

IN THE
Supreme Court of the United States

No. 26A416

DONALD J. TRUMP, PRESIDENT OF THE UNITED STATES, ET AL.,
Applicants,

v.

ALISHEA SOPHIA KINGDOM, ET AL.,
Respondents.

**On Application to Stay of the Order of the
United States District Court for the District of Columbia**

**BRIEF *AMICUS CURIAE* OF
AMERICA'S FUTURE
IN SUPPORT OF APPLICATION TO STAY**

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TABLE OF CONTENTS

	<u>Page</u>
INTEREST OF THE <i>AMICUS CURIAE</i>	1
STATEMENT OF THE CASE	1
STATEMENT	4
SUMMARY OF ARGUMENT.	7
ARGUMENT	
I. THE BUREAU OF PRISONS POLICY CHANGE IS WELL GROUNDED, ALTHOUGH AT VARIANCE WITH THE POLICY PREFERENCES OF THE CIRCUIT COURT PANEL’S MAJORITY	8
II. THE BUREAU OF PRISONS HAS MADE THE LEGITIMATE PENOLOGICAL JUDGMENT THAT IT DOES NOT WISH TO POTENTIALLY INFLICT LIFELONG HARM TO INMATES WITH PSYCHOLOGICAL PROBLEMS UNDER ITS CARE.	16
III. ONCE THE COURTS ADOPT THE TRANSGENDER PREMISE, THERE IS NO LOGICAL LIMIT TO THE DEMANDS THAT WILL BE PLACED ON THE GOVERNMENT	20
CONCLUSION	25

INTEREST OF THE *AMICUS CURIAE*¹

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STATEMENT OF THE CASE

On January 20, 2025, President Trump issued Executive Order 14168, "Defending Women From Gender Ideology Extremism and Restoring Biological Truth to the Federal Government." 90 FR 8615 (Jan. 30, 2025) ("the EO"). Section 1 of the EO recited:

[I]deologues who deny the biological reality of sex have increasingly used legal and other socially coercive means to permit men to self-identify as women and gain access to intimate single-sex spaces and activities designed for women, from women's domestic abuse shelters to women's workplace showers. This is wrong. Efforts to eradicate the biological reality of sex fundamentally attack women by depriving them of their dignity, safety, and well-being. [*Id.*]

Section 2 declared, "It is the policy of the United States to recognize two sexes, male and female. These sexes are not changeable and are grounded in fundamental and incontrovertible reality." Section 4(a) provided, "The Attorney General and

¹ It is hereby certified that no counsel for a party authored this brief in whole or in part; and that no person other than this *amicus curiae*, its members, or its counsel made a monetary contribution to its preparation or submission.

Secretary of Homeland Security shall ensure that males are not detained in women's prisons or housed in women's detention centers....” Finally, relevant here, Section 4(c) provided that, “[t]he Attorney General shall ensure that the Bureau of Prisons revises its policies concerning medical care to be consistent with this order, and shall ensure that no Federal funds are expended for any medical procedure, treatment, or drug for the purpose of conforming an inmate's appearance to that of the opposite sex.”

Consistent with the EO, the Federal Bureau of Prisons (“the Bureau” or “BOP”), in memoranda dated February 21, 2025 and February 28, 2025, stated that prisons must issue undergarments to prisoners consistent with their biological sex, and that “no Bureau ... funds are to be expended for any medical procedure, treatment, or drug for the purpose of conforming an inmate's appearance to that of the opposite sex.” *Kingdom v. Trump*, 2025 U.S. Dist. LEXIS 105237 at *5-6 (D.D.C. 2025) (“*Kingdom I*”). Three inmates identifying as “transgender” challenged the rule against opposite-sex underwear and cross-sex hormone treatments, but not the prohibition on cross-sex surgical procedures. *Id.* at *12-13.

On June 3, 2025, the district court for the District of Columbia issued a preliminary injunction against the Bureau's policy. The Court ruled that the plaintiffs were likely to succeed on the merits of their Administrative Procedure Act (“APA”) claim that the policy was arbitrary and capricious. The court ruled that “neither the BOP nor the Executive Order provides any serious explanation” for the change in policy, and the policy was therefore arbitrary and capricious. *Id.* at *35.

The court certified a broad class defined as “all persons who are currently or will be incarcerated in BOP facilities with a current diagnosis of gender dysphoria or who receive such a diagnosis in the future.” *Id.* at *43-44. The district court extended its initial injunction against the Bureau three times: on August 20, 2025 (*Kingdom v. Trump*, 2025 U.S. Dist. LEXIS 274377 (D.D.C. 2025)); on November 17, 2025 (*Kingdom v. Trump*, 2025 U.S. Dist. LEXIS 274376 (D.D.C. 2025)); and on February 12, 2026 (*Kingdom v. Trump*, 2026 U.S. Dist. LEXIS 33760 (D.D.C. 2026)).

