No. 20-5521 ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

Serenity Izabel Williams (formerly Known as "WILBERT WILLIAMS, IV") — PETITIONER
(Your Name)

vs.

BEVERLY KELLY, ET AL. — RESPONDENT(S)

ON PETITION FOR A WRIT OF CERTIORARI TO

The UNITED STATES COURT OF APPEAL, FIFTH CIRCUIT
(NAME OF COURT THAT LAST RULED ON MERITS OF YOUR CASE)

PETITION FOR WRIT OF CERTIORARI

WILBERT WILLIAMS, IV also Known as "Serenity Izabel Williams"
(Your Name)
Raymond Laborde Correctional Center
1630 Prison Road
(Address)

Cottonport, Louisiana 71327
(City, State, Zip Code)

(318) 876-2891
(Phone Number)

QUESTION(S) PRESENTED

1) WHETHER THIS COURT DECIDE WHETHER GENDER DYSPHORIA IS A SERIOUS MEDICAL CONDITION, AND, IF SO, TO ENTER A DECISION FOR THE CONFLICT THAT THE 5TH CIRCUIT HAS WITH OTHER U.S. COURT OF APPEALS

2) WHETHER THE FOURTEENTH AMENDMENT FULLY INCORPORATES THE EIGHTH AMENDMENT GUARANTEE OF PROVIDING ADEQUATE MEDICAL TREATMENT FOR TRANSGENDER PRISONERS WHO IS ULTIMATELY SUFFERING WITH SEVERE GENDER DYSPHORIA PURSUANT TO THE STANDARDS OF CARE FOR THE HEALTH OF TRANSSEXUAL, TRANSGENDER, and GENDER NONCONFORMING PEOPLE

3) WHETHER THERE IS A CONFLICT OF INTEREST BETWEEN THE 5th Circuit and other APPELLATE COURTS WHICH STATES THAT SEX-REASSIGNMENT-SURGERY IS MEDICALLY NECESSARY.

LIST OF PARTIES

[ ] All parties appear in the caption of the case on the cover page.

[✓] All parties **do not** appear in the caption of the case on the cover page. A list of all parties to the proceeding in the court whose judgment is the subject of this petition is as follows:

1) Mr. James M. LEBLANC, Secretary of the Louisiana Department of Public Safety and Corrections; and/or,

2) His Medical Director

RELATED CASES

The judgment of the United States District Court for the Eastern District of Louisiana is an unpublished opinion reported at Williams v. Kelly, 2018 U.S. DIST. LEXIS 158119 (E.D. La. 8/27/2018), attached as Appendix "A." The judgment of the United States Court of Appeals, 5th Circuit's order denying Eighth Amendment Claim of the decision is reported at Williams v. Kelly, No. 18-31066 (5th Cir. 7/2/2020) and, attached as Appendix "B".

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STATUTES AND RULES

IN THE

SUPREME COURT OF THE UNITED STATES

PETITION FOR WRIT OF CERTIORARI

Petitioner respectfully prays that a writ of certiorari issue to review the judgment below.

OPINIONS BELOW

[✓] For cases from **federal courts:**

The opinion of the United States court of appeals appears at Appendix B to the petition and is

[ ] reported at _____; or,
[ ] has been designated for publication but is not yet reported; or,
[✓] is unpublished.

The opinion of the United States district court appears at Appendix A to the petition and is

[✓] reported at 2018 U.S. Dist. LEXIS 158119; or,
[ ] has been designated for publication but is not yet reported; or,
[ ] is unpublished.

[ ] For cases from **state courts:**

The opinion of the highest state court to review the merits appears at Appendix _____ to the petition and is

[ ] reported at _____; or,
[ ] has been designated for publication but is not yet reported; or,
[ ] is unpublished.

The opinion of the _____ court appears at Appendix _____ to the petition and is

[ ] reported at _____; or,
[ ] has been designated for publication but is not yet reported; or,
[ ] is unpublished.

