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11 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
12 **COUNTY OF SAN DIEGO**

13 A.A., B.B., C.C., and D.D., by and through their
14 Guardians ad Litem, individually and on behalf
of all others similarly situated,

15 Plaintiffs,

16 vs.

17 RADY CHILDREN'S HEALTH, a California
nonprofit public benefit corporation; RADY
18 CHILDREN'S HOSPITAL AND HEALTH
CENTER, a California nonprofit public benefit
19 corporation; RADY CHILDREN'S
HOSPITAL—SAN DIEGO, a California
20 nonprofit public benefit corporation;
CHILDREN'S HEALTHCARE OF
21 CALIFORNIA, a California nonprofit public
benefit corporation; and CHILDREN'S
22 HOSPITAL OF ORANGE COUNTY, a
California nonprofit public benefit corporation;
23 CHILDREN'S HOSPITAL AT MISSION, a
California nonprofit public benefit corporation;
24 and DOES 1–10.

25 Defendants.

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SAN DIEGO COUNTY, CA

Case No.

CLASS ACTION **26CU014680C**

**COMPLAINT FOR INJUNCTIVE AND
DECLARATORY RELIEF AND DAMAGES**

1. Unruh Civil Rights Act, Civ. Code § 51 et seq. (sex discrimination)
2. Unruh Civil Rights Act, Civ. Code § 51 et seq. (disability discrimination)
3. Gov. Code § 11135 et seq. (sex discrimination)
4. Gov. Code § 11135 et seq. (disability discrimination)

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Introduction

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2 1. For approximately 14 years, Defendants Rady Children’s Health, including
3 Defendant subsidiaries Rady Children’s Hospital, Children’s Hospital of Orange County, and
4 Children’s Hospital at Mission (collectively, “Rady Children’s Health”) have provided gender-
5 affirming care to adolescents throughout Southern California. This care is well-established in the
6 medical community and expressly protected under California law. As California’s largest pediatric
7 healthcare system, Defendants were providing this care for approximately 1,900 patients as of
8 December 2025.

9 2. On January 20, 2026, Rady Children’s Health abruptly announced the decision to
10 stop providing gender-affirming care to transgender adolescents and young adults. The
11 announcement left Plaintiffs and nearly 1,900 other patients scrambling to find essential medical
12 care.

13 3. Although Rady Children’s Health did not provide patients notice of a final date it
14 would provide gender-affirming care, public reports stated that Rady would end these services on
15 February 6, 2026, just 17 days after Rady’s announcement.

16 4. Defendants’ termination of this medical care unlawfully discriminates against
17 transgender people in violation of California law and will cause serious harm to thousands of
18 young people and their families. By singling out transgender patients and terminating their
19 medically necessary care without consent or concern for their physical and mental health,
20 Defendants have discriminated against Plaintiffs on the basis of their sex, gender identity, and
21 disability in violation of the Unruh Civil Rights Act and Government Code section 11135.
22 Defendants’ actions will cause grave harm to the thousands of young adults and their families
23 throughout Southern California who rely on Rady Children’s Health for this care. Without access
24 to gender-affirming care, transgender youth face significantly increased risks of depression,
25 anxiety, and suicidality and, if unable to find care elsewhere, could experience permanent physical
26 changes that make subsequent treatment more difficult.

1 8. Plaintiff B.B. (“B.B.”) is a minor currently under the age of 18 who has been
2 receiving gender-affirming care at Rady Children’s Hospital in San Diego, and is proceeding
3 through their parent and guardian ad litem, Parent B.B. Plaintiff B.B. has been diagnosed with
4 gender dysphoria. Without continued gender-affirming care, B.B. will experience known and
5 foreseeable harm, including exacerbation of their gender dysphoria, emotional harm, and physical
6 changes that could complicate subsequent medical care.

7 9. Plaintiff C.C. (“C.C.”) is a minor currently under the age of 18 who has been
8 receiving gender-affirming care at Rady Children’s Hospital in San Diego, and is proceeding
9 through their parent and guardian ad litem, Parent C.C. Plaintiff C.C. has been diagnosed with
10 gender dysphoria. Without continued gender-affirming care, C.C. will experience known and
11 foreseeable harm, including exacerbation of their gender dysphoria, emotional harm, and physical
12 changes that could complicate subsequent medical care.

