

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF GEORGIA**

ASHLEY DIAMOND,)
Plaintiff,)

v.)

Civ. No. _____

BRIAN OWENS, Commissioner)
of the Georgia Department of Corrections,)
in his official capacity,)

SHARON LEWIS, Medical Director,)
Georgia Department of Corrections, in her)
individual and official capacities,)

SHAY HATCHER, Warden of Rutledge State)
Prison, in his individual and official capacities,)

incarceration, have had authority and responsibility for her treatment, safety, and care.

2. Despite knowing that gender dysphoria is a serious medical condition that causes physical injury and mental anguish when left untreated, Defendants have refused to provide Ms. Diamond with medically necessary care.

3. With no exercise of individualized medical judgment whatsoever, Defendants have refused to provide Ms. Diamond the hormone therapy that she requires as treatment for her gender dysphoria, and received consistently for seventeen years prior to her incarceration. Defendants have also barred Ms. Diamond from outwardly expressing her female gender identity, even though it is another medically necessary form of care.

4. Instead of responding to Ms. Diamond's requests for gender dysphoria treatment, Defendants have subjected Ms. Diamond to harassment and reprimand based on her failure to

from following the medically accepted standards of care.

7. In addition to ignoring her serious health needs, Defendants have disregarded Ms. Diamond's substantial vulnerability to sexual assault — a problem that is well-documented within GDC, and for which transgender inmates as a group are especially at risk.

8. Since beginning her incarceration, Ms. Diamond, a non-violent offender, has been housed in a series of closed-security facilities for adult male felons considered to be the most violent and dangerous inmates in GDC custody, and become the victim of repeated, unspeakable sexual assaults.

9. Although Ms. Diamond has reported her sexual assaults to Defendants and begged for safer placements within GDC, Defendants have refused to take any reasonable steps to aid in her protection to this day.

10. Ms. Diamond brings this action pursuant to 42 U.S.C. § 1983, after fully exhausting her administrative remedies, to seek redress for Defendants' deliberate indifference to her serious medical needs and her continued vulnerability to sexual assault, which constitutes cruel and unusual punishment under the Eighth Amendment to the United States Constitution, made applicable to the State through the Fourteenth Amendment.

11. Ms. Diamond seeks damages and injunctive relief, as well as a declaratory judgment under 28 U.S.C. §§ 2201 and 2202.

JURISDICTION AND VENUE

12. This action arises under 42 U.S.C. § 1983.

13. This Court has subject matter jurisdiction under 28 U.S.C. §§ 1331 and 1343(a)(3), which confer original jurisdiction to federal district courts in suits seeking to redress the deprivation of rights secured by the Constitution of the United States, in this case the Eighth Amendment.

14. This Court has personal jurisdiction over each and every Defendant because they are residents of Georgia who were employed in Georgia and acting under color of state law during all relevant times.

15. Venue is proper pursuant to 28 U.S.C. § 1391(b)(2) because a substantial part of the events giving rise to Ms. Diamond's claims occurred in this District.

PARTIES

16. Plaintiff Ashley Diamond is a transgender woman with gender dysphoria, who has been in GDC custody since March 27, 2012 after violating probation for an earlier theft offense. During that time, Ms. Diamond has been housed at a series of GDC facilities, including Baldwin State Prison, Rutledge State Prison and Valdosta State Prison. Ms. Diamond's release date is currently November 1, 2023.

17. Defendant Brian Owens was at all relevant times the Commissioner of GDC. Defendant Owens exercised final policy and decision-making authority over GDC and control over its personnel at all relevant times. Defendant Owens had the duty to ensure the provision of adequate medical care to inmates, and to reasonably protect inmates facing a substantial risk of physical harm, including through the implementation of policies and the training and supervision of GDC staff. Defendant Owens is among those responsible for denying Ms.

provision of adequate medical care to inmates, and to reasonably protect inmates facing a substantial risk of physical harm, including through placement decisions, the implementation of policies, and the training and supervision of GDC staff. Defendant Lewis is among those responsible for denying Ms. Diamond medically necessary care and failing to reasonably protect Ms. Diamond from sexual assault, and is sued in her individual and official capacities.

