



**DEPARTMENT OF DEFENSE  
DEFENSE OFFICE OF HEARINGS AND APPEALS**



In the matter of: )  
)  
) ISCR Case No. 22-01515  
)  
Applicant for Security Clearance )

**Appearances**

For Government: Daniel O’Reilly, Esq., Department Counsel  
For Applicant: *Pro se*

11/15/2024

**Decision**

OLMOS, Bryan J., Administrative Judge:

Applicant mitigated the security concerns under Guideline F (Financial Considerations). However, he did not mitigate the security concerns under Guideline I (Psychological Conditions). Eligibility for access to classified information is denied.

**Statement of the Case**

On November 30, 2022, the Department of Defense (DOD) issued a Statement of Reasons (SOR) to Applicant detailing security concerns under Guideline I and Guideline F. The DOD issued the SOR under Executive Order (Exec. Or.) 10865, *Safeguarding Classified Information within Industry* (February 20, 1960), as amended; DOD Directive 5220.6, *Defense Industrial Personnel Security Clearance Review Program* (January 2, 1992), as amended (Directive); and the Security Executive Agent Directive 4 (SEAD 4), *National Security Adjudicative Guidelines* (AG), effective June 8, 2017.

Applicant answered the SOR on December 6, 2022 (Answer), and requested a hearing before an administrative judge from the Defense Office of Hearings and Appeals

(DOHA). The case was assigned to me on April 15, 2024. On June 7, 2024, DOHA issued a notice scheduling the hearing for July 18, 2024.

The hearing convened as scheduled. Government Exhibits (GX) 1 through 6 and Applicant Exhibits (AX) A through H were admitted in evidence without objection. Applicant testified and the record closed at the conclusion of the hearing. DOHA received the hearing transcript (Tr.) on July 21, 2024.

### **Administrative Notice**

Department Counsel requested that I take administrative notice of portions of the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), pertaining to bipolar and related disorders. I took administrative notice as requested, without objection.

### **Findings of Fact**

In his Answer to the SOR, Applicant admitted all of the allegations. His admissions are incorporated into my findings of fact. After a thorough and careful review of the pleadings and evidence submitted, I make the following additional findings of fact.

Applicant is 44 years old. He married his current wife in 2008 and adopted her son who is now an adult. Applicant was previously married from 2001 through 2003 and that relationship ended in divorce. He has one adult-aged child from that marriage as well as another adult-aged child from a relationship with a former girlfriend. In 1998, he served three months active duty in the Navy before being discharged for medical reasons. He completed an associate degree in 2013. (GX 1-2; Tr. 22-31)

Applicant is currently unemployed. In May 2021, he began working for his sponsoring employer as a subcontractor assisting with their help desk. He was hired by this employer full time in April 2022 where he worked as a systems administrator through June 2024. He was then laid off, but would be hired back should he be able to obtain a security clearance. (GX 1-2; Tr. 38-42)

### **Psychological Conditions**

Applicant has an extended history of mental health concerns. In September 2001, he attempted suicide and was involuntarily hospitalized for about a week. (SOR ¶ 1.c) He blamed issues relating to his marriage as a cause for his mental health episode. No diagnosis from that event is reflected in the medical record. He denied any history of mental health struggles prior to 2001. However, he testified that his family had a history of bipolar disorder and he always felt that he was also bipolar. After being released from the hospital, he declined the recommended continuation of mental health treatment. Medical records reflect that he took medication for his mental health for an unknown period after the hospitalization, but he denied taking any mental health medication during

that period. Soon afterwards, he separated from his first wife. He then moved in with his parents and lived with them for the next three years. (GX 1-4; AX C; Tr. 56-66)

Although he believed that he was likely bipolar based on his family history, he did not seek additional treatment until his suicide ideation and hospitalization in 2016. Instead, during the fifteen-year break between events, he described regularly experiencing mood swings and manic episodes where he would occasionally make impulse purchases which would lead to financial stress. In 2007, he also experienced anger issues with his current wife, who he was living with prior to their marriage. When his wife threatened to leave him, he did not seek out counseling. Instead, he took it upon himself to change and claimed he was successful. (GX 2-4; AX C; Tr. 66-73)