On February 19, 2026, BOP issued Program Statement 5260.01, “Management of Inmates with Gender Dysphoria,” (“Program Statement”) which superseded the original Implementing Memoranda. The Program Statement “provide[d for] only psychotherapy and psychotropic medication to treat gender dysphoria.” *Kingdom v. Trump*, 2026 U.S. Dist. LEXIS 135103 (D.D.C. 2026) at *4 (“*Kingdom II*”). On June 17, 2026 the district court issued a preliminary injunction against the updated policy. *Id.* at *5, *50. That same day a D.C. Circuit panel granted the Government a stay pending appeal. *Kingdom v. Trump*, 2026 U.S. App. LEXIS 17585 (D.C. Cir. 2026). The D.C. Circuit ruled that

[t]he Government is likely to succeed on the merits at bare minimum because the district court's order appears to have been an administrative injunction. There does not appear to be any “discernible legal basis ... for issuing administrative injunctions,” especially not in cases like this one involving the Prison Litigation Reform Act. [*Id.* at *2-3.]

The court likewise found that the Government is “irreparably harmed by an improper intrusion by a federal court into the workings of a coordinate branch of the Government.” *Id.* at *3 (internal quotation omitted).

On August 26, 2026, the district court reissued its preliminary injunction. *Kingdom v. Trump*, 2026 U.S. Dist. LEXIS 210805 (D.D.C. 2026). On appeal, on September 18, 2026, a different D.C. Circuit split panel refused to stay the injunction. The panel found the Government failed to show a likelihood of success on the merits “because the Bureau of Prisons ... did not adequately consider its own experience providing gender-affirming care under its prior policy.” *Kingdom v. Trump*, 2026 U.S. App. LEXIS 28756 (D.C. Circuit) at *4 (“*Kingdom III*”). In dissent, Judge Walker argued that “[t]he government is likely to succeed on the merits because the district court lacks the authority to reissue the 90-day preliminary injunction first issued on June 17.... [T]he practice of issuing rolling injunctions exceeds the limits imposed on courts by the Prison Litigation Reform Act.” *Id.* at *6 (Walker, J., dissenting) (internal quotation omitted).

STATEMENT

In *Kingdom II*, District Judge Lamberth made the intriguing statement that “the Court has no intention of wading into the culture war being waged against transgender individuals.” *Id.* at *5. Yet in that “culture war” of which Judge Lamberth spoke, the “transgender” movement is hardly on the defensive. Rather,

at every societal stratum, the social contagion of “transgenderism” has been assaulting the foundations of American society.

Now, America’s correctional facilities are in the crosshairs of the transgender advocates who want the American taxpayer to pay for, and BOP employees be compelled to facilitate, experimentation on prisoners with mental conditions to see if man can defy nature itself. To accomplish that goal, transgender advocates have created an artificial and amorphous “class” that defies definition or verification.

Justice Alito noted in a recent concurring opinion:

The parties in this case also admit that transgender status is not an immutable characteristic.... Instead, a person’s gender identity may “shif[t],” and a person who is transgender now may not be transgender later.... A person’s “gender identity” is an “internal sense,” ... and transgender persons as a class do not uniformly “exhibit obvious, immutable, or distinguishing characteristics that define them as a discrete group.... Finally, **the definition of transgender status ... encompasses** not just biological men who permanently identify as women and biological women who permanently identify as men, **but also individuals who might identify with a particular gender at a particular point in time and individuals who identify permanently or temporarily with both sexes, neither sex, or some other identity.** [*United States v. Skrmetti*, 605 U.S. 495, 576-577 (2025) (Alito, J., concurring) (emphasis added).]

Transgender advocates can and do embrace this loose definition, but forcing it on the Bureau of Prisons, which must make very real, very difficult decisions in managing some of the most violent, difficult and lawless members of society, creates an utterly untenable situation. BOP is responsible not only for keeping society safe from its charges, but keeping its charges safe from one another. Prisons across America are dealing with an epidemic of inmate sexual assaults, which leave very

real and definable people with very real and quantifiable injuries. The Bureau faces extremely difficult facts and objective truths every day — facts and truths which cannot be whitewashed by changing meaningful terminology into nonsensical Newspeak. Simply renaming a group of men, some of whom are violent sexual predators, as “transgender women” does not change who they are. Placing some of the most dangerous biological men among us in the midst of a captive audience of women, which some support, has been shown to make prisons a target-rich environment for abuse.

Thus, the effort by the cult of transgenderism to rewrite the lexicon, to interpret definitions out of meaningful existence, and to deny all objective reality, leaves in its wake a long trail of damaged human beings who may not know how their attacker “identifies” that day, but cannot deny they have been violated and devastated.

If there is any citadel that ought to quest for truth, to search for the actual facts, to offer a place where the injured can seek a remedy, it is the courts of law. When the courts adopt the cult of transgenderism, insist on “exhibit[ing] a naivete from which ordinary citizens are free,”² and deny the very existence of objective truth or historical fact, society’s race to the bottom must be near complete.

