

IN THE UNITED STATES DISTRICT COURT  
FOR THE Western DISTRICT OF TEXAS  
Waco DIVISION

**FILED**  
JUN 08 2015  
CLERK, U.S. DISTRICT COURT  
WESTERN DISTRICT OF TEXAS  
BY MC DEPUTY

Form To Be Used By A Prisoner in Filing a Complaint  
Under the Civil Rights Act, 42 U.S.C. § 1983

Scott Lynn Gibson 699888

- Vanessa Lynn

Plaintiff's name and ID Number

A. Hughes Unit

Place of Confinement

CASE NO: **W15CA190**  
(Clerk will assign the number)

v.

Brad Livingston, Director of TDCJ Po Box 99 huntsville, TX 77342

Defendant's name and address

UTMB Policy Maker

Defendant's name and address

Municipality of Gatesville, TX

Defendant's name and address

(DO NOT USE "ET AL.")

**-INSTRUCTIONS - READ CAREFULLY**

**NOTICE:**

**Your complaint is subject to dismissal unless it conforms to these instructions and this form.**

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the Clerk of the United States Court for the appropriate District of Texas in the Division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. The list labeled as "VENUE LIST" is posted in your unit law library. It is a list of Texas prison units indicating the appropriate District Court, the Division and an address of the Divisional Clerks.

**FILING FEE AND IN FORMA PAUPERIS**

1. In order for your complaint to be filed, it must be accompanied by the filing fee of \$350.00.
2. If you do not have the necessary funds to pay the filing fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis* (IFP), setting forth the information to establish your inability to prepay the fees and costs or give security therefore. You must also include a six (6) month history of your Inmate Trust Account. You can acquire the application to proceed IFP and appropriate Inmate Account Certificate from the law library at your prison unit.
3. 28 U.S.C. 1915, as amended by the Prison Litigation Reform Act of 1995 (PLRA), provides, "...if a prisoner brings a civil action or files and appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." Thus, the Court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the Court will apply 28 U.S.C. 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your Inmate Account, until the entire \$350 filing fee has been paid.
4. If you intend to seek *in forma pauperis* status, then do not send your complaint without an Application to Proceed IFP, and the Certificate of Inmate Trust Account. Complete all the essential paperwork before submitting it to the Court.

**CHANGE OF ADDRESS**

It is your responsibility to inform the Court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motions(s) for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedures.

**I. PREVIOUS LAWSUITS:**

A. Have you filed any other lawsuits in the state or federal court relating to imprisonment?  X  YES   NO

B. If your answer to "A" is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)

1. Approximate date of filing lawsuit:  2004/2005

2. Parties to previous lawsuit:  
Plaintiff(s):  Scott Lynn Gibson

Defendant(s):  UTMB

3. Court (If federal, name the district; if state, name the county)  Sothern Distict Court   
with TDCJ's storage policy <sup>All my court records were destroyed so I could comply</sup>

4. Docket Number:

5. Name of judge to whom case was assigned:

6. Disposition: (Was the case dismissed, appealed, still pending?)  
 Denied

7. Approximate date of disposition:  2005

II. PLACE OF PRESENT CONFINEMENT: A. Hughes Unit

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted both steps of the grievance procedure in this institution? X YES      NO  
Attach a copy of the Step 2 grievance with the response supplied by the prison system.

IV. PARTIES TO THE SUIT:

A. Name of address of plaintiff: Scott Lynn Gibson - A. Hughes unit RT. 2 box 4400 Gatesville TX.

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Brad Livingston The Director of TDCJ  
~~Created and enforcing a systematic ban on sex reassignment surgery which denies me medical care of my serious medical condition, and being deliberate indifferent to my serious medical need-for no medical reasons or security reasons~~  
Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.

Defendant #2: Name unknown-But is the policy maker at UTMB

~~Created and enforcing a systematic ban on sex reassignment surgery which denies me medical care of my serious medical condition, and being deliberate indifferent to my serious medical need.~~  
Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.

Defendant #3: The Municipality of Gatesville TX

~~Created and enforcing/or allowing TDCJ to enforce a systematic ban on sex reassignment surgery that denies me medical care of my serious medical need and being deliberate indifferent to my serious medical need.~~  
Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.

Defendant #4:   
Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.

Defendant #5:

Briefly describe the act(s) or omission(s) of this defendant, which you claimed harmed you.

Note: This policy doesn't even allow Plaintiff to be evaluated to see if sex reassignment surgey would treat the actual cause of her illness.

**V. STATEMENT OF CLAIM:**

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal argument or cite any cases of statutes. If you intent to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember that the complaint must be stated briefly and concisely. **IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.**

The Defendants are violating Plaintiff's constitutional rights under the 8th amendment by denying her medical care that would treat the actual cause of her serious medical condition to enforce a sytematic ban on sex reassignment surgery; which creates a policy of deliberate indifference to her gender dysphoria because they refuse to allow her to be evaluated to determine if sex reassignment surgery would be a viable medical treatment option based on her medical needs. Consequently, Plaintiff has to suffer severe mental anguish that causes her to have realistic thoughts of committing suicide and of self-casteration which forces her to live in conditions that places herlife at substancial

**VI. RELIEF:** State briefly exactly what you want the court to do for you. Make no legal arguments. Cite not cases or statutes.

Grant Plaintiff declaration that this ban is unconstitutional, and a preliminary and parmanent injunction ordering the Defendants to rescind the ban on sex reassignment surgery, and attoreny fees

**VII. GENERAL BACKGROUND INFORMATION:**

A. State, in complete form, all names you have ever used or been known by including any and all aliases:

LIL Youngster, Joy Venessa

B. List all TDCJ-ID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you, if know to you.

699888

**VIII. SANCTIONS:**

A. Have you been sanctioned by any court as a result of any lawsuit you have filed?  YES  NO

B. If your answer is "yes", give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (If federal, give district and division): \_\_\_\_\_

2. Case Number: \_\_\_\_\_

3. Approximate date sanctions were imposed: \_\_\_\_\_

4. Have the sanctions been lifted or otherwise satisfied?  YES  NO

STATEMENT OF CLAIM CONTINUED

risk of harm.

