ostracized by the school personnel. In order to arrest the damage done, and allow Ash to move forward in a developmentally appropriate manner, it is critical that he be

allowed the freedom to fully express his gender identity and use the associated accommodations consistent with it.

Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

  
\_\_\_\_\_  
Jenifer McGuire

Executed on 8/2/2016.

**EXHIBIT A**

**CURRICULUM VITAE OF JENIFER K. MCGUIRE**

**Jenifer K. McGuire**

Associate Professor  
Family Social Science  
University of Minnesota  
jmcguire@umn.edu

Degrees:

2003 Ph.D., University of Arizona, Family Studies and Human Development, Mentor Dr. Bonnie Barber  
2001 MPH, Public Health, University of Arizona, Mentor Dr. Howard Eng  
1998 MS., Family Studies, University of Arizona, Mentor Dr. Wendy Gamble  
1992 BA., *Magna Cum Laude* Comm. & Psychology, University of Colorado, Mentor Dr. Jacquelynne Eccles

Professional Experience:

*Twin Cities, Minnesota*

2014-current Associate Professor, Extension Specialist, U of Minnesota, Department of Family Social Sciences

*Amsterdam, the Netherlands*

2012-2013 Visiting Research Scientist, Center for Expertise on Gender Dysphoria

*Pullman, Washington*

2012-2014 Associate Professor, Washington State University, Department of Human Development

2006-2012 Assistant Professor, Washington State University, Department of Human Development

*Tucson, Arizona*

2003-2006 Post-doctoral Researcher - Institute for Children, Youth and Families, Mentor Dr. Stephen Russell, U of A

2002-2003 Research Associate - Division of Family Studies / Human Development, U of A

1998-2002 Evaluation Specialist - LeCroy and Milligan Associates

1998-1999 Internship Coordinator - Institute for Children Youth and Families, U of A

1996-1998 Program Coordinator – Evaluation, Cooperative Extension, U of A

*Boulder, Colorado*

1993-1995 Research Assistant - Institute for Behavioral Sciences, U of C

1993-1995 Director of Extended Day and Summer Programming, Boulder Co. Mental Health

Grants/ contract support:

2015 National Institutes of Health, NICHD, (under review) Supplement, Co-I, Resiliency among transgender persons. \$100,000 direct costs.

2014 National Council on Family Relations, Innovative Research Award. Kivalanka, K., Goldberg, A., and McGuire, J.K. The Trans\* Kids Project. Role: co-investigator

2014, National Institutes of Health, NICHD, (Scored at 11<sup>th</sup> percentile, not funded), Principal Investigator R03 Gender Identity Development among Gender Dysphoric Youth, \$100,000 direct costs.

2011, Association of American Colleges and Universities, Bringing Theory to practice, Types and Conditions of Service Learning: Associations with Civic Responsibility, Self-Efficacy, and Wellbeing, Principal investigator, \$7,400 research costs

2010-2011, Alcohol and Drug Abuse Research Program, Washington State University, Principal investigator, \$34,000 research costs

2008-2009, Department of Health and Human Services, Community Based Abstinence Education, Co-Evaluator, Clarkston Washington, \$29,000 total evaluation costs

2007, NICHD Summer Scholars Institute

2004, Society for the Psychological Study of Social Issues, Internship, \$2,500 research costs

Awards:

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- 2014 National Council on Family Relations, Innovative Research Award. Kunalanka, K., Goldberg, A., and McGuire, J.K. The Trans\* Kids Project.
- 2010 Hugo G. Beigel Award, *The Journal of Sex Research* primary author to: McGuire, J. K. & Barber, B. L. (2010). Late adolescent sexual styles: A person centered approach to the multifaceted nature of sexual behavior. *The Journal of Sex Research*, 47, 301-313.
- 2010 Society for Research on Adolescence Social Policy Publication Award: Best Edited Book. Contributing author to: Russell, S. T., McGuire, J. K., & Laub, C. (2008). School climate for Lesbian, Gay, Bisexual, and Transgender (LGBT) students: Within- and between-school variability. In M. Shinn and H. Yoshikawa, (Eds.) *Toward positive youth development: Transforming schools and community programs*. New York: Oxford University Press, pp. 133-149.
- 2009 Leadership Fellows Award: Washington Campus Compact.

Associate editing

- McCann, E., Olson, K., Hall, E., Giles, M., McCullough, R. (2015). Children in Common: Ensuring the Emotional Well-being of Children When Parenting Apart. McGuire, J., & Michaels, C. (Eds.) *Children's Mental Health Ereview*. Available at: <http://hdl.handle.net/11299/175941>
- Kreukels, B., de Vries, A. L. C., Steensma, T. D., Eds; McGuire, J. K., Associate editor, (2013) *Gender dysphoria and disorders of sex development*. Springer: New York.

Professional articles, refereed:

- Becher, E., Cronin, S., McGuire, J., Powell, S., & McCann, E. (under review). Relational conflict and outcomes from an online divorce education program.
- Dworkin, J., McCann, E., & McGuire, J. (in press). *Coparenting in the digital era: Exploring divorced parents' use of technology*.
- \*McGuire, J. K., Dworkin, J., Borden, L. M., Perkins, D., & Russell, S. T. (under review). *Youth motivations for program participation*.
- \*Chapman, E. N., McGuire, J. K., Whitney, J. (under review) Sexual Identity and Well-Being: A Person-Centered Analyses of Sexual Health. *American Journal of Sex Education*.
- \*McGuire, J.K., Doty, J.L.<sup>1</sup>, Catalpa, J.M.<sup>1</sup>, Ola, C.<sup>1</sup> (2016) Gender Identity, Body Size, and Body Image: A Qualitative Analysis of Transgender Youth. *Body Image*.
- \*Norris, A.<sup>1</sup>, McGuire, J.K., Stolz, C. (under 2<sup>nd</sup> review) University school climate for LGBT students. *Journal of College Student Development*.
- \*McGuire, J.K., Catalpa, J.<sup>1</sup>, Lacey, V., & Kunalanka, K., (in press). Ambiguous loss for trans persons. *Journal of Family Theory and Review*.
- \*McGuire, J. K., Kunalanka, K., Catalpa, J. M.<sup>1</sup>, & Toomey, R. B. (2016). Transfamily theory: How the presence of Trans\* family members informs gender development in families. *Journal of family Theory and Review*, 8, pp. 60-73.
- Snapp, S. & McGuire, J. K. (2015). LGBTQ-Inclusive Curriculum: Why Supportive Curriculum Matters. *Sex Education*.
- Cleveland, H. H., Wiebe, R., McGuire, J., Zheng, Y, (2015). Predicting the Drinking of Minority Adolescents from their exposure to White Schoolmates: Differences and Similarities between Hispanic, Black, and Asian Adolescents. *Journal of Ethnicity and Substance Use*, 14:1-21.
- \*De Vries, A. L. C., McGuire, J. K., Steensma, T. D., Wagenaar, E., Doreleijers, T., Cohen-Kettenis, P. T. (2014). Prospective young adult outcomes of puberty suppression in transgender adolescents, *Pediatrics*, 134.
- \*Steensma, T. D., McGuire, J. K., Kreukels, B. P. C., Beekman, A. J., Cohen-Kettenis, P. T. (2013) Factors Associated with Desistence and Persistence of Childhood Gender Dysphoria: A Quantitative Follow-up Study. *Journal of the American Academy of Child and Adolescent Psychiatry*.
- \*Rodgers, K.B., & McGuire, J.K., (2012). Adolescent sexual risk and multiple contexts: interpersonal violence, parenting, and poverty. *Journal of Interpersonal Violence*. Doi: 0886260511432148

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- \*Toomey, R. <sup>1</sup>, McGuire, J. K., & Russell, S. T. (2012). Perceptions of school safety for gender nonconforming peers: Within- and between-school variability in hetero-normative climates. *Journal of Adolescence*, 35(1) 187-196. doi:10.1016/j.adolescence.2011.03.001
- \*McGuire, J. K., & Conover-Williams, M. <sup>1</sup>, (2010). Creating spaces to support transgender youth. *The Prevention Researcher*, 17 (4) 17-20.
- \*McGuire, J. K. & Barber, B. L. (2010). Late adolescent sexual styles: A person centered approach to the multifaceted nature of sexual behavior. *The Journal of Sex Research*, 47, 301-313.
- \*McGuire, J. K., Anderson, C. R. <sup>1</sup>, Toomey, R. B. <sup>1</sup>, & Russell, S. T., (2010). School climate for transgender youth: A mixed method investigation of student experiences and school responses. *Journal of Youth and Adolescence*, 39, 1175-1188.
- \*McGuire, J. K., & Doty, V. (2010). Innovations in teaching: Students as practitioners in a service learning context. *Michigan Family Review*, 14, 110-121.
- \*Broberg, D. M. <sup>1</sup>, Broberg, K. A. <sup>1</sup>, & McGuire, J. K. (2009). Policy approaches to offset food insecurity and obesity at the individual, family and community level. *Journal of Family and Consumer Sciences*, 101, 44-49.
- \*Rodgers, K.B., & McGuire, J.K., (2009). Poverty and violence as contexts for understanding family process and health risks among sexually experienced youth. *International Journal of Child and Adolescent Health*, 2, 109-117.
- Hill, L. G., Parker, L. A., McGuire, J. K., Sage, R. <sup>1</sup> (2009). Institutionalising science-based practices in children's services. *Journal of Child Services*, 3, 32-45.
- \*Russell, S. T., McGuire, J. K., Lee, S. A. <sup>1</sup>, & Larriva, J. C. <sup>1</sup> (2008). Adolescent perceptions of school safety for students with lesbian, gay, bisexual, and transgender parents. *Journal of LGBT Youth*, 5, 11-27.
- \*McGuire, J. K. & Gamble, W. C. (2006). Community service for youth: The value of psychological engagement over number of hours spent. *Journal of Adolescence*, 29, 289-298.
- \*McGuire, J. K., Walsh, M. B., & LeCroy, C. W. (2005). Content analyses of Title V Abstinence Only Education Programs. *Sexuality Research and Social Policy*, 2:4, 32-41.
- \*Adam, M. B., McGuire, J. K., Walsh, M., Basta, J. & LeCroy, C. W. (2005). Acculturation as a predictor of the onset of sexual intercourse among Hispanic teens and White teens. *Archives of Pediatric and Adolescent Medicine*, 159, 261-265.

Invited Chapters, Encyclopedia entries, and Book reviews

- \*McGuire, J.K. (2016) Review of Sisterhood is Powerful. *Journal of Family Theory and Review*.
- \*McGuire, J.K. & Chrisler, A. <sup>1</sup> (2016). Body art among transgender youth. In Francisco Villaruel (Ed) *Youth Cultures*.
- \*McGuire, J.K. (2016). Transgender youth well-being. *Encyclopedia of LGBTQ Studies*. Sage: Thousand oaks, CA.
- \*McGuire, J.K. (2016). Puberty suppression for transgender youth. *Encyclopedia of LGBTQ Studies*. Sage: Thousand oaks, CA.
- \*McGuire, J.K. (2016). International and U.S. Gender Clinics. *Encyclopedia of LGBTQ Studies*. Sage: Thousand oaks, CA.
- \*McGuire, J.K. (2016). Sexuality education LGBTQ inclusion mandates. *Encyclopedia of LGBTQ Studies*. Sage: Thousand oaks, CA.
- \*McGuire, J.K., & Brown, M.B. (2015). *Forms and conditions of service learning: Links to student outcomes*. Routledge Press.
- De Vries, A. L. C., Kreukels, B., Steensma, T. D.; & McGuire, J. K. (2013). Gender identity development. In Kreukels, B., de Vries, A. I. C., Steensma, T. D., Eds; McGuire, J. K., Associate editor, (2013) *Gender dysphoria and disorders of sex development*. Springer: New York.
- \*McGuire, J. K. (2012). Transgender youth. *Encyclopedia of Adolescence*.
- \*Russell, S. T., McGuire, J. K., & Laub, C. (2008). School climate for Lesbian, Gay, Bisexual, and Transgender (LGBT) students: Within- and between-school variability. In M. Shinn and H. Yoshikawa, (Eds.) *Toward*

\*Major intellectual contribution, <sup>1</sup>Student co-authors

positive youth development: Transforming schools and community programs. New York: Oxford University Press, pp. 133-149.

- \*Russell, S. T., & McGuire, J. K. (2006). Critical mental health issues for sexual minority adolescents. In F. A. Villaruel, and T. Luster (Eds.) *The crises in youth mental health: Critical issues and effective programs*, Volume 2: Disorders in adolescence. Westport CT, US: Greenwood Publishing Group Inc., pp. 213-238.

Abstracts:

- \*McGuire, J. K., & Russell, S. T. (2007). Health care utilization by sexual minority adolescents. *Journal of Adolescent Health*, 40, S28.

Other scholarly work:

Evaluation reports:

- \*McGuire, J.K., Catalpa, J.M.<sup>1</sup>, Lacey, V. (2015) Transgender youth in Ireland. Fact sheet. University of Minnesota, Department of Family Social Sciences.
- Dworkin, J., & McGuire, J. (2014). *Exploring technology use among divorced parents*. Available: <http://www.cehd.umn.edu/fsos/projects/parent20/pdf/p20report-dec2014.pdf>
- \*McGuire, J. K. (June, September, December, 2012-current). Certified Expert Witness [written] before United States Department of Justice, Executive Office for Immigration Review.
- \*McGuire, J. K.; Stolz, C., & Harris, E. <sup>1</sup> (2012). Diversity exposure and campus connection at Washington State University (GIESO commission).
- \*McGuire, J. K. (March, 2010). Certified Expert Witness [written and oral] before United States Department of Justice, Executive Office for Immigration Review (Tucson Immigration Court).
- \*McGuire, J.K., (2010). Evaluation report: Washington Campus Compact Learn and Serve America 2006-2009 Sub-Grant Program. Washington Campus Compact.
- \*McGuire, J. K., Clarke, T. J. <sup>1</sup>, Anderson, C. R. <sup>1</sup>, & Russell, S. T. (2010). Understanding school safety for transgender youth. (California Safe Schools Coalition Research Brief No. 13). San Francisco, CA: California Safe Schools Coalition.
- \*Russell, S. T., McGuire, J. K., Toomey, R.B. <sup>1</sup>, & Anderson, C. R. <sup>1</sup> (2010). Gender non-conformity and school safety: Documenting the problem and steps schools can take. (California Safe Schools Coalition Research Brief No. 12). San Francisco, CA: California Safe Schools Coalition.
- \*McGuire, J. K., Dixon, A. <sup>1</sup>, Russell, S.T. (2009). School safety for middle school students. (California Safe Schools Coalition Research Brief No. 11). San Francisco, CA: California Safe Schools Coalition.
- \*Russell, S. T., McGuire, J. K., & Laub, C. (2009). Understanding differences between schools in overall LGBT school safety. (California Safe Schools Coalition Research Brief No. 9). San Francisco, CA: California Safe Schools Coalition.
- Hill, L. G., McGuire, J. K., Parker, L. A., Sage, R. <sup>1</sup> (2009). Program evaluation using science-based practices in children's services. *4H Youth Development*.
- \*McGuire, J. K., Russell, S. T., Anderson, C. <sup>1</sup> (2007). Assessment of resources and needs for transgender identified adolescents within the context of sexual minority focused community centers. Society for the Psychological Study of Social Issues: Internship Award Report.
- \*LeCroy and Milligan Associates, Inc (Eds.). (2007) Arizona's Title V Abstinence Only Education Programs: Comparison of births among abstinence program participants and non-participants statewide. LeCroy and Milligan Associates, Inc (Eds.). Phoenix AZ: Arizona Department of Health Services.
- \*Russell, S. T., Toomey, R. <sup>1</sup>, & McGuire, J. K. (2007). Adolescent gender nonconformity, school safety, and adolescent well-being. Written testimony submitted to: Senate Select Committee Hearing on Transgender School Safety Issues. Children's Hospital Los Angeles, October 15, 2007.
- \*Russell, S. T., McGuire, J. K., Laub, C., & Manke, E., O'Shaughnessy, M., Heck, K., Calhoun, C. (2006). Harassment in school based on actual or perceived sexual orientation: Prevalence and consequences. (California Safe Schools Coalition Research Brief No. 2). San Francisco, CA: California Safe Schools Coalition.

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- \*Russell, S. T., McGuire, J. K., Laub, C., & Manke, E. (2006). LGBT student safety: Steps schools can take. (California Safe Schools Coalition Research Brief No. 3). San Francisco, CA: California Safe Schools Coalition.
- \*Russell, S. T., Kostroski, O.<sup>1</sup>, McGuire, J. K., Laub, C., Manke, E. (2006). Safe schools research brief: LGBT issues in the curriculum promotes school safety. (California Safe Schools Coalition Research Brief No. 4). San Francisco, CA: California Safe Schools Coalition.
- \*Russell, S. T., McGuire, J. K., Larriva, J., C.<sup>1</sup>, Manke, E., & Rosen, A. (2006). School Safety for Students with LGBT Parents. (California Safe Schools Coalition Research Brief No. 6). San Francisco, CA: California Safe Schools Coalition
- \*LeCroy & Milligan Associates, Inc. (2003). Evaluation of the Arizona abstinence only education program: Year five. Arizona Department of Health Services: Phoenix.
- \*LeCroy & Milligan Associates, Inc. (2002). Evaluation of the Arizona abstinence only education program: Year four. Arizona Department of Health Services: Phoenix.
- \*Basta, J., Walsh, M., McGuire, J., LeCroy, C., Harle, K, Adam, M. (2001). Evaluation of the Arizona abstinence only education program: Year three. Arizona Department of Health Services: Phoenix.
- \*Basta, J., Walsh, M., McGuire, J., LeCroy, C., Gamble, W., Harle, K, Adam, M. (2000). Evaluation of the Arizona abstinence only education program: Year two - program process and short term program outcomes. Arizona Department of Health Services: Phoenix.

Conference Presentations:

- Sano, Y., McGuire, J.K., Ontai, L. (2015, November). Parental Mental Health and child Outcomes. Poster Presentation at the 2015 National Council on Family Relationships Annual Conference, Vancouver, BC.
- Dyk, P., Greder, K., Sano, Y., McGuire, J.K., Ontai, L. (2015, November). Psycho-Social Risk and Child Obesity in Low-Income, Rural, Families. Poster Presentation at the 2015 National Council on Family Relationships Annual Conference, Vancouver, BC.
- McGuire, J.K., Bretherson, S., Powell, S., Becher, E., Hall, E.L., Cronin, S., & McCann, E (2015, November). Improving outcomes for families following divorce and separation: Evidence from Minnesota's Parents Forever program. Paper Presentation at the 2015 National Council on Family Relationships Annual Conference, Vancouver, BC.
- Dworkin, J., McCann, E., & McGuire, J. (2015, November). *Coparenting in the digital era: Exploring divorced parents' use of technology*. Paper Presentation at the 2015 National Council on Family Relationships Annual Conference, Vancouver, BC.
- Catalpa, J., Zhang, N. & McGuire, J. K. (2015, November). *Kinship networks among transgender youth; Connecting to and breaking away from queer and trans\* communities*. Paper Presentation at the 2015 National Council on Family Relationships Annual Conference, Vancouver, BC.
- McGuire, J.K & Catalpa, J.M. (2015, June) *Negotiating Kinship Ties for Transgender Young People*. Paper presentation at Queer Kinship and Relationships Conference, Warsaw (Olsztyn), Poland.
- Doty, J.L., McGuire, J.K., & Catalpa, J.M. (2015, May). *Gender, Body Size, and Body Image: A Qualitative Analysis of Transgender Youth*. Paper Presentation at LGBTQ Research Symposium, Urbana-Champaign, IL.
- McGuire, J.K., Catalpa, J.M. & Davison, S. (2015, March). *Resilience among transgender youth who experienced homelessness prior to age 18*. Paper Presentation at the Biennial meeting of the Society for Research on Child Development, Philadelphia, PA.
- McGuire, J.K., Oswald, R., Zvoncovic, A., Allen, K.A. (2014). Incorporating feminist concepts into academic mentoring. Workshop presented at The National Council on Family Relations, Baltimore, MD.
- McGuire, J. K., (2014). Body image among transgender youth. Society for Research on Adolescence, Austin, TX.
- McGuire, J. K. (2013). Family relationships among transgender youth. National Council on Family Relations, San Antonio, TX.
- De Vries, A.L.C., McGuire, J. K., Steensma., T., Cohen-Kettenis, P., (2013). Prospective young adult outcomes of puberty suppression in transgender adolescents. Society for Research on Child Development, Seattle, WA.