This case presents a stark reminder of why courts historically grant deference to prison authorities to conduct day-to-day operations. Novel and

² *Dept. of Corrections v. New York*, 588 U.S. 752, 785 (2019).

factually-unrooted theories are of little value there. “Running a prison is an inordinately difficult undertaking which requires expertise, planning, and the commitment of resources, **all of which are peculiarly within the province of the legislative and executive branches of government.**” *Turner v. Safley*, 482 U.S. 78, 84-85 (1987) (emphasis added). This is why this Court has held that even where constitutional rights of prisoners are implicated, “the regulation is valid if it is reasonably related to legitimate penological interests.” *Id.* at 89.

SUMMARY OF ARGUMENT

The Bureau’s policy change is a legitimate penological judgment, well-grounded in scientific, biological and criminological reality. As such, the courts should defer to that judgment and the Bureau is likely to prevail on the merits.

The Biden Administration transgender policies have been eclipsed by exposure of the World Professional Association for Transgender Health (“WPATH”) organization on which they relied as a political, not medical organization. The transgender craze is passing, and science and reason are being restored.

Should the courts defer to the politics of “transgenderism” with respect to hormones and underwear, the courts will be on the slippery slope of determining whether to also meet similar demands for transgender surgery and putting biological men in housing and cells with women. That has been tried in prisons, putting female inmates at substantial risk.

It is difficult to conceive of a worse place to practice social experimentation in the name of a radical ideology than a prison. This *amicus* urges this Court to

reverse the D.C. Circuit, to find that the Bureau is likely to succeed on the merits, since the policy is doubtless “reasonably related to legitimate penological interests,” and to find that the Government has an interest not only in the operation of its laws, but in the protection of the lives and rights of those it has undertaken to incarcerate, which are irreparably harmed by the injunction below.

ARGUMENT

I. THE BUREAU OF PRISONS POLICY CHANGE IS WELL GROUNDED, ALTHOUGH AT VARIANCE WITH THE POLICY PREFERENCES OF THE CIRCUIT COURT PANEL’S MAJORITY.

The D.C. Circuit’s *per curiam* opinion denying the Government’s motion for stay concludes that “Appellants have not shown a strong likelihood of success on the question of whether Program Statement 5260.01 is arbitrary and capricious because the Bureau of Prisons (BOP) did not adequately consider its own experience providing gender-affirming care under its prior policy.” *Kingdom III* at *4. Rather than providing a meaningful discussion of why the Program Statement is “arbitrary and capricious,” it runs together string cites about relying on inappropriate factors, failing to consider important aspects of the problem and ignoring relevant evidence. The single illustration that it provides is that “BOP makes claims about the security impact of providing **gender-affirming care** without addressing whether such issues have occurred.” *Id.* (emphasis added). The very use of the term “gender-affirming care” demonstrates that the panel majority embraces the language of transgenderism. Rather clearly, the panel majority faults the Trump Administration for changing the policies of the Biden Administration, as it

sanctions the district court injunction which preserves Biden Administration policies well almost halfway into the Trump Administration.

In dissent, Judge Walker explains exactly what Biden Administration “gender-affirming care” has done previously, and how it would change:

First, the BOP will no longer provide “sex trait modification surgeries.” Second, the BOP will not start inmates on hormone therapy, and each inmate currently receiving hormones will begin an individualized “tapering plan.” Third, the BOP will no longer provide “social accommodations” like makeup and wigs, and “when practicable,” the BOP will “remove or confiscate the social accommodations” previously provided. [*Id.* at *5-6.]

The Application also explains that BOP no longer would provide “sex-trait-modification surgeries, hormone interventions in general, and social accommodations ... as treatment for gender dysphoria....” and BOP provides the reasons. Application for Stay (“App.”) at 1-2. Disproving the criticism by the D.C. Circuit panel majority, one reason for the change was that those interventions did not reflect the latest scientific information, which had undermined BOP’s prior reliance on the recommendations of WPATH. This *amicus* filed an *amicus* brief in *United States v. Skrametti*, 605 U.S. 495 (2025)³ detailing why WPATH is not a medical organization and cannot be relied upon. Justice Thomas explained at length in his concurring opinion that WPATH is a political and profit-making entity. *See Skrametti* at 537-40, 543-46 (Thomas, J., concurring).