(2). Plaintiff asserts that TDCJ-ID ban on sex reassignment surgery is unconstitutional, both facically and as applied because it indiscriminately and arbitrarily denies transgender inmates who has severe Gender Dysphoria medical treatment that would treat the actual cause of their illness for no justification whatsoever, and thus it's not based on A Doctor's evaluation. In Fact, This policy refuses to even allow Plaintiff to be evaluted to see if sex reassignment surgery would adequately treat her.

Plaintiff asserts that as applied to her TDCJ-Id ban on sex reassignment surgery is unconditititional because it allows the Defendants to ignor her serious medical needs for nonmedical reasons which places her life at substantial risk of harm because her illness causes her to have realistic thoughts of committing suicide and of self-casteration.

Plaintiff futher asserts that no set of circumstances exists under which the ban can be valid because TDCJ-ID has created a situation where they don't even have to evaluate a transgender inmate for this type of treatment regardless how severe their illness is. ~~1 create~~ creates a policy of deliberate indifferences to an inmates serious medical needs, and totally rejects the stanard of care that purent professionals foollow to treat Gender Dysphoria.

- C. Has any court ever warned or notified you that sanctions could be imposed? \_\_\_ YES \_\_\_ NO
- D. If your answer is "yes", give the following information for every lawsuit in which warning was imposed. (If more than one, use another piece of paper and answer the same questions.)
  - 1. Court that imposed warning (if federal, give the district and division): \_\_\_\_\_
  - 2. Case number: \_\_\_\_\_
  - 3. Approximate date warning were imposed: \_\_\_\_\_

Executed on: \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signature of Plaintiff)

**PLAINTIFF'S DECLARATIONS**

- 1. I declare under penalty of perjury all facts presented in this complaint and attachment thereto are true and correct.
- 2. I understand if I am released or transferred, it is my responsibility to keep the Court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
- 3. I understand that I must exhaust all available administrative remedies prior to filing this lawsuit.
- 4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions in a Court of the United States while incarcerated or detained in any facility, which lawsuits are dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger or serious physical injury.
- 5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire **\$350** filing fee and costs assess by the Court, which shall be deducted in accordance with the law from the inmate account by my custodian until the filing fee is paid.

Signed this 28 day of March, 20 15.  
(Day) (Month) (Year)

Scott L. Gibbs  
(Printed Name)

[Handwritten Signature]  
(Signature of Plaintiff)

**WARNING: The Plaintiff is hereby advised any false or deliberately misleading information provided in response to the following questions will result in the imposition of sanctions. The sanctions the Court may impose include, but are not limbed to monetary sanctions and/or the dismissal of this action with prejudice.**

Originally published on Think Progress by Alice Olstein. April 3, 2015

## REASONS WHY PEOPLE BEGAN A PENPAL FRIENDSHIP! <3

I saw that I had a chance to correspond with an incarcerated individual, and wanted to take the opportunity to offer friendship and positivity to someone who may need it. I hope to learn from my pen pal, and strike up a valuable friendship.

because i have a cousin in prison and he feels so lonely and i miss him so much but they wont let us see/write him so having the chance to write and help someone feel important and less lonely :)

I think everyone deserves a friend to talk to.

Have heard countless people on the inside say that receiving letters kept them sane -- and have learned a lot about trust and solidarity from pen pals in the past.

I've spent roughly 3 years of my life in different psychiatric institutes. It can feel like it will never end. People need hope.

I recently came out to my parents and having been in the closet so long i understand how it is to survive in an unwelcoming environment. With that being said I wanted to make an impact on LBGTQ community and help someone like they helped me when I was lost or in bad situation. I want to return the good that was done to me.

My Father was actually in prison for some time, I refused all contact with him, He was recently released, and I suppose I'm trying to make up for the fact that I couldn't be there for him during his hardest times. I wanna do my part and support someone who needs it and maybe even make a new friend!

19

EX 4.6.14



# STEP 1 OFFENDER GRIEVANCE FORM

Grievance #: 2015059692  
 Date Received: 12/15/14  
 Date Due: 1/24/15  
 Grievance Code: 1024  
 Investigator ID #: 1074  
 Extension Date: none  
 Date Retd to Offender: JAN 05 2015

Offender Name: Scott S. Gibson TDCJ # 699288  
 Unit: A. Hughes Housing Assignment: 12 D 76  
 Unit where incident occurred: A. Hughes

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? medical - Dr. Green When? 12 1, 2014  
 What was their response? TDCJ does not provide sex Reassignment surgery  
 What action was taken? none.

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

TDCJ Policy 651.11 is unconstitutional because it denies a male is unconstitutional because it prohibits Doctors to order sex Reassignment surgery for inmates that need the surgery to treat their gender dysphoria. This policy absolutely excludes sex Reassignment surgery even as an opinion - not for medical reason but for none medical reasons.

I'm a female trapped in a males body and I have been diagnosed with gender dysphoria. The treatment I'm receiving will not fully treat my condition and it leave me depressed.

I want a sex change. This is the only way to fully treat me!

*(Handwritten mark)*



Action Requested to resolve your Complaint.

I request that policy C still be changed to include sex reassignment surgery and refer me to a specialist for the surgery  
Offender Signature: *Scott S. Gibson* Date: 12 15, 14

Grievance Response:

The Diagnostic and Statistical Manual, 5<sup>th</sup> edition does not recognize "Gender Identity Disorder" but rather "Gender Dysphoria". Also, you do not meet the DSM-IV or DSM V criteria for "impairment in social, occupational, or other important areas of functioning"; therefore you do not meet the criteria for either Disorder or Dysphoria. Given that you do not qualify for a mental disorder, no treatment is indicated. It is at the discretion of the physician to make treatment choices, regarding both diagnosis and treatment. Please use the initial step in the grievance process by utilizing the informal complaints process before filing a formal grievance.

JAN 0 5 2015

Signature Authority: *Melania Pollard, Senior Practice Manager* Date: 12/31/14  
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: \*Resubmit this form when the corrections are made.