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- McGuire, J.K., & Brown, M.B. (2012) Forms and conditions of service learning: Links to student outcomes. Conference on University Lifelong Learning, Graz, Austria.
- \*McGuire, J. K., Beets, N., Glenn, J., & Rash, J. A. (2011). Family relationships as contexts for sexual health among transgender youth. Poster presented at the World Association for Sexual health, Glasgow, UK.
- \*McGuire, J. K., Beets, N., Glenn, J., & Rash, J. A. (2011). Family relationships as contexts for sexual health among transgender youth. Poster presented at the Biennial meeting of the society for Research on Child development, Montreal, CA.
- \*Beets, N.<sup>1</sup>, Wilcox, J. L.<sup>1</sup>, McGuire, J. K., & LeCroy, C. W. (2011) Reservation as a context for Native American youth substance use. Poster accepted for presentation at the biennial meeting of the Society for Research on Child Development, Montreal, CA.
- \*Rash, J. A.<sup>1</sup>, Broberg, D.<sup>1</sup>, & McGuire, J. K., (2010). From policy to outcome: How cognitive changes after a pregnancy prevention program predict adolescent childbearing. Poster presentation at the annual meeting of the National Council on Family Relations, Minneapolis, MN.
- \*Rodgers, K. B., McGuire, J. K., & Ewest, W. C.<sup>1</sup> (2010). Trajectories of support on educational outcomes among adolescent mothers in poverty. Poster presentation at the annual meeting of the National Council on Family Relations, Minneapolis, MN.
- \*McGuire, J. K., & Conover-Williams, M.<sup>1</sup> (2010) Family relationships as contexts for development among transgender youth: Links to internalizing and externalizing risk behaviors. Paper presentation at the biennial meeting of the Society for Research on Adolescence, Philadelphia, PA.
- \*Van Campen, K.<sup>1</sup>, Toomey, R. B.<sup>1</sup>, McGuire, J. K., & LeCroy, C. W., (2010). "I Have What?": How Sexual Self-Efficacy and Sexuality Education Are Associated with STD Risk in Adolescence. Poster presentation at the biennial meeting of the Society for Research on Adolescence, Philadelphia, PA.
- \*McGuire, J. K., (2009). NCFR 2009 Perspectives on Therapy Use within Sexual Minority Populations. Round table presentation at the annual meeting of the National Council on Family Relations, San Francisco, CA.
- \*McGuire, J. K., & Doty, V. (2009). 13 hours: An interactive, broad-based, prevention program for at-risk youth. Paper presentation at the annual Washington Campus Coalition, Continuums of Service Conference, Seattle, WA.
- \*Boyer, C.<sup>1</sup>, Broberg, D.<sup>1</sup>, & McGuire, J. K. (2008 November). Adolescent identity formation and reasons to have sex: Links to sexual risk taking. Poster presentation at the annual meeting of the National Council on Family Relations, Little Rock, AR.
- \*McGuire, J.K., & Russell, S.T., (2008 November). Family relationships among transgender youth. Paper presentation at the annual meeting of the National Council on Family Relations, Little Rock, AR.
- Kaestle, C., Russell, S. T., & McGuire, J. K. (2008 November). Identification and measurement of sexual minority status. Round table presentation at the annual meeting of the National Council on Family Relations, Little Rock, AR.
- \*McGuire, J. K., & Russell, S.T., (2008 June). School climate for transgender students. Invited paper presented at the National Education Association Summer Institute on LGBT issues in the classroom.
- \*McGuire, J.K., Anderson, C.R.<sup>1</sup>, & Russell, S.T., (2008 March). Peer and teacher influences on perceptions of school safety for gender non-conforming students. Paper presentation at the biennial meeting of the Society for Research on Adolescence, Chicago, IL.
- \*Dralle, D.L.<sup>1</sup>, McGuire, J.K., Myers, M.<sup>1</sup> (2008, March). Harassment and teacher intervention in middle and high school: Links to teacher trust and feelings of safety. Paper accepted for presentation at the biennial meeting of the Society for Research on Adolescence, Chicago, IL.
- Kaestle, C., Russell, S. T., & McGuire, J. K. (2007, November). Use of the Add Health Data for family and developmental research. Round table presentation at the annual meeting of the National Council on Family Relations, Pittsburgh, PA.
- \*McGuire, J. K., & Russell, S. T. (2007, March). Health care utilization by sexual minority adolescents. Poster presented at the annual meeting of the Society for Adolescent Medicine, Denver, CO.

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- \*McGuire, J. K., Russell, S. T., & Anderson, C. R. (2007, February). Health care utilization by sexual minority adolescents: Links with young adult well being. Paper presented at the annual meeting of the Society for the Study of Emerging Adulthood, Tucson, AZ.
- \*McGuire, J. K., Russell, S. T., & Anderson, C. R.<sup>1</sup> (2006, November). Transgender youth in community centers for lesbian, gay, bisexual and transgender people. Paper presentation at the annual meeting of the National Council on Family Relations, Minneapolis, MN.
- \*McGuire, J. K., Russell, S. T. & Laub, C. (2006, April). School Climate for Lesbian, Gay, Bisexual, and Transgender (LGBT) students: Within- and between-school variability. Paper presented at the biennial meeting of the Society for Research on Adolescence, San Francisco, CA.
- \*Lee, S. A.<sup>1</sup>, Larriva, J.<sup>1</sup>, McGuire, J.K., & Russell, .T. (2005, November). Perceptions of school safety for students with lesbian, gay, bisexual, and transgender parents. Paper presentation at the annual meeting of the National Council on Family Relations, Phoenix, AZ.
- \*McGuire, J. K., Russell, S. T., Barber, B. L., & Stone, M. R., (2004, November). Parenting styles and early onset of sexual intercourse. Paper presented at the annual meeting of the National Council on Family Relations, Phoenix, AZ.
- \*McGuire, J. K., Russell, S. T., & Laub, C. (2005, March). Adolescent bullying based on sexual orientation and gender presentation. Paper presented at the biennial meeting of the Society for Research on Child Development, Atlanta, GA.
- \*Barber, B. L., McGuire, J. K., Stone, M. R., & Russell, S. T. (2004, November). Parenting styles in early adolescence. Paper presented at the annual meeting of the National Council on Family Relations, Orlando, FL.
- \*McGuire, J. K. & Barber, B. L. (2004, March). Late adolescent sexual styles: Links to concepts of self and others. Paper presented at the biennial meeting of the Society for Research on Adolescence, Baltimore, MD.
- \*McGuire, J. K., & Walsh, M. (2002, November) Ruling in the program: Assessment of curricular components in a multi-site sexuality education program. Paper presented at the American Evaluation Association Conference, Washington DC.
- \*McGuire, J. K., Barber, B. L., & Cota-Robles, S. (2002, April) Parental dating monitoring and communication in late adolescence: Links to age of first intercourse and safer sex during the transition to adulthood. Poster presented at the biennial meeting of the Society for Research on Adolescence, New Orleans, LA.
- \*McGuire, J. K., Walsh M., & Adam, M. (2001, April). Running the bases: Development of pre-coital sexual behaviors in adolescence. Paper presented at the biennial meeting of the Society for Research on Child Development, Minneapolis, MN.
- \*McGuire, J. K., & Cota-Robles, S. (2001, April) What's to notice: Menarcheal status, breast development and delinquent behavior among Hispanic and Caucasian adolescent females. Poster presented at the biennial meeting of the Society for Research in Child Development, Minneapolis, MN.
- \*McGuire, J. K., & Gamble, W. C. (2000, June). Social connection and identity development: A review of theories and a description of process. Paper presented at the International Society for the Study of Behavioral Development, Beijing, China.
- \*Basta, J., & McGuire, J. K. (2000, April) Evaluation of the Arizona abstinence education programs: Lessons learned in a multi-site evaluation. Presentation at the Arizona Evaluation Network, Tucson, AZ.
- \*<sup>1</sup>McGuire, J. K., Collins, D. M., & Gamble, W. C. (1999, April). Intentionality and repeated program exposure as predictors of subsequent onset of sexual intercourse. Poster presented at the biennial meetings of the Society for Research in Child Development, Albuquerque, NM.
- Maggs, J. L., Vesterdal, W. J., McGuire, J. K., & Schulenberg, J. (1999, April). Within person predictors of change in alcohol use across adolescence. Paper presented at the biennial meetings of the Society for Research in Child Development, Albuquerque, NM.
- \*<sup>1</sup>McGuire, J. K., Collins, D. M., & Gamble, W. C. (1998, October). Relation of personal assets to health promotion and risk behaviors among a sample of teen leaders for the Postponing Sexual Involvement Program. Poster Presented at the Adolescent Health and Sexuality Conference, Tucson, AZ.

\*Major intellectual contribution, <sup>1</sup>Student co-authors

- Woulbroun Holmquist, E. J., & McGuire, J. K. (1998, March). The impact of illness burden and family relationships on adjustment: A comparison of children with illnesses and their siblings. Poster presented at the biennial meetings of the Society for Research on Adolescence, San Diego, CA.
- \*<sup>1</sup>McGuire, J. K., Collins, D., & Gamble, W. (1998, March). Social support and sexual self understanding: Prevention program implications for early adolescents. Poster presented at the biennial meetings of the Society for Research on Adolescence, San Diego, CA.
- \*McGuire, J. K. (1997, November). Adolescent community service and clarification of personal sexual values: The mediating role of parent- adolescent communication. Poster presented at the annual meetings of the National Council on Family Relations, Washington, DC.
- Maggs, J.L., McGuire, J.K., Peekson, D.S. & Schulenberg, J. (1997, July). To drink or not to drink: AMPS curriculum effects on developmental trends in motivations to use or avoid alcohol. Poster presented at the annual meeting of the Research Society on Alcoholism, San Francisco, CA.
- \*McGuire, J.K., Gamble, W., & Betts, S. (1997, April). Sexual self-efficacy and sexual behavior: Prevention program effects for early adolescents. Poster presented at the biennial meeting of the Society for Research on Child Development, Washington D.C.
- \*McGuire, J., Eccles, J. & Gamble, W. (1996, August). Mothers' constructions of children's personalities. Poster presented at the biennial meetings of the International Society for the Study of Behavioral Development, Quebec City, Canada.
- Maggs, J.L., Schulenberg, J. & McGuire, J. (1996, June). Altering trajectories of adolescent alcohol misuse: Continuity, change and mediating mechanisms. Paper presented at the meetings of the Family Research Consortium, San Diego, CA.
- \*Cota-Robles, S., McGuire, J. K., & Betts, S. (1996, April). Delinquency and parental monitoring of girls: An intercultural comparison. Poster presented at the 1996 Nebraska Symposium for the Study of Motivation and Delinquency, Lincoln, NB.
- \*McGuire, J. K. & McCarthy, K. (1994). Parent differential treatment and sibling conflict: A longitudinal and within family study. Poster presented at the biennial meetings of The Society for Research on Adolescence, San Diego, CA.

Service to the department, college and university:

- Chair Presidents Commission on Gender Identity/ Expression and sexual Orientation – WSU GIESO, (2009- 2014 except 2012-13 academic year)
- Washington Campus Compact *Leadership Fellow* (2009)
- Center for Civic Engagement Advisory Council (2009-current)
- Scholarship reader- CAHNRS (2009)
- Developed and implemented a service learning component for Advanced Adolescent Development (HD 408) Students developed and conducted a prevention program retreat for youth at risk in Whitman county Washington. (2008 - 2010)
- Graduate studies committee – Human Development (2007 – current)
- Scholarship committee- Human Development (2006 – current)
- Recruiting activities (table) at National Council on Family Relations (NCFR) Human Development (2007- current)

Service to professional groups or agencies:

- Washington Campus Compact, consulting in evaluation (2010-2012)
- Reviewer for NICHD Summer Scholars Institute program (2009)
- Reviewer, for several journals- *Journal of Research on Adolescence, Journal of Sex Research, Journal of Youth and Adolescence, Journal of School Health, Journal of Interpersonal Violence, Aggressive Behavior, Social Problems, Journal of Homosexuality, Journal of LGBT family issues* (2005 – current)
- Coordinator of GLBTSA focus group for National Council on Family Relations (2009 – current)
- National Education Association, invited speaker to NEA Summer Summit on LGBT issues in the classroom (2008)
- 4H Healthy Living Initiative- white paper (2008)

\*Major intellectual contribution, <sup>1</sup>Student co-authors

Service to governments or other groups:

Initiated *Rainbow Families* group in Pullman, a group for LGBT families (2008- 2012)  
Consultation with Arizona Department of Health Services Abstinence Only Program Evaluation (2003-2007)  
Member, Board of Directors for Wingspan, Southern Arizona's Lesbian, Gay, Bisexual and Transgender  
Community Center, Chair of program committee (2004-2006)  
City of Tucson, Commission on GLBT Issues, Consulting in research and technical assistance (2002-2006)  
Organization and teaching of comprehensive sexuality education to adolescents in community based programs,  
Tucson AZ (1999-2002)

Professional development activities:

Completion of writing and publication workshops (2009, 2010)  
Completion of Academic Advising Workshops -WSU ACADA, Advising 101, 102 (2010)  
Completion of COACH Women in Leadership program for junior faculty (2008)  
Completion of experiential education workshops, CAHNRS Academic Programs (2008, 2009, 2010)  
Completion of one week training seminar on mixed modeling using MPLUS (2008)  
NICHD Summer Scholars Institute (2007)  
Completion of Productive Proposal Writing seminar series via OGRD, WSU (2006-07)  
Completion of Writing Winning Grants (by Stephen Russell) proposal writing series, via OGRD, (2006-07)  
Completion of training seminar in Item Response Analyses (2005)  
Completion of training seminar in Hierarchical Linear Modeling and Advanced Hierarchical Linear Modeling at the  
University of Michigan's Inter-University Consortium for Social and Political Research (2001)

\*Major intellectual contribution, <sup>1</sup>Student co-authors

**EXHIBIT B**

**LIST OF REFERENCES**

## References

- Aragon, S. R., Poteat, V. P., Espelage, D. L., & Koenig, B. W. (2014). The influence of peer victimization on educational outcomes for LGBTQ and non-LGBTQ high school students. *Journal of LGBT Youth, 11*, 1-19. doi: 10.1080/19361653.2014.840761
- Birkett, M., Russell, S. T., & Corliss, H. L. (2014). Sexual-orientation disparities in school: The mediational role of indicators of victimization in achievement and truancy because of feeling unsafe. *American Journal of Public Health, 104*, 1124-1128. doi: /10.2105/AJPH.2013.301785
- Bockting, W. O., Miner, M. H., Swinburne Romine, R. E., Hamilton, A., & Coleman, E. (2013). Stigma, mental health, and resilience in an online sample of the US transgender population. *American Journal of Public Health, 103*, 943-951. doi:10.2105/AJPH.2013.301241
- de Vries, A. L. C., Kreukels, B. P. C., Steensma, T. D., & McGuire, J. K. (2014). Gender identity development: A biopsychosocial perspective. In B. P. C. Kreukels, T. D. Steensma & de Vries, A. L. C. (Eds.), *Gender dysphoria and disorders of sex development: Progress in care and knowledge* (pp. 53-80). New York: Springer. doi:10.1007/978-1-4614-7441-8\_3
- Eccles, J., & Gootman, J. A. (2002). *Community programs to promote youth development*. Washington, DC: National Academies Press.
- Goldblum, P., Testa, R.J., Pflum, S., Hendricks, M., Brandford, J., & Bongar, B. (2012). The Relationship Between Gender-Based Victimization and Suicide Attempts in Transgender People. *Professional Psychology: Research and Practice, 43*(5), 468-465.
- Greytak, E. A., Kosciw, J. G., & Boesen, M. J. (2013). Educating the educator: Creating supportive school personnel through professional development. *Journal of School Violence, 12*, 80-97. doi: 10.1080/15388220.2012.731586
- Greytak, E. A., Kosciw, J. G., & Diaz, E. M. (2009). *Harsh realities: The experiences of transgender youth in our nation's schools*. ERIC.
- Greytak, E. A., & Kosciw, J. G. (2013). Chapter: Responsive classroom curriculum for lesbian, gay, bisexual, transgender, and questioning students. In E. S. Fisher, & K. Komosa-Hawkins (Eds.), *Creating safe and supportive learning environments: A guide for working with lesbian, gay, bisexual, transgender, and questioning youth and families* (pp. 156-174). New York, NY, US: Routledge/Taylor & Francis Group
- Greytak, Emily A, Kosciw, Joseph G & Boesen, Madelyn J. (2013). Educating the educator: Creating supportive school personnel through professional development. *Journal of School Violence, 12*, 80-97. doi:10.1080/15388220.2012.731586
- Greytak, Emily A, Kosciw, Joseph G & Boesen, Madelyn J. (2013). Putting the "T" in "resource": The benefits of LGBT-related school resources for transgender youth. *Journal of LGBT Youth, 10*, 45-63. doi:10.1080/19361653.2012.718522

Haas, Ann P., Philip L. Rodgers & Jody L. Herman. 2014. *Suicide Attempts among Transgender and Gender Non-Conforming Adults*. Los Angeles, CA: The Williams Institute and American Foundation for Suicide Prevention. Accessed April 10, 2014. URL: <http://williamsinstitute.law.ucla.edu/wp-content/uploads/AFSP-Williams-Suicide-Report-Final.pdf>

Horn, S. S., & Szalach, L. A. (2009). School differences in heterosexual students' attitudes about homosexuality and prejudice based on sexual orientation. *European Journal of Developmental Science*, 3, 64-79. doi: 10.3233/DEV-2009-3108

McGuire, J. K., Anderson, C. R., Toomey, R. B., & Russell, S. T. (2010). School climate for transgender youth: A mixed method investigation of student experiences and school responses. *Journal of Youth and Adolescence*, 39, 1175-1188. doi:10.1007/s10964-010-9540-7

Mereish, E. H., & Poteat, V. P. (2015). A relational model of sexual minority mental and physical health: The negative effects of shame on relationships, loneliness, and health. *Journal of Counseling Psychology*, 62, 425-437. doi: 10.1037/cou0000088

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129, 674. doi:10.1037/0033-2909.129.5.674

Poteat, V. P., Mereish, E. H., & Birkett, M. (2015). The negative effects of prejudice on interpersonal relationships within adolescent peer groups. *Developmental Psychology*, 51, 544-553. doi: 10.1037/a0038914

Poteat, V. P., Scheer, J. R., & Chong, E. S. K. (2016). Sexual orientation-based disparities in school and juvenile justice discipline: A multiple group comparison of contributing factors. *Journal of Educational Psychology*, 108, 229-241. doi: 10.1037/edu0000058

Poteat, V. P., Yoshikawa, H., Calzo, J. P., Gray, M. L., DiGiovanni, C. D., Lipkin, A., Shaw, M. P. (2015). Contextualizing gay-straight alliances: Student, advisor, and structural factors related to positive youth development among members. *Child Development*, 86, 176-193. doi: 10.1111/cdev.12289

Reisner, S. L., Greytak, E. A., Parsons, J. T., & Ybarra, M. L. (2015). Gender minority social stress in adolescence: Disparities in adolescent bullying and substance use by gender identity. *Journal of Sex Research*, 52, 243-256. doi: 10.1080/00224499.2014.886321

Rosario, M., Corliss, H. L., Everett, B. G., Russell, S. T., Buchting, F. O., & Birkett, M. A. (2014). Mediation by peer violence victimization of sexual orientation disparities in cancer-related tobacco, alcohol, and sexual risk behaviors: Pooled youth risk behavior surveys. *American Journal of Public Health*, 104, 1113-1123. doi: 10.2105/AJPH.2013.301764

Russell, S. T., Day, J. K., Ioverno, S., & Toomey, R. B. (2015). Are school policies focused on sexual orientation and gender identity associated with less bullying? teachers' perspectives. *Journal of School Psychology*, 54, 23-38. doi: 10.1016/j.jsp.2015.10.005

Russell, S., & McGuire, J. (2008). The school climate for lesbian, gay, bisexual, and transgender (LGBT) students. In M. Shinn & H. Yoshikawa (Eds.), *Changing schools and community organizations to foster positive youth development*. New York, NY: Oxford University Press

Russell, S. T., Ryan, C., Toomey, R. B., Diaz, R. M., & Sanchez, J. (2011). Lesbian, gay, bisexual, and transgender adolescent school victimization: Implications for young adult health and adjustment. *Journal of School Health, 81*, 223-230. doi:10.1111/j.1746-1561.2011.00583.x

Snapp, S. D., Hoenig, J. M., Fields, A., & Russell, S. T. (2015). Messy, butch, and queer: LGBTQ youth and the school-to-prison pipeline. *Journal of Adolescent Research, 30*, 57-82. doi: 10.1177/0743558414557625

Snapp, S. D., Watson, R. J., Russell, S. T., Diaz, R. M., & Ryan, C. (2015). Social support networks for LGBT young adults: Low cost strategies for positive adjustment. *Family Relations, 64*, 420-430. doi:10.1111/fare.12124

Steensma, T. D., McGuire, J. K., Kreukels, B. P. C., Beekman, A. J., & Cohen-Kettenis, P. T. (2013). Factors associated with desistence and persistence of childhood gender dysphoria: A quantitative follow-up study. *Journal of the American Academy of Child & Adolescent Psychiatry, 52*, 582-590. doi: 10.1016/j.jaac.2013.03.016

Toomey, R. B., McGuire, J. K., & Russell, S. T. (2012). Heteronormativity, school climates, and perceived safety for gender nonconforming peers. *Journal of Adolescence, 35*, 187-196. doi: 10.1016/j.adolescence.2011.03.001

Toomey, R. B., Ryan, C., Diaz, R. M., Card, N. A., & Russell, S. T. (2013). Gender-nonconforming lesbian, gay, bisexual, and transgender youth: School victimization and young adult psychosocial adjustment. *Psychology of Sexual Orientation and Gender Diversity, 1*, 71-80. doi:10.1037/2329-0382.1.S.71

# **EXHIBIT 6**

**U.S. Department of Education &  
U.S. Department of Justice,  
Dear Colleague Letter on Transgender Students  
(May 13, 2016)**



U.S. Department of Justice  
Civil Rights Division



U.S. Department of Education  
Office for Civil Rights

**Dear Colleague Letter on Transgender Students**  
**Notice of Language Assistance**

If you have difficulty understanding English, you may, free of charge, request language assistance services for this Department information by calling 1-800-USA-LEARN (1-800-872-5327) (TTY: 1-800-877-8339), or email us at: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov).

**Aviso a personas con dominio limitado del idioma inglés:** Si usted tiene alguna dificultad en entender el idioma inglés, puede, sin costo alguno, solicitar asistencia lingüística con respecto a esta información llamando al 1-800-USA-LEARN (1-800-872-5327) (TTY: 1-800-877-8339), o envíe un mensaje de correo electrónico a: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov).

