

# **Exhibit B**

**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.

**DECLARATION OF BRUCE BOE**

I, Bruce Boe,<sup>1</sup> pursuant to 28 U.S.C. § 1746, declare as follows:

1. My name is Bruce Boe. I offer this Declaration in support of Plaintiffs' Motion for Preliminary Injunction. I am over 18 years old, have personal knowledge of the facts set forth in this Declaration, and would testify competently to those facts if called as a witness.

2. I am a Plaintiff in this action. I am bringing claims on behalf of myself and as the parent and next friend of my daughter, Bella Boe.

3. I live in New York City with my spouse and my daughter, Bella Boe, who is 12 years old and in seventh grade.

4. We are members of PFLAG.

5. My daughter, Bella Boe, is a strong, artistic, and happy child. Her favorite subjects in school are Social Studies and Spanish. She particularly loves drawing cityscapes and designing clothing. She has wonderful friends, including a group of friends she has had since kindergarten.

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<sup>1</sup> Bruce Boe and Bella Boe 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.

6. Bella is transgender. She was assigned a male sex at birth, but since she was a toddler she has expressed her gender differently than most boys. She would tell us that she did not want to have a beard or body hair when she grew up, and that she wanted long hair instead. We tried to raise her in a way where she could lead with her own interests. She always identified with female heroes and characters: her Moana doll was her partner in crime. Bella would take female action figures and put them in her toy firetruck. She gravitated toward close friendships with girls. She loved purple, My Little Pony, and purses she made from laminated paper. From a very young age, she gravitated to music by female singers like Adele and Lady Gaga. In pre-K, when asked what she wanted to be when she grew up, she said, “a princess.” We tried not to impose gender expectations on Bella about what boys or girls should like or look like, and did not associate her gender non-conforming behavior with being trans. We thought that she might eventually grow up to be gay or queer in some way.

7. Bella has been in therapy since she was four years old. She has a growth condition that requires consistent monitoring, including of her bone age, and for which she takes growth hormone.

8. In 5<sup>th</sup> and 6<sup>th</sup> grade, Bella had a very distinct style and particular idea of how she wanted to look. She was wearing boys’ clothes, but in all black or neutral colors, with a bit of an edgy style. In sixth grade, she asked to dye her hair blue, and we let her. She told us that she was not like the other boys in her grade: she didn’t want to dress like them, in sweatpants and sports jerseys. She stopped picking clothes from the boys’ sections of stores, and started to pick out girls’ clothing, but in more muted colors. She then asked if she could start wearing rompers, which she decorated with pins. She didn’t feel safe wearing girls’ clothes to school, but she would wear them at home or out in the city. In sixth grade, she started going to GSA meetings at school to meet

other kids and learn more about different kinds of LGBTQ people. We had already taught her about different kinds of families at home, including families that might have two dads or two moms, so she was already familiar with the vocabulary of people being gay, trans, or nonbinary. It was wonderful for her to be with other kids who were gender non-conforming in some way, and she felt very welcomed by the teacher who advised the club. It seemed like the GSA helped her understand how she might fit in the world.

9. Other than the GSA, the school at large was not accepting of Bella being different. Early in 6<sup>th</sup> grade Bella got singled out for her blue hair. Older kids called her names in the streets and hallways. On one occasion, she was followed home from school and surrounded in the street by older kids, who took photographs of her and touched her. She had to call the police to get them to let her go. This event terrified her and made her feel unsafe walking to and from school and in the hallways.

10. In February 2024, when she was 11 years old and still in sixth grade, Bella asked that we try using they/them pronouns at home. But she wanted to wait until seventh grade to start using new pronouns at school, because sixth grade had been very hard for her. Kids at school were using the word “zesty”, which she didn’t understand, until one of them explained it was an insult meaning gay or flamboyant. She just came home and cried. It was one of her lowest moments. She realized that she couldn’t wear girls’ clothes to that school because it was not a welcoming community for LGBTQ people. She started to tell us that it just wasn’t worth it, that she wasn’t worth it, and talked about wanting to stay in the closet entirely about her gender.