³ See U.S. Supreme Court, No. 23-477, [Brief of Amici Curiae America’s Future, et al.](#) (Oct. 15, 2024)

Unlike the political policy operating during the Biden Administration, the current BOP judgment is well-grounded in basic human biology as understood by nearly all thoughtful people in medicine, science, and laypeople until about 15 years ago. As President Trump put it in his Executive Order 14168, there are “two sexes, male and female. These sexes are not changeable and are grounded in fundamental and incontrovertible reality.” And as Justice Thomas put it in a recent concurrence, “Men and boys with gender dysphoria are not women or girls, even if they believe that they are. Sex is an immutable ‘biological’ characteristic, ... it is binary; and ‘man’ and ‘woman,’ ‘boy’ and ‘girl,’ are the terms that correspond to adults and children of each sex.” *West Virginia v. B.P.J.*, 146 S. Ct. 2356, 2382 (2026) (Thomas, J., concurring). As Justice Thomas noted correctly, “[t]o use language to obscure reality — to show ‘indifference regarding the truth’ — is **to lie to the public** and cease to treat our fellow citizens ‘as equal[s].’” *Id.* (emphasis added). In an earlier and less politicized time, the position of BOP would be a universal truism akin to saying “the sky is blue” or “water is composed of two hydrogen atoms and one oxygen atom.” Unfortunately, the district court and the panel majority embraced a political agenda less respectful of objective truth. For example, referring to the concerns of one of the Plaintiffs, District Judge Lamberth wrote this self-contradictory sentence, “Mr. Nichols states that he is ‘very scared to live without testosterone therapy,’ fearing that he will lose muscle mass and start menstruating again....” *Kingdom I* at *11. “Mr.” Nichols must be a woman. No man in human history has experienced menstruation. The court’s own language betrays the

inescapable scientific reality that “Mr. Nichols” is neither a “Mr.” nor a “he;” but rather, is a “Ms.” and a “she.” When most Americans read such political statements which defy common knowledge in judicial decisions, they lost respect for the federal courts.

The great Russian dissident Aleksandr Solzhenitsyn wrote, “The simple step of a courageous individual is not to take part in the lie.”⁴ The courts below have “lie[d] to the public,” as Justice Thomas put it. This Court should not take part.

The BOP has no general obligation to provide elective medical treatments to prisoners.⁵ Plaintiffs are demanding an exception to that rule by claiming that their feelings or beliefs about themselves — which allow them to assume “transgender status” — give them a specialized legal status, entitling them to expensive elective procedures.

As this Court recognized last year, “[d]isplaying passport holders’ sex at birth no more offends equal protection principles than displaying their country of birth — in both cases, the Government is merely attesting to a historical fact without subjecting anyone to differential treatment.” *Trump v. Orr*, 146 S. Ct. 44, 46 (2025). Indeed, the fact is both historical and scientific.

⁴ Aleksandr Solzhenitsyn, The Gulag Archipelago.

⁵ See, e.g., 28 CFR section 549.50.

As biologists Colin Wright and Emma Hilton note, the division of the human race into two sexes, male and female, is a scientific fact which, like gravity, defies political attempts to redefine reality.

[Some argue that] the categories male and female exist on a “spectrum,” and are therefore no more than “social constructs.” To characterize this line of reasoning as having no basis in reality would be an egregious understatement. It is false at every conceivable scale.... In humans ... an organism’s biological sex corresponds to one of two distinct types of reproductive anatomy that develop for the production of small or large sex cells — sperm and eggs, respectively — and associated biological functions in sexual reproduction.... [R]eproductive anatomy is unambiguously male or female at birth more than 99.98% of the time.... No third type of sex cell exists in humans, and therefore there is no sex “spectrum” or additional sexes beyond male and female. Sex is binary.⁶

As one research scholar writes: “the objective truth is that sex in humans is strictly binary and immutable, for fundamental reasons that are common knowledge to all biologists taking the findings of their discipline seriously. Denying that sex in humans is binary attacks the very foundations of biological sciences.”⁷

As Virginia M. Miller, a professor emerita and former Director of the Women's Health Research Center at the Mayo Clinic, has written, “**Every cell has a sex**, which is determined by the presence of the complement of sex

⁶ Colin Wright and Emma Hilton, “[The Dangerous Denial of Sex](#),” *Wall Street Journal* (Feb. 13, 2020). Colin Wright is an evolutionary biologist at Penn State University; Emma Hilton is a developmental biologist at the University of Manchester.

⁷ Georgi Marinov, “[In humans, sex is binary and immutable](#),” *Academic Questions*, Vol. 33, Issue 2 (Summer 2020). Georgi K. Marinov is Postdoctoral Research Scholar at the Department of Genetics, Stanford University School of Medicine, Stanford, CA.

chromosomes.”⁸ Science has proven that there are “underlying differences in biology of the sexes. This conclusion should not be surprising given that every cell has a sex and cellular function that is influenced by the genome and sex steroid milieu to which the cell is exposed.” *Id*

The American College of Pediatricians has likewise emphasized the biological reality that humanity is scientifically divided into two sexes. As doctors Michael Artigues and Michelle Cretella note,

[s]ex is a dimorphic, innate trait defined in relation to an organism’s biological role in reproduction.... [P]rimary sex determination occurs at fertilization and is directed by a complement of sex determining genes on the X and Y chromosomes.... Consideration of these innate differences is critical to the practice of good medicine and to the development of sound public policy for children and adults alike.⁹