**給英語能力有限人士的通知:** 如果您不懂英語, 或者使用英語有困難, 您可以要求獲得向大眾提供的語言協助服務, 幫助您理解教育部資訊。這些語言協助服務均可免費提供。如果您需要有關口譯或筆譯服務的詳細資訊, 請致電 1-800-USA-LEARN (1-800-872-5327) (聽語障人士專線: 1-800-877-8339), 或電郵: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov)。

**Thông báo dành cho những người có khả năng Anh ngữ hạn chế:** Nếu quý vị gặp khó khăn trong việc hiểu Anh ngữ thì quý vị có thể yêu cầu các dịch vụ hỗ trợ ngôn ngữ cho các tin tức của Bộ dành cho công chúng. Các dịch vụ hỗ trợ ngôn ngữ này đều miễn phí. Nếu quý vị muốn biết thêm chi tiết về các dịch vụ phiên dịch hay thông dịch, xin vui lòng gọi số 1-800-USA-LEARN (1-800-872-5327) (TTY: 1-800-877-8339), hoặc email: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov).

**영어 미숙자를 위한 공고:** 영어를 이해하는 데 어려움이 있으신 경우, 교육부 정보 센터에 일반인 대상 언어 지원 서비스를 요청하실 수 있습니다. 이러한 언어 지원 서비스는 무료로 제공됩니다. 통역이나 번역 서비스에 대해 자세한 정보가 필요하신 경우, 전화번호 1-800-USA-LEARN (1-800-872-5327) 또는 청각 장애인용 전화번호 1-800-877-8339 또는 이메일주소 [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov) 으로 연락하시기 바랍니다.

**Paunawa sa mga Taong Limitado ang Kaalaman sa English:** Kung nahhirapan kayong makaintindi ng English, maaari kayong humingi ng tulong ukol dito sa inpormasyon ng Kagawaran mula sa nagbibigay ng serbisyo na pagtulong kaugnay ng wika. Ang serbisyo na pagtulong kaugnay ng wika ay libre. Kung kailangan ninyo ng dagdag na inpormasyon tungkol sa mga serbisyo kaugnay ng pagpapaliwanag o pagsasalin, mangyari lamang tumawag sa 1-800-USA-LEARN (1-800-872-5327) (TTY: 1-800-877-8339), o mag-email sa: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov).

**Уведомление для лиц с ограниченным знанием английского языка:** Если вы испытываете трудности в понимании английского языка, вы можете попросить, чтобы вам предоставили перевод информации, которую Министерство Образования доводит до всеобщего сведения. Этот перевод предоставляется бесплатно. Если вы хотите получить более подробную информацию об услугах устного и письменного перевода, звоните по телефону 1-800-USA-LEARN (1-800-872-5327) (служба для слабослышащих: 1-800-877-8339), или отправьте сообщение по адресу: [Ed.Language.Assistance@ed.gov](mailto:Ed.Language.Assistance@ed.gov).



**U.S. Department of Justice**  
*Civil Rights Division*



**U.S. Department of Education**  
*Office for Civil Rights*

May 13, 2016

Dear Colleague:

Schools across the country strive to create and sustain inclusive, supportive, safe, and nondiscriminatory communities for all students. In recent years, we have received an increasing number of questions from parents, teachers, principals, and school superintendents about civil rights protections for transgender students. Title IX of the Education Amendments of 1972 (Title IX) and its implementing regulations prohibit sex discrimination in educational programs and activities operated by recipients of Federal financial assistance.<sup>1</sup> This prohibition encompasses discrimination based on a student's gender identity, including discrimination based on a student's transgender status. This letter summarizes a school's Title IX obligations regarding transgender students and explains how the U.S. Department of Education (ED) and the U.S. Department of Justice (DOJ) evaluate a school's compliance with these obligations.

ED and DOJ (the Departments) have determined that this letter is *significant guidance*.<sup>2</sup> This guidance does not add requirements to applicable law, but provides information and examples to inform recipients about how the Departments evaluate whether covered entities are complying with their legal obligations. If you have questions or are interested in commenting on this guidance, please contact ED at [ocr@ed.gov](mailto:ocr@ed.gov) or 800-421-3481 (TDD 800-877-8339); or DOJ at [education@usdoj.gov](mailto:education@usdoj.gov) or 877-292-3804 (TTY: 800-514-0383).

Accompanying this letter is a separate document from ED's Office of Elementary and Secondary Education, *Examples of Policies and Emerging Practices for Supporting Transgender Students*. The examples in that document are taken from policies that school districts, state education agencies, and high school athletics associations around the country have adopted to help ensure that transgender students enjoy a supportive and nondiscriminatory school environment. Schools are encouraged to consult that document for practical ways to meet Title IX's requirements.<sup>3</sup>

### **Terminology**

- Gender identity* refers to an individual's internal sense of gender. A person's gender identity may be different from or the same as the person's sex assigned at birth.
- Sex assigned at birth* refers to the sex designation recorded on an infant's birth certificate should such a record be provided at birth.
- Transgender* describes those individuals whose gender identity is different from the sex they were assigned at birth. A *transgender male* is someone who identifies as male but was assigned the sex of female at birth; a *transgender female* is someone who identifies as female but was assigned the sex of male at birth.

- *Gender transition* refers to the process in which transgender individuals begin asserting the sex that corresponds to their gender identity instead of the sex they were assigned at birth. During gender transition, individuals begin to live and identify as the sex consistent with their gender identity and may dress differently, adopt a new name, and use pronouns consistent with their gender identity. Transgender individuals may undergo gender transition at any stage of their lives, and gender transition can happen swiftly or over a long duration of time.

### **Compliance with Title IX**

As a condition of receiving Federal funds, a school agrees that it will not exclude, separate, deny benefits to, or otherwise treat differently on the basis of sex any person in its educational programs or activities unless expressly authorized to do so under Title IX or its implementing regulations.<sup>4</sup> The Departments treat a student's gender identity as the student's sex for purposes of Title IX and its implementing regulations. This means that a school must not treat a transgender student differently from the way it treats other students of the same gender identity. The Departments' interpretation is consistent with courts' and other agencies' interpretations of Federal laws prohibiting sex discrimination.<sup>5</sup>

The Departments interpret Title IX to require that when a student or the student's parent or guardian, as appropriate, notifies the school administration that the student will assert a gender identity that differs from previous representations or records, the school will begin treating the student consistent with the student's gender identity. Under Title IX, there is no medical diagnosis or treatment requirement that students must meet as a prerequisite to being treated consistent with their gender identity.<sup>6</sup> Because transgender students often are unable to obtain identification documents that reflect their gender identity (*e.g.*, due to restrictions imposed by state or local law in their place of birth or residence),<sup>7</sup> requiring students to produce such identification documents in order to treat them consistent with their gender identity may violate Title IX when doing so has the practical effect of limiting or denying students equal access to an educational program or activity.

A school's Title IX obligation to ensure nondiscrimination on the basis of sex requires schools to provide transgender students equal access to educational programs and activities even in circumstances in which other students, parents, or community members raise objections or concerns. As is consistently recognized in civil rights cases, the desire to accommodate others' discomfort cannot justify a policy that singles out and disadvantages a particular class of students.<sup>8</sup>

#### **1. Safe and Nondiscriminatory Environment**

Schools have a responsibility to provide a safe and nondiscriminatory environment for all students, including transgender students. Harassment that targets a student based on gender identity, transgender status, or gender transition is harassment based on sex, and the Departments enforce Title IX accordingly.<sup>9</sup> If sex-based harassment creates a hostile environment, the school must take prompt and effective steps to end the harassment, prevent its recurrence, and, as appropriate, remedy its effects. A school's failure to treat students consistent with their gender identity may create or contribute to a hostile environment in violation of Title IX. For a more detailed discussion of Title IX

requirements related to sex-based harassment, see guidance documents from ED's Office for Civil Rights (OCR) that are specific to this topic.<sup>10</sup>

## **2. Identification Documents, Names, and Pronouns**

Under Title IX, a school must treat students consistent with their gender identity even if their education records or identification documents indicate a different sex. The Departments have resolved Title IX investigations with agreements committing that school staff and contractors will use pronouns and names consistent with a transgender student's gender identity.<sup>11</sup>

## **3. Sex-Segregated Activities and Facilities**

Title IX's implementing regulations permit a school to provide sex-segregated restrooms, locker rooms, shower facilities, housing, and athletic teams, as well as single-sex classes under certain circumstances.<sup>12</sup> When a school provides sex-segregated activities and facilities, transgender students must be allowed to participate in such activities and access such facilities consistent with their gender identity.<sup>13</sup>

- Restrooms and Locker Rooms.** A school may provide separate facilities on the basis of sex, but must allow transgender students access to such facilities consistent with their gender identity.<sup>14</sup> A school may not require transgender students to use facilities inconsistent with their gender identity or to use individual-user facilities when other students are not required to do so. A school may, however, make individual-user options available to all students who voluntarily seek additional privacy.<sup>15</sup>
- Athletics.** Title IX regulations permit a school to operate or sponsor sex-segregated athletics teams when selection for such teams is based upon competitive skill or when the activity involved is a contact sport.<sup>16</sup> A school may not, however, adopt or adhere to requirements that rely on overly broad generalizations or stereotypes about the differences between transgender students and other students of the same sex (*i.e.*, the same gender identity) or others' discomfort with transgender students.<sup>17</sup> Title IX does not prohibit age-appropriate, tailored requirements based on sound, current, and research-based medical knowledge about the impact of the students' participation on the competitive fairness or physical safety of the sport.<sup>18</sup>
- Single-Sex Classes.** Although separating students by sex in classes and activities is generally prohibited, nonvocational elementary and secondary schools may offer nonvocational single-sex classes and extracurricular activities under certain circumstances.<sup>19</sup> When offering such classes and activities, a school must allow transgender students to participate consistent with their gender identity.
- Single-Sex Schools.** Title IX does not apply to the admissions policies of certain educational institutions, including nonvocational elementary and secondary schools, and private undergraduate colleges.<sup>20</sup> Those schools are therefore permitted under Title IX to set their own

sex-based admissions policies. Nothing in Title IX prohibits a private undergraduate women's college from admitting transgender women if it so chooses.

- **Social Fraternities and Sororities.** Title IX does not apply to the membership practices of social fraternities and sororities.<sup>21</sup> Those organizations are therefore permitted under Title IX to set their own policies regarding the sex, including gender identity, of their members. Nothing in Title IX prohibits a fraternity from admitting transgender men or a sorority from admitting transgender women if it so chooses.
- **Housing and Overnight Accommodations.** Title IX allows a school to provide separate housing on the basis of sex.<sup>22</sup> But a school must allow transgender students to access housing consistent with their gender identity and may not require transgender students to stay in single-occupancy accommodations or to disclose personal information when not required of other students. Nothing in Title IX prohibits a school from honoring a student's voluntary request for single-occupancy accommodations if it so chooses.<sup>23</sup>
- **Other Sex-Specific Activities and Rules.** Unless expressly authorized by Title IX or its implementing regulations, a school may not segregate or otherwise distinguish students on the basis of their sex, including gender identity, in any school activities or the application of any school rule. Likewise, a school may not discipline students or exclude them from participating in activities for appearing or behaving in a manner that is consistent with their gender identity or that does not conform to stereotypical notions of masculinity or femininity (*e.g.*, in yearbook photographs, at school dances, or at graduation ceremonies).<sup>24</sup>

#### **4. Privacy and Education Records**

Protecting transgender students' privacy is critical to ensuring they are treated consistent with their gender identity. The Departments may find a Title IX violation when a school limits students' educational rights or opportunities by failing to take reasonable steps to protect students' privacy related to their transgender status, including their birth name or sex assigned at birth.<sup>25</sup> Nonconsensual disclosure of personally identifiable information (PII), such as a student's birth name or sex assigned at birth, could be harmful to or invade the privacy of transgender students and may also violate the Family Educational Rights and Privacy Act (FERPA).<sup>26</sup> A school may maintain records with this information, but such records should be kept confidential.

- **Disclosure of Personally Identifiable Information from Education Records.** FERPA generally prevents the nonconsensual disclosure of PII from a student's education records; one exception is that records may be disclosed to individual school personnel who have been determined to have a legitimate educational interest in the information.<sup>27</sup> Even when a student has disclosed the student's transgender status to some members of the school community, schools may not rely on this FERPA exception to disclose PII from education records to other school personnel who do not have a legitimate educational interest in the information. Inappropriately disclosing (or requiring students or their parents to disclose) PII from education records to the school community may

violate FERPA and interfere with transgender students' right under Title IX to be treated consistent with their gender identity.

- **Disclosure of Directory Information.** Under FERPA's implementing regulations, a school may disclose appropriately designated directory information from a student's education record if disclosure would not generally be considered harmful or an invasion of privacy.<sup>28</sup> Directory information may include a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance.<sup>29</sup> School officials may not designate students' sex, including transgender status, as directory information because doing so could be harmful or an invasion of privacy.<sup>30</sup> A school also must allow eligible students (*i.e.*, students who have reached 18 years of age or are attending a postsecondary institution) or parents, as appropriate, a reasonable amount of time to request that the school not disclose a student's directory information.<sup>31</sup>
- **Amendment or Correction of Education Records.** A school may receive requests to correct a student's education records to make them consistent with the student's gender identity. Updating a transgender student's education records to reflect the student's gender identity and new name will help protect privacy and ensure personnel consistently use appropriate names and pronouns.
  - Under FERPA, a school must consider the request of an eligible student or parent to amend information in the student's education records that is inaccurate, misleading, or in violation of the student's privacy rights.<sup>32</sup> If the school does not amend the record, it must inform the requestor of its decision and of the right to a hearing. If, after the hearing, the school does not amend the record, it must inform the requestor of the right to insert a statement in the record with the requestor's comments on the contested information, a statement that the requestor disagrees with the hearing decision, or both. That statement must be disclosed whenever the record to which the statement relates is disclosed.<sup>33</sup>
  - Under Title IX, a school must respond to a request to amend information related to a student's transgender status consistent with its general practices for amending other students' records.<sup>34</sup> If a student or parent complains about the school's handling of such a request, the school must promptly and equitably resolve the complaint under the school's Title IX grievance procedures.<sup>35</sup>

\* \* \*

We appreciate the work that many schools, state agencies, and other organizations have undertaken to make educational programs and activities welcoming, safe, and inclusive for all students.

Sincerely,

/s/

Catherine E. Lhamon  
Assistant Secretary for Civil Rights  
U.S. Department of Education

/s/

Vanita Gupta  
Principal Deputy Assistant Attorney General for Civil Rights  
U.S. Department of Justice

<sup>1</sup> 20 U.S.C. §§ 1681–1688; 34 C.F.R. Pt. 106; 28 C.F.R. Pt. 54. In this letter, the term *schools* refers to recipients of Federal financial assistance at all educational levels, including school districts, colleges, and universities. An educational institution that is controlled by a religious organization is exempt from Title IX to the extent that compliance would not be consistent with the religious tenets of such organization. 20 U.S.C. § 1681(a)(3); 34 C.F.R. § 106.12(a).

<sup>2</sup> Office of Management and Budget, Final Bulletin for Agency Good Guidance Practices, 72 Fed. Reg. 3432 (Jan. 25, 2007), [www.whitehouse.gov/sites/default/files/omb/fedreg/2007/012507\\_good\\_guidance.pdf](http://www.whitehouse.gov/sites/default/files/omb/fedreg/2007/012507_good_guidance.pdf).

<sup>3</sup> ED, *Examples of Policies and Emerging Practices for Supporting Transgender Students* (May 13, 2016), [www.ed.gov/oese/oshs/emergingpractices.pdf](http://www.ed.gov/oese/oshs/emergingpractices.pdf). OCR also posts many of its resolution agreements in cases involving transgender students online at [www.ed.gov/ocr/lgbt.html](http://www.ed.gov/ocr/lgbt.html). While these agreements address fact-specific cases, and therefore do not state general policy, they identify examples of ways OCR and recipients have resolved some issues addressed in this guidance.

<sup>4</sup> 34 C.F.R. §§ 106.4, 106.31(a). For simplicity, this letter cites only to ED’s Title IX regulations. DOJ has also promulgated Title IX regulations. See 28 C.F.R. Pt. 54. For purposes of how the Title IX regulations at issue in this guidance apply to transgender individuals, DOJ interprets its regulations similarly to ED. State and local rules cannot limit or override the requirements of Federal laws. See 34 C.F.R. § 106.6(b).

<sup>5</sup> See, e.g., *Price Waterhouse v. Hopkins*, 490 U.S. 228 (1989); *Oncale v. Sundowner Offshore Servs. Inc.*, 523 U.S. 75, 79 (1998); *G.G. v. Gloucester Cnty. Sch. Bd.*, No. 15-2056, 2016 WL 1567467, at \*8 (4th Cir. Apr. 19, 2016); *Glenn v. Brumby*, 663 F.3d 1312, 1317 (11th Cir. 2011); *Smith v. City of Salem*, 378 F.3d 566, 572-75 (6th Cir. 2004); *Rosa v. Park W. Bank & Trust Co.*, 214 F.3d 213, 215–16 (1st Cir. 2000); *Schwenk v. Hartford*, 204 F.3d 1187, 1201–02 (9th Cir. 2000); *Schroer v. Billington*, 577 F. Supp. 2d 293, 306-08 (D.D.C. 2008); *Macy v. Dep’t of Justice*, Appeal No. 012012082 (U.S. Equal Emp’t Opportunity Comm’n Apr. 20, 2012). See also U.S. Dep’t of Labor (USDOL), Training and Employment Guidance Letter No. 37-14, *Update on Complying with Nondiscrimination Requirements: Discrimination Based on Gender Identity, Gender Expression and Sex Stereotyping are Prohibited Forms of Sex Discrimination in the Workforce Development System* (2015), [wdr.doleta.gov/directives/attach/TEGL/TEGL\\_37-14.pdf](http://wdr.doleta.gov/directives/attach/TEGL/TEGL_37-14.pdf); USDOL, Job Corps, Directive: Job Corps Program Instruction Notice No. 14-31, *Ensuring Equal Access for Transgender Applicants and Students to the Job Corps Program* (May 1, 2015), [https://supportservices.jobcorps.gov/Program%20Instruction%20Notices/pi\\_14\\_31.pdf](https://supportservices.jobcorps.gov/Program%20Instruction%20Notices/pi_14_31.pdf); DOJ, Memorandum from the Attorney General, *Treatment of Transgender Employment Discrimination Claims Under Title VII of the Civil Rights Act of 1964* (2014), [www.justice.gov/sites/default/files/opa/press-releases/attachments/2014/12/18/title\\_vii\\_memo.pdf](http://www.justice.gov/sites/default/files/opa/press-releases/attachments/2014/12/18/title_vii_memo.pdf); USDOL, Office of Federal Contract Compliance Programs, Directive 2014-02, *Gender Identity and Sex Discrimination* (2014), [www.dol.gov/ofccp/regs/compliance/directives/dir2014\\_02.html](http://www.dol.gov/ofccp/regs/compliance/directives/dir2014_02.html).

<sup>6</sup> See *Lusardi v. Dep’t of the Army*, Appeal No. 0120133395 at 9 (U.S. Equal Emp’t Opportunity Comm’n Apr. 1, 2015) (“An agency may not condition access to facilities—or to other terms, conditions, or privileges of employment—on the completion of certain medical steps that the agency itself has unilaterally determined will somehow prove the bona fides of the individual’s gender identity.”).

<sup>7</sup> See *G.G.*, 2016 WL 1567467, at \*1 n.1 (noting that medical authorities “do not permit sex reassignment surgery for persons who are under the legal age of majority”).

<sup>8</sup> 34 C.F.R. § 106.31(b)(4); see *G.G.*, 2016 WL 1567467, at \*8 & n.10 (affirming that individuals have legitimate and important privacy interests and noting that these interests do not inherently conflict with nondiscrimination principles); *Cruzan v. Special Sch. Dist. No. 1*, 294 F.3d 981, 984 (8th Cir. 2002) (rejecting claim that allowing a transgender woman “merely [to be] present in the women’s faculty restroom” created a hostile environment); *Glenn*, 663 F.3d at 1321 (defendant’s proffered justification that “other women might object to [the plaintiff]’s restroom use” was “wholly irrelevant”). See also *Palmore v. Sidoti*, 466 U.S. 429, 433 (1984) (“Private biases may be outside the reach of the law, but the law cannot, directly or indirectly, give them effect.”); *City of Cleburne v. Cleburne Living Ctr.*, 473 U.S. 432, 448 (1985) (recognizing that “mere negative attitudes, or fear . . . are not permissible bases for” government action).

<sup>9</sup> See, e.g., Resolution Agreement, *In re Downey Unified Sch. Dist., CA*, OCR Case No. 09-12-1095, (Oct. 8, 2014), [www.ed.gov/documents/press-releases/downey-school-district-agreement.pdf](http://www.ed.gov/documents/press-releases/downey-school-district-agreement.pdf) (agreement to address harassment of transgender student, including allegations that peers continued to call her by her former name, shared pictures of her prior to her transition, and frequently asked questions about her anatomy and sexuality); Consent Decree, *Doe v. Anoka-Hennepin Sch. Dist. No. 11, MN* (D. Minn. Mar. 1, 2012), [www.ed.gov/ocr/docs/investigations/05115901-d.pdf](http://www.ed.gov/ocr/docs/investigations/05115901-d.pdf) (consent decree to address sex-based harassment, including based on nonconformity with gender stereotypes); Resolution Agreement, *In re Tehachapi Unified Sch. Dist., CA*, OCR Case No. 09-11-1031 (June 30, 2011), [www.ed.gov/ocr/docs/investigations/09111031-b.pdf](http://www.ed.gov/ocr/docs/investigations/09111031-b.pdf) (agreement to address sexual and gender-based harassment, including harassment based on nonconformity with gender stereotypes). See also *Lusardi*, Appeal No. 0120133395, at \*15 (“Persistent failure to use the employee’s correct name and pronoun may constitute unlawful, sex-based harassment if such conduct is either severe or pervasive enough to create a hostile work environment”).