However, Applicant's anger issues remained. In 2009, he was terminated from his employment for throwing papers onto a supervisor's desk. He denied that he threw anything, but admitted he was fired. He described struggling with completing the daily routines of his work. (GX 1-3; Tr. 70-75, 95)

In December 2016, Applicant started with Company A, a bank. Later that month, he felt an oncoming mental health "break," told his wife, and was voluntarily hospitalized with suicidal ideation. (SOR ¶ 1.b) He was diagnosed with bipolar I disorder and, after about 5 days, was released. When asked what caused the break, he could not recall anything specific. He began to see Dr. S for mental health treatment. Dr. S noted a past history of use and abuse of both hard drugs and alcohol, but that he was 21 years clean and eight years sober. This history would reflect drug use through about 1995 and alcohol use through about 2008. (GX 1-4; AX C; Tr. 97-104)

Medical records from 2017 reflect that Applicant saw Dr. S for depression, history of suicidal ideation and relationship concerns. In addition to his bipolar I disorder, he was diagnosed with major depressive disorder. He continued to have difficulties processing feelings of remorse and empathy. An August 2017 medical report noted that he exhibited sociopathic tendencies. In September 2017, he continued to experience suicidal ideation, but it was infrequent and he claimed he had no reason to act on his thoughts. By December 2017, Dr. S determined that he was "no longer in crisis" and could return for treatment as needed. (GX 3-4)

However, Applicant continued to experience multiple difficulties at Company A. In March 2018, he was reprimanded for throwing a compact disc at another employee. He denied throwing the disc. That same month, at the request of his wife, he resumed his treatment with Dr. S. Medical records reflect that he was disinterested and distant and that his thoughts were "extreme and irrational." (GX 4) He told Dr. S that he thought about becoming a biochemist so he could discover a way to stop pro-creation as people were destroying the world. He testified that he made this statement at the time for its shock value and nothing more. (GX 1-4; Tr. 110-115)

In May 2018, Dr. S noted that Applicant's suicidal thoughts had resumed since previously leaving therapy, but that Applicant believed they were manageable, and he

had not made a suicide plan. Meanwhile, his difficulties at Company A continued. In July 2018, he was reprimanded for using derogatory terms to describe a female employee. He admitted this event and the inappropriateness of his behavior, but claimed he was only trying to joke about another employee. (GX 1-4; Tr. 77-85)

In September 2018, Applicant was terminated from Company A following a confrontation with a bank manager. He was seen later that day by Dr. S and it was noted that he was depressed and had thoughts of suicide. He refused Dr. S's recommendation to check into the hospital, but ultimately agreed to stay with his parents for a few days in order to be monitored. Dr. S saw him again later that month and noted that he had "regrouped after being fired" and that he denied further suicidal ideation. (GX 4) With his termination, Applicant lost his health insurance coverage. It was noted that he would return for further treatment with Dr. S or another provider once he was able to secure new insurance. However, he never returned, nor did he begin treatment with a new provider. At an unknown date after seeing Dr. S, Applicant also stopped taking medications for his mental health. (GX 1-4; Tr. 77-104)

Immediately following his termination, Applicant repeatedly texted Ms. C, a fellow bank employee, even after she told him to stop. While cleaning out Applicant's desk after his termination, bank officials also discovered a journal that he kept which included several disturbing writings. In it, Applicant wrote about loving Ms. C and about killing himself or killing Ms. C's boyfriend. He also wrote about burning down the house where Ms. C and her boyfriend lived. (GX 2-3; 85-93)

Ultimately, Ms. C filed a criminal complaint for harassment against Applicant. The complaint noted that Applicant had also sent letters to Ms. C's house expressing his love for her which made her fearful as she had never given him her address. This complaint was resolved through a pretrial diversion program and Applicant was ordered to not have contact with Ms. C for one year. (GX 3; Tr. 90-102)

When asked about Ms. C and the court proceedings, Applicant stated that he had been friends with Ms. C and nothing more. He described texting her after being terminated from Company A but stopped once she asked. Other than admitting to texting once after Ms. C asked him to stop, he could not elaborate on how his texts could have led to a criminal complaint. He described that the writings discovered in his desk were his therapy journal. He stated he could not recall having any feelings for Ms. C, sending letters to her house, having thoughts of suicide, or thoughts of doing harm to others during that period. However, he also stated that he was still in a recovery period and described not knowing "up from down at that point." (Tr. 89) He described constantly feeling stressed while working with the bank and described his "agitation" level as a 10 out of 10. (GX 2-3; Tr. 87-107)

