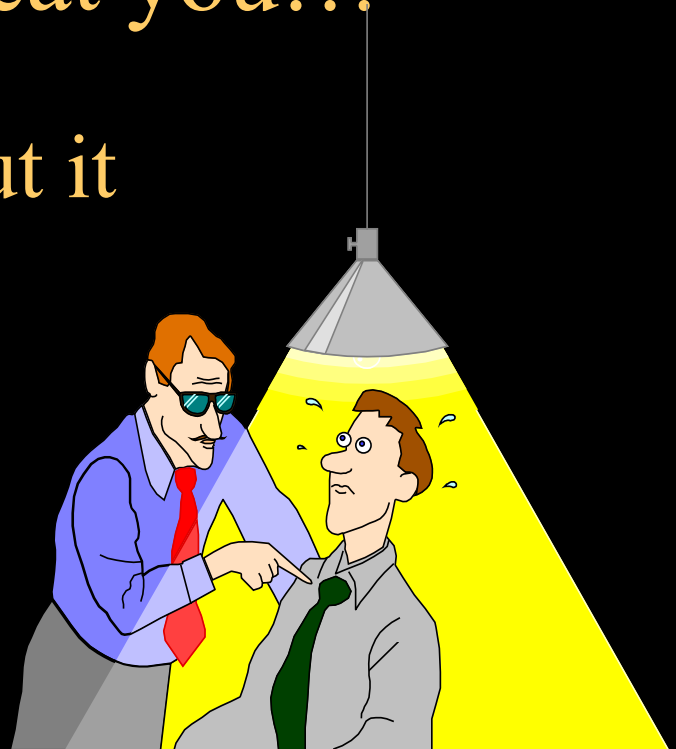


Countermeasures: *July, 2003*

How they're trying to beat you...
and what to do about it

Gordon H. Barland, Ph.D.
July 21, 2003



Disclaimer



My instruction represents my best current understanding of the topics, and does not necessarily represent the views of the Federal Government, the Department of Defense, or the DOD Polygraph Institute.

Admin notes

- What this presentation does *not* cover
 - Published scientific studies
 - Cold War CM programs
 - DPI's CM findings
- What this presentation *does* cover
 - CM taxonomy, framework, perspectives
 - What today's threat is
 - How to recognize CMs
 - How to deal with them...and how NOT to
 - Case studies
- Today's presentation is oriented toward the CQT.

Doug,

I bought your program 2 weeks ago, on a Thursday. I passed my test on the following Monday. I was still nervous when I walked in to the office. But, when the terrorist started doing everything you said he would do, I started to get more comfortable. It was textbook.

It went so good, I thought I must have failed. But, when I got the phone call 5 days later, saying I passed and I was hired, I felt like the world was lifted off my shoulder. By the way, if you print this letter, I want everyone to know that I did lie on the test. The program didn't help someone with just a bad case of the nerves, it helped someone who out and out lied on two questions. They were not serious infractions, but I knew I had to lie. I can't thank you enough.

You helped me get my dream job.

Military case



Case study # 1
(examiner unknown)

Military LSD urinalysis test

- A military unit underwent a surprise urinalysis test. One of the soldiers came up positive for LSD.
- The soldier adamantly denied having taken any LSD. He said he had been with friends over the weekend who took some. They had urged him to take some, too, but he refused. Someone must have slipped him some without his knowledge.
- He agreed to take a polygraph, which was administered on October 23, 1998.

LSD pretest

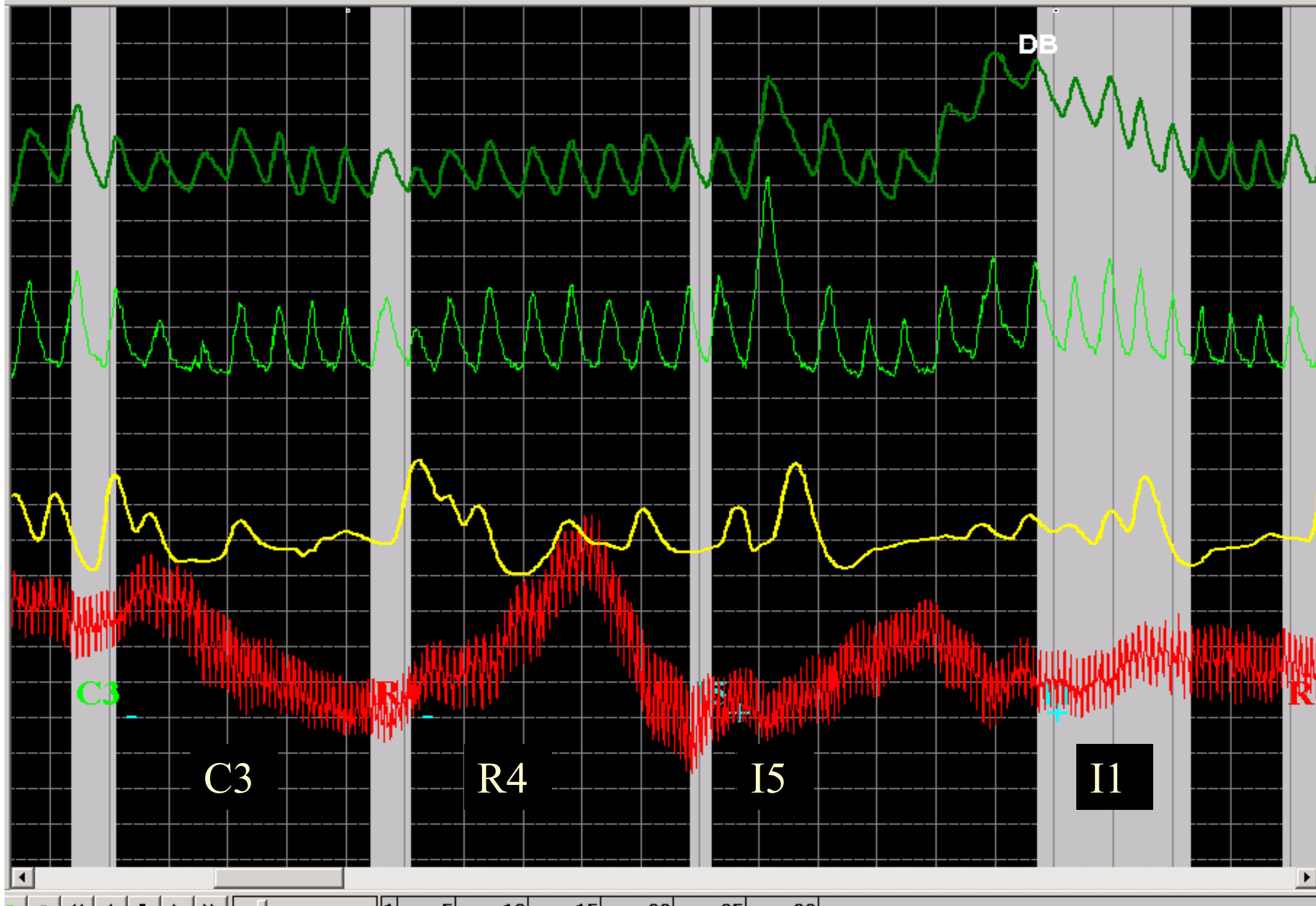
- The pretest interview was normal. The subject did not change his account.
- He denied surfing the Internet re the polygraph.
- The following questions were reviewed with him.

LSD case MGQT Question list

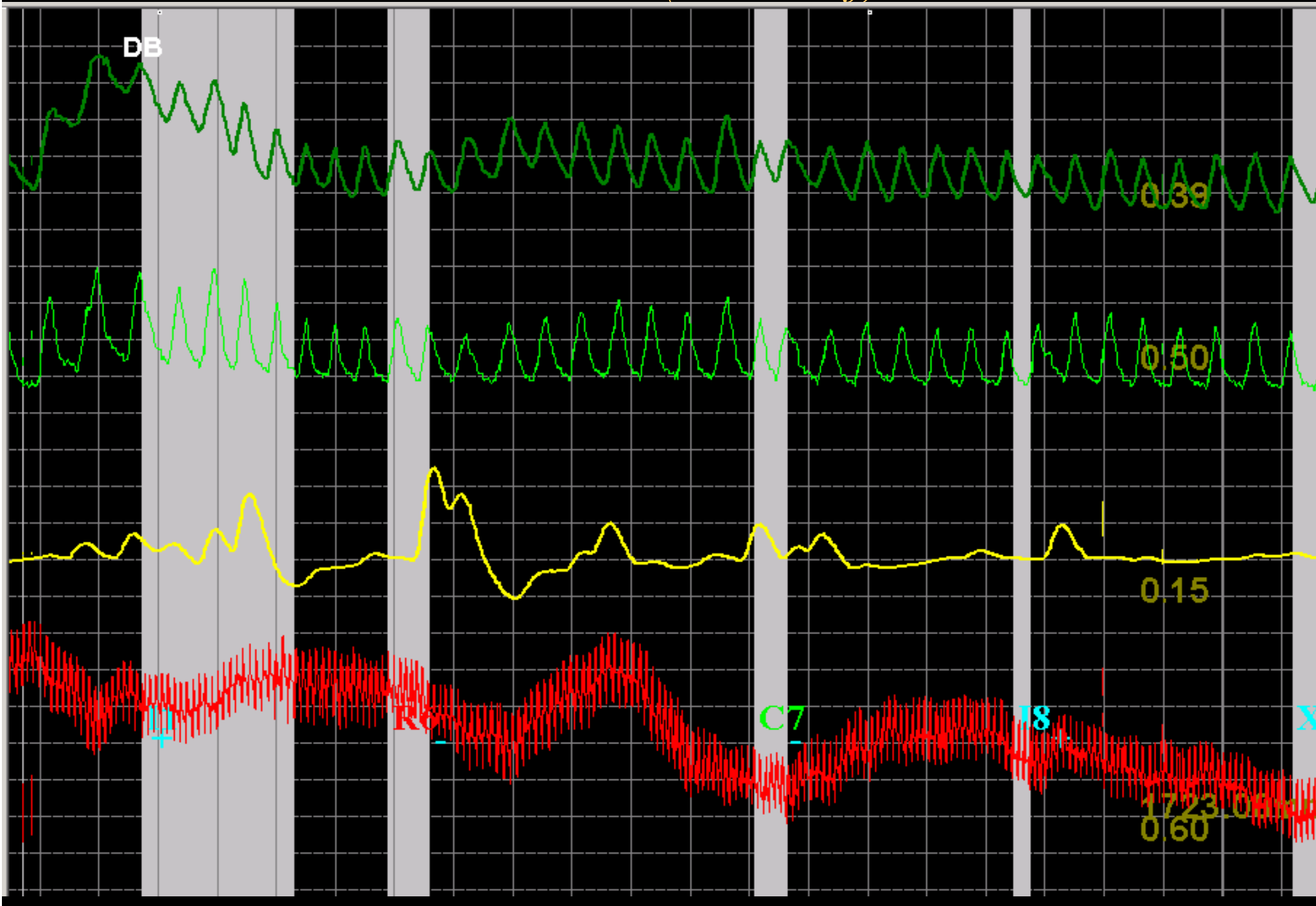


- I1. Are the lights on in this room?
- SR2. Regarding your positive urinalysis for LSD, DYI to answer each Q about that truthfully?
- C3. Btwn the ages of 20 & 30, DYE lie to s.o. who trusted you?
- R4. DY use any form of LSD in the week before that urinalysis?
- I5. Is the door to this room closed?
- R6. DY use any illegal drug in the week before that urinalysis?
- C7. Prior to 1998, DYE lie to cover up a mistake?
- I8. Are you now sitting down?

Chart I-1 (first half)



Char I-1 (last half)



Examiner's analysis

- Significant responses to R4 & R6.
- Unusual respiratory pattern (but late) on I5.
- Nothing unusual on C3 & C7.
- Examiner ran a 2d chart.

Chart I-2 (first half)

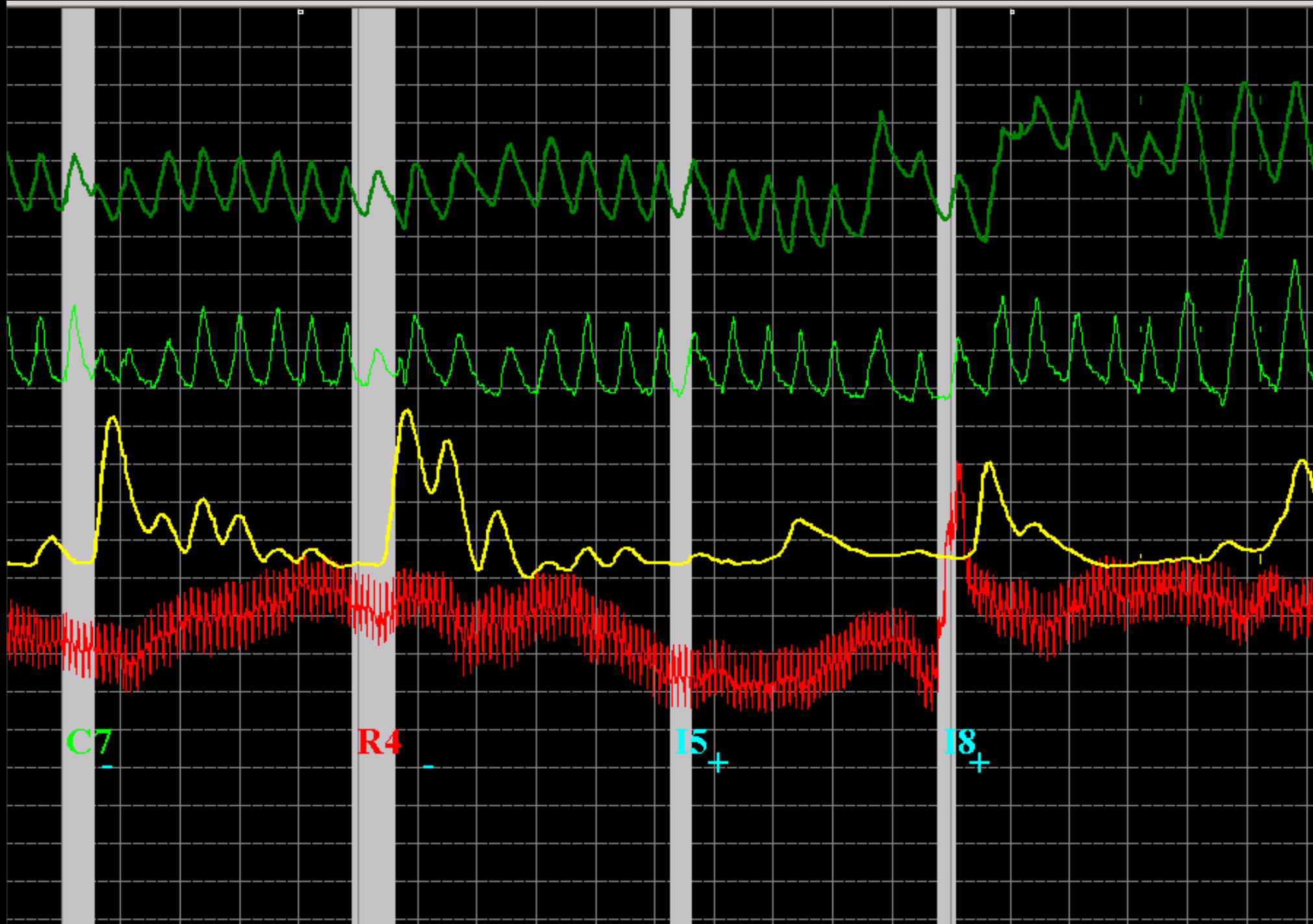
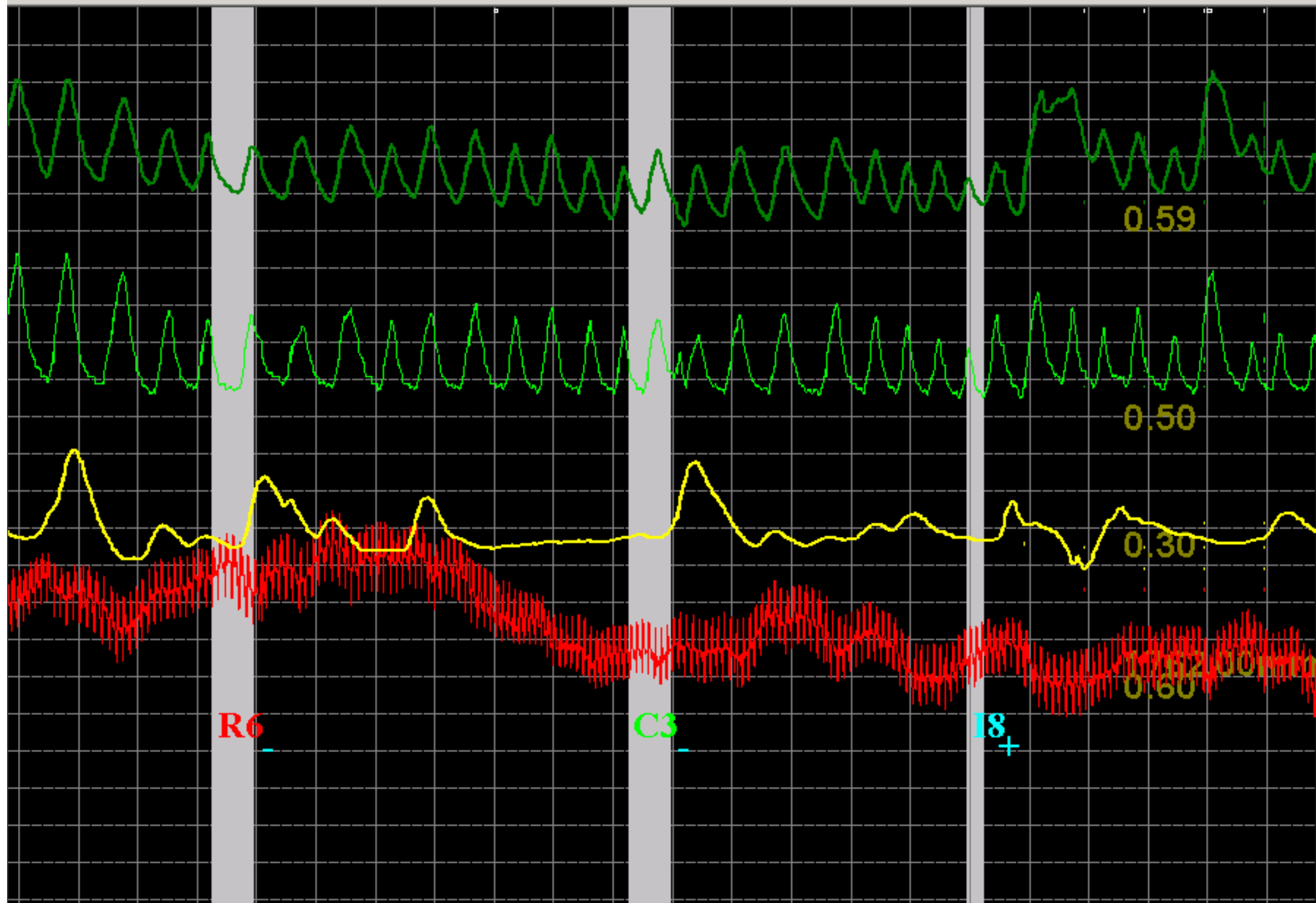


Chart I-2 (last half)



Examiner's analysis

- Charts showed more reactivity to CQs, less to RQs.
- Movement distortion in cardio on first I8.
- Strange respiratory tracings on I5 (delayed) and both I8s.
- Suspects CMs on I8.
- Examiner runs the 3rd chart.

