

CONFIDENTIAL

MEMORANDUM

25 Oct 52

W/C Caldbick

Homosexual Tendencies

1 Please review this file. You will note that the last AFHQ directive was 4 May 48 and that this followed the pattern of the directives which were originated during the Second World War. All these directives were developed in co-operation with Dr. Gilbert Adamson, Consultant in Neuropsychiatry to the RCAF.

2 Under the date of 18 Jul 52 a draft of a suggested new policy was brought to my personal attention. I understand it had the concurrence of a medical officer. This was poorly written and through attempts to streamline action left many loopholes whereby even proven offenders could be retained in the Service, to a great extent eliminated any medical psychiatric investigation, eliminated any question of female personnel being processed through other than male laymen, and even allowed retention in the Service of personnel following conviction by civil authorities. My comments are on file in detail. This was further referred to Dr. Adamson. His comments were forwarded 22 Aug 52 and they basically agree with mine.

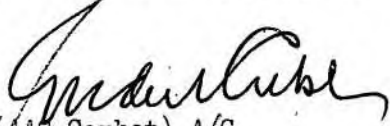
3 Two further attempted drafts are on file neither of which seem to me to cover the situation. Nothing suggested to date gives in my opinion more adequate coverage than the policy of May 1948. I request, however, that you review this problem and see if the 1948 directive can be improved upon.

4 My comments on draft 3 are:

Re Para 1(a) - This still allows of convicted personnel to be returned to full duty by minimizing the disciplinary action.

Re Para 1(b) - This is not as adequate as the 1948 policy.

Re Para 4 - Following further study I am now sure a separate policy will have to be written for female personnel. I have only just been informed the Civil Law differs between male and female personnel. With males homosexuality is a criminal offence; in the case of females it is not and there is no punishment whatever under Civil Law for lesbianism. Consequently, this will logically preclude severe disciplinary action on the part of the Service of female offenders. I would suggest study of this to see if the simple modification of the male order cannot be evolved so that a proven female offender is immediately discharged, and a suspected offender is referred for psychiatric consultation and, if indicated, then discharged. In both cases, however, this would probably have to be a non-disciplinary type of release. As the female problem is now serious at least one unit it is essential to develop an immediate policy for female personnel.


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