At the request of DOD, Applicant was evaluated by a licensed clinical psychologist, Dr. B in May 2022. Following a clinical interview, a personality assessment as well as a review of available medical records and the DOD investigatory file, Dr. B noted that Applicant had a history of dissociative disorder and sociopathic tendencies. Dr. B further

noted that Applicant also had a tendency to minimize his difficulties as he provided explanations of his past events that were inconsistent with records. This included his history of alcohol and drug use where he stated he had not consumed alcohol since high school and last used marijuana and LSD in 2000. Comparably, Dr. S noted drug use through about 1995 and alcohol use through about 2008. (GX 3-4)

Applicant also informed Dr. B about his termination from Company A, the bank, but did not initially disclose the two prior reprimands he received at Company A, or the journal discovered in his desk that contained suicidal and homicidal thoughts. He disclosed that a “restraining order” had been placed against him, but that it originated because he sent a single text to a female employee after she asked him to stop. Applicant also stated that Dr. S told him to discontinue his mental health medications. While there is discussion in the medical record from Dr. S of the need for an evaluation of Applicant’s psychotropic medications, the record is absent any statement from Dr. S that Applicant should terminate his mental health medications. (GX 3-4; Tr. 87-93)

Dr. B found that Applicant lacked full candor or had poor insight. Dr. B also noted that Applicant expressed little need for change in his behavior or for ongoing mental health treatment. Dr. B diagnosed Applicant with bipolar I disorder and antisocial personality traits as well as a history of alcohol and substance abuse. Dr. B opined that these conditions could impact Applicant’s reliability, judgment, stability, and trustworthiness, and impede his ability to safeguard classified information. (SOR ¶ 1.a) Dr. B concluded that, without effective treatment, his severe symptoms of emotional distress could recur, and he may also be at risk of aggressive or impulsive behaviors. (GX 3)

In March 2023, Applicant obtained his own evaluation by Dr. J, a licensed clinical psychologist. Applicant provided Dr. J with his family history of bipolar disorder and that he had not used any illegal drugs for over twenty years. He described being off of medication for almost four years and had been without suicidal thoughts or any type of disruptive behavior. He admitted that he still experienced “mild mood swings,” but had not experienced “real anger” or “irritability spikes” and had used behavioral tools learned in counseling and the support of his wife to “see the queues” of a potential problem. However, he did not provide Dr. J with any medical records or Dr. B’s report. There is no indication in the report that he disclosed to Dr. J his employment issues in 2018 or the no-contact order that was placed against him. (AX C)

Following a clinical interview and a personality inventory assessment, Dr. J diagnosed Applicant with “status-post history of bipolar disorder II, primarily depressed mood, residual.” Dr. J opined that Applicant did not need any mental health medication or ongoing counseling. He found that Applicant was “stable with good mood” and had “excellent insight into his patterns of behavior and cycles of mood.” Additionally, Dr. J noted that Applicant had good support from his wife and maintained contact with his primary care physician should any need for additional treatment arise in the future. Dr. J opined that Applicant was able to maintain a security clearance. (AX C)

Applicant testified that, for several years now, he feels “very in control” of his mental health and that it does not impact his daily routines. (Tr. 157) He described not experiencing severe agitators since leaving Company A. However, he admitted that he occasionally has thoughts of suicide, but described these thoughts as “getting a flash ... and then it’s gone” and that he had no inclination to act on those thoughts. (Tr. 113) He believes he has learned the triggers that might lead to a mental health episode and used behavioral tools that he learned from his treatment as well as people around him for stabilization and support. He does not believe he would benefit from further mental health treatment. (Tr. 113-130, 150-158)

## **Financial Considerations**

Applicant described experiencing financial difficulties related to breaks in his employment and that he had lacked experience in budgeting. He also testified to previously experiencing manic episodes in which he would splurge on purchases that would negatively impact his finances. He stated he had been generally unaware of the status of his accounts. Although he listed delinquent debts in his September 2020 security clearance application (SCA), he claimed to not have realized there was a problem with his finances until, in February 2021, he attempted to secure a vehicle loan. In March 2021, he formulated a budget with his wife and began to resolve some accounts. (Tr. 33-53; 66-70)

