

**SUMMARY:** The Applicant was discharged on April 5, 2017 in accordance with Air Force Instruction 36-3208, *Administrative Separation of Airmen*, with an Under Honorable Conditions (General) Service Characterization for Misconduct – (Drug Abuse). The Applicant requested an upgrade of their Service Characterization.

The Applicant requested the Board be completed based on a Record Review. The Board was conducted on March 5, 2026. The Applicant was represented by counsel.

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.

**DISCUSSION:** The Discharge Review Board (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 Reentry Code. In reviewing discharges, the Board presumes regularity in the conduct of governmental affairs unless there is substantial credible evidence to rebut the presumption, including evidence submitted by the Applicant. The Board thoroughly reviewed 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 DRB provided a notice to inform the service member of resources available to help answer their questions about the application process and/or to help them supplement their application, to include information on the types of evidence that can be submitted to support a claim; information regarding potential eligibility for mental health treatment and evaluation services offered by the Department of Veterans Affairs (VA); general information regarding Veterans Service Organizations that may assist with DRB applications, and their right to retain counsel; a link to a database of legal services organizations that serve members of the military, veterans, and their families; the weblink to the VA's Directory of Veteran's Service Organizations; and information regarding reasonable accommodation requests from the DRB in the application and adjudication process.

The Applicant's record of service included the following documented misconduct leading up to their discharge:  
-Article 15 for wrongful use of marijuana

The documentary evidence the Board considered as part of the review includes, but is not limited to the DD Form 293, *Application for the Review of Discharge from the Armed Forces of the United States*, and any additional documentation submitted by Applicant and/or counsel; the Applicant's personnel file from the Automated Records Management System (ARMS); and the DRB Brief detailing the Applicant's service information and a summary of the case.

The Applicant stated they faced significant familial and personal hardships, including securing housing for their father who had a lung issue, multiple suicide attempts by their mother, and undergoing surgery to remove a tumor which resulted in a temporarily paralyzed vocal cord. They also reported their partner suffered a miscarriage and ended the relationship shortly after the surgery. The Applicant stated they began using marijuana as a means to cope and to sleep, particularly during the holiday season. Since being discharged, the Applicant has found employment with an organization that works to combat veteran homelessness.

The DRB determined the Applicant's discharge was inequitable. While the discharge was for wrongful use of marijuana, a medical review revealed significant mitigating circumstances. During their service, the Applicant sought mental health treatment for familial issues and was diagnosed with adjustment disorder with mixed

anxiety and depression. Post-service, the Applicant was diagnosed with more severe conditions, including psychosis, disorganized schizophrenia, generalized anxiety disorder, and bipolar disorder.

The Board concluded it was more likely than not that these conditions were manifesting during the Applicant's time in service and that the drug misuse was a result of these underlying mental health issues. Therefore, the Board approved the Applicant's request to upgrade their service characterization.

**LIBERAL CONSIDERATION:** Due to the Applicant's contentions or evidence of a mental health diagnosis and/or experiences of sexual assault or sexual harassment and/or records documenting that one or more symptoms of mental health conditions and/or experiences of sexual assault or sexual harassment existed/occurred during military service found in the Applicant's record, the Board considered the case based on the liberal consideration (LC) standards required by guidance from the Office of the Under Secretary of Defense for Personnel and Readiness and 10 USC §1553. The Board included a member who is a physician, clinical psychologist, psychiatrist or social worker with training on mental health issues connected with post-traumatic stress disorder (PTSD) or traumatic brain injury (TBI) or other trauma. Specifically, the Board reviewed the four questions the Under Secretary of Defense provided that Boards should consider when weighing evidence in requests for modification of discharges due in whole or in part to mental health conditions, including PTSD: TBI, sexual assault, and sexual harassment. The Board considered the following:

