

**UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF
CALIFORNIA**

Gloria Castaneda v. Commissioner of Social Security

Castaneda v. Commissioner of Social Security, No. 1:22-cv-00467-CDB (SS) (E.D. Cal. Sept. 9, 2025) · No.
1:22-cv-00467-CDB (SS) · Decided September 10, 2025

OPINION

1 2 3 4 5 6 7 8 UNITED STATES DISTRICT COURT 9 EASTERN DISTRICT OF
CALIFORNIA 10 11 GLORIA CASTANEDA, Case No. 1:22-cv-00467-CDB (SS) 12 Plaintiff,
ORDER GRANTING PLAINTIFF’S MOTION FOR SUMMARY JUDGMENT 13 v. (Docs. 16,
18) 14 COMMISSIONER OF SOCIAL SECURITY, 15 Defendant. 16 17 Plaintiff Gloria
Castaneda (“Plaintiff”) seeks judicial review of a final decision of the 18 Commissioner of Social
Security (“Commissioner” or “Defendant”) denying her applications for 19 disability benefits
under the Social Security Act.

(Doc. 1). The matter is currently before the 20 Court on the parties’ briefs, which were submitted
without oral argument. (Docs. 16, 18). Upon 21 review of the Administrative Record (Doc. 13-1,
“AR”) and the parties’ briefs, the Court finds 22 and rules as follows. 23 I. BACKGROUND 24
A. Administrative Proceedings and ALJ’s Decision 25 On September 28, 2017, Plaintiff filed a
Title II application for disability insurance 26 benefits and a Title XVI application for
supplemental security income.

(AR 19, 211-12). 27 1 Based on the parties’ consent to magistrate judge jurisdiction for all
purposes, the undersigned was authorized to preside over all proceedings effective July 7, 2022,
pursuant to 28 U.S.C. § 636(c)(1). 1 Plaintiff’s applications were denied initially and upon
reconsideration, and Plaintiff requested a 2 hearing before an administrative law judge (“ALJ”).

(AR 132-42, 145-47). On June 11, 2020, 3 ALJ Shiva Bozarth held a hearing, during which
Plaintiff, represented by counsel, and an 4 independent vocational expert testified. (AR 36-63).
The ALJ issued his decision on February 5 16, 2021, finding Plaintiff not disabled. (AR 19-30).

On December 16, 2021, the Appeals 6 Council declined Plaintiff’s request for review. (AR 5-7). 7
In his decision, the ALJ engaged in the five-step sequential evaluation process set forth by 8 the
Social Security Administration. 20 C.F.R. §§ 404.1520(a), 416.920(a). At step one, the ALJ 9
found Plaintiff had not engaged in substantial gainful activity since July 3, 2015, the alleged onset
10 date.

(AR 22). At step two, the ALJ determined that Plaintiff had the following severe 11 impairments:
“degenerative joint disease, obesity, minimal carpal tunnel syndrome, depression 12 and anxiety.”

(AR 22). At step three, the ALJ found that Plaintiff did not have an impairment, or 13 combination of impairments, that met or medically exceeds the severity of one of the listed 14 impairments in 20 C.F.R. Part 404, Subpart P, Appendix 1.

(AR 22). 15 The ALJ determined Plaintiff had the residual functional capacity (“RFC”) to perform 16 medium work as defined in 20 C.F.R. §§ 404.1567(c) and 416.967(c), with the exception that she 17 could lift and carry 50 pounds occasionally and 25 pounds frequently. (AR 23). Additional 18 limitations included that Plaintiff could sit, stand, and/or walk for 6 hours out of an 8-hour 19 workday; should never climb ladders or scaffolds; could occasionally reach overhead with her left 20 upper extremity; could frequently reach in other directions; and frequently handle, finger, and feel 21 with the left upper extremity.

