

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF FLORIDA
TALLAHASSEE DIVISION**

JANE DOE et al.,

Plaintiffs,

v.

JOSEPH A. LADAPO et al.,

Defendants.

Civil No. 4:23-cv-00114-RH-MAF

**PLAINTIFFS' MEMORANDUM OF LAW IN SUPPORT OF THEIR
MOTION FOR CLASS CERTIFICATION AND APPOINTMENT OF
CLASS COUNSEL**

I. Introduction

Plaintiffs Jane Doe, individually and on behalf of her minor daughter Susan Doe, Brenda Boe, individually and on behalf of her minor son Bennett Boe, Carla Coe, individually and on behalf of her minor daughter Christina Coe, Fiona Foe, individually and on behalf of her minor daughter Freya Foe, Gloria Goe, individually and on behalf of her minor son Gavin Goe, Linda Loe, individually and on behalf of her minor daughter Lisa Loe, Patricia Poe, individually and on behalf of her minor son Paul Poe, and Adult Plaintiffs Lucien Hamel, Olivia Noel, Rebecca Cruz Evia, and Kai Pope (collectively, "Plaintiffs") respectfully submit this Memorandum of Law in support of their motion for class certification and appointment of class

counsel pursuant to Rules 23(a), 23(b)(2) and 23(g) of the Federal Rules of Civil Procedure.

Florida Senate Bill 254 (“SB 254”), its related emergency rules and regulations, and the Boards of Medicine and Osteopathic Medicines’ rules 64B8-0.019 and 64B15-14.014, Fla. Admin. Code (collectively, the “Transgender Medical Restrictions”) have erected unconstitutional obstacles to transgender persons obtaining medically necessary transition-related care for gender dysphoria. Unless enjoined by this Court, the Transgender Medical Restrictions will have a devastating impact on the physical and mental health of transgender persons in Florida. Because these legal obstacles affect all transgender persons in Florida in similar ways, Plaintiffs in this action seek a class-wide declaratory judgment that the Transgender Medical Restrictions violate the Fourteenth Amendment to the United States Constitution, as well as a class-wide injunction against their enforcement.

To that end, Plaintiffs now seek certification of three Plaintiff Classes (defined below), along with appointment of representatives and counsel for each class. All of the requirements for class certification are met here. The named class representatives have Article III standing; the proposed classes are ascertainable and satisfy Rule 23(a); and certification is appropriate under Rule 23(b)(2), which was specifically intended to facilitate the provision of class-wide non-monetary relief in

civil rights actions like this one where governmental defendants are enforcing common, unconstitutional legal restrictions against an identifiable group of persons.

For the reasons set forth herein, the Court should certify the Plaintiff Classes, appoint class representatives and appoint the undersigned as class counsel.

II. Factual and Procedural Background

A. Overview of Plaintiffs' Claims

As set forth in their Third Amended Complaint (Dkt. 118), Plaintiffs are pursuing a constitutional challenge to SB 254, its related regulations promulgated by the Florida Boards of Medicine and Osteopathic Medicine (the “Boards”), and 64B8-9.019 and 64B15-14.014, Fla. Admin. Code, that single out transgender minors and adults in order to severely limit, and in the case of minors, completely ban their ability to obtain established, medically necessary transition-related care. Under the Transgender Medical Restrictions, healthcare providers are subject to criminal and civil penalties if they prescribe or administer any transition-related medications to transgender minors or violate restrictions on providing care to transgender adults. (Dkt. 118 ¶ 97.) These restrictions have no medical purpose and serve only to prevent transgender people from obtaining needed, evidence-based care. (*Id.* ¶¶ 94, 107-14.)

With respect to transgender minors specifically, Section 5 of SB 254, and rules adopted by the Boards that pre-date SB 254,¹ ban altogether the provision of transition-related care, including puberty blockers and hormone therapies, for any minors who were not already actively receiving such prescriptions as of May 17, 2023 (the “Treatment Bans”). (*Id.* ¶ 99.) Under the plain language of the Treatment Bans, no transgender minor in need of such care may begin receiving it for the first time in the State of Florida after May 17, 2023 (and, under the pre-SB 254 rules, after March 16 and 28, 2023). Even for transgender minors who were receiving transition-related prescriptions as of that date, continued treatment is permissible only if the minor satisfies the onerous informed consent requirements developed by the Boards and complies with SB 254’s other restrictions on transition-related care, discussed below. (*Id.*)

The Transgender Medical Restrictions (and, in most cases, outright prohibition) on well-established medical care for transgender minors violate their parents’ fundamental right under the Due Process Clause of the Fourteenth

¹ The Board of Medicine adopted a ban on medical care for transgender minors effective on March 16, 2023 (Board of Medicine, Rule 64B8-9.019, Fla. Admin. Code). The Board of Osteopathic Medicine adopted a ban on medical care for transgender minors effective March 28, 2023 (Board of Osteopathic Medicine, Rule 64B15-14.014, Fla. Admin. Code). Both rules authorized continued treatment for adolescents receiving care prior to the adoption of the rule. SB 254 codified by statute the bans included in the rules adopted by the Boards, created onerous criminal penalties, and like the rules adopted by the Boards that predated it, authorized continued care for adolescents whose care started prior to SB 254’s effective date.

Amendment to make medical decisions to protect the health and wellbeing of their adolescent children. (*Id.* ¶4.) They also violate the Fourteenth Amendment’s Equal Protection Clause because they discriminate based on transgender status and sex and do not serve even a legitimate governmental interest, much less a compelling or important one. (*Id.* ¶5.) Indeed, on June 6, 2023, the Court granted a preliminary injunction against the enforcement of the Treatment Bans, finding that both the parental rights and equal protection claims were likely to succeed on the merits. (Dkt. 90, at 26–27 (Preliminary Injunction Opinion (“PI Op.”)).)

SB 254 and the Boards’ related emergency rules further restrict the provision of transition-related care to transgender adults by: (1) prohibiting non-physicians, such as advanced practice registered nurse practitioners, from providing treatment for gender dysphoria; (2) mandating the use of “informed consent” forms that contain blatantly false information, deviate from the well-accepted standards of care for gender dysphoria and impose numerous medically-unnecessary requirements; and (3) requiring transgender patients to see a physician in-person in order to give informed consent and sign the forms in the presence of a third-party witness. All of these treatment restrictions are encompassed within the Transgender Medical Restrictions, as defined above. (Dkt. 118 ¶¶ 101–03, 107–14.) As explained in greater detail in Plaintiffs’ Memorandum of Law in support of their July 24, 2023 motion for a preliminary injunction (Dkt. 116), the Transgender Medical

Restrictions violate the Equal Protection Clause because they discriminate on the basis of transgender status and sex and cannot satisfy heightened constitutional scrutiny.

B. The Proposed Classes

In order to remedy the irreparable harm caused by Florida’s unconstitutional restrictions on transition-related care, Plaintiffs seek declaratory relief and an injunction against enforcement of the Transgender Medical Restrictions. (Dkt. 118 ¶ 6.) They seek such relief on behalf of themselves and all similarly-situated transgender persons in the State of Florida. To that end, Plaintiffs respectfully seek certification under Rule 23 of the following three plaintiff classes – Class 1, Class 2 and Class 3 (collectively, the “Plaintiff Classes”).

i. Class 1 – Challenging the Treatment Ban

Plaintiffs’ first proposed Class (“Class 1”) comprises transgender minors in Florida, as well as their parents, who are banned altogether from obtaining transition-related care by the Treatment Bans. More specifically, Class 1 is defined as:

All transgender minors in the State of Florida who are prohibited from initiating treatment with puberty blockers and/or hormone therapy as a result of the Treatment Bans, and the parents of all such minors.

Class 1 seeks class-wide declaratory and injunctive relief that would prevent the enforcement of the Treatment Bans on the grounds that they violate the equal

protection rights of the minors themselves and the substantive due process rights of their parents.

Plaintiffs Susan and Jane Doe, Gavin and Gloria Goe, and Lisa and Linda Loe seek appointment as the class representatives for Class 1. As the Court found in its Preliminary Injunction Opinion, all three minor Plaintiffs suffer from gender dysphoria but are prevented from commencing treatment with puberty blockers as a result of the Treatment Bans. (Dkt. 90 at 13–16.) The Court further found, based on the record before it, that “qualified professionals have properly evaluated the children’s medical conditions and needs in accordance with the well-established standards of care, and that the [parent] plaintiffs and their children, in consultation with their treating professionals, have determined that the benefits of treatment with GnRH agonists [as puberty blockers], and eventually with cross-sex hormones, will outweigh the risks.” (*Id.* at 16.) Indeed, the Court determined the minor Plaintiffs “will suffer irreparable harm – the unwanted and irreversible onset and progression of puberty in their natal sex – if they do not promptly begin treatment with GnRH agonists.” (*Id.* at 39–40.) Other members of Class 1 are subject to the same bans on receiving transition-related treatment and are suffering the same injury as the proposed representatives for Class 1.

ii. Class 2 – Challenging the Transgender Medical Restrictions Applicable to Transgender Minors

Transgender minors who are still ostensibly eligible to receive transition-

related care under SB 254 and the Boards' rules that pre-date passage of SB 254, but remain subject to the informed consent and related obstacles and barriers created by the Transgender Medical Restrictions in their attempts to obtain treatment, are covered by Plaintiffs' second proposed Class ("Class 2"). Class 2 is defined as:

All transgender minors in the State of Florida who were being actively treated with puberty blockers and/or hormone therapies as of May 17, 2023, and since that date have attempted, are attempting or will attempt to obtain access to such treatments that are subject to the Transgender Medical Restrictions applicable to minors, and the parents of all such minors.

In the same vein as Class 1, Class 2 seeks class-wide declaratory and injunctive relief that would prevent the enforcement of the Transgender Medical Restrictions against transgender minors on the grounds that they violate the equal protection rights of the minors themselves and the substantive due process rights of their parents.

Plaintiffs Freya and Fiona Foe, and Paul and Patricia Poe, seek appointment as the class representatives for Class 2. Freya Foe is a ten-year-old transgender girl. In December 2022, Freya's doctors determined that puberty blocking medication was medically necessary for the treatment of her gender dysphoria. With the consent of her parents, Freya began puberty blocking medication, after which her wellbeing and performance in school improved. (Dkt. 118 ¶¶ 130–34.) Following the passage of SB 254, Freya has become subject to the Transgender Medical Restrictions, which have imposed numerous obstacles on her efforts to access care. (*Id.* ¶ 135.) Paul Poe is a nine-year-old transgender boy who began treatment with puberty blockers

in February 2023 to alleviate his gender dysphoria. (*Id.* ¶¶ 150–54.) However, Paul’s provider discontinued his treatment as a result of the Transgender Medical Restrictions. Paul’s family must find medical providers outside of Florida to secure the care he needs, which presents a hardship to the family and potential harms because of disruption to the continuity of his care, as long as the Transgender Medical Restrictions applicable to minors are in effect. (*Id.* ¶ 155.) Other members of Class 2 are subject to the same restrictions on receiving transition-related treatment and are suffering the same injury as the proposed representatives for Class 2.

iii. Class 3 – Challenging the Transgender Medical Restrictions Applicable to Transgender Adults

Plaintiffs’ final proposed Class (“Class 3”) encompasses Florida’s transgender adults who, in their efforts to obtain medically necessary transition-related care, are subject to the Transgender Medical Restrictions applicable to adults contained in SB 254 and the Boards’ emergency rules. Class 3 is defined as:

All transgender adults in the State of Florida who have attempted, are attempting or will attempt to obtain access to transition-related medications or surgeries that are subject to the Transgender Medical Restrictions applicable to transgender adults.

Class 3 seeks class-wide declaratory and injunctive relief that would prevent the enforcement of the Transgender Medical Restrictions against Transgender Adults on the grounds that they violate the Equal Protection Clause.

Plaintiffs Lucien Hamel, Olivia Noel, Rebecca Cruz Evia, and Kai Pope seek appointment as the class representatives for Class 3. As explained more fully in the Declarations each of these Plaintiffs submitted in support of Plaintiffs’ July 24, 2023 preliminary injunction motion (Dkt. 115), all are transgender adults in Florida who are experiencing significant obstacles to obtaining transition-related care as a result of the Transgender Medical Restrictions. The result has been to leave all of them struggling to find alternative sources of care and experiencing the negative health effects of untreated gender dysphoria.

- Plaintiff Kai Pope is a 51-year-old transgender man with gender dysphoria who was scheduled to undergo genital surgery in September 2023 (after a year of preparation and waiting). But the surgery was canceled in July 2023 because of the Transgender Medical Restrictions. (Dkt. 115-1 ¶¶ 2–4, 9–13 (Declaration of Kai Pope in Support of Plaintiffs’ Motion for Preliminary Injunction (“Pope Decl.”)).) If Kai cannot get the scheduled surgery, he will continue to suffer the effects of untreated gender dysphoria. (*Id.* ¶¶ 11–13.)

- Plaintiff Lucien Hamel is a 27-year-old transgender man who lives and works in Florida with his wife and child. (Dkt. 115-2 ¶¶ 2–3 (Declaration of Lucien Hamelin Support of Plaintiffs’ Motion for Preliminary Injunction (“Hamel Decl.”)).) The medical provider from

whom he currently receives his hormone therapy is licensed as an autonomous Advanced Practice Registered Nurse – Nurse Practitioner (“APRN-NP”) experienced in the treatment of gender dysphoria, but who can no longer legally prescribe transition-related medications because of the Transgender Medical Restrictions. (*Id.* ¶¶ 7-9.) Lucien received his last testosterone shot on June 28 and has been without medication since that time. (*Id.* ¶¶ 9–10.) Lucien has been searching for a physician to whom he could transfer his care for the treatment of gender dysphoria, but has not been able to find one. (*Id.* ¶¶ 9–14.) And even at a point if and when he can establish with a new treatment provider, he will face a disruption to his ongoing medical care with a provider with whom he has a trusted relationship. (*Id.* ¶ 13.) Being forced to go without testosterone has had, and will continue to have, devastating consequences for Lucien physically, emotionally, and psychologically. (*Id.* ¶¶ 12–14.)

- Plaintiff Olivia Noel is a transgender woman who resides in Florida. (Dkt. 115-3 ¶¶ 2–3 (Declaration of Olivia Noel in Support of Plaintiffs’ Motion for Preliminary Injunction (“Noel Decl.”)).) She began receiving transition-related care in May 2016 at the age of 19. (*Id.* ¶ 4.) Olivia had continuous medical support for treatment of gender

dysphoria since she started treatment, including now having been on hormones for 7 years. (*Id.* ¶ 8.) Most recently, she has been receiving medical care through a physician’s assistant (“PA”) at Planned Parenthood, who is no longer permitted to prescribe transition-related medications due to SB 254. (*Id.* ¶¶ 8–9.) Olivia has less than one month left of her estrogen prescription but has not been able to find a physician to prescribe her necessary care once that prescription runs out. (*Id.* ¶¶ 10–14.) Even if she could find a physician, Olivia is not able to find a psychiatrist or psychologist to perform the evaluation she needs under the requirements reflected in the Boards’ informed consent forms to initiate care with another doctor in a timely way. (*Id.* ¶¶ 16–17.) She is also being harmed by other obstacles imposed by the Transgender Medical Restrictions that prevent her from obtaining care for her gender dysphoria through telehealth, which has been a primary way for her to obtain care. (*Id.* ¶¶ 14-17.)

- Finally, Plaintiff Rebecca Cruz Evia is a transgender woman who resides in St. Lucie County, Florida. (Dkt. 115-4 ¶¶ 2–3 (Declaration of Rebecca Cruz Evia in Support of Plaintiffs’ Motion for Preliminary Injunction (“Cruz Evia Decl.”)).) Rebecca has received various forms of transition-related care for the treatment of her gender

dysphoria and was scheduled to undergo medically necessary vaginoplasty surgery at the University of Miami on August 15, 2023. (*Id.* ¶¶ 5–9.) Before the surgery day, her surgeon informed her that because of the Transgender Medical Restrictions, the procedure was cancelled. (*Id.* ¶ 10.) Upon receiving the call, Rebecca was devastated and shocked, as she was weeks away from obtaining this essential surgery. (*Id.* ¶¶ 9–12.) She has sought out alternative providers but has not been able to access any other option for getting the surgery done. (*Id.* ¶ 11.) Without the surgery, Rebecca will continue to suffer harms from the gender dysphoria she experiences. (*Id.* ¶ 12.)

Other members of Class 3 are subject to the same restrictions on receiving transition-related treatment and are suffering the same injury as the proposed representatives for Class 3. Indeed, stories similar to those above are playing out all over Florida every day since the Transgender Medical Restrictions took effect.

For the reasons explained below, all three Plaintiff Classes satisfy the requirements for certification under Rule 23.

III. Argument

To grant a motion for class certification, the Court “must determine that at least one named class representative has Article III standing to raise each class subclaim.” *Prado-Steiman v. Bush*, 221 F.3d 1266, 1279 (11th Cir. 2000); *Murray*

v. Auslander, 244 F.3d 807, 810 (11th Cir. 2001). Second, the Court must find the proposed class is “adequately defined and clearly ascertainable” before considering the Rule 23(a) factors. *Cherry v. Dometic Corp.*, 986 F.3d 1296, 1302–04 (11th Cir. 2021) (holding that ascertainability is an implied prerequisite of Rule 23 that plaintiffs must satisfy, but that the so-called “administrative feasibility” standard adopted in other federal circuits is not a requirement at all under the Rule).

Assuming it finds standing and ascertainability satisfied, the Court must then conduct a “rigorous analysis” to ensure that the proposed class satisfies all four requirements of Rule 23(a) and at least one of Rule 23(b)’s requirements. *Florida Educ. Ass’n v. Dep’t of Educ.*, Case No. 4:17cv414-RH-CAS, 2019 WL 8219403, at *2 (N.D. Fla. Jan. 3, 2019) (Hinkle, J.). Rule 23(a) requires that: (1) the “class is so numerous that joinder of the members is impracticable;” (2) there “are questions of law or fact common to the class;” (3) the “claims or defenses of the representative parties are typical of the claims or defenses of the class;” and (4) the “representative parties will fairly and adequately protect the interests of the class.” FED. R. CIV. P. 23(a).

As to Rule 23(b), Plaintiffs here seek certification under Rule 23(b)(2), which permits certification where “the party opposing the class has acted or refused to act on grounds that apply generally to the class, so that final injunctive relief or corresponding declaratory relief is appropriate respecting the class as a whole[.]”

FED. R. CIV. P. 23(b)(2). Rule 23(b)(2) is the “traditional vehicle to vindicate the widespread deprivation of civil rights[.]” *Colonel Fin. Mgm’t Officer v. Austin*, 622 F. Supp. 3d 1187, 1204 (M.D. Fla. 2022); *Hernandez v. Medows*, 209 F.R.D. 665, 667 (S.D. Fla. 2002) (“Rule 23(b)(2) was intended ‘primarily to facilitate civil rights class actions, where the class representatives typically sought broad injunctive or declaratory relief against discriminatory practices.’” (quoting *Penson v. Terminal Transport Co., Inc.*, 634 F.2d 989, 993 (5th Cir. 1981))). Plaintiffs here seek only declaratory and injunctive relief against Florida’s Transgender Medical Restrictions, making this case a textbook candidate for class certification under Rule 23(b)(2).

Plaintiffs bear the burden of establishing that Rule 23’s prerequisites are satisfied. *G.H. v. Tamayo*, 339 F.R.D. 584, 588 (N.D. Fla. 2021) (Hinkle, J). Although the “rigorous analysis” required under Rule 23 “will entail some overlap with the merits of the plaintiff’s underlying claim[.]” *Wal-Mart Stores, Inc. v. Dukes*, 564 U.S. 338, 351 (2011), the rule nevertheless “grants no license to engage in free-ranging merits inquiries at the certification stage.” *Amgen, Inc. v. Conn. Ret. Plans & Tr. Funds*, 568 U.S. 455, 466 (2013); *see generally G.H.*, 339 F.R.D. at 588.

Plaintiffs here readily meet the requirements for certification of the Plaintiff Classes. The named Plaintiffs have Article III standing, and each of the Plaintiff Classes is “clearly ascertainable” under *Cherry*. Plaintiffs also satisfy Rule 23(a)’s numerosity, commonality, typicality and adequacy requirements, and certification

of the Plaintiff Classes under Rule 23(b)(2) is appropriate. The Court should grant Plaintiffs' motion in its entirety. *See Cherry*, 986 F.3d at 1303 (“The Supreme Court has made clear that district courts must grant class certification in ‘each and every case’ where the conditions of Rule 23(a) and (b) are met.” (quoting *Shady Grove Orthopedic Assocs., P.A. v. Allstate Ins. Co.*, 559 U.S. 393, 398–400 (2010))).

A. The Proposed Class Representatives Have Article III Standing

For each claim asserted by a class, at least one named class representative must have Article III standing to assert that same claim. *Prado-Steinman*, 221 F.3d at 1279–80. Article III standing requires the plaintiff to show an injury-in-fact that is traceable to the defendants' conduct and redressable by a judicial decision. *Lujan v. Defenders of Wildlife*, 504 U.S. 555, 560-61 (1992). An injury-in-fact means a concrete and particularized, and actual or imminent, invasion of a legally-protected interest possessed by the plaintiff. *Id.* To establish standing to seek prospective injunctive relief, a plaintiff must show “a realistic danger of sustaining a direct injury as a result of the statute’s operation or enforcement.” *Babbitt v. United Farm Workers Union*, 442 U.S. 289, 298 (1979). However, such a plaintiff “does not have to await the consummation of the threatened injury to obtain preventive relief.” *Id.* (citing *Pennsylvania v. West Virginia*, 262 U.S. 553, 593 (1923)).

In this case, the standing inquiry is straightforward. With respect to the Class 1 representatives, the Court has already found at the preliminary injunction stage

that Susan and Jane Doe, Gavin and Gloria Goe, and Lisa and Linda Loe will suffer immediate irreparable harm if the Treatment Bans are enforced. (Dkt. 90 at 39–40.) That is more than sufficient to establish Article III standing to prosecute the substantive due process and equal protection claims asserted by Class 1.

The record further demonstrates that each of the Class 2 and Class 3 representatives has been prevented from accessing transition-related care as a result of the enactment and operation of the Transgender Medical Restrictions. (*See* Sections II.B.ii. and iii., *supra*.) Treatments have been discontinued; prescriptions are not being re-filled; previously-scheduled, essential surgeries have been canceled; and patients are unable to meet the prerequisites for care. All of this has been happening to the Class 2 and Class 3 representatives in real time since SB 254 came into effect. These disruptions to transgender patient care constitute concrete, and actual or imminent, injuries-in-fact that are traceable to the enactment and operation of the Transgender Medical Restrictions. A decision from this Court declaring the Transgender Medical Restrictions unconstitutional and enjoining their enforcement will redress those injuries. The Class 2 representatives thus have standing to bring the substantive due process and equal protection claims asserted by Class 2, and the Adult Plaintiffs have standing to bring the equal protection claim asserted by Class 3. *See Hernandez*, 209 F.R.D. at 668 (named plaintiffs whose prescription drug coverage is or will be negatively impacted without notice and opportunity for a fair

hearing have standing to seek class-wide declaratory and injunctive relief); *Dekker v. Weida*, Findings of Fact and Conclusions of Law, Case No. 4:22cv325-RH-MAF (Dkt. 246), at 12 (Hinkle, J.) (holding that injury-in-fact, traceability and redressability all satisfied for transgender plaintiffs challenging the loss of Medicaid payments for medically necessary puberty blockers and hormone treatments).

