

*The original of this document contains information which is subject to withholding from disclosure under 5 U.S. C. § 552. Such material has been deleted from this copy and replaced with XXXXXX's.

**United States Department of Energy
Office of Hearings and Appeals**

In the Matter of:	Personnel Security Hearing	)	
		)	
Filing Date:	April 17, 2025	)	Case No.: PSH-25-0104
		)	
		)	

Issued: October 23, 2025

Administrative Judge Decision

Diane L. Miles, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXXXXX (the Individual) to hold an access authorization under the United States Department of Energy's (DOE) regulations, set forth at 10 C.F.R. Part 710, "Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position."¹ As discussed below, after carefully considering the record before me in light of the relevant regulations and the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position* (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual's access authorization should be granted.

I. Background

The Individual is employed by a DOE Contractor, in a position that requires that he hold a security clearance. In connection with the Individual's request for access authorization, the DOE reviewed the results of a background investigation conducted by the Office of Personnel Management (OPM), which revealed that the Individual had a 12-year history of seven alcohol-related arrests. Exhibit (Ex.) 8 at 132, 137, 190–211; Ex. 7 at 90–105, 107–10.

Due to the security concerns raised by the Individual's alcohol-related arrests, the local security office (LSO) referred the Individual for an evaluation by a DOE-contractor psychiatrist (DOE Psychiatrist), who conducted a clinical interview of the Individual in October 2024 and issued a report (the Report) of his findings. Ex. 5. Based on his evaluation of the Individual, the DOE Psychiatrist opined that the Individual met sufficient diagnostic criteria in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)* for a diagnosis of Alcohol Use Disorder (AUD), Severe, without adequate evidence of rehabilitation or reformation. *Id.* at 32.

¹ The regulations define access authorization as "an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material." 10 C.F.R. § 710.5(a). This Decision will refer to such authorization as access authorization or security clearance.

In January 2025, the LSO informed the Individual, in a Notification Letter, that it possessed reliable information that created substantial doubt regarding his eligibility to hold a security clearance. Ex. 1 at 7–9. In a Summary of Security Concerns (SSC) attached to the Notification Letter, the LSO explained that the derogatory information raised security concerns under Guideline G (Alcohol Consumption) of the Adjudicative Guidelines. *Id.* at 5.

In February 2025, the Individual requested an administrative hearing, and the LSO forwarded the Individual's request to the Office of Hearings and Appeals (OHA). Ex. 2. The Director of OHA appointed me as the Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), I took testimony from six witnesses: the Individual, the Individual's employee assistance program (EAP) Counselor, the Individual's girlfriend, the Individual's supervisor, the Individual's friend, and the DOE Psychiatrist. *See* Transcript of Hearing, OHA Case No. PSH-25-0104 (Tr.). Counsel for the DOE submitted eight exhibits, marked as Exhibits 1 through 8. The Individual submitted 7 exhibits, marked as Exhibits A through G.

II. The Summary of Security Concerns

Under Guideline G, “excessive alcohol consumption often leads to the exercise of questionable judgment or the failure to control impulses, and can raise questions about an individual’s reliability and trustworthiness.” Adjudicative Guidelines at ¶ 21. Conditions that could raise a security concern under Guideline G include: “alcohol-related incidents away from work, such as driving while under the influence . . . or other incidents of concern . . .,” “habitual or binge consumption of alcohol to the point of impaired judgment,” and a “diagnosis by a duly qualified medical or mental health professional (e.g., physician, clinical psychologist, psychiatrist, or licensed clinical social worker) of alcohol use disorder.” *Id.* at ¶ 22(a), (c)–(d).

In invoking Guideline G, the LSO cited the following incidents:

- A. On October 4, 2000, the Individual was arrested and charged with Driving While Intoxicated (DWI) and Reckless Driving. The Individual admitted that, before this arrest, he drove off the road and crashed into a fence after having consumed a half gallon or more of tequila. The Individual further admitted that he does not recall being arrested due to blacking out;
- B. On March 29, 2002, the Individual was arrested and charged with Aggravated Driving While Intoxicated (ADWI), Reckless Driving and Fleeing, and Eluding an Officer. The Individual admitted that, before this arrest, he had been consuming whiskey all day;
- C. On February 7, 2003, the Individual was arrested and charged with Aggravated Battery on a Household Member, Possession of Alcoholic Beverages by a Minor and Minor Allowing Self to be Served. The Individual admitted that, before this arrest, he consumed whiskey throughout the day, physically beat his girlfriend, and blacked out. Additionally, in February 2003, while serving probation for these charges, the Individual violated his probation by testing positive for alcohol consumption, and, as a result, he was incarcerated for two days;