(AR 23). Plaintiff could perform simple and repetitive type work 22 with routine work-related decision-making. (AR 23). 23 At step four, the ALJ found that Plaintiff was unable to perform any of her past relevant 24 work. (AR 28). At step five, based on the testimony of the vocational expert, and considering 25 Plaintiff’s age, education, work experience, and RFC, the ALJ concluded that Plaintiff could 26 perform jobs that exist in the national economy, such as counter supply worker, cleaner (wall), 27 and hand packer.

(AR 29-30). Accordingly, the ALJ found Plaintiff had not been under a 1 B. Medical Record and Hearing Testimony 2 The relevant hearing testimony and medical record were reviewed by the Court and will 3 be referenced below as necessary to this Court’s decision. 4 II. STANDARD OF REVIEW 5 A district court’s review of a final decision of the Commissioner of Social Security is 6 governed by 42 U.S.C. § 405(g).

The scope of review under § 405(g) is limited; the 7 Commissioner’s decision will be disturbed “only if it is not supported by substantial evidence or 8 is based on legal error.” *Hill v. Astrue*, 698 F.3d 1153, 1158 (9th Cir. 2012). “Substantial 9 evidence” means “relevant evidence that a reasonable mind might accept as adequate to support a 10 conclusion.” *Id.* at 1159 (quotation and citation omitted).

Stated differently, substantial evidence 11 equates to “more than a mere scintilla[,] but less than a preponderance.” *Id.* (citation 12 modified). In determining whether the standard has been satisfied, a reviewing court must 13 consider the entire record as a whole rather than searching for supporting evidence in 14 isolation. *Id.* 15 The court will review only the reasons provided by the ALJ in the disability determination 16 and may not affirm the ALJ on a ground upon which he did not rely.

Social Security Act § 205, 17 42 U.S.C. § 405(g). In reviewing a denial of benefits, a district court may not substitute its 18 judgment for that of the Commissioner. “The court will uphold the ALJ’s conclusion when the 19 evidence is susceptible to more than one rational interpretation.”

Tommasetti v. Astrue, 533 F.3d 20 1035, 1038 (9th Cir. 2008). Further, a district court will not reverse an ALJ's decision on account 21 of an error that is harmless.

Id. An error is harmless where it is "inconsequential to the [ALJ's] 22 ultimate nondisability determination." Id. (quotation and citation omitted). The party appealing 23 the ALJ's decision generally bears the burden of establishing that it was harmed. Shinseki v. 24 Sanders, 556 U.S. 396, 409-10 (2009). 25 A claimant must satisfy two conditions to be considered "disabled" and eligible for 26 benefits within the meaning of the Social Security Act.

First, the claimant must be "unable to 27 engage in any substantial gainful activity by reason of any medically determinable physical or 1 expected to last for a continuous period of not less than twelve months." 42 U.S.C. § 2 1382c(a)(3)(A).

Second, the claimant's impairment must be "of such severity that he is not only 3 unable to do his previous work[,] but cannot, considering his age, education, and work 4 experience, engage in any other kind of substantial gainful work which exists in the national 5 economy." 42 U.S.C. § 1382c(a)(3)(B). 6 The Commissioner has established a five-step sequential analysis to determine whether a 7 claimant satisfies the above criteria.

See 20 C.F.R. § 416.920(a)(4)(i)-(v). At step one, the 8 Commissioner considers the claimant's work activity. 20 C.F.R. § 416.920(a)(4)(i). If the 9 claimant is engaged in "substantial gainful activity," the Commissioner must find that the 10 claimant is not disabled. 20 C.F.R. § 416.920(b). 11 If the claimant is not engaged in substantial gainful activity, the analysis proceeds to step 12 two.

At this step, the Commissioner considers the severity of the claimant's impairment. 20 13 C.F.R. § 416.920(a)(4)(ii). If the claimant suffers from "any impairment or combination of 14 impairments which significantly limits [his or her] physical or mental ability to do basic work 15 activities," the analysis proceeds to step three. 20 C.F.R. § 416.920(c). If the claimant's 16 impairment does not satisfy this severity threshold, however, the Commissioner must find that the 17 claimant is not disabled.