JURISDICTION

[✓] For cases from **federal courts:**

The date on which the United States Court of Appeals decided my case was July 2nd of 2020.

[✓] No petition for rehearing was timely filed in my case.

[ ] A timely petition for rehearing was denied by the United States Court of Appeals on the following date: _____, and a copy of the order denying rehearing appears at Appendix _____.

[ ] An extension of time to file the petition for a writ of certiorari was granted to and including _____ (date) on _____ (date) in Application No. ___A_____.

The jurisdiction of this Court is invoked under 28 U. S. C. § 1254(1).

[ ] For cases from **state courts:**

The date on which the highest state court decided my case was _____. A copy of that decision appears at Appendix _____.

[ ] A timely petition for rehearing was thereafter denied on the following date: _____, and a copy of the order denying rehearing appears at Appendix _____.

[ ] An extension of time to file the petition for a writ of certiorari was granted to and including _____ (date) on _____ (date) in Application No. ___A_____.

The jurisdiction of this Court is invoked under 28 U. S. C. § 1257(a).

CONSTITUTIONAL AND STATUTORY PROVISIONS INVOLVED

The Eight Amendment to the *United States Constitution* provides, in pertinent part: "...Nor Cruel and Unusual punishment inflicted." U.S. Const. amend. VIII

The Fourteenth Amendment to the *United States Constitution* provides, in pertinent part:

"Section 1. All person born or naturalized in the *United States*, and subject to the jurisdiction thereof, are Citizens of the *United States* and of the State wherein they reside. No State shall make or enforce any law Which shall abridge the privileges or immunities of citizens of the United States; nor shall any State deprive any person of life, liberty, or property, without due process of law; nor deny to any person within its jurisdiction the equal protection of the laws."

The *Amendment is enforced by Title 42 U.S.C. §1983 provides, in pertinent part:*

"Every person who, under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia, subjects, or causes to be subjected, any citizen of the United States or other person within the jurisdiction thereof to the deprivation of any rights, privileges, or immunities secured by the Constitution and laws, shall be liable to the party injured in an action at law, suit in equity, or other proper proceeding for redress, except that in any action brought against a judicial officer for an act or omission taken in such officer's judicial capacity, injunctive relief shall not be granted unless a declaratory decree was violated or declaratory relief was unavailable...."

STATEMENT OF THE CASE

The petitioner, Wilbert Williams IV (also Known as "Serenity Izabel Williams") is a transgender female, was charged with Armed Robbery. She was sentenced to twenty-five years in the Custody of the Louisiana Department of Public Safety and Corrections, and currently being housed at Raymond Laborde Correctional Center, in Cottonport, Louisiana.

On Monday, July 3rd of 2017 had filed an Administrative Remedy Procedure against Robert C. Tanner, C.C.E Warden of B.B. "Sixty" Rayburn Correctional Center in Angie, Louisiana; Beverly Kelly, Assistant Warden of Medical and Treatment; Teressa Knight, RN/Director of Nurses; and, Robert Cleveland, Doctor and Medical Director -- for the failure to provide her with medical necessary medical treatment including sex-reassignment-surgery. During that time, Williams was experiencing and still is on-going gender dysphoria, depression, anxiety, mental distress and agony. (Appendix "C")

Then, on August 17th of 2017 Williams received her first step response stating that her request for remedy is denied for the non-compliance of her treatment regime as prescribed (which is feminizing hormone therapy). (See Appendix "E")

On September 22nd of 2017 Williams appeal the first step response of the Warden to the Secretary of D.O.C. and on October 31st of 2017 Williams received her second step response stating that her request for remedy is denied because medical opinion is controlling. (See "~~Appendix~~ "D")

SO, on November 20th of 2017 it was filed in the United States District Court of the Eastern District of Louisiana a 42 U.S.C.S. §1983 civil suit; Which, on August 27th of 2018 a decision was made by the United States Magistrate Judge, Janis Van Meerveld and the District Court adopted the U.S. Magistrate Judge's report and recommendation.