1. Did the veteran have a condition or experience that may excuse or mitigate the discharge?

*Yes. The Applicant contended on their DD293 application that they were dealing with multiple family stressors related to their parents relying heavily on them for emotional and financial support as evidenced by: supporting their father who was battling homelessness and a 9/11-related lung illness; and supporting their mother who was victimized in an abusive relationship, that led to multiple suicide attempts and short-term incarceration. In addition, the Applicant reported their partner lost a pregnancy and, not long after they had surgery to remove a tumor that left them with a temporarily paralyzed vocal cord, their partner ended the relationship. As a result of these stressors, the Applicant started using THC products in December 2016 to cope with the stress and to sleep as they struggled during the holiday season. Additionally, the Applicant marked PTSD and Other Mental Health as issues/conditions related to their request.*

2. Did that condition exist/experience occur during military service?

*Yes. The Board considered the "Kurta Memo" guidance that "a diagnosis made by a licensed psychiatrist or psychologist that the condition existed during military service will receive liberal consideration." In this case, a review of the available records revealed that a duly qualified mental health provider diagnosed the Applicant with Adjustment Disorder during their time in service, so the condition existed during their time in service. A review of available records revealed the Applicant first engaged with mental health services in November 2016 when they presented to the Mental Health clinic due to stress they were experiencing from a variety of family issues, largely related to their parents. They reported feeling overwhelmed and unable to sleep from the stress of trying to provide emotional and financial support to each of their parents. The Applicant had a formal intake the following day but declined continuing services with mental health, telling the provider they 'just felt the need to vent.'*

*In February 2017, the Applicant had a Flight PHA and reported they had been dealing with increased stress as they were trying to manage both family issues as well as legal issues. As a result of the symptoms the Applicant reported, the flight surgeon placed them on Duties Not Including Controlling, referred them to ADAPT after a urine screen came back positive for THC, and entered a consult to Mental Health. The Applicant had an intake with Mental Health and acknowledged they had been feeling stressed and anxious when they were seen back in November, but believed if they revealed this, they could be taken off Air Traffic Controller duty. The Applicant requested a medication evaluation to help with their anxiety. The provider diagnosed the Applicant with an Adjustment Disorder and set up a psychiatry appointment.*

*The psychiatrist also diagnosed the Applicant with an Adjustment Disorder and prescribed medication for anxiety. During the assessment, the Applicant was consistent as they noted they used THC to help them sleep and reduce the anxiety they were experiencing from the family stressors related mainly to their mother's significant history of Bipolar Disorder and suicidality. The Applicant continued briefly in treatment through March 2017 until they were discharged from the Air Force in April 2017. The psychiatrist noted the Applicant, "presents with moderate depression and severe anxiety symptoms in context of psychosocial stressors complicated by genetic loading for mental illness."*

*Post service, the Applicant was diagnosed with a serious mental illness, Disorganized Schizophrenia. This diagnosis was made by the VA approximately 2 years post-discharge. It is possible the Applicant could have been experiencing prodromal symptoms of schizophrenia during their time in service, but a review of available records did not reveal clear evidence of prodromal symptoms. However, prodromal schizophrenia symptoms can exist years before more advanced symptoms appear and can be difficult to assess due to their subtlety or may be easily attributed to another condition such as anxiety. A review of all available records does show clear evidence that the Applicant has been consistently suffering from Disorganized Schizophrenia since at least early 2019 and has been regularly treated for the condition since they were formally diagnosed.*

3. Does that condition, or experience actually excuse or mitigate the discharge?

*Yes. The Board considered the "Kurta Memo" guidance that "Conditions or experiences that may reasonably have existed at the time of discharge will be liberally considered as excusing or mitigating the discharge." The Board finds that the Applicant's condition does excuse or mitigate the discharge.*

*A review of the Applicant's DD214 revealed they were discharged with an Under Honorable Conditions (General) characterization for Misconduct (Drug Abuse) with 4 years, 5 months, 5 days time in service. A review of the available portions of the Applicant's discharge package revealed evidence cited by command to support the discharge included: an Article 15 for wrongful use of marijuana between on or about 1 December 2016 and on or about 22 December 2016.*

