

# **Exhibit S**

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MARYLAND**

PFLAG, INC., *et al.*,

*Plaintiffs,*

v.

DONALD J. TRUMP, in his official capacity as  
President of the United States, *et al.*,

*Defendants.*

Civil Action No. BAH-25-337

**DECLARATION OF JANE DOE 5**

I, Jane Doe 5<sup>1</sup>, hereby declare and state and follows:

1. I am over 18 years of age, of sound mind, and in all respects competent to testify.
2. I have personal knowledge of the facts set forth in this declaration and would testify competently to those facts if called to do so.
3. I currently reside in Florida but our family is in the process of relocating to Maryland this Spring and Summer.
4. I am a member of PFLAG.
5. I have two daughters. My older daughter is thirteen years old, and my younger daughter, Janie, is eleven. Janie is transgender. When she was born, Janie was designated male at birth, but she is a girl.
6. When Janie was 18 months old, before she could even talk, Janie would toddle around carrying my purse and other feminine accessories. By the time she was two years old, she

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<sup>1</sup> Jane Doe 5 and Janie are pseudonyms. My family is proceeding under pseudonym to protect our right to privacy and ourselves from discrimination, harassment, and violence, as well as retaliation for seeking to protect our rights.

would tell us repeatedly that she is a girl. In every picture we have of her from when she was a toddler Janie was wearing her sister's clothes, carrying purses and dolls, and expressing herself in a typically feminine manner. She never had any interest in toys or clothes typical of boys.

7. When we spoke with our pediatrician about Janie's feminine expression when Janie was two, he reassured me that it was possible it was a phase or just a normal exploration of different gendered behaviors. I did not know much of anything about transgender children, and my instinct was to just keep steering my daughter back to boys' clothes and haircuts whenever I could.

8. By the time Janie was three, she would insist on wearing her sister's "Elsa" dress to school over her clothes every day. It became a daily fight over clothes. It was a battle to put pants on her, or any typically boy-looking clothing. Everything came back to her insistence that she was a girl. Janie would even draw herself in pictures with little stick figures with long hair. When she was three years old, our pediatrician recognized that this was not just exploration of different gendered behaviors. Janie persisted in identifying as a girl and our pediatrician diagnosed her with gender dysphoria.

9. Then, while in pre-kindergarten at age 4, my daughter started to become more and more withdrawn, and it was clear to the family that this was serious. As we continued to battle over clothes, I started to realize that I was breaking my child's will; she was in serious pain. At that point, we told Janie that she could wear what she wanted more. She would wear boys' clothes to pre-K but then we would have a dress for her to change into in the parking lot as soon as she left school. But she continued to cry and fight me when we would get ready for school.

10. During this time, Janie was also in play therapy. The kids' father and I had divorced and we wanted to make sure that Janie and her sister had someone to talk to. In therapy, Janie would always express herself in dresses and feminine accessories. In therapy she would also

consistently assert that she is a girl.

11. After school in pre-k, things started to get more serious when Janie started to ask when she could go back to heaven so she could be a girl. It was surprising to hear her speaking like this, and I realized that she was in essence asking to die. She would ask why God made a mistake and when she could become a girl.

12. I was so heartbroken and worried. I was not sure how to help my child, and I was worried for her safety in the conservative community where we lived. But I could not just ignore it. Janie was not doing well in school. She was withdrawn and increasingly unrecognizable.

13. As things were escalating with Janie, my sister sent me a documentary about a young trans girl and the family's experience coming to terms with the fact that their daughter is transgender. So much in the documentary resonated for me. At that point, I knew I had to educate myself. I read every book that I could get my hands on. We decided to let Janie grow out her hair and start to wear clothes she felt comfortable in to school. At that time in pre-K, she was still going by her birth name but would try on different names outside of school to see what fit before eventually settling on her current name.

14. When Janie was around five years old at the end of 2018 or beginning of 2019, our pediatrician referred us to the gender clinic at University of Alabama at Birmingham. At the clinic, the providers confirmed Janie's diagnosis of gender dysphoria that her pediatrician had made two years prior. Because Janie was a long way from puberty, they recommended that we recognize her as a girl through her name, pronoun, hair, and dress and monitor for puberty in the future.

15. We then went to the University of Florida in Feb of 2019, because we wanted a second expert opinion. It was a four-hour car ride to UF each way, but we were in search of clarity and the best possible care. There, we met with an endocrinologist, a psychologist, and a whole

team. The psychologist again confirmed Janie's diagnosis of gender dysphoria and also recommended that we recognize Janie as a girl and monitor for signs of puberty in the future.

16. After the two visits with the two clinics, we decided it was essential for Janie to fully socially transition before starting kindergarten. She changed her name, grew out her hair, wore typical girls' clothes and we started to work with the school so she could start kindergarten as her true self.

17. The difference between Janie on the first day of pre-K and then after she could go to school as herself was night and day. It was like it was a different child. Not only was she happier and more energetic, but her assessment scores were through the roof. She had previously been testing below kindergarten readiness, and then was excelling three months later once she was allowed to socially transition. What changed was that she got to be herself. At that point, all the nightly talk of going back to heaven immediately stopped. The behavioral problems that she was struggling with in pre-K immediately stopped.

18. After she fully socially transitioned, Janie continued therapy so she would have a place to explore her feelings, her gender and other things that she was grappling with. We also chose to continue care at the University of Florida because even though it was an eight-hour round trip excursion for our family, it was still closer than University of Alabama and we wanted to stay in our home state for care. Though there was no medical intervention appropriate at that time, throughout Janie's early elementary school years, we had regular yearly check-ups with our endocrinologist at the University of Florida to just check-in on how Janie was doing and feeling. We would also meet with the full team, which included not only our endocrinologist but the psychologist and patient advocate as well.