Thereafter, Williams filed an appeal to the United States Court of Appeals for the Fifth Circuit and on July 2nd, 2020 a decision was made. The appellate Court confirm the District Court's dismissal With prejudice of her claim under the Eighth Amendment.

Nevertheless, Williams ask this Honorable Court to grant her Writ of Certiorari for the following reasons: (1) The Fifth Circuit has entered a decision in conflict with the decision of another United States Court of appeals on the same important matter; Therefore, the Honorable Court should grant Williams' Writ of Certiorari to fix the Conflict.

The Conflict Consist of: (1) Is gender dysphoria a serious medical condition under the Eighth Amendment; (2) Whether the Harry Benjamin International Gender Dysphoria Association's Standards of Care for Gender Identity Disorders/The World Professional Association for ~~the Health~~ Transgender Health "Standard of Care" should be accepted as professional opinions in a circuit courts; and, 3) Whether the three elements or phases of therapy which include: a) a real-life experience in the desired role; b) hormones of the desired; and c) surgery to change the genitalia and other sex characteristics posed a security threat and/or safety concern to the well-being of the petitioner.

REASONS FOR GRANTING PETITION

I. THIS COURT SHOULD GRANT CERTIORARI TO CONSIDER WHETHER THERE IS A CONFLICT OF LAW BETWEEN CIRCUIT COURT CONCERNING WHAT IS MEDICALLY NECESSARY.

Transsexualism has been recognized as a serious psychiatric disorder. In Ulane v. Eastern Airlines, Inc., 742 F.2d 1081, 1083 n. 3 (7th Cir. 1984), cert. denied, 471 U.S. 1017, 85 L. Ed. 2d 304, 105 S. Ct. 2023, this Court described transsexualism as:

> a condition that exists when a physiologically normal person (i.e., not a hermaphrodite -- a person whose sex is not clearly defined due to a congenital condition) experiences discomfort or discontent about nature's choice of his or her particular sex and prefers to be the other sex. This discomfort is generally accompanied by a desire to utilize hormonal, surgical, and civil procedures to allow the individual to live in his or her preferred sex role. The diagnosis is appropriate only if the discomfort has been continuous for a least two years, and is not due to another mental disorder, such as schizophrenia.... See generally American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders §302.5x (3d ed. 1980); Edgerton, Langman, Schmidt and Sheppe, Psychological Considerations of Gender Reassignment Surgery, 9 Clinics in Plastic Surgery 355, 357 (1982); Comment, The Law and Transsexualism: A Faltering Response to a Conceptual Dilemma, 7 Conn. L. Rev. 288, 288 n. 1 (1975); Comment, Transsexualism, Sex Reassignment Surgery, and the Law, 56 Cornell L. Rew 963, 963 n. 1 (1971).

[The above] definition is in accord with the one used by the district court taken from the Merck Manual of Diagnosis and Therapy 1434 (14th ed. 1982):

> "A transsexual believes that he is the victim of a biologic accident, cruelly imprisoned within a body incompatible with his real sexual identity. Most are men who consider themselves to have feminine gender identity and regard their genitalia and masculine features with repugnance. Their primary objective in seeking psychiatric help is not obtain psychologic treatment but to secure surgery that will give them as close an approximation as possible to a female body. The diagnosis is made only if the disturbance has been continuous (not limited to periods of stress) for at least 2 yrs, is not symptomatic of another mental disorder such as schizophrenia, and is not associated with genital ambiguity or genetic abnormality.

(citing Meriwether v. Faulkner, 821 F.2d 408, 411-412, 412 n.5 (7th Cir. 1987)

According to Gates v. Cook, 376 F.3d 323, 332, 2004 U.S. App. LEXIS 13890, 19, the 5th Circuit stating: "Further, mental health needs are no less serious than physical needs. (See, Partridge v. Two Unknown Police Officers of City of Houston, Texas, 791 F.2d 1182, 1187 (5th Cir. 1986))." Gates, 376 F.3d at 332 (5th Cir. 2004)

A) WHETHER HORMONE THERAPY ALONE IS SUFFICIENT FOR GENDER DYSPHORIA.