- 1. Grievable time period has expired.
- 2. Submission in excess of 1 every 7 days. \*
- 3. Originals not submitted. \*
- 4. Inappropriate/Excessive attachments. \*
- 5. No documented attempt at informal resolution. \*
- 6. No requested relief is stated. \*
- 7. Malicious use of vulgar, indecent, or physically threatening language.
- 8. The issue presented is not grievable.
- 9. Redundant, Refer to grievance # \_\_\_\_\_
- 10. Illegible/Incomprehensible. \*
- 11. Inappropriate. \*

UGI Printed Name/Signature: \_\_\_\_\_

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: \_\_\_\_\_

OFFICE USE ONLY	
Initial Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____
<b>2<sup>nd</sup> Submission</b>	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____
<b>3<sup>rd</sup> Submission</b>	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____

FEB 19 2015



Texas Department of Criminal Justice  
**STEP 2** OFFENDER  
GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 2015059692  
UGI Recd Date: 1/07/15  
HQ Recd Date: JAN 12 2015  
Date Due: 2/21  
Grievance Code: 624  
Investigator ID#: \_\_\_\_\_  
Extension Date: \_\_\_\_\_

Offender Name: Scott Lyman Gibson TDCJ# 6 9888  
Unit: A. Hughes Housing Assignment: 12  
Unit where incident occurred: A. Hughes unit

You must attach the completed Step 1 Grievance that has been accepted. You may not appeal to Step 2 with a Step 1 that has been

accepted by the Warden for your Step 2 appeal to be processed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because...

Because the person that denied my step one evidently hasn't read my medical file. In 2014 I was diagnosed with gender dysphoria, and I'm currently being treated with spironolactone - ~~as~~ a testosterone blocker. see grievance no. 20141149791. This same office told me that I was being treated - see all the responses concerning this matter.

I was sent to stay in my unit and legally diagnosed with gender dysphoria. Ms. V. Pullard is falsifying government records or using her authority to deny me medical care. In my step one grievance she says: I haven't been diagnosed with gender disorder, or gender dysphoria. see the response to my step one grievance.

But in grievance NO 20141149791 - she states that on 05/14/14 " you have been diagnosed with gender identity disorder.

Ms. V. Pullard has attempted to block me from receiving medical care. I'm requesting this office to please order Ms. Pullard to stop falsifying government records to deny me

(Revised 11-2010)

YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

(OVER)

medical care. please note i'm havin my family file a complaint with correctional managed health care and the Texas medical Board for falsify my medical records or her response to my step one because she is attempt to deny me medical care.

Offender Signature: Scott S. Gilson

Date: 1-6-15

**Grievance Response:**

A review of the medical grievance and documentation has been completed regarding your report you have been diagnosed with gender dysphoria and wants a policy change in TDC to include sex reassignment surgery. You also want to be referred to a specialist for the surgery.

An appellate review of the medical grievance and clinical records indicates you were given appropriate information in the Step 1 Response. Additionally, you were seen on 8-25-2014 for hormone therapy. You also received a referral to HG-endocrinology and have an appointment in March 2015. You were advised to continue your psychiatric therapy. Per provider chart review on 9-24-2014 you were recommended for anti-androgen effects prior to starting therapy and spironolactone was started. Another provider chart review was done on 12-17-2014 and it was recommended that your levels of testosterone be monitored before making adjustments to your medication. Your estrogen therapy cannot be started until your testosterone is suppressed due to the increase risk of blood clots. You are to return to clinic in 2-3 months for possible initiation of estrogen therapy. On 2-3-2015 you were seen requesting a bra for your gender identity disorder. You were referred to see the provider for evaluation of sports bra need. According to documentation there's no evidence that you have been denied or delayed in receiving medications or treatment.

Documentation in your medical records indicates you have been afforded the access to proper medical care in accordance to CMHC policy A-01.1. You are being seen in accordance to CMHC policy G-51.11. No further action is warranted at this time through the grievance process.

**STEP II MEDICAL GRIEVANCE PROGRAM  
OFFICE OF PROFESSIONAL STANDARDS  
TDCJ HEALTH SERVICES DIVISION**

Signature Authority: \_\_\_\_\_

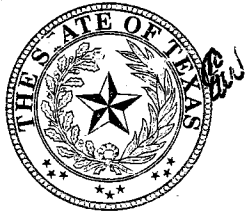
Date: 2-6-15

Returned because: *\*Resubmit this form when corrections are made.*

- 1. Grievable time period has expired.
- 2. Illegible/Incomprehensible.\*
- 3. Originals not submitted.\*
- 4. Inappropriate/Excessive attachments.\*
- 5. Malicious use of vulgar, indecent, or physically threatening language.
- 6. Inappropriate.\*

CGO Staff Signature: \_\_\_\_\_

OFFICE USE ONLY	
<b>Initial Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>2<sup>nd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>3<sup>rd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	



# STEP 1 OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 2015096265  
Date Received: 2/23/15  
Date Due: 4/04/15  
Grievance Code: 624  
Investigator ID #: JOM4  
Extension Date: MS ADAL 5/14/15  
Date Retd to Offender: APR 1 2015

Offender Name: Scott L. Gibson TDCJ# 699888  
Unit: A. Hughes Housing Assignment: 12 D ~~78~~ 79  
Unit where incident occurred: A. Hughes unit

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Exclusive Director & UTMB policy makers When? 2/17, 15

What was their response? none

What action was taken? none

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

The Director of TDCJ and UTMB policy makers who are directly responsible for creating and enforcing TDCJ's ban on sex reassignment surgery are violating my constitutional rights under the 8th amendment because this ban is based on a blanket policy that prohibits any transgender inmate to receive this medically necessary treatment absent evaluation of the inmate's specific medical needs because my Doctor cannot even consider sex reassignment surgery for viable treatment options to treat the actual cause of gender dysphoria which puts my health and safety in substantial risk because I stay depressed and it effects my life in every aspect.

Gender Dysphoria is a serious medical condition. TDCJ has a legal obligation to provide me care that meets prudent standard of care measured by professional standards of the community, tailored to an inmate's particular medical consideration. See BURRETT V. COPPLAN, 292 F. Supp. 2d 281 (D.N.H. 2003) TDCJ cannot provide me this type of care when it has a blanket policy in place that prohibits my Doctor from making a medical determination of my medical needs and provide me with treatment that actual treats the actual cause of my illness!