13 10. Plaintiff D.D. (“D.D.”) is a minor currently under the age of 18 who has been
14 receiving gender-affirming care at Rady Children’s Hospital in San Diego, and is proceeding
15 through their parent and guardian ad litem, Parent D.D. Plaintiff D.D. has been diagnosed with
16 gender dysphoria. Without continued gender-affirming care, D.D. will experience known and
17 foreseeable harm, including exacerbation of their gender dysphoria, emotional harm, and physical
18 changes that could complicate subsequent medical care.

19 11. Defendant Rady Children’s Health is a parent entity which was created following
20 the merger between Rady Children’s Hospital and Health Center and Children’s HealthCare of
21 California, effective January 2025.

22 12. Defendant Rady Children’s Health includes Defendant subsidiaries Rady Children’s
23 Hospital—San Diego, Children’s Hospital of Orange County, and Children’s Hospital at Mission.

24 13. Defendant Rady Children’s Health’s principal place of business is located at 3020
25 Children’s Way, San Diego, California.

26 14. Defendant Rady Children’s Health is a business establishment that offers
27 accommodations, advantages, facilities, privileges, and services to the public.

28

1 22. Gender dysphoria is the medical diagnosis for the distress and discomfort that a
2 transgender person experiences if they cannot live in a different sex than their birth sex.

3 23. The criteria for a diagnosis of gender dysphoria, both in children and adolescents,
4 are set forth in the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental
5 Disorders (DSM-5).

6 24. Gender dysphoria is a serious medical condition, but is highly treatable through an
7 established course of medical care, often referred to as “gender-affirming care” or “gender
8 transition.” The medically accepted treatment for gender dysphoria is to enable a transgender
9 person to live in a sex different from their birth sex.

10 25. California law defines gender-affirming health care as “medically necessary health
11 care that respects the gender identity of the patient, as experienced and defined by the patient, and
12 may include, but is not limited to, the following: (i) Interventions to suppress the development of
13 endogenous secondary sex characteristics. (ii) Interventions to align the patient’s appearance or
14 physical body with the patient’s gender identity. (iii) Interventions to alleviate symptoms of
15 clinically significant distress resulting from gender dysphoria, as defined in the Diagnostic and
16 Statistical Manual of Mental Disorders, 5th Edition.” Civil Code § 1798.300; Welf. & Inst. Code
17 § 16010.2.

18 26. Without treatment, gender dysphoria can cause serious physical and psychological
19 harms, including anxiety, depression, distress, self-harm, and, in some cases, suicidality, and can
20 substantially interfere with a young person’s ability to function at home, in school, and in social
21 settings.

22 27. Gender-affirming care is vital and often life-saving medical care for Plaintiffs and
23 other similarly situated transgender adolescents.

24 28. The medical and scientific communities recognize well-established protocols for
25 treating gender dysphoria through gender-affirming care. These protocols are endorsed by the
26 major medical and mental health associations in the United States, including but not limited to the
27 American Medical Association, the American Academy of Pediatrics, the American Psychiatric
28

1 Association, the American Psychological Association, the American Association of Child and
2 Adolescent Psychiatrists, the Endocrine Society, and the Pediatric Endocrine Society.

3 29. The treatment for gender dysphoria for any particular patient depends on an
4 individualized assessment of the patient's health condition and medical needs.

5 30. For transgender children experiencing gender dysphoria before the onset of puberty,
6 the only recommended intervention is social transition. For transgender boys, this means living as a
7 boy; for transgender girls, it means living as a girl. Social transition may include using a different
8 name, pronouns, hairstyle, or clothing.

9 31. Transgender adolescents often experience worsening gender dysphoria as they begin
10 to experience physical changes associated with puberty. Puberty-blocking medication may become
11 medically necessary when a transgender adolescent begins puberty to minimize or prevent the
12 exacerbation of gender dysphoria that allowing birth sex puberty to continue would cause.

13 32. For older transgender adolescents and young adults, hormone therapy may also be
14 medically necessary to alleviate their gender dysphoria and facilitate gender transition.

15 33. Under accepted protocols, physicians do not prescribe puberty-blocking medications
16 or hormones to adolescent minors unless they have obtained informed consent from the minor and
17 the minor's parent or guardian.

18 34. California law prohibits health insurance discrimination based on gender identity or
19 a diagnosis of gender dysphoria, and requires insurers to cover gender-affirming care without
20 categorical exclusions. Ins. Code § 10144.5; Health & Safety Code § 1367.21; Cal. Code Regs., tit.
21 10, § 2561.2.