“The National Institutes of Health urges scientists and physicians to include sex as a biological variable in all aspects of healthcare. [T]he reality of sexual dimorphism and its importance to health has been documented for decades.” *Id.*

Pediatricians do not “assign” an infant’s sex; they announce it based upon the physical reality of the infant’s body.... This growing movement to deny the physical reality of sexual dimorphism requires a dangerous dismissal of both science and medical ethics, one that will cause severe harm to individuals and society at large if embraced. [*Id.*]

⁸ Virginia Miller, “[Why are sex and gender important to basic physiology and translational and individualized medicine?](#)” *American Journal of Physiology, Heart and Circulatory Physiology*, vol. 306 (2014) (emphasis added).

⁹ Michael Artigues and Michelle Cretella, “[Sex is a Biological Trait of Medical Significance](#),” American College of Pediatricians (Mar. 2021) (emphasis added).

Scientists do not “assign” to water the property of having two hydrogen atoms and one oxygen atom. They simply recognize the fact that it does. And “[i]nterventions that alter a person’s sexual appearance do not alter the person’s genetic code. Therefore, sex does not change. Administering sex hormones and other drugs ... do not change biological sex.” *Id.*

The “transgender lexicon” is the theater of the absurd. As the Fifth Circuit recently noted, in denying the motion of a male federal prisoner to require prison employees to refer to him by a female name and pronouns:

“[s]ome transgender people may request ... more unfamiliar pronouns, such as ze (pronounced ‘zee’) and hir (pronounced ‘hear’)).” If a court orders one litigant referred to as “her” (instead of “him”), then the court can hardly refuse when the next litigant moves to be referred to as “xemself” (instead of “himself”). Deploying such neologisms could hinder communication among the parties and the court.... When local governments have sought to enforce pronoun usage, they have had to make refined distinctions based on matters such as the types of allowable pronouns and the intent of the “misgendering” offender.... Courts would have to do the same. **We decline to enlist the federal judiciary in this quixotic undertaking.** [*United States v. Varner*, 948 F.3d 250, 257-58 (5th Cir. 2020) (emphasis added).]

Even proponents of the transgender delusion cannot define their own terms. A Texas state representative made the utterly unscientific and utterly false statement that there are “six really common biological sexes.... The point is that biologically speaking, scientifically speaking, sex is a spectrum, and oftentimes can be very ambiguous.”¹⁰ But that’s just the sexes. When it comes to “genders,” we are

¹⁰ Yaron Steinbuch, “[Texas lawmaker sparks backlash for declaring there are six sexes — not two](#),” *New York Post* (Apr. 26, 2021).

now told there are far more — though we are not told exactly how many. In one recent survey, the Trevor Project reported that “LGBTQ youth in the survey identified with more than 100 gender identities.”¹¹ Included in that dizzying, undefined and almost certainly undefinable array were such categories as transfemme, agenderflux, two spirited, demi-boy, neutrois, and trigender. *Id.*

As the BOP notes, the “science” behind the transgender mania has been effectively debunked, with scientists finally beginning to publicly concede the obvious. And it is perhaps little wonder that scientists are now admitting that gender dysphoria rarely occurs alone. It is generally one of many associated mental health co-morbidities that call the basis for the subjective impressions of the patient even more into question. As one example, a recent study in the European Journal of Pediatrics noted that in young people with gender dysphoria, “an over-representation of comorbidities exists, notably mental health disorders and autistic spectrum disorder.”¹² These mental health disorders included “depression..., anxiety..., eating disorder[s].... borderline personality disorder ... and emotionally unstable personality disorder.” *Id.* at 2971. “Anxiety, eating disorders, depression, self-harm and suicidal ideation have been well documented in

¹¹ The Trevor Project, “[National Survey on LGBTQ Youth Mental Health 2019.](#)”

¹² Stephanie McCallion, et al., “[An appraisal of current service delivery and future models of care for young people with gender dysphoria](#),” 180 Eur. J. Pediatr. 2969 (2021).

adolescents and adults with [gender dysphoria]..., with a much higher than the expected prevalence in the general population.” *Id.* at 2973.

II. THE BUREAU OF PRISONS HAS MADE THE LEGITIMATE PENOLOGICAL JUDGMENT THAT IT DOES NOT WISH TO POTENTIALLY INFLICT LIFELONG HARM TO INMATES WITH PSYCHOLOGICAL PROBLEMS UNDER ITS CARE.

At the core of the transgender mania that swept the nation over the past several years is the notion that a person was born in the wrong body, and seeks to have the body of the opposite sex. Reduced to simple terms, this is a mental condition that often drives one to ask physicians to remove healthy tissue (*e.g.*, breasts from women; penises from men) in procedures which are largely or completely irreversible. Fortunately, there is reason to believe this mania has run its course and sanity is returning. As the Bureau notes, surgical and hormone treatments to address a mental health condition are, somewhat intuitively perhaps, “highly controversial, medically disputed, and unproven.” App. at 26. It made the utterly reasonable decision to instead prioritize “the psychotherapeutic model [a]s the most appropriate treatment model.” *Id.* This decision is for the Bureau to make, and it is entirely proper.