IN FIELDS V. SMITH, 653 f.3d 550, 556 (7th cir. 2011) The Court ruled that a statute prohibiting hormone therapy and sex reassignment surgery for any prisoner violates the 8th Amendment because such forms of treatment could be medically necessary to treat "some" inmates adequately.

NOTE: I AM NOT REQUESTING A SEX CHANGE AT THIS TIME! I'm only trying to get TDCJ to recognize that sex reassignment surgery is a medically necessary treatment and I'd like to see it added to ITs health care policy!

Action Requested to resolve your Complaint. To change the policy and add sex reassignment surgery to the policy.

Offender Signature: Burt S. Dillon Date: 2 23, 15

Grievance Response:

Your allegation is unsubstantiated. You are receiving treatment for Gender Dysphoria per the policy set for in CMHC Policy G-51.11 (Treatment of Offenders with Intersex Conditions, Gender Identity Disorder or Gender Dysphoria). Policies are not changed or revised at a unit level. You are on the mental health case load and are receiving adequate treatment. Feel free to drop an I-60 to mental health services if you have further mental health needs. Please use the initial step in the grievance process by utilizing the informal complaints process before filing a formal grievance.

Signature Authority: Esther King CNM Date: 4/13/15

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-129) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: \*Resubmit this form when the corrections are made.

- 1. Grievable time period has expired.
- 2. Submission in excess of 1 every 7 days. \*
- 3. Originals not submitted. \*
- 4. Inappropriate/Excessive attachments. \*
- 5. No documented attempt at informal resolution. \*
- 6. No requested relief is stated. \*
- 7. Malicious use of vulgar, indecent, or physically threatening language.
- 8. The issue presented is not grievable.
- 9. Redundant, Refer to grievance # \_\_\_\_\_
- 10. Illegible/Incomprehensible. \*
- 11. Inappropriate. \*

UGI Printed Name/Signature: \_\_\_\_\_

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: \_\_\_\_\_

OFFICE USE ONLY	
Initial Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____
3 <sup>rd</sup> Submission	UGI Initials: _____
Grievance #:	_____
Screening Criteria Used:	_____
Date Recd from Offender:	_____
Date Returned to Offender:	_____

**OFFICE USE ONLY**

Grievance #: 2015096265  
 UGI Recd Date: 4/15/15  
 HQ Recd Date: APR 20 2015  
 Date Due: 5/30  
 Grievance Code: 624  
 Investigator ID#: \_\_\_\_\_  
 Extension Date: \_\_\_\_\_



**Texas Department of Criminal Justice**  
**STEP 2 OFFENDER GRIEVANCE FORM**

Offender Name: Scott Lynn Gibson TDCJ # 699888  
 Unit: A. hughes unit Housing Assignment: 12-D-79 12E 3B  
 Unit where incident occurred: A. Hughes unit

*You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.*

**Give reason for appeal (Be Specific).** *I am dissatisfied with the response at Step 1 because...*

My step one wasn't addressed! My claim pertains exclusively about TDCJ's ban on sex reassignment surgery!!!! I'm requesting this office to order the Director and UTMB to rescind this ban because it is being used to deny me treatment that would (actually) treat the cause of my illness! The treatment I'm receiving now (doesn't) actual treat the real cause of my gender dysphoria! In fact, I'm not even receiving the treatment that the Doctors who diagnosed me recommended that I be placed on! These, following standard of care, recommended that I be placed on female hormones, However, I still haven't been placed on them for pretextual reasons! Dr. Mckenney at UTMB told me that he can't put me on estrogen until my testosterone is suppressed to a low level due to blood clots! But I don't have a history of blood clots! True enough, estrogen can cause blood clots, but I don't have a personal history of blood clots. When I explained this to him, and explained to him that I'm fully aware about hormone treatment, he told me that he still can't put me on estrogen until TDCJ approves it! so his initial reason was pretextual to cover up that TDCJ still blocking this treatment! Besides, Dr. Green on my unit told me that as long as he is the Doctor, I will never get put on female hormones because I'm a man! I'm willing to take a polygraph test to prove this! I have encountered strong resistance about getting this treatment, and I'm not going to accept it! I'm going to let the Federal Courts address this problem! Plus I'm trying to get my support group have 1000s of people call TDCJ every day for a month to draw attent-

I-128 Front (Revised 11-2010) **YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM** (OVER)



ion to this unconstitutional policy, and I'm filing complaints with the ACA because TDCJ isn't following the Standard of care!

P.S. And I did following TDCJ's policy about filing an informal complaint before I filed a grievance! Ms. Pedford told me she will not change the current policy and I wrote the Director.  
Offender Signature: Scott P. Linder Date: 4.14.15

Grievance Response:

In your Step 1 Medical Grievance, you stated you have been denied access to file your medical complaints with the UTMB officials. You stated you wrote a complaint about TDC's refusal to add Sex Reassignment Surgery and laser hair removal to policy for offenders wanting treatment for Gender Identity Disorder. You are requesting the policy be changed to include the surgery and hair removal.

Review of the Correctional Managed Health Care Policy G-51.1-Treatment of Offenders with Intersex Disorder, Gender Identity Disorder or Gender Dysphoria does not designate Sex Reassignment Surgery or laser hair removal as part of the treatment protocol for Gender Identity Disorder. Policies are not revised by the University or at the unit level. Review of the medical record reveals documentation showing you are being treated for this disorder in accordance with the Correctional Managed Health Care Policy. If you feel your condition has changed, or warrants further evaluation, you may wish to submit a Sick Call Request (SCR) to discuss your concerns with a licensed medical provider.

**STEP II MEDICAL GRIEVANCE PROGRAM  
OFFICE OF PROFESSIONAL STANDARDS  
TDCJ HEALTH SERVICES DIVISION**

Signature Authority: \_\_\_\_\_

Date: 5.11.15

Returned because: \*Resubmit this form when corrections are made.