<sup>10</sup> See, e.g., OCR, *Revised Sexual Harassment Guidance: Harassment of Students by School Employees, Other Students, or Third Parties* (2001), [www.ed.gov/ocr/docs/shguide.pdf](http://www.ed.gov/ocr/docs/shguide.pdf); OCR, *Dear Colleague Letter: Harassment and Bullying* (Oct. 26, 2010), [www.ed.gov/ocr/letters/colleague-201010.pdf](http://www.ed.gov/ocr/letters/colleague-201010.pdf); OCR, *Dear Colleague Letter: Sexual Violence* (Apr. 4, 2011), [www.ed.gov/ocr/letters/colleague-201104.pdf](http://www.ed.gov/ocr/letters/colleague-201104.pdf); OCR, *Questions and Answers on Title IX and Sexual Violence* (Apr. 29, 2014), [www.ed.gov/ocr/docs/qa-201404-title-ix.pdf](http://www.ed.gov/ocr/docs/qa-201404-title-ix.pdf).

<sup>11</sup> See, e.g., Resolution Agreement, *In re Cent. Piedmont Cmty. Coll., NC*, OCR Case No. 11-14-2265 (Aug. 13, 2015), [www.ed.gov/ocr/docs/investigations/more/11142265-b.pdf](http://www.ed.gov/ocr/docs/investigations/more/11142265-b.pdf) (agreement to use a transgender student’s preferred name and gender and change the student’s official record to reflect a name change).

<sup>12</sup> 34 C.F.R. §§ 106.32, 106.33, 106.34, 106.41(b).

<sup>13</sup> See 34 C.F.R. § 106.31.

<sup>14</sup> 34 C.F.R. § 106.33.

<sup>15</sup> See, e.g., Resolution Agreement, *In re Township High Sch. Dist. 211, IL*, OCR Case No. 05-14-1055 (Dec. 2, 2015), [www.ed.gov/ocr/docs/investigations/more/05141055-b.pdf](http://www.ed.gov/ocr/docs/investigations/more/05141055-b.pdf) (agreement to provide any student who requests additional privacy “access to a reasonable alternative, such as assignment of a student locker in near proximity to the office of a teacher or coach; use of another private area (such as a restroom stall) within the public area; use of a nearby private area (such as a single-use facility); or a separate schedule of use.”).

<sup>16</sup> 34 C.F.R. § 106.41(b). Nothing in Title IX prohibits schools from offering coeducational athletic opportunities.

<sup>17</sup> 34 C.F.R. § 106.6(b), (c). An interscholastic athletic association is subject to Title IX if (1) the association receives Federal financial assistance or (2) its members are recipients of Federal financial assistance and have ceded controlling authority over portions of their athletic program to the association. Where an athletic association is covered by Title IX, a school’s obligations regarding transgender athletes apply with equal force to the association.

<sup>18</sup> The National Collegiate Athletic Association (NCAA), for example, reported that in developing its policy for participation by transgender students in college athletics, it consulted with medical experts, athletics officials, affected students, and a consensus report entitled *On the Team: Equal Opportunity for Transgender Student Athletes* (2010) by Dr. Pat Griffin & Helen J. Carroll (*On the Team*), [https://www.ncaa.org/sites/default/files/NCLR\\_TransStudentAthlete%2B\(2\).pdf](https://www.ncaa.org/sites/default/files/NCLR_TransStudentAthlete%2B(2).pdf). See NCAA Office of Inclusion, *NCAA Inclusion of Transgender Student-Athletes 2*, 30-31 (2011), [https://www.ncaa.org/sites/default/files/Transgender\\_Handbook\\_2011\\_Final.pdf](https://www.ncaa.org/sites/default/files/Transgender_Handbook_2011_Final.pdf) (citing *On the Team*). The *On the Team* report noted that policies that may be appropriate at the college level may “be unfair and too complicated for [the high school] level of competition.” *On the Team* at 26. After engaging in similar processes, some state interscholastic athletics associations have adopted policies for participation by transgender students in high school athletics that they determined were age-appropriate.

<sup>19</sup> 34 C.F.R. § 106.34(a), (b). Schools may also separate students by sex in physical education classes during participation in contact sports. *Id.* § 106.34(a)(1).

<sup>20</sup> 20 U.S.C. § 1681(a)(1); 34 C.F.R. § 106.15(d); 34 C.F.R. § 106.34(c) (a recipient may offer a single-sex public nonvocational elementary and secondary school so long as it provides students of the excluded sex a “substantially

---

equal single-sex school or coeducational school”).

<sup>21</sup> 20 U.S.C. § 1681(a)(6)(A); 34 C.F.R. § 106.14(a).

<sup>22</sup> 20 U.S.C. § 1686; 34 C.F.R. § 106.32.

<sup>23</sup> See, e.g., Resolution Agreement, *In re Arcadia Unified Sch. Dist., CA*, OCR Case No. 09-12-1020, DOJ Case No. 169-12C-70, (July 24, 2013), [www.justice.gov/sites/default/files/crt/legacy/2013/07/26/arcadiaagree.pdf](http://www.justice.gov/sites/default/files/crt/legacy/2013/07/26/arcadiaagree.pdf) (agreement to provide access to single-sex overnight events consistent with students’ gender identity, but allowing students to request access to private facilities).

<sup>24</sup> See 34 C.F.R. §§ 106.31(a), 106.31(b)(4). See also, *In re Downey Unified Sch. Dist., CA*, supra n. 9; *In re Cent. Piedmont Cmty. Coll., NC*, supra n. 11.

<sup>25</sup> 34 C.F.R. § 106.31(b)(7).

<sup>26</sup> 20 U.S.C. § 1232g; 34 C.F.R. Part 99. FERPA is administered by ED’s Family Policy Compliance Office (FPCO). Additional information about FERPA and FPCO is available at [www.ed.gov/fpc](http://www.ed.gov/fpc).

<sup>27</sup> 20 U.S.C. § 1232g(b)(1)(A); 34 C.F.R. § 99.31(a)(1).

<sup>28</sup> 34 C.F.R. §§ 99.3, 99.31(a)(11), 99.37.

<sup>29</sup> 20 U.S.C. § 1232g(a)(5)(A); 34 C.F.R. § 99.3.

<sup>30</sup> Letter from FPCO to Institutions of Postsecondary Education 3 (Sept. 2009), [www.ed.gov/policy/gen/guid/fpc/doc/censuslettertohighered091609.pdf](http://www.ed.gov/policy/gen/guid/fpc/doc/censuslettertohighered091609.pdf).

<sup>31</sup> 20 U.S.C. § 1232g(a)(5)(B); 34 C.F.R. §§ 99.3, 99.37(a)(3).

<sup>32</sup> 34 C.F.R. § 99.20.

<sup>33</sup> 34 C.F.R. §§ 99.20-99.22.

<sup>34</sup> See 34 C.F.R. § 106.31(b)(4).

<sup>35</sup> 34 C.F.R. § 106.8(b).

# **EXHIBIT 7**

## **DECLARATION OF TIM KENNEY**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943

**Declaration of Tim Kenney**

I, Tim Kenney, declare as follows:

1. My name is Tim Kenney. I am the principal of Shorewood High School in the Shorewood School District in Milwaukee, Wisconsin. I am in my fourth year as principal of Shorewood High School and have worked in the district for 20 years as a teacher, assistant principal, and principal.

2. I was principal of Shorewood High School, the only high school in the Shorewood School District, when our transgender inclusive policy was adopted in February 2014, and was responsible for the policy's implementation at Shorewood High school. As the policy was being drafted, I worked closely with the school board's policy committee because I had at least one transgender student at my school at the time and wanted to make sure that the policy would ensure that transgender students have a positive experience in school.

3. Our district's adoption of the policy was very public and received national media attention. Nevertheless, we have received no pushback or negative feedback from the community or from the students. If anything, we expected a bit of pushback from non-transgender students in our district, but we received none.

4. Prior to the 2014-2015 schoolyear, I introduced the policy to our high school staff at an in-service meeting. Frankly, the staff had a lot of angst around the policy's implementation. Some staff said that we were releasing the floodgates and opening a can of worms. Others said that boys would use this as an opportunity to go into the girls bathrooms. During the meeting, we talked through all of the staff's concerns and addressed the practicalities of transgender students using the restrooms that match their gender. The staff realized that having transgender students use the bathroom does not in any way decrease other students' privacy in the bathrooms. We also reassured staff that we would address any behavioral issues as they arose throughout the year. The focus of the meeting was helping the staff to understand that the policy was not going to be a big deal.

5. Implementation of the policy has been completely positive. We have been aware of three transgender students at our high school since the policy's implementation two years ago. Our transgender students are thriving at school and so are all of our students. We have had no issues in the bathrooms and all of the fears voiced by staff surrounding the policy have been unfounded. We have not had boys pretending to be girls to get into the girls bathrooms. We have had no concerns from students around privacy, i.e., no requests from students to use alternative bathrooms because they are uncomfortable sharing a bathroom with transgender students. I anticipated that any disruption would come from other students bullying the

transgender students, but because we have created an inclusive environment for our diverse student body and modeled equal treatment for everyone, this has not been an issue.

6. An inclusive policy is important because it does not single transgender students out for treatment that is different than their peers. Transgender students do not want extra attention; they are just trying to fit in like everyone else. They just want to use the bathroom. The only thing students should be worried about is their education and I do not want transgender students distracted about which bathroom they should use or not use. The policy is powerful in what it does not do. It does not treat any students differently and does not draw extra attention to transgender students. That is what makes the policy so effective and easy to implement.

7. Before working on our policy and before having our school's first transgender student that was known to us, this issue was completely new to me. But as an educator, I come from a perspective that I need to meet each student where they are and I need to give that student what they need. I remember looking in the mirror one day and thinking that I am 100% certain that I am male. I realized that my transgender student must have the same thought when he looks in the mirror and that we are very much the same. If you can get past your own discomfort and lack of familiarity, it is much easier to begin to treat people equally.

8. Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 8, 2016

By:

  
Tim Kenney

# **EXHIBIT 8**

## **DECLARATION OF BRYAN DAVIS, Ph.D.**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943

**Declaration of Bryan Davis, Ph.D.**

I, Bryan Davis, declare as follows:

1. My name is Bryan Davis, Ph.D. I am Superintendent of Shorewood School District, which serves approximately 2,200 students from kindergarten through 12th grade. The Shorewood School District is located in Milwaukee County, Wisconsin. I have 20 years of experience in the field of education, including six years as a superintendent and four years as a high school principal. I hold a Ph.D. in Urban Education from the University of Wisconsin – Milwaukee.

2. I have been Superintendent of Shorewood School District for approximately one year. Prior to being Superintendent of Shorewood School District, I was the Superintendent of Columbus School District in Columbus, Wisconsin, for five years.

3. In my previous tenure as Superintendent of Columbus School District, I oversaw the adoption and implementation of an inclusive athletic policy for transgender students that

allows students to participate in sports consistent with their gender identity. Though we were not aware of any transgender students in the Columbus district at the time that we adopted the policy, we decided to move forward with the policy because we saw the policy as an important way to make sure transgender students feel safe getting their rightful education and to send a message that our district is welcoming and inclusive to all students. It was important to me not only that our students would feel safe and welcome, but also that visiting students and athletes would feel the same way

4. Because I did not have any previous experience with transgender students or policies prior to the adoption of the policy, we were acting on faith to a certain extent that our policy would yield that best outcome for all students. The implementation has been very positive and the school district has received no complaints from students, staff, or the community about the policy.

5. Going through the process of adopting and implementing the policy also deepened my understanding of the hurdles and barriers that transgender students face at schools. Because we knew that not everyone would have an understanding of transgender students' needs, it was important to have a policy in place for everyone to follow that would guarantee equal treatment for all students. Having a policy in place also ensures that schools are not in a position of having to adopt impromptu policies when a situation arises.

6. Shorewood School District's transgender-inclusive policy, Policy 411 – Equal Educational Opportunities and Guideline 411 – Nondiscrimination Related to Students Who Are Transgender and Students Nonconforming to Gender Role Stereotypes, was adopted by Shorewood's school board on February 25, 2014, prior to my tenure as Superintendent. Shorewood School District's policy prohibits all forms of discrimination, harassment and

bullying against transgender and gender nonconforming students, allows students to designate their names and gender pronouns to be used and respected to school personnel, and allows transgender students to use bathrooms that match their gender identity. Implementation of the transgender-inclusive policy over the past two years has been extremely smooth. We have found that a clear, inclusive policy actually minimizes the chances of disruption by sending a clear message to the entire school community that we respect every student's gender identity and will treat everyone equally. When we model the message that we are accepting and inclusive of all of our students, our students are then more likely to be accepting and inclusive of each other.

7. Since our inclusive policy was implemented two years ago, we have known of three transgender students at our high school. We have had no complaints from transgender students, from other students, from any staff, or from any parents on the policy. We have received no pushback from the community. In fact, we have had alumni come back to the district and thank us for creating such an inclusive environment at their alma mater.

8. While we have not had any students object to the transgender policy, if a student did show discomfort about sharing a restroom with transgender students, we would offer that student the option of using a single-user restroom. In my professional judgment, however, I think it would be inappropriate to single out the transgender students by forcing them into a restroom separate from their peers. That would invite harassment and bullying against transgender students by sending the message that they should be treated differently.

9. I have been contacted by administrators at other school districts in Wisconsin who are trying to figure out their policies with respect to transgender students. I reassure them that a policy that allows transgender students to be treated consistent with their gender identity in all respects is easy to implement and adds to an inclusive and welcoming environment.

10. Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 8, 2016

By:   
Bryan Davis

# **EXHIBIT 9**

## **DECLARATION OF JUDY CHIASSON, Ph.D.**

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WISCONSIN**

ASHTON WHITAKER, a minor, by his  
mother and next friend, MELISSA  
WHITAKER,

Plaintiff,

v.

KENOSHA UNIFIED SCHOOL DISTRICT  
NO. 1 BOARD OF EDUCATION and SUE  
SAVAGLIO-JARVIS, in her official capacity  
as Superintendent of the Kenosha Unified  
School District No. 1,

Defendants.

Civ. Action No. 2:16-cv-00943

**Declaration of Judy Chiasson, Ph.D.**

I, Judy Chiasson, declare as follows:

1. My name is Judy Chiasson, Ph.D. I have been the Program Coordinator for the Office of Human Relations, Diversity, and Equity in the Los Angeles Unified School District (“LAUSD”) since 2005. The Office of Human Relations, Diversity, and Equity provides support services for fostering a safe and respectful district, school and community culture so that all students and staff can lead safe, purposeful and academically successful lives. I hold a Ph.D. in Urban Education from Claremont Graduate University. A true and correct copy of my C.V. is attached to this declaration as Exhibit A.

2. LAUSD is the second largest school district in the country, with 732,000 students attending more than 1,200 schools. According to a 2014 survey conducted by the Centers for Disease Control (CDC), approximately 1% of LAUSD secondary students, self-identify as transgender.

3. As Program Coordinator for the Office of Human Relations, Diversity and Equity, I am responsible for designing, implementing, and evaluating district-wide programs to reduce bullying, bias, and intergroup conflict. I oversee the design, adoption and delivery of evidence-based trainings to end bias, bullying, sexual harassment, and hazing among students and adults. I have developed resources for students, staff and parents on gender identity, student misconduct, and bullying. I also assess the schools' safety climate and conduct needs assessment by collecting and analyzing qualitative and quantitative data.

4. I have provided expert testimony before the California Senate and Assembly in support of LAUSD's positions on critical legislation, including the School Success and Opportunity Act of 2013 (AB 1266), a California state law clarifying that transgender students are entitled to use facilities consistent with their gender identity, and Seth's Law of 2012 (AB 9), a bullying prevention law based on gender identity, gender expression, and sexual orientation. I frequently represent LAUSD in print, radio and television media outlets on matters of inclusive education, bullying, and LGBTQ concerns. I have conducted over 50 media interviews on transgender inclusive policies and practices.

5. Prior to working as Program Coordinator in the Office for Human Relations, Diversity and Equity, I was the Project 10 Specialist in the Office of General Counsel's Educational Equity and Compliance unit at LAUSD. In that role, I responded to incidents of bias, discrimination, or access based on protected categories. Two separate instances of bias involving transgender students came to my attention, which prompted us to realize that LAUSD did not have formal guidelines in place for transgender students. We also noticed that our transgender students were having challenges at school, that they were disengaged from their classes and peers, and that their academics were suffering.

6. I was the primary author of LAUSD's first district-wide memorandum in 2004 that called for fully recognizing students' gender identity. In 2005, LAUSD adopted a formal policy requiring that transgender students be treated consistent with their gender identity in all aspects of their educational experience. The formal policy strongly recommended that schools grant transgender students full access to facilities that corresponded with their affirmed identity. Based on schools' overwhelming success in implementing that recommendation, we updated our policy in 2011 to require that transgender students have full access to facilities that match their gender identity. We have updated our policies for transgender students regularly to make them clearer and stronger. We last updated the policy in February 2014. A true and correct copy of LAUSD's current transgender student policy is attached as Exhibit B.

7. While we were initially drafting supportive guidance on transgender students, we definitely had our concerns. We asked ourselves whether we were creating unanticipated problems by adopting an inclusive policy. Ultimately, though, we decided that as educators, we needed to manage our fears, and show our transgender students the dignity and respect that they deserve. We would not require someone with a physical disability to use a separate facility because of any discomfort expressed by the staff or other students. This is the same thing. Our job as educators is to give our students the best academic opportunity we can provide, and we should never step back from that charge because of our own fears or discomfort.

8. Since LAUSD's formal policy on transgender students was first implemented, I have overseen the implementation of LAUSD's transgender-inclusive policy and none of our concerns have materialized. Our transgender students use restrooms and locker rooms, participate in gym class, play on sports teams and attend overnight field trips in a way that corresponds with their gender identity. We treat our transgender students – our transgender boys

and girls – like any other boys and girls, with the same rights, responsibilities, rules, and obligations. In the 11 years that we have had our policy, we have not had any problems with its implementation.

9. I describe our transgender-inclusive policy as solving problems, rather than creating them. Everybody is more comfortable. Transgender boys and girls want to be recognized and treated like all other boys and girls. Forcing a transgender boy to use the female facilities would be extremely uncomfortable for all parties involved. For example, we had a new student who was a transgender boy. He was using the female facilities, incorrectly assuming that he would be required to do so. It was equally uncomfortable for him to use the girls' facilities as it was for the girls in those facilities. When the administration learned of the situation, they told the young man that he could use the boys' facilities. Everyone was relieved by this solution.

10. Our transgender students use the bathrooms for the same reasons that all other students use the restroom: to do their business, fix their hair and make-up, and gossip with friends. Going to the bathroom as a group is very normative behavior for teenagers. We want our transgender students to be fully integrated into the community. We do not want our transgender students to be stigmatized and not have full access to school spaces and social opportunities.

11. While some transgender students request to use single-user, gender-neutral restrooms because they feel more comfortable there, more often transgender students want to be able to blend in just like any other boy or girl, using the same facilities as everyone else. We allow any student – not just transgender students – access to single-user facilities if they desire additional privacy for any reason. But it is important not to force any student, including transgender students, to use a facility separate from everyone else, which would send the

stigmatizing message that they are different from their peers and need to be kept apart from other students.

12. There have been no instances of disruption caused by the policy. Disruption occurs when people anticipate that a transgender-inclusive policy is going to be problematic. People's fears – frankly, primarily adult fears – are what are disruptive. Our experience has been that the fears of the adults have not played out. I have yet to be called into a situation to respond to an actual incident; I have only had to respond to fears, and the fears are unfounded.

13. One fear is that a person will pretend to be transgender to be predatory. But being transgender is persistent and consistent throughout the day. A student is transgender in all of their classes, outside of their classes and in their relationships at school. I have never had someone pretend to be transgender for nefarious reasons. It is implausible to think that a presumably male student is going to come to school for months on end, wear female attire, present as female to all of his friends and teachers, just so he can enter a female restroom. In the rare instances that students enter an inappropriate restroom, LAUSD addresses the conduct in the same way we would address other disciplinary issues.

14. Our policy treats all students with the dignity they deserve. A school should have an affirming environment where all students feel they are welcomed members of the community. Schools also need to model the respect that they want the students to demonstrate. In my experience, there's a strong, causal relationship between bias and bullying and bias is highly predictive of bullying. If our schools' actions reflect bias towards a group of students, we are going to see an increase in bullying of those students. On the other hand, when schools model support, the students emulate the supportive behavior and treat each other with greater respect.

15. In 2013, California's legislature passed the School Success and Opportunity Act (AB 1266), a law that clarifies that transgender students must be allowed to use facilities that match their identity. A true and correct copy of AB 1266 is attached as Exhibit C. Since that law took effect, school districts in California and across the country have contacted me to ask for advice about implementing their own transgender-inclusive policies. Those administrators often raise the same questions and fears we initially faced. However, I have learned that those districts have had the same success we have, and none of their fears materialized. On the contrary, those supportive policies have both improved the educational experience for transgender students and created a more positive and inclusive school climate for everyone.