Id. 18 At step three, the Commissioner compares the claimant's impairment to impairments 19 recognized by the Commissioner to be so severe as to preclude a person from engaging in 20 substantial gainful activity. 20 C.F.R. § 416.920(a)(4)(iii). If the impairment is as severe or more 21 severe than one of the enumerated impairments, the Commissioner must find the claimant 22 disabled and award benefits.

20 C.F.R. § 416.920(d). 23 If the severity of the claimant's impairment does not meet or exceed the severity of the 24 enumerated impairments, the Commissioner must pause to assess the claimant's "residual 25 functional capacity." 20 C.F.R. § 416.920(e). Residual functional capacity ("RFC"), defined 26 generally as the claimant's ability to perform physical and mental work

activities on a sustained basis despite his or her limitations (20 C.F.R. § 416.945(a)(1)), is relevant to both the fourth and 1 At step four, the Commissioner considers whether, in view of the claimant's RFC, the 2 claimant is capable of performing work that he or she has performed in the past (past relevant 3 work).

20 C.F.R. § 416.920(a)(4)(iv). If the claimant is capable of performing past relevant 4 work, the Commissioner must find that the claimant is not disabled. 20 C.F.R. § 416.920(f). If 5 the claimant is incapable of performing such work, the analysis proceeds to step five. 6 At step five, the Commissioner considers whether, in view of the claimant's RFC, the 7 claimant is capable of performing other work in the national economy.

20 C.F.R. § 8 416.920(a)(4)(v). In making this determination, the Commissioner must also consider vocational 9 factors such as the claimant's age, education, and past work experience. *Id.* If the claimant is 10 capable of adjusting to other work, the Commissioner must find that the claimant is not 11 disabled. 20 C.F.R. § 416.920(g)(1). If the claimant is not capable of adjusting to other work, the 12 analysis concludes with a finding that the claimant is disabled and is therefore entitled to 13 benefits.

Id. 14 The claimant bears the burden of proof at steps one through four above. *Tackett v. Apfel*, 15 180 F.3d 1094, 1098 (9th Cir. 1999). If the analysis proceeds to step five, the burden shifts to the 16 Commissioner to establish that (1) the claimant is capable of performing other work; and (2) such 17 work "exists in significant numbers in the national economy." 20 C.F.R. § 416.960(c)(2); *Beltran* 18 v. *Astrue*, 700 F.3d 386, 389 (9th Cir.

2012). 19 III. ISSUES AND ANALYSIS 20 Plaintiff seeks judicial review of the Commissioner's final decision denying her 21 applications. (Doc. 1). Plaintiff raises the following two issues: 22 1) The ALJ's RFC determination is not supported by substantial evidence because the ALJ assess the opinion of psychological consultative examiner, Dr. Bonilla, as 23 persuasive but failed to account for all limitations assessed therein or explain their omission.

24 2) The ALJ's credibility determination is not supported by substantial evidence. 25 26 (Doc. 16 at 19-20). 27 A. Whether the ALJ's RFC Determination is Supported by Substantial Evidence 1 did not adequately account for the mental limitations opined by Dr. Pauline Bonilla, a clinical 2 psychologist. 3 1. Governing Authority 4 A claimant's RFC is "the most [the claimant] can still do despite [his or her] limitations." 5 20 C.F.R. §§ 404.1545(a), 416.945(a).

The RFC assessment is an administrative finding based on 6 all relevant evidence in the record, not just medical evidence. *Bayliss v. Barnhart*, 427 F.3d 7 1211, 1217 (9th Cir. 2005). In determining the RFC, the ALJ must consider all limitations, 8 severe and non-severe, that are credible and supported by substantial evidence in the record. *Id.* 9 However, an ALJ's RFC finding need only be consistent with relevant assessed limitations and 10 not identical to them.