- D. On October 20, 2004, the Individual was arrested and charged with Battery Upon a Household Member. The Individual admitted that, before this arrest, he punched holes in cabinets during a verbal altercation with his girlfriend, after he had been consuming whiskey throughout the day;
- E. On December 31, 2004, the Individual was arrested and charged with Driving Under the Influence (DUI), Unlawful Use of a License, No Insurance, and No Registration. The Individual admitted that, before this arrest, he had been consuming whiskey throughout the day;
- F. On September 30, 2005, the Individual was arrested and charged with ADWI, Fleeing the Scene of an Accident, Criminal Damage to Property, two counts of Reckless Driving, Unlawful Use of a License, and No Insurance. The Individual admitted that, before this arrest, he consumed whiskey to intoxication, crashed his car into another vehicle, failed to stop, and subsequently crashed into a wall, totaling his vehicle;
- G. On February 12, 2012, the Individual was arrested and charged with Disorderly Conduct. The Individual admitted that, before this arrest, “while in a delirious state due to alcohol withdrawal, he went to his neighbor’s home and was banging on the doors and windows”; and
- H. In his November 13, 2024, Report, the DOE Psychiatrist opined that the Individual met sufficient *DSM-5-TR* diagnostic criteria for a diagnosis of AUD, Severe, without adequate evidence of rehabilitation or reformation. The DOE Psychiatrist further concluded that the Individual had “a 27-year history of habitually consuming alcohol, binge consuming alcohol and numerous episodes of impaired judgment.”

Ex. 1 at 5–6. The information cited above justifies the LSO’s invocation of Guideline G.

III. Regulatory Standards

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a decision that reflects my comprehensive, common-sense judgment, made after consideration of all the relevant evidence, favorable and unfavorable, as to whether the granting or continuation of a person’s access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) (“clearly consistent with the national interest” standard for granting security clearances indicates “that security determinations should err, if they must, on the side of denials”); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization “will not endanger the common defense and security and will be clearly consistent with the national interest.” 10 C.F.R. § 710.27(d). The individual is afforded a

full opportunity to present evidence supporting their eligibility for an access authorization. The Part 710 regulations are drafted so as to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. *Id.* § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

IV. Findings of Fact and Hearing Testimony

During his May 2024 enhanced subject interview (ESI) with an investigator, the Individual reported that he started drinking alcohol as a teenager. Ex. 8 at 201. He reported that his history of alcohol consumption included drinking alcohol to excess, drinking and driving, and experiencing blackouts. *Id.* at 198–202. He reported that after his March 2002 arrest for ADWI, he was required to attend Alcoholics Anonymous (AA) meetings. *Id.* at 193–94. The Individual attended AA meetings until 2005, but he never had an AA sponsor and he never completed the program. Ex. 5 at 29. In 2012, the Individual attempted to stop drinking alcohol, but he experienced symptoms of alcohol withdrawal and later resumed drinking. Ex. 8 at 201; Ex. 5 at 27–28; Tr. at 66–67, 106. At this time, and the Individual’s drinking became a pattern for him; every day after work he would buy alcohol and drink. Tr. at 68. In 2013, he became the sole manager at his place of employment; he had a lot of responsibilities and was spending a lot of time at work. *Id.* As a result, he did not have a lot of free time to drink. *Id.* By 2019, when he met his current girlfriend, his alcohol consumption had decreased. *Id.* He would have an alcoholic drink “every now and then,” and he maintained that drinking pattern for years. *Id.* at 69. By May 2024, the Individual was controlling the amount of alcohol he consumed, and he typically drank “a beer about once a month or less.” Ex. 8 at 201.