B. The Proposed Plaintiff Classes Are Ascertainable

As a prerequisite for certification, a proposed class must be “adequately defined and clearly ascertainable” – meaning that “its membership is capable of being determined.” *Cherry*, 986 F.3d at 1303 (cleaned up). It is unsettled in this Circuit whether the ascertainability requirement applies outside the context of Rule 23(b)(3) damages classes. *See Braggs v. Dunn*, 137 F.R.D. 634, 671 (M.D. Ala. 2016) (“Defendants have not cited, and the court is not aware, of any cases within this circuit applying the ascertainability requirement to a Rule 23(b)(2) class, much less any binding precedent doing so.”). Because of the indivisible nature of the remedy in a suit for declaratory and injunctive relief (and the lack of procedural requirements such as class-wide notice), a Rule 23(b)(2) class definition need not be as precise as that of a 23(b)(3) class. *See Yaffe v. Powers*, 454 F.2d 1362, 1366 (1st Cir. 1972). Even if, however, the ascertainability factor does apply, Plaintiffs’ proposed class definitions are ascertainable. A class is “identifiable” when “its members can be ascertained by reference to objective criteria.” *Bussey v. Macon*

Co. Greyhound Park, Inc., 562 Fed. Appx. 782, 787 (11th Cir. 2014). However, class membership does not have to be “capable of *convenient* determination.” *Cherry*, 986 F.3d at 1303.

The Plaintiff Classes readily satisfy this standard. At their core, each of the three Class definitions encompass transgender persons in Florida who are seeking, have attempted to seek or will in the future attempt to seek medical treatments for gender dysphoria that are banned or restricted under the terms of the Transgender Medical Restrictions. Once a person meets these basic criteria, their age and (for minors) active treatment status as of the effective date of the Transgender Medical Restrictions will determine the specific Class in which they are a member (along with the membership of the parents of transgender minors). Membership in each of the three Plaintiff Classes is thus capable of being determined. *See, e.g., Access Now, Inc. v. Ambulatory Surgery Ctr. Grp., Ltd.*, 197 F.R.D. 522, 525 (S.D. Fla. 2000) (proposed class that extended to all disabled persons who were entitled to access to defendants’ health care facilities was capable of having membership determined). And, since Plaintiffs do not seek damages in this action, the Court will never be faced with the necessity of having to determine class membership for purposes of filing a claim against a common fund. Rather, if Plaintiffs prevail on the merits at trial, any class-wide declaratory and injunctive relief entered by the Court will operate for the benefit of all class members without the need for

individualized determinations of membership.

C. The Proposed Plaintiff Classes Satisfy Rule 23(a)

1. Numerosity

Rule 23(a)(1) requires that a class must be large enough to render joinder of all members impracticable. *Hernandez*, 209 F.R.D. at 669; *G.H.*, 339 F.R.D. at 588. “Plaintiffs need not present an exact number for the class.” *Hernandez*, 209 F.R.D. at 669; *Austin*, 622 F. Supp. 3d at 1206–07 (“Rule 23(a)(1) imposes a ‘generally low hurdle,’ and a plaintiff need not show the precise number of members in the class.” (quoting *Muzuco v. ReSubmitIt, LLC*, 297 F.R.D. 504, 514 (S.D. Fla. 2013))) (cleaned up). While there is not “fixed rule” or “definite standard” for numerosity, generally less than twenty-one members is insufficiently numerous, while more than forty members is adequate for certification. *Hernandez*, 209 F.R.D. at 669; *G.H.*, 339 F.R.D. at 588 (citing *Cox v. Am. Cast Iron Pipe Co.*, 784 F.2d 1546, 1553 (11th Circ. 1986)).

In 2016, data from the Center for Disease Control’s Behavioral Risk Factor Surveillance System suggested that 0.6% of U.S. adults identify as transgender. (Dkt. 118 ¶ 56.) Florida is estimated to have the second-largest population of transgender adults in the U.S., with roughly 94,400 adults identifying as transgender, per the Williams Institute’s June 2022 report. With respect to transgender minors, the Williams Institute estimates 16,200 transgender minors aged 13-17 are residing

in Florida. (*Id.*; Declaration of Thomas E. Redburn, Jr. (“Redburn Decl.”), Ex. E at 9.)

Given these estimates, it is highly likely each of the Plaintiff Classes contains thousands of members – and a virtual certainty that each contains more than 40 members. That is sufficient to satisfy the numerosity requirement. *See Florida Educ. Ass’n*, 2019 WL 8219403, at *2 (existence of 4,000 potential members in one class, and 6,500 in another, sufficient to establish numerosity); *G.H.*, 339 F.R.D. at 588 (Florida Department of Juvenile Justice’s data showing it placed between 2,720 and 3,853 children in solitary confinement from 2014 to 2020 was “easily enough” to meet numerosity requirement); *Austin*, 622 F. Supp. 3d at 1207 (“The Marine Corps has denied with finality hundreds of appeals from religiously objecting Marines; thus the class is sufficiently numerous.”); *Ibrahim v. Acosta*, 326 F.R.D. 696, 699–700 (S.D. Fla. 2018) (finding class size of 64 persons sufficient to satisfy numerosity).

2. Commonality

Rule 23(a)(2) requires that at least one issue of law or fact exists that is common to the class – meaning that it is “capable of classwide resolution” such that “determination of its truth or falsity will resolve an issue that is central to the validity of each one of the claims in one stroke.” *Dukes*, 564 U.S. at 350; *G.H.*, 339 F.R.D. at 589 (“The action ‘must involve issues that are susceptible to class-wide proof.’”)

(quoting *Auslander*, 244 F.3d at 811); *Hernandez*, 209 F.R.D. at 669 (“Commonality requires that there is at least one issue affecting all or a significant number of proposed class members.”); *Hoffer v. Jones*, 323 F.R.D. 694, 697 (N.D. Fla. 2017) (“There is no requirement as to the number of common questions – even a single common question will do.”). “What matters to class certification ... is not the raising of common ‘questions’ – even in droves – but rather, the capacity of a class-wide proceeding to generate common answers apt to drive the resolution of the litigation.” *Dukes*, 564 U.S. at 350 (cleaned up). However, “factual differences between class members do not preclude a finding of commonality, as long as common questions of law exist.” *Hernandez*, 209 F.R.D. at 669.

Where, as in this case, the plaintiffs allege a common discriminatory device – such as an unconstitutionally-discriminatory statute or regulation – the commonality requirement is readily satisfied. *See Access Now*, 197 F.R.D. at 526 (“The alleged existence of common discriminatory practices on the part of the Defendants satisfies the Rule 23 requirement of commonality.”); *Hernandez*, 209 F.R.D. at 669 (“Where a common scheme is alleged, common questions of law or fact will exist.”); *G.H.*, 339 F.R.D. at 589 (finding commonality satisfied where the “plaintiffs challenge practices that are consistently applied to children in Department [of Juvenile Justice] facilities across the state”). In that kind of case, the class members all share the same injury in the form of a violation of their constitutional rights through the operation

of a discriminatory government policy. *See Austin*, 622 F. Supp. 3d at 1207 (citing *Doster v. Kendall*, 342 F.R.D. 117, 124 (S.D. Ohio 2022)); *Access Now*, 197 F.R.D. at 526 (“[T]he common course of conduct of the Defendants in relation to the Class also supports the commonality requirement.”).

Commonality is readily apparent for Class 3. Resolution of whether the Transgender Medical Restrictions applicable to transgender adults violate the Fourteenth Amendment’s Equal Protection Clause will decide in one stroke *a* central – perhaps *the* central – issue underlying Class 3’s claims. The answer to that constitutional question will be based on class-wide proof and will be the same for every member of Class 3. *G.H.*, 339 F.R.D. at 589 (plaintiffs’ challenge to the constitutionality of the standard for placing children in solitary confinement satisfies commonality requirement); *Austin*, 622 F. Supp. 3d at 1207 (plaintiffs’ contention that uniform analysis applied by Marine Corps to requests for religious accommodations violated the Religious Freedom Restoration Act was sufficient for commonality); *Florida Educ. Ass’n*, 2019 WL 8219403, at *3 (commonality satisfied where claim that SAT/ACT requirement for teacher bonuses has a disparate impact based on race or age would produce the same answer for every class member). Factual differences concerning the specific treatments sought by, and the particular circumstances facing, each member of Class 3 do not negate the existence of this overriding constitutional issue that is common to all. *See Hernandez*, 209

F.R.D. at 671 (holding that factual differences among members of class of Medicaid patients “do not negate the overriding common issue of law and fact, namely, is the Defendant violating the Medicaid Act and regulations, and the Due Process Clause, by failing to ensure adequate notice and fair hearing rights on uniform basis to all Medicaid recipients who are denied prescription benefits”). That overriding common issue is enough to satisfy Rule 23(a)(2).

While the analysis is slightly more complicated for Classes 1 and 2, the result is the same: commonality has been satisfied. Class 1 and Class 2 each challenges the constitutionality of the Treatment Bans and the Transgender Medical Restrictions applicable to minors, respectively, as violative of both the minor Plaintiffs’ rights to equal protection of the laws and the parental Plaintiffs’ separate substantive due process right to control their children’s medical treatment. Although these legal theories are distinct, they share a common controlling issue: whether the Treatment Bans and Transgender Medical Restrictions applicable to minors, respectively, survive heightened constitutional scrutiny. This Court highlighted this common connection between the two theories in its Preliminary Injunction Opinion. (Dkt. 90.) After holding that the ban on transition-related treatment for minors in SB 254 and the Boards’ rules likely failed heightened scrutiny under the Equal Protection Clause because it lacked any legitimate state interest whatsoever (and so was not even rationally related to such an interest), the Court went on to hold that

the parents would likely succeed on the merits of their Due Process Clause claim because “as set out above, there is no rational basis, let alone a basis that would survive heightened scrutiny, for prohibiting these treatments in appropriate circumstances.” (Dkt. 90 at 25–27.) In other words, a judicial determination that heightened scrutiny was not satisfied under one constitutional provision also led inexorably to the conclusion that it was not satisfied under the other provision either. Thus, the common question of the application of heightened constitutional scrutiny – the answer to which will be based on class-wide proof and will be the same for all class members – unifies the members of Classes 1 and 2, respectively, and is sufficient to satisfy Rule 23(a)(2).

Moreover, because each of the Plaintiff Classes challenges the constitutionality of statutory and regulatory provisions that operate in the case of each Class as a common scheme of discrimination against their respective members, the requisite commonality exists. *See Access Now*, 197 F.R.D. at 526; *Hernandez*, 209 F.R.D. at 669; *G.H.*, 339 F.R.D. at 589.

3. Typicality

To meet Rule 23(a)(3)’s typicality requirement, the named class representatives must “possess the same interest and suffer the same injury as the class members.” *Dukes*, 564 U.S. at 348–49 (cleaned up); *see also Hernandez*, 209 F.R.D. at 671 (“The central inquiry in determining whether a proposed class has

‘typicality’ is whether the ‘class representatives’ claims have the same essential characteristics as the claims of the other members of the class.’”) (quoting *In re Amerifirst Securities Litigation*, 139 F.R.D. 423, 428 (S.D. Fla. 1991)); *Acosta*, 326 F.R.D. at 700 (“The typicality analysis turns on ‘whether other members have the same or similar injury, whether the action is based on conduct which is not unique to the named class plaintiffs, and whether other class members have been injured by the same course of conduct.’”) (quoting *In re Checking Account Overdraft Litig.*, 286 F.R.D. 645, 653 (S.D. Fla.2012)). Similar to the commonality inquiry, if the claims or defenses of the class and the class representatives “arise from the same event or pattern or practice and are based on the same legal theory,” typicality is satisfied. *Hernandez*, 209 F.R.D. at 671. Factual differences between the claims of the named plaintiffs and the rest of the class are not alone sufficient to defeat typicality, unless they give rise to a conflict that “must be clear and must be such that the interests of the class are placed in significant jeopardy.” *Id.* at 671–72 (cleaned up) (quoting *Walco Invests. Inc. v. Thenen*, 168 F.R.D. 315, 326 (S.D. Fla.1996)).

Here, each of the named Plaintiff representatives for the Plaintiff Classes has suffered exactly the same injury – restrictions on, or outright denial of, access to transition-related care – as the members of the respective Class each seeks to represent, and they seek exactly the same declaratory and injunctive relief to redress

those injuries. Thus, there is nothing atypical about the named Plaintiffs' claims as compared to those of absent class members. Nor is there even the faintest hint of a conflict between the representatives' and class members' respective interests. Typicality is readily met here. *See G.H.*, 339 F.R.D. at 590 (typicality satisfied where the named plaintiffs' "claims and those of the class and subclass members arise from the same practices and seek the same remedies"); *Hernandez*, 209 F.R.D. at 672 ("Here, the claims of the named plaintiffs are typical of the claims of the proposed class members in that all have been denied their alleged right to adequate written notice and fair hearings when coverage of their prescription drugs is denied[.]").

4. Adequacy

Class certification is appropriate only where the named plaintiffs "will fairly and adequately protect the interests of the class." FED. R. CIV. P. 23(a)(4). To pass this test, no substantial conflict of interest can exist between the named plaintiffs and the class, and proposed counsel to the class must be qualified, experienced and generally able to conduct the litigation on behalf of the proposed class. *G.H.*, 339 F.R.D. at 590; *Hernandez*, 209 F.R.D. at 673.

As discussed above, there are no disqualifying conflicts here between the named Plaintiffs and absent members of the Plaintiff Classes. All seek to enjoin the enforcement of the unconstitutional Transgender Medical Restrictions.

Furthermore, proposed counsel for the Plaintiff Classes have been prosecuting this action vigorously and have extensive experience and proficiency in the areas of civil rights and complex class action litigation. (*See* Redburn Decl. ¶¶ 4-9.) Rule 23’s adequacy prong is met.

D. Certification Under Rule 23(b)(2) Is Appropriate

As the Supreme Court has noted, the “key to the (b)(2) class is the indivisible nature of the injunctive or declaratory remedy warranted – the notion that the conduct is such that it can be enjoined or declared unlawful only as to all of the class members or as to none of them.” *Dukes*, 564 U.S. at 360 (cleaned up). That standard is easily met here for the Plaintiff Classes, each of which is pursuing class-wide declaratory and injunctive relief against the unconstitutional Transgender Medical Restrictions, as applicable, that commonly injures their respective members. As to each Class, the Court’s ultimate decision on the merits of the claims will result in the relief sought being granted either as to all members or to none of them. *See, e.g., Acosta*, 326 F.R.D. at 701–02 (granting certification under Rule 23(b)(2) because “the class-wide injunctive relief that may potentially be awarded in this action would address the common injuries shared by the class members”); *Florida Educ. Ass’n*, 2019 WL 82194093, at *6 (Rule 23(b)(2)’s “standard is easily met for the plaintiff’s claims for injunctive and declaratory relief. The defendants have authorized or paid bonuses to highly effective teachers on a ground generally applicable to all: whether

they have qualifying SAT or ACT scores. The claim that this is unlawful and should be enjoined is a paradigm of a claim properly certified under Rule 23(b)(2).”); *Hernandez*, 209 F.R.D. at 673 (where plaintiffs challenged a state policy that was “equally applicable to each class member of the proposed class,” Rule 23(b)(2) applied because “[i]njunctive or declaratory relief settling the legality of the policy with respect to the class as whole is appropriate”); *Hoffer*, 323 F.R.D. at 699 (“Here, certification under Rule 23(b)(2) is appropriate because a single injunction or declaratory judgment *would* provide relief to each member of the proposed class.”). Indeed, this case is exactly the type of civil rights action that Rule 23(b)(2) was intended to facilitate. *Hernandez*, 209 F.R.D. at 673.

Furthermore, Courts in this District have refused to recognize a free-standing “necessity” requirement for class certification under Rule 23(b)(2). *G.H.*, 339 F.R.D. at 591 (rejecting necessity requirement because it “would render Rule 23(b)(2) a dead letter”); *Hoffer*, 323 F.R.D. at 700 (“[C]lass actions need not be necessary.”). In any event, class certification is necessary here for the same reason this Court identified in *G.H.*: Florida officials’ repeated assertions in constitutional litigation “that an injunction entered by a district court in favor of the individual plaintiffs runs in favor only of the individual plaintiffs – that the officials remain free, in dealing with others, to continue the conduct held unconstitutional.” 339 F.R.D. at 591; *see also Meza v. Marsteller*, Case No. 3:22-cv-783-MMH-LLL, 2023

WL 2648180, at *12 (M.D. Fla. Mar. 27, 2023) (declining to exercise discretion to deny class certification as unnecessary: “[T]his case presents a quintessential Rule 23(b)(2) class action claim. Plaintiffs allege that a state policy, applicable to the entire class, is invalid on its face. Notably, AHCA has not withdrawn this policy pending resolution of this lawsuit, nor has it stipulated that it will abide by the Court’s ruling as to all putative class members.”). Against this backdrop, Rule 23(b)(2) certification provides the only mechanism to ensure all members of the Plaintiff Classes obtain the benefits of any declaratory or injunctive relief entered by the Court to remedy their common injuries.

E. The Undersigned Counsel Should Be Appointed to Represent the Plaintiff Classes Under Rule 23(g)

Finally, appointment of counsel for a certified class requires the Court to consider (1) counsel’s work in investigating potential claims, (2) counsel’s experience in class actions, other types of complex civil litigation and the claims asserted in the action, and (3) the resources counsel will commit to representing the class. See FED. R. CIV. P. 23(g). As explained in the accompanying Redburn Declaration, the undersigned counsel have performed high quality work in litigating this matter to date, have extensive experience in civil rights and class litigation, and are more than adequately resourced to litigate the case. Plaintiffs’ motion to appoint the undersigned as counsel to the Plaintiff Classes should be granted. *See, e.g., Acosta*, 326 F.R.D. at 702 (“In consideration of the above factors, and the substantial

efforts they have undertaken in this litigation to date, the Court finds it appropriate to appoint counsel for named Plaintiffs as class counsel in this action.”).

IV. Conclusion

For the foregoing reasons, Plaintiffs respectfully request that this Court grant their motion for class certification in its entirety, certify the Plaintiff Classes defined herein, and appoint the Class Representatives and Class Counsel.

REQUEST FOR ARGUMENT

Pursuant to Local Rule 7.1(K), Plaintiffs respectfully request oral argument on this motion, estimating up to two hours for a non-evidentiary hearing.

Respectfully submitted this 31st day of July, 2023.

LOWENSTEIN SANDLER LLP

By: /s/ Thomas E. Reburn, Jr.

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CERTIFICATE OF WORD COUNT

According to Microsoft Word, the word-processing system used to prepare this Motion and Memorandum, there are 779 total words contained within the Motion, and there are 7,422 words contained within the Memorandum of Law.

/s/ Thomas E. Redburn, Jr.

**CERTIFICATE OF SATISFATION OF
ATTORNEY CONFERENCE REQUIREMENT**

Pursuant to Local Rule 7.1(B), counsel for the Plaintiffs conferred with counsel for the Defendants about this motion on July 12, 2023, during the negotiations over the Rule 26(f) report. Counsel for Defendants indicated that Defendants may oppose the relief sought.

CERTIFICATE OF SERVICE

I hereby certify that, on July 31, 2023, I electronically filed the foregoing with the Clerk of the Court by using the CM/ECF system.

/s/ Thomas E. Redburn, Jr.
Thomas E. Redburn, Jr.

**IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF FLORIDA
TALLAHASSEE DIVISION**

JANE DOE et al.,

Plaintiffs,

v.

JOSEPH A. LADAPO et al.,

Defendants.

Civil No. 4:23-cv-00114-RH-MAF

**DECLARATION OF THOMAS E. REDBURN, JR. IN SUPPORT OF
PLAINTIFFS' MOTION FOR CLASS CERTIFICATION AND
APPOINTMENT OF CLASS COUNSEL**

I, Thomas E. Redburn, Jr., under penalty of perjury under the laws of the United States, affirm and state as follows:

1. I am a partner at the law firm of Lowenstein Sandler LLP, co-counsel for Plaintiffs.

2. I submit this declaration in support of the Motion filed by Plaintiffs for: (1) class certification; and (2) appointment of Lowenstein Sandler LLP ("Lowenstein Sandler"), Southern Legal Counsel, Inc. ("SLC"), National Center for Lesbian Rights ("NCLR"), Human Rights Campaign Foundation ("HRC"), and GLBTQ Legal Advocates & Defenders ("GLAD") to serve as Class Counsel (the "Motion").

3. Attached as Exhibits A through E are true and correct copies of the following documents:

Exhibit A: Lowenstein Sandler's Resume

Exhibit B: the Resume of counsel for SLC

Exhibit C: the Resume of counsel for GLAD

Exhibit D: HRC's Resume

Exhibit E: How Many Adults and Youth Identify as Transgender in the United States? The Williams Institute, UCLA School of Law (June 2022).

4. Lowenstein Sandler has previously served as lead counsel or co-lead counsel in notable large complex class action lawsuits and achieved exceptional results. Lowenstein Sandler's class action experience includes the following matters:

- In *Special Situations Fund III, L.P. et al. v. Quovadx, Inc. et al.*, Civil Action No. 04-1006 (D. Colo.) (Matsch, J.), Lowenstein Sandler served as lead counsel, representing an investment fund in an action filed in the District of Colorado. In May 2007, the case settled for \$7.8 million.
- In *Special Situations Fund III QP, L.P. v. Marrone Bio Innovations, Inc.*, Case No. 14-cv-2571 (E.D. Cal.) (England, C.J.), Lowenstein Sandler served as lead counsel, representing an investment fund in an action filed in the Eastern District of California. In July 2019, the case settled for \$12 million.

- In *In re Nortel Networks Corp. Securities Litig.*, Civil Action No. 05-MD-1659 (S.D.N.Y.) (Preska, J.), Lowenstein Sandler served as co-lead counsel, representing New Jersey and another co-lead plaintiff in an action filed in the Southern District of New York. In December 2006, the case was settled for \$1.3 billion.
- In *In re Electronic Data Systems Corp. Securities Litigation*, Civil Action No. 6:03-MD-1512 (E.D. Tex.) (Davis, J.), Lowenstein Sandler served as co-lead counsel, representing the State of New Jersey in an action filed in the Eastern District of Texas. In 2006, the case was settled for \$137.5 million.
- In *In re SFBC Int'l, Inc., Securities & Derivative Litigation*, Civil Action No. 2:06-165 (D.N.J.) (Chesler, J.), Lowenstein Sandler served as co-lead counsel, representing an Arkansas public pension fund in an action filed in the District of New Jersey. The matter resulted in a multi-million dollar settlement for the class.
- In *The Department of the Treasury of the State of New Jersey and Its Division of Investment v. Cliffs Natural Resources*, Case No. 14-cv-1031-DAP (N.D. Ohio) (Polster, J.), Lowenstein Sandler served as co-lead counsel, representing the State of New Jersey in an action filed in

the Northern District of Ohio. The matter resulted in an \$84 million settlement for the class.

- In *Roofer's Pension Fund v. Papa et al.*, Case No. 16-cv-02805 (D.N.J.), Lowenstein Sandler was appointed as liaison counsel, representing a foreign insurance company and pension fund in an action filed in the District of New Jersey.
- In *Doe et al., v. Trump et al.*, Case No. 17-cv-01597 (D.D.C.) Lowenstein Sandler served as co-counsel, representing a group of plaintiffs in a constitutional challenge to President Trump's ban on transgender persons serving in the military.

5. SLC, a statewide public interest law firm, has decades of class action experience across the State of Florida. SLC's class action experience includes the following matters:

- *Moreland, et al. v. Palmer*, Case No. 4:12-cv-00585-MW-CAS (N.D. Fla.), an action filed in the Northern District of Florida alleging denial of due process in reduction of benefits to Medicaid beneficiaries.
- *Long, et al. v. Benson, et al.*, Case No. 4:08-cv-26-RH-WCS (N.D. Fla.), an action filed in the Northern District of Florida alleging unnecessary institutionalization of individuals with disabilities in nursing facilities.

- *Washington, et al. v. DeBeaugrine, et al.*, Case No. 4:09-cv-189-RH-WCS (N.D. Fla. 2009), an action filed in the Northern District of Florida alleging denial of due process to Medicaid beneficiaries.
- *Dubois v. Calamas & Francois*, Case No. 4:03-cv-107-SPM (N.D. Fla. 2006), an action filed in the Northern District of Florida alleging violations of the ADA of Medicaid Waiver program for people with spinal injuries.
- *Bobby M. v. Martinez*, Case No. TCA 83-7003 (N.D. Fla.) (J. Paul), an action filed in the Northern District of Florida alleging unconstitutionality of juvenile justice facilities.