19. Defendant Marty Allen was at all relevant times the Warden of Valdosta State Prison, and exercised authority, direction, and control over Valdosta State Prison and its personnel during the period of Ms. Diamond's incarceration there. Defendant Allen had a duty to ensure the provision of adequate medical care to inmates, and to reasonably protect inmates facing a substantial risk of physical harm. Defendant Allen is among those responsible for denying Ms. Diamond medically necessary care and failing to reasonably protect Ms. Diamond from sexual assault, and is sued in his individual and official capacities.

20. Defendant David McCracken was at all relevant times the Director of Mental Health Services at Valdosta State Prison, its Prison Rape Elimination Act ("PREA") Coordinator, and the leader of its Sexual Assault Response Team. Defendant McCracken had the authority to make decisions regarding the care, treatment, and placement of individuals confined within Valdosta State Prison during the period of Ms. Diamond's incarceration there. Defendant McCracken also had the duty to ensure the provision of adequate medical care to inmates, and to reasonably protect inmates facing a substantial risk of physical harm. Defendant McCracken is among those responsible for denying Ms. Diamond medically necessary care and failing to reasonably protect Ms. Diamond from sexual assault, and is sued in his individual capacity.

21. Defendant Shay Hatcher is the Warden of Rutledge State Prison, and exercised

authority, direction, and control over Rutledge State Prison and its personnel during the period of Ms. Diamond's incarceration there. Defendant Hatcher had the duty to ensure the provision of adequate medical care to inmates, and to reasonably protect inmates facing a substantial risk of physical harm. Defendant Hatcher is among those responsible for denying Ms. Diamond medically necessary care, and is sued in his individual and official capacities.

22. Defendant Ruthie Shelton was at all relevant times the Deputy Warden of Care and Treatment at Rutledge State Prison, and exercised authority, direction and control over its medical and mental health personnel during the period of Ms. Diamond's incarceration there. Defendant Shelton had a duty to ensure the provision of adequate medical care to inmates, and is among those responsible for denying Ms. Diamond medically necessary care. She is sued in her individual and official capacities.

23. Defendant Donna Silver was at all relevant times employed or retained by GDC to provide treatment and care to inmates at Rutledge State Prison, and acting under the color of state law. Defendant Silver is among those responsible for denying Ms. Diamond medically necessary care. She is sued in her individual and official capacities.

24. Defendant John Thompson was at all relevant times employed or retained by GDC to provide treatment and care to inmates at Rutledge State Prison, and acting under the color of state law. Defendant Thompson is among those responsible for denying Ms. Diamond medically necessary care. He is sued in his individual and official capacities.

FACTS

Background on Gender Dysphoria

25. Gender dysphoria, also known as gender identity disorder, is a medical condition in which an individual's gender identity and

gender dysphoria is known to lead to serious medical problems, including suicidality and the impulse to engage in self-castration and self-harm. Individuals with untreated gender dysphoria also experience clinically significant depression, anxiety, and mental impairment.

28. The generally accepted standards for the treatment of gender dysphoria are the Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People, published by the World Professional Association for Transgender Health (the “Standards of Care”).³

29. The Standards of Care have been recognized as the authoritative and clinically accepted treatment for gender dysphoria by the American Psychiatric Association, the American Medical Association, courts that have considered the issue, and members of the medical community at large.

30. The Standards of Care apply equally to incarcerated and non-incarcerated persons, and have been endorsed by the National Commission on Correctional Healthcare and the U.S. Department of Justice National Institute of Corrections as the medically accepted standard for the treatment of inmates with gender dysphoria.

31. The Standards of Care establish that persons with gender dysphoria must be individually assessed by qualified healthcare providers, and that medically appropriate treatment consists of the following medical interventions, depending on the individual: (1) outwardly conforming one’s gender expression and gender role to match one’s internal sense of gender identity, including through pronoun usage, grooming, and dress; (2) receiving hormone therapy to promote the development of secondary sex characteristics that affirm one’s sense of

³ The Standards of Care were previously known as the Harry Benjamin International Gender Dysphoria Association Standards of Care, and are also commonly referred to as triadic therapy or triadic treatment.

gender identity; (3) obtaining sex reassignment surgery.