22 35. California law expressly protects the provision of and access to gender-affirming
23 care as "rights secured by the Constitution and laws of California" and declares that any
24 "interference with these rights, whether or not under the color of law, is against the public policy of
25 California." Civ. Code §§ 1798.301–302. California has enacted multiple statutes safeguarding
26 patients and providers involved in these "sensitive services." *See, e.g.*, Civ. Code §§ 56–56.37,
27 56.108 & 56.109.

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1 **B. Rady Children’s Health’s Gender-Affirming Care Program**

2 36. Rady Children’s Health is one of the nation’s top ten children’s hospitals and is the
3 largest pediatric health system in California, providing care to hundreds of thousands of children in
4 Southern California. It includes three subsidiary hospitals, two of which are Level 1 pediatric
5 trauma centers, and primary care and specialty care clinics in six counties. Its mission is to advance
6 children’s health through “leading-edge research, innovative treatments and compassionate care.”

7 37. The hospitals which are now governed by the parent entity Rady Children’s Health
8 have together provided gender-affirming medical care services for approximately 14 years. As of
9 December 2025, Rady Children’s Health provided gender-affirming medical services to about
10 1,900 patients. These services primarily include the provision of puberty blockers, hormone
11 therapy, and other supportive care through a multi-disciplinary approach. As California’s largest
12 pediatric health system, Rady Children’s Health is well-positioned to provide coordinated care that
13 integrates specialty services, inpatient resources, and ambulatory care for pediatric patients with
14 gender dysphoria.

15 38. Rady Children’s Health is the primary provider of gender-affirming medical care
16 services in Orange County and San Diego County. It is often the first place where adolescents in
17 these and surrounding counties are referred to start treatment for gender dysphoria.

18 **C. Rady Children’s Health’s Termination of Gender-Affirming Care**

19 39. On or around January 20, 2026, Rady Children’s Health sent the following notice to
20 Plaintiffs and other patients through their online patient portals:

21 Due to recent federal actions, we will no longer be able to provide gender-affirming
22 medications and procedures. We continue to provide supportive care, including counseling,
23 and mental health services.

24 We understand this news is upsetting, and we want you to know you are not alone. Your
25 dignity and well-being matters deeply to us.

26 Please reach out to your care team/provider with questions about your care. We anticipate a
27 high volume of calls, so our turnaround time may be slower than normal.

28 **If you or your child is in crisis:** Please call 911 or visit your nearest emergency
department. You can also reach the San Diego Access and Crisis Line at 1-888-724-7240.
Additional community resources are available here [hyperlink not available].

1 40. On information and belief, Defendants did not post a notice about this planned
2 elimination of gender-affirming medications and care at Rady Children’s Health facilities or
3 websites, or in any newspaper. Nor did Rady Children’s Health or any of its affiliates or
4 subsidiaries notify the Department of Public Health, Defendants’ contracted Medi-Cal managed
5 care plans, the San Diego and Orange County Boards of Supervisors, or the San Diego or City of
6 Orange City Councils of the change—as required by Health and Safety Code section 1255.25,
7 subdivisions (a) and (b).

8 41. Plaintiffs are among approximately 1,900 families whose children receive gender-
9 affirming care at Rady Children’s Health facilities. As a result of Defendants’ plans to terminate
10 gender-affirming care, Plaintiffs A.A., B.B., C.C., and D.D. are at serious risk of exacerbation of
11 gender dysphoria and the physical, psychological, and emotional harms resulting from lack of
12 necessary medical treatment.

13 42. Plaintiff A.A. began receiving gender-affirming care at Rady Children’s Hospital in
14 2025. A.A. was scheduled for an appointment to consult on receiving puberty blocking medication
15 in January 2026. However, Rady let Parent A.A know that they could no longer provide medication
16 to A.A. That same day, Rady informed Parent A.A. that this was due to Rady’s termination of
17 gender-affirming care for minors. Without access to puberty blocking medication, A.A. will
18 experience puberty that is contrary to their gender identity and that is likely to exacerbate their
19 gender dysphoria. A.A.’s family has gone to great lengths to obtain necessary medical treatment for
20 A.A., including moving to California where access to care is protected. While A.A. has been
21 thriving, A.A. will be at risk of heightened gender dysphoria and serious negative mental and
22 physical health consequences if A.A. cannot access care. To date, Parent A.A. has not been able to
23 find an alternative treatment provider in San Diego.

