

Nathan R. Goninan D.O.C. #869663
(aka) Nonnie Marcella Lotusflower JRC Document 8 Filed 10/27/17 Page 1 of 218
w.c.c.
P.O. Box 900
Shelton, WA, 98

In the United States District Court for
The District of Washington

Nathan Robert Goninan
(aka) Nonnie Marcella Lotusflower
plaintiff,
v.

washington D.O.C., Eleanor
vernell-Director of the D.O.C.,
Karie Rainer-mental Health
manger, Dan white w.c.c.
Administrator, Dr. Wendy Wachsmuth
Erika Lanretz, mental health,
Dr. Burt, And others to be named
later. Defendant's,

Case# 3:17-cv-05714-BHS-JRC

42 U.S.C. §1983 Civil Action

Jury Trial Demanded

This is a civil rights action filed by Nathan Robert Goninan also known as Nonnie marcella Lotusflower a transgender female and state prisoner, ~~is~~ filing Pro se under In forma pauperis.

* Nature of this Action *

- 1) Plaintiff brings this civil rights action under 42 U.S.C. §1983 to seek prospective injunctive relief based upon Defendants' failure to provide plaintiff with medically necessary gender confirming therapy and provide plaintiff with medically necessary sex-reassignment surgery to treat her serious medical condition of Gender Dysphoria in violation of the Eighth and Fourteenth Amendments of the United States Constitution.

Plaintiff files this action along with a motion for temporary restraining order and preliminary injunction. As of now plaintiff's safety and life are at extreme risk.

* Jurisdiction *

- 1) Jurisdiction of this court is invoked pursuant to 28 U.S.C. 1331 in this civil action arising under the constitution of the united states.
- 2) Jurisdiction of this court is invoked pursuant to 28 U.S.C. 1343(a)(3) in that this action seeks to redress the deprivation, under color of state law, of rights secured by acts of congress providing for ~~the~~ equal rights of persons within the jurisdiction of the united states. All named defendants are sued under color of law.

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Parties of this action

- 1) Plaintiff: Nathan Robert Goninan (Also known as) Nonnie Marcella Lothsflower. D.O.C. #869663 address of plaintiff: Washington correctional center, P.O. Box 900, Shelton, WA, 98
- 2) Defendants: Washington Department of corrections, 2) Eleanor Vernell - Director of the Washington D.O.C., 3) Karie Rainey - mental Health manager, 4) Dan White - Washington correctional center Administrator, 5) Dr. Wendy Wachsmuth, 6) Erika ~~White~~ Lanretz, 7) Dr. Burt. 8) Plaintiff reserves the right, consistent with applicable rules and orders, to amend this complaint to include other officials should it become apparent that those officials' inclusion is necessary to grant the prospective injunctive relief requested herein. All named defendants are sued in his/her individual and official capacities. All the defendants have acted, and continue to act, under color of law at all times relevant to this complaint.
address to defendants:

Exhaustion of Administrative Remedies

Plaintiff is in the process of exhaustion and file's before exhaustion of administrative remedies, Do to the fact that plaintiff is at great risk of injury and death with out a preliminary injunction while she wait's for exhaustion. Also defendant's have not followed there own rules in answering ~~grievous~~ grievances on time, The court's have in there power to ~~to~~ grant a preliminary injunction while plaintiff is exhausting her Administrative remedies to correct any violation that will creat a risk of serious injury or death to the plaintiff. (See: Jackson v. District of Columbia, ~~2000~~ 254 F. 3d 262 (D.C. Cir, 2001) "The court can protect an inmate with preliminary injunction while she wait's for exhaustion") At this time plaintiff request's protection in the form of an injunction till exhaustion has been met.

factual statement/statement of claim

- 1) plaintiff is a transgender female with a diagnosis of Gender Dysphoria. plaintiff just came from the Oregon state D.O.C. where she did 10 years. While in oregon plaintiff was receiving medically necessary treatment for her serious medical condition of gender dysphoria.
- 2) on 10/31/2016 plaintiff was diagnosis with Gender Dysphoria by Dr. Mary ~~McCarthy~~ MD,
- 3) on Dec/8/2016 it was deemed medically necessary to provide plaintiff with gender affirming care to treat plaintiff for her gender dysphoria.
- 4) on Feb/14/2017 it was deemed medically necessary for plaintiff to start taking Hormone Replacement Therapy