SOR ¶¶ 2.a (\$119) and 2.b (\$959) are delinquent credit card accounts placed for collection. Applicant disclosed these debts in his September 2020 SCA and provided details during his December 2020 background interview. A November 2020 credit report reflected a balance on the SOR ¶ 2.a account as \$3,361 and the SOR ¶ 2.b account as \$721. At an unrecalled time, Applicant initiated payments on the accounts. An October 2022 credit report reflected that the SOR ¶ 2.a account balance had reduced to \$119, but the SOR ¶ 2.b debt had increased to \$921. A February 2023 letter from a collection agency shows that the SOR ¶ 2.a account was resolved in February 2023. A letter from a collection agency shows that the SOR ¶ 2.b account was resolved in March 2023. (GX 1-2, 5-6; AX D-E, G; Tr. 19-35)

SOR ¶ 2.c (\$11,688) is a credit card account that was charged off. Applicant did not list this account in his September 2020 SCA as he later claimed he had forgotten about it. However, during his background interview, he stated this was an account used to purchase appliances. The full balance was reflected as charged off in both his November 2020 and October 2022 credit reports. He testified that he had not initially issued payments or attempted to resolve the account as he was addressing other accounts first. In May 2023, the creditor issued a Cancellation of Debt (1099-C) and Applicant reported this in his relevant tax filings. (GX 2, 5-6; AX H; Tr. 34-47)

Applicant’s November 2020 credit report showed a foreclosure and an additional delinquent debt (\$775) not alleged in the SOR. Applicant testified that the foreclosure was actually a short sale of a property he had moved out of but was unable to sell. He was unable to make payments on the property and agreed to the short sale in 2020. He

provided documentation reflecting that the delinquent debt of (\$775) was resolved and paid through settlement in 2021. Additionally, in 2023, he began a payment plan with another creditor on a delinquent debt not alleged in the SOR with a balance of about \$4,200. He is currently paying about \$90 per month on that debt and provided a payment history through June 2024. (GX 5-6; AX F, G; Tr. 20-39)

Applicant's most recent credit report in the record, from February 2023, shows no new delinquent accounts. Applicant testified that, when employed, he was able to maintain a monthly budget and address his delinquent accounts. As he is currently unemployed, he is managing his expenditures with some reserve funds and his wife's income and has not incurred further spending considered as splurges. (AX G; Tr. 35-39)

Applicant submitted two reference letters in support of his character. Mr. B supervised Applicant from 2021 through 2023 and described him as always being ready to help, eager to learn, and working in a positive manner. Ms. R worked with Applicant in 2022 and 2023 and described him as dependable, forthright, and trustworthy. (AX A-B)

### **Policies**

It is well established that no one has a right to a security clearance. As the Supreme Court held in *Department of the Navy v. Egan*, "the clearly consistent standard indicates that security determinations should err, if they must, on the side of denials." 484 U.S. 518, 531 (1988)

When evaluating an applicant's suitability for a security clearance, the administrative judge must consider the adjudicative guidelines. In addition to brief introductory explanations for each guideline, the adjudicative guidelines list potentially disqualifying conditions and mitigating conditions, which are used in evaluating an applicant's eligibility for access to classified information.

These guidelines are not inflexible rules of law. Instead, recognizing the complexities of human behavior, these guidelines are applied in conjunction with the factors listed in the adjudicative process. The administrative judge's overarching adjudicative goal is a fair, impartial, and commonsense decision. According to AG ¶ 2(a), the entire process is a conscientious scrutiny of a number of variables known as the "whole-person concept." The administrative judge must consider all available, reliable information about the person, past and present, favorable and unfavorable, in making a decision.

The protection of the national security is the paramount consideration. AG ¶ 2(b) requires that "[a]ny doubt concerning personnel being considered for national security eligibility will be resolved in favor of the national security." In reaching this decision, I have drawn only those conclusions that are reasonable, logical, and based on the evidence contained in the record. Likewise, I have not drawn inferences grounded on mere speculation or conjecture.