See *Turner v. Comm’r of Soc. Sec.*, 613 F.3d 1217, 1222-23 (9th Cir. 2010) 11 (“Although the ALJ rejected any implication in Dr. Koogler’s evaluation that Turner was 12 disabled, he did incorporate Dr. Koogler’s observations into his residual functional capacity 13 determination. ... These limitations were entirely consistent with Dr. Koogler’s limitation.”). An 14 ALJ need not use the same language as the medical opinion setting forth the limitations, as long 15 as the RFC sufficiently accounts for the limitations.

See *Stubbs-Danielson v. Astrue*, 539 F.3d 16 1169, 1173-74 (9th Cir. 2008). Ultimately, a claimant’s RFC is a matter for the ALJ to 17 determine. *Vertigan v. Halter*, 260 F.3d 1044, 1049 (9th Cir. 2001). 18 2. Dr. Bonilla’s Opinion and ALJ Consideration 19 On May 26, 2018, Dr. Bonilla conducted a comprehensive mental health evaluation of 20 Plaintiff. (AR 860-65).

Based on her examination, Dr. Bonilla concluded Plaintiff suffered from 21 persistent depressive disorder secondary to medical condition and unspecified anxiety disorder. 22 (AR 864). Dr. Bonilla opined that Plaintiff’s “symptom severity appears to be in the mild to 23 moderate range” and the likelihood of improvement in the next 12 months was good. (AR 864).

24 Plaintiff’s limitations were primarily due to medical issues with mental health secondary. (AR 25 864). Dr. Bonilla concluded Plaintiff had mild impairments in her abilities to perform simple and 26 repetitive tasks; accept instructions from a supervisor; interact with co-workers and the public; 27 sustain an ordinary routine without special supervision; and maintain regular attendance in the 1 detailed and complex tasks; complete a normal workday/workweek without interruptions from a 2 psychiatric condition; and deal with stress and changes.

(AR 864-65). 3 The ALJ found Dr. Bonilla’s opinion persuasive because it was “based upon direct 4 examination” of Plaintiff and was consistent with the objective findings. (AR 28). In crafting the 5 RFC, the ALJ found Plaintiff could “perform simple and repetitive type work with routine work- 6 related decision-making.” (AR 23). 7 3. Arguments and Analysis 8 Plaintiff argues that despite finding Dr. Bonilla’s opinion persuasive, the ALJ failed to 9 incorporate limitations from her opinion in the RFC, “including [her] findings that Plaintiff is 10 moderately impaired in her ability to complete a normal workday/workweek without interruptions 11 from a psychiatric condition; and ability to deal with stress and changes encountered in the 12 workplace.” (Doc.

16 at 22). Because “the ALJ provided no explanation for said omission,” 13 Plaintiff asserts the ALJ erred by failing to consider significant probative evidence. (Id. at 22- 14 23). 15 The Commissioner responds that the ALJ’s conclusion that Plaintiff “retained the RFC to 16 perform simple and repetitive type work with routine work-related decision making” was 17 consistent with Dr. Bonilla’s opinion.

(Doc. 18 at 5-6). The Commissioner asserts that “it was 18 the ALJ’s duty to translate Dr. Bonilla’s assessment of moderate limitations into a concrete 19 statement of abilities in the RFC

finding.” (Id. at 6). The Commissioner argues the ALJ 20 adequately accounted for Dr. Bonilla’s findings of mild to moderate limitations by limiting 21 Plaintiff to simple and repetitive type work.

(Id. at 7-8). 22 To the extent Plaintiff challenges the RFC solely on the ALJ’s failure to adequately 23 account for Dr. Bonilla’s opined limitations, such argument fails. Importantly, the RFC needs 24 only be consistent with, rather than identical to, the opined limitations.

The RFC’s limitation to 25 simple, repetitive work is consistent with Dr. Bonilla’s findings of mild to moderate impairments 26 in the various mental functioning areas. While Plaintiff may have wished for additional 27 limitations to be incorporated by the ALJ, nothing in Dr. Bonilla’s opinion requires greater 1 persuasive opinion and sufficiently accounts for the opined limitations, the ALJ did not err.

