

Ep. 43: Security clearances and mental health

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[Frances Martinez] Good day gladiators, thank you for listening to another episode of the "Sword and Shield" podcast. It's Frances Martinez, director of Psychological Health for the 960th Cyberspace Wing. I'm here with two guests. I have in front of me, - [John Covington] Good afternoon, I'm John Covington, chief of security for the 960th Cyberspace Wing. - [Frances Martinez] and on the phone I have, - [Master Sergeant Mundy] Good afternoon, this is Master Sergeant Mundy, part of the 316 training squadron here at Goodfellow Air Force Base. - [Frances Martinez] So thank you guys for joining us today. One of the reasons why we have you guys, because we really wanted to talk about some myths, right? As it relates to security clearances and mental health. I know John, you work with people that have, or are going through the security clearance process, and Sergeant Mundy has some personal experiences. So, we're going to be talking about that stuff today. - [John Covington] All right. - [Martinez] Alrighty. And so it's really important, right? That people really understand where the myth even came from. So, I know earlier we were talking about back in the day, right? - [Master Sergeant Mundy] Yes. - [Martinez] Stuff happens. So, let's talk about that for a little bit. - [John Covington] So a long time ago there was the stigma of gaining and maintaining a clearance, whether it was just secret or TS/SCI, and there was this awful stigma surrounding if you go and seek mental health, they're gonna immediately pull your clearance. Don't do it. It's frowned upon, you know, keep it to yourself and don't do that. And we want to make sure that everybody's clear and aware that just because, you know it doesn't fly anymore that, oh, we used to do things, it's how we always did it, and that's how we're going to proceed now. We definitely want to shift gears and get the awareness out there that that is no longer the case. It's not a thing. Please, please, please, if you need to seek mental health, please go do it. - [Martinez] Yeah. So the DOD is more progressive now as it relates to mental health, right? And seeking mental health - [John Covington] Yes. - [Martinez] Versus like, "sorry we're going to kick you out." Or, you know "you're going to lose your clearance, lose your job." And I think that still lingers today because generally when people meet with me, that's the first question they ask me. "Are you going to take my clearance away? Does this have any bearing on my clearance? What's, what's the deal?" And that's one of the things that, you know, I struggle with working with people and building that trust. Because number one, I'm not going to take your clearance, I don't have that authority. - [John Covington] Right. - [Martinez] Number two, I don't take notes. Right? That's the luxury of my position. I don't have to take notes. I don't have to report anything to mental health or your military records, your medical records. So no one knows what

we talk about. And so that's, that's another thing that people that come and talk to me have a little bit of difficulty in building that rapport and that trust. So, but I do have some numbers and I want to talk about this for a little bit just to really put things into perspective. So the Defense of Counterintelligence and Security Agency reported these numbers through the DOD CAF metrics: from 2012 to 2018 there was a total of 2,361,717 total adjudicative actions. - [John Covington] A lot. - [Martinez] A lot, right? Okay. So, cases with psychological issues were 46,985. So that's only 2.03%. - [John Covington] Not a lot, not a lot. - [Martinez] (laughs) Here is where it gets even slimmer. So denials of revocations for only psychological related issues is 12. - [John Covington] Minute numbers. Comparatively speaking, it's very, very small. - [Martinez] Right. And so that's, you know, bottom line: it's extremely rare for someone to lose a clearance for only a psych related issue. Right. And so let's talk a little bit about that. What does that look like? - [John Covington] So, for the adjudicative guidelines, when it comes to a clearance, there's, so in the security realm there's 13 of these adjudicated guidelines, and when you're going through the clearance process and you'll have the investigator come and talk to you, they're going to interview all the references that you gave them. They're going to ask them, and you, all these questions about foreign influence or have you ever misused information technology or computers. Ask you about your foreign influence foreign preferences, criminal conduct, drug involvement. One of the questions is: psychological conditions. So, out of those 13 guidelines, you know, we're talking about a very, very small percentage that any type of adverse actions has ever been taken. So, with that, there are some, there are some ways to mitigate this. If you ever do go to seek mental health, and what that is, you know, if you're self identifying, you're self-reporting, you're seeking it, that actually that you have sound judgment, you have trustworthiness because you're able to self identify and be self-aware enough that, "hey, I need to go talk to somebody." And that's exactly what we want people to do. We want them to go reach out and be proactive about seeking the mental health. When you don't seek mental health, things bubble up. - [Martinez] Yes. - [John Covington] It's a little harder, you know, and it can flow over into other areas. You might be stressed at work. You might be stressed at home. So, these might be contributing factors. And then as everything compounds, you'll start to see a bleed into other areas. And there are some times when, if you don't seek it out on your own, if you're not able to self identify other people might start to notice it. Say, in the workplace your First Sergeant might get involved. You might get Command Directed to go, to go seek mental health. And that's when, you know, we, we start to get into the area of, oh, you should have, you should have already seen us. Now we're notifying you that we have acknowledged it, we see it, and we would like for you to seek mental health. - [Martinez] Yeah. And there's definitely a risk involved with not seeking mental health. - [John Covington] Absolutely. - [Martinez] So decrease of Force readiness, right? You're unable to perform your work-related duties and it affects everything. You know, your, your family life, your home life your civilian life, if you're a reservist, right? - [John Covington] Yes. - [Martinez] And so it also increases suicide risk. You know, the one thing to help decrease suicide risk is seeking mental health treatment. And one of our podcasts that we had before back in September was Colonel Swanson. He talks about surviving suicide. He had two