24 43. Plaintiff B.B. began receiving gender-affirming care at Rady Children’s Hospital in
25 2025. B.B. was scheduled for an appointment to receive puberty blocking medication in
26 March 2026. Rady cancelled that appointment and informed Parent B.B. that Rady would not
27 provide the medication to B.B. due to Rady’s termination of gender-affirming care. B.B. has been
28 prescribed puberty blocking medication and requires monitoring appointments. Before receiving

1 gender-affirming care, B.B. experienced significant mental health symptoms, including depression
2 and anxiety, which improved significantly after receiving gender-affirming care. Any interruption
3 in that care will cause B.B. severe distress. B.B. fears being forced to detransition, losing access to
4 close monitoring and necessary medication adjustments, and being cut off from trusted health care
5 providers. The uncertainty about being unable to obtain care has already led to heightened anxiety,
6 fear, and emotional strain. Following the issuance of the temporary restraining order requiring
7 Rady to continue providing gender-affirming care, Parent B.B. has attempted to make an
8 appointment at Rady for B.B. and has been unable to do so. B.B. is increasingly worried that they
9 will not be able to get an appointment while the temporary restraining order is in place, and that
10 they will not be able to find necessary care in their area.

11 44. Plaintiff C.C. began receiving gender-affirming care at Rady Children's Hospital in
12 2023. C.C. receives puberty blocking medication through an implant, which requires monitoring
13 and follow-up appointments. C.C. also plans to begin hormone medication within the next six
14 months, which will allow C.C. to experience puberty along with their peers. C.C. was due for an
15 appointment with one of their providers at Rady in February 2026 to monitor how the implant is
16 working and to decide the appropriate course of the hormone medications. However, Rady
17 informed C.C. that they were no longer providing gender-affirming care and did not provide any
18 referrals or recommendations. Parent C.C. reached out to multiple doctors in their area and was not
19 able to find one in their city that can provide C.C. care. The only doctors Parent C.C. has been able
20 to identify that may treat C.C. are in a city about 100 miles away from C.C. Following the issuance
21 of the temporary restraining order requiring Rady to continue providing gender-affirming care,
22 Parent C.C. has attempted to reschedule the February appointment at Rady for C.C. and has been
23 unable to do so. C.C. is increasingly worried that they will not be able to get necessary
24 appointments to ensure continuation of care while the temporary restraining order is in place, and
25 that they will not be able to find necessary care in their area.

26 45. Plaintiff D.D. began receiving gender-affirming care at Rady Children's Hospital in
27 2025. D.D. received hormone blocking medication in November 2025, which requires ongoing
28 monitoring to determine when hormone medication is needed. D.D. was diagnosed with gender

1 dysphoria after experiencing serious depression, including suicidal ideation and incidents of self-
2 harming behaviors. These symptoms resolved after D.D. received gender-affirming care but are at
3 risk of returning if necessary medical care stops. Parent D.D. has had a difficult time finding
4 alternative providers of gender-affirming care, which has caused tremendous stress to both
5 Parent D.D. and Plaintiff D.D. Even if Plaintiff D.D. is able to find care in another city, this will
6 require Parent D.D. to take time off of work and Plaintiff D.D. to miss school to receive health
7 care. Parent D.D. is still actively searching for a provider who can continue Plaintiff D.D.’s gender-
8 affirming care, but many pediatricians in San Diego are affiliated with Rady, which has made
9 finding alternative care extremely difficult. The nearest provider they have been able to locate is in
10 a city approximately 100 miles away from their home. This distance presents significant challenges
11 for their family. Each appointment will require them to take time off work and miss at least one full
12 day of school, which also results in missed lessons that D.D. will need to make up at another time.
13 Since the temporary restraining order has been in place, Parent D.D. has been actively working to
14 secure an appointment at Rady Children’s Health for D.D. to ensure that D.D. receives necessary
15 monitoring, but has so far only succeeded in getting D.D. placed on a waitlist for an appointment.

16 46. California law expressly protects the provision of and access to gender-affirming
17 care as “rights secured by the Constitution and laws of California” and declares that any
18 “[i]nterference with these rights, whether or not under the color of law, is against the public policy
19 of California.” Civ. Code § 1798.301. California has enacted multiple statutes safeguarding patients
20 and providers involved in these “sensitive services.” *See, e.g.*, Civ. Code §§ 56.05, 56.37 & 56.109.