16. Pursuant to 28. U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on August 8, 2016

By:   
Lady Chiasson

# **EXHIBIT**

## **A**

## JUDY CHIASSON, PH.D.

---

4527 Katherine Avenue • Sherman Oaks, CA 91423 • drjchiasson@gmail.com • 818.784.8676

### EDUCATION

**Doctor of Philosophy in Urban Education, 2004**

*Claremont Graduate University, Claremont, CA*

**Dissertation Topic:** *Lifting the Veil of Heterosexism*, quantitative study on the efficacy of LGBT bias reduction workshops in post-secondary institutions.

Dissertation Committee: Daryl Smith, Lourdes Argüelles, David Drew

**Master of Science in Educational Therapy, 1995**

*College for Developmental Studies, Los Angeles, CA*

**Bachelor of Science in Special Education 1990**

*Florida International University, Miami, FL*

### UNIVERSITY POSITIONS, Adjunct Faculty

Areas of strong experience: building capacity for culturally rich, relevant, responsive and affirming collaborations built on the intersecting denials of birth and life experiences; change leadership in educational settings.

**California State University Los Angeles**, Charter School of Graduate Educational Leadership, EDAD 536A. Pluralism, Collaboration and Social Justice 2007-2010, 2013, 2015

EDHI 605C. Laboratories of Practice: Community-Based Research with Community Mentor, 2010  
Precept for Masters of Social Work Interns, 2007

**University of California Los Angeles Extension, 2015**

EDUC 437.73. Advanced Culture and Inclusion

**University of Southern California**, Rossier School of Education

Masters of Art in Teaching 2010 – 2011

EDUC 519. Human Differences

**Argosy University, Los Angeles**, Doctoral Program in Education, 2008 - 2011

E7233. Organizational Communication

E703. Leading and Managing Change in a Diverse Society

E713. Issues in Higher Education

R7036. Program Evaluation Methods

**Mount Saint Mary's College**, Los Angeles, Department of Education, 2007 - 2008

EDU 252. Diversity and Schools

### Dissertation Committee Member, Doctorate in Education

**California State University Northridge**

Richard Ungerhill, 2013. *FAIR Education Act: Secondary Teachers Respond to Inclusive Curriculum*

**California State University Los Angeles**

Eric Gates, 2012. *Instrumental Case Study of an After School High School Physical Activity Program*

Dickson Perey, 2015. *Understanding Identity and Advocacy Stances Among School Counselors and Gay Fathers Raising School-Aged Children.*

**California State University Fullerton**

Fausto Barragán Jr., 2013. *The Exploration of Information about the Knowledge of LGBT Issues Among Elementary School Principals*

**PROFESSIONAL EXPERIENCE, Los Angeles Unified School District**

Skilled in Appreciative Inquiry, Mediation, Conflict Resolution, Restorative Practices, Communication Skills, Media Relations. Work effectively to build collaboration among multiple stakeholders. Excellent written and oral communication. Strong research and evaluation skills.

**School Operations, Human Relations, Diversity & Equity, Coordinator, 2006 to present**

Part of a team responsible for designing, implementing and evaluating District-wide programs to reduce bullying, bias, hazing and intergroup conflict, resulting in improved staff relations, student achievement and reduction in school violence and District liability.

Leverage expertise in District policies, legal mandates, and bias reduction to ensure that schools are safe, affirming, and violence-free.

Conduct small and large-group trainings for administrators, teachers, counselors and law enforcement about practical, legal and ethical guidelines of bias, discrimination, and bullying, thereby building capacity among leadership staff.

Critical responder in high impact incidents (intergroup conflicts, school violence, deaths due to natural and unnatural causes). Triage operational and mental health interventions for students, staff, parents and community members, thereby restoring school operations following critical incidents, prepare internal briefings and respond to media.

Represent District as primary respondent and author in high profile audits:

- Los Angeles County Civil Grand Jury Performance Audit of the School Discipline and Law Enforcement Policies at Los Angeles Unified School District, 2014
- California State Audit School Safety and Non Discrimination Laws, 2013

***Implementation Methods:***

- Spearhead district's mandate to end bias, bullying, sexual harassment and hazing among students and adults. Oversee the design, acquisition, and delivery of trainings that are evidence based to increase positive school and work engagement.
- Developed resources for students, staff, and parents on sexual orientation, gender identity, sexual harassment, student misconduct, bully, cyber bullying, sex trafficking, religious intolerance, and child abuse.
- Monitor daily incidents to coordinate delivery of resources in critical incidents such as power outages, evacuations, shelter in place, and violence.
- Mediate conflicts between administrators, students, parents, and school/community stakeholders to build cohesive school and work environments.
- Expert testimony before the California Senate and Assembly in support of the District's positions on critical legislation - FAIR Education Act of 2011 (SB 8); Proposition 8, Marriage Equality; Seth's Law of 2012 (AB 9); School Success and Opportunity Act of 2013 (SB1266).
- Represent the school district in numerous print, radio, and television media outlets on matters of inclusive education, bullying, child abuse, LGBTQ concerns, school unrest, intergroup conflicts, social media, sex trafficking, and other timely topics. Conducted over 50 media interviews on transgender inclusion alone.
- Assess school safety climate and conduct needs assessment through collection and analysis of internal and external qualitative and quantitative data from primary and secondary sources (surveys, interviews, observations and crime data, etc.)

- Conduct and facilitate professional development seminars, discussion groups, parent meetings, colloquia and classes targeting causes of intergroup bias, with an emphasis on positive resolution methods.
- Coordinate three large-scale Human Relations Symposia facilitated by local and national leaders on human relations, bias, child abuse, LAUSD students, staff, parents, and community members, up to 1000 participants at each event.
- Coordinate annual large-scale conferences Models of Pride, facilitated by local and national leaders for educators, counselors, and advocates on addressing LGBTQ concerns in educational settings.
- Part of executive committee for landmark collaboration between LAUSD and the Los Angeles LGBT Center to reduce bullying and suicidality, culminating in conference with critical LAUSD and community stakeholders.
- Facilitate multi-agency interventions to address school and community inter-group conflicts, leveraging resources from the ACLU, Museum of Tolerance, Los Angeles City Attorney's Office, LAPD, Anti-Defamation League, UCLA, and Loyola Law School Center for Conflict Resolution.
- Preceptor for Masters of Social Work interns from CSLA and USC. Oversee projects, establish goals, provide mentorship.
- Member of LAUSD Committee for External Research Review, evaluating proposals of external researchers
- Collaborate with university researchers:
  - Peter Theodore, Alliant International University, *The Efficacy of LGBT-Inclusive Curriculum in Reducing Bias and Bullying*
  - Negin Ghavin, UCLA, *Value-Added of Peer Relationships in Reducing LGBTQ-Bias and Bullying*
  - Paul Kwon, Washington State University, and Peter Theodore, Alliant University, *A Resilience Intervention for Sexual Minority Adolescents and Young Adults*.
  - Shabbar Ranapurwala, University of Iowa, *Assessment of Violence Prevention Curricula Programs in Middle and High Schools*.
- Examined and appraised text books, curricula for sensitive and accurate representations of LGBTQ concerns, prior to adoption.
- Authored chapters on sexual orientation and gender identity for middle school and high school text books, thus making LAUSD the first district to adopt inclusive curriculum.
- Spearhead district wide efforts to create cross-disciplinary curricula that are inclusive of sexual orientation and gender identity.

**Educational Equity Compliance, Project 10 Specialist, 2005 – 2006**

Ensured compliance with District mandates requiring bias-free campus practices and minimized liability by ensuring compliance with educational access in accordance with legal guidelines set forth in IDEA, Title IX, Section 504, Title VI, First Amendment, et al.

***Implementation Methods:***

- Responsible for implementation and monitoring of three-year settlement agreement, Ramirez v. LAUSD that included, among other requirements, the delivery and evaluation of annual comprehensive LGBT diversity trainings for all community stakeholders at four LAUSD schools.
- Interfaced with state, schools, district offices, attorneys, and advocates on complaints alleging discrimination.

- Coordinated implementation of settlement agreement (Ramirez vs. LAUSD), encompassing forty corrective actions, including annual bias reduction trainings for over 5000 students at targeted high school and feeder middle schools.
- Partnered with University of Southern California to measure efficacy of LGBT bias reduction program. Outcomes showed that 97% of participants showed reduction in bias following outreach.
- Assessed and evaluated District policies prior to implementation to ensure protected-class issues were adequately addressed; outreach to affected communities as necessary, including students, families, school personnel, and community agencies.
- Authored chapters on protected-group and discrimination-related issues, particularly with respect to sexual orientation and gender identity in newly-adopted texts and curricula.

#### **Gays & Lesbians Initiating Dialogue for Equity, cofounder, 1984**

GLIDE is Los Angeles' premier speakers bureau, facilitating hundreds of LGBT-diversity trainings in K-12 classrooms throughout Los Angeles, creating safer more affirming schools for all students. GLIDE is an all-volunteer organization and accomplishes its transformative work through small group dialogues.

#### **CREDENTIALS, CERTIFICATIONS & ADVANCED TRAININGS**

Professional Clear Administrative Credential  
National Board Certified, Exceptional Needs, 2000  
Multiple Subject, K-12, LH, SH, RSP, CLAD  
Loyola Law School Center for Conflict Resolution, 2009  
Master's Program Institute, 2010  
Reasonable Accommodations for Supervisors, 2012  
Child Abuse, 2012  
LAPD Community Police Academy, 2012  
Appreciative Inquiry, 2012, 2013, 2014  
GLSEN LGBT Safe School Initiative Professional Development Facilitator, 2013  
Readiness and Emergency Management for Schools Adult Sexual Misconduct Training, 2012  
Restorative Justice, Council in Schools, August 2013, January 2014  
Commercial Sexual Exploitation of Children (CSEC) Training, 2015  
The Sexual Exploitation and Commercial Sexual Exploitation of Gay Males and Transgender Females, 2016  
Active Shooter Response, 2016

#### **RECOGNITIONS AND AWARDS**

Advocate Magazine, 2010 Outstanding National Educator  
Claremont Graduate University, 2011 Outstanding Leadership  
City of West Hollywood, 2011 Outstanding Leadership, Child Abuse and Neglect Prevention  
Associated Administrators of Los Angeles, 2014 Community Leadership Award

#### ***Expert Witness & Testimony***

##### **California Senate and Assembly Education Committees, 2013**

AB 1266 (Ammiano) the School Success and Opportunity Act. Testimonies to Assembly and Senate education committees regarding transgender students.

##### **Los Angeles School Police Department, 2008**

Expert testimony regarding allegations of police harassment based on sexual orientation.

**California Assembly, Judiciary Committees, 2008.**

Proposition 8, Marriage Equality. Testimony regarding Proposition 8's relevance to public school instructional practices.

*Primary or Significant Contributing Author*

**Board Resolutions and Position Statements:**

- LAUSD School Board Resolution to Eliminate, Address and Prevent Commercial Sexual Exploitation of Children (CSEC) in the Los Angeles Unified School District (LAUSD). 2016
- LAUSD School Board Resolution to recognize June as Gay Pride Month, annually, 2009 to date
- LAUSD School Board position statement supporting FAIR Education Act, 2011
- LAUSD School Board position statement supporting marriage equality, Proposition 8, 2008

**Policies and memoranda:**

- Bullying and Hazing Policy (Student-to-Student and Student-to-Adult), 2010, 2012, 2014
- Calendar of Commemorative Dates and Observances, updated annually to recognize religious, cultural and political dates and observances.
- Child Abuse Awareness Policy, 2016
- Guidelines for Sexual Orientation and Gender Identity Inclusive Education, 2014
- Guidelines for Teaching About Religions, 2011, 2014, 2016
- Social Media Policy for Employees and Associated Persons, 2012, 2014
- Social Media Policy for Students, 2016
- Transgender Students – Ensuring Equity and Nondiscrimination, 2004, 2011, 2015
- Workplace Violence, Bullying and Threats (Adult-to-Adult), 2011, 2012

Populate website for Human Relations, Diversity & Equity with policies, resources, instructional activities and educational materials for students, staff, and parents on a full spectrum of human relations concerns, e.g., discrimination, bullying, bias, conflict resolution, restorative practices, culture, race, religion, sexual orientation, gender identity and expression, and differently-abled. <http://humanrelations.lausd.net>

**Editor/Reviewer/Consultant**

Glencoe Publishers, *Health: Making Life Choices*. 2014

*Journal of Homosexuality*, 2012 - present

*Journal of LGBT Youth*, 2009 – present

Los Angeles County Office of Education, *Addressing the Needs of Sexual Minority Youth in Public Education*, 2012-2014

McGraw Hill Publishers, Health education text books for middle and high school, 2011

Public Health Law Research, *Anti-bullying laws: A blueprint for prevention*. June 2015, [www.http://phlr.org](http://phlr.org).

Rutgers University, Online education, *LGBTQ Issues in Schools*

**Publications**

Morgan, E. & Chiasson, J. (2014). Respecting the rights of transgender students. *National School Public Relations Association*, [http://www.nspr.org/e\\_network/2014-02\\_connecting-communities](http://www.nspr.org/e_network/2014-02_connecting-communities)

Chiasson, (2013). Success and Opportunity for Transgender Students. Huffington Post.com  
Success and Opportunity for Transgender Students. [http://www.huffingtonpost.com/judy-chiasson/success-and-opportunity-for-transgender-students\\_b\\_3744830.html](http://www.huffingtonpost.com/judy-chiasson/success-and-opportunity-for-transgender-students_b_3744830.html)

Chiasson, J. & Sanlo, R. (2013). Putting sexual orientation and gender identity in context: Historical influences and social trends. In E. S. Fisher & K. Komosa-Hawkins (Eds.), *Creating Safe and Supportive Learning Environments: A Guide for Working with Lesbian, Gay, Bisexual, Transgender, and Questioning Youth and Families* (pp. 10-28). New York, NY: Routledge.

Chiasson, J. (2006). Three plaintiffs, nine defendants, twelve allegations. *United Teachers of Los Angeles*

Chiasson, J. (2005). The diversity of human relationships in *Lifetime health: Sexuality and society*, Holt, Rinehart and Winston

Chiasson, J. (2000). Poverty provides wealth of reasons for school's low ranking. *Los Angeles Times*

**Media Spokesperson.** Represent LAUSD in media outreach on topics of bullying, sexting, inclusive education, and LGBTQ concerns

Aljazeera America	Naked Truth Radio, November 2010
Asheville Citizen Times, July 2016	National Public Radio, <i>Talk of the Nation</i> 2010, 2013, 2016
Beverly Press, July 2016	National School Board Association, August 2016
California Educator	NBC Universal
Capital Public Radio	New York Daily News, 2016
CBS	New York Times, 2011, 2014, 2015
Channel 4 News	<i>On These Shoulders We Stand</i> , 2011, documentary on school bullying
CNN, September 2011, July 2013	Orange County Register
Detroit Free Press, July 2016	Out in the 562
EdSource	Profiled by LAUSD Journal, August 2011
Equality Matters	ProPublica
ESPN 2016	Reno Gazette Journal, 2015
Fox News, February 2012, 2013, 2014	Sacramento Bee
Hoy Newspaper	San Diego Reporter
Huffington Post, 2013,	San Gabriel Valley Tribune, 2015
Independent Weekly, 2016	Sheila Kheul Talk Television Show, 2011
John McMullen Radio Show	<i>Teach Your Children Well</i> , documentary on the murder of student Larry King
KCRW, IMRU with Linda Birch, May 2011	Telemundo
KNBC TV	The Daily Breeze, 2016
KPFK Air Talk with Larry Mantle <i>FAIR Education Act</i> , September 2011	The Daily Free Press, 2016
KQED Public Radio	TIME Magazine, 2016 (cover article)
LA Daily News	TransAdvocate, 2015
LA Live, Fox TV Morning Show; August 2011	USA Today, 2016
LA School Report	Wall Street Journal, 2016
LA Times, 2014, 2015, 2016	Whittier Daily News
LaOpinion	Yomiuri Shimbun (Japan)
Los Angeles Times	
Mercury News	

**Represent LAUSD on community partnerships**

Anti Bully Coalition *Founding member*, 2011. Multi-agency collaborations of human relations organizations (LA County and LA City Human Relations; LA County Office of Education; Museum of Tolerance; Anti-Defamation League; et al).

California Safe Schools Coalition, San Francisco

Children's Hospital, *Connect to Protect Outreach to MSM Youth of Color*

City of Los Angeles Human Relations LGBT Advisory Council

Division of Adolescent and School Health (DASH), joint venture of Center for Disease Control and American Psychological Association, Washington, DC

Foster Care Project, RISE, *June 2011 to present*. Partnership between LAUSD, Foster Services and LA Gay and Lesbian Center to build permanency with LGBT youth in foster care.

Gay and Lesbian Allied Administrators Association. *Co-founder, 2007*. First LGBT school administrators' association in the nation.

LAUSD Commission on Human Relations, Diversity and Equity, *2009 to present*. Coordinate the council of twenty commissioners representing all board members, bargaining units, and various community stakeholders in identifying ways to support the District's human relations concerns.

LGBT Health and Human Services Network

LGBT Mental Health Disparity Project

LGBT Youth in Detention, *September 2010 to present*. Established by Loyola Law School to address the concerns of incarcerated youth

LGBTQ Child Abuse and Neglect Prevention Council, *Founding member, 2008 to present*. First LGBTQ specific Child Abuse and Neglect Council, founded under auspices of LA County Child Abuse and Neglect Council to reduce over representation of LGBTQ children and youth as targets of abuse and neglect.

Los Angeles County Human Relations Commission

Los Angeles Police Department (LAPD), Community Relations Cadre, graduate, 2012

Los Angeles School Police Department LGBT Working Collaborative

Rainbow Families School Network, *Founder, 2008 to 2010*. First school district-affiliated support group for gay and lesbian parents in the nation.

Sacramento County Office of Education, California Teacher Recruitment Incentive Program

Stonewall Project, *February 2013 to present*, inaugural member of national consortium of school districts addressing needs of sexual minority youth.

Suicide Prevention Intervention Network, SPIN, *Executive Steering Committee, September 2010*  
Partnership between LAUSD, the Los Angeles LGBT Center and community stakeholders to address bullying-related suicides nationwide.

Youth Advocacy Coalition *Founding member, 2009*. Collaboration of community based organizations serving youth

#### CONFERENCE ATTENDANCE

Adult Sexual Misconduct in School, June 2012

Appreciative Inquiry: Building Cohesive Teams, July 2012

Changing Minds and Creating Healthy Trauma-Informed Communities, 2016

Commercial Sexual Exploitation of Children, July 2015

FBI Hate Crimes Training, July 2011

LGBT Sports Summit, Nike #BeTrue, 2013, 2014

Los Angeles County Office of Education Suicide Prevention Summit, "Two Lives a Day Lost in L.A.," September 2012

Office of Civil Rights, Department of Education, Investigative Training, September 2012

Commercial Sexual Exploitation of Children, 2015, 2016

LGBTQI2-S TAY: Safe and Welcoming Environments for Youth, 2016

**SELECTED HUMAN RELATIONS PRESENTATIONS AND MEDIATIONS**

**CONFERENCE PRESENTATIONS**

American Bar Association, Working in Partnership to Advocate for LGBTQ Students, Sept. 2011  
American Psychological Association Annual Conference, Washington, DC, August 2011, 2008  
Association of Chief Human Resources and Equal Employment Officers, February 2011  
Black Probation Officers Association, 2008  
California Association of Bilingual Educators, annual conference, 2014, 2016  
California Association of School Psychologists, annual conference, 2013, 2105  
California Federation of Teachers  
California State University at Northridge, Keynote. *Day of Diversity*, Masters in Social Work, 2010  
Center for Anti-Oppressive Education  
Center for Excellence in School Counseling and Leadership (CESCaL), San Diego, 2011, 2010  
Challenge LA, 2016  
Council of Black Administrators, 2012, 2013 Annual Conferences, *Bullying and Hazing: What Administrators Need to Know* and *Invisible Populations: Sexual Minority Youth of Color*.  
Department of Education, St. Paul, MN, July 2010  
Educational Books and Materials Association, annual conference, 2016  
EDGY Child Abuse Conference, October 2011, 2015  
Education Law Conference, *From the Courtroom to the Classroom: Looking at the Future of Urban Education*, 2007, sponsored by LAUSD General Counsel  
Gay Lesbian Straight Educators Network  
HIV/AIDS Conference, March 2011  
International Criminal Justice & Diversity Symposium  
Jacksonville Sexual Minority Youth Conference, *keynote*, JASMYN, 2012, 2013  
LA County Office of Affirmative Compliance  
LA County Office of Education, School Psychologists, 2007, 2008  
LA County Office of Education, Learning Communities, 2015  
LAUSD Annual Parent Summit, 2011, 2010, 2009, 2008  
LAUSD Health Teachers: *Teaching to the Text*, 2008, 2009, 2010  
LAUSD District-wide, Protecting Students from Sexual Abuse, 2012  
LAUSD Pupil Services and Attendance Counselors, November 2010, January 2011, April 2011  
LGBT Child Abuse Conference, panelist and workshop facilitator, sponsored by LA County Child Abuse and Neglect Conference, 2009, 2010  
Models of Pride, full day conference for educators, annually since 2005  
Museum of Tolerance, Freedom's Sisters, September 2011  
National Association of School Board Administrators, 2013 Annual Conference, *Addressing the needs of transgender students in public education*.  
National Association of School Safety and Law Enforcement Officials, July 2016 Annual conference, *Safe & Affirming Schools for LGBT Students*  
National Gay and Lesbian Task Force  
National LGBT Bar Association, Lavender Law Annual Conference, September 2011  
New Principals Conference, March 2011  
Network Against Hate, LA County Commission on Human Relations, 2015  
NEXUS Conference, Inter-Agency Council on Child Abuse and Neglect, Violence Within the Home and its Effects on Children, *Bullying or Harmless Teasing*. 2008, 2009, 2010  
Parent Community Services Branch  
Parent Empowerment Providers, *Transforming our Communities*  
Principals Training, LD 5, March 2011  
Ready to Learn: Helping Students Survive and Thrive, 2008, 2009, and 2010