During his October 2024 psychiatric evaluation, the Individual acknowledged that his history of alcohol consumption reflected poorly on him, that he had made “significant improvements in his life,” and that he had not consumed much alcohol during the previous year. Ex. 5 at 29. He reported that he no longer used alcohol as a coping mechanism, and that he relied upon his relationships with his children and his need to set a positive example for them as motivation for him to remain sober. *Id.* He also described participating in outdoor activities, such as hunting, fishing, and performing yard work, to stay busy and avoid drinking alcohol. *Id.* He reported that he did not often feel the urge to drink. *Id.* He reported that, as of the evaluation, he typically consumed one alcoholic drink per month, usually a cocktail. *Id.* He also reported that during the 30 days before the evaluation, he had an alcoholic drink with dinner, and on “other days,” he had two beers. *Id.* As part of the psychiatric evaluation, on October 30, 2024, the Individual underwent Phosphatidylethanol (PEth)² testing, the result of which was negative for alcohol consumption and indicated “zero alcohol intake or less than two drinks/day on average per seven days for men.” *Id.* at 30, 50–51. The Individual’s PEth test was consistent with his reported alcohol consumption. *Id.* The DOE Psychiatrist also found the Individual was “not consuming much alcohol through force of will and out of a desire to be a good father” to his family. *Id.* at 32.

² The Report indicates that PEth is “a marker of alcohol exposure to the body.” Ex. 5 at 30. “PEth does not occur naturally in the body so elevated PEth levels are evidence of alcohol exposure. Alcohol binds to the red blood cell membrane creating PEth.” *Id.* PEth “reflects the average use of alcohol over the previous 28-30 days” and a PEth test result exceeding 20 ng/mL is evidence of “moderate to heavy ethanol consumption.” *Id.*

After having evaluated the Individual, the DOE Psychiatrist diagnosed him with AUD, Severe, without adequate evidence of rehabilitation or reformation. Ex. 5 at 33–34. To show adequate evidence of rehabilitation or reformation from his AUD, Severe, the DOE Psychiatrist recommended that the Individual abstain from alcohol for 12 months, supported by monthly PEth testing. *Id.* at 34. He also recommended that the Individual successfully participate in AA or SMART Recovery for a minimum of one year. *Id.* He also recommended that the Individual immediately contact his employer’s EAP for an “alcohol relapse prevention assessment,” and complete the EAP’s six-week alcohol education class and their 12-week class focused on substance use. *Id.*

During the hearing, the Individual testified that he stopped drinking alcohol in October 2024, when he had a cocktail with dinner. Tr. at 65. When he realized that his history with alcohol was a concern for the DOE, he decided he would not drink again. *Id.* at 70. He explained that he did not receive the Notification Letter until late January 2025 or early February 2025, so he did not know PEth tests were recommended between November 2024 and January 2025. *Id.* at 104–05.

On February 27, 2025, the Individual began a six-week alcohol education class, provided by his employer’s EAP. Tr. at 10–11. During the hearing, the Individual’s EAP Counselor testified that the six-week alcohol education class met weekly and provided the Individual education on alcohol, alcohol’s effects on the body, and a discussion on the difference between “use, misuse, and problem use.” *Id.* at 11–15. She explained that she facilitates group discussions that occur during the class, organizes presentations, and ensures that all class participants complete the reading, journaling, and homework. *Id.* at 11. She explained that the Individual completed all his reading assignments, and he completed all the required homework for the class. *Id.* at 12, 15. The Individual had good attendance, listened to others, and was engaged in the class. *Id.* at 15. She explained that the Individual told her that he found the class to be very informative and very educational. *Id.* at 15–16. The biggest shift that she saw in the Individual was the insight he gained about his history of drinking and realizing that having one or two drinks can lead to old habits. *Id.* at 16–19. She observed the Individual being “authentically himself” during the group sessions and that he was not just “checking a box,” to fulfill an obligation. *Id.* at 18–20. The Individual testified that he found this class to be very informative about how alcohol affects the body and the size of an average drink. *Id.* at 72–73. He said it was good to hear the other participants’ stories and hear about the tools other people used to avoid drinking alcohol. *Id.* at 73. The Individual completed this class on April 10, 2025, and he submitted a Certificate of Completion for the class. Tr. at 74; Ex. B.