Chart I-3 (first half)

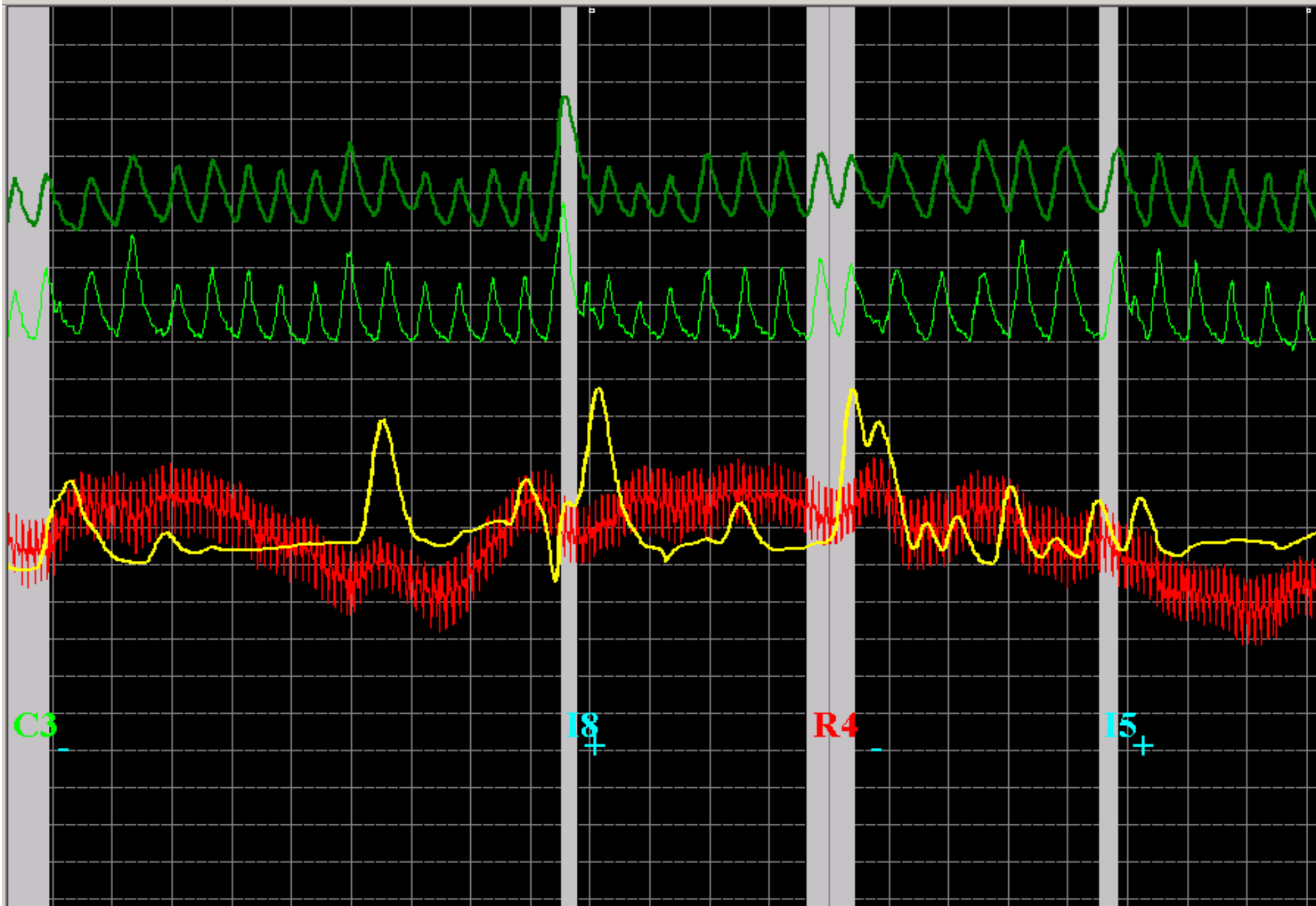
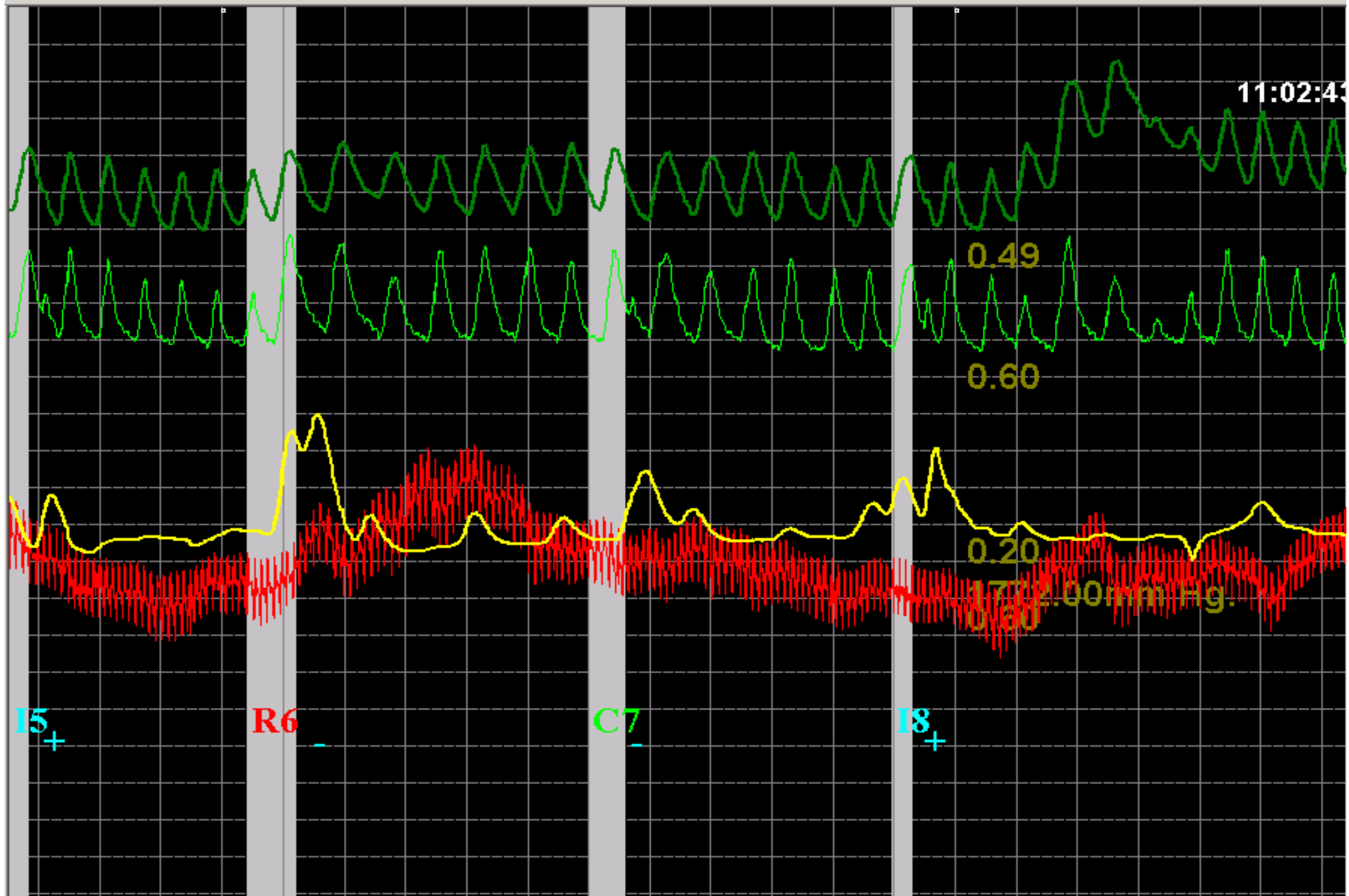


Chart I-3 (last half)



Examiner's analysis



- Starts looking DI again, but...
- Strange respiratory pattern on I8.
- Rest of chart looks normal.
- Subject denied trying to influence test.

Examiner's conclusions

- DI to knowingly taking LSD.
- CMs applied at IQs.
- Question: If those IQ reactions had occurred on the CQs, what would your decision have been?



What *I* see in the charts...

Chart I-1 (first half)

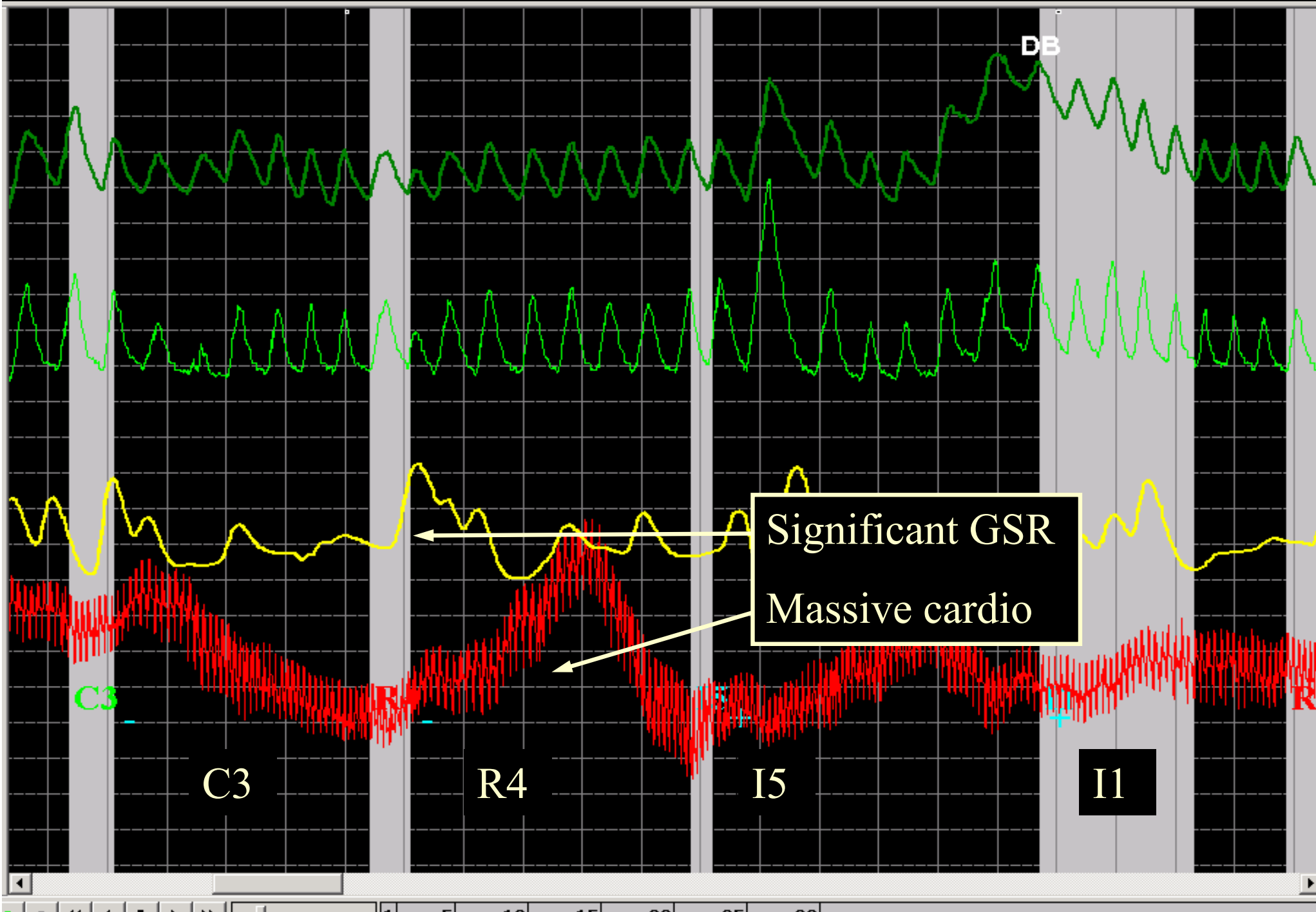


Chart I-1 (first half)

Unusually regular
pneumo:
a CM indicator
when on RQs

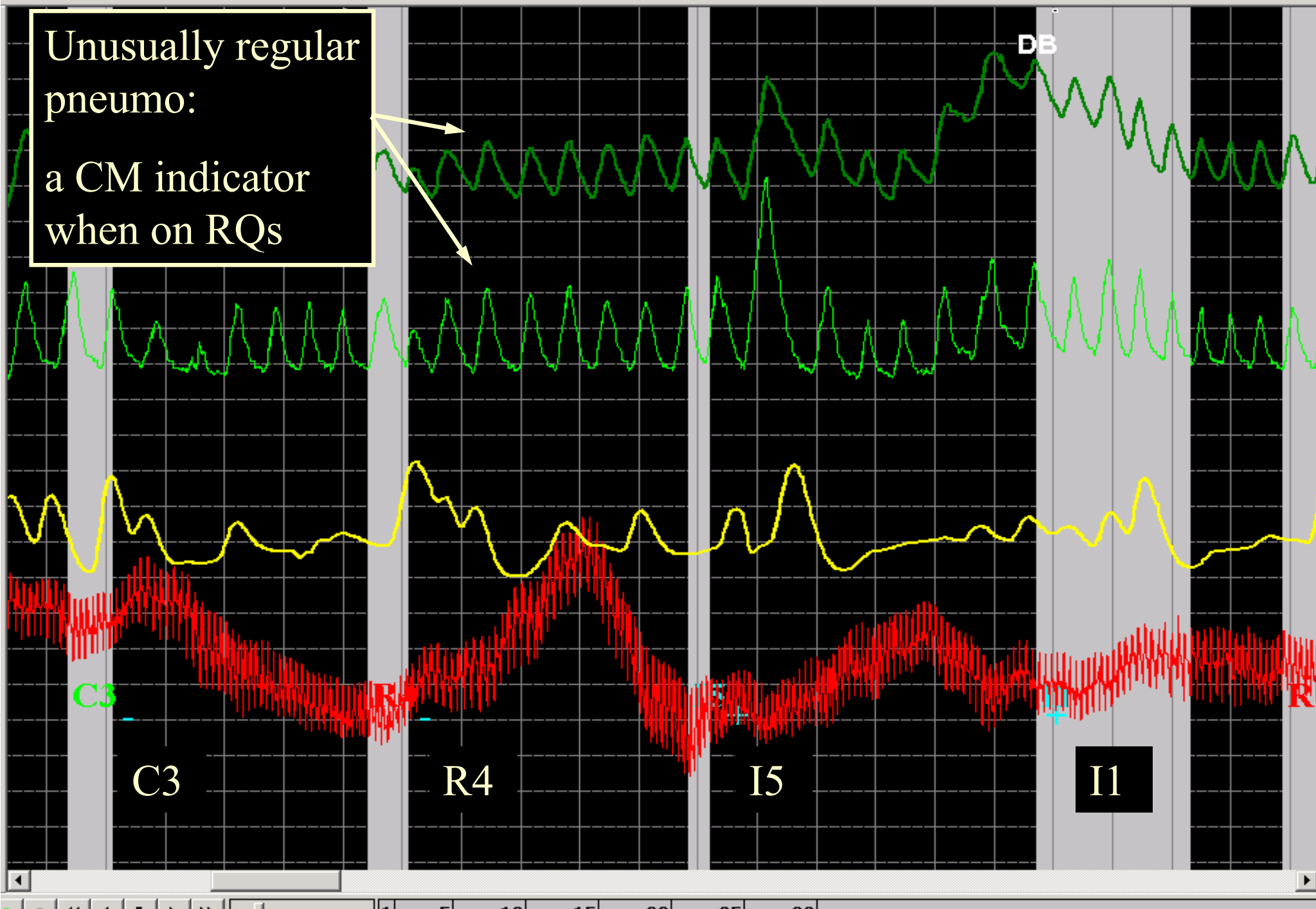


Chart I-1 (first half)

Deep breath followed by sustained cardio rise. He “did something,” prob. anal sphincter. DB is the *symptom*, not the *cause*. GSR caused by the DB; not significant as a CM indicator.