School Counselors, LD 1, February 2011  
School Psychologists, Support Units central and west, March 2011  
Stonewall Education Project National conference, 2012, 2013, 2014, 2015  
Summit on Equal Protection and Civil Rights for Students  
Teaching Respect for All Conference, University of North Florida, keynote October 2011, 2013  
United Teachers of LA, *Achieving Equity Conference*  
Ventura County Office of Education, 2014, 2015  
White House Bullying Summit on Transgender and Muslim Students, August 2016

#### COMMUNITY AND GOVERNMENT ORGANIZATIONS

California State Park Rangers	Bancroft Elementary School, April 2011; March 2011
Children's Hospital Adolescent Services	Beachy Elementary School
City of Santa Monica	Belmont High School, December 2010
Hilton Hotels, Guest Relations staff	Berendo Middle School
Internal Revenue Service	Birmingham High School
LA Police Department	Broadway Elementary
Los Angeles Unified School Board	Canoga High School
Los Angeles School Police	Canyon Elementary
LA County Human Relations Commission	Charter School of Education
LA City Human Relations Commission	Chatsworth Charter High School
Paraprofessionals Annual State Conference, 2010	Clay Middle School
Penny Lane Foster Parents	Cleveland High School
Planned Parenthood of Los Angeles	Daniel Pearl Magnet
Posse Foundation	Drew Middle School
Museum of Tolerance, <i>Tools for Tolerance</i> , regular presenter	East Valley High School, every semester since 2008
UCLA Medical Group	El Dorado Elementary School
United Universalist Church	El Sereno Middle School
White Memorial Hospital	Esperanza Middle School
	Euclid Elementary School
<b>PROFESSIONAL AUDIENCES</b>	Fairfax High School, June 2011
Early Education Teachers	Fleming Middle School, January 2011
LAUSD Beginning Teachers Academy	Franklin High School, June 2011
LAUSD Parent Educators	Freemont High School, December 2010
LAUSD School Mental Health	Frost Middle School
Options Principals	Garfield High School, November 2010
Paraprofessional Annual Conferences	Gassell Middle School, October 2011
Principals Academy, September 2011	Hamilton High School
SPIN Conference, June 2011	Hart Middle School
Student Discipline and Expulsion Unit, September 2011	Hobart Elementary School
Teach for America	Horace Mann Middle School, January 2011
Teacher Training Academy, December, 2011; March 2011	Ivanhoe Elementary, March 2011
	Jefferson High School, November 2010
	King Elementary School
	King Starr Middle School, January 2011, October 2011
	LA Center for Enriched Studies
	Langdon Elementary, February 2011, October 2010
	Laurel School, March 2011
	Lawrence Middle School, December 2010

#### STUDENTS, STAFF, PARENTS K-12

Amino High School  
Audubon Middle School  
Avalon High School, June 2011  
Braddock Elementary, October 2011

Lennox Middle School, January 2011  
Liechty Middle School, January 2011  
Lincoln High School  
Los Angeles Academy  
Los Angeles High School, June 2011  
Mann Middle School, March 2011  
Marina Del Rey Middle School  
Mayberry Elementary School, March 2011  
Miguel Contreras Learning Center  
Monroe High School  
Nimitz Elementary, April 2011  
Nobel Middle School, November 2010,  
March 2011  
Omelveny Elementary School, February 2011  
Phoenix Continuation  
Roosevelt High School, 2010, February 2012,  
March 2012  
San Fernando High School  
San Fernando Middle School, February 2011  
San Pedro High School, September 2001,  
Santee Learning Complex  
Serrania Elementary School, Students,  
November 2011  
Sherman Oaks Elementary Charter  
Sun Valley High School, June 2011  
Sun Valley Magnet, 2016  
Sunny Brae Elementary School, February  
2011  
Taft High School, every semester since 2007  
Tarzana Elementary School, September 2001  
Third Street Elementary  
Thoreau CDS, December 2010  
University High School  
Valley Alternative High School  
Van Nuys High School, March 2011  
Wadsworth Elementary  
Washington Prep High School  
Webster Middle School  
Westchester High School, June 2011  
Westport Elementary School

Wiltern Place Elementary School  
Wooden High School  
Woodlake Elementary, September 2011

**POST-SECONDARY ACADEMIC INSTITUTIONS:**

Antioch College  
Argosy University  
Azusa Pacific College  
Cal State Dominguez Hills  
Cal State University, Fullerton, July 2013  
CSUN Teacher Preparation, April 2011  
CSUN, School of Social Work, 2011, 2012  
California Lutheran College  
California School of Professional  
Psychology, June 2011, August 2012  
Chapman College  
Claremont Graduate University, every  
semester since 2008  
CSLA, School Counselors, November 2011,  
2012; March 2011, 2012, 2013  
East Los Angeles College  
Grinnell College, Iowa, 2008  
Los Angeles Valley College  
Loyola Marymount University, 2011, 2012  
Moorpark College  
National University  
Occidental College  
Pasadena City College  
Pepperdine University, regular presenter  
Phillips Graduate Institute  
Principals Academy, September 2011  
Santa Monica College, regular presenter  
Stetsun University, Sanford, FL, 2012  
Torrance Unified School Board  
UCLA, Law School, October 2011  
UCLA, School of Social Work, November  
2011,  
USC, School of Social Work, August 2011,  
November 2011

# **EXHIBIT**

## **B**



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

**TITLE:** Transgender Students -  
Ensuring Equity and Nondiscrimination

**NUMBER:** BUL-6224.0

**ISSUER:** David Holmquist, General Counsel  
Office of General Counsel

**DATE:** February 7, 2014

<p><b>ROUTING</b>          Superintendent          Sr. Deputy Superintendent          Asst. Deputy Superintendent          Administrator of Operations          Operations Coordinator          ESC Superintendents          Administrators of Instruction          Principal Leaders          Principals          All Employees</p>
--

**PURPOSE:** The Los Angeles Unified School District (District) is committed to providing a safe and supportive learning environment for all students and to ensuring that every student shall have equal access to the District’s educational programs and activities. Additionally, District policy requires that all schools and all personnel promote acceptance and respect among students and staff.

This policy reflects the reality that transgender and gender nonconforming students are enrolled in the District. Its purpose is to advise District staff regarding issues relating to transgender students in order to create and maintain a safe learning environment for all students. The guidelines provided in this Bulletin do not anticipate every situation that might occur with respect to transgender students. The needs of each transgender student are unique. This policy should be interpreted consistent with the goals of reducing stigmatization and ensuring the integration of transgender students in educational programs and activities.

California Education Code §210.7 states that ‘gender means sex,’ and includes a person’s gender identity and gender related appearance and behavior whether or not stereotypically associated with the person’s assigned sex at birth.

California Education Code §220 and District policy require that all educational programs and activities should be conducted without discrimination based on actual or perceived sex, sexual orientation, or gender identity and expression.

California Education Code §201 provides that public schools have an affirmative obligation to combat sexism and other forms of bias, and a responsibility to provide an equal educational opportunity to all students.

Title IX of the Education Amendments of 1972 states, “No person...shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

subjected to discrimination under any education program or activity receiving federal financial assistance.”

This Bulletin provides guidelines to ensure protection, respectful treatment, and equal access to educational programs and activities for transgender students.

**MAJOR  
CHANGES:**

This Bulletin replaces REF-1557.1, “Transgender and Gender Variant Students - Ensuring Equity and Nondiscrimination,” dated September 9, 2011, issued by the Office of General Counsel. It provides updated information and guidance to schools regarding issues related to transgender students.

**INSTRUCTIONS:**

- I. Definitions - The following definitions are not meant to label, but are intended as functional descriptors:
  - A. Gender: a person's actual sex or perceived sex, and includes a person's perceived identity, appearance, or behavior, whether or not that identity, appearance or behavior is different from that traditionally associated with a person's sex at birth [Title 5, California Code of Regulations, §4910(k)].
  - B. Gender Identity: a person’s internal, deeply rooted identification as female, male or a non-binary understanding of gender, regardless of one’s assigned sex at birth. The responsibility for determining an individual’s gender identity rests with the individual.
  - C. Gender Expression: A person’s gender-related appearance and behavior whether or not stereotypically associated with the person’s assigned sex at birth. Students who adopt a presentation that varies from the stereotypical gender expectations sometimes may describe themselves as gender nonconforming, gender queer, or gender fluid.
  - D. Gender Nonconforming: Displaying a gender identity or expression that may differ from those typically associated with one’s sex assigned at birth. A person’s gender expression may differ from stereotypical expectations about how females and males are “supposed to” look or act. Gender nonconforming is not synonymous with transgender; not all gender nonconforming students identify as transgender.
  - E. Transgender: A person whose gender identity differs from their gender assigned at birth, and whose gender expression consistently varies from stereotypical expectations and norms. A transgender person desires to live persistently by a gender that differs from that which was assigned at birth.
  - F. Transition: Each transgender person has a unique process in which they go from living and identifying as one gender to living and identifying as another. Gender transition can occur at any age. It begins internally then



expands to external expression. This can include social, medical and/or a legal transition.

- G. LGBTQ: An acronym that stands for “lesbian, gay, bisexual, transgender, and queer/questioning.” Questioning incorporates those who are uncertain or fluid about their sexual orientation and/or gender identity.
- H. Sex: The biological condition or quality of being female or male.
- I. Sexual Orientation: A person’s emotional and sexual attraction to another person based on the gender of the other person. Common terms used to describe sexual orientation include, but are not limited to, heterosexual, lesbian, gay, and bisexual. Sexual orientation and gender identity are different.

## II. Guidelines

The school shall accept the gender identity that each student asserts. There is no medical or mental health diagnosis or treatment threshold that students must meet in order to have their gender identity recognized and respected. The assertion may be evidenced by an expressed desire to be consistently recognized by their gender identity. Students ready to socially transition may initiate a process to change their name, pronoun, attire, and access to preferred activities and facilities. Each student has a unique process for transitioning. The school shall customize support to optimize each student’s integration.

### A. Privacy and Confidentiality

1. All persons, including students, have a right to privacy. This includes keeping a student’s actual or perceived gender identity and expression private. Such private information shall be shared only on a need to know basis.
2. Students have the right to openly discuss and express their gender identity and expression, and to decide when, with whom, and how much information to share.
3. District and school personnel may encounter situations where transgender students have not disclosed their transgender status. School personnel must be mindful of the confidentiality and privacy rights of students when communicating with others, so as to not reveal, imply, or refer to a student’s gender identity or expression.



4. To ensure confidentiality when discussing a particular concern such as conduct, discipline, grades, attendance, or health, school personnel's focus should be specifically school-related and not on the student's gender identity or expression.

B. Official Records

1. The District is required to maintain in perpetuity mandatory permanent pupil records ("official records") which include the legal name of the student and the student's gender as indicated on official government issued documents such as birth certificates, passports and identification cards/permits. The official records may include but are not limited to progress and grade reports, transcripts, assessment data, health records, discipline records, Individualized Education Programs (IEP), Section 504 Plans and the cumulative card and file (folder).
2. The District will change a student's name and gender on official records when the name of the student is changed by the appropriate court action, such as by a change of name proceedings. The new name is the official legal name of the student for all purposes, including school registration. Upon the submission of proper evidence of the court order, the student's official name and gender in all school records shall be changed to reflect the legal name change.

C. Unofficial Records

1. The District shall permit a student to use a preferred name and gender on unofficial records. The unofficial records may include but are not limited to identification badges, classroom and homeroom rosters, certificates, programs, announcements, office summons and communications, team and academic rosters, diplomas, newspapers, newsletters, yearbooks and other site-generated unofficial records. The preferred name shall also appear on the student's cumulative folder (official record) as "Also Known As" (AKA).
2. The District shall input the student's preferred name and gender in the appropriate fields of the District's electronic data system to indicate how the student's name and gender will appear on unofficial records.
3. The District shall permit a student or parent/legal guardian to request a change of name and/or gender so that a student may be registered in school under a name and gender that corresponds with the student's gender identity without obtaining a court order or without



changing the student's official records (See "Names of Pupils for Purposes of School Records," BUL-5703.1, dated February 27, 2012, issued by the Office of Data and Accountability).

4. After the school receives and verifies the contents of the completed form, the school shall change the name and/or gender of the student in the District's electronic data system and enter the preferred name as AKA in the cumulative folder. In the cumulative folder and registration card, name and gender should be cross-referenced.

D. Names/Pronouns

1. Students shall be addressed by the name and pronoun that corresponds to their gender identity asserted at school without obtaining a court order, changing their official records or obtaining parent/legal guardian permission.
2. Students shall be known by their name and gender of identity. However, there may be situations (e.g., communications with the family, official state or federal records, and assessment data) where it may be necessary and recommended for staff to be informed of the student's legal name and gender. In these situations, staff should prioritize the safety, confidentiality, and respect of the student in a manner that affirms the law.
3. If school personnel are unsure how a student wants to be addressed in communications to the home or in conferences with parents/legal guardians, they may privately ask the student. For communications with a student's parent/legal guardian, school personnel should refer to this policy's prior section on "Privacy and Confidentiality."
4. Every effort should be made to use the preferred names and pronouns consistent with a student's gender identity. While inadvertent slips or honest mistakes may occur, the intentional and persistent refusal to respect a student's gender identity is a violation of District policy.

E. Restroom Accessibility

1. Schools may maintain separate restroom facilities for male and female students. Students shall have access to restrooms that correspond to their gender identity asserted at school.
2. If a student desires increased privacy, regardless of the underlying reason, the administrator shall make every effort to provide the



student with reasonable access to an alternative restroom such as a single-stall restroom or the health office restroom. The use of a restroom should be determined by the student's choice; no student shall be compelled to use an alternative restroom.

3. Administrators may take steps to designate single stall "gender neutral" restrooms on their campus.

F. Locker Room Accessibility

1. Schools may maintain separate locker room facilities for male and female students. Students shall have access to the locker room facility that corresponds to their gender identity asserted at school.
2. If there is a request for increased privacy, *any* student shall be provided access to a reasonable accommodation such as:
  - a. Assignment of a student locker in near proximity to the coaches' office or a supportive peer group.
  - b. Use of a private area within the public area of the locker room facility (e.g. nearby restroom stall with a door or an area separated by a curtain).
  - c. Use of a nearby private area (e.g. nearby restroom or a health office restroom).
  - d. A separate changing schedule.

G. Sports, Athletics, and Physical Education

1. Physical education classes are typically co-gender. In the event that the classes or activities are sex-segregated, transgender students shall participate in physical education by their gender identity asserted at school.
2. When conducting physical education classes and fitness evaluations, the teacher will address and evaluate the student by their gender of identity. Performance on the state physical fitness test (Fitnessgram) is evaluated by the State of California in accordance with the sex reported on the student's initial enrollment, even when the student identifies as transgender. In these events, the physical education teacher shall make every effort to maintain confidentiality of student information.
3. Participation in competitive athletics, intramural sports, athletic teams, competitions, and contact sports shall be facilitated in a manner consistent with the student's gender identity asserted at



school and in accordance with the California Interscholastic Federation bylaws (Gender Identity Participation, 300.D, page 56).

H. School Activities and Programs

Students have the right to equitable access to activities and programs in their school. Students may not be excluded from participation in, be denied the benefits of, or be subjected to harassment or other forms of discrimination on the basis of gender identity in any program or activity. These activities and programs may include but are not limited to cheer class, homecoming, prom, spirit day, celebrations, assemblies, acknowledgments, after school activities/programs and all extra-curricular activities.

I. Course Accessibility and Instruction

Students have the right to equitable learning opportunities in their school. Students shall not be required to take and/or be denied enrollment in a course on the basis of their gender identity in any educational and academic program.

J. Dress Codes/School Uniform Policies

1. A school's dress code and school uniform policy shall be gender-neutral. Schools cannot enforce specific attire based on gender.
2. Students have the right to dress in accordance with their gender identity within the parameters of the dress code, as it relates to the school uniform or safety issues (e.g., prohibiting attire that promotes drugs or violence, or is gang-affiliated).

K. Student Safety

1. School staff must ensure that students are provided with a safe school environment that is free of discrimination, harassment, bullying and/or intimidation.
2. School staff and families should work together to resolve complaints alleging discrimination, harassment, bullying and/or intimidation based on a student's actual or perceived gender identity or expression. Complaints of this nature are to be handled in the same manner as other complaints. Consideration should be given as to whether a Sexual Harassment investigation is warranted. [See the "Related Resources" and the "Assistance" sections of this Bulletin and BUL-3349.0, Sexual Harassment Policy (Student-to-Student,



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

---

Adult-to-Student, and Student-to-Adult, dated November 29, 2006, issued by the Office of General Counsel).]

3. School staff shall take all reported incidents of bullying seriously and take appropriate measures to ensure that the bullying stops. [See BUL-5212.1 *Bullying and Hazing Policy (Student-to-Student and Student-to-Adult)*, dated September 17, 2012, issued by the Office of the Superintendent].
4. School administration shall respond immediately to incidents of discrimination, harassment, bullying and/or intimidation by taking actions that include, but are not limited to the following: a) intervening to stop the behavior; b) investigating and documenting the incident; c) determining and enforcing appropriate corrective actions; and d) monitoring to ensure that the behavior does not reoccur.
5. School staff should take all reasonable steps to ensure safety and access for transgender and gender nonconforming students at their school. School staff shall support students' rights to assert their gender identity and expression.
6. Students shall not be disciplined solely on the basis of their actual or perceived gender identity or expression.
7. Students shall be informed that they have the responsibility to report situations/incidents of discrimination, harassment, bullying and/or intimidation to the designated site administrator or Title IX/Bullying Complaint Manager in cases where they may be a target or witness.
8. Students shall be informed of their role in ensuring a school environment that is free from discrimination, harassment, bullying and/or intimidation. Students should consider how others may perceive or be affected by their actions and words.



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

---

**RELATED  
RESOURCES:**

- *Bullying and Hazing Policy (Student-to-Student and Student-to-Adult)*, BUL-5212.1, dated September 17, 2012, issued by the Office of the Superintendent
- *Calendar of Commemorative Dates and Observances*, MEM 5466.3, issued annually by the Office of the Superintendent
- *Code of Conduct with Students - Distribution and Dissemination Requirement*, BUL-5167.0, dated July 1, 2010, issued by the Office of the Superintendent
- *Organizing for Crisis Intervention*, BUL-962.1, dated December 7, 2005, issued by the Office of the Chief Operating Officer
- *Discipline Foundation Policy: School-Wide Positive Behavior Support*, BUL-3638.0, dated March 27, 2007, issued by Educational Services
- *Educating for Diversity*, LAUSD Board Resolution, passed March 16, 1992
- *Ethics Policies*, BUL-4748.0, dated May 18, 2009, issued by the Office of the Superintendent
- *Fair, Accurate, Inclusive and Respectful (FAIR) Education Act*, BUL-5898.0, dated October 9, 2012, issued by Office of Curriculum, Instruction and School Support
- *Gold Book*, Los Angeles City Section, California Interscholastic Federation, "Gender Identity Participation", 300.D, page 56, dated July 24, 2013
- *Guidelines for Student Suspensions*, BUL-5655.2, dated August 19, 2013, issued by School Operations
- *Incident System Tracking Accountability Report (ISTAR)*, BUL-5269.2, dated July 10, 2013, issued by School Operations
- *Intra-district Permits and Student Transfers in Elementary and Secondary Schools*, BUL-5347.1, dated June 10, 2013, issued by Office of the Superintendent
- *LGBT and Sexual Orientation Anti-Bullying Resolution*, LAUSD Board Resolution, passed September 13, 2011
- *LGBT Resource Guide*, dated September 2013, issued by the Educational Equity Compliance Office



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

---

- *Names of Pupils for Purposes of School Records*, BUL-5703.1, dated February 27, 2012, issued by Office of Data and Accountability
- *Nondiscrimination Required Notices*, MEM 5818.1 issued annually by the Office of General Counsel
- *Opportunity Transfers (OTs) Policy*, BUL-4478.0, dated December 15, 2008, issued by the Chief Academic Officer
- *Physical Education Programs, Grades K-12*, BUL-2528.1, dated December 21, 2009, issued by Office of Curriculum, Instruction and School Support
- *Responding to and Reporting Hate-Motivated Incidents and Crimes*, BUL-2047.0, dated October 10, 2005, issued by the Office of General Counsel
- *Sex Equity in Physical Education Programs*, BUL-1826.0, dated August 5, 2005, issued by Secondary Instructional Services
- *Sexual Harassment Policy (Student-to-Student, Student-to-Adult, Adult-to-Student)*, BUL-3349.0, dated November 29, 2006, issued by the Office of General Counsel
- *Student Dress Codes/Uniforms*, BUL-2549.1, dated December 15, 2009, issued by the Office of the Chief Operating Officer
- *Title IX Policy/Complaint Procedures*, BUL-2521.1, dated June 7, 2006, issued by the Office of General Counsel
- *To Enforce the Respectful Treatment of All Persons*, LAUSD Board Resolution, passed October 10, 1988
- *Uniform Complaint Procedures (UCP)*, BUL-5159.2, dated February 1, 2013, issued by the Office of the General Counsel.