severe suicide attempts and he ended up losing his clearance because he wasn't seeking mental health treatment. He talks about how he gets his clearance back after the suicide attempts. But it's, I know it's a lot harder to get it back after you've lost it versus, you know, just, you know, getting the proper care that you need in the moment - [John Covington] Right. Doing it upfront, you know heading that off with that self-identifying, self-awareness, definitely the best route to go. Worst-case scenario, let's say you get Command Directed, that's still not going to be the end all be all. You know, you can still regain that. If for whatever reason during that Command Directed assessment, say it was taken for whatever reason, you can still regain that. One of those factors is in the adjudicated guidelines, it says that if you have counseled by a duly qualified and noted and trusted government mental health assessor. You know, and the situation has been identified. It is now mitigated, there's no probability or likelihood of exacerbation or recurrence of it. Clean bill of health, you're good to go. So, not a big deal. - [Martinez] Yeah. And so also, not seeking mental health treatment, right, increases security concerns as it relates to your clearance because you might not be in a mental state that's, you know capable of doing your, your job appropriately. - [John Covington] Yes, right, sometimes. - [Martinez] Yeah. And so today we have Sergeant Mundy is on the line and he has a story about, you know, mental health treatment that he sought out and he's an intelligence person, right? And so, I thought that would be our wheelhouse being a Cyberspace Wing. - [John Covington] Absolutely. - [Martinez] So, Sergeant Mundy, over to you. - [Master Sergeant Mundy] Thank you, ma'am. You are right, I am an intelligence person, not an intelligent person, (group laughs) but definitely intelligence. I'm a one in four alpha by trade, that's a Cyber Intelligence analyst. I'm here at Goodfellow to do, to be an instructor for the one in four schoolhouse here, just recently PCS here. But previously to this, while I was stationed at GBSA, Also underneath the 67 cyber wing. No, but the three 76 costs. So I'm very familiar with your wing and pretty much all the job roles that are in there. - [Martinez] Right next door to us. - [Master Sergeant Mundy] Yes mam, right across the street. - (Martinez laughs) - But ya thanks for letting me tell my story. I would like to get it out there because it's important you're starting to hear that seeking mental health that it's not end all be all. And it really got to fight the stigma because it really did save my life. It saved me and my family's a relationship. But just to backtrack here a little bit, go back to the past. In 2015, I actually cross-traded in Intel I'm a prior maintenance troop. I got worst cross-trained. So that comes with a lot of stress on me. I just showed up to work one day and I was like, hey you have an email. I had an email that just said, hey, you're going to be an insult analyst. I was like, excuse me, I had no idea this was on a table. And so it was like an immediate GCs so that put stress on me and my family. We had to move. Then it's like, Hey, you have to you have to get a TSS dual polygraph. Like what does that even mean? - [Martinez Laughing] - [Master Sergeant Mundy] All the stuff that goes back into my history. I was like, oh my god, what's going to happen I going through, I'm getting adjudicated I'm going through, going through the tech school, and my wife becomes pregnant. She becomes a high risk. So I have all this new stuff going on, with work, I'm trying to go to work My wife's going through some things that are that are scaring me in a sense, you know and putting that kind of like this whole pressure on means. And one day in class I'm