According to the 5th Circuit's Decision in this case, it quoted, Meriwether v. Falkner, 824 F.2d at 413 (7th Cir. 1987):

> "Given the wide variety of options available for the treatment of the Plaintiff's psychological and physical medical conditions, the Tenth Circuit refused to hold that the decision not to provide the plaintiff with estrogen violated the Eighth Amendment as long as some treatment for gender dysphoria was provided. (See Supre v. Ricketts, 792 F.2d 958 (10th Cir. 1986)"

According to the Declaration of Dr. Randi C. Ettner, 38 states as follow:

"For many individuals with severe gender dysphoria, however, hormone therapy alone is insufficient. Relief from their dysphoria cannot be achieved without surgical intervention to modify primary sex characteristics, i.e. genital reconstruction."

(citing Norsworthy v. Beard, 87 F. Supp. 3d 1164, 1171 (N.D. Cal. 4/2/2015))

And, according to the Declaration of Dr. Marci L. Bowers, 31 states as follow:

"Although some transgender people are able to effectively treat their gender dysphoria through other treatments, sex reassignment surgery for many people

is medically necessary treatment needed to treat gender dysphoria and establish congruence with one's gender identity.

Even though Williams is receiving feminizing hormone injection, it still haven't alleviated her severe gender dysphoria. She is experiencing extremely high anxiety, depression, emotional pain, frustration, agony and suicidality. The anxiety that she is experiencing is causing still, symptoms such as sleeplessness, cold sweats, panic attacks and lots of mood swings.

B) WPATH STANDARDS OF CARE (App. "E")

The World Professional Association for Transgender Health ("WPATH") has developed Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People ("Standards of Care"), which are recognized as authoritative standards of care by the American Medical Association, the American Psychiatric Association, and the American Psychological Association.

The Standards of Care explain that treatment for gender dysphoria is

individualized: "What helps one person alleviate gender dysphoria might be very different from what help another person." Standards of Care, Version 7 edition

There are a three phrases as [a] triadic therapy which is medical necessary for many transgender who is suffering with severe gender dysphoria and they are: (1) a real-life experience in the desired role; (2) hormones of the desired gender; and (3) surgery to change genitalia and other sex characteristics. See the following cases to see all circuit and district court who has recognized that gender dysphoria is a "serious medical need" and/or "sex-reassignment-surgery" is medical necessary to alleviate severe gender dysphoria: Meriwether v. Faulkner, 821 F.2d 408, 411-412 (7th Cir. 1987); White v. Farrier, 849 F.2d 322, 325-28 (8th Cir. 1988); Cuoco v. Moritsugu, 222 F.3d 99, 106-107 (2nd Cir. 2000); De'Lonta v. Angelone, 330 F.3d 630 (4th Cir. 2003); Barrett v. Coplan, 292 F.Supp. 2d 281, 286 (N.H. 11/20/2003) ("GID is a serious condition recognized by the medical community that frequently requires treatment, after evaluation by a medical professional

experienced with GID.... There is a recognized professional standard of care for GID in the medical community."); Sundstrom v. Frank, 2007 U.S. Dist. LEXIS 76597 (E.D. WISCONSIN 10/15/2007); Soneeya v. Spencer, 851 F.Supp. 2d 228, 252, 2012 U.S. Dist. LEXIS 64 (D. Mass. 2012); Norsworthy v. Beard, 87 F.Supp. 3d 1164, 1186-1189 (N.D. Cal. 4/2/2015); Rosati v. Igbinoso, 791 F.3d 1037 (9th Cir. 2015); Diamond v. Owens, 131 F.Supp. 3d 1346, 1372 (M.D. GEORGIA 9/14/2015)("...the Defendants do not deny that gender dysphoria constitutes a serious medical need."); Praylor v. Tex. Dept. of Criminal Justice, 430 F.3d 1208, 1209 (5th Cir. 2005)(assuming without deciding that transsexualism present a serious medical need...); Clark v. LeBlanc, 2017 U.S. Dist. LEXIS 155260 n.1 (9/17/2017); Gibson v. Livingston, 2016 U.S. Dist. LEXIS 195724, case no. W-15-CA-190 (W.D. Tex. 8/31/2016); all of this court have recognized that gender dysphoria is serious medical need and acknowledge that the World Professional Association for Transgender Health "Standards