6. SLC is also counsel in two complex litigation matters, *Claire v. DMS*, Case No. 4:20-cv-00020 (N.D. Fla. 2020), an action challenging the blanket exclusion for gender-affirming care contained in all health insurance plans offered to State of Florida employees and *Dekker v. Weida*, Case No. 4:22-cv-00325-RH-MAF (N.D. Fla. 2023), an action involving an Equal Protection challenge to Florida Medicaid's exclusion of coverage for gender-affirming care.

7. GLAD utilizes strategic litigation, public policy advocacy, and education, throughout New England and nationally to create a just society free of discrimination based on gender identity and expression, HIV status, and sexual orientation. GLAD is committed to fulfilling this mission with urgency and

perseverance. GLAD served as co-counsel in the action *Doe et al. v. Trump et al.*, Case No. 17-cv-01597 (D.D.C.).

8. NCLR is a national legal organization committed to advancing the civil and human rights of lesbian, gay, bisexual, and transgender people and their families through litigation, legislation, policy, and public education. NCLR represented the plaintiff class in *Strawser v. Strange*, 307 F.R.D. 604 (S.D. Ala. 2015), a successful constitutional challenge to Alabama's prohibition of marriage for same-sex couples. In that case, the district court certified both a plaintiff class comprising all same-sex couples wishing to marry in Alabama and a defendant class comprising all county probate judges, the state officials responsible for issuing marriage licenses. NCLR has served as counsel in many other complex cases affecting the rights of transgender persons, including serving as co-counsel in *Doe et al. v. Trump et al.*, Case No. 17-cv-01597 (D.D.C.).

9. HRC utilizes public education, research, and policy and practice change, to impact communities nationwide. It touches LGBTQ+ lives from childhood through end-of-life, people of all races, ethnicities, sexual orientations, gender identities, abilities and religious beliefs, in big cities and small towns, in the United States and across the globe.

10. I am unaware of any conflicts of interest between the Plaintiffs, myself, my firm, or the other attorneys seeking appointment as class counsel, and the classes we seek to represent.

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

Dated: July 31, 2023

/s/ Thomas E. Redburn, Jr.
Thomas E. Redburn, Jr.

EXHIBIT A

LOWENSTEIN SANDLER FIRM RESUME





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LOWENSTEIN SANDLER OVERVIEW

Lowenstein Sandler LLP is a national law firm with over 350 lawyers working from five offices in New York, Palo Alto, New Jersey, Utah, and Washington, D.C. We represent clients in virtually every sector of the global economy, with particular strength in the areas of technology, life sciences, and investment funds.

We have built a reputation for pursuing every matter with creativity and passion. Our industry knowledge, entrepreneurial drive, and proven commitment to our communities deliver a different and better law firm experience to our clients. We focus on building long-standing relationships and anticipating our clients' needs, rather than responding to them. Working side-by-side with our clients, we serve not only as lawyers, but as trusted advisors.

We approach each case, each client, and each other with integrity and respect, and our award winning pro-bono work enables us to connect individuals and communities with unimaginable success.

We see our colleagues as family and commit to the personal development, support, and mentorship of all those under our roof. We work tirelessly to create a fully inclusive environment in which differing views and perspectives are welcomed and honored.



LOWENSTEIN SANDLER HONORS & AWARDS

CHAMBERS USA: AMERICA'S LEADING LAWYERS FOR BUSINESS (2016-2023)

- 2023 rankings include 33 lawyers across 14 practice areas; firm's Hedge Funds practice and five lawyers also ranked in Chambers Global. Lowenstein's rankings are accessible at this [link](#).

CHAMBERS HIGH NET WORTH GUIDE (2016-2022)

- #1 ranking for Trusts & Estates practice: Private Wealth Law

SERAMOUNT: BEST LAW FIRMS FOR WOMEN & DIVERSITY (2023)

- An annual list which recognizes firms that utilize best practices in recruiting, retaining, promoting, and developing women lawyers

HUMAN RIGHTS CAMPAIGN FOUNDATION: A BEST PLACE TO WORK FOR LGBTQ EQUALITY (2017-2022)

- Perfect (100 percent) score on the Human Rights Campaign Foundation's (HRC) Corporate Equality Index (CEI)

UTAH CENTER FOR LEGAL INCLUSION (UCLI) CERTIFICATION (2022)

- Certified to provide the firm with training and the necessary tools to address existing and future hiring and retention; and advancement and inclusion challenges for women and other diverse attorneys and professionals.

THE BEST LAWYERS IN AMERICA (2008-2021)

- 2021 rankings recognize 49 Lowenstein lawyers

CRAIN'S BEST PLACES TO WORK IN NEW YORK CITY (2018-2021)

- Recognizing employers with a demonstrated commitment to creating a supportive, collegial, and empowering workplace

NJBIZ (2008, 2010, 2012-2021)

- Named one of NJBIZ's Best Places to Work in New Jersey in the large-company category. This is the tenth consecutive year Lowenstein has made the list.

VAULT (2021-2022)

- Named a Best Law Firm to Work For (Technology & Innovation, Pro Bono, Satisfaction, Transparency, Integration of Laterals & Clerks), a Best Law Firm For Diversity (Diversity for Women, Racial & Ethnic Diversity, Diversity for Individuals with Disabilities), a Best Law Firm by Region (Mid-Atlantic), and a Best Summer Associate Program (2022)
- Named a Best Law Firm to Work For (Business Outlook, Firm Culture, Satisfaction, Informal Training, Mentoring & Sponsorship, Quality of Work, Hours, Associate/Partner Relations, Overall Summer Associate Program, Technology & Innovation, Transparency, Compensation, and Diversity for Women) and a Best Law Firm by Region (Mid-Atlantic) (2021)



MANSFIELD RULE 4.0 CERTIFICATION (2021)

- Recognizing Lowenstein's commitment to increasing the representation of historically underrepresented lawyers among law firm leadership

LEADERSHIP COUNCIL ON LEGAL DIVERSITY (LCLD): COMPASS AWARD (2020-2021)

- Recognizing law firms and corporations showing a strong commitment to building more diverse organizations and a more inclusive legal profession

BLOOMBERG LAW DIVERSITY, EQUITY & INCLUSION (DEI) FRAMEWORK (2021)

- Recognizing law firms that meet or exceed an established threshold of diversity, equity, and inclusion

THE DEAL'S POWER RANKINGS LEAGUE TABLE (2019-2021)

- Ranked among the Top Private Equity Law Firms
- Ranked among the Top M&A Law Firms

PIPE'S REPORT'S LEAGUE TABLES (2019-2021)

WORLD TRADEMARK REVIEW (2012-2021)

- Listed among the preeminent trademark practices in World Trademark Review 1000 - The World's Leading Trademark Professionals

JURISTAT (2016, 2019, 2021)

- Ranked #1 on the list of top patent firms for Technology Center 2400 (2016)
- Ranked among the top patent firms for Technology Center 2400 (2019, 2021)
- Ranked among the top patent firms for Technology Center 2100 (2016, 2019, 2021)

PRO BONO PARTNERSHIP (2021)

- Recipient of the 2020 Pandemic Response Award (bestowed in 2021) for Lowenstein's initiative in developing a program to assist Pro Bono Partnership clients with the SBA Paycheck Protection Program

NATIONAL LEGAL AID & DEFENDER ASSOCIATION (NLADA) (2014, 2020-2021)

- Recipient of the Beacon of Justice Award for the firm's pro bono efforts in addressing systemic racial disparities in 2020 (2021)
- Recipient of the Beacon of Justice Award for the firm's pro bono efforts in support of immigrants fighting unlawful deportation, family separations, and wrongful denial of Special Immigrant Juvenile Status (2020)
- Recipient of Beacon of Justice Award for innovation in pro bono service to America's most marginalized populations (2014)

U.S. NEWS & WORLD REPORT: BEST LAWYERS (2016-2021)

- Best Law Firms



LITIGATION DEPARTMENT OVERVIEW

Success in litigation is about facts, strategy, and preparation. Our Litigation lawyers quickly zero in on critical issues to formulate the approach most likely to ensure a positive outcome. With our proven track record at trial and relentless commitment to exceeding expectations, we inspire confidence in our clients and pose a serious threat to adversaries.

As a Litigation law firm, our team has been consistently honored for excellence by *Chambers USA*. We are recognized for the successful representation of clients in matters ranging from business and securities litigation to white-collar defense. With strength across practice areas, our work and experience span the breadth of litigation matters our clients may face. For instance, institutional investors come to us when they are being pursued by regulators or when they or their portfolio companies have been damaged by others. Household names in the life sciences, financial services, technology, energy, and health care industries trust us with complex class actions, internal investigations, and multidistrict litigation, as well as their most sensitive employment, environmental, and insurance issues.

We have tried and arbitrated scores of cases throughout the United States and internationally, including high-stakes class actions, commercial and intellectual property disputes, and tort claims. Our team includes former federal prosecutors and a certified civil trial attorney who has first-chaired more than 100 jury trials to verdict.

We are a leading firm across disciplines and can turn to colleagues for immediate answers when nuances in legal matters arise. Clients benefit from our strength in transactional, regulatory, and other related practice areas across the firm. Through our public interest arm, the Lowenstein Center for Public Interest, we partner with client companies to match social needs with company strengths. This service allows us to expand our knowledge base and keep on top of company and industry matters, which benefits not only our community but our practice and our clients as well.

While our litigation lawyers have the skill and experience to try cases in any jurisdiction in the country, we understand that protecting our clients often requires avoiding the business interruption and unwanted public exposure caused by extensive litigation. The best measure of our success is the long-term relationships we have built with individuals and companies alike. Our clients return to us again and again when the stakes are highest, knowing that we will work tirelessly on their behalf to achieve favorable results in line with their business goals.



Our litigation services include:

- Alternative Dispute Resolution
- Antitrust/Competition
- Appellate
- Bankruptcy & Restructuring Litigation
- Business Litigation
- Class Action Litigation
- Corporate Investigations & Integrity
- Employment Counseling & Litigation
- Environmental Law & Litigation
- Insurance Recovery
- Intellectual Property Litigation
- Products Liability & Specialty Torts
- Securities Litigation
- White Collar Criminal Defense



SECURITIES LITIGATION

Lowenstein Sandler's Securities Litigation Group helps clients leverage litigation to advance or defend their investment strategies and strategic business objectives. We do so by providing top-tier counsel, focused chiefly on class action opt-outs and direct actions, shareholder activism and fiduciary duty matters, litigation arising from mergers and acquisitions, structured finance, and debtholder rights matters.

Well versed in the procedures and nuances of effective litigation and complex investment structures, we are exceptionally well positioned to maximize returns. Our industry-leading reputation is built on nearly two decades of strong partnerships with institutional and private investment funds representing our clients in high stakes litigation. We have developed and implemented high-yield, value-adding litigation strategies for hedge funds, venture funds, credit-focused funds, mutual funds, investment advisers, private investors, real estate firms, shareholder activists, debtholders, and government entities. Our team has also developed proprietary trading and legal-damages analytical tools that enable us to efficiently assess client opportunities and mitigate risk. By proactively identifying and seizing opportunities for litigation, our group has obtained numerous successful recoveries for our clients.

We are aggressive, experienced, highly proficient, and willing to take any matter to trial when necessary to achieve our clients' strategic goals, while at the same time very skilled and successful at delivering outcomes that maximize value through negotiated resolutions. In addition to being highly effective litigators, we have deep familiarity with the workings of the financial industry, and we bring that familiarity to bear in all of our professional engagements.

Learn more about these core areas within the Securities Litigation Group:

- [Class Action Opt-Out/Direct Actions](#)
- [Structured Finance Litigation](#)
- [Class Action](#)
- [Debtholder Litigation](#)

Representative Matters:

Class Action Opt-Out/Direct Actions

- Representing multi-billion dollar hedge fund in a securities fraud litigation arising under the Securities Exchange Act of 1934 against Mohawk Industries, Inc.
- Representing multi-billion dollar institutional investor in a securities fraud litigation arising under the Securities Exchange Act of 1934 against The Boeing Company.
- Representing Shareholder Representative Services LLC and several shareholders in a securities fraud litigation arising under the Securities Exchange Act of 1934 involving use of inflated stock to acquire the shareholders' former company.



- Represented several investor groups in a lawsuit filed against VEREIT, Inc. (f/k/a American Realty Capital Properties, Inc.) and several of its former senior executives. The dispute stemmed from allegations of accounting fraud and settled favorably.
- Represented sophisticated institutional shareholder in a direct securities fraud action against Petrobras and others related to its alleged bid-rigging and kickback scheme. The matter was settled confidentially before trial.
- Represented several institutional investors in lawsuits against Barrick Gold Corporation related to fraud allegations involving its major South American mining project, Pascua Lama. After quashing the defendant's attempt to have the court dismiss our claims, the matter was settled confidentially.
- Represented fund entities in lawsuits against LendingClub Corporation related to alleged fraud committed by its former CEO and other executives. The matter was settled favorably.
- Represented the largest institutional equity investor in lawsuits alleging securities fraud against MF Global and former New Jersey Governor Jon Corzine.
- Represented Franklin Mutual Advisors in lawsuits alleging securities fraud against multiple companies, including Beazer Homes and AIG.
- Represented Appaloosa Management L.P., Franklin Mutual Advisors, and W.R. Huff Asset Management L.L.C., in lawsuits that arose out of the Adelphia securities scandal. The matter settled favorably.
- Represented Pennant Capital Management in a claim against Ocwen Financial regarding multiple alleged frauds perpetrated on investors. The matter settled favorably on the eve of trial.

Structured Finance Litigation

- Successfully won tens of millions of dollars on behalf of certificate holders of commercial mortgage backed securities trusts on appeal before the United States Court of Appeals for the Second Circuit.
- Counsel for a government entity in a \$3 billion mortgage-backed securities matter involving fraud and misrepresentation.
- Secured summary judgment motion on behalf of senior certificate holder Appaloosa Management L.P. in a commercial mortgage-backed securities trust in a dispute over allocation of trust monies among certificate holders.



- Representing Appaloosa Management L.P. in claims arising out of commercial mortgage-backed securities that relate to a \$5 billion sale of a prominent property in New York City.
- Represented sophisticated borrowers in negotiations and potential litigation against commercial mortgage-backed securities trusts.
- Representing numerous real estate investment firms in matters affecting commercial mortgage-backed securities arising from the COVID-19 pandemic.
- Representing residential mortgage servicer in consumer litigation involving servicing practices.
- Represented a European commercial bank as plaintiff and defendant in connection with multiple claims and lawsuits arising out of structured vehicles and the 2008 financial crisis.
- Represented a major insurance company in connection with fraud claims concerning mortgage-backed securities in New Jersey state court.
- Representing a multi-billion dollar hedge fund in litigation relating to claims arising out of commercial mortgage-backed securities trusts.

Class Action Litigation

- Represented an investment fund as lead plaintiff in *Special Situations Fund III, L.P. et al. v. Quovadx, Inc. et al.*, Civil Action No. 04-1006 (D. Colo.).
- Served as lead counsel in *Special Situations Fund III QP, L.P. v. Marrone Bio Innovations, Inc.*, Case No. 14-cv-2571 (E.D. Cal.).
- Served as co-lead counsel in *In re Nortel Networks Corp. Securities Litigation.*, Civil Action No. 05-MD-1659 (S.D.N.Y.).
- Appointed as co-lead counsel in *In re Electronic Data Systems Corp. Securities Litigation*, Civil Action No. 6:03-MD-1512 (E.D. Tex.).
- Appointed as liaison counsel in *Roofer's Pension Fund v. Papa et al.*, Case No. 16-cv-02805 (D.N.J.).
- Served as co-lead counsel in *In re SFBC Int'l, Inc., Securities & Derivative Litigation*, Civil Action No. 2:06-165 (D.N.J.).



Debtholder Litigation

- Represented a group of senior noteholders and secured \$20 million in additional value from the restructuring of an international semiconductor company, Global A&T Electronics Ltd. (GATE).
- Represented sophisticated investment fund challenging nonconsensual third-party releases in bankruptcy plan on constitutional grounds. Litigated matter through appeal to the Court of Appeals for the Third Circuit.
- Represented group of institutions in litigation involving debt instruments issued by Freescale Semiconductor, Inc.

ATTORNEY BIOGRAPHY



Thomas E. Redburn, Jr.

Partner & Chair, Securities Litigation

E-mail: tredburn@lowenstein.com

T: 973.597.2456

F: 973.597.2457

Tom is the Chair of the firm's Securities Litigation practice and has extensive experience representing clients in a wide range of commercial disputes involving securities and complex financial transactions. Tom's practice is focused on representing clients in litigation arising under the Securities Act of 1933 and the Securities Exchange Act of 1934, opt-out cases, fiduciary duty and derivative litigation, state blue sky litigation, shareholder activism, debtholders litigation, structured finance litigation with a focus on mortgage-backed securities, litigation arising from mergers and acquisitions, and other complex litigation.

He has obtained significant victories and recoveries, including representing institutional investors in federal securities law actions arising from disclosures at Marrone Bio Innovations Inc., American Realty Capital Properties Inc. (n/k/a VEREIT Inc.), Barrick Gold Corporation, and Ocwen Financial Corporation. Tom recently defeated a motion to dismiss in a multimillion-dollar securities fraud case and represented a high net worth financial institution in a shareholder derivative suit on behalf of shareholders of TerraForm Power Inc. He represents Appaloosa Investment Limited Partnership I in a highly contested CMBS matter and successfully argued before the Second Circuit an appeal relating to that matter. Tom applied his keen analytical skills to successfully argue in the First Department of New York's Appellate Division on behalf of holders of bonds issued by Global A&T Electronics (GATE), obtaining reinstatement of the bondholders' claims that the company breached its agreement with creditors.

Tom regularly litigates in federal and state courts in New York, New Jersey, Delaware, California, Florida, the District of Columbia, and other jurisdictions all over the United States. He has an active pro bono practice and sits on the board of North Star Academy.

Education

- Cornell University Law School (J.D. 1995), magna cum laude; Editor, *Cornell Law Review*
- The Johns Hopkins University (B.A. 1992), with University and Department honors

Bar Admissions

- New York
- New Jersey
- U.S. Supreme Court

ATTORNEY BIOGRAPHY



Maya Ginsburg

Counsel, Securities Litigation

E-mail: mginsburg@lowenstein.com

T: 212.419.5873

F: 973.597.2400

Maya's practice focuses on a wide variety of securities litigation matters and complex commercial disputes. She represents both plaintiffs and defendants in cases arising under the Securities Act of 1933 and the Securities Exchange Act of 1934, opt-out cases, fiduciary duty and derivative litigation, state blue sky litigation, shareholder activism, debtholders litigation, structured finance litigation with a focus on mortgage-backed securities, litigation arising from mergers and acquisitions, and other complex litigation. She is an experienced senior litigator who applies her keen problem-solving abilities and acute attention to detail, as well as the insights into the inner workings of the federal courts gained from two clerkships in the Northern District of Illinois and District of Alaska, to high-stakes litigation in federal and state courts nationwide.

Maya successfully argued before the Eastern District of New York and obtained dismissal of a consumer fraud lawsuit brought against a residential mortgage servicer. She has also recently appeared and argued matters before federal and state courts in New York, Delaware, Florida and Minnesota. She currently represents a prominent hedge fund in a highly contested CMBS matter for which she was instrumental in prevailing on appeal in a related matter before the Second Circuit. She also successfully won an appeal in Colorado, which created new law pertaining to third-party witness testimony. Additionally, as counsel for a financial services institution Maya created new law in Delaware Chancery Court pertaining to key witness trial testimony.

Maya is fluent in Hebrew.

Education

- The Ohio State University Moritz College of Law (J.D., 2012) cum laude
- Dickinson College (B.A., 2009)

Bar Admissions

- New York
- New Jersey
- Ohio

CORE VALUES

OUR CORE VALUES MAKE US DIFFERENT. WHAT MAKES US DIFFERENT MAKES US SUCCESSFUL.

We are committed deeply to **client service**.

We honor the **trust** others have placed in us.

We are **entrepreneurial**.

We **anticipate** rather than merely respond.

We are **passionate** about everything we do.

We encourage **creativity** to flourish.

We are **generous** with our time and our talent.

We work to **connect** clients and communities.

EXHIBIT B

Simone Chriss, Esq.
Director of the Transgender Rights Initiative
Southern Legal Counsel

Simone Chriss is a civil rights attorney, and the Director of the Transgender Rights Initiative, at the non-profit public interest organization Southern Legal Counsel (SLC). Chriss graduated from the University of Florida Levin College of Law, where she received her J.D. with honors. Chriss developed the organizations' Transgender Rights Initiative in 2016 to fill a gap in access to justice for the transgender community in Florida by systemically providing assistance in areas such as access to legal name and gender marker changes, obtaining accurate IDs, protection from discriminatory laws and policies, representation in accessing a safe and affirming school and work environment, and more.

Chriss utilizes federal impact litigation to challenge discriminatory laws and policies that infringe upon the rights of LGBTQ+ individuals, and is currently lead counsel for SLC on four federal lawsuits against the state of Florida, including *Dekker v. Weida*, Case No. 4:22-cv-00325 (N.D. Fla. 2022), challenging the Florida Agency for Healthcare Administration's (AHCA) discriminatory ban prohibiting Florida's Medicaid program from covering treatments for gender dysphoria; *Jane Doe v. Surgeon General Ladapo*, Case No. 4:23-cv-00114 (N.D. Fla. 2023), challenging SB 254 and the Florida Boards of Medicine rules banning doctors from prescribing medically necessary gender-affirming care to minors; *Cousins v. Grady*, Case No. 6:22-cv-1312 (M.D. Fla. 2022), challenging the Florida law known as "Don't Say Gay;" and *Claire v. Florida Department of Management Services*, 4:20-cv- 00020 (N.D. Fla. 2020), challenging the state of Florida's blanket exclusion of gender- affirming care in all health insurance plans offered to state employees.

Chriss was selected by the National LGBTQ+ Bar as one of the "40 Best LGBTQ+ Lawyers Under 40" for 2022, and received the "Voice for Equality" award in 2021 from Equality Florida.

Chriss conducts LGBTQ+ cultural competency trainings and transgender rights trainings statewide and nationally, and presents legal name and gender marker change workshops throughout Florida to assist transgender folks with accessing legal authenticity. Further, she works statewide to ensure all LGBTQ+ students in Florida have access to a safe and affirming learning environment. This work has resulted in tremendous success for students across the state in obtaining access to bathrooms aligned with their gender identity, consistent use of affirmed name and pronouns, and much more. Chriss also works with the UF Health Youth Gender Program through a Medical Legal Partnership ("MLP") to screen transgender youth and families for social determinants of health and provides free legal assistance to address health-harming legal needs.

Chriss is a member of The Florida Bar, and the bars of the U.S. Northern, Middle, and Southern District Courts of Florida. Chriss is a member of the Executive Council of the Public Interest Law Section of the Florida Bar, as well as the Section's Children's Rights Committee and Advocacy Committee, and she was appointed to the Florida Bar's Standing Committee on Diversity and Inclusion. Chriss also serves as an Attorney ad Litem for the Eighth Judicial Circuit's registry for dependent children with special needs.

SIMONE CHRISS

1229 NW. 12TH AVE. | Gainesville, FL 32601
(352) 271-8890 | simone.chriss@southernlegal.org

PROFESSIONAL EXPERIENCE

Southern Legal Counsel, Inc., Gainesville, Fl.

Attorney, Director of Transgender Rights Initiative (August 2016–present)

Civil rights attorney at a Florida statewide not-for-profit public interest law firm dedicated to the ideal of equal justice for all and the attainment of basic human and civil rights. Director of statewide Transgender Rights Initiative, developed to bridge the gap in access to justice by systemically providing assistance to the transgender community in areas such as access to name and gender marker changes, representation in educational proceedings, protection from discriminatory policies, and more. Utilize a broad range of strategies to bring about systemic reform, including litigation, policy advocacy, and training and technical assistance to lawyers, lay persons and organizations. Lead federal impact litigation against the state of Florida challenging discriminatory laws and policies, including *Dekker v. Weida*, Case No. 4:22-cv-00325 (N.D. Fla. 2022), challenging the Florida Agency for Healthcare Administration’s (AHCA) discriminatory ban prohibiting Florida’s Medicaid program from covering treatments for gender dysphoria; *Jane Doe v. Surgeon General Ladapo*, Case No. 4:23-cv-00114 (N.D. Fla. 2023), challenging SB 254 and the Florida Boards of Medicine rules banning doctors from prescribing medically necessary gender-affirming care to minors; *Cousins v. Grady*, Case No. 6:22-cv-1312 (M.D. Fla. 2022), challenging the Florida law known as “Don’t Say Gay;” and *Claire v. Florida Department of Management Services*, 4:20-cv- 00020 (N.D. Fla. 2020), challenging the state of Florida’s blanket exclusion of gender-affirming care in all health insurance plans offered to state employees.

