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## **Cleared DoD Employees At Risk - Report 2 A Study of Barriers to Seeking Help**

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Report 2  
A Study of Barriers to Seeking Help**

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14. ABSTRACT PERSEREC examined the relationship between DoD security policy and federally mandated employee assistance programs (EAPs) for civilians and counseling/referral services for military personnel to identify any barriers for cleared DoD employees to using these programs. The study, based largely on interviews, but also on focus-group information and on a review of policy documents and other literature, found that policy is in place to help cleared individuals with personal problems get access to the counseling and treatment they need. However, research showed that cleared employees, civilian or military, often remain suspicious that their attendance at such programs will result in clearance revocation. Thus, some consult counseling programs outside the federal system, eschewing the very programs that the government has set up to help them. Report 1, designed for the policymaker, makes various recommendations for augmenting policy guidance, and for enhancing security education programs to underscore the fact that people can get help without putting their security status in danger. Report 2 documents the research and presents findings and conclusions; it also contains a series of appendices that provides background information for the interested reader on such topics as the EAP movement, military counseling/referral programs, and DoD personnel security policies and programs.					
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## Preface

In the wake of an alarming number of espionage cases involving cleared U.S. employees in the early-to-mid 1980s, the DoD Security Review Commission under the chairmanship of General Richard G. Stilwell, USA (Ret.) recommended that a personnel security research center be set up. In 1986 PERSEREC was established. The center was charged with producing data-based information for policymakers to facilitate making informed decisions on personnel security policy, with the ultimate aim of reducing the likelihood of people committing espionage.

People are drawn to espionage for a variety of complex and interconnected reasons, many of which are caused by unresolved personal problems. Professional help—from programs and services provided by the government—may prevent personal problems becoming so acute that individuals are driven to desperate acts. Although most individuals have problems at various times in their working lives, they do not commit espionage. Troubles are resolved in one way or another: through counseling from family, friends or professionals, or through the passage of time and changing circumstances. Those who eventually do commit espionage often wish they could have prevented it. For example, one convicted spy in prison in Fort Leavenworth poignantly described how receiving counseling might have stopped him in his tracks. *“If somebody had said something to me and put a block (counseling) in front of me...that would have been enough to stop the process at least for a while, to give me time to think and breathe. I would have been out of the picture, for a minute anyway. And that might have been the minute to change me.”* If government employees know about the various counseling programs and can appeal to these programs for help, this “block” may prevent them from crossing the line.

To this end, PERSEREC undertook a study of the relationship between DoD personnel security policy and federally mandated employee assistance programs (EAP) for civilians and counseling/referral services for military personnel. The goal was to identify any barriers that prevent cleared DoD employees from using these programs.

We have produced two reports. *Cleared DoD Employees at Risk – Report 1 Policy Options for Removing Barriers to Seeking Help* presents some basic background and a series of recommendations concerning a problem of growing importance to the DoD: How does DoD encourage people to deal with their personal problems while at the same time maintain personnel security requirements for people who have access to classified information? This report, designed for the policymaker, answers three questions:

- What is the problem?
- Why does this problem need to be addressed now?
- What can policymakers do about the problem?

*Cleared DoD Employees at Risk, Report 2, A Study of Barriers to Seeking Help* is for the reader requiring more detailed information. It documents the research and presents findings, conclusions and recommendations. Its appendices cover copious background information on such topics as aspects of the EAP movement, military counseling/referral programs, and DoD personnel security policies and program.

After reviewing security policy, the authors show in Report 2 that policy is in place to provide access to care for people with personal problems, usually without affecting their clearance status. However, when the authors visited the field, they found that many cleared people do not trust the system and are reluctant to participate in DoD-sponsored counseling programs for fear that their clearances will be jeopardized.

Report 1 will be of primary interest to DoD policymakers who administer the present policy and who will perhaps act upon the report recommendations. Reports 1 and 2 will be of use to security professionals responsible for making personnel security clearance decisions; these personnel are attempting to make the system work to satisfy both national security interests and employees' personal needs. Professionals in personnel security, EAP programs, and the military counseling programs will also have an interest in the reports, as will military commanders. After all, such individuals share the common goal of a reliable and trustworthy workforce whose members feel confident they can address their personal problems in a supportive security environment.

James A. Riedel, Ph.D.  
Director



## Acknowledgments

We would like to thank many people for their help and advice on this project. We promised all interviewees—at headquarters and in the field—that their names would not be mentioned in this report. However, we are most grateful for the time they took in educating us. We appreciate their frankness in describing the present system—not only the relationship between counseling programs and the security system, but also the possible barriers that prevent cleared personnel from seeking help for their personal problems. We value their generosity in suggesting improvements to the current system.

We are particularly appreciative of the people who volunteered to participate in the focus groups that provided a view of what potential users feel about employee assistance programs (EAPs) and other counseling services in the DoD.

Some additional eight people helped jump-start the research by sharing their views or by steering us initially through bureaucratic mazes; some helped later by reviewing the reports. In addition, Colleen Crowley and Mary Anderson (Navy); Jean Smith (Air Force); and Don Stout (Army) were instrumental in gaining us access to the various military installations. Major Elaine Henson’s office at HQ Marine Corps arranged entrée at a Marine Corps installation. Various individuals in the central adjudicative facilities and policy offices of the Services reviewed the reports for accuracy. We would also like to thank Kelly Buck of TRW Inc., who helped facilitate the focus groups.

We are especially grateful to Roger Hartman, Senior Health Policy Analyst, OASD (Health Affairs)/TRICARE Management Activity, and to Russell DeRitis, Chief, Security Division and Chief, Security Policy at OSD/Washington Headquarters Service, who read and critiqued the draft of Report 2. Frank Cavanaugh, Office of Personnel Management’s expert on civilian EAPs, also helped by reading and commenting on Report 2.

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## **Executive Summary**

### **Security and At-Risk Employees in DoD: The Dilemma**

Research described in this report addresses a widely held perception in the Department of Defense (DoD) that cleared personnel are reluctant to seek assistance for personal problems out of concern for their clearance status. Likely effects of such reluctance include (1) suffering for the people whose problems persist, (2) heightened security risk when individuals' untreated problems worsen to the point of affecting an individual's reliability, and (3) the loss from the workforce of otherwise valued personnel.

At issue is whether, in continuously evaluating cleared employees for access to classified information, the personnel security system is believed by some to have created barriers for those who should seek assistance for personal problems. If so, what measures can DoD take, through enhanced security education or through policy modification, to improve the articulation between the personnel security system and the various DoD-sponsored counseling programs?

### **Findings**

Two separate systems of counseling services exist within the DoD: employee assistance programs (EAPs) for civilian employees, and military counseling/referral services for service members. This research, based on discussions with 146 people in the DoD personnel security system and in EAPs and military counseling/referral services, indicates that policy is in place to ensure access to counseling, treatment and referral services for cleared individuals. Many civilian and military personnel have successfully used such services and returned to work with their problems resolved and their clearance intact.

However, Office of Personnel Management (OPM) data indicate that utilization of EAPs is significantly lower for DoD civilian employees than for other federal civilian personnel and for private sector employees. In addition, of those who participate in DoD EAPs, the proportion of management-directed referrals is higher than in other federal agencies. Hence, we concluded that resistance to self-referral is higher and there are indeed impediments to seeking help, at least from government EAP programs.

That these constraints are related to the fear of jeopardizing clearance status was confirmed by opinions expressed by both security professionals and cleared-employee focus groups. Civilian focus group members frequently stated that they were afraid of losing their clearance if they consulted an EAP, despite the fact that in many organizations security officers tell them that their clearances will not be affected simply by voluntarily seeking help.

Four areas for which people seek help from various types of counseling services are of particular concern to personnel security professionals. These are drug use (including substance abuse), alcohol dependency, mental and emotional conditions, and financial issues. While EAP and other assistance providers are committed to a policy of client confidentiality, employees are aware of the fact that they are under an obligation to report, prior to each

periodic reinvestigation (PR), any counseling or treatment for alcohol dependency and for mental or emotional problems. People could be accused of falsifying information if they did not report on the Form SF-86 even an initial evaluation. If they answer the SF-86 questions honestly, they believe they become susceptible to more intense inquiry, possibly to a clearance revocation. Of course, the latter is unlikely unless significant derogatory information is unearthed in the process. But fears, while not necessarily grounded in reality, appear real to people, and such people often believe that the security system protects national security at the expense of vulnerable employees. Security education programs have not allayed their fears and misperceptions.

Policymakers, adjudicators, and field administrators reported that rank-and-file employees frequently express anxiety about the implications of self-referring. Meanwhile, the security professionals we interviewed, almost without exception, say that, in addition to enhanced security education that will clarify existing policy, they would welcome adjustments to personnel security policy that would encourage people to come forward for help when they need it. Also, most security professionals say that, depending on the circumstances, they are willing to work with people who admit to problems and who take appropriate action to address them. In fact, there is often a level of common sense and understanding operating in day-to-day security practices that extends beyond regulations and working by the book.

Possible remedies range from enhancing security awareness programs, to making changes in current policy, to offering a safe-harbor program in which all people who apply for counseling help will be offered protection from security actions for the time they are in treatment. People would enter such a program only under a set of nonnegotiable conditions that would preclude them from using the program as a shelter. Several protective programs have already been successfully implemented to provide climates in which employees feel less vulnerable. While we have not yet evaluated the following in detail, the Air Force's SART program for substance abuse, the Navy's conditional clearance option, and the Department of Energy's Employee Assistance Program Referral Option (EAPRO) appear to offer possible models on which a future DoD program might be developed that extends safe-harbor protection without affecting clearance status.

Critics of safe-harbor proposals have cautioned that leaving vulnerable personnel in positions of trust while in rehabilitation presents an unacceptable risk. However, this must be weighed against the greater danger posed by people in dire need of counseling who are fearful of the security consequences of seeking such help. To have these people under the umbrella of a protective program would mean that (1) they have been identified, (2) they are getting help, (3) they are being monitored, and (4) DoD has a good chance of retaining an otherwise valued employee. Better this, surely, than not knowing who in the workplace has serious, untreated problems while still having access to classified information.

However, before proposing any sweeping safe-harbor program, we recommend the establishment of a pilot study to explore the viability of such a program.

## Recommendations

We offer recommendations in three areas: a pilot study, policy and practice, and security education and awareness.

### Policy and Practice

**Recommendation 1.** Provide explicit clarification in 5200.2-R to bring DoD policy into harmony with E.O. 12968 by removing barriers to seeking assistance from a government-sponsored EAP or other counseling provider.

**Recommendation 2.** Issue a policy letter to each of the components advising that participation by all cleared personnel in an EAP program (either by self-referral or by management direction), given the absence of additional information of an adverse nature, will not be grounds for an adverse adjudicative action.

**Recommendation 3.** Include in the forthcoming revised adjudicative guidelines statements that participation in an EAP or counseling program is an important mitigating factor and, given the absence of additional adverse information, would not be the basis for revocation or suspension of access.

**Recommendation 4.** Modify guidance on the Standard Form 86 (Items 21 and 25) to remove the disincentive to voluntarily seek assistance for a problem that may be of security concern.

**Recommendation 5.** Identify a single point of contact within the DoD for oversight, policy development, and coordination of employee assistance programs for the civilian DoD workforce regardless of whether employees hold clearances.

### Pilot Study

**Recommendation 6.** Establish a pilot study to evaluate the feasibility of a comprehensive safe-harbor program.

### Security Education and Awareness

**Recommendation 7.** Develop a prototype brochure on “You and Your Clearance” that explains frankly the security benefits and ramifications of seeking help for problems.

**Recommendation 8.** Through DoD and component policy documents, require that security professionals who provide initial indoctrination and refresher briefings to cleared personnel include information about employee assistance and counseling programs, to include new guidance as suggested by Recommendations 1 and 2).

**Recommendation 9.** Develop an exportable training module for supervisors and administrators on how to respond to warning signs and refer at-risk employees to EAPs or military counseling programs.

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## Introduction

### Security and At-risk Employees in DoD: The Dilemma

The research described in this report grew from a widely held perception in the Department of Defense (DoD) that cleared personnel are reluctant to seek assistance to address personal problems because of fear of losing clearance status or professional positions. The concern is that people who fail to consult employee assistance programs (EAPs) or military counseling/referral services<sup>1</sup> may pose inordinate risk to themselves and possibly to national security.

At the same time, DoD, while mandated to provide helping services to such people, has its own responsibilities to protect national security. National security and the security system require that people who protect the nation's secrets be completely trustworthy and reliable. The security system is permitted to delve to a certain degree into people's personal lives to ensure they are able to protect national secrets appropriately.

The ideal would be a better balance between the needs of national security and the personal needs of cleared individuals within the security system. On the one hand, national security is paramount and must be protected. On the other, if cleared individuals within the system have personal problems and do not get help to solve them because of fears for their clearance status, they may eventually become *bona fide* security risks.

Our concern is that the security system may inadvertently be sustaining the kinds of problems it is designed to prevent or ameliorate. For example, if people are frightened to consult EAPs and other counseling services because of fears of the Security Office, then something is wrong with the articulation between counseling services and the security system. If the security system *is* in fact partially the problem, or even if people only *think* it is, there may be some way for DoD to make policy changes or adjustments to ease such problems.

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<sup>1</sup>EAPs are mandated counseling programs for DoD civilians. Most Defense contractor companies, although not required by law, offer EAPs to their civilian employees. Military personnel in DoD have recourse to a different set of counseling programs, which in this report are termed *counseling/referral services*. The basic objective of the civilian and military programs is the same: prevention, identification, and treatment of personal difficulties that adversely affect individuals' ability to perform on the job and, in the case of people with security clearances, might pose a security risk.

While the two programs developed along separate and distinct tracks and take different structural forms, each is based on the same principle: offering help to troubled employees, whether for prevention or treatment, is preferable to allowing problems to worsen, possibly to the point the person might pose a real risk to national security. Both programs also agree on the economic benefits to the organization of having healthy and productive people working: it costs much more to recruit and train new people than to rehabilitate current ones. The philosophy is that most problems can be resolved and that people should in general be given the opportunity to rehabilitate themselves, if at all possible, rather than lose eligibility.

Thus, a central question of this research is: How appropriate is the present balance? How well are the DoD personnel security system and the various counseling programs working together to provide a supportive environment in which people can seek help for problems, yet continue to protect national security?

### **Dynamic Tension among DoD System Parts**

DoD employees—civilians and military—operate in an environment whose parts have competing goals. Security<sup>2</sup> wants to ensure that all cleared personnel are reliable, trustworthy and loyal, and capable of protecting national security. To do this, Security must look at the positive and negative sides of people's lives in order to develop sufficient information to make eligibility determinations. Second, EAP counselors want to ensure that clients can work on their problems with the maximum amount of privacy. These counselors see success in the number of troubled employees treated and rehabilitated. Failure to provide a reasonable degree of confidentiality to EAP clientele would greatly diminish the effectiveness of these programs. Third, military commanders need to know everything occurring in their commands, including people's problems, so that they can maintain appropriate discipline and force readiness. Certainly, the commander's need to know and the government-sponsored counselor's need to protect a client's confidentiality are in conflict.

Thus, dynamic tensions among the three parts of the larger system pull in different directions. Cleared individuals within the system must make a leap of faith: that by voluntarily seeking help they will not automatically incur administrative actions that will adversely affect their clearance. The would-be user is often confused about to whom to speak, how much can be said, and what the consequences will be.

Personnel security programs in the federal government must sometimes balance the risk of retaining a vulnerable employee in a position of trust against revoking clearances or terminating people from employment. For the adjudicator who has to decide who should be granted a clearance, many cases are clear-cut: most employees are continued in their current clearance status. However, flagrant infractions or significant issue information will normally result in denial or revocation of clearances. Occasionally, personal problems are so egregious that they represent a potential vulnerability that could be exploited to the detriment of national security.

However, not all employees with serious personal problems are candidates for clearance denial or revocation. Often, all they need is help. A major goal of DoD is to retain valuable people, and economic realities argue that it is preferable to identify people who have problems, offer them counseling, make sure they work through their difficulties, and then return them to the workforce where they can again be productive. Executive Order 12968 *Access to Classified Information* (1995) emphasizes retaining

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<sup>2</sup> In this report we capitalize the word *security* when we are referring to the collective judgment of those responsible for implementing security policy. Thus, we have sometimes taken the liberty of personifying Security (e.g., Security feels, Security says, etc.), a device not generally popular with grammarians, but one often used in conversation by our interviewees.

personnel while they address their problems.<sup>3</sup> The tenets of the executive order are repeated in the directives and regulations that flow from it.

Personnel security, counselors, and military commanders alike would benefit from mutually supporting any measures that might achieve the right balance between the parts of the system. Such measures would then permit individuals—troubled employees in a big system—to find help without jeopardizing their clearance status before their problems worsen. Some damaging espionage incidents in recent years might have been prevented if people had been able to get help for their serious personal problems.<sup>4</sup>

### **EAP Utilization Rates<sup>5</sup>**

Since 1970, procedures for gaining access to EAPs for alcohol problems (and since 1972 for drug abuse problems) have been in place for all civilian employees in the federal government regardless of clearance level. (This is not true for various intelligence agencies.) However, while government agencies have made significant investments in service contracts to follow these policies and have regularly informed the general workforce about these programs, utilization rates have remained low in many agencies.

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<sup>3</sup> The order mandated that cleared employees be informed about “guidance and assistance available concerning issues that may affect their eligibility for access to classified information, including sources of assistance for employees who have questions or concerns about financial matters, mental health, or substance abuse.”

<sup>4</sup> One vivid case is Jeffrey M. Carney, former intelligence specialist with the Air Force, who was sentenced December 1991 to 38 years. He pleaded guilty to charges of espionage, conspiracy, and desertion. While posted in Germany he began by copying classified documents that he then provided to the STASI. After defecting to East Germany in 1985 he continued to aid the Communists by intercepting and translating official telephone communications of US military commanders and embassy officials in Berlin.

In an interview in 1995 with representatives of Project Shadow that interviewed incarcerated spies for security awareness videos, Carney spoke of how he wished someone had stepped forward to give him the help he needed; this might have prevented his committing espionage. “How come we always knew that the people who committed suicide had family problems before they did it? How do we know that? [The problem is that] Nobody rats on anybody. They see what’s going on. They always think somebody else will take care of it. If you want to do people with problems a favor—and I’m talking from experience—say something! If somebody had said something to me and put a block in front of me and said, “I think Jeff’s got a problem and I don’t think that he’s handling it very well. Supervisor, do something,” that would have been enough to stop the process at least for a while, to give me time to think and breathe. I would have been out of the picture, for a minute anyway. And that might have been the minute to change me.”

<sup>5</sup> The percentage of a workforce that has contacted or taken advantage of EAP services.

**Table 1  
Federal-wide and Department of Defense Civilian EAP Utilization Rates for FY97<sup>6</sup>**

	<i>Total Employees</i>	<i>Total Cases</i>	<i>Total Utilization Rate (% of Workforce)</i>	<i>% of all Cases Referred by Management</i>
All Federal Civilian Employees	1,876,849	70,889	3.8	14
Army Civilian	278,362	6,091	2.1	26
Navy Civilian	216,127	5,189	2.4	22
Air Force Civilian	162,760	1,674	1.0	46
Other DoD Civilian (Pentagon)	14,400	78	0.5	45

As seen in Table 1, OPM reports an overall utilization rate across the federal government of 3.8% for FY97, the most recent year for which data are available. This includes self- and management-referrals. Civilians employed by the Army, Navy and Air Force and the Pentagon make use of EAPs less frequently. At the same time, these same civilians are more likely than the rest of the federal civilian workforce to be referred to EAPs by their managers, as opposed to going voluntarily, a clue that the problem had escalated to the point that a supervisor had to intervene.

OPM further reports (not reflected in Table 1) that in FY97 for civilians in all federal agencies, drug problems accounted for 4% of the presenting problems, alcohol 7%, and the rest (89%) represented emotional, mental, financial, legal, HIV/AIDS, and family difficulties. However, OPM does not break down these “Others” into percentages. For civilians employed by the military Services, the “Other” percentage ranges from 61% to 85% of total cases. The OPM report does not address the issue of who among these people hold clearances. Interviewees for this study, at the bases and posts, did not always have a precise breakdown of presenting problems; however, the major categories of problems for civilian and military appeared to be financial, job-related stress, family, and alcohol. Data from the private sector indicate problems seen most frequently are family crisis (25%), stress (23%), depression (21%), alcoholism (14%), workplace/job conflict (9%) and substance abuse (2%).<sup>7</sup> It is estimated that 5-8% of private-sector workers who have access to employee assistance services use them.<sup>8</sup>

<sup>6</sup> Office of Personnel Management, *Federal Employee Substance Abuse Education and Treatment Act of 1986, Report to Congress Title VI of Public Law 99-570, Fiscal Year 1997* (1998, December).

<sup>7</sup> Data are taken from the most recent survey of member employee assistance professionals, Employee Assistance Professionals Association, Inc., 1996, Washington, DC.

<sup>8</sup> Prevalence and Utilization Rates of Employee Assistance Programs Nationwide, Employee Assistance Professionals Association, Inc., 1998, Washington, DC.

EAP usage rates in excess of 5% are reported in only a few federal agencies. For agencies with rates lower than 5%, it is possible that many more employees are in need of assistance than are seeking it. For civilians in defense agencies in particular, there may be many who need assistance who are refusing to seek it from federal EAPs, or are seeking it privately. This is possibly because they are in denial about their problem, or because they fear the possible negative consequences of self-disclosure: loss of professional status, position, promotion potential, or even security clearance.