21 47. The Attorney General of California has repeatedly reminded healthcare providers of
22 their obligation to provide healthcare services to transgender patients. Office of the Atty. Gen.,
23 Dep’t of Justice, Know Your Rights: Attorney General Bonta Issues Guidance on Gender-
24 Affirming Care Rights in California (Nov. 13, 2025), [https://oag.ca.gov/news/press-releases/know-](https://oag.ca.gov/news/press-releases/know-your-rights-attorney-general-bonta-issues-guidance-gender-affirming-care)
25 [your-rights-attorney-general-bonta-issues-guidance-gender-affirming-care](https://oag.ca.gov/news/press-releases/know-your-rights-attorney-general-bonta-issues-guidance-gender-affirming-care) (“California law
26 prohibits healthcare providers . . . from discriminating or denying healthcare services to a patient
27 for being transgender, nonbinary, gender nonconforming, or intersex, or due to a diagnosis of
28 gender dysphoria.”); *see also* Office of the Atty. Gen., Dep’t of Justice, Attorney General Bonta

1 and 14 Attorneys General Issue Joint Statement on Protecting Access to Gender-Affirming Care
2 (Feb. 5, 2025), <https://oag.ca.gov/news/press-releases/attorney-general-bonta-and-14-attorneys->
3 [general-issue-joint-statement-protecting](https://oag.ca.gov/news/press-releases/attorney-general-bonta-and-14-attorneys-); Office of the Atty. Gen., Dep’t of Justice, Attorney
4 General Bonta Reminds Hospitals and Clinics of Anti-Discrimination Laws Amid Executive Order
5 on Gender Affirming Care (Feb. 5, 2025), <https://oag.ca.gov/news/press-releases/attorney-general->
6 [bonta-reminds-hospitals-and-clinics-anti-discrimination-laws](https://oag.ca.gov/news/press-releases/attorney-general-).

7 48. As of the date of this Complaint, no federal law, regulation, or policy prohibits
8 medical care for transgender minors or requires Defendants to terminate medically necessary health
9 care services for transgender patients as a condition of federal funding or under other
10 circumstances.

11 49. As of the date of this Complaint, Defendants have not been subjected to any final
12 government investigative action to punish or penalize them for providing services to transgender
13 patients or patients with gender dysphoria.

14 50. When Defendants terminate gender-affirming care services for transgender patients,
15 non-transgender patients will continue to have access to the full range of Defendants’ pediatric
16 medical services. Only transgender patients—who represent a small fraction of Defendants’ overall
17 patient population—will be denied continued access to their medically necessary care.

18 51. Similarly, patients who have not been diagnosed with gender dysphoria will
19 continue to have access to the full range of Defendants’ pediatric medical services. All patients
20 affected by Defendants’ elimination of gender-affirming care have been diagnosed with gender
21 dysphoria or would meet the diagnostic criteria for gender dysphoria. Patients who have diagnoses
22 other than gender dysphoria are not affected by the policy.

23 52. Transgender patients affected by Defendants’ policy face significant barriers to
24 obtaining comparable care elsewhere. There are few alternative providers in the San Diego,
25 Orange, and Imperial County region capable of serving the approximately 1,900 patients who rely
26 on Defendants for this care.

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1 **Class Action Allegations**

2 53. Plaintiffs A.A., B.B., C.C., and D.D. bring this action on their own behalf and on
3 behalf of a proposed class of those similarly situated, defined as: *All people who are 19 years old*
4 *or younger who are currently seeking or receiving gender-affirming care at Rady Children’s*
5 *Health for the diagnosis of gender dysphoria.* Plaintiffs “currently seeking or receiving gender-
6 affirming care” include existing patients of Rady Children’s Health as well as patients who have
7 been referred to Rady Children’s Health for the purpose of consulting with a doctor about gender-
8 affirming care. “Gender-affirming care” refers to care as defined by California law. Civil Code
9 § 1798.300; Welf. & Inst. Code § 16010.2.

10 54. The proposed class consists of approximately 1,900 individuals. The class is so
11 numerous that joinder of all members is impracticable.

12 55. The class is defined by objective criteria and the members of the class can be
13 identified through Defendants’ records.