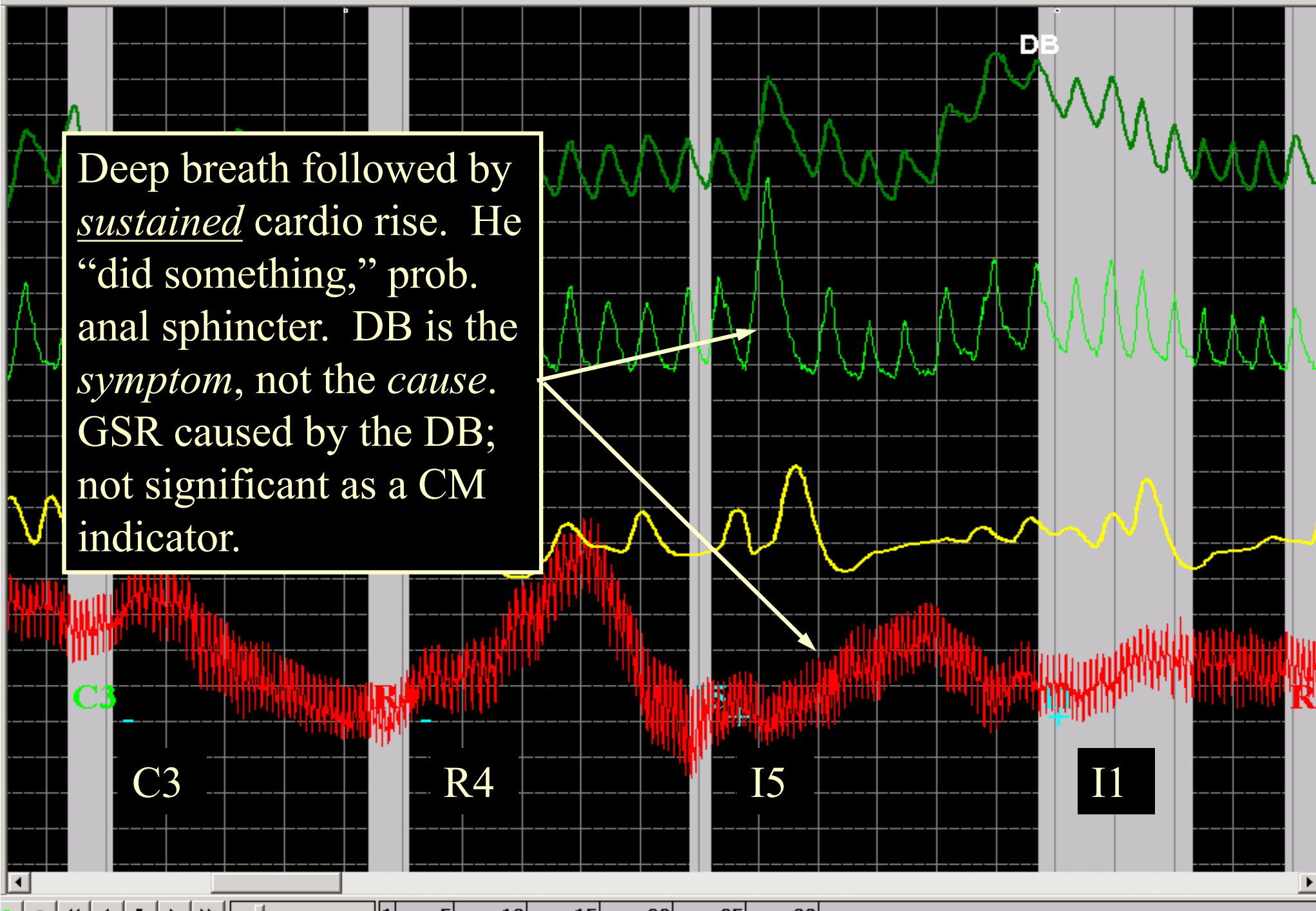
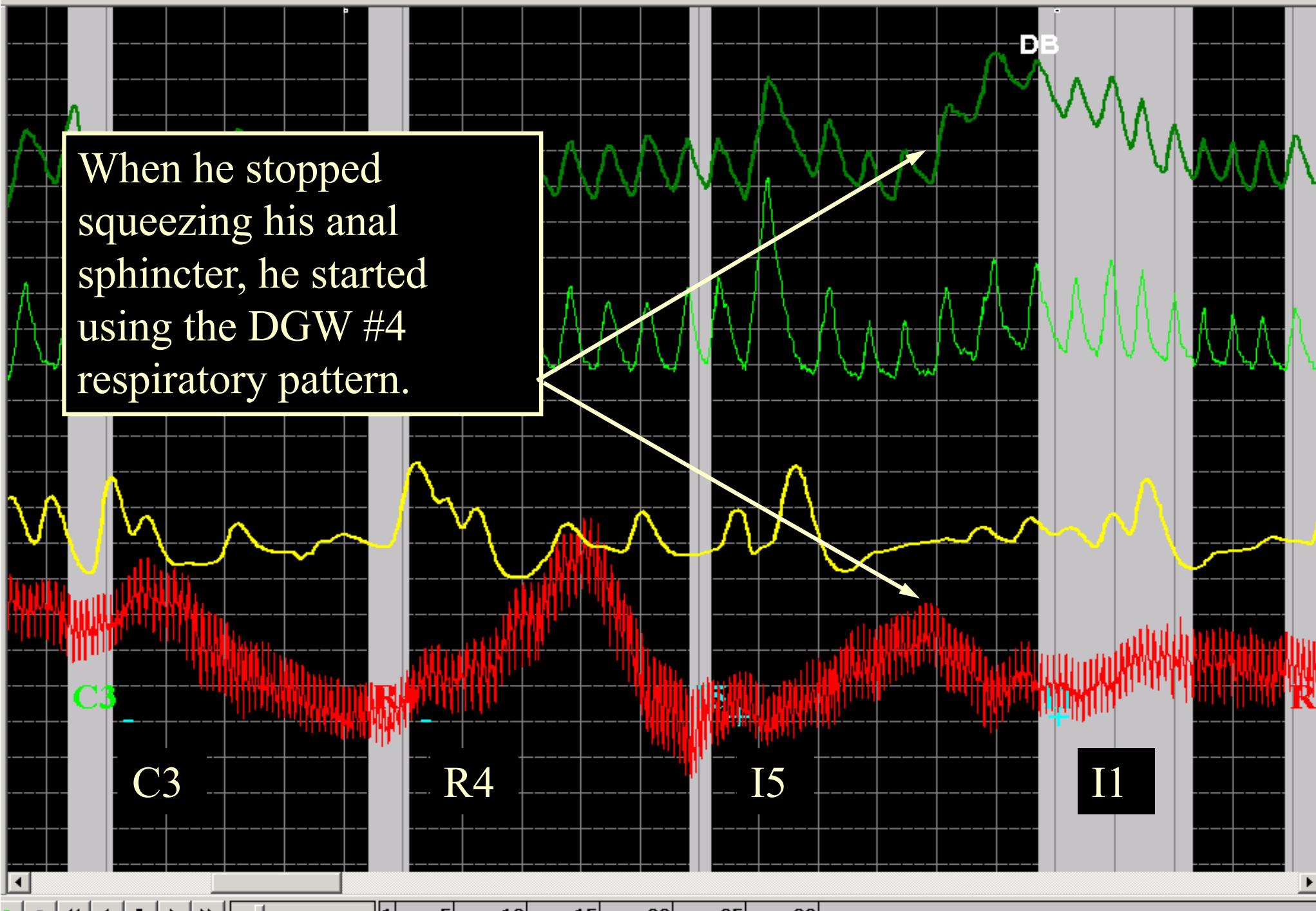


Chart I-1 (first half)

When he stopped squeezing his anal sphincter, he started using the DGW #4 respiratory pattern.



Char I-1 (last half)

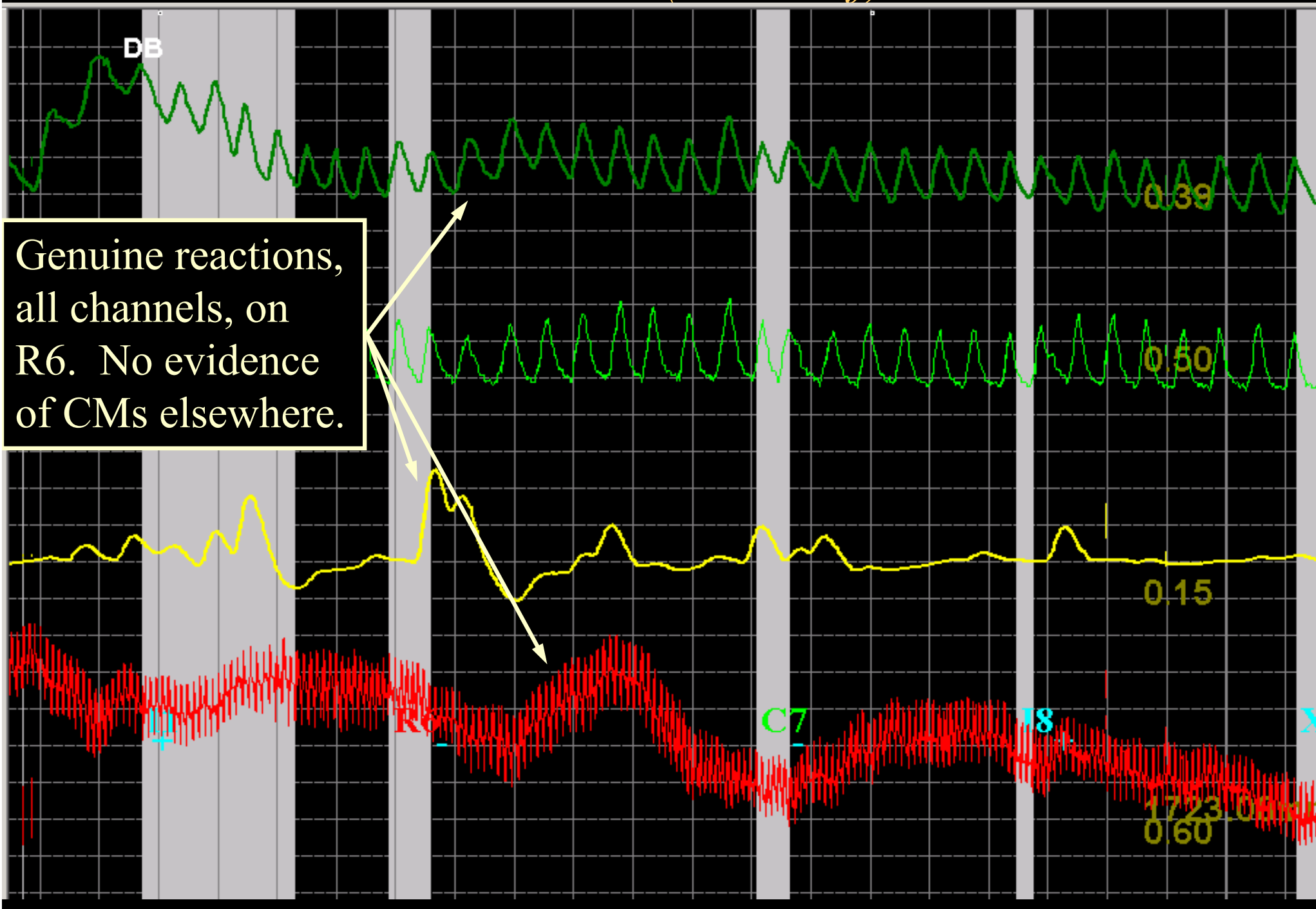


Chart I-2 (first half)

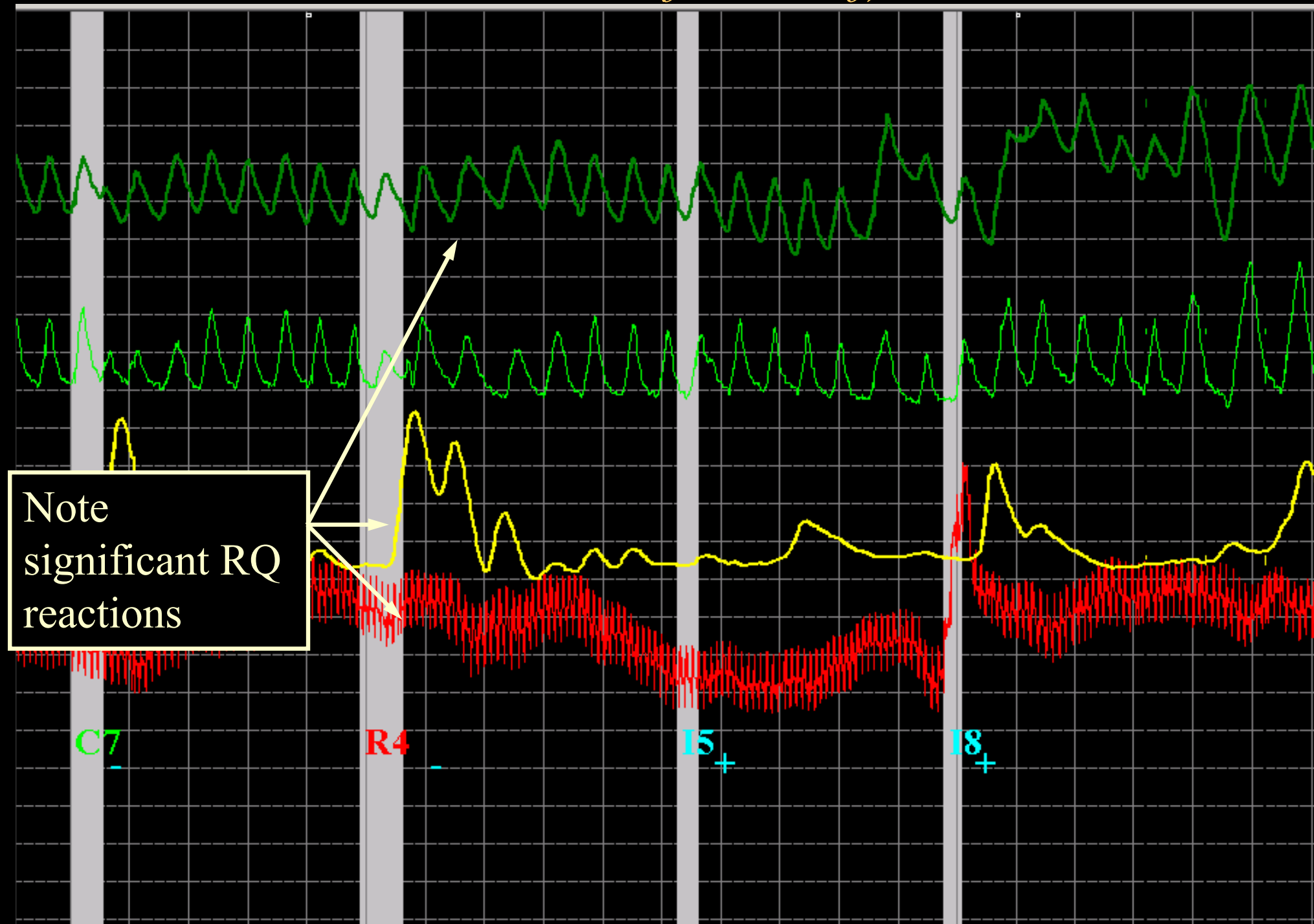


Chart I-2 (first half)