Gator TeamChild Juvenile Law Clinic, Gainesville, Fl.

Certified Legal Intern; Advanced Certified Legal Intern, (2015 – 2016)

Provided pro bono legal services to children in delinquency cases, dependency cases, and educational issues. As a full service law clinic, collaborated with social workers, mental health professionals, the Guardian ad Litem program, and school personnel to provide holistic representation.

Research Assistant, University of Florida Levin College of Law, Gainesville, Fl.

R.A. to Director of Social Policy Division, Center for Governmental Responsibility (Fall 2015)

Conducted legal research and analysis of effects on children of cumulative exposure to trauma for Law Review article analyzing intersection of trauma-informed and gender-specific educational programs.

Southern Legal Counsel, Inc., Gainesville, Fl.

Equal Justice Works Americorps JD Fellow, (Summer 2015)

Conducted legal research and prepared memoranda on legal and factual investigation of homelessness issues and education law, including federal and state statutory analysis and in depth case analysis. Assisted in preparation of legal documents and pleadings, and drafted portions of a training manual for public defenders.

Equality Florida, Gainesville, Fl.

Public Policy Summer Legal Extern for non-profit LGBT civil rights organization, (Summer 2014)

Drafted and edited human rights ordinances to be introduced in various Florida counties, and conducted legal research and prepared memoranda on the litigation history resulting from employment, housing, and public accommodation discrimination laws in the United States.

EDUCATION

University of Florida Levin College of Law, Gainesville, Fl.

Juris Doctor, *cum laude* (May 2016)

Book Awards: Child, Parent, and State (Fall 2014); Juvenile Law Clinic (Spring 2015);

Trial Practice (Fall 2015); Social Justice Lawyering (Fall 2015)

Honors: Certificate in Family Law (Spring 2016)
Pro Bono Certificate of Outstanding Achievement (Spring 2016)
Community Service Certificate of Outstanding Achievement (Spring 2016)

Involvement: Pro Bono Student Advisory Board
Vice President, Outlaw, Student LGBT Organization
Executive Advisory Board, University of Florida American Constitution Society
Law and Justice Conference Volunteer; Youth Summit Volunteer
Student Recruitment Team, Diversity Outreach Coordinator
Gator Law Mentor Program

University of Florida, Gainesville, Fl.
Bachelor of Science in Family, Youth, and Community Sciences, *cum laude* (August 2012)

BAR ADMISSIONS

The Florida Bar
U.S. District Court of Florida for the Northern District
U.S. District Court of Florida for the Middle District
U.S. District Court of Florida for the Southern District

PUBLICATIONS

Co-Author, *The Imperative for LGBTQ+ Inclusive Medical Education*, The Society for General Internal Medicine, Medical Education: Part 1, Volume 45, Number 7 (July 2022).

Co-Author, *After Obergefell v. Hodges: The Continuing Battle Over Equal Rights for Sexual Minorities in the United States*, (December 1, 2015). GenIUS, December 2015, at 18; University of Florida Levin College of Law Research Paper No. 16-4. Available at SSRN:<https://ssrn.com/abstract=2710969>.

Co-Author, *The Case for Trauma-Informed, Gender-Specific Prevention & Early Intervention Programming in Reducing Female Juvenile Delinquency in Florida*, 12 Nw. J. L. & Soc. Pol'y. 1 (February, 2017). Available at: <http://scholarlycommons.law.northwestern.edu/njls/vol12/iss2/1>.

Contributor, *Jailbirds in the Sunshine State: Defending Crimes of Homelessness* (May 2016), Southern Legal Counsel

AWARDS

Recipient of Equality Florida 2021 Voice for Equality Award (May 2021)

Recipient of National LGBTQ+ Bar Association's "40 Best LGBTQ+ Lawyers Under 40" (July 2022)

Recipient of Spektrum Health's "Advocate of the Year" award (June 2023)

PROFESSIONAL SERVICE

Attorney ad Litem for the Eighth Judicial Circuit's Registry for Dependent Children with Special Needs (2016-Present)

The Public Interest Section of The Florida Bar (2016 - Present)

Member of the Executive Council

Chair of Children's Rights Committee

Member of the Advocacy Committee

Appointed to The Florida Bar's Standing Committee on Diversity and Inclusion (2018-2021)

Member of the National LGBTQ+ Bar Association (2020-present)

Member of the Florida LGBTQ+ Statewide Leaders Coalition (2020-present)

Eighth Judicial Circuit Bar Association Mentoring Program (2019-present)

Mentor for EJCBA Mentoring Program

Pro Bono Coordinator for EJCBA Mentoring Program

Alachua County System of Care member (2016 - present)

The Council of Parent Attorneys and Advocates (COPAA) (2017 - Present)

LGBTQ+ Child-Welfare Task Force member (2017 - present)

SELECTED PRESENTATIONS / TRAININGS

"Upending the Standard of Care for Trans Youth: Florida's Proposed Laws Criminalizing Gender-Affirming Care for Minors" (April, 2023)
American Constitution Society Panel Discussion (South Florida)

"The Criminalization of Gender-Affirming Healthcare" (April 2023)
American Federation of Teachers 2023 Lawyers' Conference (Washington, D.C.)

"Legal Rights of LGBTQ+ Youth and Parents in the Current Legal Landscape"
(February 2023)
All Together Now Conference, Equality Florida (Orlando, Florida)

"Litigation Trends in the Criminalization of Gender-Affirming Healthcare"
(December 2022)
Training for the Ohio Public Defenders, 2022 Training Summit

"Leveraging Legal Skills to Help LGBTQ+ Youth at the Local Level" (July 2022)
Lavender Law Conference, Los Angeles California

Eighth Judicial Circuit Bar Association, Diversity Roundtable, "*LGBTQ+ Inclusivity*" (April 2022)
Keynote Speaker for annual diversity roundtable for EJCBA.

"Barriers to Access to Justice for the LGBTQ+ Community in Florida" (March 2022)
Training for the Public Interest Law Section of the Florida Bar, Access to Justice Series

"The Dynamic and Complex Legal Landscape for LGBTQ+ Students Rights" (February 2022)
Speaker at the 2022 All Together Now Conference, attended Florida School District leadership

"LGBTQ Cultural Competency & Best Practices for Serving the Trans Community" (February 2022)
Training for National Council of Incarcerated & Formerly incarcerated Women and Girls

"Health Inequalities, Disparities, and the Legal Landscape for Transgender Rights" (November, 2021)
Panelist for University of Florida College of Pharmacy and College of Law Transgender Awareness
Week panel

"Gender Advancement Project: 2021 Name and Gender Marker Change Clinic" (November, 2021)
Presented legal name and gender marker change clinic for organizations focused on supporting and
uplifting transgender women of color, Divas in Dialogue & Unspoken Treasure Society.

"*Virgil D. Hawkins Civil Clinics Speaker Series: The Rights of LGBTQ+ Clients*" (October 2021)
Speaker for Virgil D. Hawkins Clinics at the University of Florida Levin College of Law

"The Legal Landscape for LGBTQ+ Students' Rights in the 11th Judicial Circuit" (October, 2021)
Guest Lecture for Flagler College, Fall 2021 Constitutional Law course

"The Wave of Anti-Transgender Legislation in 2021" (August 2021)
Presentation for the Gay and Lesbian Lawyers Association (GALLA) and the Miami-Dade Gay &
Lesbian Chamber of Commerce

"LGBTQ+ Cultural Competency and Navigating the Legal Name Change Process" (June 2021 and
October 2021 and July 2022)
Training for Akerman, LLP, JP Morgan Chase, and Leon Cosgrove pro bono attorneys

"Pride Month 2021: Best Practices for Representing LGBTQ Youth" (June 2021)
Statewide webinar for legal aid and pro bono attorneys throughout Florida.

"Best Practices for Police in Interacting with Transgender Individuals" (June 2021)
Training for Melbourne Police Department, in Melbourne, Florida.

"Directing a Transgender Rights Project & the Legal Landscape for Trans Rights" (May, 2021)
Guest Lecture for Bard College, NY: Course "Gay Rights, Human Rights"

"Pride Month 2020: Best Practices for Representing LGBTQ Clients" (June 2020)
Statewide webinar for legal aid and pro bono attorneys throughout Florida.

"Ethics for Special Education Attorneys" (March 2020)
Breakout session, Council for Parent and Attorney Advocates annual conference. Baltimore, MD.

"LGBTQ Inclusion in Education" (January 2020)
Statewide webinar for 600 educators, school district officials, principals, and social workers
throughout Florida's public school system.

"The Legal Needs and Rights of Transgender Youth" (November 2019)
Presenter and Panelist for North Central Chapter Florida Psychological Association Conference

"Lessons from an Innovative Transgender Legal Services Delivery Model in Florida" (July 2019)
Presented on Pro-Track at the Mazonni Transgender Wellness Conference in Philadelphia, PA.

"Best Practices in Advocating for LGBTQ Youth in the Dependency System" (July 2019)
Presenter and panelist at the 2019 Encourage: LGBTQ Training for the Guardian ad Litem Program
in Gainesville, FL.

"Representing Transgender Youth in the Dependency System" (May 2019)
Presenter at the 2019 Guardian ad Litem Specialized Advocacy Symposium in Orlando, FL.

"TRANSaction Educational Series: Name and Gender Marker Change Session" (March 2019)
Presenter for the final session in the Bliss Cares' TRANSaction program for transgender individuals transitioning in Central Florida.

"Representing Transgender Youth – Cultural Competency and Advocacy Tips" (March 2019)
Breakout session, Council for Parent and Attorney Advocates annual conference. New Orleans, LA.

"School Issues Faced by Transgender Youth" (January 2019)
Presented to The Florida Bar Education Law Committee at the 2019 Winter Florida Bar meeting. Orlando, FL.

"Know Your Rights – A Guide for TGNC Youth" (November 2018)
Presenter at the Orlando Youth Empowerment Summit (OYES). Orlando, FL.

"Transgender 'Know Your Rights' Townhall – Identification Documents Presentation and Discrimination Panel" (July 2018)
Key Note Speaker, Transgender Independence "Know Your Rights" Town Hall. Orlando, FL.

"Delivering Innovative and Inclusive Legal Services for Transgender Clients" (May 2018)
Breakout session, ABA/NLADA's Equal Justice Conference. San Diego, CA.

"Moving Towards Inclusivity" and "Trans 101: What Housing and Homeless Service Providers Need to Know" (April 2018)
Training for the Housing Services Network of Central Florida. Orlando, FL.

"Obtaining Trauma-Informed Educational Services under the IDEA and Section 504" (March 2018)
Breakout session, Council for Parent and Attorney Advocates annual conference. Monterey, CA.

"Florida Name Change: The Easy Way to Update Your Name and Gender Marker on your Identification Documents" (March 2018)
Official launch of online tool at TransCon 2018 at Barry University in Miami, FL.

"Delivering Innovative and Inclusive Legal Services for Transgender Clients" (December 2017)
Breakout session, National Legal Aid and Defenders Association Conference. *Safeguarding Justice for All*, Washington, D.C.

"Transgender Cultural Competency and Title IX Discrimination" (October 2017)
Guest Lecturer for Social Justice Lawyering, University of Florida Levin College of Law

"Sexual Minorities: The Movement for Equality and Liberation" (October 2017)
Guest Lecturer for Social Justice Lawyering, University of Florida Levin College of Law

"Inclusive Housing and Homeless Services for Transgender Individuals"(October 2017)
Presentation at the 2017 Supportive Housing Summit

"Using the IDEA and Section 504 to Advocate for Trauma-Informed Services"(September 2017)
Special Education Training for legal aid attorneys at Florida Rural Legal Services

"Juvenile Law Seminar – Conditions of Confinement: Issues Concerning Trauma, Youth Development & Legal Rights for Youth in Detention" (June 2017)
Continuing Legal Education presentation to Florida's Juvenile Public Defenders

“Obtaining Trauma-Informed Educational Services Under the IDEA and Section 504 of the Rehabilitation Act” (May 2017)

Presentation at the 2017 Guardian ad Litem Disabilities Conference

“Transgender Name Change and Identification Documents Workshop and Legal Clinic” (March 2017)

Organized and presented legal workshop and pro bono clinic at American Red Cross of Central Florida for the protection of transgender individuals

“Inclusive Legal Services for Transgender Clients” (March 2017)

Continuing Legal Education presentation to Florida’s Legal Aid providers

“Transgender Name Change and Identification Documents Workshop and Legal Clinic” (January 2017)

Organized and presented legal workshop and pro bono clinic at Pride Community Center of North Central Florida for the protection of transgender individuals

“The Need for Trauma-Informed Services in Child-Centered Work” (September 2015)

Presentation to Gator Team Child Juvenile Law Clinic at University of Florida Levin College of Law

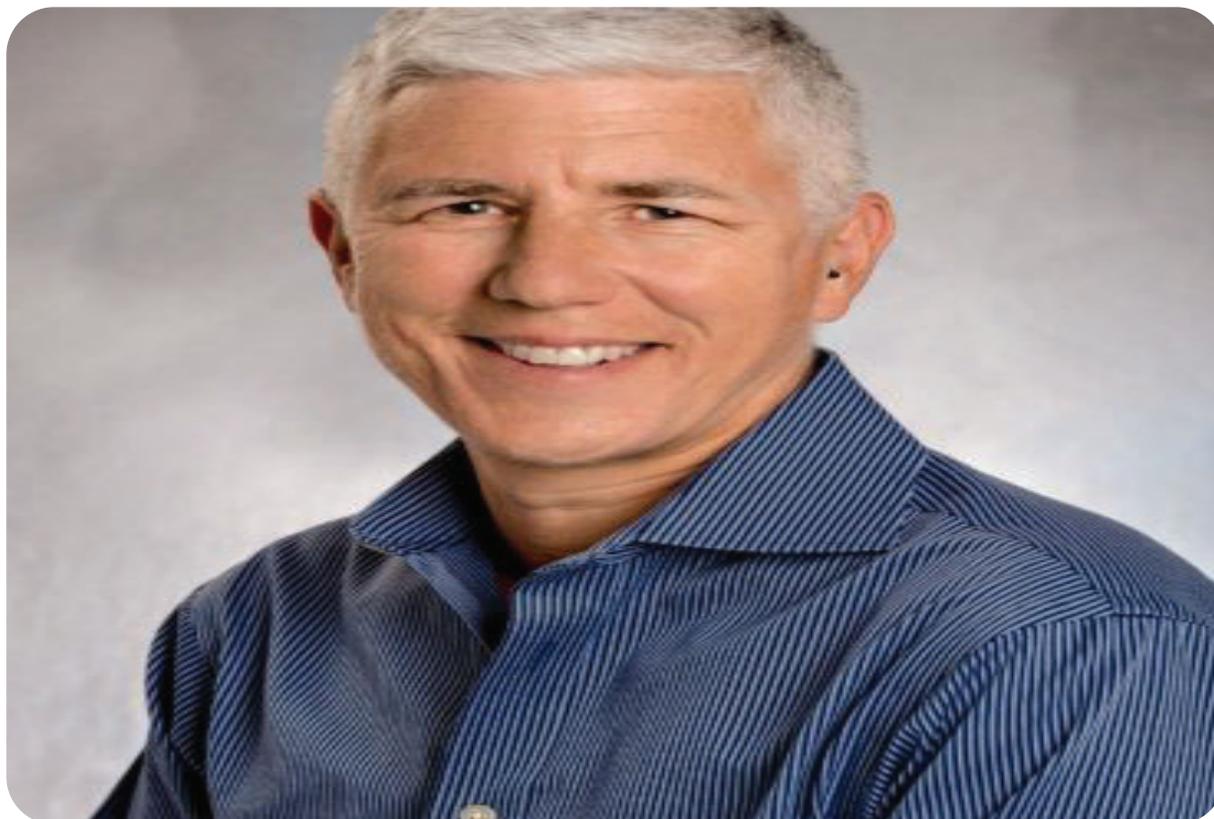
“Legal Issues Affecting the LGBT Community” (September 2015)

Presentation to PFLAG Gainesville, *Parents, Families, and Friends of Lesbians and Gays of Gainesville*

LANGUAGES

Sign Language (fluent); Spanish (basic).

EXHIBIT C



Jennifer L. Levi

Senior Director of Transgender and Queer Rights

Jennifer L. Levi is the Senior Director of Transgender and Queer Rights and a nationally recognized expert on transgender legal issues. Levi led the legal fight against President Trump's transgender military ban in both [*Doe v. Trump*](#) and [*Stockman v. Trump*](#). Levi has also been a leader in working on harm reduction for incarcerated transgender people.

Levi’s role is that of architect and advocate for state legislative and policy reform. Levi’s work also involves challenging new legal issues or interpretations brought before the court. Levi has represented clients in cases challenging improper denials of medical care as well as improper placement of transgender people in prisons and jails. Other precedent-setting transgender rights cases Levi has worked on include:

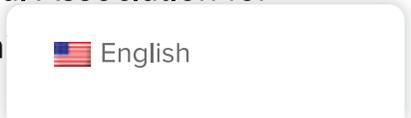
Rosa v. Park West Bank, a case brought on behalf of a transgender woman denied a bank loan under the federal Equal Credit Opportunity Act that laid the foundation for the recent Supreme Court decision in *Bostock v. Clayton County*;

O’Donnabhain v. Commissioner of Internal Revenue (2010), which established that medical care relating to gender transition qualifies for a medical tax deduction; and

Doe v. Clenchy (2014), in which the first state high court ruled that a transgender girl must be fully integrated into her public elementary school as a girl, including having full and equal access to restrooms.

Levi was co-counsel in two landmark marriage equality cases, winning the freedom to marry for same-sex couples in Massachusetts (*Goodridge v. Department of Public Health*, 2003) and Connecticut (*Kerrigan v. Department of Public Health*, 2008), and has led a number of key family law cases establishing important protections for families headed by LGBTQ parents including *Sinnott v. Peck* and *Miller-Jenkins v. Miller-Jenkins*, both decided by the Vermont Supreme Court.

Levi is a law professor at Western New England University, co-editor of *Transgender Family Law: A Guide to Effective Advocacy* (2012), and serves on the Legal Committee of the World Professional Association for Transgender Health. She is a graduate of the Un



School and a former law clerk to the Honorable Judge Michael Boudin at the U.S. Court of Appeals for the First Circuit.

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SUBMIT

EXHIBIT D

IMPACT LITIGATION AND ADVOCACY

Impact Litigation and Advocacy

Our goal is to serve as a vehicle through which the lived experiences of LGBTQ+ people are recognized and lifted up before judges—through the diverse lives we lead, resilience in the face of obstacles that our civil rights laws are intended to dismantle, and the effects those obstacles have on our ability to live fully and freely, particularly those of us whose identities are at the intersection of multiple oppressive systems.

- In practice, we are a small team leveraging our deep organizational knowledge and partnerships to strategically engage in the issues, projects, and cases we pursue domestically and internationally, with the goal of bringing about positive systemic changes.
- We are here to listen, cultivate, and collaborate.
- Intake Form - Given the size of our team, we generally respond with referrals to resources and attorneys. When appropriate, we may offer legal advice and counsel. We are particularly interested in learning about discrimination in schools as well as discrimination in attempting to obtain health care, housing, or shelter because of an individual's LGBTQ+ identity.
- **See below for FAQs**

[See here for Questions and Answers About the Legal Status of Florida's Transgender Healthcare Ban](#)

Carpenter et al. v. James et al.: The Human Rights Campaign Foundation co-counsels with Steptoe & Johnson LLP on an amicus brief before the United States Court of Appeals for the Second Circuit on behalf of a group of diverse businesses in this case that involves a wedding photographer in New York who seeks permission to deny services to couples of same-sex weddings and advertise the same.

- [Brief](#)
 - [Press Release](#)
-

D.H. et al. v. Williamson County Board of Education et al.: Joined by the law firms of Linklaters and Branstetter, Stranch, & Jennings PLLC, this suit was filed in the District Court for the Middle District of Tennessee challenging a discriminatory law that denies transgender students, faculty, and staff access to the bathroom, locker rooms and other sex-segregated facilities consistent with their gender identity. This is the second lawsuit the HRC Foundation has filed challenging Tennessee's discriminatory law. For more information on the first lawsuit, *A.S. et al. v. Lee et al.* see the [Complaint](#) and [Press Release](#).

- [Complaint](#)
 - [Press Release](#)
-

D.N. v. Ron DeSantis et. al.: This federal civil rights lawsuit challenging a Florida law banning transgender girls from participating in sports was filed in the District Court for the Southern District of Florida along with Arnold & Porter.

- [Complaint](#)
 - [Press Release](#)
-

Doe v. Ladapo: Filed in the U.S. District Court for the Northern District of Florida (Tallahassee Division) with the GLBTQ Legal Advocates and Defenders, National Center for Lesbian Rights, Southern Legal Counsel, and Sidley Austin LLP, plaintiffs challenge the Florida Medical Boards' rules prohibiting physicians from initiating life-saving transition-related care for youth.

An amended complaint was filed on July 21, 2023 expanding the case to address state law SB 254's harmful restrictions on access to care for adults and seeking class-wide relief for all transgender minors and adults who require medical care restricted by SB 254.

- [Complaint](#)
- [Press Release](#)
- [Updated Complaint](#)
- [Press Release](#)

Eknes-Tucker v. Ivey: Filed in the U.S. District Court for the Middle District of Alabama (Northern Division) with the GLBTQ Legal Advocates and Defenders, National Center for Lesbian Rights, Southern Poverty Law Center, King & Spalding, and Lightfoot, Franklin, and White LLC, plaintiffs sought and obtained an injunction to halt a law that criminalizes the provision of life-saving gender-affirming care for youth.

- [Complaint](#)

- [Press Release](#)
-

Emma Koe et al. v. Kathleen Toomey et al.: The Human Rights Campaign Foundation, the Southern Poverty Law Center, and ACLU Georgia, along with law firms O'Melveny & Myers and Caplan Cobb, filed suit in the Northern District of Georgia in Atlanta challenging the state's law banning hormone therapy for adolescents.

- [Complaint](#)
 - [Press Release](#)
-

In re Executive Message (Governor v. Prosecuting Attorneys): The Human Rights Campaign Foundation, supported by Sterling Attorneys at Law, files an amici curiae brief before the Michigan Supreme Court on behalf of Equality Michigan and 8 Michigan-based LGBTQ+ organizations supporting the Governor's request for the Supreme Court to certify the question of whether Michigan's felony abortion statute, enacted in 1931, violates the State Constitution.

- [Brief](#)
-

Sines v. Kessler: In support of plaintiffs, HRC filed an amici curiae brief with Baker Hostetler in the Fourth Circuit of the United States Court of Appeals. *Sines v. Kessler* stems from a tragic and violent series of events in Charlottesville, Virginia in 2017, which was organized by a group of white supremacists and neo-Nazis, resulting in death and extensive damage. A jury determined that the organizers had violated Virginia's hate-

crime statute and other laws, and awarded plaintiffs \$26 million in damages, including punitive damages. However, the district court reduced the award by over \$23 million on the theory that a provision of Virginia law imposed a cap on punitive damages. This brief offers a historical explanation of why punitive damages are vital for civil rights groups and have proven to be crucial for remedying and deterring hate crimes and violence against marginalized populations. We argue that the appellate court should reverse the lower court's restrictive interpretation of Virginia's statutory punitive damages cap. In filing this brief, HRC continues to our work against extremism, hate, and violence towards our intersectional community.

- [Brief](#)
-

Tarrant County Community College v. Sims: Represented by Winston & Strawn, the Human Rights Campaign filed a brief as amicus curiae, or “friend of the court,” to the Texas 5th Circuit Court of Appeals in this case that addresses the scope of protections against discrimination for LGBTQ+ workers under Texas state law.