Under Directive ¶ E3.1.14, the Government must present evidence to establish controverted facts alleged in the SOR. Under Directive ¶ E3.1.15, an “applicant is responsible for presenting witnesses and other evidence to rebut, explain, extenuate, or mitigate facts admitted by applicant or proven by Department Counsel and has the ultimate burden of persuasion to obtain a favorable security decision.”

A person who seeks access to classified information enters into a fiduciary relationship with the Government predicated upon trust and confidence. This relationship transcends normal duty hours and endures throughout off-duty hours. The Government reposes a high degree of trust and confidence in individuals to whom it grants access to classified information. Decisions include, by necessity, consideration of the possible risk the applicant may deliberately or inadvertently fail to safeguard classified information. Such decisions entail a certain degree of legally permissible extrapolation of potential, rather than actual, risk of compromise of classified information.

## **Analysis**

### **Guideline I, Psychological Conditions**

The security concern relating to this guideline is set out in AG ¶ 27:

Certain emotional, mental, and personality conditions can impair judgment, reliability, or trustworthiness. A formal diagnosis of a disorder is not required for there to be a concern under this guideline. A duly qualified mental health professional (e.g., clinical psychologist or psychiatrist) employed by, or acceptable to and approved by the U.S. Government, should be consulted when evaluating potentially disqualifying and mitigating information under this guideline and an opinion, including prognosis, should be sought. No negative inference concerning the standards in this guideline may be raised solely on the basis of mental health counseling.

I have considered the disqualifying conditions under AG ¶ 28 and the following are potentially applicable:

- (a) behavior that casts doubt on an individual's judgment, stability, reliability, or trustworthiness, not covered under any other guideline and that may indicate an emotional, mental, or personality condition, including, but not limited to, irresponsible, violent, self-harm, suicidal, paranoid, manipulative, impulsive, chronic lying, deceitful, exploitative, or bizarre behaviors;
- (b) an opinion by a duly qualified mental health professional that the individual has a condition that may impair judgment, stability, reliability, or trustworthiness;
- (c) voluntary or involuntary inpatient hospitalization; and



(d) failure to follow a prescribed treatment plan related to a diagnosed psychological/psychiatric condition that may impair judgment, stability, reliability, or trustworthiness, including, but not limited to, failure to take prescribed medication or failure to attend required counseling sessions.

Applicant was hospitalized in 2001 following a suicide attempt and he subsequently denied further treatment. He was hospitalized again in 2016 following suicidal ideation. When he and Dr. S agreed to terminate his regular treatment in December 2017, he again experienced further suicidal ideation and thoughts that were characterized as “extreme and irrational.” This necessitated the continuation of his treatment. Immediately following his termination from Company A in September 2018, a journal was discovered at his desk in which he expressed both suicidal and homicidal thoughts. Based on the termination of his health insurance, he did not continue treatment with Dr. S and never sought any additional treatment.

In a May 2022 evaluation, Dr. B diagnosed Applicant with bipolar I disorder and antisocial personality traits. Dr. B found that these conditions could impact Applicant’s reliability, judgment, stability, and trustworthiness, and impede on his ability to safeguard classified information. Additionally, Dr. B opined that, without effective treatment, his severe symptoms of emotional distress could recur, and that he may also be at risk of aggressive or impulsive behaviors. The above disqualifying conditions apply.

I have considered the mitigating conditions under AG ¶ 29 and the following are potentially applicable:

(a) the identified condition is readily controllable with treatment, and the individual has demonstrated ongoing and consistent compliance with the treatment plan;

(b) the individual has voluntarily entered a counseling or treatment program for a condition that is amenable to treatment, and the individual is currently receiving counseling or treatment with a favorable prognosis by a duly qualified mental health professional;

(c) recent opinion by a duly qualified mental health professional employed by, or acceptable to and approved by, the U.S. Government that an individual's previous condition is under control or in remission, and has a low probability of recurrence or exacerbation;

(d) the past psychological/psychiatric condition was temporary, the situation has been resolved, and the individual no longer shows indications of emotional instability; and

(e) there is no indication of a current problem.

Dating back to at least 2001, Applicant has a long history of mental health concerns, primarily relating to a bipolar I disorder. Following his suicide attempt in 2001, he refused mental health treatment. While he avoided further hospitalizations over the next fifteen years, he still admitted to experiencing mood swings and manic episodes. He also experienced anger issues that led to his wife threatening to leave him and his termination from a job in 2009 for throwing papers on a supervisor's desk.