In March 2025, the Individual started attending AA meetings. Tr. at 84. The Individual submitted attendance sheets showing that he attended AA approximately twice weekly, from March 5, 2025, to August 20, 2025. Ex. E at 1–3. During the hearing, the Individual explained that the AA meetings were an hour long and that he was active with his AA group. Tr. at 84. During the AA meetings, everyone told stories, read a chapter out of The Big Book, and then discussed what they read. *Id.* at 87–88. He explained that he was more engaged with this AA group than he was in 2002, when he was ordered to enter AA after an ADWI. Tr. at 97; Ex. 8 at 202. He submitted a letter from a fellow AA member, which indicated that the Individual has been an active participant in AA, regularly attends meetings, and maintains “open communicating with peers for accountability and support.” Ex. E at 2. The Individual explained that he has a friend who provides him with support through the AA program, like a sponsor, with whom he talks daily to discuss their daily meditations and The Big Book. Tr. at 84–85. The Individual submitted a letter from his

friend, which indicates that the Individual had demonstrated a sincere commitment to the program, had read The Big Book, had attended weekly meetings, and checks-in with him daily. Ex. E at 3.

On April 2, 2025, the Individual began attending a 12-week class focused on substance use, which was also provided by his employer's EAP. Tr. at 21. The EAP Counselor testified that during this class, participants learn from a workbook and must complete homework assignments, which the Individual fulfilled. *Id.* at 21–22. The Individual testified that during this class, he participated in open discussions on random topics related to alcohol. *Id.* at 76. He also explained that the EAP Counselor used a workbook that covered early recovery skills and the stages of recovery. *Id.* at 80. He also explained that the class included discussions of triggers to drink alcohol and mechanisms for dealing with urges to drink. *Id.* at 81. The Individual completed this class on June 25, 2025, and submitted a Certificate of Completion for the class. Tr. at 76–77; Ex. A.

Since May 2025, the Individual has attended SMART Recovery meetings. Tr. at 88, 92. He attends these meetings virtually, and he explained that he cannot attend the meetings in person because he works during the day, his girlfriend works overnight shifts at her job, and he has young children at home that he must take care of. *Id.* at 88. He explained that during SMART Recovery meetings, a facilitator guides the participants through a discussion of their triggers to drink alcohol, their successes avoiding alcohol during the week, and tools that can help them overcome urges to drink. *Id.* at 90, 93–94. He described the SMART Recovery classes as being educational. *Id.* at 94. The Individual submitted attendance sheets for the SMART Recovery meetings he attended, approximately four times per week, from May 27, 2025, to August 26, 2025. Tr. at 94–95; Ex. F.

On June 26, 2025, the Individual began attending a third alcohol class through his employer's EAP; this class is provided for 12 weeks and meets weekly. Tr. at 22, 72, 79. The Individual explained that during this class, the participants shared their stories about abstaining from alcohol and their success. *Id.* at 79. The EAP Counselor explained that the third class required that its participants abstain from alcohol, but the class did not conduct alcohol testing of the participants to verify that they have stopped drinking. *Id.* at 22. The EAP Counselor described this class as a support group, where participants discuss different topics related to alcohol. *Id.* As of the hearing, the Individual had completed five classes and had six or seven classes remaining. *Id.* at 23, 78–79. He last attended class on August 13, 2025. *Id.* at 23. The EAP Counselor explained that throughout all three alcohol classes, the Individual acknowledged that he had an alcohol problem. *Id.* at 24–25. She also believed that the Individual was committed to maintaining his abstinence from alcohol. *Id.* at 26–27.

The Individual's girlfriend testified that she and the Individual have lived together for six years. Tr. at 53–54. She did not know much of the Individual's life before they started dating, in 2019. *Id.* at 54. When they started dating, the Individual would consume a beer "here and there." *Id.* at 59–60. She knew that the Individual had decreased his drinking so he could be a good role model to his children. *Id.* at 55, 57. When the Individual is in a place where alcohol is served, he does not order alcohol to drink, and she has not observed him struggle to avoid drinking. *Id.* at 62. The last time she observed the Individual drink alcohol was last year, when he had a cocktail during dinner. *Id.* at 55, 58–59. She knew the Individual attended AA meetings and that he attended alcohol-related meetings at his job. *Id.* at 56. The Individual told her that the AA meetings opened his eyes to what his life used to be like and how much his life has changed. *Id.*

The Individual's supervisor testified that he has known the Individual for two years. Tr. at 33. He described the Individual as a reliable person, with a great work ethic, and as having good character. *Id.* at 33–36. During the past few months, he has seen the Individual once, every two to three weeks. *Id.* at 35. He enjoys having the Individual work on his team and he believes he is a trustworthy person. *Id.* at 37. The Individual's friend testified that he has known the Individual since 2011. *Id.* at 40, 48. He explained that he had not seen the Individual drink alcohol in more than a year. *Id.* at 41. He knew that the Individual no longer wanted to drink alcohol, and that he developed several hobbies to keep him busy, such as hunting. *Id.* at 42, 45–46. He explained that the Individual was “a different person” from the one he knew in 2011, and that he “has it more together now.” *Id.* at 45. A few months ago, he and the Individual were at a birthday party, during which he did not observe the Individual drinking alcohol. *Id.* at 43. During the previous four months, he visited the Individual at his home and did not see any alcohol present in the home. *Id.* at 43–44. He also knew the Individual was attending AA meetings. *Id.* at 46.