- [Brief](#)
 - [Press Release](#)
-

Walker v. Azar: Joined by Baker Hostetler LLP, this federal civil rights lawsuit challenges the Trump Administration’s attempt to roll back protections against discrimination for LGBTQ+ people in the Affordable Care Act. In August 2020, a federal district court judge issued a nationwide preliminary injunction blocking the harmful rule from taking effect during the height of a global pandemic. Learn more about our plaintiffs [Tanya Walker and Cecilia Gentili](#).

EXHIBIT E

RESEARCH THAT MATTERS

HOW MANY ADULTS AND YOUTH IDENTIFY AS TRANSGENDER IN THE UNITED STATES?

June 2022

Jody L. Herman
Andrew R. Flores
Kathryn K. O'Neill

EXECUTIVE SUMMARY

Recent data from the CDC's Behavior Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Survey (YRBS) provide an opportunity to update prior population estimates of the number of adults and youth who identify as transgender in the U.S. In 2016 and 2017, the Williams Institute used data from the 2014-15 BRFSS to estimate the number of adults (ages 18 and older) and youth (ages 13 to 17) who identify as transgender. Since then, a total of 43 states have used the BRFSS optional gender identity module for at least one year, providing more years of data from more states since these initial estimates. Additionally, in 2017, the YRBS, a national survey of high school students, began asking respondents if they are transgender. Since 2017, fifteen states have included this question in their YRBS statewide questionnaire. In this study, we use data from the 2017 and 2019 YRBS and the 2017-2020 BRFSS to find that:

- Over 1.6 million adults (ages 18 and older) and youth (ages 13 to 17) identify as transgender in the United States, or 0.6% of those ages 13 and older.
- Among U.S. adults, 0.5% (about 1.3 million adults) identify as transgender. Among youth ages 13 to 17 in the U.S., 1.4% (about 300,000 youth) identify as transgender.
- Of the 1.3 million adults who identify as transgender, 38.5% (515,200) are transgender women, 35.9% (480,000) are transgender men, and 25.6% (341,800) reported they are gender nonconforming.
- Research shows transgender individuals are younger on average than the U.S. population. We find that youth ages 13 to 17 are significantly more likely to identify as transgender (1.4%) than adults ages 65 or older (0.3%).
- The racial/ethnic distribution of youth and adults who identify as transgender appears generally similar to the U.S. population, though our estimates mirror prior research that found transgender youth and adults are more likely to report being Latinx and less likely to report being White compared to the U.S. population.
- Our estimates of the percent of residents in U.S. regions who identify as transgender range from 1.8% in the Northeast to 1.2% in the Midwest for youth ages 13 to 17, and range from 0.6% in the Northeast to 0.4% in the Midwest for adults.
- At the state level, our estimates range from 3.0% of youth ages 13 to 17 identifying as transgender in New York to 0.6% in Wyoming. Our estimates for the percentage of adults who identify as transgender range from 0.9% in North Carolina to 0.2% in Missouri.

Overall, based on our estimates from 2016-2017 and the current report, we find that the percentage and number of adults who identify as transgender has remained steady over time. The availability of the YRBS data has given us a more direct look into youth gender identity and provides better data than was previously available to us for estimating the size and characteristics of the youth population. Youth ages 13 to 17 comprise a larger share of the transgender-identified population than we previously estimated, currently comprising about 18% of the transgender-identified population in the U.S., up from 10% previously.

INTRODUCTION

A growing number of population-based surveys in the United States, and internationally, ask questions to identify transgender people, including surveys conducted by the U.S. federal government.¹ In 2014, the Centers for Disease Control and Prevention (CDC) began offering an optional module on the Behavior Risk Factor Surveillance System (BRFSS) for states to use to ask respondents if they consider themselves to be transgender.² In 2016, the National Crime Victimization Survey (NCVS) included a two-step approach to identify those whose gender identity differs from their sex assigned at birth.³ In 2017, the CDC's Youth Risk Behavior Survey (YRBS), a national survey of high school students, began asking respondents if they are transgender.⁴ In July 2021, the U.S. Census Bureau's Household Pulse Survey adopted the two-step approach.⁵ Internationally, Canada added the two-step approach to their national census in 2021, while Belgium and New Zealand have also included measures to identify transgender people in population-based surveys.⁶

With new and emerging data sources, like the NCVS and Household Pulse Survey, researchers will have new opportunities to expand our knowledge about the characteristics and experiences of the transgender population. In the U.S., we have found from the NCVS that transgender people are more likely to experience violent victimization compared to cisgender people.⁷ Household Pulse data allowed us to assess disparities in food insecurity among transgender people during the COVID-19 pandemic.⁸ Yet, limitations exist among these data sources that affect the ability to create estimates of the size and demographic characteristics of the transgender population in the U.S. In 2019, NCVS began asking questions to identify transgender people only among victims of violence, which

¹Population-based surveys allow findings to be generalized to the population from which the sample is drawn.

²Centers for Disease Control and Prevention (CDC). *BRFSS Questionnaires*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. <https://www.cdc.gov/brfss/questionnaires/index.htm>

³National Crime Victimization Survey. (2016). *NCVS-1 Basic Screen Questionnaire*. (pp. 7-8). Bureau of Justice Statistics. https://www.bjs.gov/content/pub/pdf/ncvs16_bsq.pdf.

⁴Johns, M.M., Lowry, R., Andrzejewski, J., et al. (2019). Transgender Identity and Experiences of Violence Victimization, Substance Use, Suicide Risk, and Sexual Risk Behaviors Among High School Students—19 States and Large Urban School Districts, 2017. *MMWR Morb Mortal Wkly Rep*, 68, 67–71. <http://dx.doi.org/10.15585/mmwr.mm6803a3>.

⁵United States Census Bureau. (2021). *Household Pulse Survey: Measuring Social and Economic Impacts during the Coronavirus Pandemic*. <https://www.census.gov/programs-surveys/household-pulse-survey.html>.

⁶Statistics Canada. (2022). Canada is the first country to provide census data on transgender and non-binary people. *The Daily*. <https://www150.statcan.gc.ca/n1/daily-quotidien/220427/dq220427b-eng.htm?HPA=1>. In their 2021 Census, Statistics Canada found that 0.33% of those age 15 and older were transgender or nonbinary.

⁷A. R. Flores, L. Langton, I. H. Meyer, A. P. Romero. (2020). Victimization rates and traits of sexual and gender minorities in the United States: Results from the National Crime Victimization Survey, 2017. *Sci. Adv.* 6(40). <https://www.science.org/doi/10.1126/sciadv.aba6910>.

⁸Conron, K.J. & O'Neill, K. (2021). *Food Insecurity Among Transgender Adults During the COVID-19 Pandemic*. The Williams Institute, UCLA, Los Angeles, CA.

undermines the ability to make population-level estimates.⁹ The U.S. Census Bureau is fielding the Household Pulse Survey as a part of their Experimental Data Series.¹⁰ We continue to learn about the Household Pulse Survey methods and its promise and limitations as a data source to study the population size and characteristics of transgender people in the U.S.¹¹ Although they do not yet collect data about gender identity in all U.S. states, the CDC's BRFSS and YRBS currently provide the best available data to generate estimates of the number of adults and youth who identify as transgender.

In 2016 and 2017, the Williams Institute used data from the CDC's 2014-15 BRFSS to estimate the number of adults (ages 18 and older) and youth (ages 13 to 17) who identify as transgender.¹² Since then, a total of 43 states have used the BRFSS optional gender identity module for at least one year, providing more years of data from more states since these initial estimates. Additionally, since 2017, 15 states have included a question to identify transgender youth in their YRBS statewide questionnaire.¹³ These more recent data from the BRFSS and the YRBS provide an opportunity to update our prior population estimates of the number of adults and youth who identify as transgender in the U.S. In this report, we describe our updated estimates, including estimates regarding gender, age, and race/ethnicity at the national level and age and race/ethnicity at the regional and state levels. A detailed description of our methods and accompanying appendix can be found at the end of this report.

⁹From 2016 through the second quarter of 2019, questions pertaining to sexual orientation and gender identity were included in the NCVS. In 2019, the Bureau of Justice Statistics determined that the sexual orientation and gender identity questions would be administered only to those age 16 or older who reported violent victimization (not to all respondents). More recently, BJS has determined that the sexual orientation and gender identity items will be reinstated and administered to the original universe of all persons age 16 or older beginning in January 2022. See Bureau of Justice Statistics. (2021). *NCVS OMB Supporting Statement Part A*. Office of Management and Budget, Office of Information and Regulatory Affairs. https://www.reginfo.gov/public/do/PRAViewDocument?ref_nbr=202109-1121-002; Office of Information and Regulatory Affairs. (2021). *OIRA Conclusion, OMB Control No: 1121-0111*. Office of Management and Budget. https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202109-1121-002#.

¹⁰United States Census Bureau. (2021). *Measuring Household Experiences during the Coronavirus Pandemic*. <https://www.census.gov/data/experimental-data-products/household-pulse-survey.html>.

¹¹United States Census Bureau. (2021). *Source of the Data and Accuracy of the Estimates for the Household Pulse Survey – Phase 3.2*. https://www2.census.gov/programs-surveys/demo/technical-documentation/hhp/Phase3-2_Source_and_Accuracy_Week39.pdf; Jesdale, B.M. (2021). *Counting Gender Minority Populations in the Household Pulse Survey (The AGENID=2 Memo)*. National LGBT Cancer Network. <https://cancer-network.org/wp-content/uploads/2021/10/Counting-GM-People-in-Pulse-Data.pdf>.

¹²Flores, A.R., Herman, J.L., Gates, G.J., & Brown, T.N.T. (2016). *How Many Adults Identify as Transgender in the United States?* Los Angeles, CA: The Williams Institute; Herman, J.L., Flores, A.R., Brown, T.N.T., Wilson, B.D.M., & Conron, K.J. (2017). *Age of Individuals who Identify as Transgender in the United States*. Los Angeles, CA: The Williams Institute. Those who report that they consider themselves to be transgender in the BRFSS may identify with and use different gender identity terms outside the survey context, such as man, woman, and nonbinary.

¹³The count of 15 states is based on authors' original analysis of YRBS data.

FINDINGS

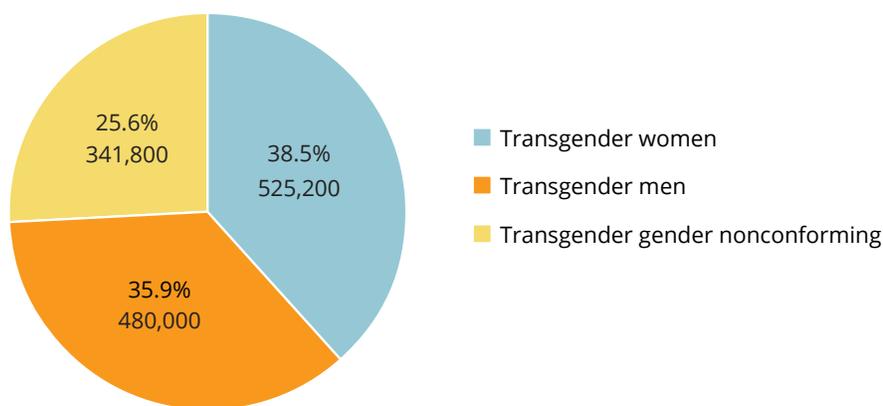
NATIONAL POPULATION ESTIMATES BY GENDER IDENTITY, AGE, AND RACE/ETHNICITY

Nationally, we estimate that 0.6% of those ages 13 and older identify as transgender in the United States, which is about 1.6 million individuals based on current U.S. population size. Among adults, 0.5% (over 1.3 million adults) identify as transgender. Among youth ages 13 to 17, 1.4% (about 300,000 youth) identify as transgender. The BRFSS and YRBS data allow us to further describe gender identity for adults, age categories for individuals ages 13 and older, and race/ethnicity separately for youth and adults.

Gender Identity

The BRFSS optional gender identity module includes a follow-up question of adults who identify as transgender to further describe their gender identity.¹⁴ Based on that follow-up question, we find that of adults who identify as transgender, 38.5% (525,200) are transgender women, 35.9% (480,000) are transgender men, and 25.6% (341,800) reported they are gender nonconforming. It is possible that transgender adults who identify as nonbinary may have reported their gender in the BRFSS as gender nonconforming. A recent study estimated that nearly one-third of transgender adults identify as nonbinary, which is similar to our finding of 25.6%.¹⁵ The YRBS does not include a follow-up question to allow respondents to further describe their gender identity. Therefore, we are unable to provide a more detailed description of gender identities among youth.

Figure 1. Gender identity of adults who identify as transgender in the U.S.



¹⁴The BRFSS questionnaire asks, “Do you consider yourself to be transgender?” If the answer is yes, the respondent is then asked, “Do you consider yourself to be 1. male-to-female, 2. female-to-male, or 3. gender nonconforming?” We categorize those who answered “male-to-female” as transgender women, those who answered “female-to-male” as transgender men, and those who answered “gender nonconforming” as gender nonconforming.

¹⁵Wilson, B.D.M & Meyer, I.H. (2021). *Nonbinary LGBTQ Adults in the United States*. Los Angeles, CA: The Williams Institute.

Age

We describe the age of individuals who identify as transgender in two ways: the percentage of each age group that identifies as transgender and the age distribution of the transgender-identified population compared to the age distribution of the U.S. population. When looking at the percentage in each age group that identifies as transgender, those in the youngest age groups appear to have a higher percentage of those who identify as transgender. For instance, 1.4% of those ages 13 to 17 identify as transgender whereas 0.3% of those ages 65 and older identify as transgender. While these age group differences appear to be only statistically significant between the oldest and youngest age groups, this age trend among transgender individuals is consistently found in studies using population-based samples.¹⁶

Table 1. Percent of each age group that identifies as transgender in the U.S.

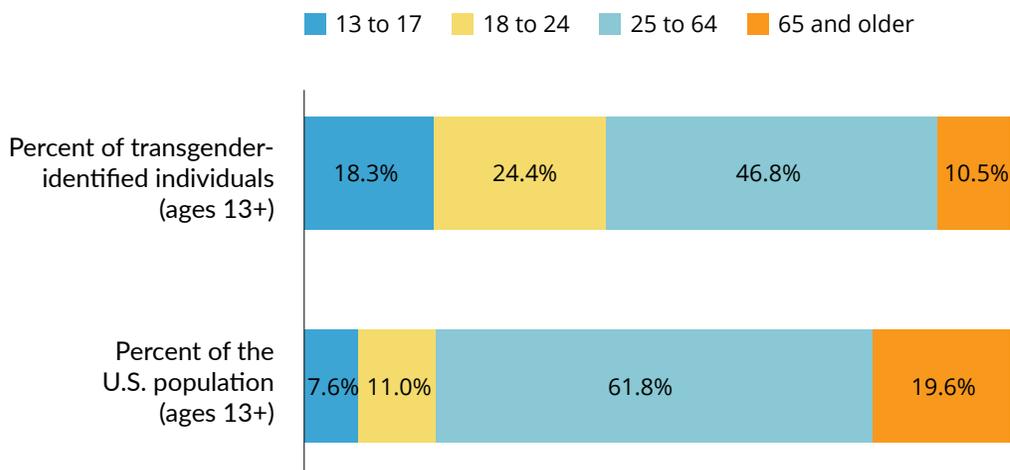
	PERCENT	NUMBER
13 to 17	1.4%	300,100
18 to 24	1.3%	398,900
25 to 64	0.5%	766,500
65 and older	0.3%	171,700
13 and older	0.6%	1,637,200

When looking at the age distribution of those who identify as transgender, it appears that the age distribution of transgender-identified individuals (ages 13 and older) is younger compared to the U.S. population. For instance, those ages 13 to 17 comprise 18.3% of transgender-identified individuals (ages 13 and older), whereas that age group comprises 7.6% of the U.S. population (ages 13 and older). This age trend is consistent with prior research that has found transgender individuals have a lower mean age than cisgender individuals.¹⁷

¹⁶ Jones, J. M. (2022). *LGBT Identification in U.S. Ticks up to 7.1%*. Gallup. <https://news.gallup.com/poll/389792/lgbt-identification-ticks-up.aspx>; Herman, J.L., Flores, A.R., Brown, T.N.T., Wilson, B.D.M., & Conron, K.J. (2017). *Age of Individuals who Identify as Transgender in the United States*. Los Angeles, CA: The Williams Institute.; Feldman, J.L., Luhur, W.E., Herman, J.L., Poteat, T., Meyer, I.H. (2021). Health and health care access in the US transgender population health (TransPop) survey. *Andrology*, 9, 1707– 1718. <https://doi.org/10.1111/andr.13052>.

¹⁷Feldman, J.L., Luhur, W.E., Herman, J.L., Poteat, T., Meyer, I.H. (2021). Health and health care access in the US transgender population health (TransPop) survey. *Andrology*, 9, 1707– 1718. <https://doi.org/10.1111/andr.13052>; Andrew R. Flores, Ilan H. Meyer, Lynn Langton, Jody L. Herman. (2021). Gender Identity Disparities in Criminal Victimization: National Crime Victimization Survey, 2017–2018. *American Journal of Public Health* 111(4), 726-729; Statistics Canada. (2022). Canada is the first country to provide census data on transgender and non-binary people. *The Daily*. <https://www150.statcan.gc.ca/n1/daily-quotidien/220427/dq220427b-eng.htm?HPA=1>.

Figure 2. Age distribution among those who identify as transgender and among the U.S. population (ages 13 and older)



Race/Ethnicity

Similar to age, we look at race and ethnicity of individuals who identify as transgender in two different ways: the percentage of each race/ethnicity group that identifies as transgender and the racial and ethnic distribution of the transgender-identified population compared to the racial and ethnic distribution of the U.S. population. We stratify this analysis by age, separately describing the race/ethnicity of youth and adults. Tables 2 and 3 describe the percentage of each racial/ethnic group that identifies as transgender, along with the population estimate. Differences between racial/ethnic groups are not statistically significant, but our findings do reflect prior research with population-based samples that have found that Latinx people, American Indian or Alaska Native, and biracial/multiracial groups appear more likely than White people to identify as transgender.¹⁸

Table 2. Percent of each racial/ethnic group that identifies as transgender in the U.S., among adults (ages 18 and older)

	PERCENT	NUMBER
White	0.5%	731,200
Black	0.6%	173,500
Asian	0.5%	77,300
AIAN	0.9%	14,500
Latinx	0.7%	289,700
Biracial, Multiracial, or Other Race/Ethnicity	1.0%	50,900

Note: White, Black, Asian, and American Indian or Alaska Native (AIAN) are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. Biracial, multiracial, and other race/ethnicity are non-Hispanic.

¹⁸Feldman, J.L., Luhur, W.E., Herman, J.L., Poteat, T., Meyer, I.H. (2021). Health and health care access in the US transgender population health (TransPop) survey. *Andrology*, 9, 1707–1718. <https://doi.org/10.1111/andr.13052>; Meyer, I. H., Brown, T. N., Herman, J. L., Reisner, S. L., & Bockting, W. O. (2017). Demographic Characteristics and Health Status of Transgender Adults in Select US Regions: Behavioral Risk Factor Surveillance System, 2014. *American Journal of Public Health*, 107(4), 582–589. <https://doi.org/10.2105/AJPH.2016.303648>.

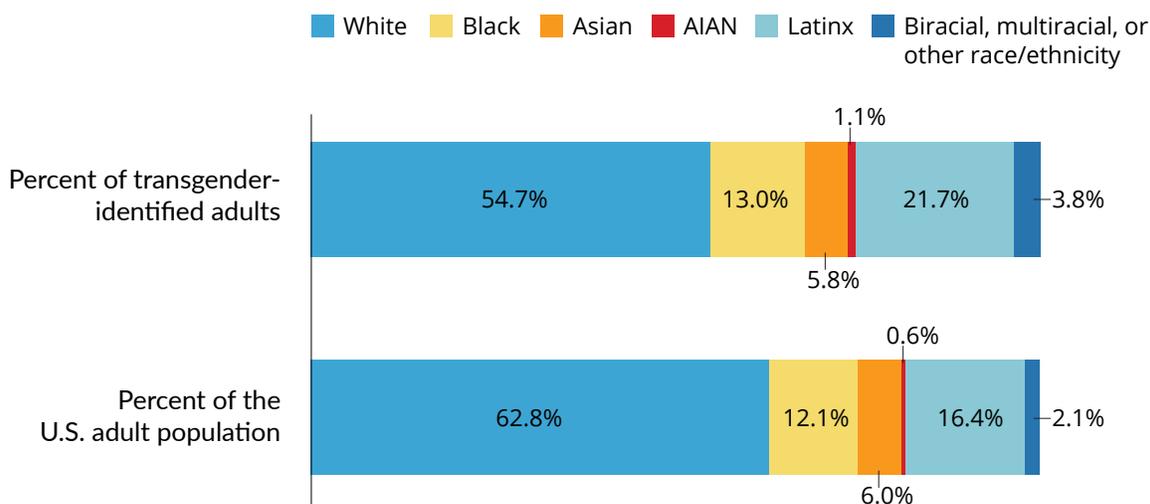
Table 3. Percent of each racial/ethnic group that identifies as transgender in the U.S., among youth (ages 13 to 17)

	PERCENT	NUMBER
White	1.3%	138,800
Black	1.4%	39,600
Asian	1.0%	10,800
AIAN	1.8%	3,000
Latinx	1.8%	92,900
Biracial, Multiracial, or Other Race/Ethnicity	1.5%	15,000

Note: White, Black, Asian, and American Indian or Alaska Native (AIAN) are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. Biracial, multiracial, and other race/ethnicity are non-Hispanic.

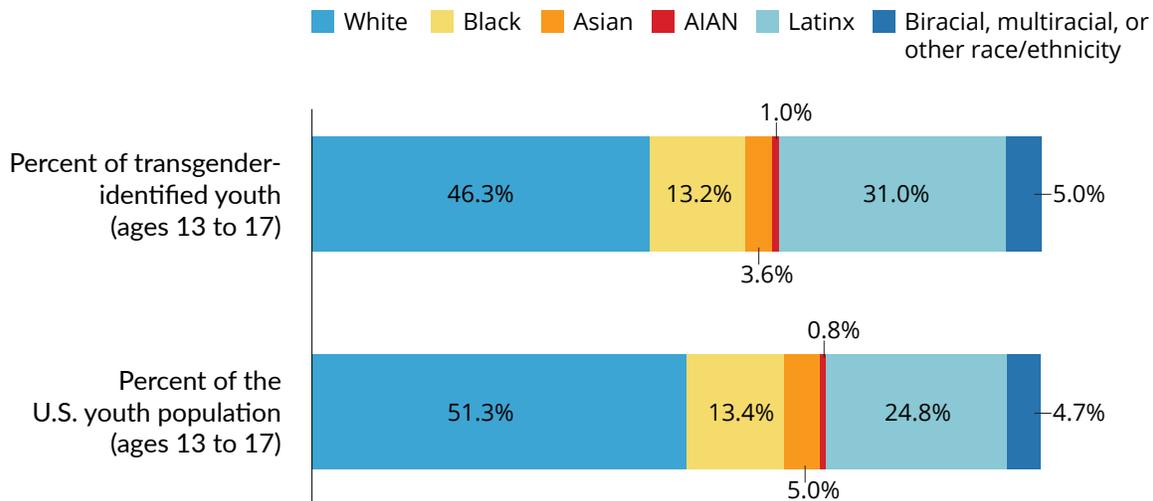
The racial and ethnic distribution of adults and youth appear generally similar to the racial/ethnic distribution of the U.S. population. However, transgender-identified youth and adults appear more likely to report being Latinx and less likely to report being White, as compared to the U.S. population (see Figures 3 and 4). As described above, this trend is in keeping with prior research.¹⁹

Figure 3. Race/ethnicity of adults who identify as transgender and of the U.S. population (ages 18 and older)



¹⁹Ibid.