Findings discussed in this report suggest that nonutilization of DoD EAPs and counseling/referral programs by troubled employees may be largely a function of the climate of trust in an employee's organization. This climate incorporates two dimensions: organizational commitment to reasonable confidentiality in both the self-referral and supervisory referral process, and a belief that the organization will respond positively in the interest of individuals who admit to difficulties and are willing to address them. In other words, employees with problems are more likely to take action to address them in an environment where they have a sense of protection against administrative action. However, in organizations where the culture favors stoicism, people are less likely to seek counseling help. Sadly, in some cases, this can lead to serious consequences for the affected individuals. In recent years the military services have been increasingly concerned about suicide rates significantly above the national base rate. Efforts have been made with good effect to break down the resistance to seeking psychological help when needed.<sup>9</sup>

### **The Bigger Picture: Baseline Data on Personal Problems**

Among the many problem areas in which government EAPs and military counseling services provide care, four are often of security concern. These are drug use (including substance abuse), alcohol dependency, mental and emotional conditions, and financial issues. Table 1 shows that overall EAP annual utilization rates by DoD civilians range between 0.5% (Other DoD Civilian, Pentagon) and 2.4% (Navy Civilian), significantly lower than for other agencies or for the private sector workforce. Alcohol or drug cases utilization rates are as low as 0.3% and 0.1%, respectively. Utilization rates for all other types of problems combined (including mental and financial) range from 0.2% to 1.7%.

By comparison, it is of interest to look at some prevalence figures for the general population. For example, one source reports that 14 million Americans, or one in every 13 adults (7.6%), abuse alcohol or are alcoholic (NIAAA booklet, 2000). Each year about 600,000 individuals enter treatment for alcoholism. As for drugs, in 1999, an estimated

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<sup>9</sup>Suicide is the ultimate failure of troubled people to seek early help. For 1999 the Army had the highest with 15.5 per 100,000 individuals, the Marine Corps slightly lower with 15, and the Navy had 11. The Air Force, after an intensive program of education and effort at culture change, in 1999 moved its suicide rate down from the 1998 rate of 9.4 to 5.6 (Rhem, 2000; Crawley, 1999). While Service suicide rates are lower than the base rate for the general population (which is 20 per 100,000), the military is still concerned that in some way it is failing to take care of its people.

14.8 million Americans were current illicit drug users, meaning they had used an illicit drug during the month prior to being interviewed. This represents 6.7% of the population 12 years and older (SAMHSA, 1999).

According to the National Institute of Mental Health (NIMH), an estimated 22.1% of American ages 18 and older—about 1 in 5 adults—suffer from a diagnosable mental disorder in a given year (NIMH, 2000). A press release, announcing the publication of the Surgeon General’s report on mental health, states that about 15% of the U.S. adult population use some form of mental health service in any year (NIMH, 1999). It seems that there are impediments for the public at large in accessing mental health services, for the press release adds, “The complex and fragmented mental health service delivery system can create barriers to a full range of appropriate service. Financial barriers and stigma also serve as deterrents to the receipt of appropriate and necessary care” (NIMH, 1999).

As for prevalence data on financial problems, the most recent General Social Survey information on personal finances was gathered in 1991 (National Opinion Research Center, 1991). In that year 1.3% of the nationally drawn sample stated that they were going bankrupt, 8.9% had fallen behind in paying rents or mortgages, and 13.2% were being pressured to pay bills.

While it may reasonably be argued that the federal workforce is somewhat untypical of the general population, the gross disparity between EAP utilization rates and baseline data is evidence that a significant number of DoD employees are, for one reason or another, not making use of the cost-free officially sponsored programs for addressing serious personal troubles.

# Approach

## Research Questions

Security practitioners and employee assistance counselors agree that the best possible world is one in which people with problems feel unconstrained by either lack of personal resources or fear of adverse administrative consequences to address their problems in an intelligent and timely fashion. The central research questions are: How well are DoD EAPs (and counseling services for the military) and defense personnel security programs working together to promote the reliability and trustworthiness of our cleared workforce? And what changes might be necessary in terms of the application of security policy, administrative practice, or education to ensure that the operation of these programs is harmonious and mutually supportive? See Appendix A for further questions derived from these central questions.

## Data Collection

We sought two types of information as part of our data collection strategy: (1) facts about policy and its application, organizational structure, and administrative process, and (2) perceptions and opinions about barriers for people wishing to seek assistance for their problems. Data collection was conducted in four phases. Phase 1 was a review of regulations, directives, and policy guidance, and a review of the history of EAP and military counseling programs. Phase 2 consisted of interviews with policymakers, headquarters-level security and EAP managers, and adjudicative staff at Defense component headquarters. Phase 3 involved interviews with installation-level (posts and bases in the field) managers, security officers, facility security officers, and counseling and referral providers. Phase 4 consisted of focus groups with “ordinary” employees to ascertain their views of EAPs and counseling/referral services.

In the course of the project, we talked with 146 individuals. See Table 2 for a breakdown of interviewees by category. Our study populations at the installations were largely military and civilian DoD employees.

**Table 2**  
**Number of Interviewees by Category**

<b>Adjudicators</b>		<b>Ten Military Installations</b>	
Army, Navy, Air Force, Washington		Personnel security personnel	17
Headquarter Services, Defense Intelligence Agency, Defense Office of Hearings and Appeals	12	EAP personnel for DoD civilians	10
		Civilian personnel	5
		DSS agent	1
<b>Security Policy</b>		<i>Military</i>	
Army, Navy, Air Force, Defense Intelligence Agency	5	Security personnel	8
		Family support centers personnel	9
		Psychological/mental health practitioners	4
<b>DoD Employee Assistance Programs HQ</b>		Financial counselor	1
		Social actions officer	1
Defense Intelligence Agency, Pentagon, Defense Security Service	4	<i>Contractors</i>	
<b>Office of Personnel Management</b>		Security officers	4
Employee Assistance Program chief analyst	1	Human resources officials	3
		EAP administrators	2
<b>OASD Health Affairs</b>		Drug/alcohol program director	1
TRICARE Management Activity	2	Medical records clerk	1
<b>Intelligence &amp; Safety-sensitive Agencies<sup>10</sup></b> (Note: These agencies were not the main focus of the present study, but were consulted to provide context against which to plan our research within DoD. Thus, not all findings in this report will generalize to these agencies.)	15	Unit commander	1
		Chaplain	1
		<b>Advisors/reviewers</b>	8
		<b>Focus groups</b>	30
		<b>TOTAL</b>	146

Please see Appendix A for a fuller discussion of data collection strategy and research methods, and other methodological detail.

It should be noted that all interviewees in the field were promised anonymity, as were the military installations themselves.

<sup>10</sup> Agencies such as FAA, NASA, and the Secret Service, where the safety and protection of individuals and high-value property are one of their highest priorities.



## Findings: Process and Policy

The findings in this study are presented in two sections. This first section—process and policy—contains three parts. It provides (1) an overview of EAP/counseling services in the federal workplace. This is followed by (2) a description of how the personnel security system intersects with employee assistance and military counseling programs, and (3) how adjudicators deal with EAP information. Information in this section is based on a review of directives, regulations, and other documentary material and on interviews with security professionals, employee assistance coordinators, and health care providers who provided an overview of personnel assistance in the DoD. The text box below provides a summary of the issues covered in this section.

- **Overview of EAP/Counseling Services in the Federal Workplace**
- **Personnel Security Policy and How it Relates to Employee Assistance, including DoD-specific Security Policy**
- **How Adjudicators Deal with EAP Information**
  - Attendance at EAP a Mitigating Factor?
  - Different Strategies of Army, Navy and Air Force to EAP
  - DoD Intelligence Agencies and EAP
  - Policymakers' Views on Modifying Policy on EAPs

The second section of the findings (Findings: Perceptions of Barriers, page 19) deals with peoples' notions of what might prevent themselves or others from using the various counseling services in the system.

### Overview of EAP/Counseling Services in the Federal Workplace

For over 30 years, federal agencies have been required to provide their civilian employees with access to an EAP. Civilians may consult EAPs for any purpose, including drugs and alcohol, mental health, financial, marital, family problems, and just about any other problem that they or their families may encounter (rules may differ in intelligence community agencies). Appendix B describes the legislative and regulatory history of the modern EAP. Appendix C discusses the history of the EAP movement, beginning with its roots in 19<sup>th</sup> century social reform movements.

Some federal agencies are large enough to have in-house civilian EAPs, with in-house counselors. The more usual model, however, is for agencies to contract out to private EAP providers. Some agencies enter into consortia with others, and then contract out to a common private provider. Sometimes the provider has an office located within the agency it services. A person with a problem may visit and receive an evaluation and assessment, short-term counseling or, if the problem is more serious, be referred to a counselor in the community. In other cases people will have to call an 800 number and talk with a counselor who may be located across the country. After a telephone evaluation, this counselor will then put people in touch with appropriate counselors in their community. Normal practice is that any short-term counseling of six sessions or

fewer is free; costs for longer term counseling in the community are handled through clients' insurance.

For the military, the system is different. The military has traditionally offered a system of counseling services that are available for military personnel and their families. These include family support or service centers, and a range of allied services such as psychiatrists, psychologists, drug and alcohol counselors, financial advisors, and so forth. Appendix D outlines briefly the history and regulatory underpinnings of some of the major elements of this military program.

Patient records, especially those for alcohol and drugs, are covered by various confidentiality laws (see Appendix E for details). Civilians who self-refer to EAPs can expect total confidentiality; neither their supervisors nor the security office will be informed. The only exception would be if a counselor found that national security might be affected, or that people were posing a threat to themselves or others, had participated in criminal behavior, or had confessed to child or elder abuse. If civilians are referred by supervisors, their privacy rights still apply unless they sign a waiver that allows the supervisor to be advised about their specific problem. If supervisors learn about people's problems pursuant to such a waiver, they may not disclose this to anyone else without the person's consent. If the individual does not sign a waiver, the EAP counselor will advise supervisors only of information that is directly related to work (Defense Personnel Security Research Center, 2000).

However, it is generally acknowledged that military service members have a lower expectation of privacy than civilians due to the special nature of the military mission. In theory, commanders, with their inherent power and their need to know about everything that goes on in their units, are granted authority to ask for individuals' health records. Also, military personnel are encouraged to talk with their immediate supervisors in the chain of command before seeking treatment or help for problems.

### **How Personnel Security Policy Relates to Employee Assistance**

It is beyond the scope of this report to describe in detail the entire clearance process. Briefly, however, personnel security programs throughout the federal government are designed to ensure that access to sensitive and classified information is granted only to persons in whom the system has a level of trust, and who *continue* to be reliable, trustworthy, and loyal. Decisions on whether to grant or revoke a person's clearance status rest on investigative evidence from the person's past conduct and—when appropriate—medical evaluations. The record of behavior, favorable and unfavorable, stands as evidence of an individual's suitability for a position of trust.

The personnel security system continues to be based in part on the principle that, in the interest of maintaining a reliable and trustworthy workforce, individuals who by objective criteria exceed a well-defined risk threshold be selectively excluded, i.e., lose access, or even lose their jobs. The system has depended upon some type of monitoring for adverse indicators that might lead to a reinvestigation, re-adjudication for eligibility, and possible revocation of a clearance.

In the 1995 Executive Order 12968 *Access to Classified Information*, we see a shift from such an exclusionary system, a system that rids itself of problem people simply by separating them from federal employment. The current emphasis is on retaining personnel while they deal with their problems through counseling, medical treatment, or life-skills development. In fact, the order mandates that EAP information be included in security education programs for the cleared workforce. Similar language is in the process of being incorporated into DoD personnel security regulation 5200.2-R, described below.

At issue for this study is whether personnel security programs in DoD present a disincentive to seeking help for alcohol, drug, mental, emotional or financial problems, or other issues that may ultimately lead to risky behaviors. This question will be addressed in a subsequent section of this report where we review the results of employee focus group sessions.

There are several formal policies related to Security and Security's relationship to the various counseling programs. These policies demonstrate that there has been concern about the risk posed by troubled employees, even as far back as the 1953 Executive Order 10450 *Security Requirements for Government Employees*, although that order was silent on the subject of providing concrete help to people. These policies are reviewed in Appendix F in order to demonstrate that an ample regulatory base is in place, both on the Security side and the EAP side, for counseling services for DoD civilian and military personnel.

### **DoD-Specific Security Policy**

National-level policy based on Executive Order 12968 is translated into DoD policy through implementing directives and regulations. Appendix G describes the major policies—DoD Directive 5200.2 *DoD Personnel Security Program* (April 1999) and DoD Directive 5200.2-R *Personnel Security Program* (January 1987).

Military component regulations for personnel security are derived from DoD Directives 5200.2 and 5200.2-R. These regulations are described in Appendix H. They contain provisions for helping to enroll people into EAPs and counseling/referral services. Appendix H presents descriptions of each Security regulation, followed with a brief discussion of the Service's regulations regarding EAP programs (for DoD civilians) and the counseling and referral services (for military members). This juxtapositioning of security and EAP regulations further supports our contention that basic policies are firmly in place to support EAP functions.

### **How Adjudicators Deal with EAP Information**

Because the adjudication process is central to this study, we briefly describe in Appendix I how the clearance process works. We look especially at how formal guidelines are applied by adjudicators in making judgments about people who may have problems but still want to obtain or keep a security clearance. Appendix I also discusses

the important issue of where counseling programs fit in as mitigating factors when adjudicators make their decisions.

### **EAP Involvement: A Mitigating Factor?**

The purpose in interviewing adjudicative and security policy staff was to find out how they process and evaluate information about a person seeking assistance through an EAP or similar program. Does self-referral to a program (or even a positive response to directed or management-referral) count in favor of the person's retaining access? Or—as is feared by many—is it simply the first step of a process that leads to adverse action?

Previous adjudicative guidelines appended to DoD 5200.2-R, effective January 1987, offered a degree of formal protection from adverse action in instances of self-referral to assistance for alcohol dependency. The original guideline stated: "If an individual's alcohol abuse was surfaced solely as a result of self-referral to an alcohol abuse program and there have been no precipitating factors such as alcohol abuse arrests or incidents, action will not normally be taken to suspend or revoke security clearances solely on the self-referral for treatment."<sup>11</sup> This language was dropped in the June 1991 revision of the guidelines, but was retained word for word in the language of Army Regulation 380-67, dated 1988 (still in effect). The concept of considering treatment as a positive factor in clearance determinations reappears in the language of DoD Directive 5200.2, dated April 9, 1999, but in regard to mental health. That directive states, "No negative inference may be raised solely on the basis of mental health counseling. Such counseling can be a positive factor in eligibility determinations."

Thus, we are on reasonably firm ground for arguing that previous and current policy and guidelines embrace the principle that self-referral (or appropriate response to management referral) to counseling should be seen as a positive factor, at least in cases of alcohol dependency and mental health problems. It follows that people's clearance status might be retained so long as they work toward a resolution of their problems. But has this been observed in practice? In what situations have security adjudicators and policies offered some degree of protection or immunity from adverse action while an individual is undergoing treatment?<sup>12</sup>

Almost without exception, security professionals interviewed for this study argued that a person's self-referral to an EAP, counseling, or rehabilitation program strongly mitigates the security concern and is viewed as a positive factor. Directed referrals carry less weight and are considered by some adjudicators to constitute adverse information in and of themselves. But in either case the central adjudication facility (CAF) will request an additional medical evaluation of the individual in cases of alcohol abuse, drug use, or mental conditions to substantiate the severity of the problem.<sup>13</sup>

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<sup>11</sup> DoD Adjudicative Guidelines effective January 1, 1987, p. 119, relating to alcohol abuse.

<sup>12</sup> See Appendix I on the personnel system and adjudicative guidelines, especially the discussion of mitigation.

<sup>13</sup> A medical evaluation is often requested even if no evidence of a problem exists other than entry to an EAP. This, unfortunately, may reinforce an impression by potential EAP users that self-referral could lead to revocation or at least major trouble.

We found no indication that, when adverse information surfaces, administrative action in the field, or subsequent adjudicative actions by the CAF, varies according to the person's clearance level. The only case where the response is clearly different is where the individual is in the Personnel Reliability Program (PRP).<sup>14</sup> In these few cases, access is immediately suspended based on a single adverse report.

We inquired whether information about participation in an EAP by itself would ever be sufficient grounds for adverse actions, such as suspension of access to classified information. The general consensus among adjudicators was that it would not. However, as one adjudicator pointed out, entry into an EAP is usually triggered by a specific *incident* that the individual is now attempting to mitigate. Consequently, the adjudicator stated, involvement in counseling programs is often an indicator that more, adverse information should be sought on that individual; and in about 80-85% of the cases adverse information is found. In some cases, a letter of warning is sent (without suspension of access), advising the individual that there is a security concern that needs to be addressed.

We compare the opinions expressed by these adjudicators with some very limited information available from another source. In a recent study, PERSEREC gathered data relevant to the issues: (a) whether involvement in an EAP or treatment program, by self-referral or directed referral, tends to result in a more favorable outcome when adverse issue information is also present, and (b) whether significant evidence is present to validate employees' anxieties that self-referral to an EAP may ultimately lead to the loss of a clearance.

PERSEREC researchers coded information from over 1,000 files (for FY98) from all the CAFs according to sources of information that led to clearance revocations. The trigger event for each case was captured in a short paragraph. A search of these paragraphs identified 5 cases in which a report of treatment or entry into a rehabilitation program appears to have initiated an inquiry that led to revocation and 6 additional cases in which information about counseling was combined with related adverse facts at the starting point in the process.

While only 11 cases were found where participation in counseling programs may have been the trigger, the data suggest that fears held by cleared employees about the possible effects of self-referral cannot be said to be totally groundless. No doubt the seriousness of the issues in these cases was so compelling that adjudicators could not continue the subjects' eligibility despite the presence of mitigating factors. What is not known at this time, however, is the number of favorably adjudicated cases in which evidence of self-referral or even participation in treatment by management direction has been the positive or decisive factor resulting in a decision to retain the clearance.

The information gathered in the above study is extremely limited. It is clear, however, that information about self-referral to EAPs is sometimes available to defense

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<sup>14</sup> Personnel Reliability Program applies to personnel who have access to nuclear weapons or other highly dangerous materials.

component adjudicators and could be used to balance or mitigate potentially disqualifying adverse information.

### **Diverse Policy Approaches Among Defense Components**

Military policymakers described the various formal guidelines and practices that are in place to protect self-referred individuals from loss of access while in treatment. Some variation exists among the components, but all adjudicators exercise discretionary authority to permit continued access to a person so long as no other derogatory information is present and the individual is attempting to address the problem. As stated earlier, Appendix H describes component security policy in detail; here we review briefly examples of policies followed in various components.

In the Department of the Army, if a service member or civilian enters a rehabilitation program for alcohol abuse, a decision about suspending the individual's access is delayed until the treatment program has been completed and there is no evidence of relapse. Generally this applies to individuals who are not considered alcohol-dependent and who are directed to receive short-term treatment (90 days) to overcome alcohol abuse. In these cases the service member is issued a letter of warning. This practice is consistent with the Army's alcohol and drug abuse prevention and control program regulation, AR 600-85.

Navy adjudicators assured us that where a treatment program for drug or alcohol abuse was entered voluntarily via an EAP or a military counseling program and where there is no other evidence of use or abuse, no adverse adjudicative action will be taken. However, as with the Army, when information about entry into an EAP by a Navy civilian in the field comes to light, this almost invariably triggers an inquiry from the military command for more information. Generally the adjudicator asks for a full medical evaluation for alcohol abuse or for psychological problems. If no other adverse information comes to light, self-referral is considered a big plus on the side of the employee. In fact, due to confidentiality provided by assistance programs, very few self-referrals to EAPs are reported to Security. Also, as with the Army, a management referral for treatment is weighed negatively by the Navy. Should a civilian employee decline to have a psychological examination after a management referral, the CAF initiates action to revoke the clearance.

The Navy also has a formal Safe Harbor provision for civilian employees who admit to prior drug use (SECNAVINST 5355.4, Chapter II, 1989). The program provides protection from disciplinary action for civilians who admit to using illegal drugs, provided they come forward on their own (before they are caught by other means, such as drug testing). They must agree to obtain counseling and to be periodically tested. They must also consent to the release of their records to appropriate management or EAP officials, and refrain thereafter from using illegal drugs. Under these conditions, no disciplinary action for the admitted past use of drugs will be taken.

Safe Harbor, however, applies to the protection of an employee's employment status; it does not protect the individual from adverse clearance action. Security may wish

to initiate action against people because their former drug use may be viewed as potentially disqualifying, and such an action may lead to the clearance being revoked. At some installations, revocation of the clearance means loss of employment since all positions require a clearance. Would-be users know about this “weakness” in the Safe Harbor provision and, we are told, believe that they are much better off going for treatment and rehabilitation in their communities where they believe they have a better chance for confidentiality.

Protection against adverse clearance action for persons in an alcohol rehabilitation program was also formerly observed by the Air Force CAF under regulation AFI 205-32, June 1987 (which, like Army Regulation 380-67, adopted the language of DoD 5200.2-R, January 1987, quoted on page 11 of this report). This was described by one Air Force adjudicator as an “indefinite-period safe harbor.” However, this practice was terminated when AFI 205-32 was superseded by Air Force Instruction 31-501 in 1994. Currently there is no set policy in the Air Force regarding the evaluation of EAP information on any type of issue. Among adjudicators interviewed, self-referral to an EAP is considered to be a point in favor of the employee; however, management referral reflects adversely on the individual. In general, whether self- or management-referred, when the Air Force CAF receives information that a cleared person has entered a treatment program, it makes an effort to seek more information—the nature of the treatment and whether it has been successful and if there is evidence of adverse behavior or impairment of judgment. The adjudicator will request an immediate medical evaluation in the case of alcohol, drugs, or mental/emotional problems.

The Washington Headquarters Services (WHS) adjudication facility employs a more formal method of providing a degree of immunity from adverse action. Here a conditional clearance is issued for cases of alcohol dependency and drug use, and occasionally for severe mental/emotional conditions. In these situations, access to classified information is continued but the employee’s rehabilitation progress is monitored for one year and then re-evaluated.<sup>15</sup> Being an added administrative burden on adjudicators, conditional clearances are limited to alcohol, drugs, and mental/emotional problems. For employees with severe financial difficulties, WHS issues a letter of warning instead; this states that the person’s financial problems must be resolved before a specific date and prescribes financial counseling. If the individual does not improve, a letter of intent to revoke the clearance may be issued.