- 1. Grievable time period has expired.
- 2. Illegible/Incomprehensible.\*
- 3. Originals not submitted. \*
- 4. Inappropriate/Excessive attachments.\*
- 5. Malicious use of vulgar, indecent, or physically threatening language.
- 6. Inappropriate.\*

CGO Staff Signature: \_\_\_\_\_

OFFICE USE ONLY	
<b>Initial Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>2<sup>nd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>3<sup>rd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	

SEP 09 2014



Texas Department of Criminal Justice  
**STEP 2** OFFENDER  
 GRIEVANCE FORM

Offender Name: Scott L. Gibson TDCJ# 699888  
 Unit: R. Hughes Housing Assignment: 12 E 206  
 Unit where incident occurred: R. Hughes unit

OFFICE USE ONLY	
Grievance #:	<u>2014143362</u>
UGI Recd Date:	<u>JUN 02 2014</u>
HQ Recd Date:	<u>JUN 05 2014</u>
Date Due:	<u>7-17</u>
Grievance Code:	<u>608,665</u>
Investigator ID#:	<u>352</u>
Extension Date:	<u>8-31</u>

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because...

Dr. Alum is violating my constitutional rights and subjecting me to cruel & unusual punishment by denying me necessary medical care based on CMHC policy 5-51.1 that denies any inmate who wasn't diagnosed with GEO prior to incarceration - the right to be appropriately treated with hormone therapy and other forms of treatment - rather than for medical reasons. I explained to Dr. Alum that I was certified as an adult at the age of 16 and came to prison when I was 17 yrs. old so I was not able to get hormone therapy or a sex change because Texas law prohibits a Dr. to prescribe hormones to a minor or give him/her a sex change. I have lived as a female for over 20 yrs and I'm being to have serious problem because my level of obsession with being a true female is causing me to hate myself, feel depressed, having testicles makes me feel deformed and the only way I can cope with having testicles is I have to abuse them by tying a string around them until they turn purple, swollen and hurt so bad I can barely walk. I do this to stop the testosterone from entering into my body, and I've been having serious thoughts of removing my testicles because they make me sick, make me feel deformed, and I cannot live in peace! I'm in consist mental and physical anguish!

Dr. Alum is enforcing a dangerous policy and it is creating a dangerous situation where an inmate who has GEO but cannot receive treatment per policy might result to extreme and dangerous methods like: suicide, self-castration or allowed to suffer simply because she/me/ was not diagnosed with GEO prior to incarceration.



Federal courts have ruled that policies like 4.5.1.1 is unconstitutional, see: *Allard v. Gomez*, 4 Fed. Appx 143 (9th Cir. 2001), and it denies necessary medical care. see *Kosilek v. Maloney*, 221 F. Supp. 2d 154 (D. Mass. 2002);

Dr. Alum is also deny me medical care because of how much time I have. This violates the 8th Amendment by allowing me to suffer and by subjecting me to cruel & unusual punishment. ~~Even my sentence~~ was the court sentenced me to 20 yrs - not to be denied medical care. Dr. Alum is a Dr. and she knows that GED is a serious medical illness and therapy alone isn't sufficient to treat GED.

Offender Signature: Scott E. Wilson Date: 6/1/14

Grievance Response:  
In your Step 1 medical grievance, you stated you have been denied treatment for his Gender Identity Disorder. This issue was previously addressed in grievance #2014149791 and will not be revisited at this time.

STEP II MEDICAL GRIEVANCE PROGRAM  
OFFICE OF PROFESSIONAL STANDARDS  
TDCJ HEALTH SERVICES DIVISION

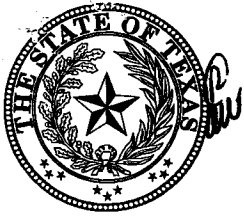
Signature Authority: \_\_\_\_\_ Date: 9-4-14

Returned because: \*Resubmit this form when corrections are made.

- 1. Grievable time period has expired.
- 2. Illegible/Incomprehensible.\*
- 3. Originals not submitted. \*
- 4. Inappropriate/Excessive attachments.\*
- 5. Malicious use of vulgar, indecent, or physically threatening language.
- 6. Inappropriate.\*

CGO Staff Signature: \_\_\_\_\_

OFFICE USE ONLY	
<b>Initial Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>2<sup>nd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	
<b>3<sup>rd</sup> Submission</b>	CGO Initials: _____
Date UGI Recd: _____	
Date CGO Recd: _____	
(check one) <input type="checkbox"/> Screened <input type="checkbox"/> Improperly Submitted	
Comments: _____	
Date Returned to Offender: _____	



# STEP 1 OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance # 2014143362  
Date Received: 5-12-14  
Date Due: 6-21-14  
Grievance Code: 608, 606S  
Investigator ID #: I2216  
Extension Date: none  
Date Retd to Offender: MAY 30 2014

Offender Name: Scott L. Gibson TDCJ # 699888  
Unit: A. Hughes Housing Assignment: 12 E 50 ✓  
Unit where incident occurred: A. Hughes

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Dr. D. Green & Mr. Hull When? May 9 2014  
What was their response? Dr. Green: I will not diagnose you, treat you, etc. unless mental health diagnose you. Mr. Hull: mental health don't treat GID.  
What action was taken? None

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

Dr. D. Green and Mr. Hull are being deliberately indifferent to my serious "Gender Identity Disorder" (GID) by refusing to diagnose me, properly treat me or to refer me to a specialist so I can properly be diagnosed, etc. I have lived as a female for over 20 yrs. I'm a female trapped in a male body and it is starting to make me hate and abuse my male body, hate myself and makes me sick because I'm not comfortable with my body because I truly am a woman but my body is a male! I hate my genitals, etc. I've seriously thought about removing my sex organs because they don't belong to me and I'm tired of being forced to live with them! I've explained this to them. First Mr. Hull talked to me and told me that mental health doesn't treat GID, and referred me to medical. Medical sent me back to mental health, Mr. Hull sent me back to medical. On May 9 2014 - Dr. Green seen me and flat out told me: I will never initiate any treatment for GID because he isn't a specialist in GID and until I get diagnosed by mental health - all he can do is refer me to mental health. I explained to him that mental health doesn't treat GID and if he could refer me to UTMB so I could be properly be diagnosed so I can receive treatment - and he said: that will be hard to do because I didn't have the diagnose prior coming to prison, and all he could do is send me to mental health. Medical & mental health are playing musical chairs with me and it's denying me medical care. Federal court has ruled that GID is a serious medical need! By refusing to allow me to see a specialist - Dr. Green is denying me medical care based on his or

blasted belief treatment-zim also request therapy - to be allowed to live as a female, etc; accordy to American psychiatric Association states: medically appropriate GID treatment options include providing patient with 1) hormones of the desired gender; 2) the real life experience i.e. living full-time as the patient's new gender; and 3) surgery to change the patient's sex characteristics I'm fully aware that I cannot demand a specif treatment and I'm not - zim only request to be appropriately treated.