Figure 4. Race/ethnicity of youth who identify as transgender and of the U.S. population (ages 13-17)



REGIONAL AND STATE POPULATION ESTIMATES, BY AGE AND RACE

Adults and youth who identify as transgender in the U.S. reside in all 50 states and the District of Columbia. Table 4 describes the percentage of each age group that identifies as transgender, and the population estimate for each, in the four U.S. regions, and in each state within each region. Overall, for youth ages 13 to 17, we find that 1.4% identify as transgender, which is about 300,000 youth. Our estimates of youth ages 13 to 17 who identify as transgender are similar across U.S. regions, ranging from 1.8% in the Northeast to 1.2% in the Midwest. At the state level, our estimates range from 3.0% of youth ages 13 to 17 identifying as transgender in New York to 0.6% in Wyoming.²⁰ Among all adults, we find that 0.5%, or over 1.3 million, identifies as transgender. Our estimates of adults in U.S. regions who identify as transgender range from 0.6% in the Northeast to 0.4% in the Midwest. At the state level, our estimates range from 0.9% of adults identifying as transgender in North Carolina to 0.2% in Missouri.²¹

²⁰Appendix Table A4 describes 95% credible intervals for our national, regional, and state level estimates for youth and adults by age group. This table can serve as a reference to help determine if estimates across regions and states appear to be significantly different from each other. For instance, the percent of youth in New York who identify as transgender (3.0%) is significantly higher than 10 other states, meaning the upper bound estimate in these 10 states is lower than the lower bound estimate for New York. For adults, the percent that identifies as transgender in North Carolina (0.9%) is significantly higher than 19 other states.

²¹The District of Columbia is not included in this range for states. DC had a notably high percentage of transgender-identified adults (0.92%), but is considered an outlier compared to the rest of the U.S. states due to its unique geographic (urban) and demographic profile.

Table 4. Regional and state-level estimates of those who identify as transgender in the U.S. population by age group (ages 13 and older)

STATE	13-17		18-24		25-64		65+		ALL ADULTS 18+	
	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER
United States	1.43%	300,100	1.31%	398,900	0.45%	766,500	0.32%	171,700	0.52%	1,337,100
WEST	1.62%	81,700	1.14%	82,600	0.51%	209,400	0.30%	36,400	0.54%	328,500
Alaska	1.23%	500	1.51%	1,000	0.65%	2,500	0.34%	300	0.70%	3,900
Arizona	1.54%	7,300	1.92%	13,000	0.71%	25,200	0.23%	3,000	0.73%	41,200
California	1.93%	49,100	0.70%	25,500	0.50%	105,100	0.34%	19,500	0.49%	150,100
Colorado	1.14%	4,200	2.09%	10,800	0.51%	15,800	0.06%	500	0.60%	27,000
Hawaii	2.15%	1,700	1.50%	1,800	0.66%	4,800	0.44%	1,200	0.70%	7,800
Idaho	0.76%	1,000	0.92%	1,500	0.51%	4,500	0.36%	1,000	0.52%	7,000
Montana	0.78%	500	0.70%	700	0.47%	2,500	0.13%	300	0.41%	3,400
Nevada	1.67%	3,300	0.87%	2,200	0.35%	5,700	0.04%	200	0.34%	8,100
New Mexico	2.62%	3,700	0.81%	1,600	0.62%	6,500	0.73%	2,800	0.67%	10,900
Oregon	1.18%	2,900	1.57%	5,700	0.52%	11,500	0.35%	2,700	0.59%	19,900
Utah	0.83%	2,100	1.34%	4,800	0.47%	7,300	0.43%	1,600	0.60%	13,700
Washington	1.09%	5,000	2.01%	13,300	0.41%	16,900	0.26%	3,200	0.56%	33,300
Wyoming	0.56%	200	1.21%	700	0.41%	1,200	0.29%	300	0.48%	2,100
MIDWEST	1.24%	54,500	1.27%	81,200	0.34%	119,900	0.26%	30,100	0.44%	231,200
Illinois	1.66%	13,700	1.94%	22,300	0.24%	16,300	0.24%	4,800	0.44%	43,400
Indiana	0.91%	4,100	1.18%	7,800	0.45%	15,100	0.27%	2,900	0.50%	25,800
Iowa	1.07%	2,100	0.45%	1,400	0.28%	4,400	0.23%	1,200	0.29%	7,100
Kansas	1.05%	2,100	1.92%	5,700	0.35%	5,000	0.34%	1,600	0.56%	12,400
Michigan	1.41%	8,900	1.13%	10,800	0.38%	19,600	0.14%	2,600	0.42%	33,000
Minnesota	0.94%	3,500	1.62%	7,900	0.52%	15,200	0.32%	2,900	0.60%	26,000
Missouri	0.75%	2,900	0.71%	3,900	0.07%	2,100	0.33%	3,500	0.20%	9,500
Nebraska	0.94%	1,200	1.12%	2,100	0.37%	3,600	0.28%	900	0.45%	6,600
North Dakota	1.16%	500	1.02%	800	0.36%	1,400	0.26%	300	0.43%	2,500
Ohio	1.15%	8,500	1.14%	12,200	0.45%	27,100	0.35%	7,200	0.51%	46,500
South Dakota	0.90%	500	1.12%	900	0.37%	1,600	0.27%	400	0.44%	2,900
Wisconsin	1.75%	6,400	0.99%	5,300	0.29%	8,500	0.17%	1,700	0.34%	15,500
SOUTH	1.25%	102,200	1.33%	154,500	0.45%	295,500	0.36%	73,600	0.54%	523,600
Alabama	1.08%	3,400	1.18%	5,400	0.42%	10,400	0.30%	2,500	0.48%	18,400
Arkansas	0.88%	1,800	3.59%	9,800	0.24%	3,500	0.58%	2,900	0.70%	16,200
Delaware	0.96%	600	2.36%	2,000	0.69%	3,400	0.49%	900	0.82%	6,300
District of Columbia	2.11%	600	2.21%	1,600	0.77%	3,200	0.56%	500	0.92%	5,300
Florida	1.32%	16,200	1.28%	22,400	0.49%	53,900	0.41%	18,600	0.55%	94,900
Georgia	1.18%	8,500	1.24%	12,700	0.48%	26,800	0.61%	9,200	0.60%	48,700
Kentucky	0.68%	2,000	1.27%	5,300	0.43%	9,900	0.32%	2,400	0.51%	17,700
Louisiana	1.30%	4,000	0.79%	3,300	0.45%	10,700	0.23%	1,700	0.44%	15,700
Maryland	2.08%	8,000	1.90%	10,100	0.38%	12,200	0.18%	1,700	0.51%	24,000
Mississippi	1.20%	2,400	0.81%	2,400	0.37%	5,500	0.33%	1,600	0.42%	9,600

STATE	13-17		18-24		25-64		65+		ALL ADULTS 18+	
	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER
North Carolina	1.27%	8,500	2.46%	24,000	0.73%	38,400	0.53%	8,900	0.87%	71,300
Oklahoma	1.00%	2,600	2.52%	9,300	0.44%	8,500	0.19%	1,100	0.63%	18,900
South Carolina	1.14%	3,700	0.87%	4,100	0.43%	11,300	0.38%	3,500	0.47%	19,000
Tennessee	0.74%	3,100	1.95%	11,700	0.44%	15,000	0.09%	1,000	0.52%	27,700
Texas	1.42%	29,800	0.71%	19,800	0.42%	61,500	0.31%	11,600	0.43%	92,900
Virginia	1.18%	6,200	1.11%	8,800	0.40%	18,000	0.34%	4,600	0.47%	31,400
West Virginia	0.68%	700	1.18%	1,800	0.36%	3,200	0.22%	800	0.40%	5,700
NORTHEAST	1.82%	61,700	1.58%	80,600	0.48%	141,600	0.32%	31,600	0.57%	253,800
Connecticut	1.64%	3,700	1.35%	4,600	0.45%	8,300	0.38%	2,400	0.54%	15,300
Maine	1.59%	1,200	1.44%	1,600	0.47%	3,300	0.34%	1,000	0.53%	5,900
Massachusetts	1.44%	5,900	2.30%	15,700	0.44%	16,100	0.46%	5,400	0.67%	37,100
New Hampshire	0.84%	700	1.53%	1,900	0.48%	3,500	0.34%	900	0.57%	6,300
New Jersey	0.67%	3,800	1.67%	12,700	0.52%	24,800	0.38%	5,600	0.62%	43,100
New York	3.00%	34,800	1.37%	24,100	0.46%	47,600	0.31%	10,100	0.53%	81,800
Pennsylvania	1.30%	10,000	1.50%	16,900	0.51%	33,400	0.24%	5,600	0.55%	56,000
Rhode Island	1.93%	1,200	2.11%	2,300	0.54%	3,000	0.21%	400	0.66%	5,700
Vermont	1.33%	500	1.26%	800	0.48%	1,500	0.29%	400	0.53%	2,700

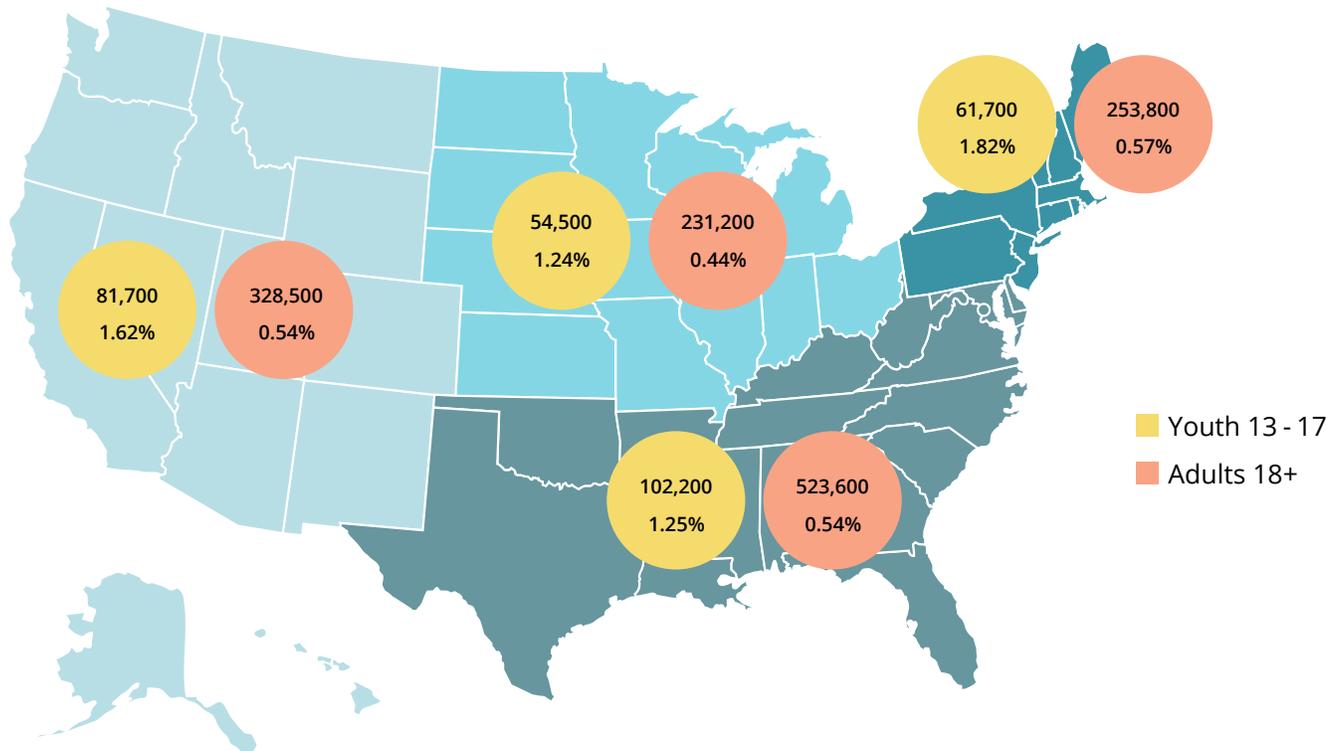


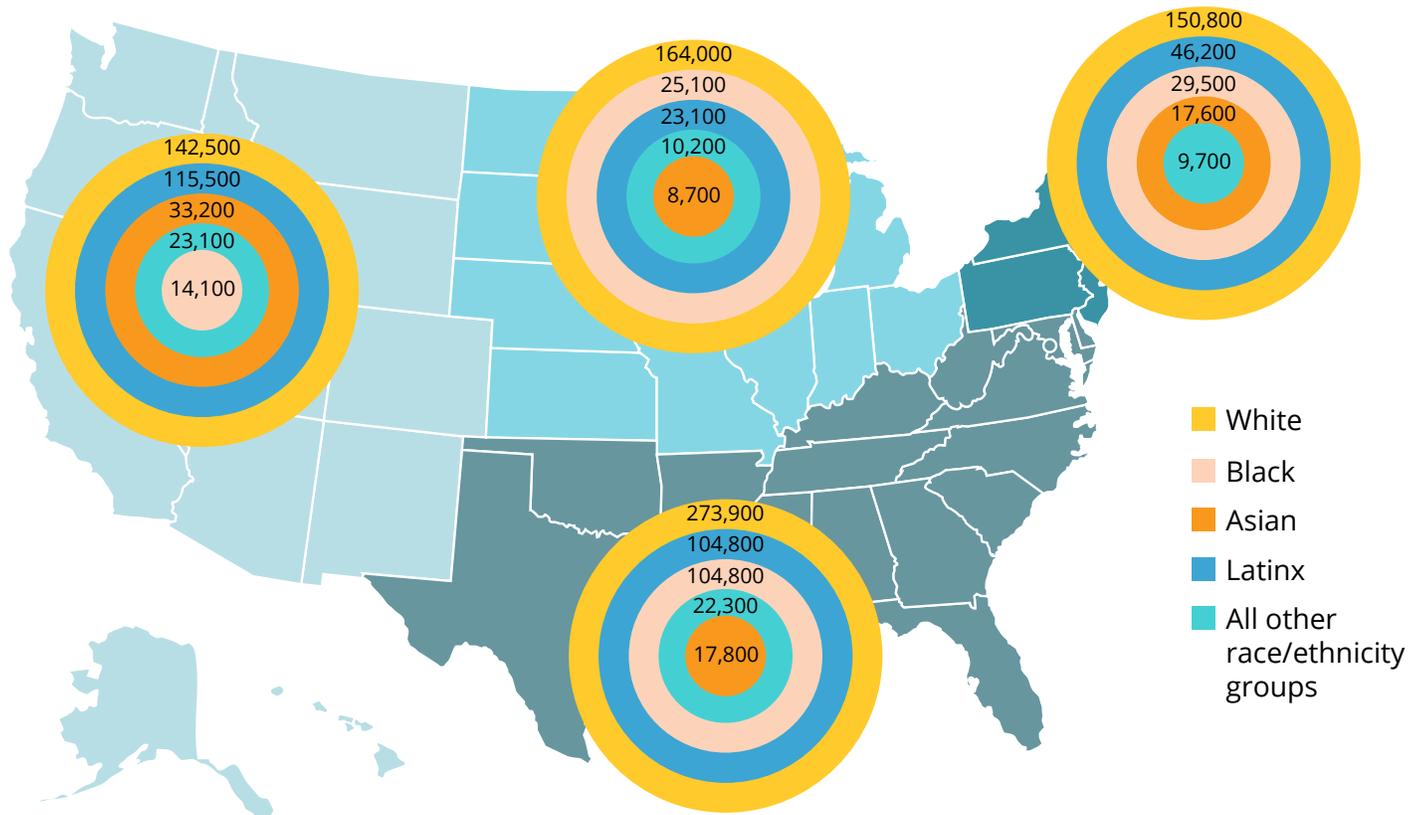
Table 5 describes the percentage and the population estimate of each racial/ethnic group that identifies as transgender nationally, in the four U.S. regions, and in each state within each region. Due to sample size limitations, our estimates are limited only to adults. Furthermore, we must combine into one heterogenous category all those reporting a race or ethnicity other than White, Black, Asian, and Latinx, which includes Native American, Alaska Native, Native Hawaiian, Pacific Islander, biracial, multiracial, and individuals with other racial/ethnic identities.

Table 5. Regional and state-level estimates of those who identify as transgender in the U.S. population by race/ethnicity (adults ages 18+ only)

STATE	WHITE		BLACK		ASIAN		LATINX		ALL OTHER RACE/ ETHNICITY GROUPS	
	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER
United States	0.46%	731,200	0.56%	173,500	0.50%	77,300	0.69%	289,700	0.94%	65,400
WEST	0.45%	142,500	0.51%	14,100	0.48%	33,200	0.70%	115,500	0.91%	23,100
Alaska	0.49%	1,900	0.70%	100	0.67%	300	0.78%	300	1.12%	1,200
Arizona	0.52%	18,700	0.66%	1,800	0.63%	1,400	0.91%	15,600	1.17%	3,700
California	0.40%	44,200	0.50%	8,000	0.47%	20,900	0.70%	69,900	0.74%	7,100
Colorado	0.50%	16,200	0.64%	1,100	0.61%	1,000	0.86%	7,500	1.04%	1,300
Hawaii	0.50%	1,400	0.59%	100	0.58%	3,500	0.80%	800	1.08%	1,900
Idaho	0.46%	5,300	0.63%	<100	0.49%	100	0.76%	1,200	0.82%	300
Montana	0.38%	2,800	0.57%	<100	0.38%	<100	0.62%	200	0.68%	400
Nevada	0.39%	3,300	0.50%	700	0.45%	700	0.69%	2,900	0.54%	500
New Mexico	0.47%	3,200	0.63%	200	0.56%	200	0.76%	5,800	0.95%	1,500
Oregon	0.53%	13,700	0.65%	400	0.64%	1,100	0.89%	3,300	1.02%	1,400
Utah	0.54%	9,800	0.66%	100	0.67%	500	0.82%	2,400	1.06%	800
Washington	0.49%	20,300	0.61%	1,400	0.58%	3,400	0.86%	5,400	0.98%	2,900
Wyoming	0.44%	1,700	0.58%	<100	0.59%	<100	0.75%	300	0.85%	100
MIDWEST	0.40%	164,000	0.48%	25,100	0.48%	8,700	0.64%	23,100	0.87%	10,200
Illinois	0.40%	23,900	0.49%	6,300	0.43%	2,400	0.65%	9,400	0.85%	1,400
Indiana	0.46%	19,500	0.53%	2,500	0.56%	700	0.70%	2,200	1.03%	1,000
Iowa	0.31%	5,700	0.41%	300	0.41%	200	0.53%	600	0.56%	200
Kansas	0.49%	8,600	0.60%	800	0.61%	400	0.82%	1,900	1.04%	700
Michigan	0.40%	23,400	0.48%	4,700	0.46%	1,100	0.66%	2,200	0.79%	1,500
Minnesota	0.53%	19,300	0.71%	1,700	0.72%	1,500	0.88%	1,800	1.27%	1,600
Missouri	0.34%	7,300	0.41%	1,200	0.41%	200	0.52%	500	0.37%	400
Nebraska	0.40%	4,800	0.54%	400	0.53%	200	0.71%	1,000	0.89%	300
North Dakota	0.39%	2,000	0.49%	100	0.59%	100	0.74%	200	0.70%	200
Ohio	0.48%	35,400	0.56%	6,000	0.53%	1,200	0.70%	2,100	1.03%	1,900
South Dakota	0.39%	2,200	0.52%	100	0.61%	100	0.63%	100	0.82%	500
Wisconsin	0.35%	11,900	0.48%	1,100	0.47%	600	0.56%	1,300	0.65%	600
SOUTH	0.48%	273,900	0.58%	104,800	0.51%	17,800	0.66%	104,800	0.99%	22,300
Alabama	0.44%	11,200	0.54%	5,400	0.46%	200	0.72%	900	0.80%	600
Arkansas	0.55%	11,200	0.62%	2,600	0.72%	300	0.89%	1,500	1.16%	600
Delaware	0.65%	3,600	0.81%	1,400	0.70%	200	1.15%	800	1.77%	300
District of Columbia	0.77%	1,800	0.99%	2,400	0.98%	300	1.11%	600	1.42%	200
Florida	0.46%	44,300	0.62%	15,100	0.55%	2,700	0.69%	29,500	0.97%	3,300
Georgia	0.53%	23,700	0.61%	15,700	0.57%	2,000	0.84%	5,800	1.04%	1,600
Kentucky	0.49%	14,500	0.55%	1,500	0.53%	300	0.76%	800	1.09%	600
Louisiana	0.43%	8,700	0.51%	5,200	0.50%	300	0.60%	1,000	0.71%	500
Maryland	0.46%	11,200	0.52%	7,200	0.49%	1,500	0.75%	3,200	0.88%	1,100
Mississippi	0.40%	5,100	0.47%	3,800	0.43%	100	0.65%	400	0.77%	200

STATE	WHITE		BLACK		ASIAN		LATINX		ALL OTHER RACE/ETHNICITY GROUPS	
	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER
North Carolina	0.71%	41,400	0.84%	15,700	0.80%	2,100	1.17%	8,200	1.59%	3,800
Oklahoma	0.53%	10,900	0.60%	1,300	0.66%	500	0.88%	2,400	1.00%	3,900
South Carolina	0.43%	11,300	0.53%	5,400	0.49%	300	0.69%	1,300	0.90%	600
Tennessee	0.48%	19,400	0.56%	4,900	0.55%	600	0.81%	1,900	0.96%	900
Texas	0.36%	32,500	0.44%	10,600	0.40%	4,300	0.58%	42,800	0.69%	2,700
Virginia	0.43%	17,900	0.51%	6,300	0.47%	2,100	0.66%	3,700	0.92%	1,500
West Virginia	0.42%	5,200	0.44%	200	0.40%	<100	0.55%	100	0.75%	100
NORTHEAST	0.51%	150,800	0.61%	29,500	0.58%	17,600	0.78%	46,200	1.04%	9,700
Connecticut	0.46%	9,100	0.62%	1,700	0.55%	700	0.76%	3,200	0.96%	600
Maine	0.52%	5,300	0.63%	100	0.74%	100	0.80%	100	0.99%	200
Massachusetts	0.58%	23,900	0.74%	2,800	0.73%	2,800	0.96%	5,800	1.21%	1,800
New Hampshire	0.54%	5,500	0.63%	100	0.60%	200	0.86%	300	1.18%	200
New Jersey	0.49%	20,800	0.61%	5,800	0.52%	3,800	0.79%	11,200	1.11%	1,400
New York	0.46%	39,800	0.56%	12,100	0.55%	7,500	0.70%	19,100	0.92%	3,300
Pennsylvania	0.50%	40,200	0.61%	6,500	0.58%	2,100	0.78%	5,300	1.09%	1,800
Rhode Island	0.57%	3,700	0.71%	300	0.72%	200	0.89%	1,100	1.14%	300
Vermont	0.51%	2,400	0.67%	<100	0.55%	<100	0.91%	100	1.04%	100

Note: White, Black, and Asian are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. All other race/ethnicity groups are non-Hispanic.



CONCLUSION

Based on our estimates from 2016-2017 and the current report, the percentage and number of adults who identify as transgender has remained steady over time in the United States. The availability of the YRBS data has given us a more direct look into youth gender identity and provides better data than was previously available to us for estimating the size and characteristics of the youth population. Youth ages 13 to 17 comprise a larger share of the transgender-identified population than we previously estimated, currently comprising about 18% of the transgender-identified population in the U.S., up from 10% previously. Our findings regarding gender, age, and race/ethnicity are in keeping with existing research, which has found that nonbinary adults comprise nearly a third of transgender adults, transgender people are on average younger than the general population, and transgender people are more likely to report being Latinx and less likely to report being White.

Our estimates described in this report were made possible by advances in gender identity data collection over the past five years. More states have included the BRFSS optional gender identity module over the years and the availability of YRBS data has given us a direct look into youth gender identity. In this study, we were also able, for the first time, to produce national and state-level population estimates for Asian adults and national population estimates for American Indian and Alaska Native adults who identify as transgender. Despite these advances, our study required the use of advanced statistical modeling in order to produce our estimates. This is because several states do not include the optional gender identity module in their BRFSS surveys. Other surveys that identify transgender respondents are still emerging as potential data sources for similar population estimates, like Household Pulse Survey, or do not yet exist. To improve the availability of data about the U.S. transgender population, and negate the need for advanced statistical modeling to overcome limitations in the current data, the CDC should make the BRFSS gender identity module part of the core survey rather than an optional module. Furthermore, the federal government should include questions to identify transgender people in all federal surveys. Visibility for the transgender people in our federal surveys would further bring to light the characteristics, experiences, well-being, and needs of the transgender population in the United States.