32. The Standards of Care warn that discontinuing hormone therapy in individuals who have been receiving it is extremely dangerous and can have catastrophic effects. The Standards of Care state “[t]he consequences of abrupt withdrawal of hormones or lack of initiation of hormone therapy when medically necessary include a high likelihood of negative

cartoon superhero, to the confusion and chagrin of her teacher and classmates. Ms. Diamond also began styling her hair like female classmates, wearing feminine clothing while at home, and announced to family members that she was a girl.

38. However, Ms. Diamond was reprimanded and forced to continue living as male, which sparked suicidality and anguish. Ms. Diamond was hospitalized for a suicide attempt at

non-violent offense. Prior to being placed in GDC custody, Ms. Diamond had been expressing her female gender identity and receiving regular hormone therapy as treatment for her gender dysphoria for over seventeen years.

43. Defendants, who exercised authority over the care and treatment of inmates, knew that inmates with gender dysphoria have serious medical needs, and that the medically accepted protocol for the treatment of gender dysphoria is the Standards of Care.

44. Defendants were also aware of Ms. Diamond's gender dysphoria condition and history of hormone treatment at all relevant times: as a result of her hormone therapy, Ms. Diamond had full breasts, a feminine voice, feminine shape, and a feminine appearance. Her gender dysphoria diagnosis was also repeatedly confirmed during medical and mental health evaluations by GDC personnel. Ms. Diamond also informed Defendants that she was a transgender woman with gender dysphoria, discussed her history of hormone therapy, noted that she attempted suicide as a teenager prior to obtaining care, and requested ongoing treatment.

45. However, Ms. Diamond's female clothing, brassieres, and undergarments were confiscated, and her hormone therapy was terminated for the first time in 17 years.

46. Within GDC, the treatment of gender dysphoria is guided by the Standard Operating Procedure on the Management of Transsexuals, VH47-0006 (the "Transgender SOP"). The Transgender SOP is disseminated to all GDC personnel. Defendants, as GDC employees, were familiar with the Transgender SOP and its guidelines.

47. The Transgender SOP acknowledges that inmates with gender dysphoria have serious medical needs and states that individuals who identify themselves as transgender, including by self-proclamation, should be referred within GDC for special medical evaluations. The Transgender SOP also discusses the treatment regimen described in the Standards of Care,

and to assess the need for adjustments — giving serious consideration to a transgender inmate’s own views regarding safety. 28 C.F.R. § 115.42(b)-(e).

57. PREA, the PREA SOP, and GDC’s Standard Operating Procedures on the Investigation of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders (IK01-0006), the Medical and Mental Health Management of Suspected Sexual Abuse, Contact, or Harassment (VG55-0001 and VH85-0002) (collectively the “Sexual Assault SOPs”), provide additional instruction on how GDC personnel should devise housing placements for inmates to prevent sexual assault, and handle instances of sexual assault within GDC facilities.

58. Under PREA and the PREA SOP, GDC personnel are also required to assess inmates for additional sexual assault risk factors, including whether “the inmate has previously been incarcerated;” “the inmate’s criminal history is exclusively nonviolent;” “the inmate has previously experienced sexual victimization;” and the “inmate’s own perception of vulnerability,” and make individualized determinations about how to ensure inmate safety when assigning housing placements. 28 C.F.R. § 115.41(d)(4)-(9); 28 C.F.R. § 115.42(b).

59. GDC personnel are required to perform these risk assessments upon an inmate’s initial arrival in GDC custody and their transfer to different GDC facilities, and to perform a follow-up risk assessment 30 days thereafter, or following a “referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of sexual victimization.” Id. § 115.41(f)-(g).

60. Upon information and belief, the Sexual Assault SOPs also instruct GDC personnel to adopt a zero tolerance and “must tell” policy for sexual assault and sexual misconduct within GDC facilities, whereby personnel must immediately report rumors or

allegations of inmate sexual assaults, and notify prison wa

completing her intake processing, Ms. Diamond was assigned to Macon State Prison, a closed-security facility for adult male felons.

Diamond's PTSD and anxiety in the interim.

73. A series of mental health personnel at Baldwin also diagnosed Ms. Diamond with gender dysphoria and noted that she had been living as a woman since the age of fifteen, had received hormone therapy prior to her incarceration, had begun engaging in self-harm and attempting auto-castration, and recommended ongoing treatment. However, no action was taken with respect to these recommendations and, increasingly distraught, Ms. Diamond attempted suicide on or about February 28, 2013.