19. Though Janie's elementary school was very supportive, some kids who had gone

to pre-K with Janie knew that she had transitioned. Those kids would regularly bully her and relentlessly harass her. The bullying caused Janie to experience significant anxiety at school and at home.

20. When her classmates would say to Janie “we know you used to be a boy,” she would respond with an elaborate story she made up about how she had not been a boy but that was her twin brother that they were thinking of, and he had died of a lung problem. Her story was so involved and specific – she was working so hard to be free of her past and just live as a girl without harassment.

21. When Janie was in fourth grade, we decided to switch schools and move her to a school where no one knew her before her transition. At her current school, no one is aware that Janie is trans except for the principal and a few other people in the administration. Janie wanted to stay “stealth” – meaning, not be out as transgender to others – for her safety. All she wants is to be a kid and live as the girl she is.

22. During fourth grade, Janie also began to grow more anxious about puberty. The thought of developing typically male physical characteristics is unimaginable to Janie who has known and insisted that she is a girl since she was two years old. In fourth grade, Janie’s doctors started to conduct baseline blood tests to monitor for signs of puberty.

23. In 2023, the state of Florida passed a ban on gender-affirming medical care for transgender adolescents. We started to panic because if the new law stayed in effect, it would mean that Janie could not receive medical treatment at the University of Florida if she needed to begin puberty blockers. I called doctors up and down the east coast, including ones at New York University, Mt. Sinai in New York, and Johns Hopkins in Maryland. We ultimately decided to establish care at Children’s National in Washington DC. We flew to DC and met with the doctors,

got blood work, and established Janie as a patient. It was scary to know that my daughter was on the cusp of puberty, anxious about the possibility of developing typical male features when no one knew she was transgender, and then we had to travel hundreds of miles from our home to get care.

24. Around this time in 2023, Janie also began to experience devastating sleep disruptions from anxiety. She would become terrified at night and unable to fall asleep. She began to sleep with me in my bedroom.

25. Our family was lucky and for a brief period in May of 2024, the Florida ban on health care was blocked in court. Though it went back into effect shortly after it was first blocked, Janie was able to get her puberty blocker implant in the window the law was not in effect. In March or April of 2024, blood work confirmed that Janie had entered puberty and would need a puberty blocker implant to prevent her body from developing as a man. Before Janie was prescribed the puberty blocker, we spoke extensively with the doctors about the potential side effects of treatment. Not only did we have those conversations in the visit prior to her receiving the implant, but we had basically gone through the conversations in each prior visit. The visit with the University of Florida team before receiving the implant was over two hours, and we went through the most extensive consent form I have ever seen in my life (and I am a lawyer so that is saying something). Our endocrinologist sat with me and Janie and went through each of the seemingly thirty pages to make sure we understood every possible side effect. Janie was also given a Vitamin D supplement and had a bone density scan. We discussed everything as a family and with the medical team and all agreed that the benefits way outweighed the risks.

26. On the day her blocker was implanted, Janie was ecstatic. She FaceTimed her best friend while she was being wheeled back for the short procedure and was beaming. When we got home that night it was clear that an enormous weight had been lifted. She went back to sleeping in

her room with no problem that night after a year of nightly crises around sleep. It was so clear to me at that point that the sleeplessness was just a manifestation of her extreme anxiety about impending puberty. It was like she was being tortured inside.

27. Prior to January 20, 2025, I felt that we had figured out a way to best protect my daughter. She had her puberty blocker implant. We were moving to Maryland where she could attend supportive schools and access medical care at Children's National Hospital in Washington, D.C.

28. Then, on January 28th everything changed. President Trump signed the Executive Order entitled "Protecting Children from Chemical and Surgical Mutilation" (the "Executive Order"). Shortly after the Executive Order was issued, I heard that Children's National Hospital would be shutting down care and not prescribing puberty blockers or hormone therapy to patients under 19. Our plans were thrown into disarray. Janie has an implant in her arm currently that she will need removed and replaced by May.

29. I spoke with our doctor at the University of Florida who referred us to Children's Hospital Los Angeles. Our doctor even personally spoke to the doctor at the Los Angeles Clinic and we were able to get an appointment for March 18, 2025 in Los Angeles.

30. The day after we got the appointment in Los Angeles, we heard that the clinic there was pausing taking on and seeing new patients as a result of the Executive Order. I have tried to contact the hospital, the clinic, the case managers, and everyone I could to try to find out what we should do now. No one has responded to my many requests.

31. At this point we are in limbo, and I feel like I am having a 24-hour a day anxiety attack. I am having trouble working or focusing on anything. All I want is to protect my daughter and get her the health care that she needs. I am trying to shield Janie from this as much as I can



but the other day she asked me, "Why do people hate me so much?"

32. All my daughter wants is to be a kid and live her life. She is such a magical and vivacious child who people can't help but fall in love with. I know with everything inside of me, that my daughter's puberty blockers saved her life and are continuing to save her life. I will do whatever it takes to protect my child. We have started to look at care options out of the United States. I cannot believe it has come to this but losing this treatment could mean losing my child and that is not an option I am willing to entertain.

I declare under penalty of perjury that the foregoing is true to the best of my knowledge and belief.

Dated this 11<sup>th</sup> day of February 2025.

Jane Doe 5

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