METHODS

The BRFSS collects demographic and health information from representative samples at the state level. In addition to a core questionnaire provided by the CDC that coordinates the BRFSS, states can add optional modules that ask unique sets of questions. One module asks about sexual orientation and gender identity (SOGI). Similarly, the YRBS allows states to include a module that asks about SOGI. The BRFSS module asks, "Do you consider yourself to be transgender?" with response options, "Yes; No; Don't know/not sure" or respondents could refuse to answer. If a respondent expresses confusion, then interviewers provide definitions of transgender and/or gender nonconforming. If respondents affirmatively answer the question, they are then asked if they consider themselves to be male-to-female; female-to-male; or gender nonconforming. The YRBS module asks, "Some people describe themselves as transgender when their sex at birth does not match the way they think or feel about their gender. Are you transgender?" with response options, "No; Yes, I am transgender; Not sure if I am transgender, Don't know what the question is asking."

We pool the 2017-2020 BRFSS surveys; 41 states used the SOGI module one or more times in this timeframe ($n = 1,707,678$). We pool the 2017 and 2019 YRBS where 15 states used the module at least one during this time period ($n = 372,214$). We analyze adults and youth separately considering they come from different sources. All respondents who were asked whether they identify as transgender are coded as 1 if they did or 0 if they did not, which includes don't know responses, not sure responses, and refusals to answer.

We directly analyze the results from any state that implemented the sexual orientation and gender identity module. For example, the estimates for the 41 states in the BRFSS will be the same as the weighted results one would obtain from direct analyses of available 2017-2020 BRFSS data for that state.²² The pooled estimates do not account for various years.

The strategy we employ for states where transgender identification is not observed, because the SOGI module was not used, combines small area estimation strategies common in demographic research with poststratification techniques common in survey research.²³ This strategy is called multilevel regression and poststratification (MRP). We fit a multilevel model relying on demographics and state of residence. The general model can be summarized in two stages. The first stage performs a multilevel regression to data. The following is the specification for the BRFSS:

$$y_i = g\left(b_0 + b_1 * \text{cell_int} + \alpha_{\text{race}_i}^j + \alpha_{\text{age}_i}^k + \alpha_{\text{educ}_i}^l + \alpha_{\text{age.educ}_i}^m + \alpha_{\text{state}_i}^s\right).$$

where $g(\cdot)$ is a link function, and α 's represent random coefficients for demographic and geographic predictors. All demographic random effects are distributed normally, $\alpha \sim N(0, \sigma^2)$.

In building our estimation models, we included covariates that are correlated with the percentage of transgender or LGBT people within a state and where there are population estimates from the United States Census Bureau. Individual-level and contextual covariates are related to identification, disclosure, and may be associated with migration to a state. Evaluations of models employing this estimation strategy for statewide estimates show that even using a single demographic predictor, such as race, in addition to geographic predictors produce estimates that out-perform disaggregated analysis.²⁴ Studies document that LGBT and transgender populations tend to be younger,²⁵ more

²²This is true for all overall estimates. However, for subgroups we rely on the model described in this note and then generalize those model results to the estimated population total of people who identify as transgender. We do this because of small cell sizes and unstable direct estimates.

²³Park, D.K., Gelman, A., & Bafumi, J. (2004). Bayesian multilevel estimation with poststratification: State-level estimates from national polls. *Political Analysis*, 12, 375-385.

²⁴Lax, J. R., and Phillips, J. H. (2009). How should we estimate public opinion in the states? *American Journal of Political Science*, 53(1), 107-121.

²⁵James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L. A., & Anafi, M. (2016). *The Report of the 2015 U.S. Transgender Survey*. Washington, DC: National Center for Transgender Equality; Meyer, I.H., Wilson, B.D.M., & O'Neill, K. (2021). *LGBTQ People in the US: Select Findings from the Generations and TransPop Studies*. Los Angeles, CA: The Williams Institute.

racially and ethnically diverse,²⁶ and have levels of educational attainment that differ from non-LGBT²⁷ or cisgender populations.²⁸ Further, varying social contexts may create environments that are either more welcoming to LGBT people encouraging greater identity uptake or migration.²⁹ Thus, the models rely on basic demographics and state-level contextual characteristics that may covary with transgender status.

We use six race and ethnicity categories. We also use 10 age categories ranging from 18 to over 65 years old. Educational attainment is comprised of four categories (i.e., less than a high school diploma or equivalent, a high school diploma or equivalent, some college education, and those with a college degree or more education). We also use the interaction of age and education categories, which is a standard procedure in survey weighting as age and educational attainment are interrelated. At times, the BRFSS module may or may not be used in a cell phone interview depending on a person's residency,³⁰ so it is used as a covariate to account for a systematic missing data pattern. The geographic-level coefficients are given group-level covariates:

$$\alpha_s \sim N(\alpha_{\text{region}_s}^r + G^s U, \sigma_{\text{state}}^2),$$

where G^s is a matrix of $(s \times j)$ matrix of j group-level variables and U is a vector of length j regression coefficients. We include statewide contextual variables such as race/ethnic composition of the state, the percentage of same-sex couple households in the state, statewide measures of public opinion on LGBT rights, and median income in a state. In total, the percentage of same-sex couple households in the state was among the strongest predictors in the current model. We further add a third level to the model for regional groupings of the states, which is also distributed normally.³¹

The YRBS was analyzed with the same approach, except there were only two age groups (13-14; 15-17), and we do not use educational attainment or cell phone interviews. Our analyses use the sampling weights from both the BRFSS and YRBS. We rescale these weights to account for multilevel modeling using Carle's method A.³² All models are fit in R relying on maximum likelihood estimation.³³ The second step of MRP is to use the fitted regression and generalize it over known population distributions. For example, if $g(\cdot)$ were a logistic regression, then the probabilities an individual identifies with a group can be predicted for each demographic and geographic characteristic (θ_C),

²⁶Flores, A. R., Langton, L., Meyer, I. H., and Romero, A. P. (2020). Victimization rates and traits of sexual and gender minorities in the United States: Results from the National Crime Victimization Survey, 2017. *Science Advances*, 6: eaba6910.

²⁷Ibid.

²⁸Badgett, M. V. L., Choi, S. K., & Wilson, B. D. M., (2019, October). *LGBT poverty in the United States: A study of differences between sexual orientation and gender identity groups*. Los Angeles, CA: The Williams Institute.

²⁹Esposito, E., Calanchini, J. (2022). Examining selective migration as attitudinal fit versus gay migration. *Journal of Experimental Social Psychology*, 101, 104307.

³⁰Jesdale, B.M. (2021). Sources of missing sexual orientation and gender identity data in the Behavioral Risk Factor Surveillance System. *American Journal of Preventative Medicine*, 61(2), 281-290.

³¹Given the uniqueness of the District of Columbia, it is treated as its own state and region in this process.

³²Carle, A.C. (2009). Fitting multilevel models in complex survey data with design weights: Recommendations. *BMV Medical Research Methodology*, 9, <https://doi.org/10.1186/1471-2288-9-49>

³³Bates, D., Mächler, M., Bolker, B., and Walker, S. (2015). Fitting linear mixed-effects models using lme4. *Journal of Statistical Software*, 67, 1-48.

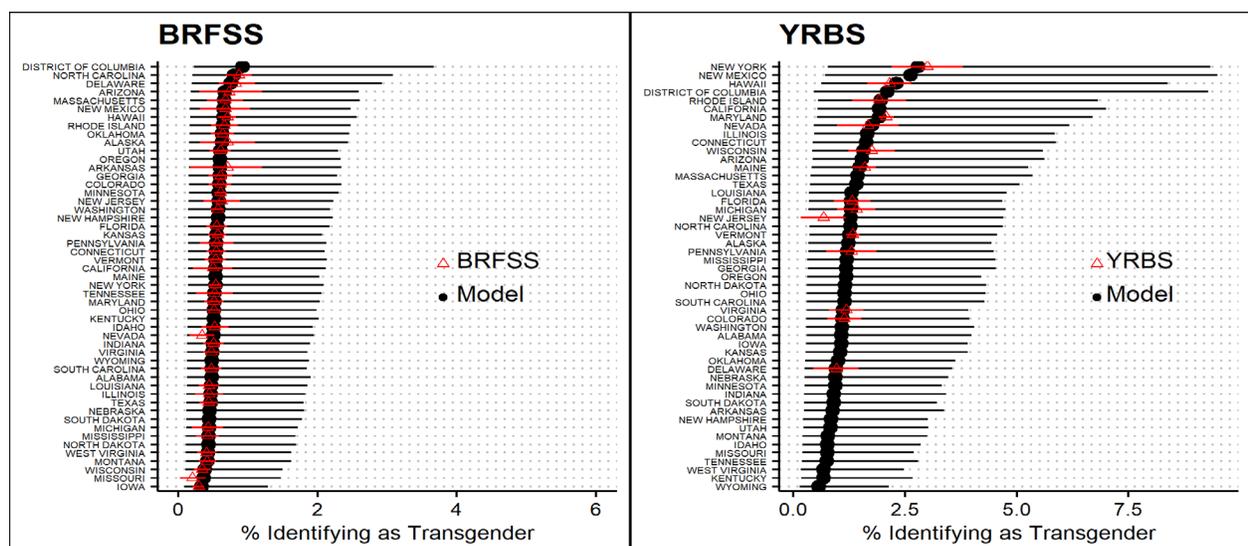
where $\max(c) = j * k * l * s$. Every fitted value can then be weighted by the size of the population, N_c , and these weighted values summed by state for population size and further divided by the state's population for a population proportion:

$$\text{Population size}_s = \sum_{c \in S} \theta_c * N_c; \text{Population Proportion}_s = \frac{\sum_{c \in S} \theta_c * N_c}{\sum_{c \in S} N_c}.$$

We use the 2019 three-year estimates from the American Community Survey for our poststratification dataset, which we retrieved through IPUMS. For the states where data are observed, we multiply the 2019 3-year estimates to the proportion of people identifying as transgender, providing us with a population estimate. For the states where data are not observed, model-based estimates are used, and we incorporate model uncertainty in predictions when providing confidence intervals of our estimates.³⁴

Since our estimation strategy produces two sets of estimates for states where data are observed (i.e., direct estimates and model-based estimates). We compared these two sets of estimates. Overall, they tended to strongly correlate with one another (e.g., correlation above 0.80), suggesting that the model-based estimates perform similar to direct estimation. Figure 5 compares model-based estimates to direct estimates at the state level. We see very few deviations that all fall beyond the margin of error. The three exceptions are Missouri and Nevada in the BRFSS and New Jersey in the YRBS, where the direct estimates are smaller than the model-based estimates. These deviations all fall well within confidence intervals. While we report direct estimates whenever possible, these discrepancies suggest that model-based estimates may better adjust weighted estimates to population targets without producing bias. We still opt to be conservative in our reporting and rely on direct estimates whenever the data are available.

Figure 5. Model-based estimates and direct estimates from BRFSS and YRBS



³⁴There is no consensus about the best method for uncertainty estimation for multilevel models. We use the predictInterval function from the merTools package in R for uncertainty estimation. Ideally, a fully Bayesian model would be preferred, but we were limited by computing power.

To ensure subgroup estimates summed to national estimates, the subgroup counts of people who identify as transgender were divided by total counts of people who identify as transgender and the resulting percentage was then multiplied by the total population estimate to create an adjusted subgroup population estimate. For example, the population estimates of adults who identify as transgender by age group in California were added together to create a population estimate of the total number of adults who identify as transgender in California. The estimated number of 18- to 24-year-old transgender people in California is then divided by this total, to create an estimate of what percentage of transgender adults in California are 18 to 24. This percentage is then multiplied by the total estimated number of adults who identify as transgender in California. The resulting population estimate for that subgroup is only slightly different than the original subgroup estimate but it now correctly adds to the total estimated number of adults who identify as transgender in California.

To create national estimates, count estimates for each state were summed and then divided by the total population estimate. For example, the estimated number of Black adults who identify as transgender in the United States was summed across all states and then divided by the total estimated number of Black adults in the U.S. This created a national estimate of the percentage of Black adults who identify as transgender. A similar approach was used to create regional estimates.

All numbers were rounded to the nearest 100th. Some lower-bound credible intervals reported below were negative; these were truncated to zero.

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APPENDIX

Table A1. Percent of each age group that identifies as transgender in the U.S.

	PERCENT [LB, UB]	NUMBER [LB, UB]
13 to 17	[0.61%, 4.02%]	[128,834, 843,773]
18 to 24	[0.43%, 2.43%]	[130,902, 736,873]
25 to 64	[0.23%, 0.74%]	[399,265, 1,260,344]
65 and older	[0.12%, 0.57%]	[64,824, 310,718]
Total (ages 13+)	[0.26%, 1.14%]	[723,825, 3,151,708]

Table A2. Percent of each racial/ethnic group that identifies as transgender in the U.S., among adults (ages 18 and older)

	PERCENT [LB, UB]	NUMBER [LB, UB]
White	[0.28%, 0.72%]	[450,300, 1,151,079]
Black	[0.36%, 0.84%]	[110,698, 258,977]
Asian	[0.31%, 0.74%]	[47,451, 113,294]
AIAN	[0.50%, 1.39%]	[8,327, 23,097]
Latinx	[0.41%, 1.00%]	[172,709, 420,079]
Biracial, multiracial, or other race/ethnicity	[0.58%, 1.42%]	[40,459, 98,207]
Total	[0.32%, 0.77%]	[816,644, 1,964,330]

Note: White, Black, Asian, and American Indian or Alaska Native (AIAN) are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. Biracial, multiracial, and other race/ethnicity are non-Hispanic.

Table A3. Percent of each racial/ethnic group that identifies as transgender in the U.S., among youth (ages 13 to 17)

	PERCENT [LB, UB]	NUMBER [LB, UB]
White	[0.34%, 4.63%]	[36,900, 498,000]
Black	[0.38%, 5.05%]	[10,700, 142,250]
Asian	[0.28%, 3.80%]	[2,900, 39,800]
AIAN	[0.48%, 6.46%]	[800, 10,900]
Latinx	[0.49%, 6.34%]	[25,600, 330,650]
Biracial, multiracial, or other race/ethnicity	[0.41%, 5.47%]	[4,000, 53,850]
Total	[0.58%, 3.92%]	[122,000, 823,200]

Note: White, Black, Asian, and American Indian or Alaska Native (AIAN) are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. Biracial, multiracial, and other race/ethnicity are non-Hispanic.

Table A4. 95% Credible Intervals for regional and state-level estimates of those who identify as transgender in the U.S. population by age group

STATE	13-17		18-24		25-64		65+		ALL ADULTS	
	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
United States	[0.61%, 4.02%]	[128,834, 843,773]	[0.43%, 2.43%]	[130,902, 736,873]	[0.23%, 0.74%]	[399,265, 1,260,344]	[0.12%, 0.57%]	[64,824, 310,718]	[0.32%, 0.77%]	[816,644, 1,964,330]
WEST	[0.51%, 5.48%]	[25,784, 277,035]	[0.35%, 2.16%]	[25,647, 156,784]	[0.18%, 0.92%]	[73,888, 377,554]	[0.04%, 0.63%]	[4,962, 76,784]	[0.27%, 0.76%]	[162,515, 461,338]
Alaska	[0.33%, 4.44%]	[143, 1,930]	[0.00%, 3.50%]	[0, 2,345]	[0.21%, 1.09%]	[837, 4,272]	[0.03%, 0.66%]	[26, 616]	[0.31%, 1.10%]	[1,715, 6,085]
Arizona	[0.43%, 5.63%]	[2,040, 26,881]	[0.00%, 4.14%]	[0, 28,838]	[0.14%, 1.28%]	[5,047, 46,633]	[0.03%, 0.44%]	[398, 5,734]	[0.30%, 1.20%]	[16,921, 67,683]
California	[0.54%, 7.01%]	[13,828, 178,759]	[0.14%, 1.25%]	[5,169, 46,288]	[0.12%, 0.89%]	[24,372, 187,926]	[0.00%, 0.70%]	[0, 40,614]	[0.21%, 0.77%]	[64,328, 235,869]
Colorado	[0.68%, 1.60%]	[2,484, 5,849]	[1.08%, 3.09%]	[5,686, 16,305]	[0.35%, 0.68%]	[10,898, 21,338]	[0.00%, 0.11%]	[0, 950]	[0.43%, 0.76%]	[19,372, 34,239]
Hawaii	[1.66%, 2.63%]	[1,330, 2,104]	[0.77%, 2.22%]	[905, 2,604]	[0.51%, 0.81%]	[3,698, 5,928]	[0.26%, 0.62%]	[707, 1,668]	[0.56%, 0.83%]	[6,249, 9,262]
Idaho	[0.20%, 2.85%]	[261, 3,737]	[0.22%, 1.62%]	[362, 2,632]	[0.25%, 0.77%]	[2,249, 6,823]	[0.09%, 0.62%]	[262, 1,797]	[0.33%, 0.72%]	[4,414, 9,631]
Montana	[0.21%, 3.00%]	[137, 1,997]	[0.08%, 1.32%]	[76, 1,334]	[0.31%, 0.64%]	[1,652, 3,378]	[0.04%, 0.22%]	[87, 464]	[0.29%, 0.54%]	[2,440, 4,543]
Nevada	[0.93%, 2.40%]	[1,844, 4,746]	[0.00%, 1.96%]	[0, 4,932]	[0.16%, 0.53%]	[2,642, 8,772]	[0.00%, 0.09%]	[0, 466]	[0.16%, 0.52%]	[3,823, 12,425]
New Mexico	[0.71%, 9.49%]	[989, 13,308]	[0.00%, 1.74%]	[0, 3,460]	[0.16%, 1.08%]	[1,628, 11,274]	[0.00%, 1.46%]	[0, 5,537]	[0.31%, 1.03%]	[5,032, 16,718]
Oregon	[0.31%, 4.21%]	[778, 10,451]	[0.40%, 5.77%]	[1,457, 21,059]	[0.13%, 2.07%]	[2,897, 45,955]	[0.09%, 1.44%]	[671, 11,073]	[0.15%, 2.33%]	[50, 781]
Utah	[0.22%, 3.02%]	[568, 7,700]	[0.71%, 1.98%]	[2,563, 7,142]	[0.31%, 0.63%]	[4,848, 9,763]	[0.25%, 0.62%]	[899, 2,270]	[0.45%, 0.75%]	[10,244, 17,073]
Washington	[0.29%, 4.06%]	[1,325, 18,761]	[1.41%, 2.62%]	[9,262, 17,293]	[0.31%, 0.51%]	[12,818, 20,840]	[0.15%, 0.37%]	[1,841, 4,471]	[0.46%, 0.65%]	[27,386, 38,698]
Wyoming	[0.15%, 2.13%]	[56, 814]	[0.30%, 4.58%]	[167, 2,553]	[0.10%, 1.61%]	[302, 4,652]	[0.07%, 1.13%]	[71, 1,124]	[0.12%, 1.88%]	[540, 8,330]
MIDWEST	[0.49%, 3.67%]	[21,739, 161,975]	[0.42%, 2.32%]	[26,559, 148,216]	[0.19%, 0.54%]	[67,789, 188,624]	[0.11%, 0.45%]	[12,382, 52,130]	[0.27%, 0.65%]	[144,115, 344,082]
Illinois	[0.46%, 5.85%]	[3,836, 48,306]	[0.42%, 3.46%]	[4,811, 39,925]	[0.11%, 0.38%]	[7,446, 25,144]	[0.07%, 0.40%]	[1,407, 8,217]	[0.24%, 0.64%]	[23,656, 63,082]
Indiana	[0.24%, 3.42%]	[1,097, 15,534]	[0.44%, 1.92%]	[2,946, 12,738]	[0.28%, 0.61%]	[9,528, 20,945]	[0.12%, 0.43%]	[1,270, 4,662]	[0.35%, 0.65%]	[18,068, 33,554]
Iowa	[0.29%, 3.91%]	[586, 7,805]	[0.15%, 0.75%]	[468, 2,364]	[0.19%, 0.38%]	[2,947, 5,947]	[0.11%, 0.35%]	[584, 1,913]	[0.21%, 0.37%]	[5,112, 9,006]
Kansas	[0.28%, 3.90%]	[559, 7,841]	[1.15%, 2.70%]	[3,395, 8,011]	[0.24%, 0.46%]	[3,453, 6,577]	[0.21%, 0.47%]	[993, 2,234]	[0.42%, 0.68%]	[9,294, 15,048]
Michigan	[1.02%, 1.79%]	[6,432, 11,316]	[0.00%, 2.27%]	[33, 21,458]	[0.11%, 0.65%]	[5,797, 33,300]	[0.00%, 0.32%]	[0, 5,577]	[0.19%, 0.64%]	[14,909, 50,221]