**AUTHORITY:** Title IX of the Education Amendments of 1972, 42 U.S.C. 1681  
Title IV of the Civil Rights Act of 1964, 42 U.S.C. 2000c et seq  
California Education Code Sections § 201, § 210.7, § 220, and § 231  
“Gold Book,” Los Angeles City Section, California Interscholastic Federation

**ASSISTANCE:** For further information:

- California Interscholastic Federation, at (818) 767-0800
- Data and Accountability, at (213) 241-2460
- Educational Equity Compliance Office, at (213) 241-7682
- Health Education Programs, at (213) 241-3570

BUL-6224.0  
Office of General Counsel

Page 10 of 11

February 7, 2014



LOS ANGELES UNIFIED SCHOOL DISTRICT  
POLICY BULLETIN

---

- Human Relations, Diversity and Equity, at (213) 241-5337
- Interscholastic Athletics, at (213) 241-5847
- Office of General Counsel, Education Legal Services, at (213) 241-7600
- Physical Education, at (213) 241-4556
- School Mental Health, at (213) 241-3841
- School Operations, at (213) 241-5337
- School Police, at (213) 625-6631
- Suicide Prevention, at (213) 241-3516

# **EXHIBIT**

**C**

**Assembly Bill No. 1266**

**CHAPTER 85**

An act to amend Section 221.5 of the Education Code, relating to pupil rights.

[Approved by Governor August 12, 2013. Filed with  
Secretary of State August 12, 2013.]

LEGISLATIVE COUNSEL'S DIGEST

AB 1266, Ammiano. Pupil rights: sex-segregated school programs and activities.

Existing law prohibits public schools from discriminating on the basis of specified characteristics, including gender, gender identity, and gender expression, and specifies various statements of legislative intent and the policies of the state in that regard. Existing law requires that participation in a particular physical education activity or sport, if required of pupils of one sex, be available to pupils of each sex.

This bill would require that a pupil be permitted to participate in sex-segregated school programs and activities, including athletic teams and competitions, and use facilities consistent with his or her gender identity, irrespective of the gender listed on the pupil's records.

*The people of the State of California do enact as follows:*

SECTION 1. Section 221.5 of the Education Code is amended to read:  
221.5. (a) It is the policy of the state that elementary and secondary school classes and courses, including nonacademic and elective classes and courses, be conducted, without regard to the sex of the pupil enrolled in these classes and courses.

(b) A school district may not prohibit a pupil from enrolling in any class or course on the basis of the sex of the pupil, except a class subject to Chapter 5.6 (commencing with Section 51930) of Part 28 of Division 4 of Title 2.

(c) A school district may not require a pupil of one sex to enroll in a particular class or course, unless the same class or course is also required of a pupil of the opposite sex.

(d) A school counselor, teacher, instructor, administrator, or aide may not, on the basis of the sex of a pupil, offer vocational or school program guidance to a pupil of one sex that is different from that offered to a pupil of the opposite sex or, in counseling a pupil, differentiate career, vocational, or higher education opportunities on the basis of the sex of the pupil counseled. Any school personnel acting in a career counseling or course selection capacity to a pupil shall affirmatively explore with the pupil the

possibility of careers, or courses leading to careers, that are nontraditional for that pupil's sex. The parents or legal guardian of the pupil shall be notified in a general manner at least once in the manner prescribed by Section 48980, in advance of career counseling and course selection commencing with course selection for grade 7 so that they may participate in the counseling sessions and decisions.

(e) Participation in a particular physical education activity or sport, if required of pupils of one sex, shall be available to pupils of each sex.

(f) A pupil shall be permitted to participate in sex-segregated school programs and activities, including athletic teams and competitions, and use facilities consistent with his or her gender identity, irrespective of the gender listed on the pupil's records.

O

# **EXHIBIT 10**

**U.S. Department of Education,  
*Examples of Policies and Emerging Practices for  
Supporting Transgender Students (May 2016)***

# Examples of Policies and Emerging Practices for Supporting Transgender Students



U.S. Department of Education

Office of Elementary and Secondary Education

Office of Safe and Healthy Students

May 2016

U.S. Department of Education  
Office of Elementary and Secondary Education  
Office of Safe and Healthy Students

Ann Whalen  
*Senior Advisor to the Secretary, Delegated the Duties of the Assistant Secretary, Office of Elementary and Secondary Education*

David Esquith  
*Director, Office of Safe and Healthy Students*

May 2016

This resource is in the public domain. Authorization to reproduce it in whole or in part is granted. The guide's citation should be:

U.S. Department of Education, Office of Elementary and Secondary Education, Office of Safe and Healthy Students, *Examples of Policies and Emerging Practices for Supporting Transgender Students* (May 2016).

This guide is also available on the Office of Safe and Healthy Students website at [www.ed.gov/oese/osh/emergingpractices.pdf](http://www.ed.gov/oese/osh/emergingpractices.pdf). Any updates to this guide will be available at this website.

If you need technical assistance, please contact the Office of Safe and Healthy Students at: [OESE.Info.SupportingTransgenderStudents@ed.gov](mailto:OESE.Info.SupportingTransgenderStudents@ed.gov)

#### **Availability of Alternate Formats**

Requests for documents in alternate formats such as Braille or large print should be submitted to the Alternate Format Center by calling 202-260-0852 or by contacting the 504 coordinator via e-mail at [om\\_eeos@ed.gov](mailto:om_eeos@ed.gov).

#### **Notice to Limited English Proficient Persons**

If you have difficulty understanding English you may request language assistance services for Department information that is available to the public. These language assistance services are available free of charge. If you need more information about interpretation or translation services, please call 1-800-USA-LEARN (1-800-872-5327) (TTY: 1-800-437-0833), or e-mail us at [ED.Language.Assistance@ed.gov](mailto:ED.Language.Assistance@ed.gov). Or write to U.S. Department of Education, Information Resource Center, LBJ Education Building, 400 Maryland Ave. SW, Washington, DC 20202.

## **Examples of Policies and Emerging Practices for Supporting Transgender Students**

The U.S. Department of Education (“ED”) is committed to providing schools with the information they need to provide a safe, supportive, and nondiscriminatory learning environment for all students. It has come to ED’s attention that many transgender students (*i.e.*, students whose gender identity is different from the sex they were assigned at birth) report feeling unsafe and experiencing verbal and physical harassment or assault in school, and that these students may perform worse academically when they are harassed. School administrators, educators, students, and parents are asking questions about how to support transgender students and have requested clarity from ED. In response, ED developed two documents:

- ED’s Office for Civil Rights and the U.S. Department of Justice’s Civil Rights Division jointly issued a Dear Colleague Letter (“DCL”) about transgender students’ rights and schools’ legal obligations under Title IX of the Education Amendments of 1972.<sup>1</sup> Any school that has questions related to transgender students or wants to be prepared to address such issues if they arise should review the DCL.
- ED’s Office of Elementary and Secondary Education compiled the attached examples of policies<sup>2</sup> and emerging practices<sup>3</sup> that some schools are already using to support transgender students. We share some common questions on topics such as school records, privacy, and terminology, and then explain how some state and school district policies have answered these questions. We present this information to illustrate how states and school districts are supporting transgender students. We also provide information about and links to those policies at the end of the document, along with other resources that may be helpful as educators develop policies and practices for their own schools.

---

<sup>1</sup> 20 U.S.C. §§ 1681-1688; Dear Colleague Letter: Transgender Students (May 13, 2016), [www.ed.gov/ocr/letters/colleague-201605-title-ix-transgender.pdf](http://www.ed.gov/ocr/letters/colleague-201605-title-ix-transgender.pdf).

<sup>2</sup> In this document, the term *policy* or *policies* refers generally to policies, guidance, guidelines, procedures, regulations, and resource guides issued by schools, school districts, and state educational agencies.

<sup>3</sup> ED considers *emerging practices* to be operational activities or initiatives that contribute to successful outcomes or enhance agency performance capabilities. Emerging practices are those that have been successfully implemented and demonstrate the potential for replication by other agencies. Emerging practices typically have not been rigorously evaluated, but still offer ideas that work in specific situations.

Each person is unique, so the needs of individual transgender students vary. But a school policy setting forth general principles for supporting transgender students can help set clear expectations for students and staff and avoid unnecessary confusion, invasions of privacy, and other harms. The education community continues to develop and revise policies and practices to address the rights of transgender students and reflect our evolving understanding and the individualized nature of transgender students' needs.

This document contains information from some schools, school districts, and state and federal agencies. Inclusion of this information does not constitute an endorsement by ED of any policy or practice, educational product, service, curriculum or pedagogy. In addition, this document references websites that provide information created and maintained by other entities. These references are for the reader's convenience. ED does not control or guarantee the accuracy, relevance, timeliness, or completeness of this outside information. This document does not constitute legal advice, create legal obligations, or impose new requirements.

**Table of Contents**

**Student Transitions ..... 1**

- 1. How do schools find out that a student will transition? ..... 1
- 2. How do schools confirm a student’s gender identity? ..... 1
- 3. How do schools communicate with the parents of younger students compared to older transgender students? ..... 2

**Privacy, Confidentiality, and Student Records ..... 4**

- 4. How do schools protect a transgender student’s privacy regarding the student’s transgender status? ..... 4
- 5. How do schools ensure that a transgender student is called by the appropriate name and pronouns? ..... 5
- 6. How do schools handle requests to change the name or sex designation on a student’s records? ..... 6

**Sex-Segregated Activities and Facilities..... 7**

- 7. How do schools ensure transgender students have access to facilities consistent with their gender identity? ..... 7
- 8. How do schools protect the privacy rights of all students in restrooms or locker rooms? ..... 7
- 9. How do schools ensure transgender students have the opportunity to participate in physical education and athletics consistent with their gender identity? ..... 8
- 10. How do schools treat transgender students when they participate in field trips and athletic trips that require overnight accommodations? ..... 9

**Additional Practices to Support Transgender Students ..... 10**

- 11. What can schools do to make transgender students comfortable in the classroom?.. 10
- 12. How do school dress codes apply to transgender students? ..... 10
- 13. How do schools address bullying and harassment of transgender students? ..... 11
- 14. How do school psychologists, school counselors, school nurses, and school social workers support transgender students? ..... 11
- 15. How do schools foster respect for transgender students among members of the broader school community? ..... 12
- 16. What topics do schools address when training staff on issues related to transgender students? ..... 12
- 17. How do schools respond to complaints about the way transgender students are treated? ..... 13

**Terminology ..... 14**

18. What terms are defined in current school policies on transgender students? ..... 14

19. How do schools account for individual preferences and the diverse ways that students describe and express their gender?..... 15

**Cited Policies on Transgender Students..... 16**

**Select Federal Resources on Transgender Students ..... 18**

## **Student Transitions**

### **1. How do schools find out that a student will transition?**

Typically, the student or the student's parent or guardian will tell the school and ask that the school start treating the student in a manner consistent with the student's gender identity. Some students transition over a school break, such as summer break. Other students may undergo a gender transition during the school year, and may ask (or their parents may ask on their behalf) teachers and other school employees to respect their identity as they begin expressing their gender identity, which may include changes to their dress and appearance. Some school district or state policies address how a student or parent might provide the relevant notice to the school.

- Alaska's Matanuska-Susitna Borough School District issued guidelines ("Mat-Su Borough Guidelines") advising that transgender students or their parents or guardians should contact the building administrator or the student's guidance counselor to schedule a meeting to develop a plan to address the student's particular circumstances and needs.
- The guidelines issued by Washington's Superintendent of Public Instruction ("Washington State Guidelines") offer an example of a student who first attended school as a boy and, about midway through a school year, she and her family decided that she would transition and begin presenting as a girl. She prefers to dress in stereotypically feminine attire such as dresses and skirts. Although she is growing her hair out and consistently presents as female at school, her hair is still in a rather short, typically boyish haircut. The student, her parents, and school administrators asked her friends and teachers to use female pronouns to address her.

### **2. How do schools confirm a student's gender identity?**

Schools generally rely on students' (or in the case of younger students, their parents' or guardians') expression of their gender identity. Although schools sometimes request some form of confirmation, they generally accept the student's asserted gender identity. Some schools offer additional guidance on this issue.

- Los Angeles Unified School District issued a policy ("LAUSD Policy") noting that "[t]here is no medical or mental health diagnosis or treatment threshold that

students must meet in order to have their gender identity recognized and respected” and that evidence may include an expressed desire to be consistently recognized by their gender identity.

- The New York State Education Department issued guidance (“NYSED Guidance”) recommending that “schools accept a student’s assertion of his/her/their own gender identity” and provides examples of ways to confirm the assertion, such as a statement from the student or a letter from an adult familiar with the student’s situation. The same guidance also offers the following example: “In one middle school, a student explained to her guidance counselor that she was a transgender girl who had heretofore only been able to express her female gender identity while at home. The stress associated with having to hide her female gender identity by presenting as male at school was having a negative impact on her mental health, as well as on her academic performance. The student and her parents asked if it would be okay if she expressed her female gender identity at school. The guidance counselor responded favorably to the request. The fact that the student presented no documentation to support her gender identity was not a concern since the school had no reason to believe the request was based on anything other than a sincerely held belief that she had a female gender identity.”
- Alaska’s Anchorage School District developed administrative guidelines (“Anchorage Administrative Guidelines”) noting that being transgender “involves more than a casual declaration of gender identity or expression but does not require proof of a formal evaluation and diagnosis. Since individual circumstances, needs, programs, facilities and resources may differ; administrators and school staff are expected to consider the needs of the individual on a case-by-case basis.”

### **3. How do schools communicate with the parents of younger students compared to older transgender students?**

Parents are often the first to initiate a conversation with the school when their child is transgender, particularly when younger children are involved. Parents may play less of a role in an older student’s transition. Some school policies recommend, with regard to an older student, that school staff consult with the student before reaching out to the student’s parents.

- The District of Columbia Public Schools issued guidance (“DCPS Guidance”) noting that “students may choose to have their parents participate in the transition process, but parental participation is not required.” The guidance further

recommends different developmentally appropriate protocols depending on grade level. The DCPS Guidance suggests that the school work with a young student's family to identify appropriate steps to support the student, but recommends working closely with older students prior to notification of family. The guidance also provides a model planning document with key issues to discuss with the student or the student's family.

- Similarly, the Massachusetts Department of Elementary and Secondary Education issued guidance ("Massachusetts Guidance") that notes: "Some transgender and gender nonconforming students are not openly so at home for reasons such as safety concerns or lack of acceptance. School personnel should speak with the student first before discussing a student's gender nonconformity or transgender status with the student's parent or guardian. For the same reasons, school personnel should discuss with the student how the school should refer to the student, *e.g.*, appropriate pronoun use, in written communication to the student's parent or guardian."
- Chicago Public Schools' guidelines ("Chicago Guidelines") provide: "When speaking with other staff members, parents, guardians, or third parties, school staff should not disclose a student's preferred name, pronoun, or other confidential information pertaining to the student's transgender or gender nonconforming status without the student's permission, unless authorized to do so by the Law Department."
- Oregon's Department of Education issued guidance stating, "In a case where a student is not yet able to self-advocate, the request to respect and affirm a student's identity will likely come from the student's parent. However, in other cases, transgender students may not want their parents to know about their transgender identity. These situations should be addressed on a case-by-case basis and school districts should balance the goal of supporting the student with the requirement that parents be kept informed about their children. The paramount consideration in such situations should be the health and safety of the student, while also making sure that the student's gender identity is affirmed in a manner that maintains privacy and confidentiality."

## Privacy, Confidentiality, and Student Records

### **4. How do schools protect a transgender student's privacy regarding the student's transgender status?**

There are a number of ways schools protect transgender students' interests in keeping their transgender status private, including taking steps to prepare staff to consistently use the appropriate name and pronouns. Using transgender students' birth names or pronouns that do not match their gender identity risks disclosing a student's transgender status. Some state and school district policies also address how federal and state privacy laws apply to transgender students and how to keep information about a student's transgender status confidential.

- California's El Rancho Unified School District issued a regulation ("El Rancho Regulation") that provides that students have the right to openly discuss and express their gender identity, but also reminds school personnel to be "mindful of the confidentiality and privacy rights of [transgender] students when contacting parents/legal guardians so as not to reveal, imply, or refer to a student's actual or perceived sexual orientation, gender identity, or gender expression."
- The Chicago Guidelines provide that the school should convene an administrative support team to work with transgender students and/or their parents or guardians to address each student's individual needs and supports. To protect the student's privacy, this team is limited to "the school principal, the student, individuals the student identifies as trusted adults, and individuals the principal determines may have a legitimate interest in the safety and healthy development of the student."
- The Mat-Su Borough Guidelines state: "In some cases, a student may want school staff and students to know, and in other cases the student may not want this information to be widely known. School staff should take care to follow the student's plan and not to inadvertently disclose information that is intended to be kept private or that is protected from disclosure (such as confidential medical information)."
- The Massachusetts Guidance advises schools "to collect or maintain information about students' gender only when necessary" and offers an example: "One school reviewed the documentation requests it sent out to families and noticed that field trip permission forms included a line to fill in indicating the student's gender. Upon consideration, the school determined that the requested information was irrelevant to the field trip activities and deleted the line with the gender marker request."

**5. How do schools ensure that a transgender student is called by the appropriate name and pronouns?**

One of the first issues that school officials may address when a student notifies them of a gender transition is determining which name and pronouns the student prefers. Some schools have adopted policies to prepare all school staff and students to use a student's newly adopted name, if any, and pronouns that are consistent with a student's gender identity.

- A regulation issued by Nevada's Washoe County School District ("Washoe County Regulation") provides that: "Students have the right to be addressed by the names and pronouns that correspond to their gender identity. Using the student's preferred name and pronoun promotes the safety and wellbeing of the student. When possible, the requested name shall be included in the District's electronic database in addition to the student's legal name, in order to inform faculty and staff of the name and pronoun to use when addressing the student."
- A procedure issued by Kansas City Public Schools in Missouri ("Kansas City Procedure") notes that: "The intentional or persistent refusal to respect the gender identity of an employee or student after notification of the preferred pronoun/name used by the employee or student is a violation of this procedure."
- The NYSED Guidance provides: "As with most other issues involved with creating a safe and supportive environment for transgender students, the best course is to engage the student, and possibly the parent, with respect to name and pronoun use, and agree on a plan to reflect the individual needs of each student to initiate that name and pronoun use within the school. The plan also could include when and how this is communicated to students and their parents."
- The DCPS Guidance includes a school planning guide for principals to review with transgender students as they plan how to ensure the school environment is safe and supportive. The school planning guide allows the student to identify the student's gender identity and preferred name, key contacts at home and at school, as well as develop plans for access to restrooms, locker rooms, and other school activities.

## 6. How do schools handle requests to change the name or sex designation on a student's records?

Some transgender students may legally change their names. However, transgender students often are unable to obtain identification documents that reflect their gender identity (*e.g.*, due to financial limitations or legal restrictions imposed by state or local law). Some school district policies specify that they will use the name a student identifies as consistent with the student's gender identity regardless of whether the student has completed a legal name change.

- The NYSED Guidance provides that school records, including attendance records, transcripts, and Individualized Education Programs, be updated with the student's chosen name and offers an example: "One school administrator dealt with information in the student's file by starting a new file with the student's chosen name, entered previous academic records under the student's chosen name, and created a separate, confidential folder that contained the student's past information and birth name."
- The DCPS Guidance notes: "A court-ordered name or gender change is not required, and the student does not need to change their official records. If a student wishes to go by another name, the school's registrar can enter that name into the 'Preferred First' name field of [the school's] database."
- The Kansas City Procedure recognizes that there are certain situations where school staff or administrators may need to report a transgender student's legal name or gender. The procedure notes that in these situations, "school staff and administrators shall adopt practices to avoid the inadvertent disclosure of such confidential information."
- The Chicago Guidelines state: "Students are not required to obtain a court order and/or gender change or to change their official records as a prerequisite to being addressed by the name and pronoun that corresponds to their gender identity."
- The Massachusetts Guidance also addresses requests to amend records after graduation: "Transgender students who transition after having completed high school may ask their previous schools to amend school records or a diploma or transcript that include the student's birth name and gender. When requested, and when satisfied with the gender identity information provided, schools should amend the student's record."

## **Sex-Segregated Activities and Facilities**

### **7. How do schools ensure transgender students have access to facilities consistent with their gender identity?**

Schools often segregate restrooms and locker rooms by sex, but some schools have policies that students must be permitted to access facilities consistent with their gender identity and not be required to use facilities inconsistent with their gender identity or alternative facilities.

- The Washington State Guidelines provide: “School districts should allow students to use the restroom that is consistent with their gender identity consistently asserted at school.” In addition, no student “should be required to use an alternative restroom because they are transgender or gender nonconforming.”
- The Washoe County Regulation provides: “Students shall have access to use facilities that correspond to their gender identity as expressed by the student and asserted at school, irrespective of the gender listed on the student’s records, including but not limited to locker rooms.”
- The Anchorage Administrative Guidelines emphasize the following provision: “However, staff should not require a transgender or gender nonconforming student/employee to use a separate, nonintegrated space unless requested by the individual student/employee.”

### **8. How do schools protect the privacy rights of all students in restrooms or locker rooms?**

Many students seek additional privacy in school restrooms and locker rooms. Some schools have provided students increased privacy by making adjustments to sex-segregated facilities or providing all students with access to alternative facilities.

- The Washington State Guidelines provide that any student who wants increased privacy should be provided access to an alternative restroom or changing area. The guidelines explain: “This allows students who may feel uncomfortable sharing the facility with the transgender student(s) the option to make use of a separate restroom and have their concerns addressed without stigmatizing any individual student.”