The Individual believed that his triggers to drink included stress from work and that it became a part of his daily routine to drink after work. Tr. at 81–82, 107. As of 2012, he would get out of work, go to the liquor store to buy alcohol, go home, drink it, and do it all again the next day. *Id.* at 82. Now, because he is in a different environment at home than he was before, he has not had the urge to drink alcohol in a long time. *Id.* at 82. He explained that his children are a big motivator for him to continue abstaining from alcohol so he can be present in their lives. *Id.* at 82–83, 102. He acknowledged that he had a history of being “in trouble” because of his drinking, and he decided that he is no longer going to let alcohol create problems in his life. *Id.* at 98–99. As for a support system, the Individual explained that he received a lot of support from his girlfriend, and his fellow AA member and friend who acts like a sponsor and contacts him every day. *Id.* at 97. He has also met additional people, through his attendance at different meetings, whom he can contact for support if he needs help avoiding alcohol. *Id.* at 98.

The Individual submitted documentary evidence, to support his testimony concerning his abstinence from alcohol, that in February 2025, March 2025, April 2025, May 2025, June 2025, July 2025, and August 2025, the Individual underwent PEth testing, the results of which were negative for alcohol consumption. Tr. at 103; Ex. C; Ex. D. His long-term goal is to abstain from alcohol. Tr. at 88, 102.

The DOE Psychiatrist testified that after listening to the testimony provided during the hearing and reviewing the Individual's exhibits, he believed the Individual was reformed from his AUD, Severe. Tr. at 137, 139.³ He explained that a person achieves reformation when they “come to recognize they have an alcohol use disorder, [and they] have stopped drinking.” *Id.* at 125. He stated that the Individual has shown that he is reformed from his AUD, Severe because he has supported his testimony that he has abstained from alcohol by submitting seven consecutive PEth tests, dated from February 2025 to August 2025, which were negative. *Id.* at 126–28. He explained that it is common for there to be a lag between when he produces his report, after an evaluation, and when a person reads it and learns of the recommendations for treatment. *Id.* at 127. The Individual's February 2025 PEth test would have detected alcohol consumed during the middle of January 2025, so the only opportunity the Individual would have had to drink alcohol, and not be detected, would have been during November 2024 and early December of 2024. *Id.* at 128. He

³ As for the Individual's rehabilitation from his AUD, Severe, the DOE Psychiatrist opined that the Individual was “well on the way” to demonstrating rehabilitation, but because he had not yet progressed through AA, he was not rehabilitated from his AUD, Severe. Tr. at 126–127, 133–135.

stated that the Individual had a negative PEth test in October 2024, and that he did not doubt that the Individual had been abstinent from November 2024 to January 2025. *Id.* at 127–128, 139. He credited the Individual with ten months of abstinence. *Id.* at 139. As for a prognosis, the DOE Psychiatrist opined the Individual “ha[d] a good prognosis if he continues to do what he’s been doing.” *Id.* at 136.

V. Analysis

The Adjudicative Guidelines provide that conditions that could mitigate security concerns under Guideline G include:

- (a) So much time has passed, or the behavior was so infrequent, or it happened under such unusual circumstances that it is unlikely to recur or does not cast doubt on the individual’s current reliability, trustworthiness, or judgment;
- (b) The individual acknowledges his or her pattern of maladaptive alcohol use, provides evidence of actions taken to overcome this problem, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations;
- (c) The individual is participating in counseling or a treatment program, has no previous history of treatment and relapse, and is making satisfactory progress in a treatment program; and
- (d) The individual has successfully completed a treatment program along with any required aftercare, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations.

Adjudicative Guidelines at ¶ 23.

I have thoroughly considered the record of this proceeding, including the submissions tendered in this case and the testimony of the witnesses presented at the hearing. After due deliberation, I have determined that the Individual has sufficiently mitigated the security concerns raised by his history of alcohol consumption under ¶ 23(b) of the Adjudicative Guidelines.