just sitting in class and all of a sudden my heart starts to flutter like really, really weirdly. And I'm like, Oh no, what is that? And then all of a sudden it just starts to pile up really hard. And I think I was starting to have a heart attack. So I just tell everybody, please call 911. What's going on? - [John Covington] Wow. - [Master Sergeant Mundy] Do that. It'll go in the hospital, should be back. Will the doctors comes, comes from the back and is like "hey man, it's not a heart attack. You're having a panic attack." A panic attack? What is that? - [Martinez Laughing] - [Master Sergeant Mundy] So he breaks it down for me. So he breaks it down for me. He's like, you've got a lot of built up subconscious things. He's like what's going on in your life? So I was just sitting talking to him for 5 to 10 minutes. It's like, yeah, man you got a lot of stuff that's going on. So after that, I didn't, I felt okay, didn't really feel how I thought you even just like a one time thing. And so in graduating PCs from Goodfellow to San Antonio where I became part of the, well it was the seventy fifth at a time but now it's the 375 cost. And I started to feel those things again, you know it's a new place. New stressors. Trying to, you know, fit in. I'm a staff Sergeant at this time, you know, but I'm training like I'm, I feel like I'm underperforming. I just stuff at home was kind of rocky because, you know I didn't feel like I was doing good at work so I just kinda bring that home. And then I bring home back to work. And so all this stuff was starting to build back up to my head again. And I went and talked to one of my buddies and I was like, "Hey I think I need to go talk to somebody" Because I was starting to have panic attacks again. Like I did whenever I was at this though he's actually in my class. So he was like, don't you ever talk to mental health? Is there even a pull that clearance that you just got? So I was like, Oh man, okay. - [Martinez] How scary is that, right? - [Master Sergeant Mundy] Yeah and I was like, well what am I supposed to do at that point? But yeah, it got to the point to where I was having panic attacks. Like I couldn't speak myself through a panic attack just because I was so anxious all the time. I was so worried. So scared, you know, personal things, all of the work things that are going on. You know? I don't want to mess this up. It's the only thing I got. This is my career. This house is for my family. I don't want to lose my clearance cause then I'll lose the air force. But then one day it got to the point where I just couldn't take it anymore. And I thought about maybe that I was going to do something stupid. So instead of doing that, I said, I don't care. I'm just going to go talk to somebody and I'm going to mental health. I'm going to go try and get this figured out. I'd rather, if it is the case, I would rather lose my clearance than lose my wife and lose my family. - [Martinez] Absolutely. You know we sometimes have to put things into perspective, right. - [Master Sergeant Mundy] So that's what I did. I went straight to mental health. I was diagnosed with General Anxiety with Panic disorder. Which all that means is, you're anxious due to past panic attacks. So yeah, I, I did that and I got prescribed medications. With the medications, It's, it's super simple for me. I mean, it's different to get across, it might be in DOD. I'm not sure, but for me it's just like a 90 day hold to made sure that you tell the right dosages make sure they get your brain function right, no negative side affects. That was, that was fine. You know, I got on that. I got on medication. I started to feel better. I started to perform better at work. My relationships. I was, I, I saw the mental health on therapy also as well learn the mindfulness techniques. I learned that. And not only talking to mental health but like I can talk to individuals like. I can