A senior security official at WHS spoke in another context about clarifying policy related to stress management and WHS employees’ concerns about whether counseling would cost them their own clearances. He said, “We have never disturbed a security

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<sup>15</sup> One security officer at a field installation (and not connected with WHS) objected strongly to the suggestion that conditional clearances become formal policy. Such a move—flagging people as having problems—would in her opinion create yet another category of stigma rather than give people the chance to complete the program in which they were participating. In reality, in this person’s office, they practice informally their own kind of conditional clearance. “We don’t call it a conditional clearance and there is nothing formal said about it. We just get them help. We talk to them, explain what is going on. We make sure that the person knows that if he goes off the track he will lose his clearance. We say, ‘We are not going to suspend your clearance this time, but we will be watching your progress.’”

clearance because someone got counseling and/or treatment. In fact, seeking help is seen as a sensible step and evidence of good judgment, and it won't damage security clearance eligibility. Getting help shouldn't be confused with evidence of severe mental illness, like psychosis, which can indicate that the victim should not have access to national secrets. We all know that these serious situations are very rare." He also said, "We have the support of our management should we decide to choose counseling and/or treatment. None of us has to suffer in silence and feel for any reason that we must allow a problem with stress to grow worse."

### **EAP and Security in the Intelligence Agencies**

While they were not the primary focus of the study, we interviewed EAP and security administrators for the intelligence and safety-sensitive<sup>16</sup> agencies preparatory to learning about DoD programs. Running through the interviewees' statements was the theme that everyone is striving to establish an atmosphere of organizational trust. Furthermore, the agencies regard each employee as a valuable asset whom they will work very hard to keep so long as the employee is honest and forthcoming and is willing to resolve whatever is considered a security concern. (See Appendix J for the contributions made to this research by the intelligence community and safety-sensitive organizations.)

Like the uniformed services, the intelligence agencies maintain a number of administrative policies that delineate just how far the organization is prepared to work with a problem employee. For these organizations where access to highly classified information is required for the job, work and clearance status are solidly linked. Regarding substance abuse, the DIA offers a "firm-choice, last-chance agreement" (a personnel action) in which the employee actually submits a letter of resignation which is acted upon should he or she not comply with the conditions of a treatment program in a specified time period. For employees having severe financial problems, Security delivers an advisory letter that gives the employee 6 months to resolve the problem.

The three intelligence agencies within DoD have taken progressive steps to encourage self-referral by providing protection from removal of access. The National Security Agency (NSA) advises its employees that self-referral for assistance alone will not result in adverse adjudicative action. And NSA management goes as far as to say that self-referral to the agency EAP need not be reported even when completing the SF-86 for periodic reinvestigation. However, Security and the EAP do have a firm agreement that if an issue arises in EAP that is of real security concern, EAP tells Security, and there is a clear understanding about what constitutes reportable behavior. Defense Intelligence Agency (DIA) security professionals are prepared to tell their people that self-referral is definitely to their advantage as long as no serious additional adverse information is present. A similar view was provided by the National Reconnaissance Office (NRO): a problem situation will be investigated, but no loss of access is likely unless other adverse information surfaces.

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<sup>16</sup> Agencies such as FAA, NASA, and the Secret Service, where the safety and protection of individuals and high-value property are one of their highest priorities.



## **Attitudes Regarding Change and Policy Modification**

Policymakers and adjudicators were largely satisfied with existing policies that offer a degree of protection to people who self-refer. However, they would certainly welcome any future policy modifications that could do more to eliminate barriers to people seeking help early. In these times of a strong civilian economy and DoD manpower shortages, several respondents favored any policy reform that would help retain DoD employees whose rehabilitation is reasonably assured.

While considering changes in or modifications to policy, interviewees were quick to warn against any type of blanket immunity to adverse clearance action or vaguely stated policy that may be abused. Some individuals might run for shelter under such protections. One official's remarks represent the sentiments expressed by many, especially officials dealing with the military. "We can't make promises [about immunity] that we can't keep. Any statement must be qualified. This agency is literal-minded; we do things strictly according to the exact wording of a regulation or directive. But we would be positively oriented to any proposals that would improve the overall reliability of the civilian and uniformed personnel workforce so long as important security issues are addressed." At the same time, several security officers raised the point that it is far less risky to have people identified as having problems and placed into counseling or rehabilitation programs than to have them wandering around untreated and still having access to classified information.

Policymakers and adjudicators without exception advocated that more effort go into education. Several mentioned better education for both cleared personnel and security professionals. As one adjudicator put it, there is a real need "to provide more education to help people understand the adjudicative process and help diminish anxiety about seeking assistance." Another adjudicator stated that the biggest problem in this area is how to overcome the prevailing (and negative) culture in the cleared community. He wants people to understand—what is in fact true—that voluntarily seeking assistance when it is needed will not count against them. "They need to be educated."

Most interviewees agreed that education is the key to dispelling myths and misconceptions—or just plain ignorance—about how personnel security policy is applied and several believed that some policy modifications or innovations may be helpful, so long as these do not override the paramount needs of national security.

The personnel security system is set up via executive orders and DoD directives and regulations to try to balance the requirements of national security with the needs of cleared employees presently experiencing personal problems. There are already several ways in which Security can help the troubled person, examples of which are described in Appendix K. Agencies could modify these types of programs to cover not only drugs and alcohol, but a wide range of troubles, including emotional problems.

## Findings: Perceptions of Barriers

This section of the Findings deals with issues that appear to be interfering with a good balance between employee assistance and the personnel security system. The section discusses people's ideas of what might stop them or others from using counseling services in the DoD system. Such barriers—largely feelings and perceptions—may be based in reality, or are simply imagined. But since perception often *is* reality, imagined barriers become the same as real barriers and have to be dealt with, although possibly in different ways.

First, policymakers, adjudicators, and EAP and security professionals give their views on what they believe is going on in the field. This is followed by some additional comments by security professionals on how they view their own programs. Lastly, rank-and-file employees share their ideas about what they see as barriers and impediments. Opinions are not necessarily based in reality. A roadmap to this section is provided.

- **Perceptions of Barriers** (Source: policymakers, adjudicators, and EAP and security professionals)
  - Personal Denial of Problems
  - Worries about Confidentiality
  - Stigma of Seeking Help
  - Fear of the Security System
  - Lack of Trust in the Organization
  - Supervisors' Reluctance to Report Employees
  - Misinformation and Common Misconceptions
  - The SF-86 Dilemma
- **Resource Issues for Security** (Source: security professionals)
- **Perceptions of the Rank and File** (Source: GS-11-13s, E-7s and E-8s)
  - Problems** (civilians)
    - Stigma of Seeking Help, and Ways Around It
    - Lack of Trust in the Government
    - The Security Office, and Repercussions of Reporting an Issue
    - Worries about Confidentiality
    - Downsizing and Low Morale
    - Kinds of Problems and the Special Case of Drugs
    - Uncertainty in the System
    - The EAP Program and Outreach
  - Solutions** (civilians)
    - Obtain Assurances from Security
    - Improve Supervisors' Attitudes
    - Develop a More Positive Stance for EAPs
    - Provide More Effective Outreach
    - Enhance the Role of EAP
    - Use of PERSEREC Report
  - Problems** (military)
    - Concern about the Clearance Depends on the Job
    - Reluctance in the Military to Admit Faults
    - Other Deterrents
  - Solutions** (military)
    - Increase Awareness

In this section, we use many of the people's own words.<sup>17</sup> Also, one quotation from one person does not mean that only one person expressed the sentiment; we use a quote only when it illustrates the sentiments of several people.

Please note that questioning of interviewees was designed to capture their *perceptions* of barriers to employees seeking help. As mentioned above, barriers may only be in the imagination, but they are nonetheless real to the people.

### **Perceptions of Barriers by EAP and Security Professionals**

We interviewed 69 counselors, program administrators and personnel security personnel in the field in the 10 installations. We also spoke with four more individuals from DoD EAPs in Washington, DC. Some of the comments below also reflect the opinions of the 17 policymakers and adjudicators at headquarters about why many at-risk employees refuse or hesitate to seek assistance through government-sponsored EAPs or counseling services.

**Personal Denial of Problems.** The most difficult people for the system to help are those who do not believe they have problems, several interviewees noted. Until those people can be persuaded to admit their problem, there is very little a supervisor can do other than direct them to enter a program to solve a problem they refuse to recognize. One facility security officer in a Defense contractor company said that "People don't want to admit they have a problem, either because they don't accept that they have one, or because they are embarrassed." Such attitudes are part of the basic human condition and result in barriers to getting help.

**Worries about Confidentiality.** Confidentiality was the No. 1 issue to emerge from our interviews. Do people trust the protections of confidentiality that are offered them? Are they convinced that the government will honor privacy agreements for all confidences disclosed to a counselor (other than those required by law to be reported to Security or to civil authorities<sup>18</sup>)? Appendix E lays out the various legislative supports for, and exceptions to, privacy. It also discusses the striking differences in degree of confidentiality afforded civilians as opposed to military personnel. Privacy is a more complex issue in the military, given that commanders have a valid need to know of any personal problems in their units that might jeopardize readiness and security.

Many interviewees said that people have a hard time believing that they can trust a government agency to protect their privacy. "For the military, we cannot promise confidentiality. Only the chaplain has confidentiality," said a director of a family support center used by both military and civilians. This sentiment was expressed by many interviewees who told us that not all service members have the resources to bypass the

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<sup>17</sup> These quotations are taken *verbatim* from field notes, with minor editing to reflect the speaker's intonation or to fold the comments into the flow of the text.

<sup>18</sup> Each state has its own laws about what must be reported to authorities. In general, however, reportable items involve the disclosure of information affecting national security, posing a threat to oneself or others, or evidence of child or elder abuse, and criminal behavior.

military counseling services. But some do. As a security manager told us, “Many of our military personnel do not go to Mental Health at the base hospital because they don’t believe they will get full confidentiality. Many people opt to go outside and pay for their care themselves...especially officers.” Civilians have less to fear because, unless their problem is egregious and required by law to be reported to the authorities, the details of their consultations with counselors will remain confidential. The problem is that users do not know what is reportable to Security and what is not. Being nervous of accidentally stepping into security issues that are reportable by the counselor, they often decide to eschew DoD counseling services altogether and go to private counselors, or not seek help at all. When formal EAP brochures announce that “*In general* (Italics added), information from the EAP may be released only with your prior written permission,” people immediately wonder about circumstances under which information *will* be released without their permission. We heard a few stories of breaches of confidentiality on both the civilian and military sides, but have no way of knowing how frequently such events really occur.

**Stigma of Seeking Help.** It is human nature, several of our interviewees said, to fear exposing themselves to the embarrassment of seeking help for personal problems. So, fear of stigma is a real deterrent, on the installation at least. While the general population may be more understanding of seeking help for problems, stigma still remains in the minds of many who ought to be getting help. Changing a department name from Mental Health to Behavioral Medicine may change the image of Mental Health somewhat, but the fact remains that people believe that going for help will be seen as a weakness. This seems to be particularly so for military personnel and is exemplified by the remarks of a noncommissioned officer (NCO) who said, “On the one hand, in the military trying to get help for a problem is seen as favorable. On the other hand, when you mention using counseling services, then you really *do* come under greater scrutiny. There is definitely that perception, that you are somehow weak for having used such a service.” A counselor for military members said, “For most of my people the fear of stigma is very important. The stigma is simply that the person has to come see me.” A commander said, “Thinking that if you go for help your career is over—this is a myth. It just isn’t true. But the social stigma is still there; they don’t want that mental health label applied to them. So that is definitely a deterrent.” Mental-health types of problems appear to be the most stigmatizing in people’s minds, with counseling for financial problems—at the opposite end of the spectrum—being more acceptable and thus less embarrassing.

**Fear of the Security System.** Mentioned as often as confidentiality and stigma was fear of the Security Office, especially if one’s job is dependent upon the clearance. Whatever the regulations say and however many security briefings affirm that seeking help is not necessarily a career-killer, many people are still frightened of Security. They sometimes would rather go outside the system. A young unit commander told us that “Everyone is very concerned about their clearance. And people do seek assistance or counseling off the installation to avoid their problem becoming known to authorities on base. They go outside the gates.”

“In some places on this installation, if you lose your clearance or access, there is no place to go. You lose your job,” said a clinical psychologist in a mostly civilian organization. “So people are really fearful of seeking help for problems.” Some of the very young people in the military, on the other hand, were reported by several interviewees as being much more concerned about losing their driver’s license than any clearance!

Most people do not believe Security when it tells them that they won’t get their clearance revoked for certain infractions. A chaplain said (of military people), “They come to me because they don’t trust the counseling services. Some stronger reassurance is needed in the area of seeking counseling, because people do run scared. There is an attitude or perception that counseling will ruin your career. I try to help people get past the block and refer them to professionals who can help.” People just cannot believe that Security is there to help. This poses a heavy challenge for security educators to reassure people that they are safe. A director of a family support center told us in some frustration, “Seeking counseling is a mitigating factor and seen as a plus for a troubled person, but how on earth can we get people to believe that?”

Those who recognize they have a problem and know they need help are often hesitant to seek counseling because of their security clearance status. The problem often worsens until, by a kind of self-fulfilling prophecy, they *become* security risks. One particular security manager told us, “I agree with the perception that people are leery about seeking help because of their clearance status. They don’t seek assistance until they reach a point where they are being directed to do so—and thus they are a security problem. They wait, and then it finally bursts. They wait to the point where there *are* definite security consequences. They finally seek assistance, and then Security has no alternative but to remove access.” An NCO in Mental Health mentioned the same problem of people allowing things to get out of hand before seeking help. If and when people do finish up seeking help, “they are often near the end of their tether, near meltdown.”

**Lack of Trust in the Organization.** Another factor is closely related to fear of adverse action by the security system. This is the concern that one’s immediate organization will not be supportive when news of a personal problem that requires treatment reaches the director of human resources or the commander of the unit. Employees are clearly concerned, first, about whether sensitive personal information will be handled in strictest confidence by management and the human resources department and, secondly, whether the employing organization will respond to that information in a fair and compassionate way.

Absence of organizational trust appears to be widespread among both military and civilian personnel. A family service counselor at a military base, when asked whether personnel are making use of his facility, stated, “People are absolutely holding back; they are terrified.” He concluded that they would prefer to pay cash outside and be seen privately. For example, new officers on the base are afraid that they could not fly if they admitted to attending counseling. “It is not career-enhancing.” A security officer at a research facility stated that she thinks there is a general belief among the employees that

if you go to get help, you will lose your job. She tells them it is safe to go to EAP, but they do not believe it.

From the interviews, it became apparent that employees' willingness to seek assistance is a function of the strength of their conviction that, once having sought help, such information will be held in confidence, and that the organization itself can be trusted not to endanger the employee's professional standing should participation in a treatment program become a matter of record.

Employees are concerned in particular that knowledge of their entry into a treatment program might result in reassignment of duties or become a bar to upward mobility. It is believed, for example, by military officers that a single incident of, say, DUI<sup>19</sup> is disqualifying and, in some cases, a block to promotion or even retention. This concern is exacerbated in military organizations where there is less expectation of privacy regarding personal matters. The chaplain at a military training installation told us that many students come to him because they don't trust the counseling services. There is an attitude or perception among the enlisted population that "counseling is a career-killer." He added, however, that people have never mentioned concern about their clearance status.

**Supervisors' Reluctance to Report Employees.** Despite knowing that employees have a problem and should be sent to get help, supervisors are often reluctant to refer them. This is either because they do not want to lose staff from the unit or because of fear that the person's problems will reflect on their (the supervisors') leadership. Several people mentioned this. For example, a counselor on a military installation told us, "There has always been resistance to referring people. A lot of military managers feel they will be looked upon unfavorably if they refer someone. They are supposed to take care of their own people, and it is a reflection on their ability to command if someone has a problem. And often the supervisor will refer too late. He sits on the problem a lot longer than he needs to, and the situation gets worse, not better." "Supervisors don't want to report," says another security officer, "because they just don't want to get their guy into trouble. They don't want to put the person in the position of losing his job. They don't want to rat on their employee."

**Misinformation and Common Misconceptions.** One military officer, an O-6,<sup>20</sup> believes firmly that policies are definitely in place at all levels in DoD to channel people to any help they may need. The security policies even contain chapters on encouraging employees with problems to seek help. "The Services have come a long way in the last few years," said the officer, "in terms of helping and not simply punishing. For the most part commanders and other DoD supervisors are quite sophisticated and willing to go the extra mile for their people."

Security often does tell people that they can safely seek help for problems without having their clearance revoked. The problem, according to the same O6, is that while

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<sup>19</sup> Driving Under the Influence

<sup>20</sup> O-6 is an Army, Air Force or Marine Corps colonel or a Navy captain.

policy may be in place and supervisors are for the most part sympathetic, implementation is often faulty. Mid-level people in the field continue to maintain that if you self-report some infraction, you are immediately in deep trouble. Even people outside the system preserve the myth and give the wrong advice. For example, a personnel security manager told us, "Security tells people that sharing information with them is not necessarily going to affect their clearance. One DUI won't get your clearance pulled. But everyone else seems to be contradicting Security. The stories contradict; the old-timers contradict; even people in the private sector, like attorneys, tell their clients that they will lose their clearance if they go for help."

It is clear that in many cases the wrong message is being sent by managers in the DoD system about the relationship between seeking assistance and people's security status. Security is still suspect, not necessarily because of anything Security has done (although sometimes for that), but because noncommissioned officers (NCO) or other supervisors instill fear of Security into their people. The following story illustrates this point. An NCO sent five young enlistees to Security all at the same time without explaining why they were being summoned. "He just told them to go to Security 'because you have a problem.' He totally scared those kids. No wonder Security is dreaded," said the security officer in a military installation. People remember stories of such treatment, and then the myth that Security will "get" you is perpetuated. Nobody remembers the good stories where people are helped and reinstated. And people find it hard to believe the assurances of those NCOs who *are* trying to send the correct message. For example, an NCO in Mental Health on a military installation who clearly wants to change negative perceptions, told us, "There is an unfounded anxiety. People believe in the myth that they are going to be hurt when they seek help. I tell my people that only about 3% of all self-referrals ever need to be reported. I tell them again and again that they won't necessarily lose their clearance by seeking help." But people believe in the myth that they are going to be hurt when they seek help.

**The Standard Form 86 Dilemma.** The subject of the SF-86 came up several times. People understand, we were told, that when their 5-year periodic reinvestigations come along and they have to fill out the SF-86, they must respond to the questions on drugs, alcohol, mental health and other kinds of counseling. A security manager in a PRP program told us, "There's a fear that if you answer honestly on your SF-86, then confidentiality is blown and now you are at the mercy of DSS not to pull your clearance." Yet people are strongly advised by Security to answer honestly the SF-86 questions and reveal their attendance at counseling programs. So they are faced with the dilemma of lying on the form or of admitting the counseling and opening themselves to Security scrutiny. At the same time, Security cannot give any assurances up front. The same PRP security manager told us, "We never say that we are not going to take their clearance. There has to be some protection of national security as well as of the individual." So individuals feel they are in a damned-if-you-do, damned-if-you-don't quandary, a security Catch 22. They reach for help but, in so doing, believe they make themselves ultimately vulnerable to further investigation by Security. This is perceived as a major problem, several managers told us.

One employee relations administrator made the point that the worst deterrent to self-reporting is Item 21 about mental health counseling on the SF-86. She believes that simply approaching an EAP should not constitute “consulting with a mental health professional.” “After all,” she explained, “EAP is mainly an assessment and referral operation. And even if you do take short-term counseling from an EAP counselor, any problem that can be solved in, say, three visits, couldn’t have been very serious in the first place.” She believes that people shouldn’t have to start admitting to real counseling until they really do consult a counselor on a long-term basis. So she thinks that the threshold for “counting” mental health counseling should be changed. She also advised further re-wording in Item 21 (see Conclusions and Recommendations of this report).<sup>21</sup>

## **Resource Issues in the Security System**

This section begins with Security’s administrative problems, followed by more general comments about Security’s efforts to encourage people to seek help without dire consequences. This is followed by some remarks that sometimes, after all, Security has to be given priority when people’s behavior has gone too far. These comments are based on the remarks of the 26 security professionals interviewed in the field.

A major administrative problem for Security is a decrease in resources. There have been drastic cuts over the past few years in personnel at local security offices and cuts in personnel at the CAFs. Thus, fewer workers have been required to process the same number of people. Field security officers would like to give more time to working cases before submitting them to the adjudicative facilities. They are frustrated that they cannot always support the security program in ways they did before, delving more deeply into cases, reaching out to the community with special briefings, and so forth. However, despite the shortage of hands, Security does see itself as making an effort to go the extra mile for people applying for, or updating, clearances.

One manager vividly summed up the situation in his particular office: “Probably the most serious problem facing the personnel security program is severe understaffing of Security offices. People need to feel they are getting a fair hearing and it is hard to

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<sup>21</sup> Following is the present wording in the SF-86:

Item 21: Your Medical Record: “In the last 7 years, have you consulted with a mental health professional (psychiatrist, psychologist, counselor, etc.) or have you consulted with another health care provider about a mental health related condition?”

“If you answered ‘Yes,’ provide the dates of treatment and the name and address of the therapist or doctor below, unless the consultation(s) involved only marital, family, or grief counseling, not related to violence by you.”

Item 25: Your Use of Alcohol: “In the last 7 years, has your use of alcoholic beverages (such as liquor, beer, wine) resulted in any alcohol-related treatment or counseling (such as for alcohol abuse or alcoholism)?”

“If you answered ‘Yes,’ provide the dates of treatment and the name and address of the counselor or doctor below.”



convince them of that when you know they probably aren't. With the short staffs, cases are put on an assembly line and cataloged based on superficial analysis. Many, if not most, cases are handled as part of a stack, not as individuals. The training, education, and liaison programs are also affected because our staff are spending their time processing clearance actions. This in turn creates more clearance problems that affect the training, education, and liaison programs.”

However, despite their own understaffing difficulties, security officers are trying to project a kindlier, gentler image. Their message to DoD personnel, civilian or military alike, is to seek help early while their problems are relatively mild. A facility security officer in a Defense contractor company, for example, told us, “We tell our people that if they voluntarily avail themselves of EAP and complete the program, there isn't going to be any adverse clearance action. We are better off security-wise if problems are being addressed.” Similarly, an O-5<sup>22</sup> told us, “It's healthy to seek help. Seeking help should not be harmful to people. It's the people who don't seek help who are the problems. The military has a policy that if you self-refer the [name of her Service] won't take any action against you. It's only if you are in trouble because of a *serious* incident that you are in trouble.”