of Care "has been accepted by medical professionals and mental health professionals. But, the Appellate Court in this case are very conservative practicing conservatism. This appellate Court of the 5th Circuit hate to be in the eyes of Politics as one who cause controversal conflict in the criminal justice system of Louisiana. "... the Eighth Amendment does not permit necessary medical care to be denied to a prisoner because the care is expensive or because it might be controversial or unpopular. See Kosilek v. Maloney, 221 F. Supp. 2d 156, 181-83 (D. Mass. 2002)" (citing Barrett v. Coplan, 292 F. Supp. 2d 281, 286 (D. N.H. 2003).

O. WILLIAMS' TREATMENT

On March 13th of 2016, Williams filed a Health Care Request Form at Allen Correctional Center stating that she need to see the mental health Psychologist because she is suffering with dysphoria which is getting worst in her everyday activities. She couldn't focus on things which she suppose to be doing in life. (see Appendix "F") Then on March 24th of 2016, Williams was seen but wasn't place on

hormone therapy because she couldn't provide medical record showing that she was on hormone therapy on the street. But, she was dianosed with gender dysphoria at Allen Corr. Ctr. in 2016. (Appendix "G")

Needless to say, on May 15th of 2017 at a new institution called B.B. "Sixty" Correctional Center, Williams filed another Health Care Request Form stating she need to see the medical doctor. And, on Monday, June 26th of 2017, she filed another Health Care Request Form stating that she is suffering with a serious medical condition Known as "Gender Dysphoria". Then, on June 28th of 2017, Dr. Cleveland the institutional medical director recognized that Gender Dysphoria is a serious medical condition and prescribed 200mg. of Adactone and 2mg. of Estradiol.

In the month of July thru December of 2017, Williams requested for sex-reassignment-surgery and was constantly denied for the reason of her missing several doses of her medication. This wasn't any excuse to deny Williams surgery to alleviate her gender dysphoria which causes her constant anxiety, agony, distress and depression.

D. WILLIAMS APPEAL SEEKING SRS

WILLIAMS discussed her need for Sex-Reassignment-Surgery ("SRS") with her treating mental health at Rayburn Correctional Center beginning in 2017. Williams explain to her mental health provider, Mr. Floyd, that she don't feel complete in her existence. It wasn't until she heard about the decision in Norsworthy v. Beard, 87 F.Supp. 3d 1164, 1195 (N.D. Cal. 2016)(Defendants are ordered to provide Plaintiff with access to adequate medical care, including sex reassignment surgery.) and in Kosilek v. Spencer, 889 F.Supp. 2d 190 (D. Mass. 2012), aff'd, 740 F.3d 733 (1st Cir. 2014), rev'd en banc, 774 F.3d 63 (1 Cir. 2014), however, that she believed that she might have an opportunity to receive SRS.

On July 3rd of 2017, Williams filed an Administrative Remedy Procedure ("ARP") against defendants, Warden Tanner; Assistant Warden Kelly; Doctor Cleveland; Nurse Knight, Director of Nurses; and, Nurse Polk, Ass't. Director of Nurses, for they all denied to provide Williams with adequate medical treatment according to the "standards of

Care" for the Health of Transsexual, Transgender, and Gender-Nonconforming people. This standards of care is the medical guideline for doctors and psychologists and psychiatrics all around the World. Williams was denied any kind of medical treatment at Rayburn Correctional Center.

Instead, on February 5th of 2018, Prison officials had Williams transferred to Elayn Hunt Correctional Center once D.O.C. and Administration Officials found out that Williams filed a civil suit against them. This was out of retaliation and to nullify the suit to keep them from being held responsible for denying her with adequate medical treatment.