talk to chaplains, you know, just going trying to talk to somebody to get some help. And so I never lost my clearance. I never got a suspended clearance. Nothing ever came of it. Whenever I had to, And so as your data, actually on PCs for training and PCs back. And so I had to redo my security clearance paperwork to ask you what the paperwork, Hey saw any type of mental health. So I put myself on down there. And so whenever you go to your personal interviews they actually, so I went to the Texas crypto logic side whatever I was going through to get that that clearance to that part, they saw that on my paperwork it actually said, Hey, this is great. You know, we ask that people go to seek, and to find help. It's good. It's glad that you self identify and do this. Just pretty much everything did you guys just said it was absolutely correct. And I will see a doctor the next day. And I'm just, it was great. I feel I really got to beat the stigma because you know as long as you, as you see the triggers you see the warning signs, you always seek to help, 99.9% of the time you were going to be asleep. Fine. - [Martinez] Right. - [Master Sergeant Mundy] I mean that's fine, but my little crystal story blade if you have time, I can talk to you about being active duty first Sergeant for four months straight for my squadron. And I'll say, I also saw the other side of that. Where you see individuals not get helped not get hey need what they need. And so the do get command directed. But also like Mr. Kelly. He said, even though some of those guys did ask I've seen stories where people were inpatient for six seven weeks. They got their clearance pulled, but I've also seen them because I was there six years. I saw them get them back, you know, was just making sure you take the proper steps to take care of yourself. So that's really all the air force wants for you or the military. Take care of yourself, take care of the mission. - [John] Awesome. Thank you for sharing that. And I just wanted to make sure everyone was clear on this, you sought mental health, you put it down on your paperwork, you were actually prescribed medication and you still never lost your clearance. - [Frances Martinez] And that's another, another myth, right? I'm going to be put on medication. I can't do anything, which is false. Right? You have to obviously be forthcoming with what medications you're on if you're uncertain medications but also tell the physicians, Hey, I have this. This is what I do as far as my job duties. And they know which medications are okay. And which medications are not okay. - [John Covington] They might be able to give an Alternative. Definitely. There's always options out there. We just want to make sure that the one option that people are not seeking that mental health. - [Martinez] Absolutely. That's what we always want people to do. And, and if you're worried, you know about seeking mental health, going to the mental health clinic, come and speak to me, you know give me a call, text me. That way, we can really point you in the right direction. Sometimes you won't even have to go to mental health. It's something that we can deal with in office. Just a couple of coping skills, some strategies, and you know, send you on your merry way. Sometimes it's very unlikely, but sometimes, you know we have to go the route with, you know getting further treatment, right. And, you know, getting, you know on medications and things like that. So we always try to do the least invasive type of treatment before going to more progressive treatment. - Absolutely. - [Martinez] So, so Sergeant Mundy, is there any last words that you have that you'd like for our gladiator listeners and everyone else out there to know? - Yeah. So sure. Seek help. I still seek help. I still go talk to them. I do everything I can to try to keep

my mind open and clear to know that as your goal you're not alone. I can guarantee you either going through this at the same time where it has gone through. And can help you and guide you. We just gotta be out because I'm tired of the suicide rates going up in the air force, military wives. We've got to be just, and just know that somebody loves you. I love you. So let's just seek help if you need it. - Thank you. And yeah. So in 2020, we were facing three suicides a week in the air force alone. And so any way that we can definitely spread the word break the stigma and get the help that you need because you matter, right. Everyone matters. And everyone is someone's brother, sister, dad, uncle you know, and so on and so forth. And so it's important that we really give people the help that they really need. John, thank you so much for joining us today. We appreciate your expertise. And if anyone has any questions, as it relates to mental health and your security clearance we'll have them reach to you - [John] Absolutely, here to help. - [Martinez] and Sergeant Mundy, thank you so much for joining us today and sharing your story. Right? Cause it's scary sharing stories, but I think it really also helps people to really understand that you know, they're not alone and you've been there. You've done that. And you're here to spread the word. - [Sergeant Mundy] Thank you for the opportunity ma'am. I appreciate it. - And so gladiators, if you or someone you know are contemplating suicide, please contact the suicide hotline at +1 800-273-8255. Thank you so much for listening into this episode, gladiators out.