The scientific profession is increasingly coming to the realization that ought to be intuitive — cutting off healthy body parts or taking unnatural hormones attempting to fight against nature — are hardly the best ways to address discomfort with one’s sex, and in fact have significant and irreparable physical harms. And those who today seek self-mutilation may tomorrow regret their

decisions. It is not difficult to imagine that the prisoners who today are demanding drastic and unnatural hormone treatments will in the future regret their decision and seek to hold the BOP legally and financially responsible for the “treatment” it provided, much as minors today are seeking to hold to account the physicians and psychiatrists who facilitated their injuries.

In February 2026, Fox Varian won the first jury verdict by a “detransitioner” against the doctor and psychologist who recommended and performed the removal of her healthy breasts at 16 years old, awarding her a \$2 million verdict.¹³ “I was 16, and I was really, really mentally ill, obviously,” Varian testified. “I obviously wasn’t mature enough to make the decision to have surgery, and I certainly wasn’t mature enough to handle the aftermath.” *Id.* Might not a prisoner take this position after receiving the treatment he or she desires?

Chloe Cole also underwent a double mastectomy, at just 15 years old.¹⁴ Cole noted that she **became suicidal after the surgery, not before**. “When my specialist first told my parents that they could have a dead daughter or a live transgender son, I wasn’t suicidal. I was a happy child who struggled because she was different,” she said. “However, at 16, after my surgery, I did become suicidal. I’m doing better now. But my parents almost got the dead daughter promised to

¹³ Madison Columbo, “[Former transgender clinic insider calls \\$2M gender surgery verdict ‘tip of the iceberg,’](#)” *Fox News* (Feb. 3, 2026).

¹⁴ Josh Christenson, “[Detransitioner tells Congress her ‘childhood was ruined’ by gender reassignment,](#)” *New York Post* (July 27, 2023).

them by my doctors.... My doctors had almost created the very nightmare they said they were trying to avoid.” Cole is also suing the physicians who urged her into removing healthy body parts.

Soren Aldaco is a Texas woman who also began hormone treatments at 17 and had a double mastectomy at 19.¹⁵ She too is suing her doctors and counselors:

The procedure was terribly botched. She said that she suffered painful bruising along her ribs, sides and chest. But her surgeons allegedly paid no mind to her concerns. In the complaint, Aldaco detailed how the procedure left “her nipples literally peeling off her chest.” Aldaco finally sought out care from an emergency room, where doctors had to slice open her scars to drain three cups of blood out.... Aldaco said that her doctors acted more like “ideologues” pushing her to transition. [*Id.*]

Often a single surgery is not enough, draining BOP resources even further. In one 2017 study, for “male to female” genital surgeries, more than one-fifth of patients had to undergo **follow-up surgery** due to complications of the unnatural procedure.¹⁶ Among such patients, “rectovaginal fistula (RVF), the abnormal connection between the rectum and vagina, remains a complex and challenging complication, with a reported incidence of 0.8% to 17%. Without effective repair, RVF is associated with substantial morbidity, including the potential loss of the

¹⁵ Sonya Gugliara, “[Texas woman left in agony following botched trans operation says doctors fed her talking points to scam insurers so she could get surgery](#),” *The Guardian* (Feb. 12, 2026).

¹⁶ Paulette Dreher, et al., “[Complications of the neovagina in male-to-female transgender surgery: A systematic review and meta-analysis with discussion of management](#),” 31 *Clinical Anatomy* 191, 194 (Mar. 2018).

vaginal canal.”¹⁷ In another study involving “female to male” surgeries, the statistics were strikingly worse, as 76.5 percent of all surgeries involved follow-up complications.¹⁸

Hormone interventions designed to reverse nature also have documented health risks. One common puberty blocker, Lupron Depot, spreads a laundry list of side effects on its own website. “Some people taking gonadotropin-releasing hormone (GnRH) agonists like LUPRON DEPOT-PED have had new or worsened mental (psychiatric) problems. Mental (psychiatric) problems may include emotional symptoms such as crying, irritability, restlessness (impatience), anger, and acting aggressive.” Other health risks include weight gain, difficulty urinating, seizures, bone loss and fractures, diarrhea, bleeding, nausea and vomiting, fever, impotence, “severe skin reactions that can be life-threatening or fatal,” and “[i]ncreased risk of heart attack, sudden death, and stroke.”¹⁹

¹⁷ Christian Lava, et al., “[Rectovaginal Fistula Repair Following Vaginoplasty in Transgender Females: A Systematic Review of Surgical Techniques](#),” 33 *Plastic Surgery* 149, 150 (2023).