14 56. This case presents numerous common questions of law and fact, including but not
15 limited to:

- 16 a. Whether by terminating gender-affirming care services, Defendants are denying
17 full and equal services to Plaintiffs and the proposed class on the basis of sex
18 and gender identity;
 - 19 b. Whether by terminating gender-affirming care services, Defendants are denying
20 full and equal access to services to Plaintiffs and the proposed class on the basis
21 of disability;
 - 22 c. Whether by terminating gender-affirming care services, Defendants are
23 unlawfully discriminating against Plaintiffs and the proposed class on the basis
24 of sex and gender identity; and
 - 25 d. Whether by terminating gender-affirming care services, Defendants are
26 unlawfully discriminating against Plaintiffs and the proposed class on the basis
27 of disability.
- 28

1 73. The Unruh Act defines “disability” by reference to Government Code sections
2 12926 and 12926.1. Civil Code § 51(e). Pursuant to these Government Code sections, “disability”
3 includes any mental or physical condition that limits a major life activity. Gov’t Code § 12926(m).
4 “Major life activities” include, but are not limited to, “caring for oneself, performing manual tasks,
5 seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking,
6 breathing, learning, reading, concentrating, thinking, writing, communicating, interacting with
7 others, and working.” Cal. Code Regs., tit. 2, § 14026(i). A condition “limits” a major life activity
8 if it makes the achievement of the major life activity difficult. Gov’t Code § 12926(m)(1)(B)(ii).

9 74. Gender dysphoria is a serious medical condition recognized in the American
10 Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM-5). When
11 untreated, gender dysphoria can substantially limit one or more major life activities. Specifically,
12 untreated gender dysphoria can result in a person’s inability to function in everyday life due to
13 clinically significant distress or impairment in social, educational, and occupational settings.

14 75. Plaintiffs A.A., B.B., C.C., and D.D. have been diagnosed with gender dysphoria,
15 which is a disability for which they have received medically necessary treatment. Without
16 treatment, gender dysphoria causes serious physical and psychological harms, including but not
17 limited to anxiety, depression, distress, suicidal ideation, and in some cases, suicide. These
18 symptoms can or would substantially interfere with Plaintiffs’ abilities to function at home, in
19 school, and in social settings.

20 76. Discrimination against people with gender dysphoria is prohibited disability
21 discrimination under the Unruh Civil Rights Act.

22 77. Plaintiffs A.A., B.B., C.C., and D.D. are within a class of persons protected by Civil
23 Code section 51, subdivision (b).

24 78. Defendants are each a “business establishment” for the purposes of Civil Code
25 section 51, subdivision (b).

26 79. Plaintiffs sought appropriate medical care at Defendants’ facilities, a service that
27 Defendants provide to the public.

28

1 80. Defendants are denying medical treatments to Plaintiffs on the basis and because of
2 Plaintiffs' diagnosis of gender dysphoria.

3 81. By eliminating gender-affirming care, Defendants discriminate against Plaintiffs
4 based on their diagnosis of gender dysphoria and deny them full and equal access to Defendants'
5 services, programs, and activities. Defendants provide the same or substantially similar medical
6 care—including puberty blocking medication, hormone medication, and other supportive care—to
7 patients who have other diagnoses, but deny that care only to persons diagnosed with gender
8 dysphoria.

9 82. Defendant's discriminatory practices cause Plaintiffs harm. Therefore, Plaintiffs are
10 entitled to treble their actual damages in an amount proven at trial, injunctive relief, equitable
11 relief, statutory damages, and attorneys' fees and costs.

12 **Third Cause of Action**

13 **Government Code § 11135 et seq.**
14 **(Discrimination based on sex)**
15 **By all Plaintiffs against all Defendants**

16 83. Plaintiffs incorporate by reference each allegation in the foregoing paragraphs of
17 this Complaint.

18 84. Government Code section 11135, subdivision (a) provides in pertinent part that
19 “[n]o person in the State of California shall, on the basis of sex. . . be unlawfully denied full and
20 equal access to the benefits of, or be unlawfully subjected to discrimination under, any program or
21 activity that is conducted, operated, or administered by the state or by any state agency, is funded
22 directly by the state, or receives any financial assistance from the state.”

23 85. “Sex” expressly includes “gender; transgender; intersex; transitioning; sex
24 stereotype; gender identity; gender expression; and perception by a third party of any of the
25 aforementioned. . . . ‘Transgender’ is a general term that refers to a person whose gender identity
26 differs from the person’s sex assigned at birth.” Cal. Code Regs., tit. 2, § 14020(rr).

