



Discharge from Active Duty (DD Form 214), reveals that you were separated from the Navy on 22 November 2006 with an Other Than Honorable (OTH) characterization of service, your narrative reason for separation is "Drug Abuse," your separation code is "HKK," and your reenlistment code is "RE-4." Prior to your discharge, you were found fit to separate in your final physical examination.

The Board carefully considered all potentially mitigating factors to determine whether the interests of justice warrant relief in your case in accordance with the Kurta, Hagel, and Wilkie Memos. These included, but were not limited to, your desire to upgrade your discharge and your contentions that you developed dependency to prescription pain killers prescribed by military doctors, your dependency led you to seek illicit narcotics once you were unable to continue obtaining your prescription, and you felt unable to seek assistance with your addiction due to the military's zero tolerance policy. You assert that you have achieved sobriety since your discharge and continued to maintain a clean life, but suffer from depression and anxiety due to the circumstances of your discharge. For purposes of clemency and equity consideration, the Board noted you provided advocacy letters but no documentation describing post-service accomplishments.

Because you contend that a mental health condition affected the circumstances of your discharge, the Board also considered the AO. The AO stated in pertinent part:

There is no evidence that he was diagnosed with a mental health condition in military service, or that he exhibited any psychological symptoms or behavioral changes indicative of a diagnosable mental health condition. He has provided no medical evidence in support of his claims. Unfortunately, available records are not sufficiently detailed to establish clinical symptoms during military service or provide a nexus with misconduct. Additional records (e.g., post-service mental health records describing the Petitioner's diagnosis, symptoms, and their specific link to his misconduct) would aid in rendering an alternate opinion.

The AO concluded, "it is my considered clinical opinion there is insufficient evidence of mental health condition that may be attributed to military service. There is insufficient evidence his misconduct could be attributed to a mental health condition."

In response to the AO, you provided additional evidence regarding your case including another advocacy letter.

After thorough review, the Board concluded these potentially mitigating factors were insufficient to warrant relief. Specifically, the Board determined that your misconduct, as evidenced by your drug abuse discharge, outweighed these mitigating factors. In making this finding, the Board considered the seriousness of your misconduct and the fact it included a drug offense. The Board determined that illegal drug use by a service member is contrary to military core values and policy, renders such members unfit for duty, and poses an unnecessary risk to the safety of their fellow service members. Further, the Board concurred with the AO that there is insufficient evidence your misconduct could be attributed to a mental health condition. Finally, the Board noted that you did not provide any evidence to substantiate your contentions of a drug addiction. As a result, the Board concluded your conduct constituted a significant departure from that expected of a service member and continues to warrant an OTH characterization. While the