- 5) for 2 year's plaintiff worked with her mental health provider in managing her symptom's of Gender Dysphoria.
- 6) plaintiff's gender dysphoria has caused her to attempt suicied 10 + time's and to attempt castration many time's with out treatment.
- 7) All above named treatments where deemed medically necessary to treat plaintiff and stop her from stress and depression that caused her to self harm.
- 8) since coming to washington D.O.C. all named Defendant's have stoped plaintiff's gender affirming care which has created injury to the plaintiff.
- 9) Around the 15th of Aug, 2017 plaintiff swallowed 30 Benidri II pill's in a suicied attempt.
- 10) Around the 30th of Aug, 2017 plaintiff was found to have tryed to castrate herself by tieing off her privet's for 2 day's plaintiff is in extrem pain and provided with pain medication.
- 11) Around Aug, 28th or 29th, 2017 Defendant's Dr. wandy wachsmuth Dr. Burt , and other defendants "Names unknown" had a telephone ~~or~~ meeting."plaintiff is housed in medical room#109 where she can hear very clearly into Dr. Burt office which is next door, through a large crack in the wall plaintiff heared most of the meeting." Dr.Wachsmuth and Dr. Burt Both said that plaintiff has a high risk of suicied and self harm, Dr.Wachsmuth also stated that plaintiff was receiving gender affirming care by have access to make up and female product's and stated that plaintiff gender dysphoria has worsend since treatment was stoped.
- 12) An unidentified Defendant stated, make up and those thing's are not allowed inside a male prison and Dr.wachsmuth acknowledged that. As well did Dr Burt . It was stated that

washington D.O.C. policy won't allow that kind of treatment.

- 13) Defendant's have created and go by a blanket policy that does not allow for gender affirming care even if it's medically ~~necessary~~ necessary,
- 14) This ~~blanket~~ Blanket policy creates harm to the plaintiff and violates her 8th Amendment right's of cruel and unusual punishment by being Deliberate indifferent to plaintiff's serious medical need's.
- 15) This Blanket policy stop's mental Health and medical from evaluating and providing medically necessary care for gender dysphoria. care that is ~~deemed~~ deemed medically necessary treatment by the American psychiatric Association and the World professional Association for Transgender Health ("W.P.A.T.H.") standards of care.
- 16) on Aug, 31, 2017 plaintiff was evaluated by Dr. Wachsmuth and mental Health provider Erika Lauretz after ~~she~~ plaintiff tryed to castrate her self. Again Dr. Wendy wachsmuth and Lauretz said that they knew that my gender affirming care was medically necessary. But that D.O.C.'s Blanket policy stop them from providing this treatment.
- 17) Dr. Wendy wachsmuth stated: I know it's medically necessary and I don't agree that D.O.C. don't allow gender affirming care and it was people back at headqourters that don't understand this treatment.
- 18) Dr. Wendy wachsmut stated: That it's hard to make these change's and it usually ~~will~~ take's a law suit for them to realize there need's to be change's made.
- A) Defendant's Dr.~~wendy~~ Wendy wachsmuth, ~~Erika~~ Lauretz have both stated that plaintiff is a good canidate for sex-reassignment surgery and need's this treatment.

20) Washington D.O.C.'s health care policies for treating gender dysphoria are filled with blanket policy's. It state's that D.O.C. will not provide any surgery's for gender dysphoria and it lack's policy for inmate's that need surgery when it's medically necessary. D.O.C. Policies for transgender care are unconstitutional and creat harm to the plaintiff.

21) All named defendant's know that a person diagnosed with gender dysphoria are at risk of injury and death. But still they refuse to provide necessary care.

22) Gender dysphoria is not just a mild discomfort with one's sex assigned at birth; rather, it is a profound disturbance such that the lives of some transgender people revolve only around performing activities to lessen the gender distress. DSM-V 453-454. Gender dysphoria often comes with severe mental anguish and the inability to function normally at school, at work, or in relationships. Moreover those suffering from gender dysphoria often become socially ostracized and stigmatized, which further diminishes self-esteem.