Security prides itself on working closely with other parts of the helping system to get people into appropriate programs to solve their problems. Several officers said they would like to think that people have more faith in them now than in previous years. “Over the years things have changed a lot. We are no longer the Gestapo. People are beginning to trust us,” says a personnel security manager on a military installation. Another officer is discouraged that people don't believe her message. “But I do get frustrated. I tell them again and again that it is OK to seek help, but they don't believe me. People just cannot believe that this is true.”

Lastly, we present the views of an NCO in a PRP program, where he has both supervisory and security responsibility and where personnel security standards become more stringent and less flexible when merged with PRP considerations. He commented that, even in his very sensitive program, one-time infractions do not necessarily mean one's clearance is revoked. “If I had to seek help for a personal problem,” he said, “it wouldn't affect my clearance. That would only happen if I'd done something that might put my reliability into question. Just for the simple act of seeking assistance, no, there's no problem. A one-time incident of, say, DUI would not necessarily bring a person's reliability into question. (Two or more times, then there's a problem.)”

There were several stories from these officers about how the system has successfully helped various people in trouble and that Security can even work with people in *serious* trouble. The stories illustrate points that emerged again and again in these interviews.<sup>23</sup>

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<sup>22</sup>O-5 is an Army, Air Force or Marine Corps lieutenant colonel or a Navy commander.

<sup>23</sup>The first story concerns an employee who drank too much on TDY, did not show up for meetings, and was loud and disruptive at evening dinners. On returning home, his fellow workers reported the situation to his supervisor. When the supervisor did his write-up to Security, he explained that this was not the first

People are reminded from time to time, however, that national security is, and has to be, of overriding concern in allowing people clearances. Security must be protected, even though the law has made ample provision for helping cleared employees with problems. The reality, several interviewees mentioned, is that, if a person's problem is egregious enough (say, three DUIs), the CAFs *are* strict and *do* suspend access. Even the commands and local security offices can suspend access on the spot. So fears of coming forward for help are often justified. As a military psychologist told us, "The fact is that treatment *can* impact on people's clearances, and people know it."

Several other people made the same point: that not seeking help for serious problems because you fear Security's retribution is partially justified. "People just get stressed and generally for very good reasons," said a counselor at a family support center. "They shouldn't be frightened of seeking help at Mental Health. But sometimes supervisors use this as a tool to get rid of people. So there is often a really valid reason to fear going to Mental Health."

The general perception by security officers in the field is that adjudicators are overworked and, because of this, occasionally make snap decisions based on partial information. To avoid unnecessary adverse actions, personnel security managers in the field often "package" a person's file before sending it to the CAF for adjudication. In other words, information on an individual is not forwarded piecemeal; the field office waits until it has gathered additional mitigating information, such as entry to a treatment program, and then sends the material as a whole. This offers a more balanced picture of the individual with which the busy adjudicator can work.

Not everyone has difficulties in interacting with the system. A couple of professionals in EAPs and in the military world voluntarily told us that they themselves had sought treatment for grief, marital, and mental health problems. They spoke of the excellent care they had received and stated that their clearances were not affected by their attendance at these sessions.

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time this had happened but that noone had reported it before. The employee then began to attend regular counseling and eventually maintained sobriety for over 2 years. "The CAF fully supported him. He is fine now and his clearance has been reinstated."

Another security officer told of a civilian fireman who tested positive for drugs and went to rehabilitation. The CAF was informed. It came back with a conditional clearance that included a stringent rehabilitation drug-testing program. Now the fireman is in recovery and he speaks highly of the EAP program to coworkers and other employees. Security and the EAP have now briefed everyone in the fire department.

Another vignette—from a chaplain—concerned the case of a chaplain's assistant who had a serious alcohol problem. People on the installation, including Security, made a great effort to help that person. Eventually, the problem was resolved and the person's clearance reinstated. "That's an example," the chaplain said, "of how the military does have success in helping its own."

## **Perceptions of the Rank and File**

An organization with a climate of trust in which employees (and their supervisors) are willing to address personal problems before the problems become security issues would be the ideal for personnel security managers. It is clearly in the interest of Security that all employees and their families take advantage of the full range of EAPs and counseling programs. But to make this work, troubled employees are required to gamble—that by self-disclosure or self-referral for assistance, they will not incur adverse personnel actions simply as a response to that admission. In discussions with cleared employees, we wished to determine whether this fear of the system is commonly experienced, whether it is objectively justified and, if not, what might be done to portray a more accurate view of how the system works.

After interviewing policymakers and EAP and security officials, we wanted to know how “ordinary” potential users of EAP and counseling services felt about the subject of seeking help for problems and protecting their clearance status. We used focus groups to collect qualitative data on respondents’ perceptions and feelings. The groups consisted of people of close-to-equal status and were held in settings that facilitated open discussion. (See Appendix A for further discussion of using focus groups to elicit issues and ideas.) To each focus group two questions were posed: For people who hold security clearances, what are the barriers, if any, to seeking help for personal problems? And what might be done to eliminate those barriers?

### **Civilians (GS11-13)**

#### **Problems**

**Stigma of Seeking Help, and Ways Around It.** Stigma was mentioned as a serious issue in that “it’s embarrassing to go to an EAP.” People try to find solutions to problems on their own rather than expose themselves to the embarrassment and difficulty (and possible consequences) of consulting an EAP. One person discussed a sense of awkwardness in laying open his private self to counselors when seeking help. “It requires a certain amount of courage to talk to a stranger about a private family matter.” Others said they would rather take care of their problems themselves with the help of family or through a church rather than go to EAP.

**Lack of Trust in the Government.** The issue of not trusting the government was discussed in detail. For example, one person said, “How can you trust the government? Anybody who wants to can find your personnel file. Very few civilians on the installation go to the EAP. If you want help, you go outside the system. Or you go to someone in the community. And you wouldn’t want to have your insurance cover it. You pay cash. No checks. Also, hot lines provide anonymity and confidentiality.” People are concerned about personal information getting back to Security authorities and perhaps leading to adverse action against them. One person said, “If you contact the EAP, your job is gone.”

“It’s interesting,” another said, “that the issues EAPs say in their brochures they can help you with are the very issues that are investigated for clearance applications. It seems like they [the government] are building a database! And it’s impossible to really know where information about you resides so that you can request it and look at it. It probably would take too much sophistication on the part of the government to find all the information and use it against you. However, data-mining is in the works for the future and it won’t be long before the different types of information are accessible and start coming out.”

**Concerns about the Security Office and Repercussions from Reporting an Issue.** Individuals worry about the possible repercussions of Security finding out about personal problems. “If you admit to the government that you have a problem, they may not fire you. But the practical outcome is that you’ll never get promoted again. Your career is over. If you’re working for DoD, your clearance is gone. You may not get fired because you have a problem but because you don’t have a clearance.” Another person said, “If you lose your clearance, you can no longer perform your job. Losing my clearance would probably be one of the first things to come into my mind in thinking of going to an EAP.”

Participants recognized that security personnel are overworked so they can’t do everything they need to evaluate the seriousness of your problem. They agreed that, “As far as Security goes, you’re not supposed to have problems. For us, there’s a group of problems that you can deal with just with your boss. But if you have to go beyond your boss, then it’s a crap shoot.”

**Worries about Confidentiality.** Confidentiality is a major issue. “If you mess up, and if a few people know about it, there’s nowhere to go. To cut and go [leave the installation], you would lose a lot. Even if your boss is the nicest guy in the world and doesn’t tell anybody, your attendance at EAP is still in your record. When the security people come around 5 years later, they grab you. All of a sudden you can’t hold your TS. You have to do the SF-86 paperwork, and then it’s all out there in the open.” One person suggested that it would be all right to go to EAP on the installation, “but not my own unit’s EAP, some other EAP.”

In EAP brochures, employees are assured that the services are confidential. But brochures often include a sentence: “In general, information from the EAP may be released only with your prior permission.” The words *in general* give rise to serious concern about what exactly can be released under certain circumstances. This makes the next sentence in the brochure less believable: “Participation in the EAP will not jeopardize your job or career.” (There is a serious contradiction here, alluded to earlier. The SF-86 release, signed by the employee, gives permission for further enquiry. The reality is that people who hold clearances have committed themselves to unconditional release of information related to their problems and participation in counseling.)

**Downsizing and Low Morale.** A lot of discussion took place on downsizing and its effect on morale, and also about the perception of a growing lack of caring for

employees. “When we lost loyalty between employer and employees, we lost a lot of the ‘we care about you’ attitude. It’s not clear that [supervisors in the government] are reaching out to support workers as best they can. Supervisors aren’t championing employees as much as they are protecting themselves from pressure from above [from their own supervisors].”

“The government employee used to be seen as a valuable asset. Now the thought is that if you leave, you’ll be doing the government a favor because they can get your services cheaper from someone else. Getting rid of you is the solution to their problem. They’re not looking for reasons to keep you.” “In an environment of downsizing and outsourcing, you’re especially unlikely to put the spotlight on yourself by saying ‘Hey, I have a problem!’” Others said that, to the contrary, in a downsizing environment people are more willing to go to EAP because their problems are not their own fault. “They can blame their troubles on the BRAC.<sup>24</sup>”

**Kinds of Problems, and the Special Case of Drugs.** A hierarchy of problems exists: some are not as embarrassing or as egregious as others. Certain problems are relatively well tolerated. Having financial problems, for example, is understandable and fairly well accepted because there is a clear way to work through the problem. Alcohol and marital problems are also relatively well received. One person related a story of an acquaintance who was in the process of divorce and obtained EAP services. He still has his clearance and is happy with the services he received. “There’s a belief that if you can get through divorce counseling, you can get on with your job.”

“But drugs are never OK. If you have drug problems, this is a serious concern.” A person described an incident where an employee reported a coworker who was having marital problems—an affair. This resulted in a drug test that turned out to be positive. The person was removed: there was no warning, no probation, and no services were offered.

There is even a hierarchy of problems within the problems. For example, “You can have serious financial problems combined with stress, or you can just want to find someone to help you straighten out your finances.” The latter is much less serious.

**Uncertainty in the System.** Participants were concerned about uncertainty and flux in the system. “Every time the administration changes, the rules [on the ground] change. Also, even if you only move from job to job on the same installation, the rules change as you change supervisors. Supervisors interpret regulations differently. Just because supervisors accept EAP services at one time and place doesn’t mean that new supervisors will,” opined one person.

**The EAP Program and Outreach.** In addition to feeling that the entire system is murky and lacks clarity, participants felt that the EAP programs and their outreach systems were vague and unfocused. As a result, many personnel on the installation did not even know what the acronym EAP stands for, let alone how to use its services. Nor

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<sup>24</sup> Base Realignment and Closure

did all participants know if there was an EAP building on the installation, much less where it was. The Family Services Center was known to provide services, but it was not clear if civilians could use it. In any case, when one person in the focus group called the Center about how to legally handle a medical situation, no counselor was available.

People find out about EAPs through brochures and the base newspaper. “Sometimes EAP has a push [advertising, public relations] on EAP programs on the installation. But if you happen to be out of town that week...”

## **Solutions**

**Obtain Assurances from Security.** Participants agreed that there should be more clarity in the system, taking the form of an explicit stipulation in all EAP information that if people use EAP services and are working through their problems, they will not lose their clearance or their job. Also, they felt that, in terms of filling out the SF-86, just contacting an EAP should not constitute “counseling.” Counseling should only be reported if the person needs long-term counseling beyond the services of the EAP.

Participants also agreed that adverse action against people should be based on adverse behavior, not simply because they sought help. Seeking help should be viewed as a positive. They agreed that people who seek help and genuinely show that they can rehabilitate themselves should be given a safe harbor-like protection.

**Improve Supervisors’ Attitudes.** Participants agreed that supervisors’ attitudes need to be improved, although they admitted there are good supervisors. For example, one participant spoke of an individual having an alcohol problem. His boss walked him down to EAP. Others in the office knew what occurred. Everyone was supportive. There was no talk of the person losing his security clearance. Hence, the outcome depends on how a particular office (and supervisor) handles the situation. In this case, the boss decided to help the person. However, participants felt that average supervisors are not as aware and that they should be given training to help them recognize symptoms of employees who have problems and to make sure that the employees seek help.

**Develop a More Positive Stance for EAPs.** Participants noted that if EAPs offered a wider range of services, such as legal or employee relations, there would be less of a stigma associated with contacting the EAP. For example, if an EAP is known as a proactive service provider for positive activities, such as setting up a living will or obtaining financial/investment services advice, as opposed to just financial disaster counseling, this would build a better reputation for EAPs. Then, if a problem occurred, people would feel better about seeking help. A name change is also recommended, perhaps Employee Services Center or Employee Support Services. Personnel who knew it before as EAP could see it in a new, more positive light.

**Provide More Effective Outreach.** Many of the participants agreed that EAPs should provide more effective outreach. Placing newsletters in employee mail boxes usually means the materials are immediately dropped into the trashcan. E-mail is a possible alternative for distributing EAP information.

EAP should advertise, conduct seminars, and make it known that services are available. They should implement monthly activities on the installation television show, establish links on Web sites, and set up independent anonymous hot lines. The staff could show how trained problem-solvers can help troubled employees. Moreover, they should have a very explicit statement that the information cannot be used or accessed by security personnel. Services should be offered outside the regular workday so that people could visit after-hours. “If superiors know that I am using the services [during the day], you have to wonder, ‘Is that information going to chase me?’”

The group agreed that mandatory TV network training on the installation would be good, with a sign-off mechanism to show that an individual has completed the training. And people could then be given training-hours credit for completing this task.

**Enhance the Role of EAP.** As one person said, “EAP has an excellent opportunity. It could become a strong advocate for the people, something they don’t have right now. Morale is low because of downsizing. Right now, people don’t feel there is anyone to go to, anyone to represent their interests.”

“EAP has the potential of being very effective if it changes its name, puts on its superman suit, and does some good.” The more visible EAPs are, the more supervisors may feel appropriate pressure to incorporate and support use of EAP services within the workplace. Supervisors (and managers above them) should be encouraged to take a reasonable course of action without the supervisors being monitored and without their having to report to the next highest level. “We have to remove the handcuffs,” said one participant.

**Use of PERSEREC Report.** Participants want to ensure that this PERSEREC report serves as a wake-up call to management. We suggest the report be distributed to the commanding officers of installations, with a note stating that the report be disseminated to all directors and be made available to all personnel. As one participant stated, “If this report doesn’t get widely disseminated, it will be of no use at all.”

## **Military (E-7 - E-8)**

### **Problems**

By way of introduction, participants explained that the “EAP” system is different in the military world and probably less amenable to change because of the nature of the military and its special requirements. In this more paternal world, service members are urged from the very start to consult various helping services. However, they are more likely to be encouraged to go first to their immediate supervisors with their problems. In this way, matters can be known to the command, people can be referred to the

appropriate military agency on base or post, and their progress in counseling programs can be tracked.

The participants explained that the commander can have considerable impact on troubled subordinates before situations become so critical as to affect clearances. Most commands are set up so that people know they have an open-door policy with their supervisors. The culture encourages taking care of all personnel inside the group, and all supervisors encourage their people to come to them first.

However, the participants told us, it is up to individuals whether they actually go to their bosses for help and not all service members confide in their supervisors. Their problems either sort themselves out “naturally,” the person goes directly to a nonmilitary source for help, or the problem worsens until some incident brings it to the attention of the commander. The commander will then counsel the person him/herself, insist that the person go to a military rehabilitation or counseling program (a command referral) or, if the problem is something very severe such as drugs, initiate sanctions which may include separation from the military.

**Concern about the Clearance Depends on the Job.** Participants agreed that in the military the type of position held determines whether an individual is concerned about their clearance when they have a problem. In some jobs, the clearance is the lowest priority; people are more concerned about pay grade, personal reputation in the command, or worrying about being separated from the Service. In other positions, every task performed is based on the clearance. Without the clearance they cannot accomplish their work. In reality, they do not lose their clearance because they have, say, an alcohol problem. They may lose *access*, but they do not necessarily lose the clearance. Whether they lose access depends on the severity of the problem and their record of performance, among other things. So a definite difference exists between people with clearances and those without in terms of admitting a problem. Those with clearances who have problems often resist admitting it because of fears for their jobs. Those without clearances have far fewer qualms.

Participants explained that if individuals lose access, they may gradually regain it during a successful probationary period. They will first be re-granted access with supervision, and eventually they will progress to full access again. Within certain jobs, however, if they do not have access, they cannot keep their job must be reassigned, which definitely creates a barrier to admitting problems.

**Reluctance in the Military to Admit Faults.** Other barriers to seeking help include a sense of pride and a reluctance to admit a problem. “In the military, people’s egos often prevent them from getting help. There’s a macho, ‘I can handle it’ mentality, especially in certain jobs.” Most people will not come forward until an incident occurs and the problem is publicly revealed (e.g., drunk driving). “That’s not going to change, it’s human nature.” Embarrassment is a major factor in not seeking help. For example, participants stated us that it is embarrassing to be found to be in financial difficulty.



**Other Deterrents.** Participants felt that seeking help outside the military is viewed by Security as highly negative because it is interpreted as an attempt to hide something. For example, each command has its own financial counselor. Yet people may also have financial counselors at their bank and they may seek financial counseling outside. People feel compelled to take care of financial problems because if they receive a financial indebtedness letter at their command, they can lose their access. Finances are important, we were told; they represent an integrity issue, concerning not only a person's ability to care for his or her family, but also susceptibility to compromising secure information and the like.

The group felt that another reason people may not seek help is that they would rather deal with issues on their own terms and feel a sense of personal responsibility. Once they admit publicly to their problems, they are dealt with on the military's terms, and they lose control over their own lives.

Participants also stated us that most people in the military know there is zero-tolerance for drugs. However, most participants agreed that a few cases do get a second chance. Mainly, if employees test positive for drugs, they will receive some kind of hearing, but as one participant said, "If guilty, you're gone."

## **Solutions**

**Increase Awareness.** Participants suggested that the military place information about counseling services in weekly notices and make announcements at daily meetings. At present, they believe there is no system available for informing people. One department must take responsibility for disseminating counseling/referral service information to the general workplace. Communities that work closely with the issues are aware; but other areas are not. Participants agreed that supervisors should receive training as well as recruits.

## Conclusions and Recommendations

### Conclusions

This review of EAPs and counseling/referral services programs in the DoD confirms that policy is already in place to provide at-risk individuals with options for effectively addressing a wide variety of personal problems. These include problems that are also of security concern, such as alcohol and substance abuse, mental and emotional problems and financial issues. Many employees have successfully used counseling services and returned to work, their problems resolved. However, many have not sought assistance from government-sponsored programs because they are anxious about the impact on their reputation, employment, or clearance status. We maintain that this anxiety is counterproductive to the goal of assuring the reliability of the DoD cleared workforce. The goals of the security and counseling services programs are often in conflict with each other; the task is to work toward attaining a better balance.

Security policymakers, adjudicators, and field security managers are fully aware of the dilemma faced by cleared employees who must make tough decisions. These choices are between seeking assistance to combat a major problem and risking adverse adjudicative action, and not seeking assistance and facing a worsening condition. Most security professionals agree that the former choice is clearly in the interest of both the employee and the government; they would welcome policy adjustments to remove impediments that stand in the way of getting help through government counseling programs. They also hold the view that this must be done without jeopardizing national security.

This study also showed that, depending on the circumstances surrounding each case, the security system is willing to work with people who admit to problems. In fact, security professionals' day-to-day actions are often marked by a common sense and understanding that go beyond mere regulations. Suggesting that the problem could be solved to a large extent by better security awareness or public relations efforts, several security officers said that it is unfortunate that cleared employees do not really understand the role of decision-making processes of security services. This is particularly so at the field level where security staff frequently take on an advocacy role in favor of the troubled employee.

We have considered several options for solving the problem. The radical option would be an amnesty program in which immunity from adverse action is offered for employees who will self-refer to some type of assistance program of monitored treatment and be able to successfully deal with their problems in a reasonable period of time without relapse. At the other end of the spectrum, steps would be put in place to ensure that employees at least understand that personnel security decisions are not made in an arbitrary fashion and that people's good-faith efforts to address personal problems weigh heavily in favor of them.

However, before recommending sweeping policy change, such as a blanket safe-harbor program that would impact adjudicative guidelines and local guidance to cleared

employees at all defense installations, a carefully designed pilot study should be undertaken in order to assess the costs, benefits, and risks to defense components and agencies of such a safe-harbor program. In the meantime, certain, less radical actions can be undertaken in terms of policy definition and implementation and security education that will undoubtedly help to mitigate (or help overcome) the barriers that now prevent many from solving personal problems. These actions will lead to some assurance about the positive effect of seeking assistance.

The recommendations listed below, if implemented, may well produce a system that is more transparent and satisfactory to all parties, and will more closely balance the needs of national security with those of individuals experiencing personal problems. After all, DoD's ultimate objective is, wherever possible, to retain valuable personnel by eliminating barriers to seeking assistance.

## **Recommendations**

We offer recommendations in three areas: policy and practice, a pilot study, and security education and awareness.

### **Policy and Practice in the Personnel Security System**

**Recommendation 1.** Provide explicit clarification in 5200.2-R to bring DoD policy into harmony with E.O. 12968 by removing barriers to seeking assistance from a government-sponsored EAP or other counseling provider.

**Findings.** Many DoD employees believe that they cannot consult EAPs and counseling services without jeopardizing their clearance status. The fact is that very few employees have their clearances revoked. So the problem is largely a matter of perception.

**Discussion.** People just do not trust the system. Security education, therefore, has to be enhanced. But first, assurances must be codified so that educators can point for proof to a paragraph in the 5200.2-R (to 9-101[b] Management Responsibility, p. IX-1). Such a paragraph, the precise wording of which would be drafted by appropriate policymakers, would state that participation in an EAP would be considered only as positive evidence of reliability and willingness to fulfill personnel security responsibilities.

The regulation should also include a provision for the future implementation of safe-harbor programs by components that would provide employees conditional immunity from adverse adjudicative action while they are successfully undergoing treatment or rehabilitation via government-sponsored counseling programs. The regulation would include reference to a series of strict conditions under which safe harbor might be offered under a component program.