2 B. Whether the ALJ’s Credibility Determination is Supported by Substantial Evidence 3 Plaintiff second argument challenges the ALJ’s rejection of her symptom testimony. (See 4 Doc. 16 at 23-27). 5 1. Legal Standard 6 The ALJ is responsible for determining credibility,² resolving conflicts in medical 7 testimony, and resolving ambiguities. *Andrews v. Shalala*, 53 F.3d 1035, 1039 (9th Cir.

1995). A 8 claimant’s statements of pain or other symptoms are not conclusive evidence of a physical or 9 mental impairment or disability. 42 U.S.C. § 423(d)(5)(A); see SSR 16-3p, 2017 WL 5180304, at 10 *2 (“an individual’s statements of symptoms alone are not enough to establish the existence of a 11 physical or mental impairment or disability”); see also *Orn v. Astrue*, 495 F.3d 625, 635 (9th Cir.

12 2007) (“An ALJ is not required to believe every allegation of disabling pain or other non- 13 exertional impairment.”) (internal quotation marks and citation omitted); *Molina v. Astrue*, 674 14 F.3d 1104, 1104 (9th Cir. 2012) (same), superseded on other grounds by 20 C.F.R. § 15 404.1502(a). Determining whether a claimant’s testimony regarding subjective pain or symptoms 16 is credible requires the ALJ to engage in a two-step analysis.

Id. at 1112. The ALJ must first 17 determine if “the claimant has presented objective medical evidence of an underlying impairment 18 which could reasonably be expected to produce the pain or other symptoms alleged.” 19 *Lingenfelter v. Astrue*, 504 F.3d 1028, 1036 (9th Cir. 2007) (internal punctuation and citations 20 omitted). This does not require the claimant to show that her impairment could be expected to 21 cause the severity of the symptoms that are alleged, but only that it reasonably could have caused 22 some degree of symptoms.

Smolen v. Chater, 80 F.3d 1273, 1282 (9th Cir. 1996). 23 If the first step is met and there is no evidence of malingering, “the ALJ must provide 24 2 SSR 16-3p applies to disability applications heard by the agency on or after March 28, 25 2016. Ruling 16-3p eliminated the use of the term

“credibility” to emphasize that subjective 26 symptom evaluation “is not an examination of an individual’s character,” but an endeavor to determine how “symptoms limit an individual’s ability to perform work-related activities.” SSR 27 16-3p, 2017 WL 5180304, at *3.

Nevertheless, the Ninth Circuit continues to reference an ALJ’s “credibility assessment” when reviewing claims that an ALJ impermissibly discounted a 1 ‘specific, clear and convincing reasons for’ rejecting the claimant’s testimony.” *Treichler v. 2 Comm’r of Soc. Sec.*, 775 F.3d 1090, 1102 (9th Cir. 2014) (quoting *Smolen*, 80 F.3d at 1281); see 3 *Carmickle v. Comm’r of Soc.*

Sec., 533 F.3d 1155, 1160 (9th Cir. 2008) (noting an adverse 4 credibility finding must be based on “clear and convincing reasons”). The ALJ must make 5 findings that support this conclusion, and the findings must be sufficiently specific to allow a 6 reviewing court to conclude the ALJ rejected the claimant’s testimony on permissible grounds 7 and did not arbitrarily discredit the claimant’s testimony.

Moisa v. Barnhart, 367 F.3d 882, 885 8 (9th Cir. 2004). 9 The Ninth Circuit does “not require ALJs to perform a line-by-line exegesis of the 10 claimant’s testimony, nor do they require ALJs to draft dissertations when denying benefits.” 11 *Stewart v. Kijakazi*, No. 1:22-cv-00189-ADA-HBK, 2023 WL 4162767, at *5 (E.D. Cal. Jun. 22, 12 2023), findings & recommendations adopted, 2023 WL 5109769 (Aug.