11. In the last few months of sixth grade, things got worse in terms of bullying. Kids would follow her and call her slurs in the hallway and in the streets. One kid grabbed her, called her trans, and told her to kill herself. Bella started missing school, and we had to keep her home

because of her fear. Bella was already in therapy, but she also started seeing a psychiatrist for medication to help with depression and anxiety related to bullying. Bella is a very conscientious student: she has exceptional grades and is a smart kid who takes school very seriously. For her to start missing school was a huge red flag. When it became clear that the school would not take steps to protect her, we requested and received a safety transfer to a different school for the very end of sixth grade. Being a new environment really helped her.

12. Bella's new school has been a wonderful place for her. I have seen how her ability to be herself at school has dramatically improved her wellbeing. The first Friday at her new school, there was a dance that she went to with two friends. She was glowing: she wore her romper and could be herself and not afraid to dance with her friends.

13. That summer in 2024, when she was turning 12, we were on vacation on Long Island, and she saw a beautiful sundress in a shop. She loved it, and listened while the storekeeper, who was an older woman, told her all about how she could wear the dress and then pass it on to someone else when she outgrew it. That was the most feminine thing she had ever asked to wear, and she wore it the entire vacation. While we were away, or shortly after we got home, she told us that she felt that she was a transgender girl. My first reaction was, "There's no rush. You have time to figure it out. Let's just sit with it." But it became really clear that's who she felt she was. She also asked if she could take medication to stop going through puberty. We told her that the first step was just getting her more dresses that she felt comfortable wearing. We supported her by taking her shopping and got her a whole new wardrobe. After that point, she started wearing dresses almost every day. She also felt uncomfortable with her genitals, so we found her underwear with padding that she felt more comfortable in. We noticed an immediate response: she started admiring herself in the mirror and feeling beautiful and confident. She was finally able to wear

leggings or pants. I don't know that I would have fully understood Bella's experience if I hadn't seen her joy and how much these small affirming things meant to her.

14. That summer, we stopped using they/them pronouns for Bella and started using she/her. She also eventually decided that she wanted to go by the name "Bella," in part because her birth name is typically used by boys. Before the start of seventh grade, in the fall of 2024, we told her school as well. We also let her pierce her ears, and she loves wearing pretty flower studs.

15. Although Bella told us over the summer that she wanted to see a doctor about stopping male puberty, I did not take any steps at that point because I wanted to see if it came up again. But after a few weeks, and definitely by the fall, it became very apparent that she was fully herself as a girl, and that was the future she saw for herself. Bella was already seeing an endocrinologist at NYU Langone for a growth condition, and that monitoring included regular exams for puberty. She had already started Tanner II and was approaching Tanner III, so puberty was very clearly happening. I could tell that she was uncomfortable with her changing body, but she had a hard time telling us why. Her existing endocrinologist referred us to the Transgender Youth Health Program at NYU Langone Health.

16. An adolescent medicine specialist diagnosed Bella with gender dysphoria in November 2024. In addition to our own research, we had two doctors visits at the gender clinic, one in November 2024 and the other in January 2025.

17. At the first appointment, the doctor talked to Bella about her feelings. Bella explained that she did not like her genitals: they made her uncomfortable, especially because they were growing. She also described other things that gave her dysphoria, like the idea of getting a beard, or a boxy body and face, or a deep voice. The doctor explained how puberty blockers work, including that they are really about pausing puberty and buying time to decide whether Bella

wanted to go through boy puberty or girl puberty in the long run. The doctor addressed our concerns, explained about potential risks to bone health, and the need for monitoring and x-rays for bone density. Bella already has bone age scans because of her growth condition, and she was already taking calcium supplements. We covered very similar topics in great depth at the second appointment a few months later. The doctors asked extensive questions about what Bella wanted and made sure to explain how the puberty blockers work, including that they do not do anything except temporarily pause puberty.

18. Because Bella already had been at the same therapy practice since she was a toddler, her provider was able to evaluate her mental health for puberty blockers.