Very few cleared personnel going about their normal business in the DoD have any idea about what is contained in the 5200.2-R. Such documents are designed by policymakers and are eventually translated into briefings at the field level. It follows that DoD employees would be informed about any changes in the 5200.2-R as part of the security education briefing program. Consequently we recommend an additional amendment to 5200.2-R (Section 2, Security Education; 9-201, Initial Briefings) that directs the security educator to advise cleared employees of the conditional immunity from adverse action offered to employees who seek to address their problems through a government-sponsored EAP, counseling, or treatment program.

An enhanced personnel security regulation would lead to a shift in climate where cleared employees will be able to address personal problems and treatable conditions in a timely fashion without fear of jeopardizing their clearance and employment status.

**Recommendation 2.** Issue a policy letter to each of the components advising that participation by any cleared employee in an EAP program (either by self-referral or by management direction), given the absence of additional information of an adverse nature, will not be grounds for an adverse adjudicative action.

**Findings.** We found that most security managers would like to announce such a policy, but are holding back since it is not clearly spelled out in policy statements. One security manager unambiguously stated that in his agency people seeking help for stress and less-than-severe mental problems do not have their clearances “disturbed.” Several security managers and adjudicators expressed concern, however, that some individuals will attempt to use enrollment in an EAP or military counseling program as protection against adverse action after other events occur that would reflect negatively on the person’s suitability for continued access.

**Discussion.** Such advice to security practitioners in the field will be strengthened if it includes a statement that: “The act of seeking counseling or treatment will be considered as positive evidence that individuals are willing to address their problems, thus demonstrating that employees or service members are conscientiously living up to their security responsibilities.” Given the language of the current policy or adjudicative guidelines (discussed in Appendix I), a declaration of this type would not represent a policy change but only a clarification or elaboration of existing policy that in reality is consistent with prevailing adjudicative practice.

One organization, NSA, has in fact announced to its employees that “seeking professional assistance in dealing with problems does not jeopardize an individual’s security clearance” and that “the decision to seek treatment is viewed as a positive sign that an individual recognizes that a problem exists and is willing to take steps toward resolving it.” This appears to have worked well in an intelligence-agency environment. Please see Appendix L for a reproduction of the

NSA newsletter in which employees are urged to seek EAP counseling for problems. This policy could well serve as a model for a larger, encompassing DoD policy.

We recommend that this advice should not apply to those who seek treatment or counseling in the private sector without initial screening, counseling, and referral through a government-sponsored EAP program. Use of a common point of initial evaluation and referral should be encouraged since, while individual confidentiality is protected by EAP administrators, the same can provide valuable information to commanders and executives that pertains to organizational climate, local vulnerabilities, and health conditions.

**Recommendation 3.** Include in the forthcoming revised adjudicative guidelines statements that participation in an EAP or military counseling program is an important mitigating factor and, given the absence of additional adverse information, would not be the basis for revocation or suspension of access.

**Findings.** Adjudicators uniformly maintain that attendance at counseling is a mitigating factor. However, as one interviewee pointed out, very often positive information about an employee's enrollment in an assistance program is accompanied by other reports that would call a person's clearance status into question—DUI arrests, disorderly behavior, or unprofessional conduct. On the other hand, this study found that, depending on circumstances, the security system is often willing to work with people who admit to problems. It is not always trying to "catch" people.

**Discussion.** As discussed earlier in this report, a statement regarding protection from adverse action was included in the January 1987 DoD 5200.2-R as applied to self-referral for treatment for alcohol abuse, assuming that there were "no precipitating factors such as...arrests or incidents." It is not clear why this language was dropped from the 1997 DoD guidelines. During the next few years the current guidelines will be updated, and changes will be implemented based on judicial and legislative developments since 1997. It would be appropriate to include language that is consonant with guidance in E.O. 12968 on the importance of providing information on employee assistance. The 1987 guideline may in fact serve as the model for a more general assurance regarding types of treatment or counseling for all problems that might have security implications, not just alcohol. This would obviously apply both to people applying for a clearance and to those already holding one. The language might read:

"If an individual's problem that is of security concern surfaces solely as a result of self-referral to an employee assistance or counseling service and there have been no precipitating factors such as arrests, adverse behavior, or evidence of impaired judgment, action will not be taken to deny, suspend or revoke security clearances solely on the basis of self-referral for counseling or treatment."

**Recommendation 4.** Modify printed guidance on the SF-86 (Items 21 and 25) to remove the disincentive to voluntarily seek assistance for a problem that may be of security concern.

**Findings.** The language of Item 21 (Your Medical Record) or Item 25 (Your Use of Alcohol) stands as an obvious impediment to anyone who might be considering even an initial inquiry to an EAP for possible referral (see page 24). While people may trust the pledge of confidentiality provided by a counselor, as honest people they acknowledge at the time of the next periodic reinvestigation an obligation to report seeking assistance. Security officers advise them that they must do this. Thus, many employees who have held a clearance for several years are aware of this fact and will defer seeking help rather than, as they see it, jeopardizing their clearance status.

**Discussion.** One interviewee and some focus group participants suggested that policymakers consider several changes to the wording of the SF-86.<sup>25</sup>

One option is to specifically exempt as reportable initial counseling or evaluation by an EAP professional (which often includes up to six sessions at no cost to a civilian employee.) The guidance for Item 21 would then read:

“If you received counseling from a professional employee assistance counselor *under a government-sponsored program*, you may answer no to this question and you do not have to report it during a background investigation.”

Similarly, the guidance for Item 25 would include this statement:

“If your counseling was limited to an initial evaluation for possible alcohol dependency by a professional employee assistance counselor under a government-sponsored program, you may answer no to this question and do not have to report it during a background investigation.”

This guidance would require employees to report mental health treatment or rehabilitation for alcohol abuse only when they enter into a long-term relationship with a therapist or other health care provider. After all, as our interviewee pointed out, EAP is an assessment and referral operation, with sometimes short-term counseling for easily resolved problems. Only problems that require long-term treatment should be counted as *mental health treatment or rehabilitation*.

It must be understood, however, that by not including information about EAP participation under Item 21 or Item 25, the employee must not assume that he or she enjoys a sort of immunity from adverse adjudicative action, should issue information come to light through continuing evaluation or the investigative process concerning substance abuse or mental health.

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<sup>25</sup> Wording could easily be added to the appropriate screens on the electronic SF-86.

Another option that would not modify the reporting guidance as it stands would simply add the following statements to the guidance for Items 21 and 25 to confirm the positive effect of self-initiated actions to deal with personal problems.

For Item 21: “Your voluntary self-referral to a government-sponsored employee assistance program or military counseling program for the purpose of mental health counseling will be considered positive evidence of your reliability and willingness to fulfill your personnel security responsibilities and will not adversely affect your clearance status.”

For Item 25: “Your voluntary self-referral to a government-sponsored employee assistance program or military counseling program for the purpose of seeking help to combat alcohol dependency will be considered positive evidence of your reliability and willingness to fulfill your personnel security responsibilities and will not adversely affect your clearance status.”

**Recommendation 5.** Identify a single point of contact within the DoD for oversight, policy development, and coordination of employee assistance programs for the civilian DoD workforce regardless of whether employees hold clearances.

**Findings.** There is no one office within DoD that oversees and coordinates the EAP program within DoD. The Office of the Secretary of Defense (Health Affairs) has a directive, DoDD 1010.10, on health promotion that charges the components with establishing health promotion plans and programs. It deals with many matters usually covered by EAPs, but does not expressly mention EAPs *per se*. The establishment of EAP programs is at present the responsibility of the components.

**Discussion.** It would be preferable to have one DoD office that is responsible for oversight and coordination of the EAP programs within DoD. With this, greater accuracy might be achieved in tracking utilization rates among the Defense components. There could be better coordination of policies on confidentiality, more uniform compliance with legislative requirements, and standardized policy on collaborative programs with security offices.

### **Pilot Study**

**Recommendation 6.** Establish a pilot study to evaluate the feasibility of a comprehensive safe-harbor program.

**Findings.** Several security practitioners wished to explore new ways to overcome the resistance to self-refer for assistance by at-risk personnel. This call for experimentation was voiced by a security manager at a military installation and by several security professionals in the field: Set up a pilot program in which one organization, working with the CAF, offers safe harbor from adverse clearance action for self-referral, and even for willing participation in an EAP resulting from a management referral.

**Discussion.** We thus recommend a controlled test of a broadly applied safe-harbor program in one organization or command. While the details of this research design need not be enumerated here, the test program would apply to both clearance and access that are in question for any security reason, not just drugs. Non-negotiable conditions would be set up so that no “unqualified” people can use the program as a shelter. The program would require that employees have freely self-referred to a government EAP, counseling or assistance program, or have agreed to enter such a program of treatment, rehabilitation, or counseling based on a management referral. It would also assume that to preserve their clearance status individuals must comply with the treatment program, agree to regular monitoring, not relapse after the program, and have no pending overt problems prior to entry. Any pilot program of this type would require close coordination between EAP administrators and security managers at the installation level and with the adjudication facility. Participants would agree to the disclosure of their participation and subsequent progress to the CAF. The pilot study might be conducted over a 1- to 2-year period within a large, well-defined organization in which before-and-after indicators would be recorded and compared.

Examples of programs on which a pilot study could be based are the Navy conditional clearance policy that incorporates a type of last-chance agreement; the Air Force SART program (for alcohol abuse); and the more formalized Department of Energy EAPRO program. The EAPRO program applies to contractor employees, but is administered by the government agency itself. These programs are described in Appendix K.

Some security practitioners argue that an inclusive program of this nature would be very risky. They suggest it might provide unwarranted shelter to individuals escaping from the threat of adverse adjudicative action—people whose clearance really ought to be revoked. On the other hand, the present system—in which personnel, beset by problems, fear to seek assistance—offers its own risks. It would be preferable to have such people identified and enrolled in appropriate rehabilitation programs than have them dealing with classified information when they are under the pressures of stress, illness, or addiction.

By conducting a pilot program employing a risk-management methodology, we will be able to weigh the relative benefits of a comprehensive safe-harbor policy over the status quo.

### **Security Education and Awareness**

Enhanced security awareness and training for cleared employees and supervisors would help break down barriers to seeking assistance, especially for problems relating to the adjudicative criteria. Part of the difficulty in getting troubled employees to come forward for help is the perceived lack of clarity in the personnel security system itself and the unknown risks people might face about revealing personal problems to anyone, even



an EAP counselor. We should be able to spell out just how the system works and how decisions are made about personal clearances and access.

**Recommendation 7.** Develop a prototype brochure on “You and Your Clearance” that explains frankly the security benefits and ramifications of seeking help for problems. This brochure may be passed out at the time people receive their clearance.

**Findings.** Discussions with supervisors and rank-and-file cleared personnel revealed an atmosphere of mistrust and anxiety based on misinformation and lack of accurate information. People are still not sure how clearances are granted and what their personal responsibilities are for maintaining their clearance status.

**Discussion.** Few awareness products were found that focus on the clearance process, self-reporting responsibilities, and the impact of seeking assistance on one’s clearance or access status. People should be informed more frequently and effectively of how the system works in practice. Among other things, we should inform all personnel with problems—civilians and military—that, if they are willing to make a genuine attempt to deal with a personal problem—especially if they voluntarily seek assistance in the early stages of a problem—they will not lose their clearances for this reason alone. In fact, seeking assistance it will count in their favor.

**Recommendation 8.** Require that security professionals who provide initial indoctrination and refresher briefings to cleared personnel include information—through DoD and component policy documents—about employee assistance and counseling programs, which should include new guidance as suggested by Recommendations 1 and 2.

**Findings.** Information about EAPs or counseling services is generally not included in security briefings or in initial indoctrination by most security briefers. Personnel do receive EAP security education briefings and other media from EAP administrators, but the connection between the two programs is rarely made.

**Discussion.** Could security education briefings and other materials be designed for would-be users to portray a more accurate view of how the system really works so that people in trouble need not fear for their clearances for merely seeking help? We suspect that some EAP administrators prefer not to raise this issue for fear of discouraging self-referral, despite the fact that they routinely guarantee confidentiality. Since this topic is a security issue, it is more properly addressed in a security awareness briefing. To advise cleared employees about EAPs is clearly mandated in Executive Order 12968 and in DoD Directive 5200.2-R. We recommend that component policy personnel remind security managers in military components and civilian agencies of this briefing requirement.

If in fact additional policy guidance is issued to components advising that participation by all cleared personnel in an EAP program alone will not be

grounds for an adverse action, this new interpretation must be disseminated to cleared personnel to help neutralize the fear of seeking assistance.

Security education often emphasizes information security and the foreign intelligence threat, with little being said about the issue of human vulnerabilities and how to address personal problems that could turn into security problems. Security educators need newly designed content that stresses personnel security obligations and the use of EAPs and counseling programs when appropriate. Such messages must be delivered on a regular basis as new people cycle through various work environments. The guidance should cover the following:

(Generally) how the Defense personnel security program works.

Personal issues that could jeopardize individual clearance status.

What this organization has to offer for employee assistance.

The impact on one's clearance status of self-referral to an EAP or counseling.

The importance of self-reporting of security-relevant information to the security officer.

Coworker intervention: How to deal with warning signs from the people who work with you and what could happen to them if you make a confidential report to a security professional.

**Recommendation 9.** Develop an exportable training module for supervisors and administrators on how to respond to warning signs and refer at-risk cleared employees to EAP/counseling programs.

**Findings.** There is reason to believe that many supervisors resist the idea of referring troubled employees (who may be exhibiting signs of substance abuse, extreme stress, or other problems) to EAPs, thinking that they might be placing that person's job or clearance status in jeopardy. In addition, information about EAPs, limits of confidentiality, and the relationship between employee assistance and clearance status varies considerably from one organization to another. Employees, including first-line supervisors, remain very much in doubt about their responsibilities and security obligations with respect to advising the people they supervise about employee assistance.

**Discussion.** Given the large and wide dispersion of this target audience, an exportable module in CD-ROM format would be a suitable vehicle for delivering this type of training. This product might be modeled after the Customizable Employee's Guide to Security Responsibilities that is intended for use for all cleared personnel (Defense Personnel Security Research Center, 2000).<sup>26</sup> The module, which would be tailored specifically for supervisors, might include:

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<sup>26</sup> The Guide also includes advice on the referral of at-risk employees to EAPs by supervisors.

General personnel security responsibilities of supervisors of employees holding security clearances.

Indicators of risk that may call for positive action by a supervisor, particularly the need for referral for employee assistance.

Why self-referral in the early stage of a problem is much preferable to waiting.

How EAPs operate and what sort of help is available through them.

How to refer an employee to an assistance program. What to say with regard to each type of problem. Does a supervisor face any legal risk by referring an employee to an assistance or counseling program?

The possible impact of seeking help on an employee's clearance or access status.

Supervisors might also be advised about how to counsel an employee who appears to be in need of assistance. Security managers and EAP advisors in the field suggested some of the following hypothetical dialog: "Times are changing. People's records are no longer retained by a referral to counseling." "Things are not looked at with the same jaundiced eye nowadays." While people must at present reveal counseling information on the SF-86, there is a Remarks section on the form where they may explain the circumstances. Supervisors who refer employees to EAP will not get involved with a lot of paperwork. Supervisors should not be hesitant to confront an employee and should be assured that employees' problems are not necessarily a reflection of the supervisor's performance.

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## **Appendix A**

### **Data Collection Strategy and Research Methods**





# **Research Questions, Data Collection Strategy, and Research Methods**

## **Research Questions**

The central research questions are: How well are DoD employee assistance programs (and counseling services for the military) and Defense personnel security programs working together to promote the reliability and trustworthiness of our cleared workforce? And what changes might be necessary in terms of the application of security policy, administrative practice, or education to ensure that the operation of these programs is harmonious and mutually supportive?

Derived from these central questions are more focused questions to which answers were sought (see below). These were asked of various categories of respondents at headquarters-level organizations and at field installations (bases and posts). In addition, several of these topics emerged in the focus-group sessions that were held with rank-and-file, cleared employees. Obviously, responses to each of the following areas of inquiry varied from situation to situation; however, in the course of the study, themes did emerge that allowed us to describe how people think these systems work and the range of variation that exists in both the military and civilian environments.

Do cleared employees when faced with personal problems in fact resist seeking assistance out of fear that they will jeopardize their clearance status?

What factors at the field level (organizational climate, education, local policy, etc.) predict higher utilization rates (self-referral and supervisory referral) for EAP or other counseling programs?

To what extent do assistance providers promise confidentiality to personnel seeking help? How well do assurances of confidentiality mitigate people's fears of arbitrary administrative action by personnel security authorities?

How much information exchange or coordination related to specific employees exists between security professionals and EAP or counseling providers in the field? Does this differ from one type of organization to another?

In addition to providing initial counseling and referral services, how well do EAP and other counseling services monitor the treatment progress and verify the success or failure of at-risk employees who are willing to address their problems through treatment or counseling programs?

To what extent is self-referral to an EAP, as a way of addressing personal problems, recommended to cleared employees in security awareness advisories or briefings? What message is conveyed about the possible effect of this on one's clearance status?

In promoting assistance and counseling programs, do assistance providers attempt to allay or diffuse anxieties or impediments to seeking assistance by directly addressing the supposed threat to one's clearance status or position as a result of seeking help?

What general adjudicative policies are followed by the various Defense adjudicative facilities when information is received about EAP involvement? Specifically, is self-referral or willing participation in an EAP considered to be a mitigating factor for determining continuing eligibility for access to classified information?

Under the current system, does referral or self-referral to an EAP or counseling program offer a degree of temporary protection from adverse adjudicative action while an employee is undergoing treatment or counseling? If so, is this communicated to the cleared workforce?

With regard to personnel security policy or the application of adjudicative guidelines, is there a distinction made between employee assistance that concerns different types of adjudicative issues—alcohol abuse, drug use, mental or emotional problems, financial problems, etc?

What lessons can be learned from intelligence and security organizations and other federal entities where employee assistance professionals, working closely with security professionals have been able to create an organizational environment that is conducive to self-referrals?

What innovative security programs or policies have been tested or implemented that are unique to DoD components or other federal agencies and are designed to encourage participation in assistance programs? How successful have these been?

### **Data Collection Strategy**

Two types of information were sought. The first concerned facts about policy and its application, organizational structure, and administrative process related to both personnel security programs and to employee assistance and counseling programs. The second concerned perceptions and opinions about barriers to people seeking timely assistance. In the first area, we focused on the interaction and functional relationship between security and assistance programs and those professionals who administered them. In the latter, we sought advice and opinions about barriers and functional compatibility from both security and EAP professionals and from rank-and-file employees.

Data collection activity consisted of four phases:

1. A documentary review of regulations, directives, and policy guidance, relating to employee assistance and to personnel security programs.
2. Interviews with policymakers, headquarters-level security and EAP managers, and adjudicative staff at Defense component headquarters who could tell us about policies, the implementation of policies and adjudicative guidelines, and overall process within each component.
3. Interviews with installation-level (posts and bases in the field) managers, security officers, facility security officers (in Defense contractor companies), and counseling and referral providers who deal daily with employee problems and apply policies and guidelines in field situations.
4. Acquisition of information directly from typical employees who represent the population whose perceptions, behaviors, and reliability are our ultimate concern.

In this last phase, focus groups were used to elicit respondents' perceptions and feelings.

## **Research Methods**

### **Documentary Analysis: The Regulatory Basis**

In Phase 1, we gathered information about the legislative and regulatory history of employee assistance programs in the DoD and the mechanisms by which civilians and Defense industry receive referrals and counseling help. We reviewed DoD-wide and Army, Navy and Air Force policy for civilian EAPs and military counseling/referral services. Information was also compiled about the history and development of the EAP movement in the federal government and of counseling/referral services in the military services. In addition, our review included security policy, including the adjudicative guidelines. Information acquired through the analysis of policy documents was later verified through interviews with policymakers and program managers. References to specific legislation, regulations, and directives are found throughout the report and are also compiled in Appendix M.

### **Interviews: Policy and Process**

In order to learn more about how things work in practice and what people felt about the effectiveness of personnel security and employee assistance programs, we interviewed knowledgeable officials and administrators in government and industry. We sought only objective facts about function and process, but also these people's opinions about how well the personnel security and EAP systems were working together. In addition, officials were asked what they thought might be done to achieve a situation where cleared individuals would feel comfortable addressing their personal problems

before the problems could become a serious security concern. To gather this information, we conducted intensive, semi-structured interviews.

Interview protocols were tailored to the role and organizational context of the respondent who in each case we regarded as an expert source. While interviews were relatively unstructured, we attempted to cover all topics relevant to each interviewee. Very often, information we were seeking emerged naturally in the course of conversation without the interviewer having to ask the question.

Intensive interviewing, sometimes called elite or specialized interviewing, is an appropriate method of fact-finding where information can be obtained from a few key individuals who know how a process works, how decisions are made, or the context in which policy is implemented. Representativeness of sources is not a relevant issue here as opposed to survey research, which attempts to assess the distribution of attitudes in a given population. Interviewees are chosen because of what they are assumed to know because of their official position or experience.

In this study, each session was tailored to the unique interviewee, and the researcher was flexible and ready to respond to unexpected responses and follow up with additional questions. The format remained conversational and not highly structured. Interviews were conducted by two researchers, one of whom was responsible for conducting the discussion, the other for note taking. Following each interview trip, notes were typed up and discussed to make sure that the record was accurate. Occasionally a follow-up call was made to the interviewee to validate a point that was unclear to the researchers. No attempt was made to produce verbatim transcriptions of the interviews; however, 137 pages of typed field notes provided us with an information base to which we frequently turned to verify facts and to confirm general conclusions about policy and process.

All interviewees at military installations were promised anonymity. Thus, no names are mentioned in this report, and where individuals' remarks are quoted, they are attributed to only a job title. Responses have not been subjected to quantitative analysis. Rather, people's views were arranged into broad themes and reported in that fashion, often with the themes illustrated with direct quotations from the interviewees themselves.

Thus, Phase 2 of our data collection strategy consisted of face-to-face interviews with 24 key headquarters-level personnel. These were senior adjudicators in DoD central adjudicative facilities; senior security policymakers; DoD EAPs in Washington, DC; a key EAP analyst at OPM, and analysts from the OASD (Health Affairs)/TRICARE Management Activity regarding drugs and alcohol in DoD. Also, to set the context for the study, we interviewed 15 EAP directors and security officers in some of the intelligence and safety-sensitive agencies.