8, 2023); see *Record v. 13 Kijakazi*, No. 1:22-cv-00495-BAM, 2023 WL 2752097, at *4 (E.D. Cal. Mar. 31, 2023) (“Even if 14 the ALJ’s decision is not a model of clarity, where the ALJ’s ‘path may reasonably be discerned,’ 15 the Court will still defer to the ALJ’s decision.”) (quoting *Wilson v. Berryhill*, 757 Fed. Appx. 16 595, 597 (9th Cir. 2019)). “The standard isn’t whether our court is convinced, but instead, 17 whether the ALJ’s rationale is clear enough that it has the power to convince.” *Smartt v. 18 Kijakazi*, 53 F.4th 489, 494 (9th Cir.

2022) (the clear and convincing standard requires an ALJ to 19 show her work). 20 The ALJ may consider numerous factors in weighing a claimant’s credibility, including 21 “(1) ordinary techniques of credibility evaluation, such as the claimant’s reputation for lying, 22 prior inconsistent statements concerning the symptoms, and other testimony by the claimant that 23 appears less than candid; (2) unexplained or inadequately explained failure to seek treatment or to 24 follow a prescribed course of treatment; and (3) the claimant’s daily activities.” *Smolen*, 80 F.3d 25 at 1284.

In evaluating the credibility of symptom testimony, the ALJ must also consider the 26 factors identified in SSR 16-3P. *Id.* (citing *Bunnell v. Sullivan*, 947 F.2d 341, 346 (9th Cir. 27 1991)); accord *Bray v. Comm’r of Soc. Sec. Admin.*, 554 F.3d 1219, 1226 (9th Cir. 2009). These 1 (1) Daily activities; (2) The location, duration, frequency, and intensity of pain or other symptoms; (3) Factors that precipitate and aggravate the symptoms; (4) The 2 type, dosage, effectiveness, and

side effects of any medication an individual takes or has taken to alleviate pain or other symptoms; (5) Treatment, other than 3 medication, an individual receives or has received for relief of pain or other symptoms; (6) Any measures other than treatment an individual uses or has used 4 to relieve pain or other symptoms (e.g., lying flat on his or her back, standing for 5 15 to 20 minutes every hour, or sleeping on a board); and (7) Any other factors concerning an individual's functional limitations and restrictions due to pain or 6 other symptoms.

7 SSR 16-3P, 2017 WL 5180304, at *7. See 20 C.F.R. § 404.1529(c)(3). If the ALJ's finding is 8 supported by substantial evidence, the court may not engage in second-guessing. *Tommasetti*, 9 533 F.3d at 1039 (citations and internal quotation marks omitted). 10 The clear and convincing standard is "not an easy requirement to meet," as it is "'the most 11 demanding requirement in Social Security cases.'" *Garrison v. Colvin*, 759 F.3d 995, 1015 (9th 12 Cir.

2014) (quoting *Moore v. Comm'r of Soc. Sec. Admin.*, 278 F.3d 920, 924 (9th Cir. 2002)). "A 13 finding that a claimant's testimony is not credible must be sufficiently specific to allow a 14 reviewing court to conclude the adjudicator rejected the claimant's testimony on permissible 15 grounds and did not arbitrarily discredit a claimant's testimony regarding pain." *Brown-Hunter v. 16 Colvin*, 806 F.3d 487, 493 (9th Cir.

2015) (citation and internal quotation marks omitted). 17 "The fact that a claimant's testimony is not fully corroborated by the objective medical 18 findings, in and of itself, is not a clear and convincing reason for rejecting it." *Vertigan*, 260 F.3d 19 at 1049; see 20 C.F.R. § 404.1529(c)(2) ("[W]e will not reject your statements about the intensity 20 and persistence of your pain or other symptoms or about the effect your symptoms have on your 21 ability solely because the objective medical evidence does not substantiate your statements.").