27 86. Prohibited discriminatory practices under Government Code section 11135 include,
28 but are not limited to:

- a. Denying a person the opportunity or right to apply for, receive the benefits of, or participate in a program or activity;
- b. Affording a person the opportunity or right to apply for, receive the benefits of, or participate in a program or activity that is not full and equal to the program or activity afforded others;
- c. Providing a program or activity to a person that is not as effective in affording a full and equal opportunity to obtain the same result, to gain the same benefit, or to reach the same level of achievement as that provided to others; and
- d. Utilizing criteria or methods of administration that create, increase, reinforce, or perpetuate discrimination based on membership in a protected class.

Cal. Code Regs., tit. 2, §§ 14026(a)(1)–(3).

87. At all times relevant to this action, Defendants received financial assistance from the State of California. As such, Defendants are subject to the anti-discrimination provisions of Government Code section 11135.

88. Plaintiffs are transgender individuals and are within a class of persons protected by Government Code section 11135, subdivision (a).

89. By eliminating all gender-affirming care for Plaintiffs, Defendants discriminate against Plaintiffs on the basis of sex in violation of Government Code section 11135. Defendants' policy terminating gender-affirming care unlawfully denies Plaintiffs full and equal access to the benefits of Defendants' services and subjects Plaintiffs to discrimination, in violation of Government Code section 11135, subdivision (a).

90. Regulations interpreting Government Code section 11135 also make clear that Defendants' conduct constitutes unlawful intentional discrimination in violation of Government Code section 11135, subdivision (a) because the policy denies Plaintiffs full and equal access to Defendants' services based on Plaintiffs' sex. Cal. Code Regs., tit. 2, §§ 14027(b)(2) & 14028(c)(1).

1 **Fourth Cause of Action**

2 **Government Code § 11135 et seq.**
3 **(Discrimination based on disability)**
4 **By all Plaintiffs Against all Defendants**

5 91. Plaintiffs incorporate by reference each allegation in the foregoing paragraphs of
6 this Complaint.

7 92. Government Code section 11135, subdivision (a) provides in pertinent part that
8 “[n]o person in the State of California shall, on the basis of . . . mental disability [or] physical
9 disability . . . be unlawfully denied full and equal access to the benefits of, or be unlawfully
10 subjected to discrimination under, any program or activity that is conducted, operated, or
11 administered by the state or by any state agency, is funded directly by the state, or receives any
12 financial assistance from the state.”

13 93. Government Code section 11135 defines “disability” as “a physical or mental
14 impairment that limits one or more major life activities of an individual, a record of such an
15 impairment, or being regarded as having such an impairment. It includes any mental or physical
16 disability as defined in this section.” Cal. Code Regs., tit. 2, § 14020(p). “Major life activities” are
17 “broadly construed and include physical, mental, and social activities; caring for one’s self;
18 performing manual tasks, walking, seeing, hearing, speaking, breathing, eating, sleeping, standing,
19 lifting, bending, learning, reading, concentrating, thinking, communicating, and working.” Cal.
20 Code Regs., tit. 2, § 14020(p)(11). A major life activity also includes the operation of a major
21 bodily function, including endocrine and reproductive functions. Cal. Code Regs., tit. 2,
22 § 14020(p)(12).

23 94. Prohibited discriminatory practices under Government Code section 11135 include
24 but are not limited to:

- 25 a. Denying a person the opportunity or right to apply for, receive the benefits of, or
26 participate in a program or activity;
- 27 b. Affording a person the opportunity or right to apply for, receive the benefits of,
28 or participate in a program or activity that is not full and equal to the program or
activity afforded others;

- 1 c. Providing a program or activity to a person that is not as effective in affording a
2 full and equal opportunity to obtain the same result, to gain the same benefit, or
3 to reach the same level of achievement as that provided to others; and
4 d. Utilizing criteria or methods of administration that create, increase, reinforce, or
5 perpetuate discrimination based on membership in a protected class.

6 Cal Code Regs., tit. 2, §§ 14026(a)(1)–(3).

7 95. At all times relevant to this action, Defendants received financial assistance from the
8 State of California. As such, Defendants are subject to the anti-discrimination provisions of
9 Government Code section 11135.

10 96. Gender dysphoria is a serious medical condition recognized in the American
11 Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders (DSM-5). When
12 untreated, gender dysphoria can substantially limit one or more major life activities. Specifically,
13 untreated gender dysphoria can result in a person’s inability to function in everyday life due to
14 clinically significant distress or impairment in social, educational, and occupational settings.