The Individual acknowledged his history of maladaptive alcohol consumption. During his ESI, he admitted that his history included drinking alcohol to excess, drinking and driving, and experiencing blackouts. During his psychiatric evaluation, he acknowledged his history of alcohol consumption and how it reflected poorly on him. During the hearing, the Individual credibly testified that, when he was younger, drinking alcohol became a part of his daily routine, and that his alcohol consumption created problems in his life, and the testimony of the EAP Counselor supports that the Individual acknowledged he had an alcohol problem while attending alcohol classes at his employer’s EAP. I also note that the Individual credibly testified that by 2019, his job responsibilities, his wish to set a good example for his children, and his new relationship motivated him to decrease, and control, his alcohol consumption. The Individual maintained a pattern of controlled drinking for the past six years, without the use of an alcohol treatment program.

The Individual credibly testified that his alcohol consumption decreased as of 2019. His testimony was supported by his girlfriend, who testified that during the past six years they have lived together, the Individual has had a beer “here and there” and has not struggled to avoid alcohol. Tr. at 59–60, 62. The Individual’s last alcohol-related arrest occurred 13 years ago and all evidence, including the negative October 2024 PEth test, indicates the Individual has not habitually consumed alcohol to the point of impaired judgment between 2019 and the October 2024 psychiatric evaluation.

Since realizing that his history of alcohol consumption was a concern for the DOE, the Individual has demonstrated that he has taken actions to address this problem. From February 2025 to April 2025, the Individual successfully completed the six-week alcohol education class provided by his employer’s EAP. The Individual also successfully completed a 12-week class, focused on substance use, also provided by his employer’s EAP, and as of the hearing, he completed five classes of a third alcohol class provided by his employer’s EAP. The testimony of the EAP Counselor supports that the Individual had good attendance, completed his assignments, and actively participated during each class. The EAP Counselor also testified that the Individual showed his commitment to maintaining abstinence during each class.

As of the hearing, the Individual submitted documentary evidence to support his testimony that he attended five months of AA meetings in person. The Individual provided details as to the substance of his AA meetings and he provided a letter from a fellow member, which indicated he was an active participant during meetings, maintained regular attendance, and demonstrated a sincere commitment to the program. The Individual also attended SMART Recovery meetings from May 2025 to August 2025. Given the Individual’s caretaking duties at home, I have no concerns with the Individual’s attendance of these classes virtually. He credibly testified that during these classes, there are facilitated discussions, during which participants discuss their triggers to drink alcohol and the successes they have had avoiding alcohol. The Individual also produced attendance records to verify his attendance at these meetings.

Furthermore, the Individual submitted seven negative PEth tests, dated from February 2025 to August 2025, to support his testimony that he abstained from alcohol since he received the DOE Psychiatrist’s report in January 2025. The DOE Psychiatrist explained that the February 2025 PEth test would reflect if the Individual consumed alcohol during January 2025, and I agree with the DOE Psychiatrist’s opinion that the Individual had most likely abstained from alcohol between November 2024 and January 2025. Therefore, the Individual has demonstrated a clear and established pattern of abstinence from alcohol for approximately ten months. Finally, the DOE Psychiatrist opined that since he diagnosed the Individual with AUD, Severe, in October 2024, the Individual recognized that he had an AUD and had stopped drinking, and was, therefore, reformed from his AUD, Severe.

I conclude that the Individual has acknowledged his pattern of maladaptive alcohol use, has provided sufficient evidence that he has taken actions to overcome the problem, and has demonstrated a clear and established pattern of abstinence from alcohol sufficient to mitigate the stated Guideline G concerns. Adjudicative Guidelines at ¶ 23(b).

VI. Conclusion

For the reasons set forth above, I conclude that the LSO properly invoked Guideline G of the Adjudicative Guidelines. After considering all the evidence, both favorable and unfavorable, in a

comprehensive, common-sense manner, including weighing all the testimony and other evidence presented at the hearing, I find that the Individual has brought forth sufficient evidence to resolve the concerns set forth in the SSC. Accordingly, the Individual has demonstrated that granting him a security clearance would not endanger the common defense and security and would be clearly consistent with the national interest. Therefore, I find that the Individual's access authorization should not be granted. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Diane L. Miles
Administrative Judge
Office of Hearings and Appeals