While at Elayn Hunt Correctional Center ("EHCC"), Williams was allow to stay on her feminizing hormone therapy and was allow to see an endocrinologist in Baton Rouge at the One Health Clinic every six months. Williams started having medical and mental health problems with severe gender dysphoria and requested for

to be either castrated or have sex-reassignment-surgery ~~for~~ from Deputy Warden Stephanie Michel

and she written back to Williams stating:

> "We are in receipt of your letter where you claim that you were denied a medical call out to request castration surgery. This is not the type of request that you should make during a medical call out out, rather the surgery options should be discussed during your regularly scheduled Mental Health appointments.
>
> "Castration is one of the possible options in the treatment of your gender dysphoria. As has been explained to you before, surgery of any type whether sex-reassignment or castration will not be considered until you have completed: 12 months of hormone therapy, participation in psychotherapy as clinically indicated, full-time real life experience as a female, consolidation of gender identity, demonstration of a practical understanding of gender-affirming surgery including permanence, potential complications and short- and long-term treatment plains. ..." (See Appendix "E" and Standards of Care, page 106.) (APPENDIX "H")

Since July 2017 to the year of 2020, Williams had satisfied the criteria of the "Standards of Care" for the Health of Transsexual, Transgender, and Gender Nonconforming People.

Therefore, this Honorable Court should GRANT Petitioner request for certiorari/petition.

II. THIS COURT SHOULD GRANT CERTIORARI TO CONSIDER WHETHER GIBSON V. COLLIER SHOULD NO LONG STAND.

Louisiana and Texas are now the only states in the district of the 5th Circuit who is relying on the Meriwether v. Faulkner (7th Cir. 1987) and Kosilek v. Spence (1st Cir. 2014) decisions to deny Petitioner and Gibson in Texas the "minimum stands of decency" (See Estelle v. Gamble, 429 U.S. 97, 102-05, 97 S. Ct. 285, 50 L. Ed. 2d 251 (1976)); of individualized assessment prior to the Standards of Care.

In Williams v. Kelly (PER CURIAM), the 5th Circuit affirmed the District Court decisions stating: "A stat does not inflict cruel and unusual punishment by declining to provide sex reassignment surgery to a transgender inmate." (Citing Gibson v. Collier, 2019 U.S. App. LEXIS 9397, 1 (5th Cir. 3/29/19); See

Kosilek, supra at 76-78, 87-89, 96 (1st Cir. 2014)(en banc)).

This decision conflict with other appellate courts decisions which states in Meriwether v. Faulkner, 821 F.2d 408, 413 (7th Cir. 1987)("There is no reason to treat transsexualism differently than any other psychiatric disorder. Thus contrary to the...determination, plaintiff's complaint does state a "serious medical need."); White v. Farrier, 849 F.2d 322, 326 (8th Cir. 1988)("We therefore conclude that transsexualism is a serious medical need.)); De'Lonta v. Angelone, 330 F.3d 630, 632 (4th Cir. 2003)(Regarding De'Lonta's entitlement to adequate treatment for her GID, the court ruled that the record was clear that De'Lonta was receiving some treatment.). Therefore, this court should grant that Gender Dysphoria is a serious medical condition according to previous circuit decisions and the Standards of Care.

A. WHETHER "SOME TREATMENT" CONSTITUTE AS *ADEQUATE MEDICAL* TREATMENT TO *ESTELLE V. GAMBLE.*

In the 1987 appellate's decision of the 7th Circuit in Meriwether v. Faulkner, this court states: "the Tenth Circuit refused to hold that the decision not to provide the Plaintiff with estrogen violated the *Eighth Amendment* as long as some treatment for gender dysphoria was provided." 821 F.2d 821, 413.