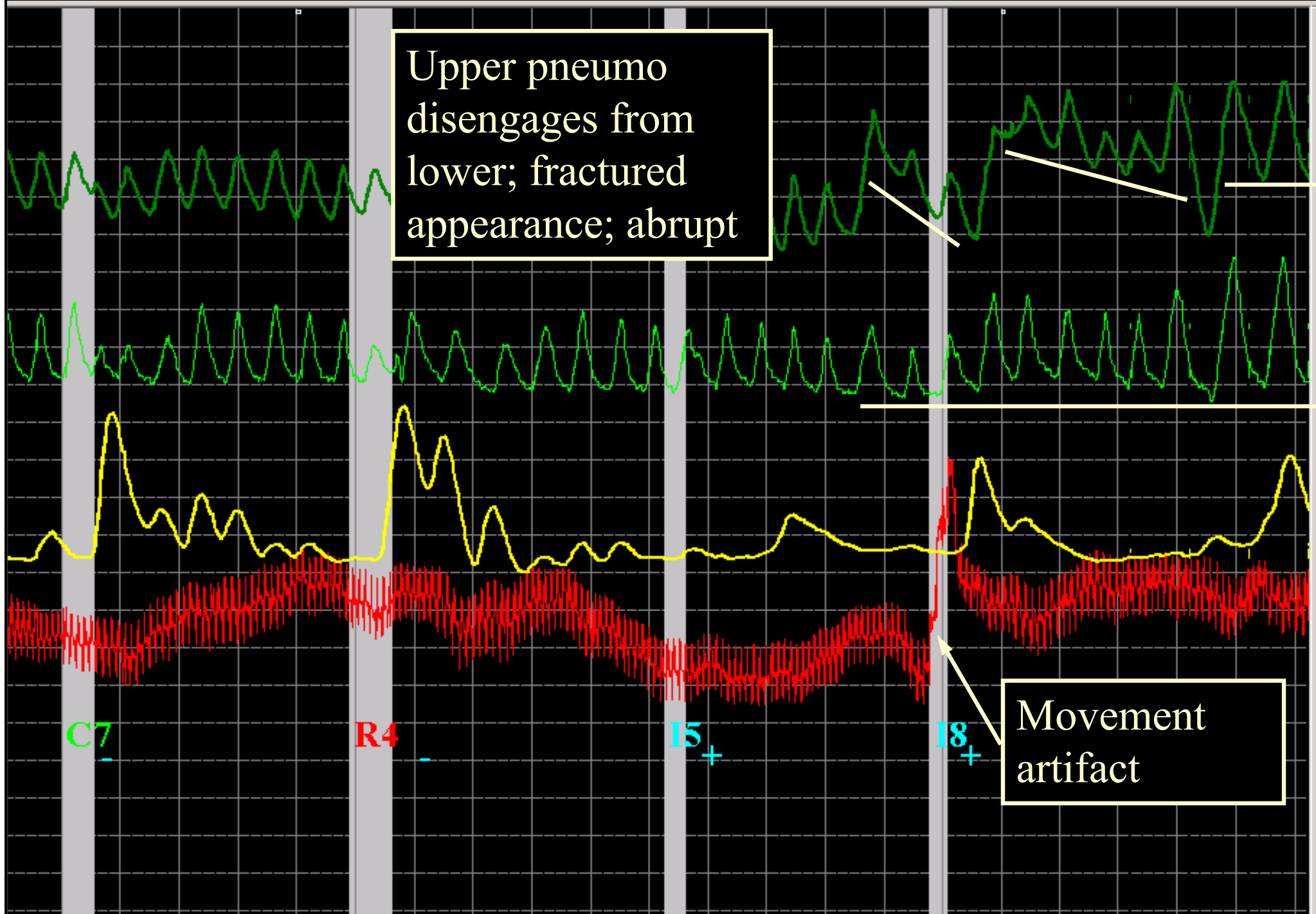


Chart I-2 (last half)

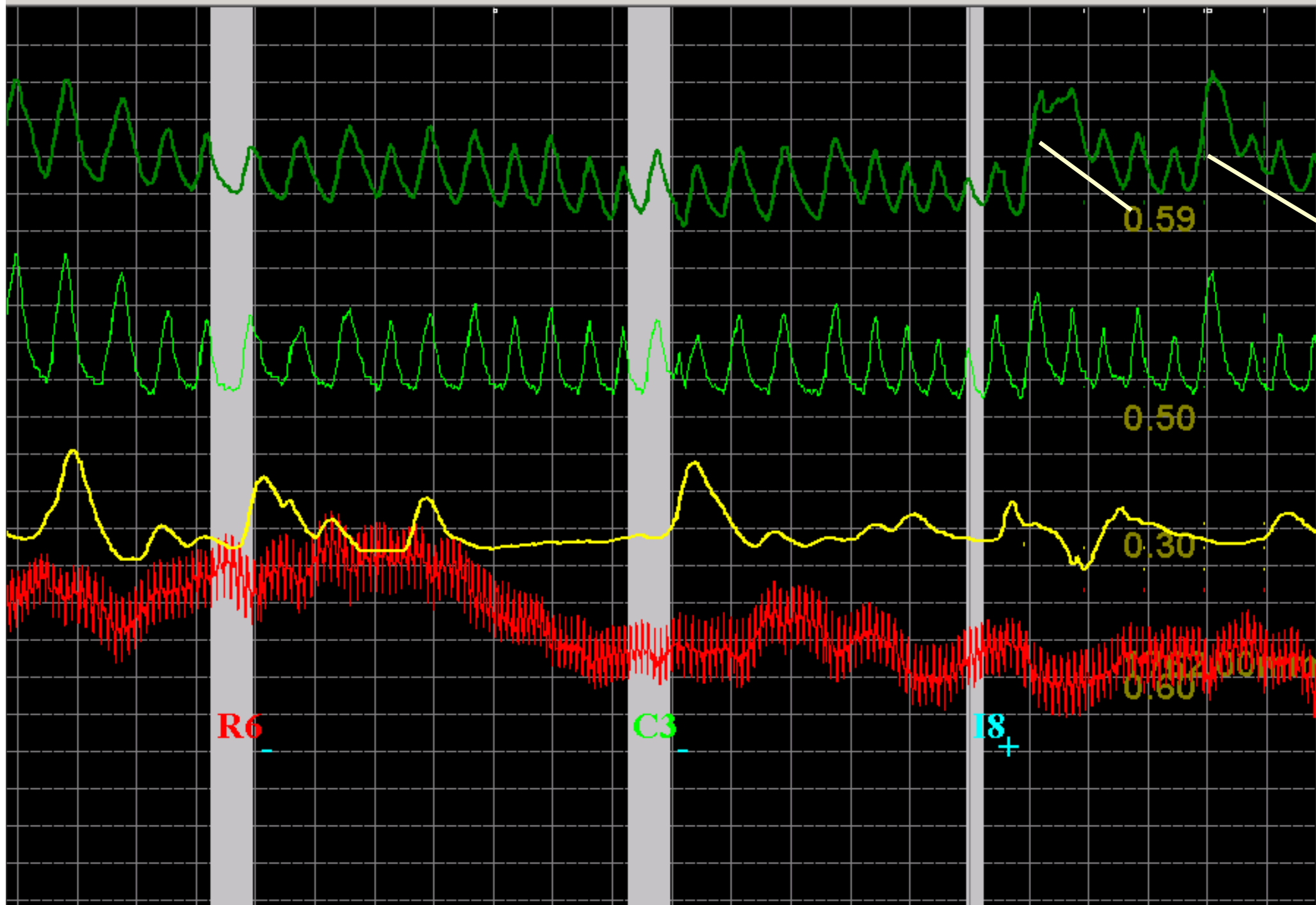


Chart I-3 (first half)

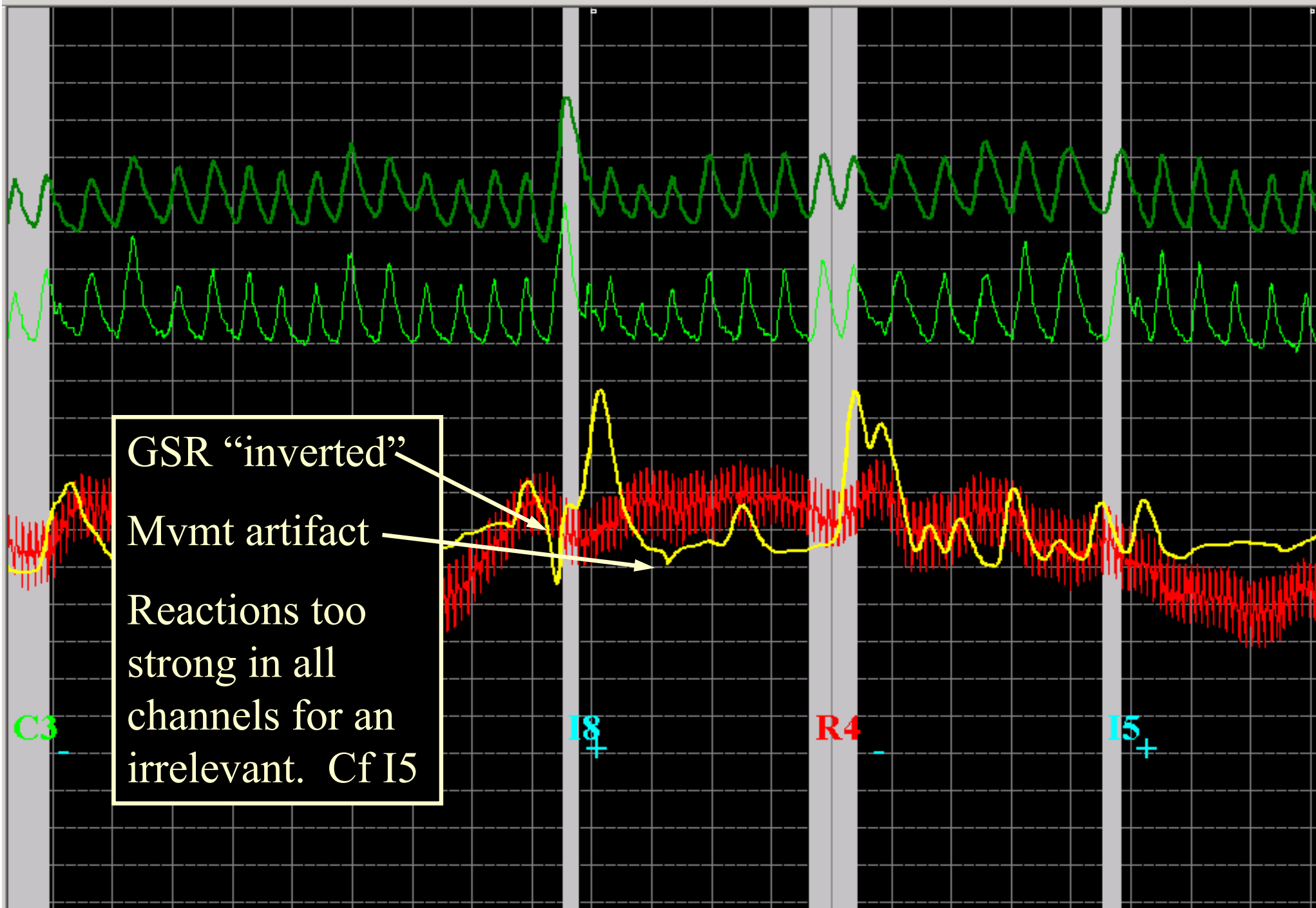
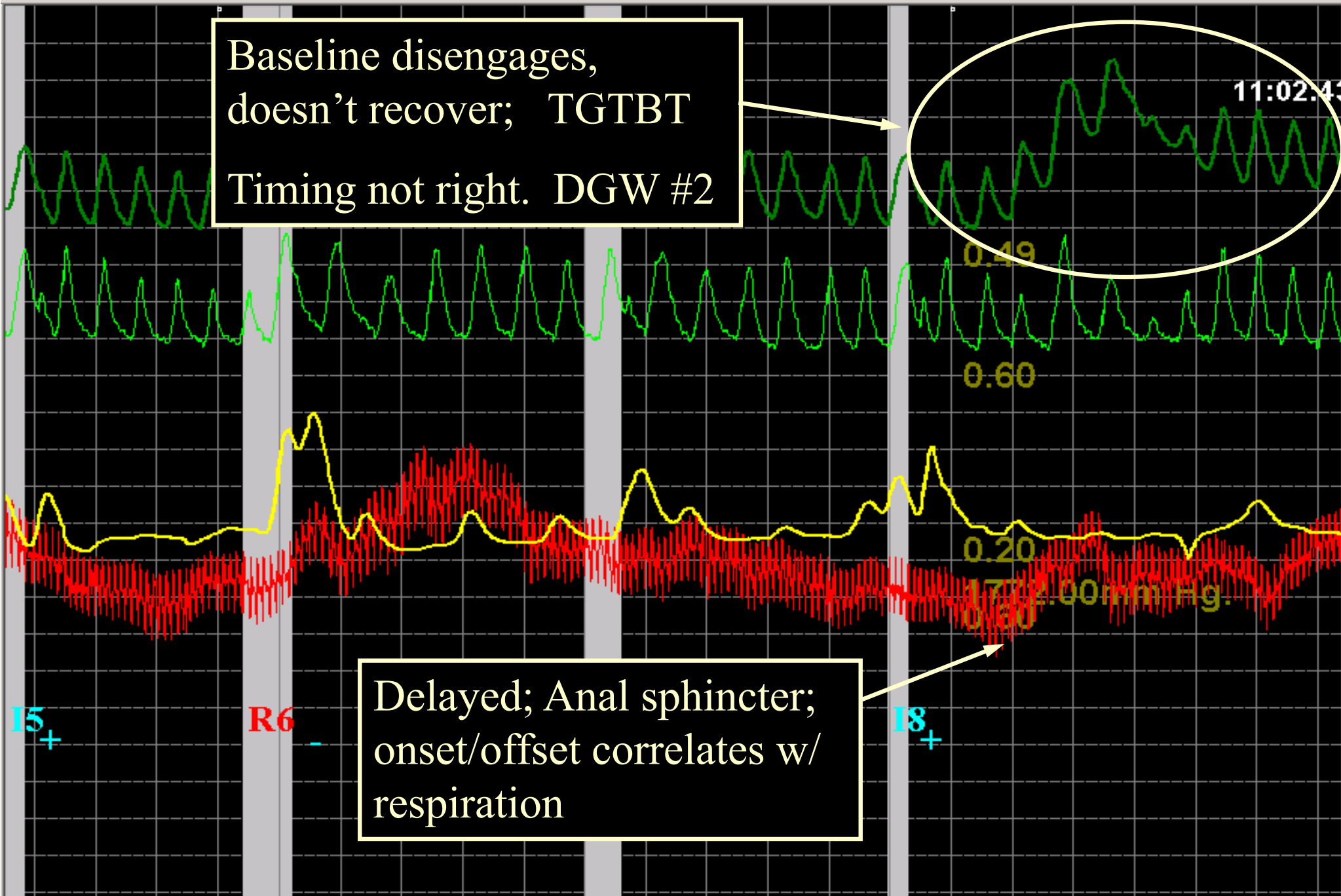


Chart I-3 (last half)

Baseline disengages,
doesn't recover; TGTBT
Timing not right. DGW #2

Delayed; Anal sphincter;
onset/offset correlates w/
respiration



Conclusions



- Clearly recognizable as CMs, even if they had occurred on CQs.
- Although this subject did not admit to using CMs, these charts have instructional value because they show the exact same patterns observed in verified CM cases.
- Before the day is over, these will be obvious to you, too.

Academia's bias



The only thing worse than a lie detector
that doesn't work, is one that does work.

Robert L. Park, Ph.D., Univ. of Maryland

As quoted by Joanne Loviglio, Associated Press, 6/6/03

Polygrapher's bias



Countermeasures aren't a problem. They don't work.
I've caught people who used them.

Anonymous

Dear Doug,

YOU ARE A GOD!!!! It worked! This guy, if you recall, I asked you if you were familiar with him. Well, he was familiar with YOU! He was going through his schpiel about how you can't beat a polygraph, telling me everything you said, but in reverse. Then he says "there's even this guy on the internet, if you send him \$50.00 he'll send you something about how to beat a polygraph". He told me that what you sold was not going to work and any good polygrapher could detect it. Something about it not being a reaction. I got a little nervous at that, but I prevailed. He told me that the GSR sensors measured the electricity in my body, strike one for him!

Then he gave me the test. I was nervous, but I got through it. Then he had me pick a number off of ones he wrote on a piece of paper and lie about the one I picked. I used the technique, and he bought it! I guess he should have spent \$50.00! The reading on his game showed EXACTLY what I told the machine to say. Then he gave me a second test. This time I was REALLY confident. When I was finished, he looked at the graph and said "you passed".

I stung him but GOOD! A MILLION THANKS TO YOU! You have made me a very happy man. It was more than worth what I paid for it.

PS: I out and out lied to this guy. He was so sure of his machine, that he didn't even consider any other possibilities.

Basic concepts & definitions



- Countermeasures (CMs) & manipulations
- Counter-countermeasures & Anti-countermeasures
- Chart vs non-chart (e.g., behavioral) CMs
- Point vs state CMs
- Low, mid-, & high level CMs

Manipulation

- When a person does something to affect the outcome of the test, he is **manipulating** the test.
 - Manipulate the charts (Chart manipulations)
 - Manipulate the examiner (Behavioral manips.)
- When a **guilty** person manipulates, it is a **countermeasure** because he tries to make the test turn out *wrong*.
- When an **innocent** person manipulates, it is **augmentation** because he tries to make the test turn out *right*.

M/CMs (Barland, 2000)



- ❑ CMs are the real threat...because they can make the test turn out wrong
 - For remainder of presentation, as a term of convenience, I will only refer to CMs
- Attempts to augment charts cannot be distinguished from CMs
- Therefore, attempts to augment carry a cost for the innocent subject...
 - if detected, they must be treated as CMs or purposeful non-cooperation (PNC): the person doesn't pass the polygraph no matter how positive the score

Counter-countermeasures (CCMs)



- Any action taken specifically by an examiner to verify or negate a *suspected* countermeasure
 - Urine specimen to identify drugs
 - “Yes” answered Qs on RI test

Anti-Countermeasures (ACMs)

-- Lynn Marcy (about 1990)

- Any action taken *routinely* by an examiner to identify or negate *potential* CMs
 - Urine specimen to identify drugs
 - “Yes” answered Qs on RI test

The distinction between ACMs and CCMs lies not in the action taken, but in the *reason* for the action

CM Taxonomy



- Non-chart CMs
 - Behavioral
 - Operational or procedural
 - Third party
- Chart CMs
 - Physical
 - Mental
 - Pharmacological/Chemical

Taxonomy (Honts, 1987)



- Point CMs
 - Turned on and off at specific points during a test. e.g., creating a reaction on CQs.
- State CMs
 - Remain constant or steady throughout test. e.g., taking valium prior to test.