¹⁸ Annie Wang, et al., “[Outcomes Following Gender Affirming Phalloplasty: A Systematic Review and Meta-Analysis](#),” 10 *Sexual Medicine Review* 499 (Oct. 2022).

¹⁹ See “[Prescribing Information](#),” *Lupron.com*.

A recent Swedish study found that “[p]ersons with transsexualism, **after sex reassignment**, have **considerably higher risks for mortality, suicidal behaviour, and psychiatric morbidity** than the general population”²⁰.

The American College of Gynecologists, an organization that openly supports hormonal treatments, nonetheless concedes that the body changes they entail are likely irreversible if the patient has regret and wishes to detransition. “[T]hese medications can help you develop sex characteristics, such as deepening your voice, growing facial hair, developing breasts, changing your body shape. Most of these changes cannot be reversed.”²¹

Needless to say, the psychotherapeutic model carries none of these risks. The Bureau’s decision to avoid “treatments” with such extreme side effects, particularly in the context of mental health effects such as anger and aggression, and potential future liability of the Bureau for harmful treatments, is entirely reasonable.

III. ONCE THE COURTS ADOPT THE TRANSGENDER PREMISE, THERE IS NO LOGICAL LIMIT TO THE DEMANDS THAT WILL BE PLACED ON THE GOVERNMENT.

Plaintiffs below challenge the withholding of hormone therapy and access to undergarments of the opposite sex, but not the surgical restriction or other policies

²⁰ Cecilia Dhejne, et al., [“Long-Term Follow-Up of Transsexual Persons Undergoing Sex Reassignment Surgery: Cohort Study in Sweden,”](#) PLOS One, 2011; 6(2). Affiliation: Department of Clinical Neuroscience, Division of Psychiatry, Karolinska Institutet, Stockholm, Sweden (emphasis added).

²¹ See [“Health Care for Transgender and Nonbinary Teens: Frequently Asked Questions,”](#) ACOG.org (“Hormone Treatments”).

tied to “transgender identification.” However if plaintiffs prevail, the courts will have placed the nation, and the courts, on a slippery slope where every delusional transgender fantasy will be pursued by litigation against the BOP, with American taxpayers paying the bill. If inmates confused or in denial about their sex have a right to cross-sex undergarments and hormones, will not a challenge to surgical intervention be brought days later, based on a new precedent? And after that, courts will be asked to establish a right to housing in cross-sex facilities. Indeed, multiple courts have already faced litigation from male inmates demanding that their “female” identification entitled them to access to female prisons. In one exceedingly recent federal case in Oregon,

the district court ... issued a class-wide preliminary injunction requiring (among other things) that the State of Oregon presumptively assign more than a hundred ‘transgender women’ prison inmates (male inmates who claim to be female) for placement in the only state-run women's prison in Oregon. [*S.D. v. Reese*, 2026 U.S. App. LEXIS 28452 (9th Cir. 2026).]

A Ninth Circuit panel did reverse. *Id.* However, similar cases are legion.²²

Also, cases are legion where male inmates identifying as “transgender females” have sexually assaulted females, before and during their incarceration.

California prisoner Tremaine Carroll demanded a women’s prison due to his

²² See, e.g., *Doe v. Blanche*, 172 F.4th 901 (D.C. Cir. 2026); *Hampton v. Baldwin*, 2018 U.S. Dist. LEXIS 190682 (S.D. Ill. 2018); *Gordon v. Inslee*, 2023 U.S. Dist. LEXIS 63571 (W.D. Wash. 2023); *Halliwell v. Okla. Dep’t of Corr.*, 2025 U.S. Dist. LEXIS 133072 (E.D. Okla. 2025); *Doe v. Mass. Dep’t of Corr.*, 2018 U.S. Dist. LEXIS 99925 (D. Ma. 2018);

“identity” as female. Placed in a cell with a female inmate, he raped her.²³ When she became pregnant, Carroll was given a new female cellmate. He was soon charged with raping her as well. Carroll’s prosecutor highlighted, perhaps accidentally, the transgender construct’s absurdity. “Moreno says the ruling regarding pronouns impacts her ability to prosecute the case.... [I]t’s confusing to the jury. In California, rape is a crime that has to be accomplished by a man,” said Moreno.” *Id.* Bludgeoned by biological reality, California finally transferred Carroll back to a men’s prison.²⁴

In 2021, a New York man, Ramel Blount, who “identified” as “Diamond,” raped a female fellow inmate in a jail shower at Riker’s Island prison.²⁵ In *Sabbats v. Clarke*, 2021 U.S. Dist. LEXIS 232991 (W.D. Va. 2021), Ronald Duncan, “identifying” as “Rachel Sabbats,” demanded housing in a women’s prison while serving a 40-year prison sentence involving object sexual penetration against his wife. Last year, the Eleventh Circuit considered the case of *Bayse v. Ward* (147 F.4th 1304 (11th Cir. 2025)), involving Robert Bayse, who “identified” as “Robbin,” and was serving “two concurrent life sentences after being convicted of rape, aggravated sodomy, and child molestation in 1998.” *Id.* at 1307.