Action Requested to resolve your Complaint. I request to be appropriately treated for GID according to American psychiatric Association.

Offender Signature: [Signature] Date: May 9 2014

Grievance Response:

A review of your medical records reveals that you were seen and evaluated by Mr. Togo, PA on 04/30/14 for your request for hormone replacement therapy due to a Gender Identity Disorder. Mr. Togo referred you to Dr. Greene, MD for further assessment. You were seen and evaluated by Dr. Greene on 05/09/14 for your Gender Identity Disorder; you were referred to mental health because you did not enter the system with a gender identity disorder diagnosis in place. Only a licensed Psychiatrist can make that diagnosis. You were seen and evaluated via telemed on 05/14/14 by Dr. Alam, Psychiatrist. Ms. Pollard, SPM met with you on 05/15/14, she explained to you the CMHC Policy, G-51.1, (Treatment of Offenders with Intersex Conditions, Gender Identity Disorder, or Gender Dysphoria) You have to right to receive mental health counseling for which you are receiving. You were not on hormone therapy treatment when you entered the system so there is no indication to start it at this time in accordance with CMHC Policy G-51.1(Treatment of Offenders with Intersex Conditions, Gender Identity Disorder, or Gender Dysphoria). Use established medical and mental health sick call procedures should you need further evaluation. Please use the initial step in the grievance process by utilizing the informal complaints process before filing a formal grievance.

Offender Signature: [Signature] Date: MAY 30 2014 Signature Authority: [Signature] Date: 5-28-14

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: \*Resubmit this form when the corrections are made.

- 1. Grievable time period has expired.
2. Submission in excess of 1 every 7 days. \*
3. Originals not submitted. \*
4. Inappropriate/Excessive attachments. \*
5. No documented attempt at informal resolution. \*
6. No requested relief is stated. \*
7. Malicious use of vulgar, indecent, or physically threatening language
8. The issue presented is not grievable.
9. Redundant; Refer to grievance #
10. Illegible/Incomprehensible. \*
11. Inappropriate. \*

UGI Printed Name/Signature:

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority:

OFFICE USE ONLY
Initial Submission UGI Initials:
Grievance #:
Screening Criteria Used:
Date Recd from Offender:
Date Returned to Offender:
2nd Submission UGI Initials:
Grievance #:
Screening Criteria Used:
Date Recd from Offender:
Date Returned to Offender:
3rd Submission UGI Initials:
Grievance #:
Screening Criteria Used:
Date Recd from Offender:
Date Returned to Offender:

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF TEXAS

SCOTT L. GIBSON - VANESSA LYNN §  
PLAINTIFF §  
V. §  
BRAD LIVINGSTON, §  
AT EL, DEFENDANTS §

W15CA190  
CIVIL ACTION NO. \_\_\_\_\_

I. JURISDICTION & VENUE

(1). This is a Civil Action authorized by 42 U.S.C. Section 1983 to redress the deprivation, under color of State Law, of rights secured by The Constitution of The United States.

The court has Jurisdiction under 28 U.S.C. sec. 1331 and 1343 (a) (3). Plaintiff seeks declaratory relief pursuant to 28 U.S.C. sec. 2201 and 2202.

Plaintiff claims for injunctive relief and authorized by 28 U.S.C. sec. 2283 and 2284 and rule 65 of The Federal Rules of Civil Procedure.

(2). Western District of Texas is an appropriate venue under 28 U.S.C. sec. 1391 (b) (2) because it is where the events giving rise to this claim occurred.

II. PARTIES

(3). Plaintiff SCOTT LYNN GIBSON, is and was at all times mentioned here in a prisoner of The State of Texas in The Custody of The Director at the A. Hughes Unit in Gatesville, Tx.

(4). Defendant Brad Livingston is The Director of TDCJ- ID He is legally responsible for the operation of TDCJ-ID and the welfare of all inmates in TDCJ-ID.

(5). Defendant - unknown at this time - is the policy maker at UTMB. He is responsible for making TDCJ-ID's Medical Policies.

(6). Defendant - The municipality of Gatesville, Tx.

(7). Each defendant is sued in their official capacity. At all times mentioned in this complaint the defendants were operating under color of State Law.

### XIII. FACTS

(8). Plaintiff is a Pre-Op Transsexual. She has legally been diagnosed with Gender Dysphoria by TDCJ-ID Doctors at Sky View Unit and is currently receiving Female Hormones and Anti-Androgens.

(9). Plaintiff goes by; VENESSA.

(10). Plaintiff has lived as a Female since she was about 15 years old. She is now 37 years old and sincerely believes that she is a Female trapped in a male's body and it causes her to have realistic thoughts of committing suicide and of self-castration.

(11). Plaintiff has attempted to commit suicide three times since she has been incarcerated and has abused her genitals by tying a string around the testicles until they turned a bloody purple color and were so swollen and hurt so bad she could barely walk.

(12). Plaintiff did this in belief that if she destroyed her testicles it would stop them from producing testosterone.

(13). Plaintiff doesn't claim she attempted suicide solely due to her gender related condition, however, it did play a significant part in her suicide attempts because the constant stress she deals with is at times is overwhelming.

(14). Plaintiff first entered TDCJ-ID in 1995. At this time she was verbally requested to be treated and she was told NO, and she just lived as a Female.