Taxonomy of CM sophistication (Barland, 1995)



- Low, mid-, high level CMs
- Low level (Pre-Internet)
 - Not taught. Instinctive; no authoritative information
 - Primary threat until 6 years ago.
- Mid-level (Internet)
 - Self taught. Knows about polygraphs, CQ formats, CMs
 - Primary threat today because of Internet
- High-level (Organizational)
 - Not a concern for private or police examiners at present

What you were probably taught:



- CMs are easy to detect
- Movements especially easy to detect
 - You can see the subject move -- and
 - You will see movement artifacts in the chart
- Drugs ineffective or easy to detect
- You can only beat the E, not the charts
- Experienced, alert Es can't be fooled
- Only way to beat polygraph is with a stick
- *These apply only to low level CMs*

Test assumptions




- Any valid test procedure makes certain assumptions must be correct in order for the results to be accurate
- Statistical tests
 - Numbers must be proper level [e.g., nominal, ordinal, interval or ratio] for the type of test.
 - Number of subjects must be adequate.
- Psychological diagnostic tests, e.g. MMPI
 - Subject is naïve, reads all questions, answers honestly, etc.
- If the test assumptions are not met, the results may not be reliable.

The administration & scoring of the CQT depends upon certain assumptions

- The subject is naïve
 - He believes the polygraph is highly accurate
 - He doesn't know how the test is structured or scored
 - He doesn't know about the existence of control questions, much less be able to recognize them
- The examiner is in control; He must direct psychological set
 - He must develop adequate control questions based upon the subject's unique background & experience, largely assessed during the pretest.
 - He must “set them” properly; this requires reliance on behavioral cues
 - He must recognize or control most or all countermeasure attempts
- The subject cannot manipulate the autonomic NS
 - The numerical score accurately reflects what happened on the test

Not one of these assumptions is true for any examinee who turns to the Internet before entering your exam room!

- 
- We used to operate in a world in which most subjects were naïve about the polygraph, and applied only low level countermeasures.
 - Today we live in a world in which an increasing number of subjects know a lot about the polygraph, they have been taught to hate us, and they apply sophisticated countermeasures.

Behavioral CMs



The under-rated threat

Examiner expectations



- You tend to see what you expect to see.
- Your pretest is influenced by your expectations.
 - If you believe the examinee is very likely innocent, you conduct your test accordingly.
 - You work to keep the subject from reacting.
 - When that doesn't work, you want to rationalize reactions away.
- This psychological set of the *examiner* is what makes behavioral countermeasures so effective.

Mr Williams:

I had my polygraph as scheduled.... I had the time of my life playing the ignoramus in front of the skilled electronic "interrogator" operator. I must say that I was a bit nervous at first, but when he showed me the stim test results, I silently knew that I had called his bluff. The rest was just a confidence exercise.

Thanks a lot Doug. I passed the test! I will now be a cop in my local town

Behavioral CMs

Post-test



- Look, act innocent; “innocent” denials
- Explanations
 - Serial, trivial admissions (screening)
 - “Untestable” alibi: “emotional Italian” (criminal)
- Bribes, threats
- 3rd party influence

Third party CMs (Barland, 1999)

- Any action taken by a third party, directly or indirectly, which could limit or degrade the examiner's ability to detect or exploit deception.
 - The action may be directed toward the subject, the polygraph, or the examiner.

Third party - examples

- Lawyer who minimizes importance, value, or accuracy of polygraph prior to test.
- Lawyer who limits what case facts E receives, or the light in which they are presented.
- Lawyer who limits what questions E may ask.
- Internet sites providing anti-polygraph info & advice.
- Wife who calls S on cell phone during test.
- Lawyer prohibits or interrupts interrogation.
- Legal action restricting polygraph usage, e.g. EPPA


*What is the single most effective
countermeasure?*



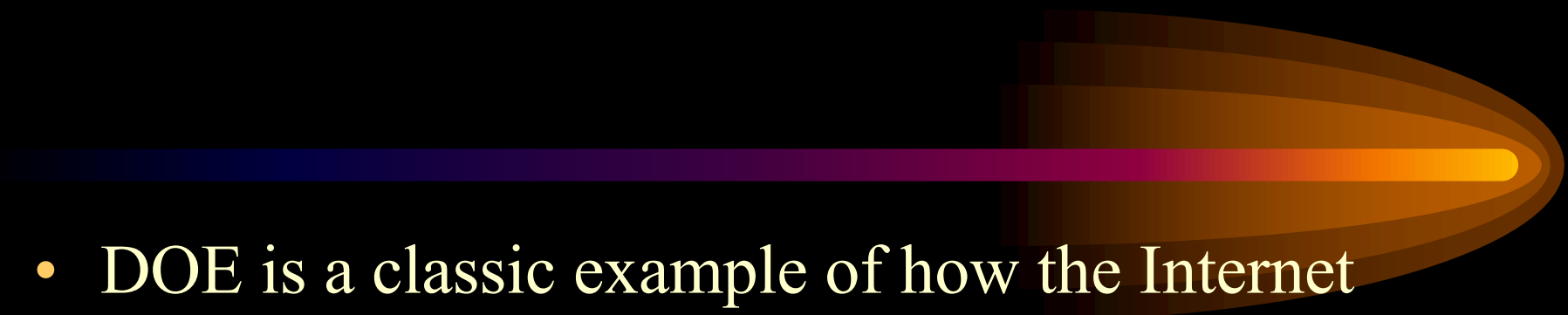
Don't take the test!!

This is a *behavioral* CM, not a chart
CM.

The one CM I most fear is a third party countermeasure:



- Have congress outlaw the use of the polygraph
- This CM has been set in motion on the Internet. I believe it could well succeed vis-à-vis screening examinations
- The current law suit against FBI, DEA, & USSS is promulgated on the Internet

- 
- DOE is a classic example of how the Internet organizes and orchestrates scientific objections.
 - Congress authorized tests of up to 10,000 DOE personnel. Anti-polygraph Web forces, working with several DOE scientists, nearly forced the Secretary of Energy to reduce the size of the program to 686 DOE personnel.
 - Fortunately, Congress prevailed.

Low level behavioral case

APA Newsletter (1998)

- Ohio Hwy Patrol trooper Blake tested Steven Howard on 12 Aug 98 re attempted rape. During break, Blake observed Howard via CCTV “doing something” to polygraph, but couldn’t see exactly what.
- When testing resumed, respiratory channel was a straight line. Blake again stepped out of room, observed via CCTV.
- Howard chewed the end off one of the pneumo sensors, including the internal wire. He also gnawed through one of the lead wires on the GSR.
- When confronted, Howard asked to see lawyer; testing stopped.
- 3 behavioral CMs:
 - damaged polygraph;
 - made no admission;
 - Requested lawyer; couldn’t be tested further.

Chart countermeasures




Definition: Chart CMs



- Chart countermeasures (CMs) are those *deliberate* techniques a *deceptive* person uses to *avoid being called deceptive* when his physiological responses are being recorded during a polygraph examination.

Point countermeasures (Barland, 1998)

- 
- Almost always used to *create* reactions, not inhibit them.
 - Effective in creating reactions (Honts et.al).
 - Ineffective in inhibiting them (Elaad & Ben-Shakhar).
 - Always mental & physical, never drug/chemical.
 - Effective against CQ tests.
 - Probably effective, though less so, against POT, SPOT, GK tests, because use is suspicious.
 - Presumed largely ineffective against RI tests.

State manipulations (Barland, 1998)



- Almost always used to *inhibit* reactions.
- Primarily drugs and some mental.
 - (Note: stimulants would enhance reactions).
- Seldom physical (except paced resp and some SDB).
- Presumed effective against RI, POT tests.
- Presumed ineffective against CQ, GK tests.

Tests' susceptibilities (Barland, 1998)

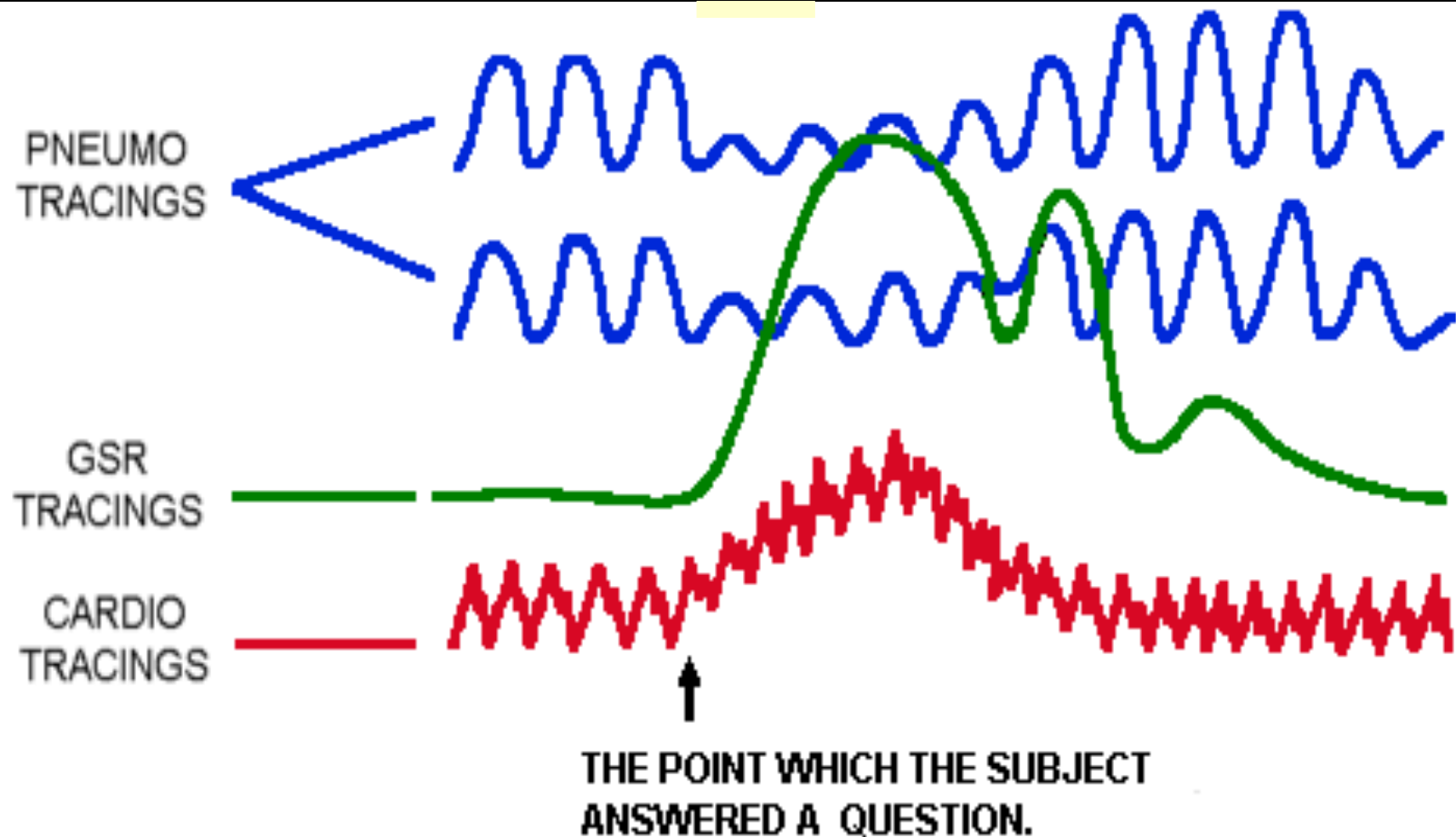


- The CQT is extremely vulnerable to point CMs, but largely impervious to state CMs.
- The RI test is vulnerable to state CMs such as drugs, but largely impervious to point CMs including most mental and physical CMs.

The RI test is the test of preference on polygraph examiners or when point CMs are suspected.

*How to discriminate between
normal innocent
and CM'd charts*





Orienting Response (OR)

(Adapted from Williams (2002))

Most normal polygraph responses look like orienting responses (ORs)



- Respiration
 - shallower
 - slower
 - both mean respiratory line length shortens
- GSR
 - Simple rise & recovery; not complex
- Cardio
 - Pressure curve - simple rise & recovery; not complex
 - Heart rate - Biphasic response: initial increase followed by large decrease, recovery

Characteristics of guilty charts with low level CMs (Barland, 2000)



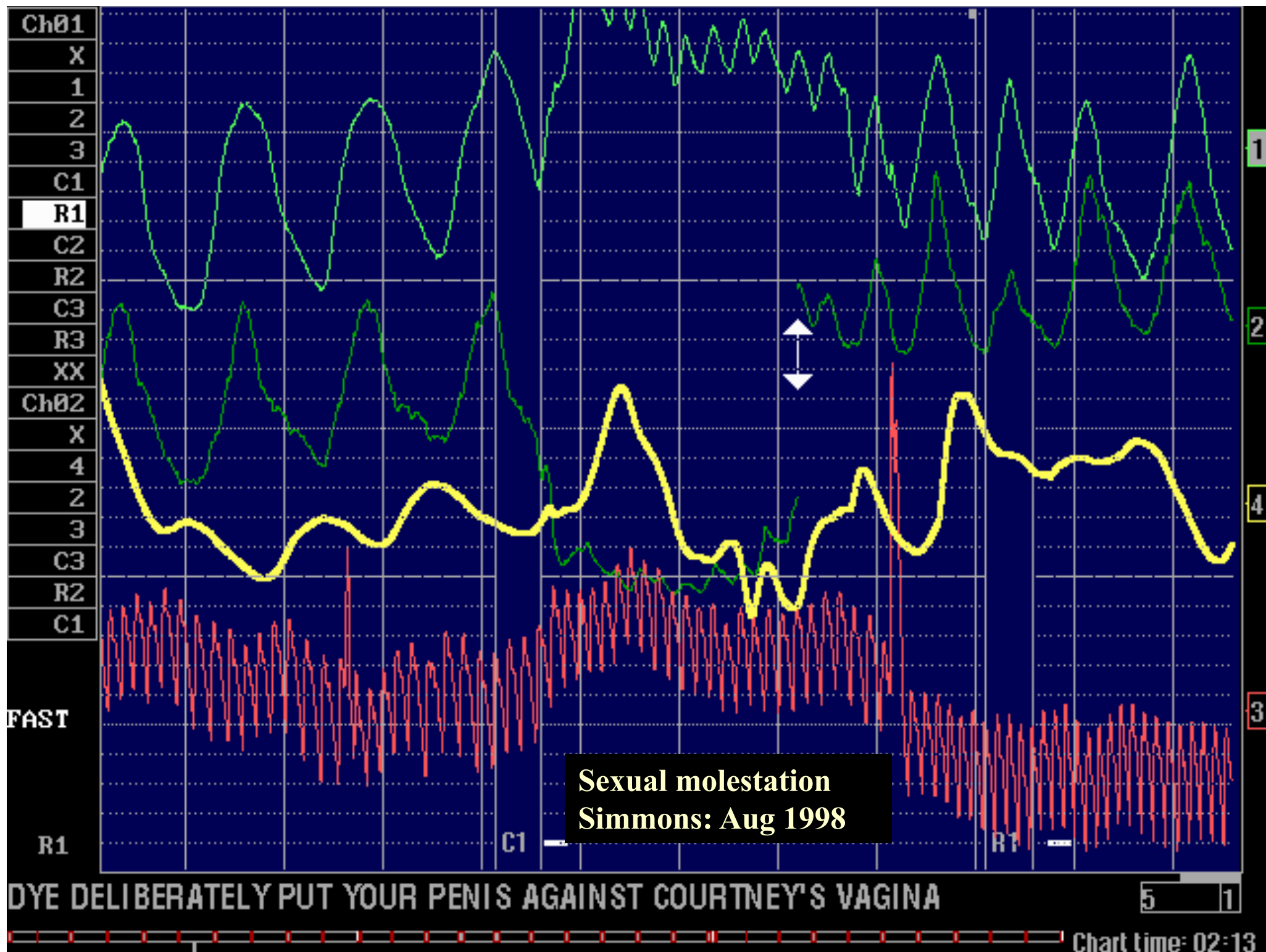
- Overall appearance
 - Messy
 - Frequent movement distortions, particularly in cardio
 - Frequent respiratory distortions, deep breaths
- Respiratory channel -- only channel they think they can control
 - Amplitude very irregular
 - Frequent deep breaths (randomly or on IQs or on RQs or, later, on CQs)
 - Amplitude, rate often change at announcement of test beginning
 - Slows down
 - Deeper
 - Rate often abnormally slow(er) on RQs -- tries not to react