With regard to his hospitalization in 2016, Applicant testified that he was unable to recall, with any detail, what caused that mental health episode. Similarly, he could not recall details regarding the journal discovered in his desk in September 2018 that contained suicidal and homicidal ideations or his actions that led to the no-contact order in relation to Ms. C. As noted by Dr. B, Applicant appears reluctant to acknowledge the extent of his past actions and mental health episodes. It was Dr. B's assessment that Applicant required effective treatment so that his symptoms of emotional distress, and risk of aggressive or impulsive behaviors would not return.

Contrarily, Dr. J opined that Applicant's condition was "status-post history of bipolar disorder II" and that he was stable with good mood and excellent insight. However, while that diagnostic impression was based on a clinical interview and personality assessments, Dr. J did not review Dr. S's medical records or Dr. B's psychological evaluation. Additionally, pertinent facts regarding Applicant's past behaviors are not addressed in Dr. J's evaluation. Dr. J did not address Applicant's "extreme and irrational" behavior in 2018, after he initially terminated treatment with Dr. S. The evaluation also did not address Applicant's termination from the bank in 2018, the suicidal and homicidal thoughts contained in Applicant's journal or the fact that a no-contact order was issued against Applicant.

Applicant claims he is now "very in control" of his mental health. However, he was unable to provide candid details of his past to both Dr. B and Dr. J and continued to show an inability to recall those details during his testimony. He has failed to demonstrate that he has the awareness of his condition sufficient to establish that his mental health concerns have resolved or no longer show indications of emotional instability.

Further, when weighing competing medical opinions, the judge is neither compelled to accept a DOD-required psychologist's diagnosis of an applicant nor bound by any expert's testimony or report. Rather, the judge has to consider the record evidence as a whole in deciding what weight to give conflicting expert opinions. ISCR Case No. 19-00151 (App. Bd. Dec. 10, 2019). In comparing Dr. B's and Dr. J's reports, I find that Dr. B's evaluation is more persuasive because it accurately reflects Applicant's diagnosis and condition as it is based on information provided by the Applicant as well as medical and additional records.

Therefore, while Applicant has fortunately not recently experienced suicidal ideation or other severe symptoms of emotional distress as previously exhibited, he has not met his burden to mitigate the security concerns arising from his psychological condition. None of the mitigating conditions apply.

## Guideline F, Financial Considerations

The security concern relating to the guideline for financial considerations is set out in AG ¶ 18:

Failure to live within one's means, satisfy debts, and meet financial obligations may indicate poor self-control, lack of judgment, or unwillingness to abide by rules and regulations, all of which can raise questions about an individual's reliability, trustworthiness, and ability to protect classified or sensitive information. Financial distress can also be caused or exacerbated by, and thus can be a possible indicator of, other issues of personnel security concern such as excessive gambling, mental health conditions, substance misuse, or alcohol abuse or dependence. An individual who is financially overextended is at greater risk of having to engage in illegal or otherwise questionable acts to generate funds. . . .

The financial security concern is broader than the possibility that an individual might knowingly compromise classified information to raise money. It encompasses concerns about an individual's self-control, judgment, and other qualities essential to protecting classified information. An individual who is financially irresponsible may also be irresponsible, unconcerned, or negligent in handling and safeguarding classified information. ISCR Case No. 11-05365 at 3 (App. Bd. May 1, 2012)

I have considered the disqualifying conditions under AG ¶ 19 and the following are potentially applicable:

- (a) inability to satisfy debts; and
- (c) a history of not meeting financial obligations.

Applicant's admissions and the evidence reflect that he incurred multiple delinquent accounts over the last several years. The above disqualifying conditions are established.

I have considered the mitigating conditions under AG ¶ 20 and the following are potentially applicable:

- (a) the behavior happened so long ago, was so infrequent, or occurred under such circumstances that it is unlikely to recur and does not cast doubt on the individual's current reliability, trustworthiness, or good judgment;
- (b) the conditions that resulted in the financial problem were largely beyond the person's control (e.g., loss of employment, a business downturn, unexpected medical emergency, a death, divorce or separation, clear victimization by predatory lending practices, or identity theft), and the individual acted responsibly under the circumstances; and

(d) the individual initiated and is adhering to a good-faith effort to repay overdue creditors or otherwise resolve debts.