²³ Brianna Willis, “[Pronoun use at center of rape case involving former prisoner in California](#),” *ABC7Chicago.com* (Dec. 23, 2024).

²⁴ Chris Pandolfo & Michael Ruiz, “[3rd-strike ‘trans’ rape suspect prompts rebellion against CA law after attack in women’s prison](#),” *Fox News* (June 3, 2024).

²⁵ Office of the Bronx County District Attorney, “[Rikers Island Inmate Sentenced to 7 Years in Prison for Raping Female Inmate](#),” (Apr. 25, 2022).

In Massachusetts, “[j]ust west of Boston, the state’s MCI–Framingham facility houses at least 11 trans-identified men, including serial rapists, wife-murderers, and child molesters, whose presence imposes degrading and dangerous conditions on female inmates.”²⁶ “Kenneth Hunt, now ‘Katheena Soneeya,’ was convicted of sexually assaulting and murdering two women, including his own cousin, whom he raped with a broom handle and stabbed more than 40 times. Women incarcerated with Hunt describe him as a ‘pervert’; multiple inmates have accused him of sexual assault and harassment....” *Id.*

Illinois’ Logan Correctional Center housed yet another example. “[A] Logan inmate filed a Jane Doe lawsuit ... alleging that [Andre Patterson] had raped her and that she was wrongly punished after reporting the assault to prison staff, who discounted it.”²⁷

More than one Logan inmate has reported being sexually assaulted by Janiah Monroe, known as Andre Patterson by the Illinois Department of Corrections, according to court documents.... Dr. William Puga, head of psychiatry for the Department of Corrections, ... “received information that Monroe threatened staff and other inmates,” U.S. District Court Judge Nancy Rosenstengel wrote in a December injunction. [*Id.*]

²⁶ Forrest Romm and Elspeth Cypher, [“Male Prisoners Are Abusing Incarcerated Women in Massachusetts,”](#) *City Journal* (Apr. 22, 2026).

²⁷ Bruce Rushton, [“Transgender inmate accused of rape,”](#) *Illinois Times* (Feb. 27, 2020).

Despite the multiple sexual assault allegations, including of rape, the office of Governor J.B. Pritzker, an ardent champion of transgenderism, “reportedly overruled a move by corrections officials to return her to a men’s facility.” *Id.*

Recently, the Justice Department announced an investigation into multiple states’ policies of placing men into women’s prisons on the false basis of “transgender identity,” and resulting reports of sexual abuse of actual women by the male prisoners. “In Maine,” the DOJ announced, “the Justice Department will investigate allegations that Maine has allowed a biological male inmate to remain housed with women despite complaints that the male inmate has assaulted or harassed several female inmates.”²⁸

In California, the Justice Department will investigate widely reported allegations of deprivation of female prisoners’ rights, including the First Amendment’s guarantees of freedom of speech and free exercise of religion, the Eighth Amendment’s protection from cruel and unusual punishment, and the Fourteenth Amendment’s Equal Protection Clause. There have been allegations of sexual assaults, rape, voyeurism and a pervasive climate of sexual intimidation due to the presence of males in the women’s prison. [*Id.*]

If the courts jettison reality in favor of the cult of transgenderism, if they accept the notion that a single inmate’s mental health problem can set policy for a nation’s entire correctional system, there is no logical stopping point, no guardrail. If the mental illness gender dysphoria creates constitutional rights, the courts cannot stop at undergarments. Somewhere down the road, the right of predators to

²⁸ U.S. Dep’t. Of Justice, Press Release, “[Justice Department Notifies California and Maine of Investigations into Whether Housing Biological Men in Women’s Prisons Violates Constitution](#),” (Mar. 26, 2026).

a captive audience of prey will inevitably be constitutionalized, as it has already been enshrined in law in states like California and Massachusetts,²⁹ to the lifelong detriment of the actual women in their prisons who are the real victims.

CONCLUSION

For the foregoing reasons, this *amicus* urges this Court to stay the district court's order.

Respectfully submitted,

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²⁹ See, e.g., Massachusetts General Laws ch. 127, § 32A: (“A prisoner of a correctional institution, jail or house of correction that has a gender identity ... that differs from the prisoner's sex assigned at birth, ... shall be... housed in a correctional facility with inmates with the same gender identity”; California Penal Code § 2606(a)(3): (“An individual incarcerated ... who is transgender, nonbinary, or intersex, regardless of anatomy, shall ... [b]e housed at a correctional facility designated for men or women based on the individual's preference”). Indeed, in California, “transgender” prisoners have a special right to choose a prison for the sex of their choice, unlike other prisoners.