23) Although gender dysphoria on its own is not considered a life-threatening illness, But when not properly treated, it is often associated with dangerous related conditions such as depression, substance related disorder's, self-mutilation and suicide. DSM-V 458-59

24) without treatment, the path for those suffering from gender dysphoria can be torturous, as evidenced by shockingly high suicide rates: 45 percent for those age's 18-44, in comparison to the national average of 1.6 percent, according to the 2009 National transgender Discrimination survey

25) Hormone's, gender affirming treatment, surgery are recognized as needed treatment's for those with gender dysphoria

26) The standards of care make clear that sex-reassignment surgery is an "essential and medically necessary" treatment for gender dysphoria in certain cases. Hormone therapy alone for those individuals is not sufficient. As the standards of care explain: → while many transsexuals, transgender and gender-nonconforming individuals find comfort with their gender identity, role, and expression without surgery, for many others surgery is essential and medically necessary to alleviate their gender dysphoria. for the latter group, relief from gender dysphoria ~~is~~ cannot be achieved without modification of their primary and/or secondary sex characteristics to establish greater congruence with their gender identity.

27) On Aug, 31, 2017 mental health provider Erika Lawetz ~~stated~~ that sex-reassignment surgery is medically necessary to treat plaintiff's gender dysphoria and head of mental health at Washington Correctional center Dr. Wendy Wachsmuth signed off on this report.

28) The fact that defendant's know that sex-reassignment surgery is medically necessary and refuse to provide this life saving treatment make defendant's Deliberate Indifferent to plaintiff's medical need's and in violation of plaintiff 8th Amendment right, creating wanton and unnecessary infliction of pain.

29) The Washington D.O.C. Administration - Eleanor Vornell, Karie Rainer and all other D.O.C. Staff that are part of the committee in making decisions on transgender care are Deliberate Indifferent by making and enforcing ~~unconstitutional~~ unconstitutional blanket policy's. They are also Deliberate Indifferent do to the fact that they only meet every few month's to discuss if inmate's will receive care. this extremely slow process with month's in between ~~leave's~~ plaintiff ~~in~~ unnecessary pain.

30) All the facts are there, plaintiff's medical records make clear that plaintiff had been living as a female and receiving feminizing hormone therapy and chemical castration treatments. But still experienced significant distress and anxiety as a result of the discrepancy between her remaining male sex characteristics, including non-functioning male genitalia, and her female gender identity.

31) In fact, plaintiff's mental anguish is intensified by the fact - "repeatedly established in her medical records" - that plaintiff is a "biological female" based upon her hormone level's and chemical castration, yet is being forced to live every minute of every day in a body with male genitalia that does not match her biology or deeply rooted identity. It thus was clear under prevailing standards of care and medical research that sex-reassignment surgery is medically necessary and that plaintiff fully meets the requirements for sex-reassignment surgery.

32) All the above statements violate the plaintiff's 8th and 14th Amendment rights.

Statement of claims

Count one

1) Violation of 42 U.S.C. §1983 Based upon deprivation of the Eighth Amendment rights. Resulting from failure to provide medically necessary surgery and gender affirming treatment.

Count Two

2) Violation of 42 U.S.C. §1983 Based upon deprivation of the fourteenth Amendment right to Equal protection by refusing plaintiff sex-reassignment surgery on the basis of gender and transgender status.

3) Against all named defendants, the policies that defendants have set in place and enforce are unconstitutional

This regulatory ~~8~~ scheme discriminates ~~8~~ against transsexual women inmates by making Vaginoplasty de facto unavailable for such inmates, but allow the treatment f

while incarcerated, defendants have ~~been~~ deprived plaintiff of her right to equal protection under the law guaranteed by the fourteenth Amendment of the U.S. constitution.

Prayer for Relief

Wherefore, plaintiff prays for judgment against all named defendant's.

- 1) Enter injunctive relief enjoining defendants from interfering with the discretion of the mental health and other medical staff involved in plaintiffs care.
- 2) Enter injunctive relief declaring that the policies on transgender care and ~~an~~ extremely long waits for care are unconstitutional on its face and as applied.
- 3) Enter injunctive relief enjoining defendants to provide plaintiff with adequate ~~and~~ medical care including gender affirming care and sex-reassignment surgery
- 4) Enter injunctive relief that the defendant's ~~will~~ place plaintiff in female housing after surgery is complete.
- 5) Enter injunctive relief enjoining defendant's to do all the above in a time frame set by the court so plaintiff is not forced to suffer.
- 6) Award reasonable attorneys fees and costs to plaintiff pursuant to 42 U.S.C. §1988 and

7) such other relief as the court finds appropriate in
the interests of justice.

I declare under penalty of perjury that the
forgoing is true and correct

Date, Sep, 1, 2017



Respectfully submitted, Nathan R. Goninan
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