Applicant experienced an extended period of financial difficulties. Some of these difficulties related to periods of unemployment. However, in 2009 and again in 2018, Applicant's unemployment arose from him being fired from a job for cause. Further, he testified that there were occasions when his manic episodes brought forth splurge spending and that he lacked experience in budgeting.

Nonetheless, in February 2021, following his inability to secure a vehicle loan, Applicant began to take action to address his debts. He and his wife formulated a budget and began to reach out to creditors to address delinquent accounts. In 2021, he resolved one debt not alleged in the SOR. By October 2022, the SOR ¶ 2.a debt had been reduced from \$3,361 to \$119 and was subsequently resolved. In March 2023, Applicant resolved the SOR ¶ 2.b debt. He is currently in a payment plan with an additional creditor for a debt not alleged in the SOR. Applicant testified that he intended to resolve other debts prior to addressing the SOR ¶ 2.c debt of \$11,688. However, the creditor issued a 1099-C in May 2023 and is no longer pursuing the debt. Credit reports from 2023 show that Applicant has not obtained any new delinquent debt.

With the assistance of his wife and their budgeting efforts, Applicant has taken action to address his delinquent financial accounts. Even though he is currently unemployed, he and his wife are using her income and their reserve funds to maintain their monthly budget.

Mitigation under AG ¶ 20(b) is only partially applicable as several of the conditions that resulted in Applicant's financial problems were within his control. However, mitigation under AG ¶¶ 20(a) and 20(d) is fully applicable as Applicant has taken responsible action in addressing his debts and established a track record of payments.

### **Whole-Person Concept**

Under the whole-person concept, the administrative judge must evaluate an applicant's eligibility for a security clearance by considering the totality of the applicant's conduct and all relevant circumstances. The administrative judge should consider the nine adjudicative process factors listed at AG ¶ 2(d):

- (1) the nature, extent, and seriousness of the conduct;
- (2) the circumstances surrounding the conduct, to include knowledgeable participation;
- (3) the frequency and recency of the conduct;
- (4) the individual's age and maturity at the time of the conduct;
- (5) the extent to which participation is voluntary;
- (6) the presence or absence of rehabilitation and other permanent behavioral changes;
- (7) the motivation for the conduct;
- (8) the potential for pressure, coercion, exploitation, or duress; and
- (9) the likelihood of continuation or recurrence.

Under AG ¶ 2(c), the ultimate determination of whether to grant eligibility for a security clearance must be an overall commonsense judgment based upon careful consideration of the guidelines and the whole-person concept.

I considered the potentially disqualifying and mitigating conditions in light of all the facts and circumstances surrounding this case. I have incorporated my comments under Guideline I and Guideline F in my whole-person analysis.

Applicant's mental health and personal circumstances have improved since his hospitalization in 2016 and the events that led to his termination from Company A in September 2018. He recognizes that he has a family history of bipolar disorder and has made progress in managing his symptoms and relying on his support network as needed. This includes working with his wife to maintain their financial budget and prevent splurge spending. While he admitted that he still has occasional thoughts of suicide, he described these thoughts as flashes and said that he has managed them.

Despite the benefits he received from his treatment with Dr. S, Applicant believes that he is capable of controlling his symptoms without any further mental health treatment. However, his recognition of the severity of his past mental health events remains limited. Therefore, while he believes he is in control of his condition, the record evidence leaves me with questions and doubts about his eligibility and suitability for a security clearance.

### **Formal Findings**

Formal findings for or against Applicant on the allegations set forth in the SOR, as required by section E3.1.25 of Enclosure 3 of the Directive, are:

Paragraph 1, Guideline I:	AGAINST APPLICANT
Subparagraphs 1.a-1.c:	Against Applicant
Paragraph 2, Guideline F:	FOR APPLICANT
Subparagraphs 2.a-2.c:	For Applicant

### **Conclusion**

In light of all of the circumstances, it is not clearly consistent with the national interest to grant Applicant a security clearance. Eligibility for access to classified information is denied.

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Bryan J. Olmos  
Administrative Judge