*A review of all available records revealed the Applicant engaged briefly with mental health prior to their misconduct, and then again after their misconduct. The Applicant addressed why they did not continue treatment when they first presented to mental health, explaining they were concerned if they revealed their true level of stress and anxiety, they would have been removed from their duties. The Applicant returned to the mental health clinic after they tested positive for THC on a random urinalysis. During their initial appointment with the psychiatrist, they related that in late December, their mother's Bipolar Disorder/mental health issues reached a crisis point, and they talked her out of committing suicide. The psychiatrist noted, "During the holidays pt felt overwhelmed with mother's problems and they weren't sleeping which increased anxiety. They states they were desperate for relief and turned to an acquaintance for "vape" which had THC in it. They report this did help with sleep and anxiety however they tested positive on a random urinalysis...."*

*On the DD293, the Applicant marked PTSD as being an issue/condition related to their request. A review of available records found no history of a PTSD diagnosis or PTSD symptoms during the Applicant's time in service or after their time in service. As previously noted, post service, the Applicant was diagnosed with service-connected Disorganized Schizophrenia and when they were formally diagnosed, the psychologist specifically noted, "Veteran's diagnosis of Schizophrenia is a progression of their service-connected mental disorder."*

*Overall, considering the totality of the information in the case file, there is a nexus between the Applicant's misconduct that led to their discharge and their diagnosed mental health condition. It is more likely than not that the misconduct was an effort to relieve symptoms of stress and poor sleep related to their diagnosed mental health condition of Adjustment Disorder. Further, considering their service-connected diagnosis of a serious mental illness, and the possibility the early signs/symptoms of this disorder were manifesting during their time*

*in service, the Board is convinced that there is sufficient evidence that the Applicant's condition/experience mitigated their discharge.*

4. Does that condition, or experience outweigh the discharge?

*Yes. Based on a review of available records, there is sufficient evidence of a mitigating connection between the Applicant's in-service mental health condition or experience and the misconduct that led to their discharge. Therefore, the condition or experience does outweigh the discharge.*

Additionally, the Board considered the factors laid out in the attachment to the Under Secretary of Defense memorandum, *Guidance to Military Discharge Review Boards and Boards for Correction of Military/Naval Records Regarding Equity, Injustice, or Clemency Determinations*, dated 25 June 2018, known as the "Wilkie Memo." The Board considered the factors listed in paragraphs (6)(a) -(6)(l) and (7)(a) -(7)(r) of this memorandum.

**FINDING AND CONCLUSION:** After a thorough review of the available evidence, to include the Applicant's issues, summary of service, service/medical record entries, and discharge process, the Board found the discharge was inequitable. The DRB voted unanimously to **approve** the Applicant's request. Therefore, the awarded Service Characterization shall change to "Honorable," the Narrative Reason for separation shall change to Secretarial Authority, and the Reentry Code shall remain 2B. The DRB results were approved by the Presiding Officer on March 5, 2026.

Should the Applicant wish to appeal this decision, they must request a personal appearance before this Board before applying for relief to the Air Force Board for Correction of Military Records (AFBCMR). In accordance with DAFI 36-2603, *Air Force Board for Correction of Military Records*, all Applicants before the AFBCMR must first exhaust available administrative avenues of relief before applying to the AFBCMR otherwise their AFBCMR case will be administratively closed until such time that the Applicant avails themselves of the available avenue of relief. Therefore, should the Applicant wish to appeal this decision, they must first exercise their right to make a personal appearance before the AFDRB.

Instructions on how to appeal an AFDRB decision can be found at <https://afrbaportal.azurewebsites.us>

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, MD 20762-6435

Attachment:  
Examiner's Brief (Applicant Only)