(15). In the ensuing years she started suffering severe depression and the thoughts of suicide became more prevalent and realistic.

(16). In 2014, Plaintiff learned that TDCJ-ID rescinded its policy that prohibited transgender inmates who were not diagnosed in society with Gender Identity Disorder, from receiving treatment.

(17). Plaintiff requested to be treated. Initially medical was still enforcing the old policy. However, after expressing her desire to castrate herself, she was sent to TDCJ-ID Mental Hospital and was diagnosed with Gender Dysphoria, and was recommended to be placed on Female Hormones.

(18). Dr. Kevin McKenney placed her on Estrogen and Spironolactone.

(19). At this time Plaintiff explained to Dr. McKenney that she could not live in a males body because it made her hate herself, feel deformed, nasty and caused her to have thoughts of committing suicide.

(20). Dr. McKenney told Plaintiff that all he could do was place her on Female Hormones because TDCJ-ID has a Ban on Sex Reassignment Surgery.



(21). Plaintiff also requested Dr. McKenney to provide her with a pass that would allow her to live as a Female.

(22). Plaintiff has consistently requested to have her genitals removed and the Defendants have ignored her/ or told her NO.

(23). Plaintiff has also requested since TDCJ-ID has a Ban on Sex Reassignment Surgery, could she have a pass to live as a female, to dress as a female and to keep her hair at least 7 inches long at all times, and she was told NO.

(24). Plaintiff have put the Defendants on notice, That she has thoughts of suicide, self- castration, and that their Ban on sex reassignment surgery violates the 8th Amendment of The United States Constitution. She was told that the Director does not respond to inmates request or complaints.

(25). The Defendants also aware of Federal Law - case law that shows that a systematic Ban on Sex change is Unconstitutional. Because in her complaints she cited the law and explained how TDCJ-ID's Ban is Identical to the one that Federal court found Unlawful.

### **VIII. CAUSE OF ACTION**

(26). The Defendants are Violating Plaintiff's Constitutional Rights under The 8th Amendment by denying her Medical Care that would treat the actual cause of her serious Medical condition to enforce a systematic ban on Sex Reassignment Surgery; which creates a policy of deliberate indifference to her gender dysphoria because they refuse to allow her to be evaluated to determine if Sex Reassignment Surgery would be a viable medical treatment option based on her medical needs.

Consequently, Plaintiff has to suffer severe mental anguish

that causes her to have realistic thoughts of suicide and of self-castration.

In addition she is forced to live in conditions that places her life at substantial risk of harm.

(27). Plaintiff asserts that TDCJ-ID ban on Sex Reassignment Surgery is Unconstitutional, both fictically and as applied because it indiscriminately and arbitrarily denies transgender inmates who has severe Gender Dysphoria Medical Treatment that would treat the actual cause of their illness. Thus it prohibits them from even seeing a Doctor to be evaluated to see whether or not they need Sex Reassignment Surgery to adequately treat their illness.

(28). Plaintiff asserts that as applied to her TDCJ-ID ban on Sex Reassignment Surgery is Unconstitutional because it allows the Defendants to ignore her serious medical needs for nonmedical reasons which places her life at substantial risk of serious harm because her illness causes her to have realistic thoughts of committing suicide and of self castration.

(29). Plaintiff further asserts that no set of circumstance exists under which the ban can be valid because TDCJ-ID has created a situation where they don't even have to evaluate a Transgender inmate for this type of treatment regardless how severe their Gender Dysphoria is. Which creates a policy of deliberate indifference to an inmates serious medical need.

(30). The 8th Amendment prohibits prison officials to ignore an inmates serious medical needs.

(31). This Ban does just that; If an inmate can not be evaluated, Plaintiff's condition will be ignored and she will only receive care that merely provides treatment to reduce the pain it cause.



(32). This ban is not predicated on any type of medical justification rather is based exclusively on a blanket policy that indiscriminately bans Sex Reassignment Surgery would treat Plaintiff adequately.

(33). The defendants have a legal obligation to provide plaintiff with adequate medical care of quality acceptable when measured by prudent professional standards of the community, tailored to her specific medical needs. BURRETT V. LOPLEN, 292 F. Supp. 2d 281 C.D.N.H. 2003).

(34). Pursuant The World Professional Association for Transgender Health, Sex reassignment Surgery is Medically Necessary to treat some people adequately. See EX 1.

(35). Sex Reassignment Surgery is not cosmetic or elective. See EX (2).

(36). The Defendants cannot fulfill this legal obligation because:

(1). My doctor is prohibited from following the standard of care for Transgender Health,

(2). He cannot evaluate me or refer me to a specialist to determine if Sex Reassignment Surgery would treat the actual cause of my illness adequately.

(37). Plaintiff asserts that if her Doctor can not evaluate her or follow the standard of care, he cannot make sound medical judgment.

(38). The failure to consider an individual inmate's condition in making treatment decisions is precisely the kind of conduct that constitutes a substantial departure from accepted professional judgment, and clearly shows that the Defendants are denying to treat Plaintiff to enforce a blanket ban on Sex Reassignment Surgery for nonmedical reasons.

(39). Plaintiff asserts that the Defendants are aware of the substantial harm of serious risk that Plaintiff faces because Plaintiff was admitted to TDCJ-ID's Mental Hospital for expressing her desires to commit suicide and to castrate herself.

(40). Absent legitimate countervailing consideration, adequate medical care requires addressing the actual cause of the serious medical condition, rather than merely providing treatment to reduce the pain it causes. *BURRET V. COPLIN*, 12 F. Supp 2d. 281 C.D.N.H. 2003).

(41). the Defendants stated reason for denying Plaintiff Sex Reassignment Surgery is! She don't qualify. See Exhibit (4).

(42). Ms. V. Pollard - The Hughes's Unit Medical complaint coordinator made this claim. However, she is not a Doctor nor was plaintiff evaluated by a Doctor therefore her judgment is not based on sound Medical Judgment.

(43). Gender Dysphoria is a serious Medical condition that can cause a person to commit suicide especially if the person isn't adequately treated. *KOSILEX V. MALONEY*, 221 F. 2d 186 (D. Mass 2002). See Ex (3).