STATE	13-17		18-24		25-64		65+		ALL ADULTS	
	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
Minnesota	[0.25%, 3.32%]	[934, 12,413]	[1.16%, 2.08%]	[5,675, 10,182]	[0.42%, 0.62%]	[12,268, 18,075]	[0.22%, 0.42%]	[2,028, 3,831]	[0.52%, 0.69%]	[22,541, 29,910]
Missouri	[0.20%, 2.70%]	[778, 10,548]	[0.00%, 2.08%]	[0, 11,667]	[0.00%, 0.16%]	[0, 5,189]	[0.05%, 0.62%]	[480, 6,555]	[0.02%, 0.39%]	[954, 18,595]
Nebraska	[0.25%, 3.47%]	[324, 4,561]	[0.30%, 4.35%]	[561, 8,234]	[0.09%, 1.52%]	[909, 14,575]	[0.07%, 1.13%]	[224, 3,537]	[0.12%, 1.80%]	[1,694, 26,346]
North Dakota	[0.30%, 4.32%]	[127, 1,842]	[0.25%, 3.93%]	[204, 3,144]	[0.09%, 1.43%]	[347, 5,489]	[0.06%, 1.02%]	[76, 1,229]	[0.11%, 1.69%]	[627, 9,862]
Ohio	[0.30%, 4.31%]	[2,242, 31,883]	[0.62%, 1.66%]	[6,661, 17,749]	[0.33%, 0.57%]	[19,847, 34,509]	[0.22%, 0.48%]	[4,536, 9,844]	[0.40%, 0.61%]	[36,471, 55,618]
South Dakota	[0.24%, 3.21%]	[141, 1,875]	[0.29%, 4.35%]	[238, 3,590]	[0.09%, 1.51%]	[409, 6,536]	[0.07%, 1.12%]	[110, 1,734]	[0.11%, 1.77%]	[757, 11,860]
Wisconsin	[1.29%, 2.21%]	[4,683, 8,050]	[0.29%, 1.68%]	[1,568, 9,155]	[0.16%, 0.41%]	[4,838, 12,337]	[0.07%, 0.27%]	[675, 2,797]	[0.22%, 0.46%]	[10,033, 20,979]
SOUTH	[0.53%, 3.68%]	[42,806, 299,986]	[0.45%, 2.50%]	[51,865, 290,313]	[0.27%, 0.73%]	[176,871, 475,755]	[0.16%, 0.62%]	[33,661, 128,183]	[0.35%, 0.82%]	[343,999, 793,395]
Alabama	[0.30%, 3.99%]	[956, 12,593]	[0.31%, 4.55%]	[1,391, 20,700]	[0.10%, 1.66%]	[2,619, 41,531]	[0.08%, 1.20%]	[657, 10,233]	[0.12%, 1.90%]	[4,667, 72,464]
Arkansas	[0.24%, 3.37%]	[471, 6,712]	[0.00%, 7.89%]	[0, 22,365]	[0.03%, 0.45%]	[392, 6,878]	[0.12%, 1.04%]	[618, 5,458]	[0.17%, 1.20%]	[3,943, 27,831]
Delaware	[0.51%, 1.40%]	[305, 843]	[0.95%, 3.76%]	[796, 3,155]	[0.42%, 0.97%]	[2,077, 4,827]	[0.18%, 0.79%]	[335, 1,501]	[0.58%, 1.10%]	[4,465, 8,468]
District of Columbia	[0.46%, 9.29%]	[130, 2,603]	[0.54%, 8.51%]	[392, 6,156]	[0.18%, 3.14%]	[773, 13,125]	[0.14%, 2.20%]	[121, 1,927]	[0.22%, 3.67%]	[1,286, 21,207]
Florida	[0.97%, 1.67%]	[11,898, 20,515]	[0.33%, 2.23%]	[5,791, 39,269]	[0.32%, 0.67%]	[34,691, 73,562]	[0.25%, 0.58%]	[11,041, 26,257]	[0.40%, 0.70%]	[68,989, 120,730]
Georgia	[0.32%, 4.54%]	[2,307, 32,790]	[0.38%, 2.10%]	[3,869, 21,625]	[0.30%, 0.67%]	[16,445, 37,242]	[0.32%, 0.89%]	[4,878, 13,621]	[0.43%, 0.77%]	[34,896, 62,489]
Kentucky	[0.18%, 2.68%]	[517, 7,813]	[0.31%, 4.83%]	[1,300, 20,252]	[0.11%, 1.72%]	[2,505, 39,533]	[0.09%, 1.32%]	[653, 9,997]	[0.13%, 2.01%]	[4,457, 69,781]
Louisiana	[0.35%, 4.77%]	[1,062, 14,546]	[0.13%, 1.44%]	[550, 6,102]	[0.27%, 0.64%]	[6,464, 15,288]	[0.08%, 0.37%]	[569, 2,776]	[0.29%, 0.59%]	[10,334, 21,025]
Maryland	[1.95%, 2.22%]	[7,507, 8,542]	[0.91%, 2.89%]	[4,803, 15,160]	[0.26%, 0.50%]	[8,264, 16,046]	[0.10%, 0.26%]	[948, 2,506]	[0.37%, 0.65%]	[17,444, 30,644]
Mississippi	[0.31%, 4.52%]	[627, 9,213]	[0.16%, 1.47%]	[463, 4,385]	[0.16%, 0.57%]	[2,411, 8,575]	[0.10%, 0.56%]	[474, 2,746]	[0.25%, 0.58%]	[5,695, 13,211]
North Carolina	[0.36%, 4.69%]	[2,413, 31,369]	[1.42%, 3.50%]	[14,413, 35,472]	[0.52%, 0.95%]	[28,416, 51,386]	[0.31%, 0.75%]	[5,355, 13,123]	[0.68%, 1.05%]	[55,724, 86,044]
Oklahoma	[0.27%, 3.63%]	[691, 9,438]	[1.36%, 3.68%]	[5,236, 14,186]	[0.30%, 0.58%]	[6,038, 11,532]	[0.06%, 0.32%]	[381, 1,999]	[0.46%, 0.80%]	[13,830, 24,053]
South Carolina	[0.30%, 4.28%]	[975, 13,788]	[0.25%, 1.50%]	[1,186, 7,093]	[0.23%, 0.63%]	[6,084, 16,683]	[0.23%, 0.53%]	[2,186, 4,932]	[0.32%, 0.62%]	[12,923, 25,038]
Tennessee	[0.19%, 2.79%]	[822, 11,816]	[0.07%, 3.84%]	[410, 24,084]	[0.18%, 0.70%]	[6,535, 25,020]	[0.00%, 0.18%]	[0, 2,086]	[0.25%, 0.78%]	[13,296, 41,484]

STATE	13-17		18-24		25-64		65+		ALL ADULTS	
	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
Texas	[0.37%, 5.07%]	[7,732, 106,687]	[0.27%, 1.15%]	[7,577, 32,579]	[0.26%, 0.57%]	[38,793, 85,989]	[0.08%, 0.55%]	[3,139, 20,418]	[0.30%, 0.56%]	[64,803, 120,966]
Virginia	[0.80%, 1.55%]	[4,225, 8,149]	[0.40%, 1.82%]	[3,198, 14,624]	[0.28%, 0.53%]	[12,515, 23,842]	[0.15%, 0.54%]	[2,009, 7,290]	[0.35%, 0.60%]	[23,377, 40,074]
West Virginia	[0.16%, 2.47%]	[168, 2,569]	[0.32%, 2.05%]	[489, 3,107]	[0.20%, 0.51%]	[1,851, 4,696]	[0.08%, 0.36%]	[299, 1,316]	[0.27%, 0.55%]	[3,870, 7,884]
NORTHEAST	[1.14%, 3.10%]	[38,504, 104,777]	[0.53%, 2.78%]	[26,831, 141,561]	[0.27%, 0.74%]	[80,717, 218,410]	[0.14%, 0.55%]	[13,818, 53,622]	[0.37%, 0.82%]	[166,015, 365,516]
Connecticut	[0.44%, 5.87%]	[980, 13,222]	[0.54%, 2.15%]	[1,882, 7,435]	[0.31%, 0.59%]	[5,789, 10,968]	[0.20%, 0.55%]	[1,267, 3,475]	[0.40%, 0.68%]	[11,351, 19,297]
Maine	[1.39%, 1.80%]	[1,021, 1,322]	[0.36%, 5.00%]	[386, 5,407]	[0.12%, 1.87%]	[849, 13,159]	[0.09%, 1.28%]	[254, 3,679]	[0.14%, 2.03%]	[1,489, 22,246]
Massachusetts	[0.38%, 5.36%]	[1,571, 21,958]	[0.69%, 3.90%]	[4,792, 26,922]	[0.20%, 0.68%]	[7,444, 24,975]	[0.12%, 0.81%]	[1,411, 9,457]	[0.41%, 0.93%]	[22,723, 51,543]
New Hampshire	[0.22%, 3.01%]	[177, 2,414]	[0.36%, 5.78%]	[443, 7,157]	[0.12%, 1.90%]	[877, 13,793]	[0.09%, 1.38%]	[225, 3,478]	[0.14%, 2.21%]	[1,545, 24,427]
New Jersey	[0.19%, 1.15%]	[1,056, 6,521]	[0.31%, 3.03%]	[2,356, 22,910]	[0.22%, 0.83%]	[10,185, 39,143]	[0.16%, 0.59%]	[2,433, 8,681]	[0.36%, 0.88%]	[25,018, 61,156]
New York	[2.28%, 3.72%]	[26,448, 43,209]	[0.79%, 1.96%]	[13,832, 34,452]	[0.37%, 0.55%]	[37,926, 57,554]	[0.19%, 0.43%]	[6,302, 14,018]	[0.43%, 0.62%]	[66,374, 95,703]
Pennsylvania	[0.78%, 1.82%]	[5,987, 14,014]	[0.16%, 2.84%]	[1,818, 32,295]	[0.22%, 0.79%]	[14,634, 52,649]	[0.07%, 0.40%]	[1,617, 9,626]	[0.31%, 0.79%]	[31,543, 80,383]
Rhode Island	[1.32%, 2.54%]	[828, 1,593]	[0.95%, 3.28%]	[1,043, 3,613]	[0.35%, 0.73%]	[1,977, 4,096]	[0.07%, 0.35%]	[139, 647]	[0.47%, 0.85%]	[4,029, 7,286]
Vermont	[1.21%, 1.45%]	[435, 524]	[0.43%, 2.10%]	[279, 1,371]	[0.32%, 0.65%]	[1,036, 2,073]	[0.14%, 0.45%]	[169, 560]	[0.38%, 0.68%]	[1,942, 3,475]

Table A5. 95% Credible Intervals for regional and state-level estimates of adults who identify as transgender in the U.S. by race/ethnicity

	WHITE		BLACK		ASIAN		LATINX		ALL OTHER RACE/ ETHNICITY GROUPS	
STATE	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
United States	[0.28%, 0.72%]	[450,300, 1,151,079]	[0.36%, 0.84%]	[110,698, 258,977]	[0.31%, 0.74%]	[47,451, 113,294]	[0.41%, 1.00%]	[172,709, 420,079]	[0.58%, 1.42%]	[40,459, 98,207]
WEST	[0.24%, 0.76%]	[77,004, 243,246]	[0.25%, 0.81%]	[6,967, 22,361]	[0.25%, 0.74%]	[17,511, 51,508]	[0.33%, 1.12%]	[53,629, 184,482]	[0.49%, 1.45%]	[12,378, 37,047]
Alaska	[0.12%, 1.92%]	[855, 3,045]	[0.17%, 2.68%]	[57, 202]	[0.17%, 2.59%]	[144, 501]	[0.19%, 2.90%]	[133, 459]	[0.49%, 1.76%]	[526, 1,878]
Arizona	[0.13%, 2.03%]	[7,583, 31,021]	[0.17%, 2.54%]	[708, 2,866]	[0.16%, 2.40%]	[555, 2,252]	[0.24%, 3.49%]	[6,590, 25,602]	[0.47%, 1.89%]	[1,485, 5,942]
California	[0.10%, 1.58%]	[19,339, 69,353]	[0.13%, 2.03%]	[3,503, 12,883]	[0.12%, 1.85%]	[9,258, 32,861]	[0.17%, 2.76%]	[29,094, 109,835]	[0.33%, 1.15%]	[3,135, 10,936]
Colorado	[0.13%, 2.02%]	[11,741, 20,909]	[0.15%, 2.45%]	[744, 1,376]	[0.16%, 2.36%]	[691, 1,201]	[0.22%, 3.28%]	[5,262, 9,172]	[0.76%, 1.28%]	[934, 1,581]
Hawaii	[0.13%, 1.97%]	[1,152, 1,675]	[0.15%, 2.34%]	[104, 155]	[0.15%, 2.34%]	[2,815, 4,269]	[0.20%, 3.09%]	[654, 946]	[0.86%, 1.25%]	[1,524, 2,216]
Idaho	[0.11%, 1.76%]	[3,357, 7,392]	[0.16%, 2.47%]	[29, 63]	[0.12%, 1.94%]	[60, 137]	[0.19%, 2.82%]	[746, 1,555]	[0.53%, 1.16%]	[223, 484]
Montana	[0.09%, 1.50%]	[1,968, 3,707]	[0.15%, 2.12%]	[16, 28]	[0.10%, 1.50%]	[19, 35]	[0.17%, 2.43%]	[131, 225]	[0.49%, 0.88%]	[305, 548]
Nevada	[0.10%, 1.52%]	[1,547, 5,032]	[0.13%, 1.93%]	[352, 1,111]	[0.11%, 1.74%]	[329, 1,052]	[0.17%, 2.71%]	[1,352, 4,451]	[0.26%, 0.82%]	[243, 778]
New Mexico	[0.12%, 1.83%]	[1,483, 5,024]	[0.15%, 2.45%]	[97, 338]	[0.14%, 2.18%]	[80, 271]	[0.19%, 2.83%]	[2,671, 8,773]	[0.45%, 1.48%]	[701, 2,313]
Oregon	[0.13%, 2.06%]	[3,463, 53,887]	[0.16%, 2.53%]	[93, 1,454]	[0.16%, 2.51%]	[276, 4,275]	[0.22%, 3.47%]	[836, 12,993]	[0.25%, 3.91%]	[357, 5,477]
Utah	[0.13%, 2.07%]	[7,306, 12,214]	[0.17%, 2.47%]	[114, 181]	[0.17%, 2.58%]	[412, 677]	[0.21%, 3.15%]	[1,855, 3,035]	[0.78%, 1.36%]	[556, 966]
Washington	[0.12%, 1.87%]	[16,788, 23,459]	[0.15%, 2.36%]	[1,144, 1,604]	[0.15%, 2.18%]	[2,868, 3,884]	[0.20%, 3.33%]	[4,228, 6,304]	[0.81%, 1.18%]	[2,358, 3,447]
Wyoming	[0.11%, 1.71%]	[422, 6,526]	[0.15%, 2.32%]	[6, 100]	[0.15%, 2.36%]	[6, 92]	[0.19%, 2.87%]	[76, 1,132]	[0.22%, 3.36%]	[31, 480]
MIDWEST	[0.25%, 0.60%]	[103,416, 245,223]	[0.29%, 0.68%]	[15,082, 35,880]	[0.30%, 0.70%]	[5,418, 12,613]	[0.38%, 0.95%]	[13,844, 34,444]	[0.54%, 1.35%]	[6,356, 15,921]
Illinois	[0.10%, 1.60%]	[13,094, 35,165]	[0.12%, 1.95%]	[3,432, 9,223]	[0.11%, 1.70%]	[1,283, 3,432]	[0.16%, 2.51%]	[5,044, 13,364]	[0.49%, 1.16%]	[802, 1,898]
Indiana	[0.12%, 1.75%]	[13,594, 25,148]	[0.13%, 2.11%]	[1,727, 3,333]	[0.15%, 2.27%]	[541, 1,007]	[0.18%, 2.65%]	[1,547, 2,778]	[0.70%, 1.37%]	[658, 1,288]
Iowa	[0.08%, 1.20%]	[4,140, 7,333]	[0.11%, 1.59%]	[235, 398]	[0.10%, 1.56%]	[154, 271]	[0.14%, 2.10%]	[430, 742]	[0.42%, 0.71%]	[152, 261]
Kansas	[0.12%, 1.83%]	[6,458, 10,452]	[0.15%, 2.33%]	[559, 944]	[0.15%, 2.40%]	[300, 510]	[0.21%, 3.07%]	[1,447, 2,269]	[0.77%, 1.26%]	[530, 873]

	WHITE		BLACK		ASIAN		LATINX		ALL OTHER RACE/ ETHNICITY GROUPS	
STATE	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
Michigan	[0.10%, 1.58%]	[10,596, 35,680]	[0.12%, 1.89%]	[2,129, 7,240]	[0.12%, 1.82%]	[528, 1,765]	[0.16%, 2.50%]	[960, 3,234]	[0.36%, 1.19%]	[697, 2,302]
Minnesota	[0.14%, 2.10%]	[16,873, 22,434]	[0.18%, 2.73%]	[1,510, 1,961]	[0.18%, 2.76%]	[1,281, 1,734]	[0.23%, 3.46%]	[1,510, 2,009]	[1.08%, 1.40%]	[1,368, 1,772]
Missouri	[0.08%, 1.40%]	[723, 14,324]	[0.10%, 1.59%]	[121, 2,219]	[0.10%, 1.57%]	[24, 449]	[0.13%, 2.06%]	[49, 930]	[0.04%, 0.70%]	[36, 674]
Nebraska	[0.10%, 1.63%]	[1,238, 19,344]	[0.13%, 2.14%]	[88, 1,393]	[0.13%, 2.12%]	[49, 784]	[0.18%, 2.74%]	[246, 3,692]	[0.22%, 3.41%]	[74, 1,134]
North Dakota	[0.10%, 1.54%]	[492, 7,765]	[0.12%, 1.92%]	[18, 291]	[0.15%, 2.27%]	[17, 257]	[0.19%, 2.87%]	[39, 596]	[0.17%, 2.73%]	[61, 952]
Ohio	[0.12%, 1.87%]	[27,892, 42,266]	[0.14%, 2.15%]	[4,542, 7,125]	[0.13%, 2.11%]	[859, 1,414]	[0.18%, 2.78%]	[1,689, 2,593]	[0.82%, 1.22%]	[1,488, 2,220]
South Dakota	[0.10%, 1.59%]	[575, 9,025]	[0.13%, 2.00%]	[18, 276]	[0.15%, 2.36%]	[14, 225]	[0.16%, 2.47%]	[34, 522]	[0.20%, 3.14%]	[115, 1,812]
Wisconsin	[0.09%, 1.39%]	[7,739, 16,287]	[0.12%, 1.83%]	[704, 1,475]	[0.12%, 1.90%]	[367, 764]	[0.14%, 2.15%]	[850, 1,717]	[0.42%, 0.83%]	[374, 736]
SOUTH	[0.30%, 0.76%]	[174,367, 433,893]	[0.38%, 0.90%]	[68,709, 161,966]	[0.35%, 0.72%]	[12,221, 25,405]	[0.46%, 0.88%]	[73,399, 140,419]	[0.67%, 1.40%]	[15,303, 31,712]
Alabama	[0.11%, 1.75%]	[2,918, 44,892]	[0.13%, 2.08%]	[1,307, 20,777]	[0.11%, 1.85%]	[60, 970]	[0.18%, 2.77%]	[236, 3,612]	[0.21%, 3.14%]	[145, 2,213]
Arkansas	[0.14%, 2.17%]	[2,728, 19,259]	[0.16%, 2.49%]	[625, 4,448]	[0.18%, 2.73%]	[83, 580]	[0.22%, 3.39%]	[362, 2,534]	[0.28%, 1.95%]	[146, 1,009]
Delaware	[0.17%, 2.54%]	[2,553, 4,789]	[0.20%, 3.16%]	[999, 1,931]	[0.17%, 2.79%]	[162, 318]	[0.29%, 4.64%]	[545, 1,051]	[1.26%, 2.33%]	[205, 379]
District of Columbia	[0.18%, 3.08%]	[426, 7,167]	[0.24%, 3.89%]	[586, 9,573]	[0.23%, 4.23%]	[61, 1,102]	[0.27%, 4.35%]	[157, 2,516]	[0.35%, 5.32%]	[55, 850]
Florida	[0.12%, 1.87%]	[32,116, 58,022]	[0.15%, 2.39%]	[10,771, 19,025]	[0.14%, 2.18%]	[1,978, 3,461]	[0.18%, 2.60%]	[21,699, 36,102]	[0.73%, 1.24%]	[2,424, 4,121]
Georgia	[0.13%, 2.05%]	[16,907, 30,596]	[0.15%, 2.33%]	[11,308, 19,835]	[0.15%, 2.23%]	[1,474, 2,590]	[0.21%, 3.27%]	[4,031, 7,398]	[0.78%, 1.37%]	[1,175, 2,069]
Kentucky	[0.12%, 1.92%]	[3,654, 57,354]	[0.14%, 2.19%]	[387, 6,048]	[0.13%, 2.05%]	[72, 1,124]	[0.19%, 2.92%]	[199, 3,055]	[0.28%, 4.24%]	[146, 2,200]
Louisiana	[0.11%, 1.67%]	[5,647, 11,468]	[0.13%, 2.06%]	[3,538, 7,257]	[0.13%, 1.93%]	[189, 375]	[0.15%, 2.36%]	[635, 1,280]	[0.48%, 0.95%]	[325, 646]
Maryland	[0.11%, 1.78%]	[8,104, 14,063]	[0.13%, 2.11%]	[5,198, 9,412]	[0.12%, 1.91%]	[1,079, 1,893]	[0.19%, 2.91%]	[2,298, 3,977]	[0.64%, 1.08%]	[764, 1,298]
Mississippi	[0.10%, 1.53%]	[3,002, 7,046]	[0.12%, 1.81%]	[2,273, 5,204]	[0.11%, 1.74%]	[54, 131]	[0.16%, 2.53%]	[222, 511]	[0.47%, 1.04%]	[144, 319]
North Carolina	[0.18%, 2.71%]	[32,262, 49,657]	[0.22%, 3.41%]	[12,387, 19,794]	[0.20%, 3.08%]	[1,645, 2,554]	[0.30%, 4.41%]	[6,406, 9,643]	[1.27%, 1.84%]	[3,024, 4,397]
Oklahoma	[0.13%, 2.09%]	[7,960, 14,042]	[0.16%, 2.36%]	[961, 1,623]	[0.17%, 2.55%]	[343, 584]	[0.22%, 3.48%]	[1,749, 3,065]	[0.72%, 1.21%]	[2,818, 4,739]
South Carolina	[0.11%, 1.64%]	[7,647, 14,681]	[0.13%, 2.10%]	[3,701, 7,334]	[0.12%, 1.86%]	[229, 442]	[0.18%, 2.70%]	[916, 1,759]	[0.63%, 1.21%]	[430, 823]

	WHITE		BLACK		ASIAN		LATINX		ALL OTHER RACE/ ETHNICITY GROUPS	
STATE	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]	PERCENT [LB, UB]	NUMBER [LB, UB]
Tennessee	[0.12%, 1.90%]	[9,335, 29,154]	[0.14%, 2.29%]	[2,312, 7,483]	[0.13%, 2.15%]	[257, 817]	[0.21%, 3.07%]	[952, 2,757]	[0.48%, 1.39%]	[440, 1,274]
Texas	[0.09%, 1.40%]	[22,375, 41,846]	[0.11%, 1.73%]	[7,461, 13,921]	[0.10%, 1.61%]	[2,997, 5,679]	[0.15%, 2.30%]	[30,120, 56,217]	[0.48%, 0.85%]	[1,850, 3,304]
Virginia	[0.11%, 1.66%]	[13,200, 22,700]	[0.13%, 1.95%]	[4,747, 7,973]	[0.11%, 1.85%]	[1,506, 2,721]	[0.17%, 2.62%]	[2,811, 4,811]	[0.69%, 1.15%]	[1,113, 1,869]
West Virginia	[0.10%, 1.58%]	[3,532, 7,157]	[0.10%, 1.75%]	[148, 328]	[0.10%, 1.60%]	[30, 66]	[0.14%, 2.25%]	[62, 132]	[0.52%, 1.07%]	[99, 202]
NORTHEAST	[0.32%, 0.77%]	[95,512, 228,717]	[0.41%, 0.80%]	[19,939, 38,770]	[0.41%, 0.79%]	[12,302, 23,768]	[0.54%, 1.03%]	[31,838, 60,733]	[0.69%, 1.44%]	[6,423, 13,528]
Connecticut	[0.12%, 1.84%]	[6,772, 11,623]	[0.15%, 2.35%]	[1,234, 2,130]	[0.14%, 2.14%]	[546, 909]	[0.19%, 2.93%]	[2,380, 3,936]	[0.72%, 1.21%]	[419, 700]
Maine	[0.13%, 1.95%]	[1,350, 20,093]	[0.16%, 2.39%]	[19, 295]	[0.18%, 2.88%]	[25, 399]	[0.20%, 3.13%]	[34, 526]	[0.25%, 3.89%]	[60, 933]
Massachusetts	[0.15%, 2.32%]	[14,764, 33,486]	[0.18%, 2.86%]	[1,697, 3,818]	[0.18%, 2.80%]	[1,696, 3,831]	[0.24%, 3.79%]	[3,514, 8,027]	[0.72%, 1.64%]	[1,052, 2,382]
New Hampshire	[0.13%, 2.13%]	[1,344, 21,355]	[0.16%, 2.52%]	[22, 342]	[0.15%, 2.28%]	[45, 683]	[0.22%, 3.36%]	[83, 1,251]	[0.30%, 4.48%]	[53, 796]
New Jersey	[0.12%, 1.90%]	[12,037, 29,622]	[0.15%, 2.41%]	[3,455, 8,423]	[0.13%, 2.11%]	[2,255, 5,651]	[0.19%, 2.98%]	[6,451, 15,533]	[0.65%, 1.53%]	[819, 1,927]
New York	[0.11%, 1.79%]	[32,028, 46,924]	[0.14%, 2.16%]	[9,675, 13,955]	[0.14%, 2.17%]	[6,346, 8,788]	[0.18%, 2.73%]	[15,592, 22,256]	[0.75%, 1.04%]	[2,733, 3,780]
Pennsylvania	[0.13%, 1.95%]	[22,840, 57,720]	[0.15%, 2.41%]	[3,566, 9,310]	[0.14%, 2.31%]	[1,191, 3,135]	[0.20%, 3.13%]	[2,948, 7,707]	[0.59%, 1.50%]	[998, 2,511]
Rhode Island	[0.14%, 2.19%]	[2,641, 4,781]	[0.18%, 2.76%]	[245, 449]	[0.18%, 2.90%]	[163, 311]	[0.22%, 3.36%]	[773, 1,385]	[0.83%, 1.45%]	[206, 359]
Vermont	[0.13%, 2.05%]	[1,735, 3,114]	[0.16%, 2.69%]	[26, 48]	[0.14%, 2.20%]	[34, 60]	[0.22%, 3.58%]	[63, 113]	[0.77%, 1.29%]	[84, 141]

Note: White, Black, and Asian are non-Hispanic. The Latinx category includes Hispanic and Latinx people of any race. All other race/ethnicity groups are non-Hispanic.