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| **AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL DOCUMENT** | CASE NUMBER FD-2019-00679 |
| GENERAL: The applicant was discharged on 7 Dec 12 in accordance with AFI 36-3208 with a General discharge for Misconduct (Drug Abuse). The applicant appealed for an upgrade of his discharge characterization to Honorable, and a change to the reenlistment eligibility code. The board was conducted on 16 Jan 20.  The applicant was offered a personal appearance before the Discharge Review Board (DRB), but declined and requested the board be completed based on a records only review. The applicant was not represented by counsel.  Pursuant to 10 USC §1553, the board included a member who is a psychiatrist with training on mental health issues connected with post-traumatic stress disorder (PTSD) or traumatic brain injury (TBI), and training on mental health disorders.  The attached examiner’s brief (provided to applicant only), extracted from available service records, contains pertinent data regarding the circumstances and character of the applicant’s military service.    FINDING: The DRB voted 3 to 2 to *deny* the applicant’s request to upgrade his discharge characterization to Honorable, and to change the discharge narrative reason to Secretarial Authority,. The DRB voted unanimously to *deny* the applicant’s request to change the reenlistment eligibility code to 3K.  DISCUSSION: The DRB, under its responsibility to examine the propriety and equity of an applicant’s discharge, is authorized to change the characterization of service and the narrative reason for discharge if such changes are warranted. If applicable, the board can also change the applicant’s reenlistment eligibility code. In reviewing discharges, the board presumes regularity in the conduct of governmental affairs unless there is substantial credible evidence to rebut the presumption, to include evidence submitted by the applicant. The board completed a thorough review of the circumstances that led to the discharge and the discharge process to determine if the discharge met the pertinent standards of equity and propriety.  The applicant’s record of service included one Letter of Reprimand. His misconduct included: wrongful use of an inhalant or substance with the intent to become high or intoxicated; absent from place of duty multiple times; and with intent to deceive, made false official statements.  Due to evidence of military sexual trauma (MST), post-traumatic stress disorder (PTSD), and a mental health condition found in the applicant’s medical record, the board considered the case based on the liberal consideration standards required by guidance from the Office of the Under Secretary of Defense for Personnel and Readiness and/or 10 USC §1553.  The applicant contended the discharge was inequitable because his suicide attempt was misdiagnosed by a physician, the only misconduct was related to the suicide attempt, that his mental condition impaired military duties, and because the Department of Veteran Affairs (VA) determined that PTSD was service connected as a result of MST. The applicant insists that he was a survivor of MST, diagnosed with PTSD, and received in-patient treatment at Two Rivers Psychiatric Hospital six times within five months for suicidal ideations. He states the Air Force had knowledge of the MST and previous suicide attempts because they were identified on his Personnel Reliability Program (PRP) decertification notice. The applicant states that he listened to the voices in his head to kill himself, and chose huffing computer cleaner as the method because he believed it could instantly stop the brain. The applicant insists the misdiagnosis from the psychiatrist was contrary to two recommendations by physicians at Two Rivers. The applicant believes the physician improperly characterized huffing as recreational drug use instead of an attempted suicide. The applicant contends the discharge was improper because the seven retention criteria were not properly applied. The applicant insists that he did not have a history of drug use, had no desire to use drugs in the future, and never engaged in drug distribution. The applicant believes that he was a dedicated Airman who excelled at his job prior to the suicide attempts. He states that he is currently receiving treatment, and is receiving 50% disability compensation through the VA. The applicant is requesting the upgrade so that he can return to military service, and have access to the G.I. Bill.  The DRB reviewed the applicant’s entire record and noted extensive mental health treatment with multiple medications, and multiple in-patient and partial hospitalizations. However, the DRB found no evidence to indicate the applicant was unaware of the Air Force policy of zero tolerance for illegal drug use. The board found the negative aspects of the applicant’s willful misconduct outweighed the positive aspects of his military service.  After a thorough review of the service record and input from the board’s psychiatrist, the DRB found that the applicant’s mental health condition was a mitigating factor to the applicant's misconduct, however, it could not completely explain or excuse the misconduct sufficiently to warrant upgrading the discharge.  If the applicant can provide additional information to substantiate his contentions, the board recommends he exercise the right to make a personal appearance before the DRB or appeal the DRB’s decision to the Air Force Board for Correction of Military Records.  CONCLUSION: The board found insufficient evidence of an inequity or impropriety that would warrant a change to the applicant’s discharge. Therefore, the discharge received by the applicant was deemed to be appropriate and his request was not approved.  The DRB results were approved by the board president on 19 Feb 20. If desired, the applicant can request a list of the board members and their votes by writing to:  Air Force Review Boards Agency  Attn: Discharge Review Board  3351 Celmers Lane  Joint Base Andrews, NAF Washington, MD 20762-6602  Attachment: Examiner's Brief (Applicant Only) | |