22 Rather, where a claimant's symptom testimony is not fully substantiated by the objective medical 23 record, the ALJ must provide additional reasons for discounting the testimony. *Burch v. 24 Barnhart*, 400 F.3d 676, 680 (9th Cir. 2005). "The ALJ must specify what testimony is not 25 credible and identify the evidence that undermines the claimant's complaints – '[g]eneral findings 26 are insufficient.'" *Id.* (quoting *Reddick v. Chater*, 157 F.3d 715, 722 (9th Cir.

1998)). 27 However, the medical evidence "is still a relevant factor in determining the severity of the 1 2001). The Ninth Circuit has distinguished testimony that is "uncorroborated" by the medical 2 evidence from testimony that is "contradicted" by the medical records and concluded that 3 contradictions with the medical records, by themselves, are enough to meet the clear and 4 convincing standard.

Hairston v. Saul, 827 Fed. Appx. 772, 773 (9th Cir. 2020) (quoting 5 *Carmickle*, 533 F.3d at 1161). 6 2. Plaintiff's Testimony and ALJ Consideration 7 Plaintiff alleged she was unable to work

due to pain in her left shoulder, anxiety, and 8 depression. (AR 277). Plaintiff testified that she was undergoing mental health treatment, 9 including medications and weekly counseling.

(AR 49-50). She lived with her five-year-old son, 10 and her mother spent six to eight hours a day helping her with chores, including dishes, laundry, 11 sweeping, and caring for Plaintiff's child. (AR 50-51). Plaintiff would have difficulty doing 12 these things without assistance. (AR 51). Plaintiff could drive herself to the grocery store and 13 use her right hand to put items into her cart but could not use her left arm and would need 14 assistance with lifting heavy items and pushing her cart.

(AR 51-52). She experienced extreme 15 pain in her left arm that radiated up to her neck and gave her headaches at least once a day, lasting 16 from one to four hours. (AR 52, 55). She also had tension in her back that caused severe back 17 pain. (AR 52, 55). She was unable to fasten a bra. (AR 54). 18 The ALJ concluded Plaintiff's statements about the intensity, persistence, and limiting 19 effects of her symptoms were "not entirely consistent with the medical evidence and other 20 evidence in the record." (AR 24).

The ALJ proceeded to summarize the medical record, starting 21 with Plaintiff's work injury in November 2013. (AR 24-26). The ALJ also addressed medical 22 opinions addressing Plaintiff's capabilities. (AR 27-28). The ALJ then reiterated that Plaintiff's 23 symptom testimony was not consistent with the evidence of record and further indicated that her 24 "ability to do light housework, all personal needs, some shopping, easy-meal preparation, and 25 drive, are inconsistent with the alleged presence of a condition that would preclude all work 26 activity." (AR 28).

27 3. Arguments and Analysis 1 the record are neither clear nor convincing" because "the ALJ simply gave the usual boilerplate 2 that Plaintiff's symptoms were not entirely consistent with the medical evidence" and provided a 3 general summarization of the medical records without drawing "a narrative bridge between said 4 summarization and the ALJ's specific findings as to Plaintiff's credibility." (Doc.

16 at 24-25). 5 The Commissioner responds that the ALJ properly rejected Plaintiff's subjective allegations 6 based on the objective medical evidence, her positive response to treatment, and her daily 7 activities. (Doc. 18 at 10-14). 8 The Court finds Plaintiff's argument persuasive and concludes the ALJ failed to provide 9 clear and convincing reasons supported by substantial evidence for rejecting Plaintiff's testimony.

10 To the extent the ALJ rejected Plaintiff's testimony because it was not supported by the objective 11 evidence, the ALJ wholly fails to identify the specific testimony he found not credible and 12 unsupported. See *Brown-Hunter*, 806 F.3d at 489 ("[W]e require the ALJ to

specify which 13 testimony she finds not credible, and then provide clear and convincing reasons, supported by the 14 evidence in the record, to support that credibility determination.”).