Phase 3 took us to 10 military installations in five states and the District of Columbia, where we talked to various categories of people (see Table 2 in body of report). We visited three installations each for Army, Navy and Air Force, and one Marine Corps facility. These installations were selected with the assistance of

headquarters-level senior personnel security specialists to show different aspects of each component's mission. While these installations did not constitute a large or statistically representative sample, they served to give us insights on how EAPs and counseling/referral services worked in different organizational settings.

### **Focus Groups: The Rank and File's Perceptions**

In selecting alternative data collection strategies for capturing the thinking of rank-and-file cleared personnel, we considered both survey and specialized interview methods.

Conducting interviews with personnel who had participated in EAP or military counseling/referral services programs raise privacy and confidentiality issues. The use of survey research techniques, on the other hand, creates serious issues about the representativeness of opinions recorded. Developing a truly representative sample drawn from a very large and widely dispersed population of civilian and military personnel in the Defense community would have been not only technically difficult but also extremely costly and probably burdensome to a large sample of respondents.<sup>27</sup> In addition, reliance on survey instruments presupposes that we have a fairly good idea of the possible range of feelings, opinions, and ideas about what could be done to improve the system, which we did not. Also, surveys may tell us what people think, but not why.

Focus groups are more likely to surface unanticipated views and innovative suggestions. Respondents would be more willing to fully express their views on a sometimes-personal subject when interacting with real people—colleagues in a focus group—rather than when responding to a structured questionnaire. Focus groups are an effective means of surfacing the range of perceptions and ideas on a particular issue that are present in a population. The purpose of focus groups is not to statistically measure the amount of consensus among members of the population in regard to a particular issue, but merely to identify issues that concern the participants. For this reason, this study reports the array of ideas expressed in the focus groups, not distribution counts or percentages of respondents whose opinions fall into particular categories.

Thus, in Phase 4, we met with three groups: two groups of GS11-13 civilians (11 and 10 participants respectively) and a group of 9 senior enlisted (E-7 and E-8). To each group we posed two questions: Given the fact that you hold security clearances, what do you think are the barriers, if any, to seeking help for personal problems? And what might be done to eliminate those barriers? Notes were typed on a computer as the discussion proceeded and were projected onto a screen overhead to enable participants to see (and comment on) what we recorded. Later we sorted the responses into major themes (see Perceptions of the Rank and File in this report).

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<sup>27</sup> There is little assurance, for example, that we could expect a questionnaire return rate that would be high enough to satisfy our concern with serious systematic bias associated with the willingness to respond.

## **Setting the Research Context: Intelligence and Safety-sensitive Community EAPs**

Although our ultimate goal was to describe the realities of how EAPs and personnel security programs function in DoD components, agencies, and contractor companies, we sought first to examine several programs within the intelligence community and safety-sensitive community. There was reason to believe that in intelligence and safety-sensitive organizations where security and employee well being and reliability are given a very high priority in terms of resources, EAPs and personnel security programs would work very well together. It was not our intent to conduct a specific, detailed study of these agencies' programs, much less compare and contrast them. We merely wanted to acquire some context against which to plan our research within DoD.

Six such agencies were visited and 13 individuals interviewed, six in Security, seven in EAPs. Shorter, informal interviews were conducted with two representatives of a seventh agency. Appendix J describes briefly the main themes that emerged from these interviews.

## **Appendix B**

### **Legislative and Regulatory History of Civilian EAPs**





## Legislative and Regulatory History of Civilian EAPs<sup>28</sup>

In 1946 Congress passed Public Law 79-658 (later codified into Title 5 USC Sec. 7901) that required that each Executive Branch agency in the U.S. government establish, within financial limits, health service programs. This law was an effort to formalize programs to encourage physical and mental fitness among government employees. Agencies used this legislation to also broaden the scope of counseling to include other emotional problems.

In 1965, Circular No. A-72, issued by the Bureau of the Budget, formally established the policy that all Executive Branch agencies *could establish* preventive health services programs for their employees. This Circular also assigned lead responsibility to what is now the Office of Personnel Management (OPM), for assisting Federal agencies in establishing such programs.

Programs for alcohol and drugs were later formally *authorized* through the enactment of the *Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970* (P.L. 91-616), known as the Hughes Act, and the *Drug Abuse Office and Treatment Act of 1972* (P.L. 92-255). These laws authorized OPM, with other federal departments and agencies, to provide drug and alcohol counseling and treatment programs to civilian employees.

In 1974, the *Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act Amendments of 1974* (P.L. 93-272) was enacted. It amended P.L. 91-616 and 92-255, bringing the confidentiality requirements of each into conformity with the other and requiring the alcohol or drug patient's signed, written consent for the disclosure of information.

Further amendments to P.L. 91-616 and P.L. 92-255 came out in 1979 (*The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act Amendments* [P.L. 96-180] and the *Drug Abuse Prevention, Treatment and Rehabilitation Amendments* [P.L. 96-181]), advising federal agencies, where possible, to extend counseling services to the families of employees with alcohol or drug problems and to employees with family members who have substance abuse problems. Title 5 CFR Part 792, *Federal Employees' Health and Counseling Programs*, lays out the regulatory requirements for alcoholism and drug abuse programs.

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<sup>28</sup> We are grateful to Frank Cavanaugh, Employee Health Services Branch of the Office of Personnel Management, for furnishing information on which this general legislative/regulatory history of federal EAPs is based.

It was in 1986 that Congress enacted the *Federal Employee Substance Abuse Education and Treatment Act* (P.L. 99-570) and, among other things, required OPM--in cooperation with the President, the Department of Health and Human Services, and other agencies--to develop government-wide drug and alcohol abuse policy guidance. OPM's policies are located at 5 CFR 792, where short-term counseling and/or referral is said to constitute the appropriate prevention, treatment, and rehabilitation programs.

The same year—1986—the *Omnibus Drug Enforcement, Education and Control Act* was enacted. That law reiterated Congressional concern about the prevention of illegal drug use and the referral to treatment of federal employees who use drugs. Also, in 1986, Executive Order 12564 *Drug-free Federal Workplace* established further requirements for agencies and employees in order to obtain a drug-free federal workplace. EAP was given a major role in these laws.<sup>29</sup> The executive order defined EAPs as “agency-based counseling programs that offer assessment, short-term counseling, and referral services to employees for a wide range of drug, alcohol, and mental health problems that affect employee job performance.”

OPM is responsible for overseeing the federal government's civilian EAPs. The *Federal Employee Substance Abuse Education and Treatment Act of 1986* (Title VI of Public Law 99-570) requires federal agencies to develop and maintain appropriate prevention, treatment, and rehabilitation programs for drug- and alcohol-related problems among civilian employees. These programs are carried out through EAPs in federal agencies. Until FY97, agencies were required to report to OPM on their employee counseling activities, and OPM was required to report to Congress on federal employee substance abuse. These reports contained information on employees with problems other than alcohol and drugs who received counseling through EAPs. In the latest OPM report (for 1997), “Other” represented 89% of problems (OPM, 1998, p. 4). The OPM reports list utilization rates for the various agencies. Participation rates reported by the military are: Department of Defense civilians in the Pentagon 0.5%; Air Force civilians, 1.0%; Army civilians, 2.1%; and Navy civilians, 2.4%. Utilization rates for other non-DoD federal agencies range from 0.3% for the Commodity Futures Trading Commission, to 9.5% for the Environmental Protection Agency, to 16.9% for the Federal Insurance Corporation, to 19.8% for the U.S. Information Agency. It is unclear even to OPM officials how much of this variation—in military agencies and in other federal agencies alike—represents real differences in utilization and how much is a function of different agencies' definitions of what *utilization* means and how contacts with agencies are counted in the tally. Nevertheless, there is concern about the fact that in some agencies utilization rates are very low. Possibly something is holding people back from seeking assistance; these fears may include concerns over confidentiality and trust.<sup>30</sup>

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<sup>29</sup> HHS Instruction 792-2, *Employee Assistance Program*, November 1996.

<sup>30</sup> Personal conversation with Frank Cavanaugh, OPM, March 19, 1999.

**Appendix C**  
**The EAP Movement**



## The EAP Movement

EAPs in DoD are designed to help civilian employees with problems that may affect their well being and lead to deteriorating job performance. The programs acknowledge the enormous human costs of allowing unhappy or ill employees to remain on the job without help. It is not just the individual who needs help; protecting the organization's interest is equally important. These concerns—compassion and productivity—hold true for both government and industry EAPs. The cost of preventing or treating problems is far less than the cost of dealing with the unfortunate results of allowing problems to go unheeded (Smits and Pace, 1992).

EAPs, in one form or another, have been in existence in the American workplace for the last 70 years. Their conceptual roots, however, go back at least as far as the 19<sup>th</sup> century, with the social welfare and temperance movements being the first steps toward establishing the climate in which EAPs would flourish in the decades to follow (Bickerton, 1990, pp. 34-42, 82-84). An early EAP-like program, begun in the 1920s, emerged from the so-called Hawthorne Studies at Western Electric, and was non-psychiatric in nature. The counselors were supervisors and other company employees who had no clinical training; they used a nondirective, empathetic interview style to bring about adjustments in Western Electric employees' attitudes towards work.

Eventually workplace assistance programs shifted from helping well-functioning employees to treating those who were troubled, especially those with drinking problems. In the 1930s, the Alcoholics Anonymous program began to stimulate the growth of recovery programs in industry. By the 1940s and 1950s, the occupational, or industrial, alcoholism programs had grown in number, with problem drinkers becoming the major focus of assistance programs for the next 20-30 years (Murphy, 1995). The programs were originally run by recovering alcoholics, but were later staffed by professional counselors. The National Council on Alcoholism and Drug Dependence,<sup>31</sup> an independent group of volunteers, began working with industry in 1959 to set up model programs that were the direct forerunners of EAPs.

By the 1970s it became increasingly difficult to justify treating only problem drinkers. Drugs became the next area of concern. The EAP movement received a boost in 1970 when the *Comprehensive Alcohol Abuse and Alcoholism Act* (the Hughes Act) created the National Institute on Alcohol Abuse and Alcoholism (NIAAA). This organization stimulated a move toward mainstreaming the treatment of alcohol and drug problems into the overall health care system (Ammerman, Ott, and Tarter, 1999, p. 317). In 1979 the Secretary of Health, Education and Welfare (later the Department of Health and Human Services) announced in Instruction 792-2 the creation of a department-wide counseling program for employees whose alcohol, drug, and other personal problems affected their ability to perform effectively on the job. In a 1990 revision, the DHHS

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<sup>31</sup> Originally established in 1944 under the name National Council on Alcoholism.

program's name was changed to Employee Assistance Program (Department of Health and Human Services, 1996).<sup>32</sup>

Executive Order 12564 *Drug-free Federal Workplace* (1986) marked a closer integration of EAPs and the order's drug requirements. EAPs were described in the order as "agency-based counseling programs that offer assessment, short-term counseling, and referral services to employees for a wide range of drug, alcohol and mental health programs that affect employee job performance."<sup>33</sup>

In the 1980s government and industry EAPs, while still focusing on alcoholism and drug abuse counseling, greatly expanded their services to deal with what are termed *broad-brush* problems. Programs now include the whole gamut of human troubles that include emotional, family, financial, legal and health problems; job stress; and the effects of violence in the workplace. A similar development occurred in industry EAPs, with programs moving from alcohol, to drugs, to broad personal problems. It was estimated in 1994 that approximately 13,000 EAPs were in existence as compared to 5,000 in 1981 (Masi, 1994, p. 14).

In terms of regulatory underpinning, DoD has a directive (DoD Directive 1010.10) on health promotion. It charges the components with establishing health promotion plans and programs. It deals with many matters sometimes covered by EAPs (smoking cessation, physical fitness, nutrition, weight control, stress management, alcohol and drug abuse, and early identification of hypertension), but does not expressly mention EAPs *per se*. The Assistant Secretary of Defense (Health Affairs) manages the contract for EAP services provided to civilians who work in the Pentagon. Otherwise, the establishment of EAP programs beyond those matters discussed in DoD Directive 1010.10 is the responsibility of the components.

**How EAPs Work:** Civilians with problems may themselves seek help directly from their organization's EAP; this is known as self-referral. In other cases, supervisors may ask them to consult the EAP—the supervisor has perhaps observed some kind of problem or a decrement in work performance; this is termed management referral.

For the most part, when an individual contacts an EAP (generally through a 1-800 telephone call), they are referred to a counselor in their own community. The counselor meets with them to identify and assess the problem. Counselors may then offer immediate short-term counseling if appropriate. Sometimes the problem can be solved during these few sessions. If not, people are referred by the counselor for longer-term treatment to resources in the community for whose services they (or their insurance companies) pay. Thus, EAPs are not cure-alls for problems that require extended care; for the difficult cases they act simply as conduits through which people pass to find longer-term help.

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<sup>32</sup> HHS Instruction 792-2 includes a safe harbor provision to protect people from prosecution for drug use if they admit to drug-taking before being found out some other way, if they successfully complete counseling, and if they do not use drugs again.

<sup>33</sup> Executive Order 12564 *Drug-free Federal Workplace*, September 15, 1986.

Some federal agencies or companies are large enough to sustain their own full-time EAP programs. Certainly, all the intelligence community agencies have their own internal EAP programs where EAP is handled inside the organization and where there is apparently a relatively cooperative relationship between the EAP and the agency's Security Office. Other smaller organizations assign EAP responsibilities to their personnel offices or employee health units as additional duties. However, many organizations, including Defense contractors, go outside for help by contracting with private sector, professional counseling organizations.<sup>34</sup> Indeed, a number of agencies or companies pool their resources into consortia that share the services of a private professional counseling organization.

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<sup>34</sup> Fifty-seven percent of government civilian agencies in FY97 contracted out their EAP functions. See OPM (1998), p. 2.





## **Appendix D**

### **Military Counseling/Referral Services**



## Military Counseling/Referral Services

The military does not call its various counseling and referral programs employee assistance programs *per se*. Rather, the military provides a smorgasbord of helping programs that fall under the heading *counseling/referral services*. These programs tend to be situated on base or post rather than in the community. A few are made available to civilians on a space-available basis; however, the programs are primarily used by military personnel (active or retired) and their families. As one interviewee told us, “The military kinda takes care of its own.”

These military programs include hospital and clinic-based programs for mental health and special programs for substance abuse. On the other hand, some programs are for “well” personnel, the myriad services provided under the Family Support/Service Center umbrella. These centers are staffed by financial and personnel officers who provide advice; housing officers who place military families in housing on base or post; informal support organizations such as officer and enlisted spouses’ clubs; and military aid societies that provide emergency financial assistance to people in need. Over time, this array of support programs has been increased as a way to attract and retain quality personnel. In 1995 Secretary of Defense Perry announced an ambitious plan to improve and institutionalize quality of life for service members, a plan that included increased funding for community and family support (Secretary of Defense, 1996). In 1998, Secretary of Defense Cohen established the Quality of Life Executive Committee. This committee, composed of senior DoD leaders and managers, advises the Secretary of Defense and advocates for military personnel and their families on all quality of life issues, including the various community support programs.

We describe below some of the military programs, tracing where possible their regulatory underpinnings.

**Substance Abuse:** While alcohol programs had been around for many years, the early military drug programs were stimulated by drug usage among the U.S. armed forces in Vietnam. In the 1960s the drug problem became so worrisome that the military initiated a drug-testing program to identify drug users and refer them to counseling. In September 1971, Public Law 92-129 mandated a program for the identification and treatment of drug and alcohol-dependent persons in the military. In turn, the Secretary of Defense directed each of the Services to develop drug abuse prevention and control programs that would identify, treat, and rehabilitate all service members dependent on drugs (Department of the Army, 1999, 1.6.a). Such programs were instituted by the Services. Yet substance abuse in the armed forces continued to grow steadily during the 1970s. There were several major incidents involving illegal behavior that were publicized in the press. These include, for example, the 1981 plane crash on the flight deck of the aircraft carrier *USS Nimitz* where autopsies revealed that six of the 13 sailors who died showed evidence of marijuana use. Prompted by such tragic cases and in order to stiffen penalties for military drug users, the DoD updated its original drug-testing policy (DoD Directive 1300.11 *Illegal or Improper Use of Drugs by Members of the Department of Defense (1970)*) with DoD Directive 1010.1 *Department of Defense Drug Abuse Testing*

*Program* (1983). This required each of the military Services to enact and operate urinalysis drug-testing programs where results could be used, with certain restrictions, in punitive or separation proceedings. Also, DoD initiated a 10-point program to control drug abuse that called for increased drug testing, discharge of repeat offenders, improved rehabilitation programs, and a massive education effort (Ammerman, Ott, & Tarter, 1999, pp. 349-50).

The military's aggressive workplace drug-testing policy—zero tolerance—resulted in drug prevalence rates among military personnel being significantly lower than civilian rates (Mehay and Pacula, 1999). Military prevalence rates fell from 27.6% in 1980 to only 2.7% in 1998 (Bray, et al., 1998). The early 1980s also saw a great number of court cases related to irregularities in military drug-testing laboratories. Again, these resulted in unfortunate publicity for the program. The problems were eventually overcome, however. Since then the drug program has remained more or less stable, except that it tests for a much wider range of drugs than the marijuana and heroin of earlier programs and has recently come to include testing of a larger number of civilian DoD employees in *testing-designated positions* (TDP) (Department of the Army, 1999, Chap 5, 14[1] – [18]). Current policies stress prevention, which includes drug testing, as the most effective way of reducing substance abuse, although treatment is also provided to those who need it. In all, the program has been extraordinarily successful.

Formerly known as the Alcohol and Drug Abuse Prevention and Control Program (ADAPCP), the Army's program is now the Army Substance Abuse Program (ASAP). This command program emphasizes prevention, education, identification (including drug testing), rehabilitation, treatment, program evaluation, and research. The program offers alcohol and drug abusers who warrant retention an opportunity for counseling and rehabilitation.

The Navy's Drug and Alcohol Abuse Prevention and Control Program had its beginnings in the late 1960s when the first alcohol treatment unit began operating at the Naval Hospital, Long Beach, CA. The key elements of this program today are enhanced detection and deterrence; firm, constructive discipline; prevention education; and intervention and treatment. Within the Navy's program, the Right Spirit campaign began in 1996, with a goal of changing the Navy's attitude and culture toward alcohol. Specifically this campaign stresses deglamorization of alcohol, and emphasizes alternatives to drinking.

The Air Force's program is called Alcohol and Drug Abuse Prevention and Treatment (ADAPT). The purpose of this program is also to promote readiness, health and wellness through prevention of substance abuse. The program aims to minimize the negative consequences of substance abuse to the individual, family, and the mission, and to return identified substance abusers to unrestricted duty status or assist them in the transition to civilian life.

The goal of the Marine Corps program is to improve the capability of commanders and their Marines to prevent substance-related problems that detract from

unit performance and readiness. The Marines concentrate most of their efforts on alcohol. They stress command responsibility and personal responsibility and, like the other Services, seek to deglamorize the use of alcohol. The Marine Corps program, “Semper Fit,” encourages Marines to adopt healthy lifestyles, recognizing that irresponsible use of alcohol is an unhealthy behavior.

The major regulatory authorities for the military drug and alcohol programs are DoD Directive 1010.1 *Military Personnel Drug Abuse Testing Program* (1974, revised 1994, Change No. 1, 1999), DoD Directive 1010.4 *Alcohol and Drug Abuse by DoD Personnel* (1980, replaced 1997), and DoD Directive 1010.6 *Rehabilitation and Referral Services for Alcohol and Drug Abusers* (1981, revised March 1985).

DoD Directive 1010.9 *Civilian Employee Drug Abuse Testing Program* (1985, revised 1988, Change 1 January 1992) implemented Executive Order 12564 for civilians in DoD. It established the DoD civilian drug-testing programs. Such programs, the directive said, should include provisions for employee privacy, use of EAPs, and mandatory referral of drug takers to EAPs for assessment, counseling, and rehabilitation.<sup>35</sup> Maximum confidentiality consistent with safety and security should be maintained, and supervisory training should be set up to help supervisors identify illegal drug usage and learn how to deal with it. A program should make provision for identifying illegal drug users that would include both voluntary and random testing. The directive also established random testing for employees in sensitive positions (termed *testing-designation positions* [TDPs]). People in such TDPs must not be allowed to remain on duty while going through rehabilitation via an EAP. However, the head of a DoD component “...may allow an employee to return to duty in a sensitive position if it is determined that this action should no longer pose a danger to public health or safety or to U.S. national security” (6.2.4). Except for employees who voluntarily identify themselves as users of illegal drugs, obtain counseling and rehabilitation and thereafter refrain from illegal drug use, DoD must begin disciplinary actions against employees found to have been using illegal drugs. Actions can range from reprimand, to suspending people until they have successfully completed counseling, to removing employees from federal service.

**Mental Health:** Mental health services in DoD developed in response to the rapidly changing demographic profile of the military since World War II. By 1965, 60% of enlisted and 80% of officers were married. With deployments and other exigencies of military life, some 100,000 women or men would likely be separated from their spouses at any given time. This led to family problems and reports of an unprecedented negative impact on troop morale and retention (Krise, 1966 in Daley, 1999, p. 14).

Mental health services consist of five disciplines: psychiatry, psychology, social work, psychiatric nursing, and enlisted mental health counseling. These services come under the military medical chain of command. Mental health offers a mix of services, a blend of EAP-like programs and a full range of clinical services (in- and out-patient

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<sup>35</sup> However, one’s participation in a rehabilitation program through EAP does not prevent Security from initiating any disciplinary action authorized on a finding of illegal drug use (6.2.3).

therapy; substance abuse screening and treatment; individual, group and family therapy, etc.) The EAP-type services include mental health evaluations, screening interviews for specialty jobs, and recommendations for retention in the military (Daley, 1999, p. 125). These programs are known as commanders' programs and have long been a tradition in all the Services, to help individuals continue in the military, or to expedite their departure (Daley, 1999, p. 125). Family advocacy programs, focusing on family violence, have in general moved outside the purview of Mental Health and are now separate programs.