74. On or about April 25, 2013, two months after her suicide attempt, Ms. Diamond was evaluated by GDC mental health personnel who reconfirmed her gender dysphoria diagnosis and history of living as a female. GDC personnel also concluded that Ms. Diamond continued to suffer from PTSD; was feeling fearful and targeted within the prison based on her gender identity; and was experiencing anxiety, fearfulness, nightmares and intrusive thoughts as a result of her sexual assaults. GDC personnel recommended that GDC staff meet with Ms. Diamond regarding her medical needs.

75. Thereafter, Ms. Diamond was given an appointment with Dr. Stephen Sloan, a GDC psychologist with specialized knowledge concerning gender dysphoria. Dr. Sloan performed an individualized assessment of Ms. Diamond under the Standards of Care, and concluded that hormone therapy and female gender expression were the medically necessary treatments for her gender dysphoria, and that Ms. Diamond stood a substantial risk of self-harm and suicide if care was denied.

76. Dr. Sloan recommended that hormone therapy be provided to Ms. Diamond. However, Defendant Lewis, the Statewide Medical Director of GDC, refused to authorize treatment. Ms. Diamond's visits with Dr. Sloan were also discontinued, and Ms. Diamond was

transferred to another prison.

Denial of Medical Care at Rutledge State Prison

82. On November 18, 2013, Ms. Diamond contact

medical care. Ms. Diamond explained that her gender dysphoria was a serious medical need, but that she had been informed by personnel that no gender dysphoria treatment was available.

88. In response, Defendant Hatcher placed

Prison to Valdosta State Prison, another closed-security facility housing felons with assaultive histories considered to be the most dangerous. Upon her arrival at Valdosta, personnel, including Defendants Allen and McCracken, received Ms. Diamond's GDC records and a transfer summary detailing her history of sexual assaults, gender dysphoria diagnosis, history of hormone treatment, past attempts at self-harm, and requests for ongoing care.

93. During her intake, Ms. Diamond was warned by Valdosta personnel that Valdosta lacked the means to safely house transgender persons like Ms. Diamond, and that she stood a high likelihood of being sexually assaulted based on the inmate population, which included many gang members. However, Ms. Diamond was not offered any safety accommodations. She was simply told by staff to "guard your booty" and be prepared to fight.

94. On or about January 1, 2014, just one day after her arrival, Ms. Diamond was sexually assaulted by an inmate at Valdosta. Ms. Diamond reported her sexual assault to personnel, and notified them that she continued to be housed with her perpetrator. Upon information and belief, Defendant Lewis was notified of Ms. Diamond's assault, as were

96. As did Dr. Sloan, Drs. Moody a

and McCracken were also notified of Ms. Diamond's assault pursuant to GDC policy. However, despite having the authority to revise Ms. Diamond's placement and arrange for safe-keeping, no action was taken.

100. On February 11, 2014, Ms. Diamond contacted Defendant Owens individually

103. Ms. Diamond asked Defendant McCracken to review her placement and arrange for her transfer to a safer facility, or a facility where she could at least receive gender dysphoria care. However, despite knowing of Ms. Diamond's health and safety needs, Defendant McCracken deferred and delayed action on Ms. Diamond's requests to be afforded reasonable safety and care.

104. Ms. Diamond continued to experience suicide ideation and impulses for self-harm as a result of her denial of gender dysphoria treatment and in or around March 2014, Ms. Diamond was hospitalized for suicidality and attempting self-castration.

105. On or about April 2014, Ms. Diamond personally contacted Defendant Allen regarding her safety concerns at Valdosta. Ms. Diamond explained that she was a transgender woman who had been sexually assaulted and had ongoing fears for her safety. She asked Defendant Allen to review her placement and arrange for her transfer to a safer facility. However, despite having the authority to do so, Defendant Allen refused to act on Ms. Diamond's request for safe placement.

106. In April 2014 Ms. Diamond was sexually assaulted two more times by inmates at Valdosta with gang affiliations. On each occasion, Ms. Diamond reported her sexual assaults to GDC personnel, and renewed her requests for a transfer to a safer facility. Upon information and belief, Defendants Lewis, Allen, and McCracken were notified of each of Ms. Diamond's assaults pursuant to GDC policy. However, despite having the authority to arrange for safe placement, Defendants took no action. Instead, the GDC personnel who processed Ms. Diamond's complaints told her that she was asking to be sexually assaulted because she was transgender, and would continue to be targeted for sexual abuse and coercion.