In this case of Williams, this is one of the main decision why the 5th Circuit denied her a partial judgment. This is the same situation that Norsworthy went through when the defendants stated:

"...the hormone therapy and mental health treatment provide by CDCR since 2000 has alleviated Norsworthy's distress, and that she is not entitled to "any particular type of treatment" for her gender dysphoria (citing Meriwether, Id. 413) See, Norsworthy v. Beard, 87 F. Supp. 3d 1164, 1187 (N.D. Cal. 2015).

This same Kind of language is used in the 5th Circuit in this case when it is stated:

"Moreover, Williams's deliberate indifference claim rings hollow

because the defendants once attempted and later offered to correct his gender dysphoria through hormonal therapy, which he admits is a known course of treatment."

In Norsworthy, the Court wasn't persuaded by these arguments. "Just because [defendants] have provided [a prisoner] with 'some treatment' consistent with the Standards of Care, it does not follow that they have necessarily provided her with constitutionally adequate treatment; (Citation omitted).

"As the Fourth Circuit has explained: 'By analogy, imagine that prison officials prescribe a painkiller to an inmate who has suffered a serious injury from a fall, but that the inmate's symptoms, despite the medication, persist to the point that he now, by all objective measure, requires evaluation for surgery. Would prison official then be free to deny him consideration for surgery, immunized from constitutional suit by the fact that they were giving him a painkiller? We think not. Accordingly, although... a prisoner does

not enjoy a Constitutional right to the treatment of his or her choice, the treatment a prison facility does provide must nevertheless be adequate to address the prisoner's serious medical need. De'Lonta, F. 3d at 526. (Citing Norsworthy, 87 F. Supp. 3d at 1187.)

B. WHETHER KOSILEK V. SPENCER SHOULD BE A CONTROLLING CASE FOR THE FIFTH CIRCUIT TO DENY PRISONERS THEIR RIGHTS.

In the defendants' Memorandum in support of Motion to Dismiss, on page 13 states: "... Plaintiff is correct that gender dysphoria is a serious medical condition. The Fifth Circuit and other appellate courts have agreed." See Appendix " ".

Williams averred there was a genuine dispute of material fact as to: whether [Williams] has a serious medical condition; whether [Williams] was entitled to medical care that meets prudent professional standards, as opposed to being denied medical care based on a blanket policy; and whether [all defendants] was deliberately indifferent to [Williams] serious medical need.

The Circuit Courts, throughout its opinions in Gibson's and Williams' case, "claims Kosilek v. Spencer, 774 F.3d 63 (1st Cir. 2014) (en banc), shows there is no genuine dispute of material fact in regard to the medical controversy surrounding SRS; but, in [both] district court[s], the [defendants] did not even cite Kosilek, much less contend the evidence presented in Kosilek was dispositive. (Quoting Gibson v. Collier, 2019 U.S. App. LEXIS 90 (5th Cir. 2019) (dissent))

The majority of both appellate courts "is improperly taking evidence from another case (Kosilek, decided by the first circuit over four years ago, and tried well-before then) - facts not presented in [Williams] case to the district court - and is refusing to evaluate those facts in the requisite light most favorable to [Williams], the [petitioner]. See Johnson v. Treen, 759 F.2d 1236, 1237 (5th Cir. 1985) (quoting Gibson, supra. at 41 (dissent))." Moreover, this case is a far cry from Kosilek, which spanned over 20 years, had a very "expansive" record.... Kosilek, 774 F.3d at 68. Throughout Kosilek's trial, testimony was provided by numerous medical professionals -

including gender dysphoria specialists who had evaluated Kosilek regarding the medical necessity of SRS in that case...." Id. U.S. App. LEXIS 44.

Williams over that there have been numerous developments in the last ten years within the "medical community regarding treating gender dysphoria and determining the necessity for Sex-Reassignment-Surgery[.]" Id. 44. In the district and appellate courts' records, "we have no expert testimony or any evidence as to the medical necessity outside of the WPATH STANDARDS of Care." Id. 45.