(44). Female Hormones does not adequately treats everyone's actual cause of Gender Dysphoria. See Ex (5)

(45). In **FIELDS V. SMITH**, 656 F. 3d 550,556 (7th cir. 2011) The court ruled that " A statute prohibiting hormone therapy and Sex Reassignment Surgery for any prisoner violates the 8th Amendment because some inmates could be medically necessary to treat some inmates adequately".

(46). Plaintiff further asserts that the municipality of Gatesville, Texas is responsible for denying Plaintiff Medical Care because The State of Texas collectly is enforcing a State wide ban on inmates receiving Sex Reassignment Surgery for any reason.

(47). This policy has been in effect for over 20 years and not one inmate in The State of Texas while incarcerated in TDCJ-ID has ever been evaluated for protenual Sex Reassignment Surgery.

(48). This policy or ban is incompatible with the concept of human dignity and has no place in civilized society because denying to treat an prisoner's serious Medical needs is the product of physical torure.

(49). Plaintiff claims that the Defendants stated reason or any claims that they claim is not based on any REAL security assesment or Medical Judgment because they have never actual tested wether or not providing Plaintiff with Sex Reassignment Surgery would creat a serious security risk.

PRAYER

Plaintiff as the court to grant her the following relief:

(1). Declaration that the acts and omissions described herein violates her rights under The Constitution and Laws of The United States, and

(2). A preliminary and permanent injunction ordering The Defendants to rescind The Ban on Sex Reassignment Surgery and Add this medically necessary treatment to it's Health Care Policy to treat Transgender inmates, and to make the treatment available, and

(3). Take judicial notice of The World Professional Association for transgender health's statements that Sex Reassignment Surgery is Medically necessary treatment - not as proof as treatment, but to establish that this statement does exist. See FED. R. EVID 201 and 801 (c).

(4). Grant her a jury trail on all issues that are triable by a jury,

(5). Attorney Fees,

(6). And recovery of cost of this suit.

Date 5 28, 15

Respectfully,



SCOTT L. GIBSON

VERIFICATION

I SCOTT L. GIBSON the Plaintiff in the above complaint hereby verify that the matters alleged herein are true, except as to matters alleged on information and belief, and as to those I believe them to be true & correct. I certify inder penalty of perjury that the foregoing is true and correct.



SCOTT L. GIBSON

To: District clerk's Office

Dear Clerk,

Thank you for your help! will you please submit the  
enclose legal material to the Court, and let me know once it is  
filed. I extremely appreciat your assistance in this matter!

Scott Lynn gibson,



RECEIVED

JUN 08 2015

CLERK, U.S. DISTRICT COURT  
WESTERN DISTRICT OF TEXAS

BY \_\_\_\_\_  
DEPUTY CLERK

SCOTT L. GIBSON  
TDCJ-ID # 699888

AFFIDAVIT

My name is: SCOTT L. GIBSON TDCJ-ID #699888. I'm the Plaintiff in the foregoing Civil Complaint and I submit this Affidavit about the following:

- (1). I have been legally Diagnosed with Gender Dysphoria by TDCJ-ID Doctors.
- (2). I'm currently on Female Hormones and Anti-Androgens. ①
- (3). Dr. Kevin McKenney places me on the medication.
- (4). I have lived as a Female from about the age of 14 or 15 years old and I sincerely believe that I'm a Female trapped in a Males body.
- (5). This makes me suffer severe Depression that makes me have thoughts of committing suicide and of self-castration because I feel Deformed, Nasty and it makes me Hate my body to the point I want to Die.
- (6). The depression is so severe at times I have to abuse my genitals to cope.

1. Note: Dr. Kevin mckenney was suppose to place me on estrogen- But he wants my Testosterone level goes down due to the risk of Blood clots. I don't have a history of Blood clots. He claims this is just necessary.

(7). Since I've been in prison, I have tried to commit suicide 3 times. I can't claim it was all due to my Gender Dysphoria but it stresses me out and little things will push me to the point I want to Die.

(8). For years, I use to tie a string around my testicles until they turned a bloody purple color and hurt so bad that I could barely walk. I did this in belief that if I destroyed my testicles it would prevent them from producing testosterone.

(9). I truly believe that if I don't get a Sex change I will end up committing suicide because the older I became the strong my pain gets, as well as the need to abuse my body gets.

(10). I have written Medical over 30 times about this and they tell me I will never get a Sex change or be treated.

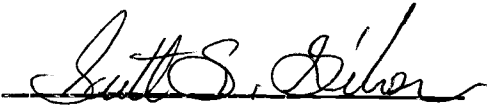
(11). The Defendants know about the risk I face yet they ignored my request because they claim that they don't respond to inmates complaints. See Ex (5).

(12). I'm afraid to tell TDCJ-ID doctors how close I come to committing suicide or castrating myself - Each day because all they will do is put me in a cold room naked and I will have to suffer because it is so cold in their, if I had anything to kill myself with, I would!

(13). It is hard to talk to medical about how I feel because they do not - They refuse to hear anything about Sex change, Etc.

(14). Plus alot of the Doctors are against inmates receiving this type of treatment.

I swear under penalty of perjury that the foregoing statements are true.

  
SCOTT L. GIBSON

5/12/2015



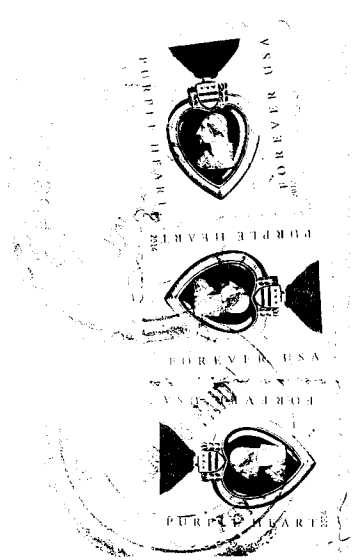
Scott Lynn Gibson 699888

A. Hughes am, '4

R1 2. 1500 4400

Autoscan TX 76897

Logan



District Clerk's Office  
for the United States  
Court - Western District  
Texas, Waco Tex

800 Frank

Rm 3

Waco, TX