107. On May 13, 2014, Ms. Diamond contacted Defendant Owens once again,

gender presiated from male

Harrison observed that Ms. Diamond's PTSD symptoms and anxiety had worsened due to ongoing issues of personal safety, and concluded that Ms. Diamond should be transferred to a medium security prison for her safety. Dr. Harrison also noted that Ms. Diamond was "being forced to transform from a woman back to a man" as a result of her continued denial of medical care, and was attempting auto-castration as a result.

117. In August and September 2014, Ms. Diamond was evaluated by GDC healthcare personnel again, who confirmed Ms. Diamond's gender dysphoria and PTSD diagnoses, and noted that Ms. Diamond's condition was deteriorating, that Ms. Diamond was experiencing withdrawal and physiological side effects, was manifesting hopelessness, and engaging in further attempts at self-castration and self-harm based on her continued denial of care. The medical professionals noted that Ms. Diamond had a history of hormone therapy and was requesting ongoing treatment, but stated that hormone therapy for Ms. Diamond was not being provided because it had not been authorized by "ATL" — or Defendants Owens and Lewis.

118. Thereafter, Ms. Diamond's suicidality and impulses to engage in self-harm intensified, and Ms. Diamond attempted to castrate herself once again. Ms. Diamond was referred for emergency medical treatment, and told that she faced a risk of permanent injury or death if her castration attempts continued.

119. In September 2014, Ms. Diamond filed a *pro se* lawsuit against Defendants Allen and McCracken regarding her ongoing safety concerns at Valdosta. Ms. Diamond also began writing letters and publicizing her ongoing sexual assaults. After commencing her lawsuit against Defendants Allen and McCracken, Ms. Diamond was finally transferred from Valdosta State Prison.

reasonable safety, she was transferred back to Baldwin State Prison, the closed-security facility where she had previously been a victim of multiple sexual assaults.

121. On January 22, 2015, Plaintiff was assessed by Dr. Randi C. Ettner, a forensic psychologist who is an expert in the diagnosis and treatment of gender dysphoria. Dr. Ettner confirmed that Plaintiff suffers from severe and persistent gender dysphoria, and that hormone therapy and female gender expression are the medically necessary treatment for her gender dysphoria. Dr. Ettner also determined that Plaintiff was experiencing severe physical and psychological harm due to her lack of gender dysphoria treatment, including clinically significant depression, suicidality, hopelessness, anxiety, desperation, and a regression of hormonally-induced physical effects. Dr. Ettner also noted that Plaintiff attempted suicide and auto-castration multiple times following the withdrawal of gender dysphoria care, and expressed an ongoing intention to end her life if forced to continue living as male.

122. Dr. Ettner concluded that unless hormone therapy for Plaintiff was resumed to treat her gender dysphoria and accompanying suicide ideation, the consequences would be predictable and dire. Dr. Ettner also concluded that attempting to treat Plaintiff's gender dysphoria with psychotherapy or anti-psychotics instead of hormone therapy would substantially depart from accepted medical practice and would place Plaintiff in ongoing peril of suicide and self-harm.

123. Ms. Diamond remains without safe placement or care for her gender dysphoria to this day, and continues to suffer from suicide ideation and the compulsion to engage in self-castration and self-harm on an almost daily basis.

CLAIM FOR RELIEF

Count One:
Refusal to Provide Medically Necessary Care
in Violation of the Eighth Amendment to the Constitution

(As to All Defendants)

124. Ms. Diamond incorporates and realleges herein the allegations of the foregoing paragraphs.

125. At all relevant times, Defendants knew that Ms. Diamond had gender dysphoria, a serious medical need that jeopardizes an individual's physical health and mental well-being

alleged.

130. Defendants Hatcher and Allen showed deliberate indifference to Ms. Diamond's serious medical needs by, *inter alia*

refuse requests to initiate or

substantial and irreparable harm absent immediate relief.

Count Two:
Policy or Custom Regarding the Treatment of

receiving notification of Ashley's ongoing sexual assaults.