**Family Advocacy, Family Support/Service Centers:** In these other areas, emphasis on counseling increased after the institution of the all-volunteer force in 1973. In the area of family advocacy, for example, in 1973 the Assistant Secretary of Defense for Health and Environment established the Tri-Service Child Advocacy Working Group. By the beginning of 1977 each of the Services had a child advocacy regulation and the Navy had a spouse abuse program. The first DoD directive on family violence was published in May 1981; this directive, which established a comprehensive approach to prevention and intervention, was most recently revised in 1992 (DoD Directive 6400.1 *Family Advocacy Program*). Each Service has its own family advocacy program, but DoD Directive 6400.1 is closely followed.

Family Support Centers (Family Service Centers in the Navy) have been in effect since the 1960s for the Army and since the early 1980s for the Navy, Marine Corps, and Air Force. In 1999 there were 281 centers DoD-wide: Army 112, Navy 66, Air Force 84, Marine Corps 19, and Air Force Reserves 16. The centers were developed to facilitate families obtaining preventive and problems-of-living assistance without the real or imagined stigma of going to mental health clinics (Daley, p. 131). Their primary goal is to enhance family wellness and thereby improve military readiness. And they were created to counter the potentially negative effect of family distress on career retention and on deployment capability of military members. The primary service areas include mobility and deployment assistance; family life education; information and referral; relocation assistance; personal financial management; employment assistance; and crisis assistance. DoD Instruction 1342.22 of 1992 (soon to be updated) spells out the requirements for the Family Center program.

## **Appendix E**

### **Confidentiality in EAPs and Counseling/Referral Services**





## Confidentiality in EAPs and Counseling/Referral Services

Whether they work in government, in the military or in Defense contractor companies, and whether or not they have security clearances, individuals who seek help for personal problems need to be certain that their conversations will remain private. Privacy rights are covered by two pieces of legislation. For federal employees, the *Privacy Act of 1974* (P.L. 93-579) protects the confidentiality of EAP clients. The act states that agencies may not disclose “any record which is contained in a system of records by any means of communication to any person or to another agency, except pursuant to a written request by, or with the prior written consent of, the individual to whom the record pertains.” There are several exceptions to this.<sup>36</sup>

Title 42 CFR Part 2 *Confidentiality of Alcohol and Drug Abuse Patient Records* also protects record confidentiality and applies to all people, not just federal employees. The purpose of the regulation is to impose restrictions upon the disclosure and use of alcohol and drug abuse patient records that are maintained in connection with the performance of any federally assisted alcohol and drug abuse program. While the individuals most commonly consent to disclosure (by providing permission in writing), records may also be released for other reasons without permission. These reasons include the requirement of records by medical personnel in a medical emergency; the conducting of scientific research, management and financial audits, or program evaluation (even here patients cannot be identified individually); when there is a court order signed by a judge; and when a counselor learns of abuse or neglect of a child or elder. Some states also require the disclosure of any specific threat made by people to harm others or themselves. These exceptions, as they are termed, are generally made known in a limits-to-confidentiality agreement that clients read and sign when they first come to a counseling program.

While all EAP records are protected under the general Privacy Act, protection of records for problems other than substance abuse is not as airtight. This is because substance abuse records are granted the especially strong protection of 42 CFR Part 2. However, it is common practice among EAP administrators and counselors to treat all kinds of records, not just substance abuse, as one-hundred percent confidential. Thus, all kinds of problems are drawn under the substance-abuse confidentiality umbrella. This protection by licensed practitioners conforms with professionals’ ethical requirements where client-therapist relationships are held sacred.

Military personnel appear to have fewer privacy rights than civilians. This is related to unique requirements for readiness and well-being in the military in which commanders must know everything that is occurring in their units, including the physical

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<sup>36</sup> See 5 USC 552(a)(b) Conditions of Disclosure. Exceptions include disclosure to officials in the agency who maintain records who have a need for the record in the performance of their duties; for routine uses; to the Bureau of the Census; for statistic research; to the National Archives and Records Administration; to another agency for a civil or criminal law enforcement activity; for compelling circumstances affecting the health or safety of an individual; to either House of Congress; to the Comptroller General; in response to a court order; to a consumer reporting agency (under certain circumstances).

and mental health of their troops; problems in military persons' lives can severely curtail their ability to function in a military situation and can certainly affect a commander's ability to command.

DoD 5400.11-R *Department of Defense Privacy Program* (August 1983) allows records to be disclosed within the DoD without the consent of the individual "...to any DoD official who has need for the record in performance of his or her assigned duties." The various branches of the military have their own regulations stemming from this.<sup>37</sup> The Military Rules of Evidence stress that there are limits to confidentiality for military health care providers (DoD, 1995, Rule 501(d)). Commanders, armed with inherent power to know what is taking place in their units, are granted the authority to ask for individuals' physical and mental health records. Such requests may occur as part of the initial clearance process, at the time of periodic reinvestigations for their security clearances, or at any time that an issue surfaces. This need to know and its relationship to readiness is not explicitly defined in DoD directives or military regulations, but it is a widely applied principle in the military and is justified on the basis of national defense (Barnett and Jeffrey, 1996). Hence, military personnel who visit military-provided counselors on base or post, be it for drugs and alcohol or mental health or any other problem, may assume that, despite signed limits-of-confidentiality agreements, their attendance at counseling may eventually be known to their commander. If service members understand this potential for lack of privacy, this will be a major deterrent to their voluntarily seeking help. In reality, however, few commanders request records (Rhem, 2000). The unit commander we interviewed said he had never asked to read a medical report. "That is between the patient and his doctor," he said. "We need to let people know this."

Congress directed the General Accounting Office (GAO) to conduct a study of military dependents and their use of military counseling services. Congress was concerned that dependents of military members may not have the same level of confidentiality as they would in the civilian community when it comes to spousal and child abuse cases. The report (GAO, 2000) indicates that indeed military dependents are provided only limited confidentiality, in that commanders assert that they need to have that information in order to protect the victims. The issue remains unresolved pending more studies, including a 3-year, Congressionally mandated study on domestic violence scheduled for completion in 2002. Actually, in wholly civilian settings, a therapist is required by law to report evidence of spousal or child abuse to appropriate civilian authorities.

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<sup>37</sup> See, for an example, the Army's AR 40-66 *Medical Record Administration and Health Care Documentation*, specifically Chapter 2, Confidentiality of Medical Information.

## **Appendix F**

### **Personnel Security Policy and Employee Assistance**



## Personnel Security Policy and Employee Assistance

Several overarching policies relate to security and counseling programs. First we describe the two concerning the collateral clearance program, and then the DCID describing the sensitive compartmented information (SCI) system. (The present study concerns only collateral, but since for comparative purposes we did visit intelligence and safety-sensitive agencies, we also here discuss briefly the SCI policy document.) The federal government also has a set of common adjudicative guidelines that are used by adjudicators in DoD's CAFs to determine who should receive clearances. These guidelines are discussed at the end of this section.

Three documents constitute the principal national-level policy guiding the government's personnel security system in which personal problems are mentioned that might cause a person to be refused a clearance, or where employee assistance programs are mentioned either as EAPs *per se* or generically as rehabilitation or treatment programs. These are Executive Order 10450 *Security Requirements for Government Employment*, Executive Order 12968 *Access to Classified Information* and Director of Central Intelligence Directive 6/4 (formerly DCID 1/14) *Personnel Security Standards and Procedures Governing Eligibility for Access to Sensitive Compartmented Information*. In addition, Executive Order 12564 *Drug-free Federal Workplace* was issued in 1986 to eliminate illegal drugs among all civilians in the workforce, cleared or not.

In the security world, special rules regulate individuals applying for, or already holding, security clearances. Executive Order 10450 *Security Requirements for Government Employment* (1953) laid down the fundamental principles of the personnel security system. It required all departments and agencies of the government to establish programs to ensure that the employment and retention of any civilian officer or employee is "clearly consistent with the interests of the national security." It spelled out areas to be covered in a background investigation of an individual seeking a security clearance. Among these were "habitual use of intoxicants to excess, drug addiction, sexual perversion...any illness, including mental illness, that may cause significant defect in the judgement or reliability of the employee." The order granted authority to department or agency heads to suspend or terminate the employment of a person if it is deemed that doing so is necessary to the interests of national security. No mention is made in this order of developing any programs to help those people who did exhibit such weaknesses or who might require help and advice on personal matters that may affect their work.

Executive Order 12968 *Access to Classified Information* (1995) referred to EAPs. The order required executive agencies granting access to classified information to establish programs for cleared employees that inform them about "guidance and assistance available concerning issues that may affect their eligibility for access, including sources of assistance for employees who have questions or concerns about financial matters, mental health, or substance abuse" (Part 1, Sec. 1.5).

For higher levels of access, the DCID 6/4 (formerly DCID 1/14), *Personnel Security Standards and Procedures Governing Eligibility for Access to Sensitive*

*Compartmented Information (SCI)* (1998), discussed in paragraph 12 (Continuing Security Programs), the requirement is that continuing security programs be established, based on risk-management principles, for all individuals having SCI access. The same paragraph states that agencies' security programs must also ensure that individuals inform the agency or department of any personal problem or situation that may have a possible bearing on their eligibility and seek appropriate guidance and assistance. Where appropriate, tailored monitoring programs (developed via EAPs) should be established to ensure that individuals actively resolve their problems. While people are participating in such a monitoring program, they are denied automatic reciprocal acceptance of SCI eligibility.

The 1986 Executive Order 12564 *Drug-free Federal Workplace* was issued in an effort to eliminate the use of illegal drugs by all federal civilian employees, whether cleared or not. This goal is stated in its preamble. It required that the federal government "...show the way towards achieving drug-free workplaces through a program designed to offer drug users a helping hand and, at the same time, demonstrate to drug users and potential drug users that drugs will not be tolerated in the federal workplace."

It required agencies to develop a plan to achieve the objective of a drug-free workplace and provide the programmatic means to do so. The plan should include a statement of policy; should establish EAPs with high-level direction, education, counseling referral to rehabilitation, and coordination with available community resources; and should initiate supervisory training to assist in identifying and addressing illegal drug use by employees. It should make provision for self-referrals and supervisory referrals to treatment, with maximum respect for individual confidentiality consistent with safety and security issues. And it should develop a system for identifying illegal drug users, which would include both mandatory and voluntary testing.

Addressing security matters, Executive Order 12564, in Sec. 5 on personnel actions, required that agencies refer employees who are found to use illegal drugs to an EAP for assessment, counseling, and referral for treatment. At the same time, says Sec 5, agencies may also initiate action to discipline such employees unless they had voluntarily identified themselves as drug users or had volunteered for drug testing prior to being identified through other means; had obtained appropriate counseling and rehabilitation; and thereafter had refrained from using illegal drugs. This is the basis for "shelter" programs used in the field to protect DoD civilians from prosecution for their illegal drug use, a provision termed (by the Navy) Safe Harbor. After referring an employee who is found to use illegal drugs to an EAP for assessment, counseling, etc., the agency can separate people from federal employment if they refuse that counseling.

Sec. 5 also touched on "employees in sensitive positions." Such people are not allowed to remain on duty until they have successfully completed a rehabilitation program organized through an EAP. However, agency heads have the discretion to allow the employee to return to duty in a sensitive position "if it is determined that this action would not pose a danger to public health or safety or the national security." Another clause in Sec. 5 concerns the agency's power to fire people found to use illegal drugs

who refuse to obtain counseling or who do not refrain from using drugs once their counseling is completed.





## **Appendix G**

### **Policy: The Defense Personnel Security Program**



## **Policy: The Defense Personnel Security Program**

DoD Directives 5200.2 and 5200-2.R are the basic policy documents for the DoD personnel security program.

The 5200.2 states that military, civilian and contractor personnel with security clearances must be reliable and trustworthy, and there must be “no reasonable basis for doubting their allegiance to the United States.” The fact that all appointments and assignments must clearly be consistent with the interests of national security is stressed. And the “qualifications” for people seeking clearances are listed.<sup>38</sup> Of particular relevance to the present research is Para 3.8 that specifically states that “no negative inference may be raised solely on the basis of mental health counseling. Such counseling can be a positive factor in eligibility determinations.” However, the paragraph goes on to claim the government’s right to inquire further into mental health counseling if it is “relevant to the adjudication of access to classified information.”

DoD Directive 5200-2.R *Personnel Security Program* (January, 1987, now on Change 3 and soon to be completely revised) is the corollary regulation to 5200.2 and implements the personnel security requirements of various executive orders. This security directive outlines personnel security policies and procedures, including provisions for helping troubled employees. Chapter 9 (Continuing Security Responsibilities) encourages all DoD components to develop programs to counsel and assist employees in sensitive positions who are “experiencing problems in their personal lives. Such areas might include financial, medical and emotional difficulties.”

The chapter specifies the various responsibilities of supervisors, coworkers, and individuals. Supervisors must find ways to identify potential problems at an early stage so that any assistance will have a reasonable chance of preventing long-term, job-related security problems. Specific instructions should be disseminated concerning reporting procedures to enable the appropriate authority to take timely corrective action to protect national security as well as to provide necessary help to the individual to correct any personal problem that may have a bearing upon his continued eligibility for access. Coworkers are required to inform supervisors when they observe colleagues’ behavior that may have serious security significance. Individuals, in their turn, must be aware of the standards of conduct required of them in their positions of trust and must recognize and avoid the kind of personal behavior that may result in their losing their clearance. In other words, the directive firmly places on the individual “the ultimate responsibility for maintaining continued eligibility for a position of trust.”

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<sup>38</sup> “U.S. citizens for whom an appropriate investigation has been completed and whose personal and professional history affirmatively indicates loyalty to the U.S., strength of character, trustworthiness, honesty, reliability, discretion and sound judgment, as well as freedom for conflicting allegiances and potential for coercion, and willingness and ability to abide by regulations governing the use, handling, and protection of classified information.” (Para 3.4)



## **Appendix H**

### **Specific Security and EAP Policies for Military Components**



## **Specific Security and EAP Policies for Military Components**

### **ARMY**

#### **Security**

AR 380-67 *Personnel Security Program*, Chapter 9, Continuing Security Responsibilities, is based on the 5200.2R. It stresses the importance of continually assessing an individual's trustworthiness. Heads of components are required to establish a program designed to evaluate on a continuing basis the status of personnel under their jurisdiction with respect to security eligibility. The regulation discusses management responsibilities for periodically instructing individuals with clearances on the national security implication of their duties and individual responsibilities. Commanders are encouraged to develop programs designed to counsel and assist employees in sensitive positions who are experiencing problems in their personal lives with respect to such areas as financial, medical or emotional difficulties. Such initiatives should identify potential problem areas at an early stage. The regulation goes on to describe the responsibilities of managers, coworkers, and the individuals themselves regarding how, when and why to report derogatory information.

#### **EAP/Counseling/Referral Services**

**EAP:** Chapter 14 of AR 600-85 Army Substance Abuse Program (ASAP) addresses policies, programs and services for supervisors of civilian employees, civilian employees, family members of military and civilian employees, and to military retirees and their family members. EAP services are available to all Army civilian employees for whatever problems may be affecting their performance or attendance. Managers and supervisors receive training and are urged to refer their employees to the EAP for screening, short-term counseling and referral services. These services are voluntary, free, and confidential. At most Army installations a trained and certified EAP coordinator (EAPC) is available to assist. Executive Order 12564 Drug-Free Federal Workplace Program requires all employees found to be using illegal drugs be referred to the EAP, an essential element in achieving a drug-free workplace. According to AR 380-67, when notified that an employee has been found to use illegal drugs, the supervisor is required to initiate an evaluation of continued eligibility for access to classified information. The Army Risk Reduction Program (RRP) applicable to service and civilian members is addressed in Chapter 2 of AR 600-85. This program promotes the concept of reducing risk by targeting problems early, before they become crises that place families, careers, productivity, and readiness in jeopardy.

**Counseling/Referral Services:** The AR 600-85 Army Substance Abuse Program (ASAP) prescribes policies and procedures to implement, administer, and evaluate the Army substance abuse program for both its uniformed and civilian workforce. All chapters except Chapter 14 refer to provisions for military personnel.

## NAVY AND MARINE CORPS

### Security

Chapter 10, Continuous Evaluation, of the Navy's Security instruction, OPNAVINST 5510.30A, *Department of the Navy Personnel Security Program*, calls on commanding officers to establish and administer a program for continuous evaluation, a program that relies on all people in the command, including coworkers, to report questionable or unfavorable information. This information will be later adjudicated by the DON central adjudication facility. The instruction requires that commanders attempt to balance the needs of the individual with problems and the requirements of national security. Keys to a successful continuous evaluation program, says the instruction, are "security education and positive reinforcement of reporting requirements in the form of management support, confidentiality, and employee assistance referrals."

The instruction refers to E.O. 12968 and its requirement that each command establish a program to educate employees about personnel security responsibilities and inform them about available guidance and assistance programs. This includes problems in financial matters, mental health, or substance abuse. Commands should ideally identify people with personal problems at an early stage in order to guide them to appropriate counseling programs.

### EAP/Counseling/Referral Services

**EAPs:** OPNAVINST 5355.4 *Department of the Navy Drug-free Workplace Program* (1989) is the Navy's policy requirement for a drug-free workplace. The instruction includes policies and procedures for civilian employee education, employee assistance, supervisory training, and identification of drug use through drug testing. It states that civilian employee assistance programs (CEAPs) will be used to provide initial counseling and referral to any employee who has been identified as a user of illegal drugs, either through a verified positive drug test or by self-admission. If the employee occupies a sensitive position, he or she will immediately be removed from that position. However, as part of a counseling or rehabilitation program, the employee may be returned to the sensitive position if such action does not endanger public health, safety or national security.

The Department of the Navy includes in this instruction a provision for Safe Harbor (immunity from discipline for admitted illegal drug use) for civilians who voluntarily identify themselves as users of illegal drugs prior to being identified by other means. They must also obtain counseling and rehabilitation through a CEAP. They must agree to be periodically tested, and consent in writing to release all records related to drug counseling and rehabilitation to appropriate management and CEAP officials. Lastly, they must refrain from using illegal drugs in the future.



**Counseling/Referral Services:** OPNAVINST 5350.4C *Alcohol and Drug Abuse Prevention and Control* is the instruction for the military side of the Navy. The Instruction provides comprehensive alcohol and other drug abuse prevention and control policy and procedures for all Navy military personnel. The underlying elements of the program are enhanced detection, deterrence, prevention, intervention, and treatment when necessary. Like the other Services, the Navy has a zero tolerance policy for drugs. For alcohol, the Navy wants to see “as many members as are prudently possible who are diagnosed as alcohol abusers or alcohol-dependent be returned to full duty status upon successful completion of prescribed education, intervention, and treatment” (p. 5).

## **AIR FORCE**

### **Security**

Air Force Instructions (AFI) 31-501 *Personnel Security Program Management* and 31-502 *Personnel Security Program* cover the security program for the Air Force. These regulations rely heavily on DoD Directive 5200.2-R and frequently refer the reader directly to that document. A short chapter (Chapter 9) of AFI 31-501 discusses continuous responsibilities for security. It states that indoctrination training must advise supervisory personnel of their responsibility for “continuing observation of subordinates for conduct or conditions listed in the criteria for application of security standards.” Supervisory personnel must also understand the necessity for immediately reporting to the commander when such conditions come to their attention. AFI 31-502 is basically a handbook providing detailed guidance for implementing the Air Force personnel security program.

### **EAP/Counseling/Referral Services**

**EAP:** On the civilian side, AFI 36-810 *Substance Abuse Prevention and Control* provides guidance on how to prevent, reduce, and control substance abuse. This involves training managers, supervisors and employees how best to address substance abuse issues, referring employees to rehabilitation services and treatment, and restoring employees to full effectiveness. The instruction also explains in detail how to identify and rehabilitate civilian employees who are substance abusers and discusses how supervisors should deal with troubled employees. It has a section on the responsibilities of a substance abuse counselor and also describes rehabilitation and follow-up for employees and has another section on education and training.

**Counseling/Referral Services:** AFI 44-121 *Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program* establishes guidance for the identification, treatment and management of military personnel with substance abuse problems. The objective of the program is to promote readiness and health through the prevention and treatment of substance abuse. Other objectives are to minimize the negative consequences of substance abuse to the individual, family and organization; to provide comprehensive education and treatment to individuals who experience problems attributed to substance abuse; and to return substance abusers to unrestricted duty status or assist them in

transitioning to civilian life. Individuals are encouraged to seek assistance. For drugs, if individuals self-disclose with the intention of entering treatment, the commander will grant “limited protection” for them if they reveal this information with the intention of entering treatment. For alcohol, commanders must provide sufficient incentive to encourage members to seek help for problems with alcohol without fear of negative consequences.<sup>39</sup>

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<sup>39</sup> Page 12 of Instruction

## **Appendix I**

### **The Personnel System and Adjudicative Guidelines**



## The Personnel System and Adjudicative Guidelines

Security clearances signal the government's confidence in people's ability to safeguard classified information. People are granted (or denied) such clearances after a two-step process. The first step is the personnel security investigation, an inquiry into an applicant's past to gather evidence to help determine whether he or she can be trusted with classified information. The applicant's file is then sent from the field to a DoD centralized adjudication facility (CAF) for the second step of the process, adjudication.

Adjudication is conducted in nine CAFs or centers having responsibility for specific populations of cleared employees. It is beyond the scope of this report to describe in detail the clearance process within each these facilities. In general, decisions on whether to grant or revoke a person's clearance status rest on investigative evidence related to that person's past conduct. That record of behavior (favorable and unfavorable) is examined by an adjudicator with reference to a series of 13 adjudicative guidelines, or issue areas, under which personal problems (also known as security *concerns*) may fall. These guidelines are in place to ensure that decisions are made fairly, impartially, and consistently across time and across CAFs.

Among the 13 issue areas (A through M), the following four are areas in which employee assistance programs have actively provided counseling and referral services, for longer-term counseling and treatment to at-risk employees. A fifth area, sexual behavior, could be addressed through an employee assistance program if it is indicative of a treatable mental disorder.

Guideline F: Financial considerations, unusual indebtedness or inability to manage personal finances.

Guideline G: Alcohol consumption; alcohol-related incidents, intoxication on the job, or evidence of alcohol dependency.

Guideline H: Drug involvement; use of an illegal drug or use of a legal drug in a manner that deviates from approved medical direction.

Guideline I: Emotional, mental, and personality disorders; a pattern of high-risk, irresponsible, aggressive, anti-social or emotionally unstable behavior.