15 97. Plaintiffs A.A., B.B., C.C., and D.D. have been diagnosed with gender dysphoria,
16 which is a disability for which they have received medically necessary treatment. Without
17 treatment, gender dysphoria causes serious physical and psychological harms, including but not
18 limited to anxiety, depression, distress, suicidal ideation, and in some cases, suicide. These
19 symptoms can or would substantially interfere with Plaintiffs’ abilities to function at home, in
20 school, and in social settings.

21 98. Plaintiffs are each individuals with a diagnosis of gender dysphoria. As such, they
22 are within a class of persons protected by Government Code section 11135, subdivision (a).

23 99. Defendants’ policy and conduct to terminate gender-affirming medical services for
24 the treatment of gender dysphoria is unlawful facial discrimination and a *per se* violation of
25 Government Code section 11135, subdivision (a) because the policy classifies Plaintiffs on the
26 basis of their diagnosis of and denies them aid, benefits, or services on the basis of their inclusion
27 in this protect classes, while providing the same or substantially similar medical care—including
28

1 puberty blocking medication, hormone medication, and other supportive care—to patients who
2 have other diagnoses. Cal. Code Regs., tit. 2, § 14027(b)(1).

3 100. Defendants’ policy and conduct to terminate gender-affirming medical services for
4 the treatment of gender dysphoria is unlawful intentional discrimination in violation of Government
5 Code section 11135, subdivision (a) because the policy denies Plaintiffs full and equal access to
6 gender-affirming medical care services offered by Defendants on the basis of their diagnosis of
7 gender dysphoria. Cal. Code Regs., tit. 2, §§ 14027(b)(2) & 14028(c)(1).

8 101. Defendants’ policy and conduct to terminate gender-affirming medical services for
9 the treatment of gender dysphoria is unlawful disparate impact discrimination in violation of
10 Government Code section 11135, subdivision (a) because the policy has an adverse or
11 disproportionate impact on Plaintiffs on the basis of their diagnosis of gender dysphoria; creates,
12 increases, reinforces, or perpetuates discrimination or segregation of Plaintiffs as individuals with
13 the diagnosis of gender dysphoria; or has the effect of violating any of the other prohibitions in
14 Government Code section 11135 and its implementing regulations. Cal. Code Regs., tit. 2,
15 § 14027(b).

16 **Prayer for Relief**

17 WHEREFORE, Plaintiffs respectfully request that this Court:

- 18 (1) Enjoin Defendants from eliminating, terminating, or reducing gender-affirming
19 medical care, including puberty-delaying medication, hormone medication, and
20 related medical care, at Rady Children’s Hospital—San Diego, Children’s Hospital
21 of Orange County, and Children’s Hospital at Mission, and require Defendants to
22 continue providing such services to Plaintiffs and all similarly-situated patients at
23 the same level of care as existed prior to January 20, 2026;
- 24 (2) Award Plaintiffs actual damages, including statutory minimum damages of \$4,000
25 per violation under Civil Code section 52, subdivision (a), treble damages where
26 appropriate, and compensatory damages and other losses suffered as a result of
27 Defendants’ unlawful conduct;

28

- 1 (3) Declare that Defendants' termination of gender-affirming care services is unlawful
2 sex and disability discrimination in violation of the Unruh Civil Rights Act, Civ.
3 Code § 51 et seq., and Government Code section 11135 et seq.;
- 4 (4) Require Defendants to comply with the anti-discrimination laws under the Unruh
5 Civil Rights Act, Civ. Code § 51 et seq., and Government Code section 11135 et
6 seq. in connection with any closure, elimination, or relocation of supplemental
7 services, including gender-affirming care services;
- 8 (5) Award Plaintiffs their litigation costs and reasonable attorney's fees pursuant to
9 Civil Code section 52, subdivision (a), Code of Civil Procedure section 1021.5, and
10 any other applicable provision of law; and
- 11 (6) Grant such other relief as the Court deems just and proper.

12
13 Dated: February 25, 2026

Respectfully submitted,

14 IMPACT FUND
15 WESTERN CENTER ON LAW AND POVERTY
16 NATIONAL CENTER FOR LGBTQ RIGHTS

17 By: 

18 Meredith Dixon
19 *Attorneys for Plaintiffs*

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