While the ALJ provided a 15 general review of the medical record, this is insufficient to satisfy the specific reasons 16 requirement. See *id.* at 494 (summary of the medical evidence supporting RFC determination is 17 “not the sort of explanation or the kind of ‘specific reasons’” required). 18 To the extent the ALJ also relied on Plaintiff’s daily activities as being inconsistent with a 19 disabling condition, such is insufficient to support his credibility analysis.

There are two grounds 20 on which an ALJ may use a plaintiff’s daily activities to question a plaintiff’s credibility as to her 21 subjective symptoms: (1) when daily activities demonstrate the plaintiff has transferable work 22 skills, and (2) when daily activities contradict the plaintiff’s testimony as to the degree of 23 functional limitation. *Orn*, 495 F.3d at 659.

However, “disability [plaintiffs] should not be 24 penalized for attempting to lead normal lives in the face of their limitations.” *Reddick*, 157 F.3d 25 at 722; see *Smolen*, 80 F.3d at 1284 n.7 (“The Social Security Act does not require that 26 [plaintiffs] be utterly incapacitated to be eligible for benefits, and many home activities may not 27 be easily transferable to a work environment where it might be impossible to rest periodically or 1 such as grocery shopping, driving a car, or limited walking for exercise, does not in any way 2 detract from [their] credibility[.]” *Webb v. Barnhart*, 433 F.3d 683, 688 (9th Cir.

2005) (quoting 3 *Vertigan*, 260 F.3d at 1050). 4 Here, the ALJ concluded Plaintiff’s “ability to do light housework, all personal needs, 5 some shopping, easy-meal preparation, and drive, are inconsistent with the alleged presence of a 6 condition that would preclude all work activity.” (AR 28).

However, this is the specific type of 7 evidence the Ninth Circuit has concluded should not detract from a claimant’s credibility. See 8 *Webb*, 433 F.3d at 688. Further, even if the ALJ properly considered this evidence in assessing 9 Plaintiff’s credibility, he fails to explain why Plaintiff’s limited activities are inconsistent with her 10 complaints about extreme pain.

While earlier in his decision the ALJ explained why Plaintiff’s 11 daily activities were inconsistent with her allegedly disabling mental impairments (AR 23), at no 12 point does he indicate how or why her daily activities are inconsistent with her testimony 13 regarding her physical impairments. 14 Accordingly, the ALJ did not identify specific, clear, and convincing reasons supported by 15 substantial evidence for discrediting Plaintiff’s symptom testimony.

An ALJ’s error may be 16 harmless where he provides valid reasons for disbelieving a plaintiff’s testimony in addition to 17 invalid reasons. *Molina*, 674 F.3d at 1115 (collecting cases). Here, however, the ALJ did not 18 provide any valid reasons for rejecting Plaintiff’s symptomology testimony such that the decision 19 is not supported by substantial evidence.

Thus, the error is not harmless and, based on the 20 Court's review of the entire record, remand for further proceedings is necessary. See *Dominguez v. Colvin*, 808 F.3d 403, 407 (9th Cir. 2015) ("Unless the district court concludes that further 22 administrative proceedings would serve no useful purpose, it may not remand with a direction to 23 provide benefits.").

24 IV. CONCLUSION AND ORDER 25 For the reasons stated above, the Court ORDERS as follows: 26 1. Plaintiff's Motion for Summary Judgment (Doc. 16) is GRANTED; 27 2. The decision of the Commissioner is reversed, and this matter is remanded back to the 1 3.

The Clerk of Court is DIRECTED to enter judgment in favor of Plaintiff Gloria Castaneda 2 and against Defendant Commissioner of the Social Security Administration. 3 | ITIS SO ORDERED.

*| Dated: _ September 9, 2025 | hannD Rr 5 UNITED STATES MAGISTRATE JUDGE 6 7 8 9 10
11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 14