19. At first, I was not confident about puberty blockers being right for Bella. But as I saw how she was blooming in her social transition, and the more I learned from her doctors, I realized it was the right choice for Bella. It felt like a big decision, and I took it very seriously. We did not want to rush any important medical decisions. After much discussion and consultation as a family and with Bella's doctor and therapist, we understood that this was an option that we and Bella wanted to pursue, to give her time.

20. We proceeded with submitting the relevant paperwork to our insurance company, which approved it. We then scheduled an intake with the appropriate unit at NYU so that we could make an appointment for the puberty-blocking implant. Bella has been seeing various providers at NYU since she was a year old, and we wanted to continue her long history of care there with providers we trust and who know Bella.

21. Because Bella was in a more supportive school, felt seen as a girl, and knew that we were working toward pausing male puberty, her mental health improved. She had been seeing her therapist twice a week because of all the depression and anxiety, but in December we started

talking about going to one day a week. Bella was on the upswing, and we wanted her to be able to pick up another after school activity while also continuing to have support around depression, anxiety, and her gender.

22. On January 28, 2025, my spouse and I called NYU, and they initially refused to schedule an intake appointment. Even after we explained that our insurance had already approved the implant and that the NYU unit was in network, they told us they were reevaluating their policies on gender-affirming medical care because of “the new administration” – which they confirmed meant the new president of the United States. Later that day, the NYU unit scheduled an intake appointment for Bella for 9:00 am on January 29, 2025. They did not explain why they had changed their mind.

23. On the night of January 28, 2025, the White House issued an Executive Order entitled “Protecting Children from Chemical and Surgical Mutilation” (“Executive Order”).

24. On the morning of January 29, 2025, we took Bella to the appointment, where the clinician explained the procedure, and the staff told us they would schedule the implant for potentially the next day.

25. But as the day progressed and we did not see an appointment scheduled, I called NYU, which told me that they had shut down all new procedures and prescriptions related to gender-affirming medical care for patients under 19 because of the Executive Order.

26. Bella has already started puberty. Without a puberty blocker, I am scared Bella will experience distress and anxiety, and I am terrified that the positive changes I have seen in her mental health since switching schools will be reversed.

27. When I told Bella that NYU had canceled all future appointments related to gender-affirming care for patients under age 19, Bella was fearful, worried, and depressed. The change in



her mental health reminded me of the worst weeks of bullying at her old school: she was distraught and withdrawing from her life. She is scared about what she might look like in the future if she is unable to get the care that she needs because she is scared to look like a boy. Being forced to undergo masculine puberty and having facial or body hair would make her feel different, isolated, and like a person she does not want to be, and she would not feel like herself. It would undermine all the progress that we have made with Bella's social transition. Because of her stress about not getting the puberty blocker, we are keeping her in therapy twice a week.

28. I am devastated that the White House has sought to prevent my child from accessing the health care that will allow her to continue to be healthy and her authentic self. Before the Executive Order, we were confident that we would be able to secure the care that Bella needs. But because the Executive Order has caused NYU and other providers to halt the provision of this care, we are scared that we have no way of getting Bella the care she requires. We have been making calls all around New York to try to find a provider for her. Bella has missed school as we have been scrambling to find a doctor who will treat her before she starts to experience irreversible changes from male puberty. We found one doctor who may be willing to give her some medication that can block testosterone, but not the long-acting puberty blocker that we still want Bella to receive.

29. Bella's health and safety are more important to me than anything else. As her father, I have been managing complex medical decisions for her since she was a baby: she has other health conditions, including endocrine ones, that require monitoring, medication, and balancing the risks, benefits, and alternatives. But for her gender dysphoria, because of the Executive Order, I can no longer play that role and do my job as her parent.

30. I have watched Bella bloom into a happy and creative young person when she is supported as a transgender girl, and I am scared that she will regress and become depressed again if she cannot access the care she needs now. Bella has been through a lot in her life, but she demonstrated incredible resilience. She is brave and so strong. I do not want to see her prevented from accessing the medical care that helps her be who she is.

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

Dated this 11 day of February 2025.

A handwritten signature in black ink that reads "Bruce Boe". The signature is written in a cursive, flowing style. Below the signature is a solid horizontal line.

Bruce Boe