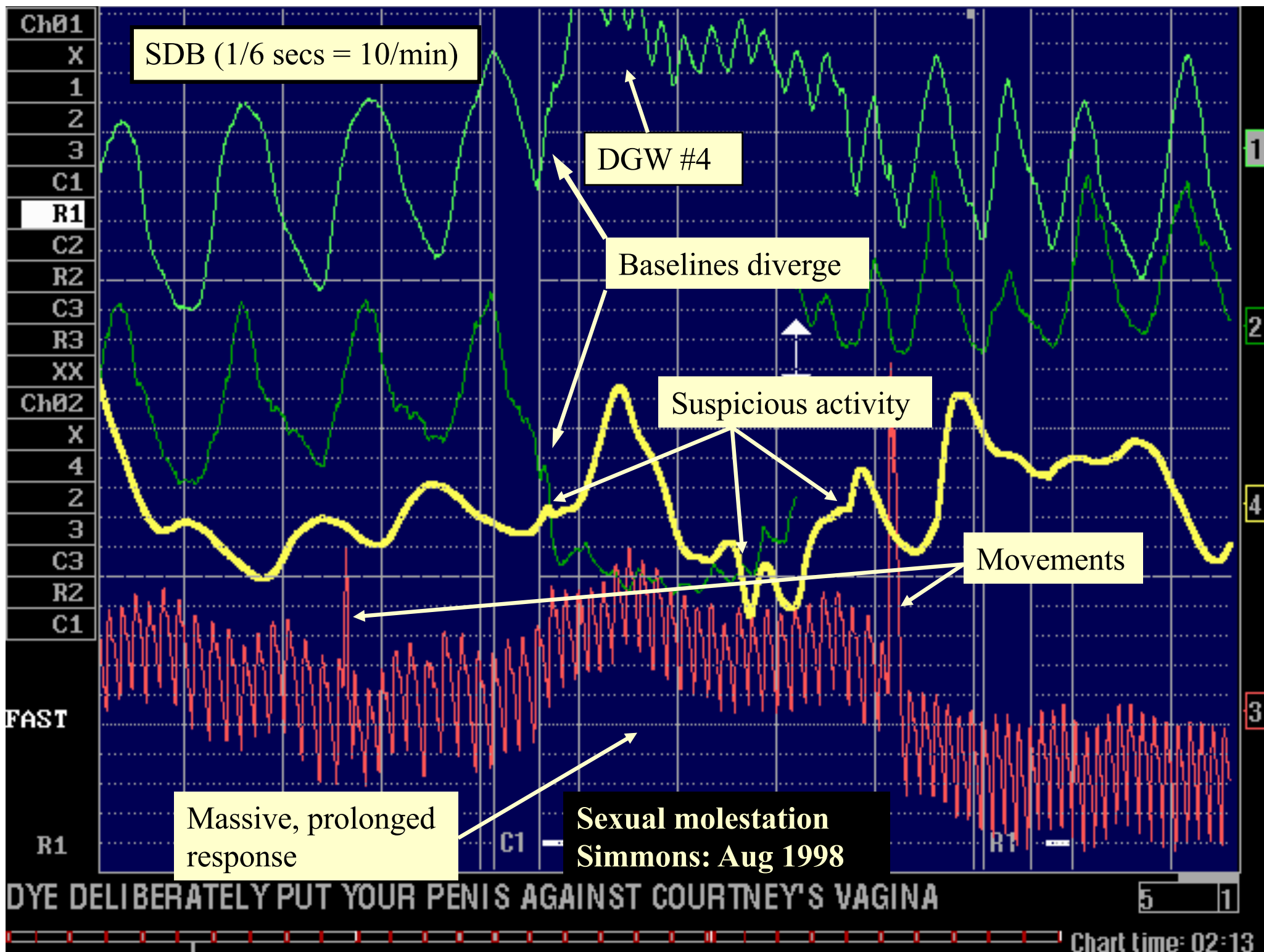
Characteristics of guilty charts with low level CMs (Barland, 2000)

- Electrodermal channel
 - Usually not targeted
 - Occasionally has frequent movement artifacts or sudden plunges
 - Rarely: Flat if antihistamines or other suppressants taken
 - Ethnic hair oils & gels may cause flat tracings; usually not a CM
 - Some prescribed or illegal drugs may cause flat or plunging tracings
- Cardio channel
 - Often contains movement artifacts
 - Note whether random, on IQs, RQs, or CQs. Reveals knowledgeability and strategy

Characteristics of mid-level CM charts (Barland, 2000)

- Overall appearance:
 - neat, orderly
 - no movement artifacts
 - Reactions to CQs often massive; usually significant reactions to RQs except from innocents; may be smaller than expected with guilties because psychological set is evenly divided with CQs
 - CQ reactions different from those generated by reflexes
 - Respiratory tracings weird; no physiological reflex can account for them. Massive shifts in baseline; baselines often desynchronize, “float”
 - Cardio reactions often massive in size, duration; often complex wave form





*What – God forbid – you may
have been taught*



Any change
from a person's norm
is a reaction.

*What – God forbid – you may
have been taught*



Any change
from a person's norm
is a reaction.

The Internet War



What CMs they teach:
the current threat

Internet realities



- The internet has created a whole new testing environment
- There is a tremendous amount of anti-polygraph and anti-CQT information out there
- It serves as a rallying point for opposition to the polygraph: legal, scientific, and applied
- We must be alert for both CMs from the guilty, and augmentation from the knowledgeable innocent.

Goals of the Internet War



- Short range:
 - Teach people how to beat the polygraph.
- Intermediate range:
 - Abolish screening tests, using both the judicial system and the legislative branch.
- Long range:
 - Get congress to outlaw the polygraph altogether, including criminal exams.

The Internet War



- This is a war of attrition.
- Time is on their side, not ours.
 - The more people who are screened out -- whether rightly and wrongly -- the more voices there are in the growing anti-polygraph Internet chorus.



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29 Jul 98

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May 8, 2002

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- [Deception Detection : Winning the Polygraph Game](#) -- Charles Clifton; Paperback
- [Handbook of Polygraph Testing](#) -- Murray Kleiner (Editor); Hardcover



[02-02-01](#): A list by
lauranick, Finds of the
Day!
(15 item list)

zShops : [See all 54 results in zShops...](#)

- [The Polygraph technique dedicated to man's right to verify the truth.](#) -- Price: \$38.00
- [Justice and the polygraph : a collection of cases.](#) -- Price: \$38.00
- [The Polygraph story dedicated to man's right to verify the truth.](#) -- Price: \$38.00

Sites you need to monitor regularly



- Doug Williams' site
www.polygraph.com
 - Date of current manual (Jan 30, 2003)
 - Testimonials
- Maschke & Scalabrini's site
www.AntiPolygraph.org
 - CM bulletin board:
click on "message board"
 - Articles, etc.
- CAAWP subscription
 - Email to: Listserv@listserv.boisestate.edu
say SUBSCRIBE CAAWP (your name)



Douglas G. Williams
in his former office at Hydro
Industrial
Chickasha, OK



Polygraph.Com

- First known polygraph CM site
- Established ~ March 1996
- Run by Douglas G. Williams
- Private business. Sole item is “How to Sting the Polygraph” [\$47.45]
- Also includes web page with 23 pages of testimonial letters



How To Sting The Polygraph!

Sting The Polygraph!

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About Doug

Questions

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Jul 29, 2002

"THE POLYGRAPH IS NOT A LIE DETECTOR. DON'T MAKE THE MISTAKE OF THINKING THAT JUST BECAUSE YOU ARE TELLING THE TRUTH YOU WILL PASS THE POLYGRAPH TEST! POLYGRAPH TESTS HAVE BRANDED MANY TRUTHFUL PEOPLE AS LIARS! YOU MUST BE PREPARED TO PROTECT YOURSELF!!!" [Doug Williams](#),

Author

"How To Sting The Polygraph"

THE POLYGRAPH TEST IS THE MOST IMPORTANT TEST YOU WILL EVER TAKE! WHY WOULD YOU TAKE IT WITHOUT PREPARING FOR IT FIRST? "How to Sting the Polygraph" is the first of its kind and the only one ever written by an expert police polygraphist. It gets right to the point, is easily understood, and it is frequently updated with current information. And





DGW home page, 6/6/03



How To Sting The Polygraph!

Sting The Polygraph!

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Questions

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Media Clips

"THE POLYGRAPH TEST AND THE CVSA (COMPUTER VOICE STRESS ANALYSIS) TEST ARE NOT A LIE DETECTORS. DON'T MAKE THE MISTAKE OF THINKING THAT JUST BECAUSE YOU ARE TELLING THE TRUTH YOU WILL PASS THE POLYGRAPH AND CVSA TESTS! POLYGRAPH AND CVSA TESTS HAVE BRANDED MANY TRUTHFUL PEOPLE AS LIARS! GET MY MANUAL AND PROTECT YOURSELF FROM BEING CALLED A LIAR BY THESE SO-CALLED LIE DETECTOR TESTS!!!" [Doug Williams](#), Author "How To Sting The Polygraph"



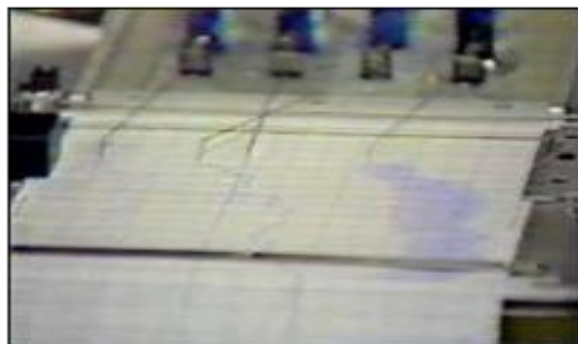
THE POLYGRAPH TEST IS THE MOST IMPORTANT TEST YOU WILL EVER TAKE! WHY WOULD YOU TAKE IT WITHOUT PREPARING FOR IT FIRST?

DGW Home page, Feb 17, 2003

http://www.polygraph.com/

always produce a "truthful" chart.

I have proved the polygraph is a sick joke! The trick is to make sure the joke is not on you! I have also proved I can teach you how to protect yourself.



I have helped tens of thousands of people, I train hundreds of people every month, and I am confident that if you follow my instructions, you will be able to produce a "truthful" chart. The manual is frequently updated with current information, (the last update was on JANUARY 30th, 2003), and teaches you how to control every tracing on the chart as pictured here. You can either "Sting" or be stung!

YOU ARE NOT JUST BUYING A MANUAL, YOU ARE BUYING A POLYGRAPH PROTECTION SYSTEM THAT INCLUDES FREE PERSONAL CONSULTATION FROM AN INTERNATIONALLY RECOGNIZED POLYGRAPH EXPERT.



During my tenure as a Detective Sergeant and licensed expert polygrapher with the Oklahoma City Police Department, I administered over 3,000 polygraph exams. And, thanks to a Detective friend of mine who administers the CVSA, I have now finished the entire training course on the CVSA.



How To Sting The Polygraph!

Sting The Polygraph!

Sting Publications

About Doug

Questions

Testimonials

Order

Media Clips

6/6/03

"How to Sting the Polygraph" is the first of its kind and the only one ever written by an expert police polygraphist, (all the other ones that are available today are just poor substitutes for the real thing). [Don't take a chance with a knock-off manual!](#)

My manual is short and easy to understand. It gets right to the point, and it is frequently updated with the most current information - and yes it works on the computerized polygraphs and the CVSA.

TO GET THE MANUAL ANYTIME 24/7, JUST CLICK ON "ORDER" AT THE TOP OF THE PAGE AND PRINT OFF A COPY.

I will personally consult with you and get you ready for the test. After you have read the manual over a few times, you may call me on my personal cell phone at 405/226-4856 for free consultation or e-mail me at doug@polygraph.com and I will personally and promptly answer all your e-mail questions. I am usually available from 9am to 9pm CST Monday thru Saturday, and from Noon to 9pm Sunday.

This is my job, it is my only job - I take your polygraph and CVSA tests very seriously and if you do too you should get my manual. I WILL help you get ready for the test.

Doug teaches the "Sting" technique to Diane Sawyer

"Doug Williams knows as much about the polygraph as anyone and he says they don't work."Diane Sawyer

On CBS "60 MINUTES", I proved that the polygraph is a sick joke. We hired 3 polygraphers to test people on a crime that never even happened, and all 3 polygraphers called truthful people liars - proving once again that the polygraph has a bias against a truthful person.

DGW home page 6/6/03

I have been on CBS 60 MINUTES, NBC NIGHTLY NEWS WITH TOM BROKAW, CBS NIGHTWATCH, CNN WORLD NEWS, CNN HEADLINE NEWS, CNN WEEKEND, NBC DATELINE, FOX NEWS, MSNBC NEWS, ABC NEWS WITH SAM DONALDSON, AND NBC INSIDE EDITION - the most recent of which was aired on May 21st 2002.

And I have been featured on many documentaries - the most recent of which was aired on April 20th 2003. They are FOX'S "EXPLORING THE UNKNOWN", "WHY WE LIE", ON THE DISCOVERY CHANNEL, "THE LYING GAME: DETECTING LIES", ON THE LEARNING CHANNEL, and one that is being produced by ASSOCIATED TELEVISION which will be aired later this year.

You may view some of these by clicking on MEDIA CLIPS at the top of this page.

I have said for a number of years that the polygraph is no more accurate than the toss of a coin, and the US Supreme Court recently agreed with me. When they refused to allow the polygraph test to be admitted into evidence they used those exact same words in describing it, "no more accurate than the toss of a coin". I am glad to have been upheld by the Supreme Court. (Supreme Court of the United States - No. 96-1133 - U.S. vs Edward G Scheffer - Decision March 31, 1998)

What that really means is that 50% of honest, truthful people who take a polygraph test will be called liars. Don't let that happen to you! Get the manual and learn how to protect yourself by learning how to



Testimonials

Sting The Polygraph!

Sting Publications

About Doug

Questions

Testimonials

Order

Home

These are just a few of the literally thousands of expressions of thanks I have recieved. The most recent was recieved on May 8th, 2000. All names have been removed for complete privacy

Doug, you are helping people everywhere with your publication and your willingness to help anyone who needs you. I was so nervous and scared about passing the polygraph, I had really no hope until I read your manual. I found websites that said the polygraph is nearly foolproof and all sorts of crap, but those were all lies. You are the one site that tells the real story and even offers a solution. I e-mailed you, called you 3 times, and you were always there to reassure me, and answer my questions. I was able to pass the test (despite my heart pounding a million miles per hour nearly the entire time!) and I want to thank you so much! If you publish this on your site, I want everyone to know Doug is for real, and that ANYONE can pass the polygraph. I was so afraid the polygrapher would be able to tell I was pulling something, but he had no clue whatsoever. Thanks Doug! (please leave my name off of this if you publish this on your site.

Doug:

I took a polygraph test about a theft from work. I told the truth but was called a liar. I demanded a re-test, and got on the net and found your site. I downloaded the manual at 3:00AM, studied it for about two hours and took the test this morning. This same polygrapher now says his computer showed a probablility of deception at .013% - he said that was almost perfect. He was amazed and seemed confused. I wasn't, I was almost laughing. Thanks for sharing your wisdom. You sure saved me.

First, I received this e-mail...

Doug:

I'm going to take the test in a few hours. I'm freaking out about this. I just can't believe it's as easy as your manual states. I got it last night and read it three times. I'm worried about breathing reactions. I'm afraid they will call me on my plan. I mean, they know about this too, right? I'm afraid even the the truth will show lies for me. I will be so nervous about nothing really. Well, I'm leaving in about 45 mins so I probably won't hear from you but I'll let you know how it went tonight. Scared as Hell,

To which I responded immediately.....

Basically telling him that the manual works, and not to worry because I don't teach so called "countermeasures", I simply teach people how to produce a perfect "truthful" chart.

After the test, this e-mail was received.....

It works!!! Enough said. Plain and simple. It works!!!



Douglas Gene Williams

- USAF (Jan 67 - May 69): White House Situation Room.
TS/SCI/President's Eyes Only clearances
- BS 1972 in Police Science from Oklahoma City University
- Oklahoma City PD, 1969 - 1979 (Det. Sgt.)
- 1972 graduate of Dick Arther's NTC for Lie Detection
- Conducted over 6,000 exams, 1972 - 1979
 - About 1,000 per year, or 3 - 4 per day
 - 60% pre-employment, 40% criminal/internal affairs
- Has testified before congressional committees, consulted with OTA, lectured at colleges & universities, and appeared frequently on radio & TV

Dick Arther's influence


- Behavior is highly indicative of guilt or innocence.
- A major value of the polygraph is to elicit pretest information and post-test confessions. Go for pretest confessions when possible.
- Inclusive CQs (“Have you ever....”) [Backster invented exclusive controls]
- Respiration is the most sensitive and most accurate channel.
- Cardio is second most important. GSR is unimportant, even irrelevant.
- Evaluate charts holistically; usually no need to evaluate GSR at all.
[Backster invented numerical scoring; Arther doesn't teach it].
- CMs are detectable because they cause jerky tracings
(e.g. movement artifacts in cardio).

Doug's motivation

- What it is not:
 - Financial. Often gives his manual away.
 - Fame.
- It is likely a combination of things that has evolved:
 - Initially two factors:
 - It doesn't work, except to get confession; 95% interrogation tool
 - Revulsion at how the polygraph was being misused for pre-employment screening ["You're not calling enough people queers!"]
 - Later (in last decade): how many false positives it has, and how many people are being damaged by that
- Now is a Holy Crusade against polygraph
 - It is unscientific, doesn't really work except as psychological club
 - It is biased against the truthful, innocent person
 - It is coercive, invades privacy, is un-American
- Please *DON'T* E-mail him about how terrible he is!

CM training figures

- Published, started selling hard copy of “*Sting*” manual in May, 1979
- Between 1979 and 1996 has lectured on CMs to about 30,000 examinees to “take control” of their exam, to “con the con man”
 - 1979 - 1996 Gave CM seminars for various groups
 - Largest was in about 1985 when lectured and demonstrated CM techniques at at Union meeting for 5,000 sworn LE officers in Harlington TX
 - For 6 years lived in back seat of car while traveling around US campaigning for EPPA, speaking on radio talk shows, telling how to beat polygraph. Spent about \$30,000 of his own money to do this.
- Since March, 1996, has been on Internet and distributed about 10,000 copies of his manual, often for free. Only now is profitable.
- Receives 10 to 15 calls per day, 30 to 50 e-mails per day seeking CM advice



*If you were to train someone in
CMs, what would you tell them?*

What the the Internet teaches

- Ethics
 - The polygraph is pseudoscientific claptrap. It doesn't work
 - It's not enough to tell the truth to pass; you must help things along
 - Examiners are con men; you must con the con man
- Familiarization, what to expect. Seeks to demythologize polygraph, hence reduce fear of RQs
- Teach behavioral CMs:
 - Be friendly, don't antagonize examiner
 - Look, behave innocently
- Create CQ reactions
 - Control your breathing: React on CQs, breathe normally on RQs
 - Anal sphincter; bite tongue; toes to floor
- Post-test counter-interrogation strategy
 - Post-test accusations are a ploy; don't fall for it.
 - Never, ever confess

Doug Williams



- Stresses that everybody is likely to fail polygraph unless they protect themselves against it by manipulating results.
- Polygraph is used solely to intimidate, coerce information from naïve people.