(Guideline D: Sexual behavior; a pattern of self-destructive or high-risk behavior or which is symptomatic of a personality disorder.)

While the guidelines do not use the phrase *employee assistance program*, they *infer* EAPs or counseling/referral services. The guidelines include such words as *rehabilitation*, and refer to people *seeking assistance* and *following professional guidance*. Listed as a mitigating circumstance is the fact that a person may have successfully completed inpatient or outpatient rehabilitation along with aftercare requirements (alcohol), a prescribed drug treatment program, including rehabilitation and

aftercare requirements (drugs). The person may also have received a recent opinion by a credentialed mental health professional that his or her previous emotional, mental, or personality disorder is cured (mental health).

Twenty-two percent of cases submitted to the CAFs are “clean,” where no derogatory information is present. Another 15% contain major derogatory (“derog”) information that requires careful review by an experienced adjudicator and could possibly lead to a denial or revocation. These cases are easier to adjudicate. It is the other 62% of cases, the minor derog cases that fall in the gray area of having issue information that may not be disqualifying that present an adjudicative challenge (Crawford & Riedel, 1996). It is the task of the adjudicator to decide the conditions, if any, under which people can mitigate their derogatory behavior and thus keep their clearances or earn them back. Regulations and guidelines help adjudicators make these decisions, but application of the security rules is often leavened with common sense as the adjudicators strive for consistency and fairness in their decisions as to who should be allowed to hold security clearances.

The guidelines also identify mitigating factors that may allow a person’s access to continue without interruption. The guidelines state:

“When information of security concern becomes known about an individual who is currently eligible for access to classified information, the adjudicator should consider whether the person:

- a. Voluntarily reported the information;
- b. Was truthful and complete in responding to questions;
- c. Sought assistance and followed professional guidance, where appropriate;
- d. Resolved or appears likely to favorably resolve the security concern;
- e. Has demonstrated positive changes in behavior or employment;
- f. Should have his or her access temporarily suspended pending final adjudication of the information.”

An employee’s willingness to seek assistance and follow professional guidance to address a problem is considered by adjudicators to be strongly mitigating. If, after balancing the good with the bad, an adjudicator believes that the individual can be trusted to safeguard national security information, eligibility is continued. The guidelines go on to state that if the adjudicator decides that the adverse information is not serious enough to warrant a revocation, it may be appropriate to recommend approval but with a warning that future incidents of a similar nature may result in revocation of access.

References in the guidelines to professional helping programs illustrate the fact that EAPs and their like are a formal and essential part of the security program. It should be noted, however, that the guidelines also clearly state that “any doubt as to whether access to classified information is clearly consistent with national security will be resolved in favor of the national security.” This leaves adjudicators the latitude, in the interest of the larger goal of national security, to allow security concerns to override any mitigating factors in the lives of cleared people trying to clear up their problems.

The current guidelines recognize that seeking professional assistance to overcome a personal problem should weigh on the positive side—in support of continued access. As pointed out earlier, the dilemma for employees is that by seeking assistance they must admit that a problem exists. By following the rule of honest disclosure when preparing the SF-86 form for a periodic reinvestigation, a problem from the past becomes a matter of record and a *security concern* that security professionals need to know if they are to adjudicate a person's case adequately.





## **Appendix J**

### **Intelligence Community and Safety-Sensitive Agencies' Programs**



## **Intelligence Community and Safety-Sensitive<sup>40</sup> Agencies' Programs**

In planning the research design for this study, we spoke first with individuals involved with Security and EAPs in intelligence and safety-sensitive agencies. It was not our intention to conduct a specific, detailed study of these agencies' programs, much less compare and contrast them. We merely wanted to acquire some context against which to plan our research of DoD programs. We visited six such agencies, interviewing 13 individuals, six in Security, and seven in EAPs. We conducted shorter, informal interviews with two representatives of a seventh agency. The main themes that emerged from these interviews are given below.

The model for EAP treatment in these agencies is internal. The first stop for a person seeking help is an EAP inside the agency, not a contracted-out service. The EAP staff then assess the person's problems and try to treat them in-house. If longer-term attention is required, individuals are referred to appropriately vetted and cleared therapists in the community. There was one exception to the completely internal program: one safety-sensitive agency has a combination of internal and external counseling where individuals can choose between consulting the on-site EAP or using the agency's external program.

Agencies strive for the perfect situation—a harmonious relationship between Security and EAP—and achieve this with varying degrees of success. As one interviewee put it, there is “a healthy tension” between the two programs. To protect these agencies' high-security environments, Security wants to know what is happening with people in therapeutic situations; on the other hand, EAPs' interests are in protecting their clients' confidentiality. In attempting to get closer to the ideal harmonious relationship, truces have been established between the two camps over the years, and relatively good working relationships have developed. “We (Security) have been able to satisfy ourselves and have EAP protect confidentiality at the same time,” said one security officer. But for some agencies the relationship between the two systems remains uneasy.

The problem is: When and what should EAP report to Security? And when can EAP be trusted to take care of people's problems inside the program and without reporting to Security? How can everyone agree where the reporting thresholds lie? There are often gray areas that are highly ambiguous. There must be a level of trust between Security and EAPs, and among the agencies we interviewed both sides are striving to build and keep that trust.

The desired model, one person stated, is for Security to be able to tell a person, “If you have problems, go get help from EAP. We will give you plenty of distance; we won't worry about your clearance.” Security should strongly encourage people to go to EAP. As one “successful” security officer said, “You ask if we refer people to EAP. We *hand-deliver* them to EAP!” In this ideal situation, seeking help is seen as a positive factor by Security because Security believes that early intervention helps to solve problems before

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<sup>40</sup> Agencies, such as FAA, NASA and the Secret Service, where the safety and protection of individuals and high-value property are one of their highest priorities.

they become critical. Seeking assistance from an EAP does not denote failure, and EAP is not a form of punishment. However, not all the agencies have quite achieved this ideal.

While Security and EAP struggle to find a working relationship that satisfies the needs of both, at another level employees struggle with the dilemma of whether to take their problems to EAP and risk Security's finding out. So despite Security (and EAP) managers' hopes for nurturing people, many employees remain nervous about approaching EAP on their own. Supervisors must intervene when the problem becomes obvious in the workplace.

In terms of the effect of seeking help on security status, people with serious, reportable problems are told by EAP that Security *will* have to investigate them but won't necessarily take away their clearance. Security in turn tries to convey to employees that if they work with EAP and cooperate, their clearances will not be touched. A person's progress will be monitored by Security through the EAP; "Security will not pull the clearance like a bunch of cops and throw you out of the building," another security official told us.

If problems are minor, the EAP is generally allowed to deal with them, without reporting them. Security only becomes involved when the problem is severe enough to worry about the person's clearance. Clearances in such cases may indeed be taken away. In general, however, as long as people are doing a good job on working on rehabilitation to resolve their less-serious problems, their clearance status will not be jeopardized.

In summary, the intelligence and safety-sensitive agencies we interviewed have taken serious steps to encourage self-referral by telling people that in most cases their clearance will be protected. Agencies advise employees that self-referral alone will not result in clearances being revoked. And one goes so far as to suggest to employees that self-referral to EAPs need not be reported when completing the SF-86 for periodic reinvestigations. We do not know how many employees believe this.

## **Appendix K**

### **Programs Designed to Remove Barriers to Reporting**



## **Programs Designed to Remove Barriers to Reporting**

The protection of national security is at the heart of the personnel security system. At the same time, individuals who have been vetted and granted security clearances are human beings, with human problems that can sometimes get out of hand. Ideally, these problems should be tackled before they can grow into major security concerns. It is the security system's job to protect national security and at the same time attempt to work to help the people to whom the system has granted access to classified information. The system does not want to throw out well-trained, competent people if, with some extra effort, it can provide the wherewithal to help. An array of formal and informal procedures exists to support individuals with problems. Starting with the formal, we lay out below some of the gradations of procedures that are being used.

### **Safe Harbor-type Programs**

Executive Order 12564 *Drug-free Federal Workplace* (1986) is the basis of a safe harbor-type policy for civilians. Sec. 5 *Personnel Actions* of the order requires that agencies, in addition to undertaking appropriate personnel actions, refer any employee who is found to use illegal drugs to an EAP for assessment, counseling, and referral for treatment. At the same time, agencies may also initiate action to discipline an employee found to use illegal drugs. This action would be taken unless the employee had voluntarily identified himself as a drug user or had volunteered for drug testing prior to being identified through other means; had obtained appropriate counseling and rehabilitation; and thereafter had refrained from using illegal drugs. This is a form of legal protection against disciplinary action. But, as we shall see, this arrangement does not protect a person from security rules.

The Navy has implemented a voluntary referral procedure actually called Safe Harbor. The program provides civilian Navy employees a one-time opportunity to identify themselves voluntarily as drug users. Employees are responsible for initiating the safe-harbor action and must be willing to undertake counseling and, as necessary, rehabilitation. Following Executive Order 12564, the Navy's Safe Harbor insulates employees from discipline for their admitted past illegal drug usage. Employees must voluntarily identify themselves as former drug users; obtain counseling and follow through with rehabilitation; agree to undergo periodic unannounced drug testing; consent to the release to appropriate management and EAP administrator all records related to drug counseling and rehabilitation; and subsequently refrain from using illegal drugs. While people are in Safe Harbor, their access is generally revoked by their commanding officer. Although this procedure is available to all civilian employees, it does not extend protection from security requirements for those in sensitive positions who are required to maintain clearance eligibility. Security may view the person's drug history as a security concern and revoke the person's clearance. By contrast, a civilian employee of the Navy who takes illegal drugs and who wishes to get treatment can self-refer directly to the EAP. In this case the confidentiality rules of EAP will apply, and management will not be notified of the person's attendance.

The Air Force has a similar self-identification program. AFPAM-36-2241 (p. 185) describes a program where military personnel with substance abuse problems may seek assistance. Under certain conditions an Air Force employee's voluntary submission to a treatment program and self-disclosed evidence of prior drug use may not be used against the person in disciplinary action under the UCMJ. Once commanders designate that they are granting the protections of the self-identification program, these protections cannot be revoked. However, the employee must voluntarily reveal (before being caught by other means) the nature and extent of his drug involvement and he must be willing to receive treatment.

The Air Force does not have a program specifically named safe harbor. Under its Substance Abuse and Rehabilitation Treatment program (SART), if an individual self-refers or is identified as having an alcohol problem<sup>41</sup> by the supervisor, he or she is screened and interviewed by mental health and substance abuse personnel. An assessment is made and reported to the commander and first sergeant, and a treatment plan is identified. The treatment plan depends on how severe the problem is. During the treatment period, the commander has the authority to suspend the person's access. Once the commander is satisfied that the person has successfully completed the program, he or she will recommend reinstatement by the CAF. The commander has a great deal of latitude in dealing with such cases, and several variables affect his decision: the severity of the problem, etc. The commander will not necessarily report the case to the CAF for a one-time offense; only in cases where a pattern of behavior emerges would the case be reported.

How emotional and mental problems are handled in the Air Force again depends on the seriousness of the problem and the person's access to classified information. The commander may suspend the clearance if he or she thinks it is necessary. A treatment program will be planned with the psychiatrists and other personnel at the hospital and, depending on how the person progresses and what the doctors' views are on the person's ability to hold a clearance, the commander will decide whether to send the case up to the CAF.

The Army has no formal safe harbor-type program.

### **Memoranda of Understanding and Agreement**

One of the Navy installations we visited uses a kind of last chance arrangement, a Memorandum of Understanding and Agreement, where employees tender their resignation. Management does not implement the resignation, and the people agree to undergo counseling for their problems. This procedure is used for people in situations that can be turned around within a reasonable period of time. It is assumed that the clearance will be reinstated after successful treatment and that the issue will be resolved. If not, the resignation letter will be implemented.

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<sup>41</sup> Evidence of a drug problem would result in discharge from the Air Force.



## **Conditional Clearance**

The Navy central adjudicative facility (DoNCAF) grants conditional clearances in lieu of revocation or denial; the Army and Air Force do not. Washington Headquarters Service also has an active conditional clearance program.

If employees in the Navy—military or civilian—have had their clearance revoked for, say, financial reasons, the Personnel Security Appeals Board (PSAB) can make a decision to reinstate the clearance but with certain conditions. For example, employees with financial problems have been making an honest effort to make good their debts but have not quite finished paying off the debts. The PSAB can decide to reinstate the clearance on condition that the individual continues to work on eliminating the debt. The individuals must show their security officer evidence that they are working on the problem and that after, say, 12 months the problem has been solved. If all is satisfactory, the full clearance will be reinstated.

The same conditional clearance provision can be used in any other areas where behavior can be measured. Conditional clearances have been given for alcohol, for example, where attendance at Alcoholics Anonymous over a certain period of time can be shown to have taken place.

The Navy's conditional clearance puts the person on notice that while his/her clearance may have been reinstated, the Navy will be monitoring the situation until the problem has been fully solved. If people do not meet the conditions (e.g., do not pay off their debts, do not complete treatment), then the clearance will be subject to reevaluation by DoNCAF.

The Navy has been granting conditional clearances since 1988 and the program has worked smoothly. If there is any administrative burden, it is on the command in that they have to monitor their people and report back to the DoNCAF. Most of the conditional clearances in the Navy have been for financial problems.

The Army CAF would have a problem with a conditional clearance program because of the volume of cases they have to handle; they could not provide the additional adjudicators needed to track and monitor the cases. Another perceived downside to such a program for the Army is that some security people in the field feel that conditional clearances might immediately pigeonhole a person as someone with a problem. This tagging could create problems in the line units where clearances are routinely handled by nonintelligence professionals who may not appreciate the nuances involved.

The Air Force CAF has no provision for conditional clearances. The CAF will only grant or deny. It will give its reasons for revoking a clearance and then the local Security Office will send up whatever information they have locally to support the individual.

## **Warning Letters**

Rather than issuing a conditional clearance to people working on a problem, the Army CAF occasionally uses a warning letter earlier in the process. This letter grants employees their clearance but warns that there is a problem that needs to be addressed and that one more incident will result in revocation. This procedure is used sparingly.

Justification for warning letters comes from Para 2(f) of the Final Adjudication Guidelines signed by the President March 1997. This states that “if after evaluating information of security concern the adjudicator decides that the information is not serious enough to warrant a recommendation of disapproval or revocation of the security clearance, it may be appropriate to recommend approval with a warning that future incidents of a similar nature may result in revocation of access.”

The Navy and Air Force do not have such warning-letter programs.

## **Informal “Safe Harbor”**

The concept of safe harbor is being used in the field, but very informally. “We don’t call it Safe Harbor or a conditional clearance,” said one security officer, “and nothing formal is said about it. We just get the people help.” In some cases, security officers do not report adverse information to the CAFs piecemeal. They wait to flesh out the file with additional (and sometimes mitigating) information before they send it for adjudication. This kind of packaging presents the adjudicators with a more balanced picture of the person that often leads to a more sympathetic outcome.

Similarly, industry interviewees told us that under certain circumstances (nonPRP, nonsafety-sensitive positions) security officers in companies do not necessarily pull clearances when derogatory information emerges. A kind of safe harbor is offered in terms of allowing people to begin taking care of their problems. This is practiced quietly. There are no written words. One interviewee said he would not want to see the government *attempt* to legislate it formally because “it would be hard to formulate the concept into words that the government could buy into. The Services would have to reevaluate their whole policy for retaining a clearance in the face of issue information.” So this interviewee did not think DoD should tell people ahead of time that they will not lose their clearances. He believes that this would give people a sense of license, and doubts that the Services would buy into this. He favors a safe-harbor *practice*, but without advertising it. That is more or less what he does now. But, he added, it will take a lot of education by Security and EAP to make employees with troubles believe they would be helped and not punished by admitting their problems.

## **A Substance Abuse Program for Civilian Contractors**

The Department of Energy has a program for cleared employees that could be adapted by other agencies and perhaps expanded to cover more than just illegal drugs and alcohol problems. This is the Employee Assistance Program Referral Option (EAPRO).<sup>42</sup> EAPRO began in 1991 to create a more flexible approach toward employees who had substance problems.

Employees may request help through EAPRO or be offered the opportunity to participate in the EAPRO by personnel security. Once an agreement is in place, personnel security carefully monitors, on a monthly basis for 2 years, the person's rehabilitation. For alcohol abuse or illegal drug use, total abstinence is required for the 2-year period. Failure to comply with all the terms of an EAPRO agreement during this time will lead to an administrative review of the person's status and to possible clearance revocation. Similarly, a relapse following treatment will lead to adverse clearance actions. Should a clearance be revoked at any time, it is up to the employer to deal with the separate matter of employment status. EAPRO is available for DOE contractors and government employees.<sup>43</sup>

EAPRO originally was expected to increase self-referrals. However, this generally did not happen. More typically, an employee was confronted with evidence of substance abuse by personnel security and then offered EAPRO as a formal last-chance/firm-choice agreement that permits the retention of clearance status while the person undergoes treatment. Though the initial effect of EAPRO in 1991 was positive—the number of EAPRO referrals has steadily declined. All individuals currently entering EAPRO have been referred by personnel security. The predicted effect of a healthy pattern of self-referrals never materialized. Nevertheless, several hundred people have been assisted successfully, with their clearance and employment status protected.

While EAPRO may not have banished the psychological impediments to self-referral, it has had the effect of empowering personnel security specialists to take appropriate action in the interest of the employee. This type of "safe harbor" may make it possible to help employees even if the troubled employees themselves are reluctant to move in that direction.

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<sup>42</sup> See U.S. Department of Energy, Office of Safeguards and Security, *Employee Assistance Program Referral Option*, Participant's Guide.

<sup>43</sup> Excluded are individuals whose positions are covered by the Personnel Assurance Program and the Personnel Security Assurance Program, and by people authorized to carry firearms in the performance of their duties.



**Appendix L**

**Article in NSA Newsletter Regarding the Office of Security Endorsing  
EAS (EAP) Counseling**

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## (U) Office of Security Endorses EAS Counseling

(U) NSA/CSS employees are not immune from the normal life stresses and difficulties that confront the population at large. Regardless of whether an individual holds a security clearance, at some time in life he may face problems with interpersonal relationships, depression, alcohol, family issues, or similar difficulties. Often the decision to seek help is confounded by the individual's misperception that his security clearance may be in jeopardy regardless of the problem for which he seeks help. Some believe that their judgment might be considered suspect if they seek assistance in dealing with a stressful situation.

(U) The Office of Security strongly endorses the practice of people consulting mental health professionals for assistance with personal problems. Seeking help for routine life crises does not reflect adversely on an individual's judgment. In fact, the Office of Security views the commitment to seek help as a positive factor. Seeking professional assistance in dealing with a problem does not jeopardize an individual's security clearance.

(U) The Employee Assistance Service (EAS) is a team of

fully cleared, licensed, mental health professionals who are available to counsel employees and immediate family members of civilian and military personnel. The team is located at the Parkway Center in Hanover, Maryland, just off Dorsey Road (Route 176) and the Baltimore-Washington Parkway. You can reach them at (410) 712-4444.

(U) EAS provides a variety of services for NSA/CSS employees who find that they are experiencing personal problems. Talking to trained mental health professionals can help sort out difficult issues, identify resources, and facilitate the resolution of problems. Early intervention frequently helps to solve problems before they become crises.

(U) Assistance to active duty military members is also offered through each of the military branches to include the chaplaincy staff, military psychological services and community/family services. Their phone numbers are:

Ft. Meade Community Counseling  
(301) 677-8344/8213

USAF Chaplains at Ft. Meade/NSA  
(301) 688-7605

NSA Psychological Services  
(410) 859-6868

Army Community Mental Health  
(301) 677-8895

Navy Family Services  
(301) 677-6882/6883

(U) The Office of Security urges all employees facing any sort of personal problems or issues to seek assistance from among the available resources.

### Frequently Asked Questions (U)

1. (U) *What will happen to me? Will I lose my clearance?*

(U) The decision to seek treatment is viewed as a positive sign that an individual recognizes that a problem exists and is willing to take steps toward resolving it. The vast majority of those seeking professional help do not suffer damage to their career. On the contrary, it enables one to get help with an unmanageable problem in order to get on with life. Early intervention is often a key to early resolution.

2. (U) *I'm not crazy. Why should I get counseling?*

(U) Counseling available through mental health professionals in EAS covers a wide array of subjects. Making the decision to talk to a trained individual who is experienced

in dealing with life stressors does not imply that an individual is "crazy." Often the most immediate effect is to allow the individual to examine a problem objectively and assess options for dealing with it. Any time that an individual finds himself or herself saying, "I don't know what to do," EAS may be able to help. EAS counselors have access to resources and information that may not be available to individuals on their own.

3. (U) *My problems are personal. I don't want to share them with anyone in my office.*

(U) Counseling available from EAS is confidential except within an extremely limited set of circumstances. No one from EAS will report back to your manager, Security, or anyone in your office what is discussed during counseling. Your co-workers will know only if you choose to tell them.

4. (U) *I have a co-worker who is having some pretty serious problems. I don't want to make a referral because I don't want to see her career ruined.*

(U) Employees are encouraged to make a co-worker aware of the resources that EAS has to offer. You may call EAS to get information to pass to another individual, but it is the individual with the problem

who needs to come in for help. Once again, seeking help is the first step to becoming part of a solution, and does not constitute a threat to anyone's career.

5. (U) *What do I do if I'm in the field?*

(U) There are two field sites in Europe that have EAS programs on site. All other field sites are able to communicate with EAS via e-mail through [eas@nsa](mailto:eas@nsa).

6. (U) *What happens when I come up for reinvestigation?*

(U) The background investigator will ask a standard question about whether you have sought counseling for problems other than marital or family issues. Replying that you have visited the EAS satisfies the investigator who will then seek no further details.

7. (U) *I heard that taking medication for depression will get you fired and is the same as taking drugs.*

(U) When an employee suffers from depression or similar conditions, the Office of Security recognizes that the most effective treatment is often a combination of medication and therapy. Compliance with a treatment plan that includes psychotropic medication is of no more concern than if insulin

were required to regulate diabetes or digitalis recommended for a heart condition. The Office of Security will not penalize anyone for following a prescribed medication treatment plan.



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**Appendix M**  
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