152. Defendants Allen and McCracken showed deliberate indifference to Ashley's safety needs by, *inter alia*, disregarding their obligations under PREA and the Sexual Assault SOPs to assess the needs of sexual assault victims and provide appropriate placements; failing to take action after receiving notification of Ashley's ongoing sexual assaults; and unreasonably

GDC, failed to properly train their staff concerning the medical and safety needs of transgender inmates and inmates with gender dysphoria, despite knowing of a widespread and pervasive pattern of abuse by GDC personnel that was likely to continue absent training.

159. Defendants knew that, based on their failure to train GDC personnel, GDC staff had repeatedly denied inmates with gender dysphoria treatment of any kind, and subjected them to discipline and reprimand in lieu of treatment, including by taunting them, calling them names, placing them in solitary confinement, and insisting they act and identify as their assigned gender — in Ms. Diamond’s case, male.

160. Defendants also knew that, based on their failure to train GDC personnel, there was a widespread and pervasive custom of GDC staff disregarding the safety needs of transgender inmates, failing to provide them reasonably safe placements, delaying, deferring, or refusing to reassess the placements of transgender inmates when sexual assaults occur, blaming transgender inmates for their assaults, and refusing to process their sexual assault grievances.

161. As a direct and foreseeable consequence of Defendants’ conscious disregard of

- A. A declaration that Defendants' refusal to provide medically necessary treatment for gender dysphoria violates the Eighth Amendment to the United States Constitution;
- B. A declaration that the Transgender SOP, both on its face and as applied to Plaintiff, violates the Eighth Amendment to the United States Constitution;
- C. A declaration that Defendants Lewis, Allen and McCracken's failure to protect Plaintiff from foreseeable sexual assault violates the Eighth Amendment to the United States Constitution;
- D. A preliminary and permanent injunction directing Defendant Owens and Lewis to provide Plaintiff medically necessary treatment for her gender dysphoria under the Standards of Care, including but not limited to hormone therapy, and permitting Plaintiff to express her female gender identity through grooming, pronoun use, and dress;
- E. A preliminary and permanent injunction requiring Defendant Owens and Lewis to train GDC personnel regarding the medical and safety needs of transgender inmates with gender dysphoria;
- F. A preliminary and permanent injunction enjoining the enforcement of the Transgender SOP by each Defendant sued in their official capacity;
- G. A preliminary and permanent injunction directing Defendants Owens and Lewis to provide Plaintiff reasonably safe placement, including but not limited to through transfer to a medium security or transitional facility;
- H. Compensatory damages against each Defendant named in his or her individual capacity, in an amount adequate to compensate Plaintiff for her harms and losses;

- I. Punitive damages against each Defendant named in his or her individual capacity, in an amount to be determined at trial;
- J. Reasonable attorneys' fees and costs, including expert fees, under 42 U.S.C. § 1988; and
- K. All other relief that the Court deems just and proper.

Dated: February 19, 2015

Respectfully submitted,

/s/ James M. Knoepp
James M. Knoepp, GA Bar No. 366241
Southern Poverty Law Center
1989 College Ave. NE

VERIFICATION
STATEMENT

I, Ashley Diamond, do hereby certify that the information provided in this document is true and accurate to the best of my knowledge and belief.

Ashley Diamond

Ashley Diamond

[Redacted signature area]

CIVIL COVER SHEET

VjgLU66'elxkn'eqxgt'ujggv'cpf'vjg'kphqt o cvkqp'eqpvkpgf'jgtgkp'pgk'jgt'grnceg'pqt'uwrrng o gpv'vjg'hknkpi'cpf'ugtxleg'qh'rngcfkpi'u'qt'qvjgt'rcrgtu'cu'tgswktgf'd{'ncy.'gzegrv'cu'rtqxf'g'd{'nqecn'twngu'qh'eqwtv'Vjku'hqt o.'crrtqxf'g'd{'vjg'Lwfkekn'Eqphgtpeg'qh'vjg'Wpkvgf'Uvcvgu'kp'Ugrvgo dgt'3;96.'ku'tgswktgf'hqt'vjg'wug'qh'vjg'Engtm'qh'Eqwtv'hqt'vjg'rwtrqug'qh'kplkvk'kp'vjg'ekxkn'fqemg'v'ujggv'*** (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

Diamond, Ashley A.