Pretest behavioral CMs



- Always appear cooperative, act sincere, use plenty of eye contact, stay alert. Never exhibit any hostility, arrogance, or fear.
- Look the examiner in the eyes when you talk to him. If you can't do that, focus on the bridge of his nose, right between his eyes.
- If asked about reading up on how to beat the polygraph, reply innocently, “Oh, I didn't think it could be beaten. Can it?”

Stim test



- Don't try to subvert it. Congratulate him on his expertise. Tell him you are now more confident than ever the test will show you are telling the truth.
- Optional: Manipulate your reaction to the selected number.
 - It shows him you are a good, reactive subject.
 - He will more readily accept your manipulated reactions on the main test.

Practice tests

- Practice the three different type of tests beforehand. Have a friend read the questions to you or record them on a tape recorder. Answer yes or no, while at the same time manipulating or controlling your reactions. PRACTICE MAKES PERFECT, SO PRACTICE!!!!!!!!!!
 - CIA CQ test re security leak
 - RI pre-employment screening test
 - Periodic exam

Evolution of Doug's chart CMs

- 1979 - Do one resp pattern & sphincter to one CQ only.
- Next - Do one resp & sphincter on all CQs.
- Then - Do all 5 resp patterns & sphincter on all CQs
- Oct 2001: 1st chart: Do any resp pattern & sphincter to all CQs
2nd chart: Only sphincter, only on one CQ
3rd chart: Do nothing.
 - He changes his advice based on feedback from those who are caught.
 - Don't tell your subjects how you detected their CMs!!!
 - Keep abreast of his current advice!!

DGW: Counter-interrogation techniques

- “Remember, the whole test is nothing but an interrogation. The sole purpose of the polygraph test is to get incriminating information from the subject. The polygrapher ... relies on his ability to con you or scare you.”
- Williams then lists 147 questions asked during the pretest of a sample police pre-employment screening exam
- “The polygrapher...may also tell you that passing the test is more important than any admissions you make, and that it will be to your advantage to tell the complete truth in order to pass the exam. He will exhort you to ‘get everything off your mind, discuss anything that is worrying you, so that nothing interferes with your polygraph test.’ Do not be deceived.”

DGW: Counter-interrogation techniques



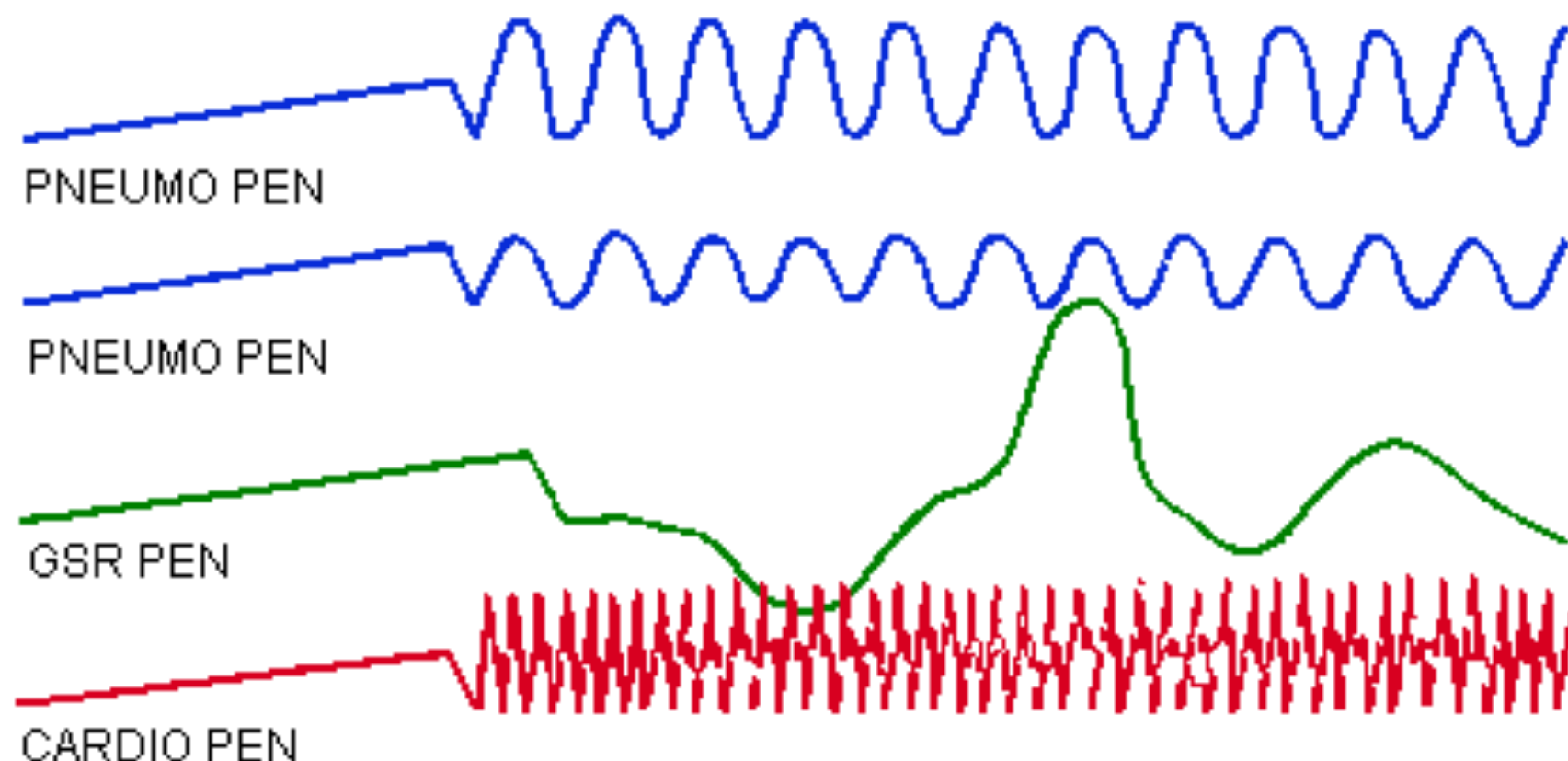
- If asked what question you remember out of them all, always say you remember the CQs, because that indicates to him it troubles you the most. Never indicate by words or actions that the relevant questions caused you any trouble at all.
- If asked why you reacted to a CQ, make up some reason like, “I remember the look in my daddy’s eyes when he found out I had stolen the harmonica.”
- Never ask how you did on the test. Thank him for his time, and leave the room.

DGW: CQ types



- Known or probable lie
- Irrelevant
- Embarrassing personal question (rare)

EXHIBIT A



Pneumo Pens - record your breathing or respiration. When you inhale, the pens go up. When you exhale, the pens go down.

GSR Pen - records increase or decrease in your sweat activity or perspiration.

Cardio Pen - traces heart beat and records changes in your blood pressure and pulse rate.

EXHIBIT B

A Classic Lying Reaction

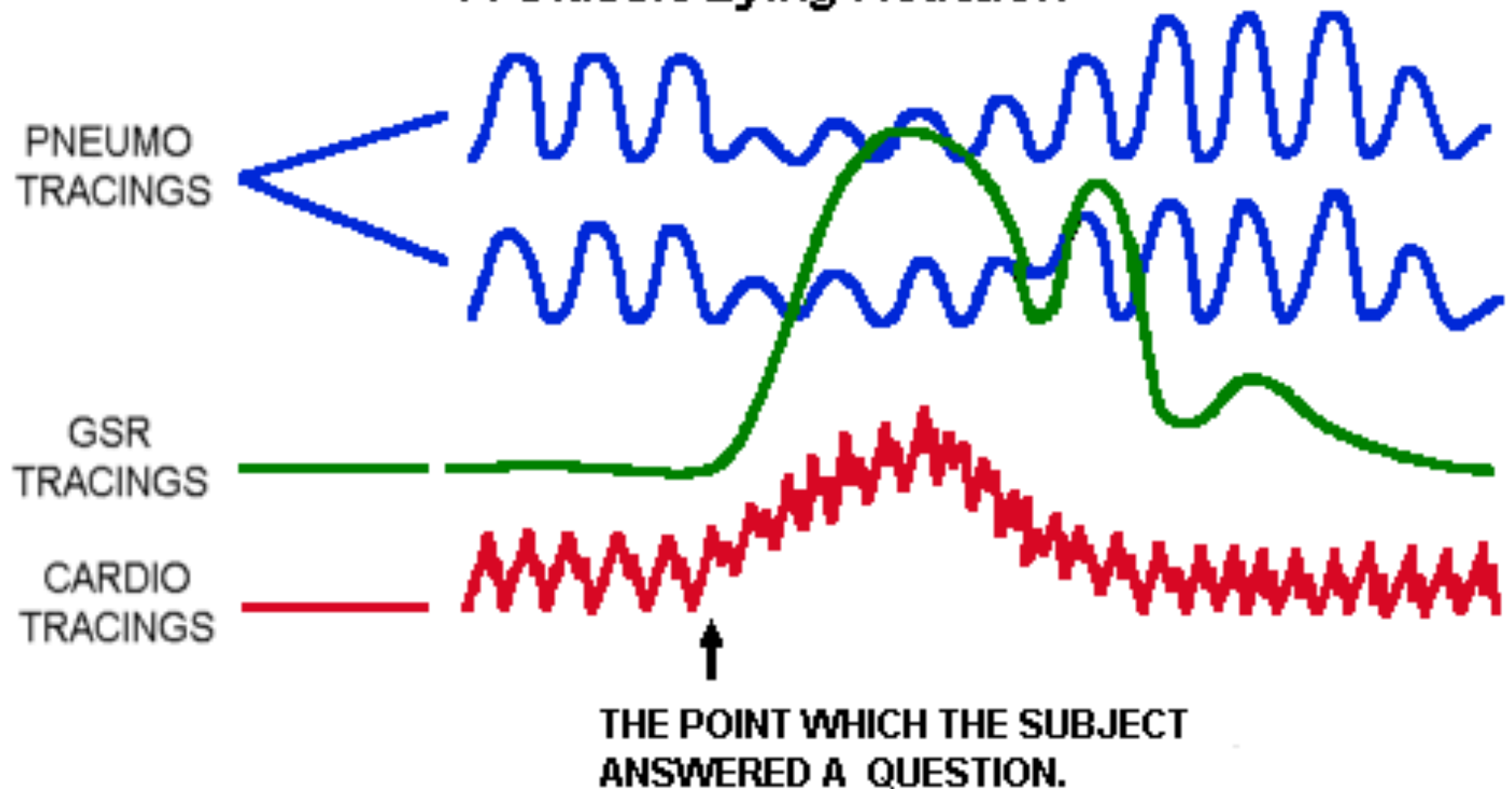
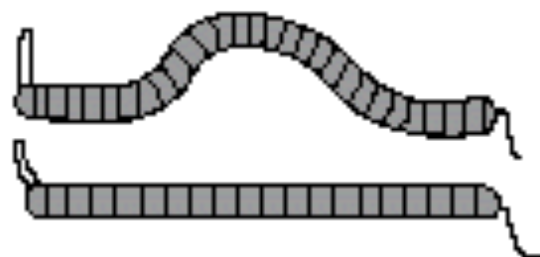
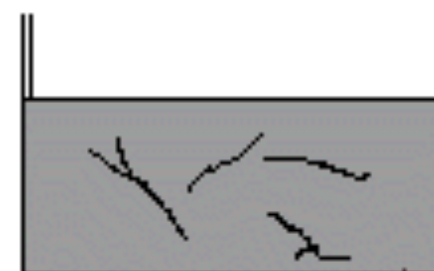


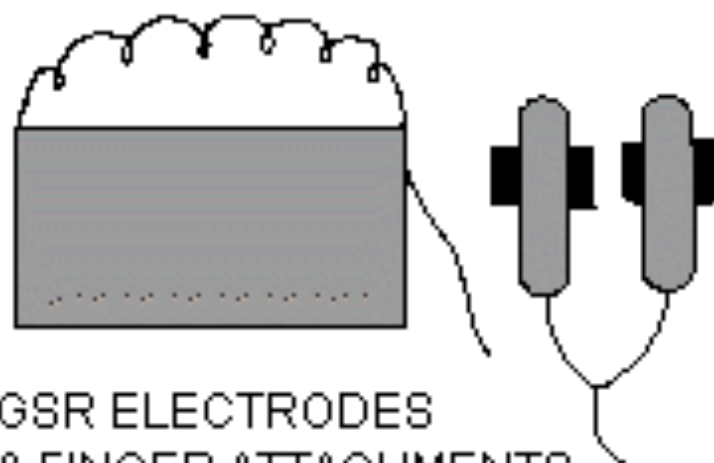
EXHIBIT C



EXPANDABLE PNEUMOGRAPH TUBES



INFLATABLE
CARDIO
CUFF



GSR ELECTRODES
PALM & FINGER ATTACHMENTS

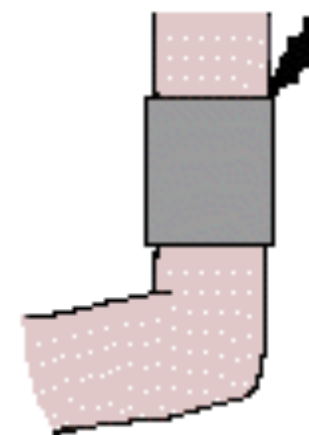


EXHIBIT D



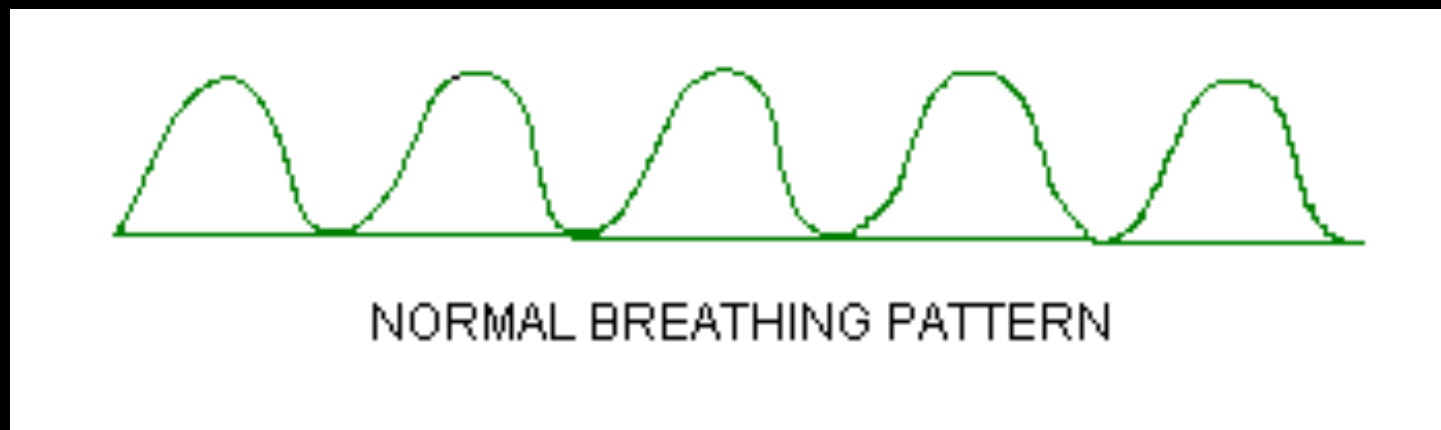
CONTROLLED BREATHING PATTERN



NORMAL BREATHING PATTERN



The polygrapher is constantly alert of [sic] a person who is controlling his breathing. (See Exhibit D). You will notice the difference between the normal and controlled breathing pattern. The controlled breather shows his attempt to control by consciously thinking of his breathing only to the point that he inhales and exhales, he breathes in and immediately breathes out, showing a jagged edged tracing.



In order to covertly control your breathing, you must duplicate the normal breathing pattern shown in Exhibit D. Your breathing should appear even and restful. You have a pattern for a normal breathing if you simply breathe as though you are asleep and you are not aware of your breathing. Try to inhale and exhale the same amount of air each time in order to maintain the even baseline. This normal breathing pattern is what the polygrapher would expect to see from a cooperative, truthful person. Remember: (1) your breathing is recorded on the polygraph chart by the pneumo pens, (2) you must avoid a jagged edged breathing pattern, and (3) breathe as though you are breathing in a normal relaxed matter. Practice duplicating the normal breathing pattern until you can control your breathing without being obvious.

EXHIBIT E

PNEUMO REACTIONS

FIGURE NO. 1



FIGURE NO. 2



FIGURE NO. 3



FIGURE NO. 4



FIGURE NO. 5



Exhibit E shows the five common pneumo reactions. You must memorize at least one of these. I have listed them in the order in which they are most commonly seen, so figure 1 is the best.