The honorable court should compare Kosilek v. Spencer (2014) and Edmo v. Idaho Dep't of Corr., No. 1:17-cv-00151-BLW, 2018 U.S. Dist. 211391, 2018 WL 6571203 (D. Idaho 13 Dec. 2018), in Edmo..."the court's granting Edmo's motion for preliminary injunction and ordering the Idaho Department of Corrections (IDOC) to provide Edmo with SRS. There, the district court held Edmo had "satisfie[d] both elements of the deliberate-indifference standard: Edmo proved there was a serious medical need; and IDOC and its medical provider, with full awareness of Edmo's circumstances,

had refused to provide Edmo with SRS. 2018 U.S. Dist. LEXIS 211341, [WL] at *2. The district court went on to state: "In refusing to provide that surgery, IDOC and [its medical provider] have ignored generally accepted medical standards for the treatment of gender dysphoria." Id. The court also noted, as did the court in Kosilek, that its opinion was based on "the unique facts and circumstances" of Edmo's case, and "is not intended, and should not be construed, as a general finding that all inmates suffering from gender dysphoria are entitled to "SRS. Id. (quoting Gibson v. Collier, No. 16-51148, 2019 U.S. App. LEXIS 9397, at *45-46 (5th Cir. 3/29/2019) (dissent by: Judge Barksdale).

"In so holding, the court found the "WPATH Standards of Care are the accepted standardards of care for treatment of transgender patients", and "have been endorsed by the [National Commission on Correctional Health Care (NCCHC)] as applying to incarcerated persons." (Citation omitted) Id. *46. The court found credible Edmo's two experts, doctors "who have extensive personal experience treating individuals

with gender dysphoria both before and after receiving [SRS]" (Citation omitted). One doctor testified "that [SRS] is the cure for gender dysphoria" and would "eliminate" Edmo's gender dysphoria, 2018 U.S. Dist. LEXIS 211391 [WL] at *13; the other; that "it is highly unlikely that [Edmo's] severe gender dysphoria will improve without SRS, id. (quoting Gibson, 2019 U.S. App. LEXIS 9397, at *46-47 (dissent))

"The court also gave "virtually no weight" to IDOC's experts, who had no "experience with patients receiving [SRS] or assessing patients for the medical necessity of [SRS]". 2018 U.S. Dist. LEXIS 211391, [WL] at *15." So, the Honorable Court shouldn't give virtually no weight to the defendants nor their attorney who is arguing their useless point because the defendants nor their attorneys are neither experts.

C. WHETHER THIS COURT SHALL ADOPT THE COURT'S DECISION IN "EDMO V. IDOC" AND "THE DISSENT IN Gibson v. Collier."

IN Edmo, there was expert witnesses and in the dissent in Gibson, the Circuit Judge who was giving the dissenting comment acknowledges that the WPATH

Standards of Care is "universally accepted" and "endorsed by the [National Commission on Correctional Health Care (NCCHC)]". (See Edmo, 2018 U.S. Dist. LEXIS 211391, [WL] at * 15.

Both courts gives virtually more weight to the "WPATH" Standards of Care than Kosilek or Meriwether. Even in Norsworthy v. Beard, 87 F. Supp. 3d 1164, 1177-1178, states that two expert witnesses who was Dr. Randi Ettner, a member of the Board of Directors of the WPATH and a Psychologist for over 35 years; and, Dr. R. Nick Gorton, a physician, both have agreed that SRS is medically necessary to alleviate Norsworthy's severe gender dysphoria.

Williams is suffering with severe gender dysphoria and shouldn't have to harm herself before this court or any other courts do decide to that action to help alleviate her and other transgenders' severe gender dysphoria. Should Williams have to Kill herself or castrate herself before any other transgender to come along the way, use her case, win and receive SRS? No! It shouldn't

have to get there with her nor any other transgender in the State of Louisiana or any other States.

CONCLUSION

For the foregoing reason, the petition for writ of certiorari should be granted.

Respectfully Submitted,

S/

Wilbert Williams aka "Serenity I. Williams"
Louisiana Dep't of Public Safety and Corrections
Raymond LaBorde Correctional Center
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* PRO SE Representative

Dated: August 11th, 2020