(b) ***Eqwv'p'qh'Tgukfgpeg'qh'Hktuv'Nkuv'f'Rnckpvkhh Macon County (EXCEPT IN U.S. PLAINTIFF CASES)

(c) ***Cwqtpg'u'(Firm Name, Address, and Telephone Number) Southern Poverty Law Center 1989 College Ave. NE Atlanta, GA 30317 (404) 521-6700

DEFENDANTS

Owens, Brian in his capacity as Commissioner of the Georgia Department of Corrections ("GDC"), et al (SEE ATTACHMENT)

Eqwv'p'qh'Tgukfgpeg'qh'Hktuv'Nkuv'f'Fghgpcpv Monroe County (IN U.S. PLAINTIFF CASES ONLY)

PQVG: KP'NCPF'EQPFGOPCVKQP'ECUGU.'WUG'VJGNQECVKQP'QH' VJG'VTCEV'QH'NCPF'KPXQNXGF0

Cwqtpg'u'(If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- 3 WOU0 Iqxgtp o gpv Rnckpvkhh X 5 Hgfgtcn'Swgnkqp (U.S. Government Not a Party) 4 WOU0 Iqxgtp o gpv Fghgpcpv 6 Flxgtuv (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

Table with columns PTF, DEF, PTF, DEF and rows for Ekv|gp'qh'Vjku'Uvcv, Ekv|gp'qh' Cpqvjgt'Uvcv, Ekv|gp'qt'Uwdlgev'qh'c

IV. NATURE OF SUIT (Place an "X" in One Box Only)

Table with columns CONTRACT, TORTS, FORFEITURE/PENALTY, LABOR, BANKRUPTCY, SOCIAL SECURITY, OTHER STATUTES

V. ORIGIN (Place an "X" in One Box Only)

- 3 Qtkilpcn Rtqeggf'kpi 4 Tgoqxf'htqo Uvcv'Eqwtv 5 Tgo'cp'fg'htqo Crrgm'cv'Eqwtv 6 Tgk'p'vc'v'g'f'qt Tgq'rg'p'f 7 Vt'cp'uh'gt'f'htqo Cp'qv'jgt'F'k'v't'k'v (specify) 8 O'wn'v'k'f'k'v't'k'v N'k'v'k'c'v'k'p

VI. CAUSE OF ACTION

Ekv'vjg'WOU0'Elxkn'Uvcv'w'g'wp'fg't'y'j'k'j'{'q'w'c't'g'hknkpi'(Do not cite jurisdictional statutes unless diversity) 42 U.S.C. 1983 Dtlgh'f'guet'rv'k'p'qh'ecw'v'g' Failure to protect and failure to provide medical care in violation of the Eighth Amendment

VII. REQUESTED IN COMPLAINT:

EJGEM'KH'VJ'U'X'U'C'CLASS ACTION DEMAND \$ EJGEM' [GU'qpn{'kh'fg'oc'p'f'g'f'kp'eq'o'rnck'p'v' WPFGT'TWNG'45.'H0T0E'X0R0 JURY DEMAND: [gu X Pq

VIII. RELATED CASE(S) IF ANY

(See instructions): LWF IG FQEMGV'PWODGT

FCVG UKI'PCVWTG'QH'CVVQTPG['QH'TGEQTF

02/19/2015

FOR OFFICE USE ONLY

TGEGRV% COQWPV CRRN [KP I'KHR LWF IG OCI0LWF IG

COMPLETE LIST OF DEFENDANTS

1. OWENS, BRIAN
Commissioner, Georgia Department of Corrections
2. LEWIS, SHARON
Medical Director, Georgia Department of Corrections
3. HATCHER, SHAY
Warden of Rutledge State Prison
4. SHELTON, RUTHIE
Deputy Warden of Care and Treatment of Rutledge State Prison
5. ALLEN, MARTY
Warden of Valdosta State Prison
6. MCCRACKEN, DAVID
Mental Health Services Director of Valdosta State Prison
7. THOMPSON, JOHN
Healthcare Provider for the Georgia Department of Corrections
8. SILVER, DONNA
Healthcare Provider for the Georgia Department of Corrections