- The NYSED Guidance gives an example of accommodating all students' interest in privacy: "In one high school, a transgender female student was given access to the female changing facility, but the student was uncomfortable using the female changing facility with other female students because there were no private changing areas within the facility. The principal examined the changing facility and determined that curtains could easily be put up along one side of a row of benches near the group lockers, providing private changing areas for any students who wished to use them. After the school put up the curtains, the student was comfortable using the changing facility."
- Atherton High School, in Jefferson County, Kentucky, issued a policy that offers examples of accommodations to address any student's request for increased privacy: "use of a private area within the public area of the locker room facility (e.g. nearby restroom stall with a door or an area separated by a curtain); use of a nearby private area (e.g. nearby restroom); or a separate changing schedule."
- The DCPS Guidance recommends talking to students to come up with an acceptable solution: "Ultimately, if a student expresses discomfort to any member of the school staff, that staff member should review these options with the student and ask the student permission to engage the school LGBTQ liaison or another designated ally in the building."

**9. How do schools ensure transgender students have the opportunity to participate in physical education and athletics consistent with their gender identity?**

Some school policies explain the procedures for establishing transgender students' eligibility to participate in athletics consistent with their gender identity. Many of those policies refer to procedures established by state athletics leagues or associations.

- The NYSED Guidance explains that "physical education is a required part of the curriculum and an important part of many students' lives. Most physical education classes in New York's schools are coed, so the gender identity of students should not be an issue with respect to these classes. Where there are sex-segregated classes, students should be allowed to participate in a manner consistent with their gender identity."
- The LAUSD Policy provides that "participation in competitive athletics, intramural sports, athletic teams, competitions, and contact sports shall be facilitated in a

manner consistent with the student's gender identity asserted at school and in accordance with the California Interscholastic Federation bylaws." The California Interscholastic Federation establishes a panel of professionals, including at least one person with training or expertise in gender identity health care or advocacy, to make eligibility decisions.

- The Rhode Island Interscholastic League's policy states that all students should have the opportunity to participate in athletics consistent with their gender identity, regardless of the gender listed on school records. The policy provides that the league will base its eligibility determination on the student's current transcript and school registration information, documentation of the student's consistent gender identification (*e.g.*, affirmed written statements from student, parent/guardian, or health care provider), and any other pertinent information.

#### **10. How do schools treat transgender students when they participate in field trips and athletic trips that require overnight accommodations?**

Schools often separate students by sex when providing overnight accommodations. Some school policies provide that students must be treated consistent with their gender identity in making such assignments.

- Colorado's Boulder Valley School District issued guidelines ("Boulder Valley Guidelines") providing that when a school plans overnight accommodations for a transgender student, it should consider "the goals of maximizing the student's social integration and equal opportunity to participate in overnight activity and athletic trips, ensuring the [transgender] student's safety and comfort, and minimizing stigmatization of the student."
- The Chicago Guidelines remind school staff: "In no case should a transgender student be denied the right to participate in an overnight field trip because of the student's transgender status."

## **Additional Practices to Support Transgender Students**

### **11. What can schools do to make transgender students comfortable in the classroom?**

Classroom practices that do not distinguish or differentiate students based on their gender are the most inclusive for all students, including transgender students.

- The DCPS Guidance suggests that “[w]herever arbitrary gender dividers can be avoided, they should be eliminated.”
- The Massachusetts Guidance states that “[a]s a general matter, schools should evaluate all gender-based policies, rules, and practices and maintain only those that have a clear and sound pedagogical purpose.”
- Minneapolis Public Schools issued a policy providing that students generally should not be grouped on the basis of sex for the purpose of instruction or study, but rather on bases such as student proficiency in the area of study, student interests, or educational needs for acceleration or enrichment.
- The Maryland State Department of Education issued guidelines that include an example of eliminating gender-based sorting of students: “Old Practice: boys line up over here.” New Practice: birthdays between January and June; everybody who is wearing something green, etc.”

### **12. How do school dress codes apply to transgender students?**

Dress codes that apply the same requirements regardless of gender are the most inclusive for all students and avoid unnecessarily reinforcing sex stereotypes. To the extent a school has a dress code that applies different standards to male and female students, some schools have policies that allow transgender students to dress consistent with their gender identity.

- Wisconsin’s Shorewood School District issued guidelines (“Shorewood Guidelines”) that allow students to dress in accordance with their gender identity and remind school personnel that they must not enforce a dress code more strictly against transgender and gender nonconforming students than other students.
- The Washington State Guidelines encourage school districts to adopt gender-neutral dress codes that do not restrict a student’s clothing choices on the basis of gender: “Dress codes should be based on educationally relevant considerations, apply

consistently to all students, include consistent discipline for violations, and make reasonable accommodations when the situation requires an exception.”

### **13. How do schools address bullying and harassment of transgender students?**

Unfortunately, bullying and harassment continue to be a problem facing many students, and transgender students are no exception. Some schools make clear in their nondiscrimination statements that prohibited sex discrimination includes discrimination based on gender identity and expression. Their policies also address this issue.

- The NYSED Guidance stresses the importance of protecting students from bullying and harassment because “[the] high rates experienced by transgender students correspond to adverse health and educational consequences,” including higher rates of absenteeism, lower academic achievement, and stunted educational aspirations.
- The Shorewood Guidelines specify that harassment based on a student’s actual or perceived transgender status or gender nonconformity is prohibited and notes that these complaints are to be handled in the same manner as other discrimination, harassment, and bullying complaints.
- The DCPS Guidance provides examples of prohibited harassment that transgender students sometimes experience, including misusing an individual’s preferred name or pronouns on purpose, asking personal questions about a person’s body or gender transition, and disclosing private information.

### **14. How do school psychologists, school counselors, school nurses, and school social workers support transgender students?**

School counselors can help transgender students who may experience mental health disorders such as depression, anxiety, and posttraumatic stress. Mental health staff may also consult with school administrators to create inclusive policies, programs, and practices that prevent bullying and harassment and ensure classrooms and schools are safe, healthy, and supportive places where all students, including transgender students, are respected and can express themselves. Schools will be in a better position to support transgender students if they communicate to all students that resources are available, and that they are competent to provide support and services to any student who has questions related to gender identity.

- The NYSED Guidance suggests that counselors can serve as a point of contact for transgender students who seek to take initial steps to assert their gender identity in school.
- The Chicago Guidelines convene a student administrative support team to determine the appropriate supports for transgender students. The team consists of the school principal, the student, adults that the student trusts, and individuals the principal determines may have a legitimate interest in the safety and healthy development of the student.

**15. How do schools foster respect for transgender students among members of the broader school community?**

Developing a clear policy explaining how to support transgender students can help communicate the importance the school places on creating a safe, healthy, and nondiscriminatory school climate for all students. Schools can do this by providing educational programs aimed at staff, students, families, and other community members.

- The Massachusetts Guidance informs superintendents and principals that they “need to review existing policies, handbooks, and other written materials to ensure they are updated to reflect the inclusion of gender identity in the student antidiscrimination law, and may wish to inform all members of the school community, including school personnel, students, and families of the recent change to state law and its implications for school policy and practice. This could take the form of a letter that states the school’s commitment to being a supportive, inclusive environment for all students.”
- The NYSED Guidance states that “school districts are encouraged to provide this guidance document and other resources, such as trainings and information sessions, to the school community including, but not limited to, parents, students, staff and residents.”

**16. What topics do schools address when training staff on issues related to transgender students?**

Schools can reinforce commitments to providing safe, healthy, and nondiscriminatory school climates by training all school personnel about appropriate and respectful treatment of all students, including transgender students.

- The Massachusetts Guidance suggests including the following topics in faculty and staff training “key terms related to gender identity and expression; the development of gender identity; the experiences of transgender and other gender nonconforming students; risks and resilience data regarding transgender and gender nonconforming students; ways to support transgender students and to improve school climate for gender nonconforming students; [and] gender-neutral language and practices.”
- The El Rancho Regulation states that the superintendent or designee “shall provide to employees, volunteers, and parents/guardians training and information regarding the district’s nondiscrimination policy; what constitutes prohibited discrimination, harassment, intimidation, or bullying; how and to whom a report of an incident should be made; and how to guard against segregating or stereotyping students when providing instruction, guidance, supervision, or other services to them. Such training and information shall include guidelines for addressing issues related to transgender and gender-nonconforming students.”

**17. How do schools respond to complaints about the way transgender students are treated?**

School policies often provide that complaints from transgender students be handled under the same policy used to resolve other complaints of discrimination or harassment.

- The Boulder Valley Guidelines provide that “complaints alleging discrimination or harassment based on a person’s actual or perceived transgender status or gender nonconformity are to be handled in the same manner as other discrimination or harassment complaints.”
- The Anchorage Administrative Guidelines provide that “students may also use the Student Grievance Process to address any civil rights issue, including transgender issues at school.”

## Terminology

### **18. What terms are defined in current school policies on transgender students?**

Understanding the needs of transgender students includes understanding relevant terminology. Most school policies define commonly used terms to assist schools in understanding key concepts relevant to transgender students. The list below is not exhaustive, and only includes examples of some of the most common terms that school policies define.

- *Gender identity* refers to a person’s deeply felt internal sense of being male or female, regardless of their sex assigned at birth. (Washington State Guidelines)
- *Sex assigned at birth* refers to the sex designation, usually “male” or “female,” assigned to a person when they are born. (NYSED Guidance)
- *Gender expression* refers to the manner in which a person represents or expresses gender to others, often through behavior, clothing, hairstyles, activities, voice or mannerisms. (Washoe County Regulation)
- *Transgender* or *trans* describes a person whose gender identity does not correspond to their assigned sex at birth. (Massachusetts Guidance)
- *Gender transition* refers to the process in which a person goes from living and identifying as one gender to living and identifying as another. (Washoe County Regulation)
- *Cisgender* describes a person whose gender identity corresponds to their assigned sex at birth. (NYSED Guidance)
- *Gender nonconforming* describes people whose gender expression differs from stereotypic expectations. The terms *gender variant* or *gender atypical* are also used. Gender nonconforming individuals may identify as male, female, some combination of both, or neither. (NYSED Guidance)
- *Intersex* describes individuals born with chromosomes, hormones, genitalia and/or other sex characteristics that are not exclusively male or female as defined by the medical establishment in our society. (DCPS Guidance)
- *LGBTQ* is an acronym that stands for “lesbian, gay, bisexual, transgender, and queer/questioning.” (LAUSD Policy)

- *Sexual orientation* refers to a person’s emotional and sexual attraction to another person based on the gender of the other person. Common terms used to describe sexual orientation include, but are not limited to, heterosexual, lesbian, gay, and bisexual. Sexual orientation and gender identity are different. (LAUSD Policy)

**19. How do schools account for individual preferences and the diverse ways that students describe and express their gender?**

Some students may use different terms to identify themselves or describe their situations. For example, a transgender male student may identify simply as male, consistent with his gender identity. The same principles apply even if students use different terms. Some school policies directly address this question and provide additional guidance.

- The Washington State Guidelines recognize how “terminology can differ based on religion, language, race, ethnicity, age, culture and many other factors.”
- Washington’s Federal Way School District issued a resource guide that states: “Keep in mind that the meaning of gender conformity can vary from culture to culture, so these may not translate exactly to Western ideas of what it means to be transgender. Some of these identities include Hijra (South Asia), Fa’afafine (Samoa), Kathoey (Thailand), Travesti (South America), and Two-Spirit (Native American/First Nations).”
- The Washoe County Regulation, responding to cultural diversity within the state, offers examples of “ways in which transgender and gender nonconforming youth describe their lives and gendered experiences: trans, transsexual, transgender, male-to-female (MTF), female-to-male (FTM), bi-gender, two-spirit, trans man, and trans woman.”
- The DCPS Guidance provides this advice to staff: “If you are unsure about a student’s preferred name or pronouns, it is appropriate to privately and tactfully ask the student what they prefer to be called. Additionally, when speaking about a student it is rarely necessary to label them as being transgender, as they should be treated the same as the rest of their peers.”

### Cited Policies on Transgender Students

- Anchorage School District (AK): *Administrative Guidelines: Working with Transgender and Gender Nonconforming Students and Employees* (2015) (on file with ED)
- Atherton High School, Jefferson County School District (KY), *Policy on School Space* (2014), [www.jefferson.k12.ky.us/schools/high/atherton/SBDMDocuments/Policy%20500%20Draft-%20Los%20Angeles%20Unified%20School%20District%20Revised%20Model.pdf](http://www.jefferson.k12.ky.us/schools/high/atherton/SBDMDocuments/Policy%20500%20Draft-%20Los%20Angeles%20Unified%20School%20District%20Revised%20Model.pdf)
- Boulder Valley School District (CO), *Guidelines Regarding the Support of Students and Staff Who Are Transgender and/or Gender Nonconforming* (2016), <http://www.bvsvd.org/policies/Policies/AC-E3.pdf>
- California Interscholastic Federation, *Guidelines for Gender Identity Participation* (2015), [http://static.psb.in.com/m/5/0ndq7wwfgh2em9/Guidelines\\_for\\_Gender\\_Identity\\_Participation.pdf](http://static.psb.in.com/m/5/0ndq7wwfgh2em9/Guidelines_for_Gender_Identity_Participation.pdf)
- Chicago Public Schools (IL), *Guidelines Regarding the Support of Transgender and Gender Nonconforming Students* (2016), [cps.edu/SiteCollectionDocuments/TL\\_TransGenderNonconformingStudents\\_Guidelines.pdf](http://cps.edu/SiteCollectionDocuments/TL_TransGenderNonconformingStudents_Guidelines.pdf)
- District of Columbia Public Schools, *Transgender and Gender-Nonconforming Policy Guidance* (2015), [dcps.dc.gov/publication/dcps-transgender-and-gender-non-conforming-policy-guidance](http://dcps.dc.gov/publication/dcps-transgender-and-gender-non-conforming-policy-guidance)
- El Rancho Unified School District, *Transgender and Gender-Nonconforming Students* (AR 5145.3) (2014), [www.erusd.org/pdf/board\\_policies/5145\\_3.pdf](http://www.erusd.org/pdf/board_policies/5145_3.pdf)
- Federal Way Public Schools (WA), *Working with Transgender and Gender-Nonconforming Students and Staff* (2014-2015), [www.fwps.net/districtresources/wp-content/uploads/sites/32/2013/12/FWPS\\_Transgender3.pdf?7a385a](http://www.fwps.net/districtresources/wp-content/uploads/sites/32/2013/12/FWPS_Transgender3.pdf?7a385a)
- Kansas City 33 School District (MO), *Prohibition Against Discrimination, Harassment and Retaliation (Transgender and Gender Nonconforming Employee and Students)* (2013), [eboard.eboardsolutions.com/ePolicy/policy.aspx?PC=AC-AP\(1\)&Sch=228&S=228&RevNo=1.01&C=A&Z=R](http://eboard.eboardsolutions.com/ePolicy/policy.aspx?PC=AC-AP(1)&Sch=228&S=228&RevNo=1.01&C=A&Z=R)
- Los Angeles Unified School District (CA), *Transgender Students – Ensuring Equity and Nondiscrimination* (2014), [notebook.lausd.net/pls/ptl/docs/PAGE/CA\\_LAUSD/FLDR\\_ORGANIZATIONS/FLDR\\_GENERAL\\_COUNSEL/BUL-6224.1%20TRANSGENDER%20POLICY,%2008-15-14%20-%20ADDED%20ED%20CODE%20221%205.PDF](http://notebook.lausd.net/pls/ptl/docs/PAGE/CA_LAUSD/FLDR_ORGANIZATIONS/FLDR_GENERAL_COUNSEL/BUL-6224.1%20TRANSGENDER%20POLICY,%2008-15-14%20-%20ADDED%20ED%20CODE%20221%205.PDF)

- Maryland State Department of Education, *Providing Safe Spaces for Transgender and Gender Non-Conforming Youth: Guidelines for Gender Identity Non-Discrimination* (2015), [marylandpublicschools.org/MSDE/divisions/studentschoolsvcs/student\\_services\\_alt/docs/ProvidingSafeSpacesTransgendergenderNonConformingYouth012016.pdf](http://marylandpublicschools.org/MSDE/divisions/studentschoolsvcs/student_services_alt/docs/ProvidingSafeSpacesTransgendergenderNonConformingYouth012016.pdf)
- Massachusetts Department of Elementary and Secondary Education, *Guidance for Massachusetts Public Schools Creating a Safe and Supportive School Environment Nondiscrimination on the Basis of Gender Identity* (2014), [www.doe.mass.edu/ssce/GenderIdentity.pdf](http://www.doe.mass.edu/ssce/GenderIdentity.pdf)
- Matanuska-Susitna Borough School District (AK), *Transgender Student Guidelines* (2015), [www.matsuk12.us/site/handlers/filedownload.ashx?moduleinstanceid=10846&dataid=41646&FileName=Title IX--Transgender Students Guidelines.pdf](http://www.matsuk12.us/site/handlers/filedownload.ashx?moduleinstanceid=10846&dataid=41646&FileName=Title IX--Transgender Students Guidelines.pdf)
- Minneapolis Public Schools (MN), *Permissible Grouping Principles* (2014), [policy.mpls.k12.mn.us/uploads/regulation\\_6135\\_a.pdf](http://policy.mpls.k12.mn.us/uploads/regulation_6135_a.pdf)
- New York State Education Department, *Guidance to School Districts for Creating a Safe and Supportive School Environment for Transgender and Gender Nonconforming Students* (2015), [www.p12.nysed.gov/dignityact/documents/Transg\\_GNCGuidanceFINAL.pdf](http://www.p12.nysed.gov/dignityact/documents/Transg_GNCGuidanceFINAL.pdf)
- Oregon Department of Education, *Guidance to School Districts: Creating a Safe and Supportive School Environment for Transgender Students* (2016), [www.ode.state.or.us/groups/supportstaff/hklb/schoolnurses/transgenderstudentguidance.pdf](http://www.ode.state.or.us/groups/supportstaff/hklb/schoolnurses/transgenderstudentguidance.pdf)
- Rhode Island Interscholastic League, *Rules & Regulations* (Article I, Section 22 – Gender Identity), [www.riil.org/files/8214/3861/6354/ARTICLE\\_1\\_ORGANIZATION\\_2015.pdf](http://www.riil.org/files/8214/3861/6354/ARTICLE_1_ORGANIZATION_2015.pdf)
- Shorewood School District (WI), *Nondiscrimination Guidelines Related to Students Who Are Transgender and Students Nonconforming to Gender Role Stereotypes* (2014), [www.shorewood.k12.wi.us/uploaded/Board\\_Documents/Policies/411\\_Guidelines\\_and\\_Exhibit.pdf?1393865642372](http://www.shorewood.k12.wi.us/uploaded/Board_Documents/Policies/411_Guidelines_and_Exhibit.pdf?1393865642372)
- Washington Office of State Superintendent of Public Instruction, *Prohibiting Discrimination in Washington Public Schools* (2012), [www.k12.wa.us/Equity/pubdocs/ProhibitingDiscriminationInPublicSchools.pdf](http://www.k12.wa.us/Equity/pubdocs/ProhibitingDiscriminationInPublicSchools.pdf)
- Washoe County School District (NV), *Gender Identity and Gender Non-Conformity – Students* (2015), [washoecountyschools.net/csi/pdf\\_files/5161%20Reg%20-%20Gender%20Identity%20v1.pdf](http://washoecountyschools.net/csi/pdf_files/5161%20Reg%20-%20Gender%20Identity%20v1.pdf)

## Select Federal Resources on Transgender Students

- U.S. Department of Education
  - Office for Civil Rights and U.S. Department of Justice's Civil Rights Division, *Dear Colleague Letter: Transgender Students* (May 13, 2016), [www.ed.gov/ocr/letters/colleague-201605-title-ix-transgender.pdf](http://www.ed.gov/ocr/letters/colleague-201605-title-ix-transgender.pdf)
  - Office for Civil Rights, *Resources for Transgender and Gender-Nonconforming Students*, [www.ed.gov/ocr/lgbt.html](http://www.ed.gov/ocr/lgbt.html)
  - Office for Civil Rights, *Publications on Title IX*, [www.ed.gov/about/offices/list/ocr/publications.html#TitleIX](http://www.ed.gov/about/offices/list/ocr/publications.html#TitleIX)
  - Office for Civil Rights, *How to File a Discrimination Complaint*, [www.ed.gov/about/offices/list/ocr/docs/howto.html](http://www.ed.gov/about/offices/list/ocr/docs/howto.html)
  - National Center on Safe Supportive Learning Environments, [safesupportivelearning.ed.gov](http://safesupportivelearning.ed.gov)
  
- U.S. Department of Health and Human Services
  - Administration for Children and Families, *Resources for Serving Lesbian, Gay, Bisexual and Transgender Youth*, <http://ncfy.acf.hhs.gov/features/serving-lesbian-gay-bisexual-transgender-and-questioning-youth-open-arms/resources-serving>
  - Centers for Disease Control and Prevention, *LGBT Youth Resources*, [www.cdc.gov/lgbthealth/youth-resources.htm](http://www.cdc.gov/lgbthealth/youth-resources.htm)
  - Homelessness Resource Center, *Homeless Populations: LGBTQI2-S Youth*, <http://homeless.samhsa.gov/Channel/LGBTQ-153.aspx>
  - Stopbullying.gov, *Bullying and LGBT Youth*, <http://www.stopbullying.gov/at-risk/groups/lgbt>
  
- U.S. Department of Housing and Urban Development
  - *Community-Wide Prevention of LGBTQ Youth Homelessness* (June 2015), <https://www.hudexchange.info/resources/documents/LGBTQ-Youth-Homelessness-Prevention-Initiative-Overview.pdf>

- U.S. Department of Labor
  - Office of Job Corps, *Directive: Job Corps Program Instruction Notice No. 14-31* (May 1, 2015), [https://supportservices.jobcorps.gov/Program Instruction Notices/pi 14 31.pdf](https://supportservices.jobcorps.gov/Program%20Instruction%20Notices/pi_14_31.pdf)