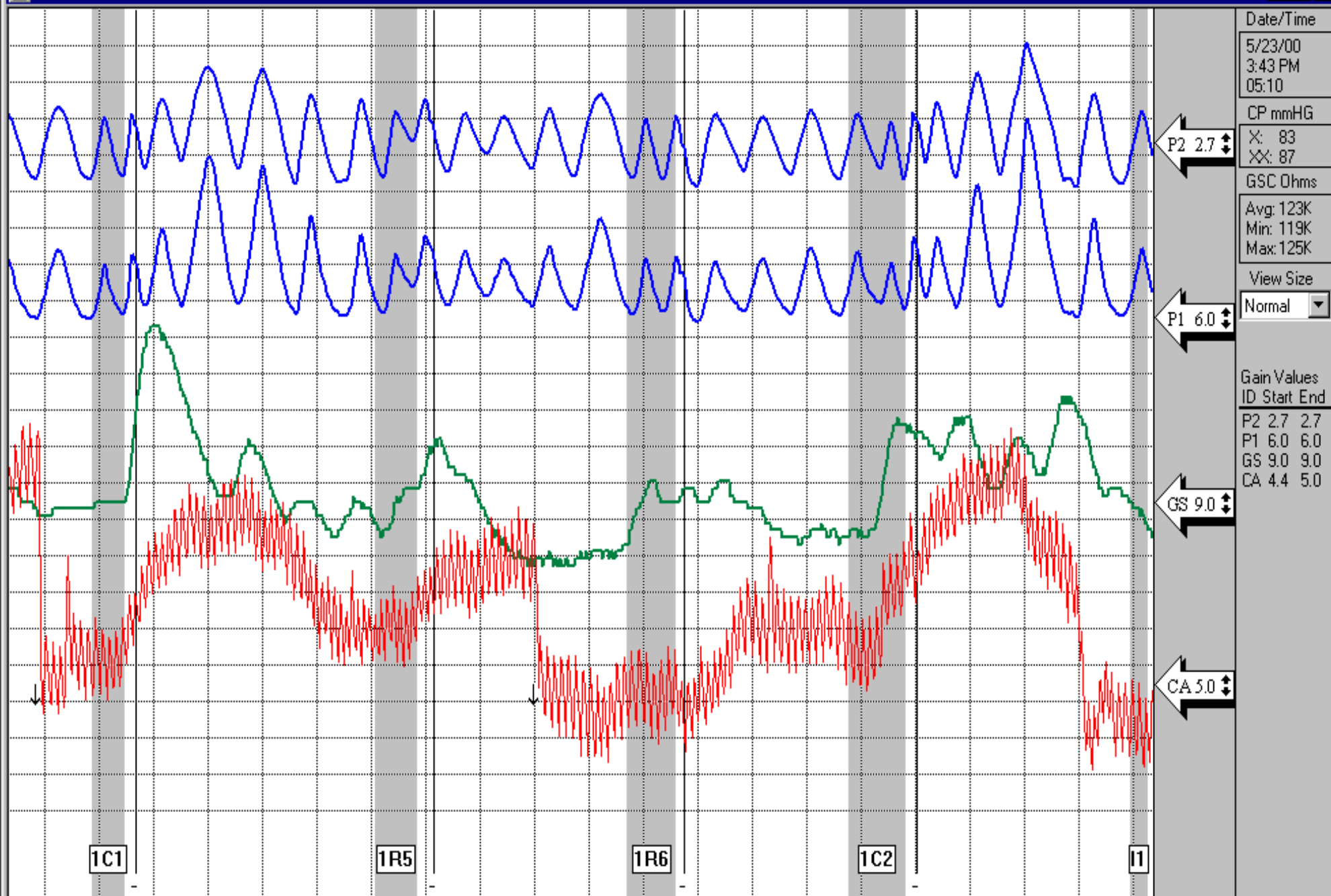
EXHIBIT E

PNEUMO REACTIONS

FIGURE NO. 1



Simply breathe by the numbers: (1) inhale about 1/3rd the normal amount of air, hold slightly, and exhale slowly, showing no jagged edges; (2) inhale again, this time inhaling about 2/3rds the normal amount of air, exhale slowly; (3) inhale and exhale the normal amount of air; (4) inhale again, this time inhaling just a little more air than normal, and exhale slowly. You now take two deep breaths, and resume your normal breathing.

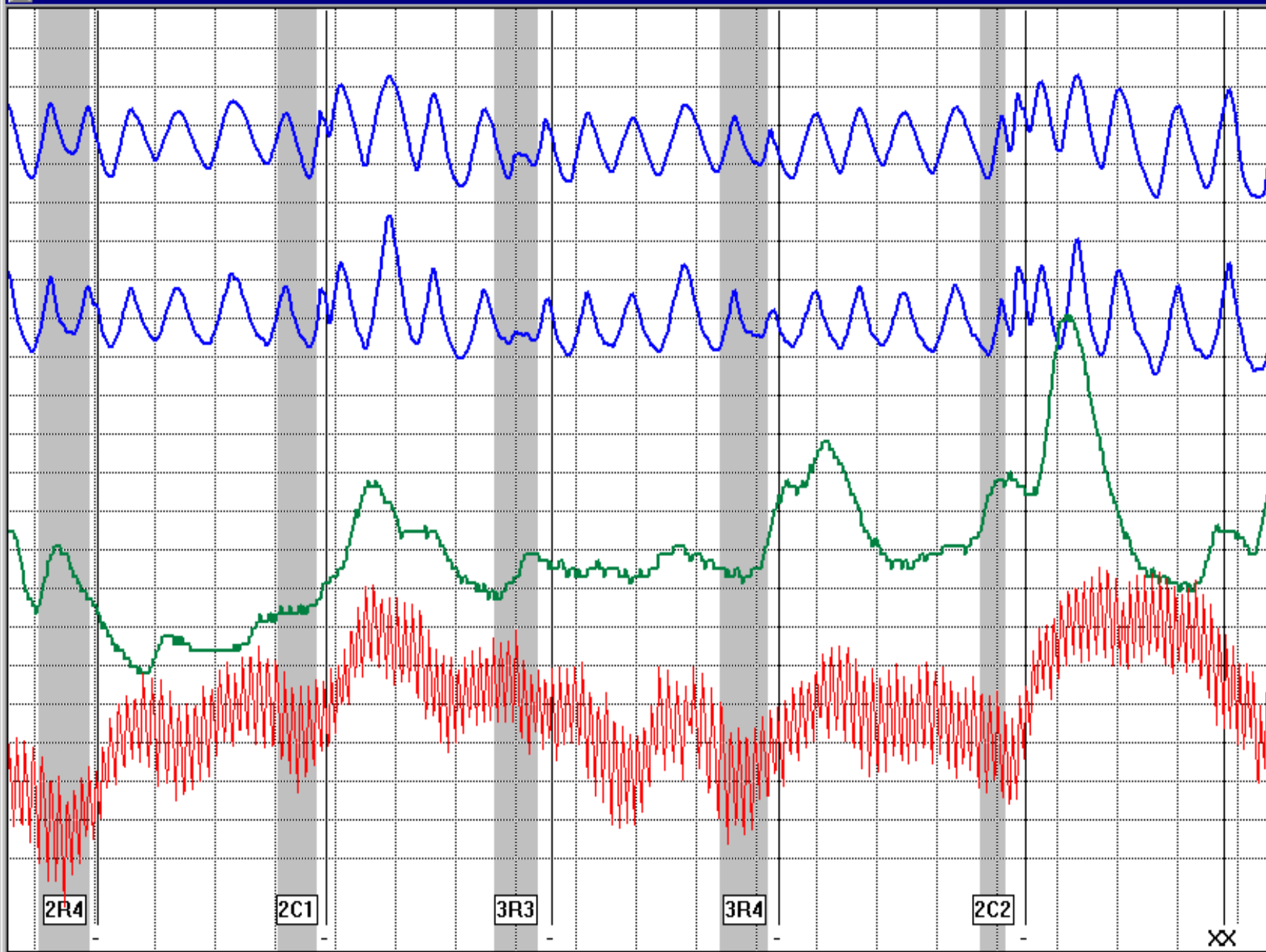


1C2(N) C 323.0 GIVEN THE OPPORTUNITY, IS THERE SOMETHING IN YOUR PAST PERSONAL LIFE YOU WOULD CHANGE IF YOU COULD?

FIGURE NO. 2



The pneumo reaction in figure 2 is manipulated by inhaling more than you exhale each time in a series of five small breaths until, with your last breath, you fill your lungs with slightly more than the normal amount of air, just like you are frightened and gasping for breath. You then take two deep breaths and resume normal breathing.



Date/Time
5/23/00
3:26 PM
04:24

CP mmHG
X: 85
XX: 90

GSC Ohms
Avg: 131K
Min: 115K
Max: 141K

View Size
Normal

Gain Values
ID Start End
P2 2.7 2.7
P1 6.0 6.0
GS 9.0 9.0
CA 4.4 4.4

P2 2.7

P1 6.0

GS 9.0

CA 4.4

2C2 (N) C 311.0 DYE LOSE YOUR TEMPER?

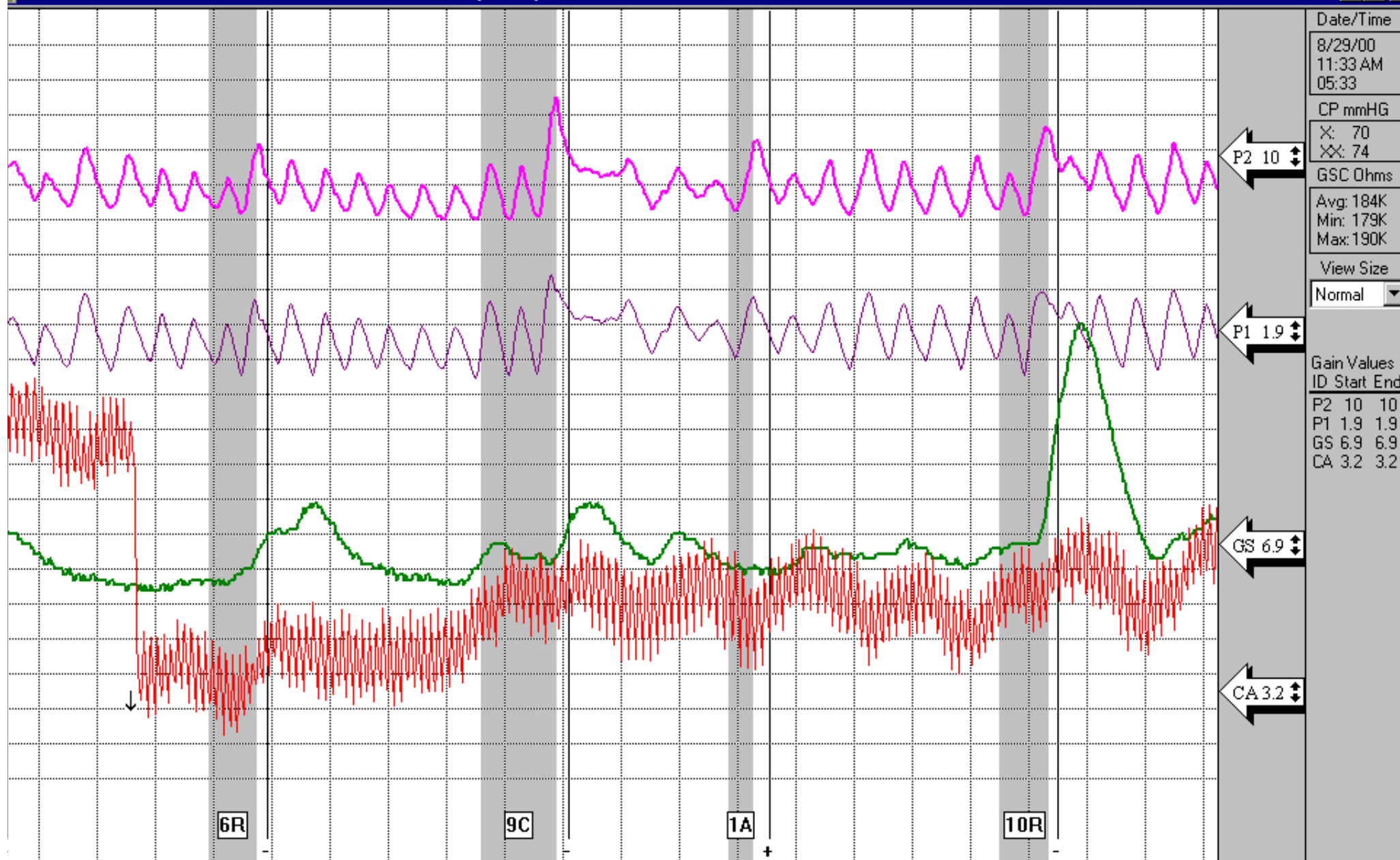
1C1 1R3 1R4 1C2 2R3 2R4 2C1 3R3 3R4 2C2

FIGURE NO. 3



For those of you who feel inadequate to the task of duplicating a pneumo reaction, the polygraph profession has thoughtfully provided what is known in the trade as a breathing block. Pictured in figure 3, this reaction is manipulated by simply holding your breath for about seven seconds, a definite no-brainer. Just hold your breath for a few seconds and then resume normal breathing. This is the easiest, but it is also the least desirable.

USSS PE classic DGW unconfirmed - Exam 2 - Chart 3 (MGQT)

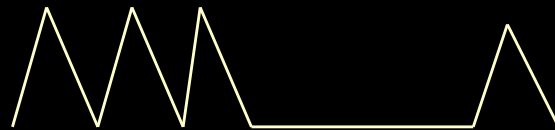


9C (N) Before applying w/the SS, DYE betray the confidence of someone who trusted you?

Physical CMs: Resp

- Apnea: Genuine vs. CM (hypothesized)

Genuine:



Deliberate:

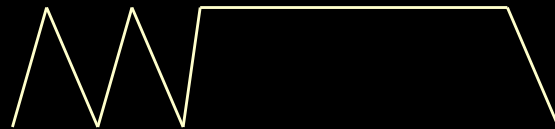
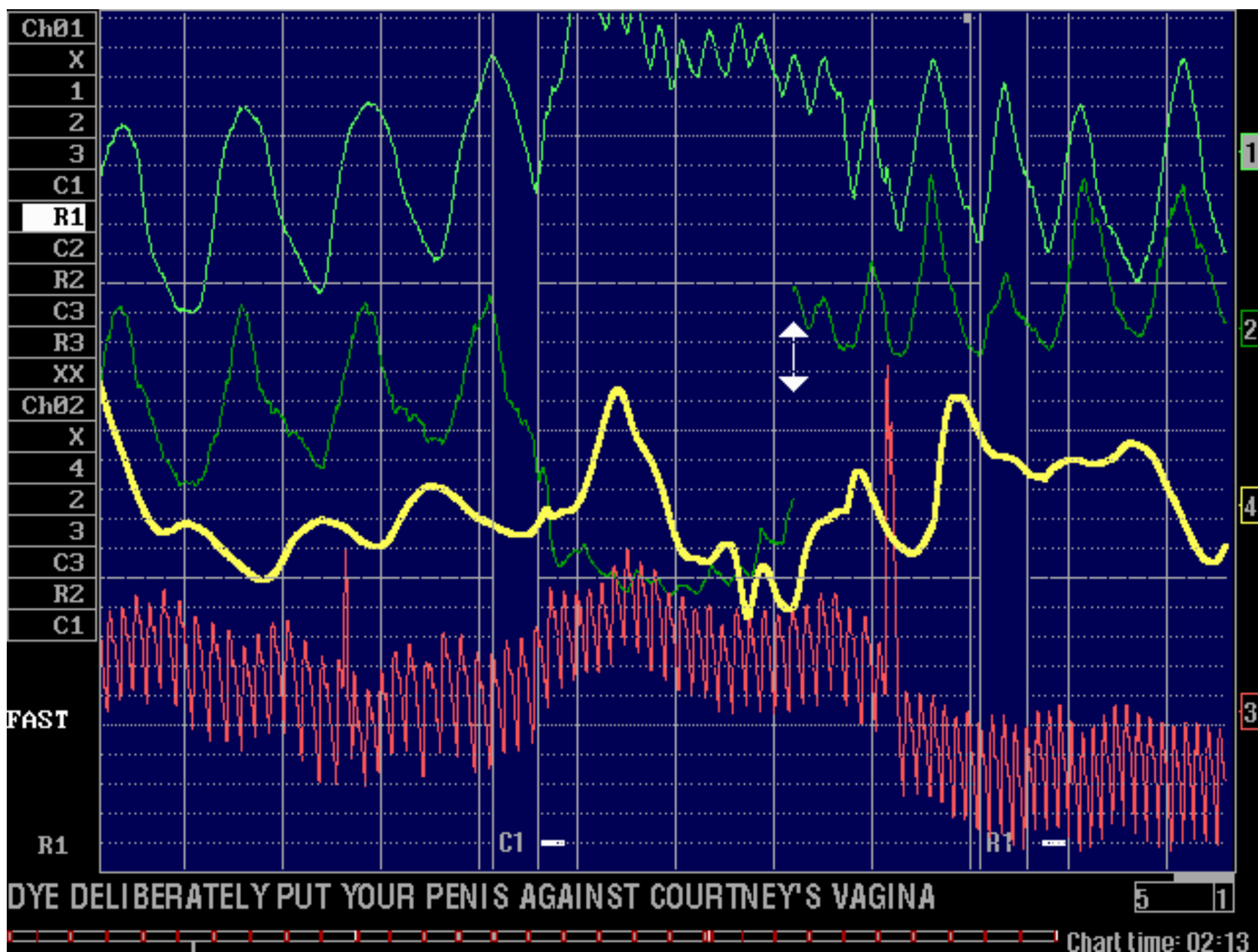
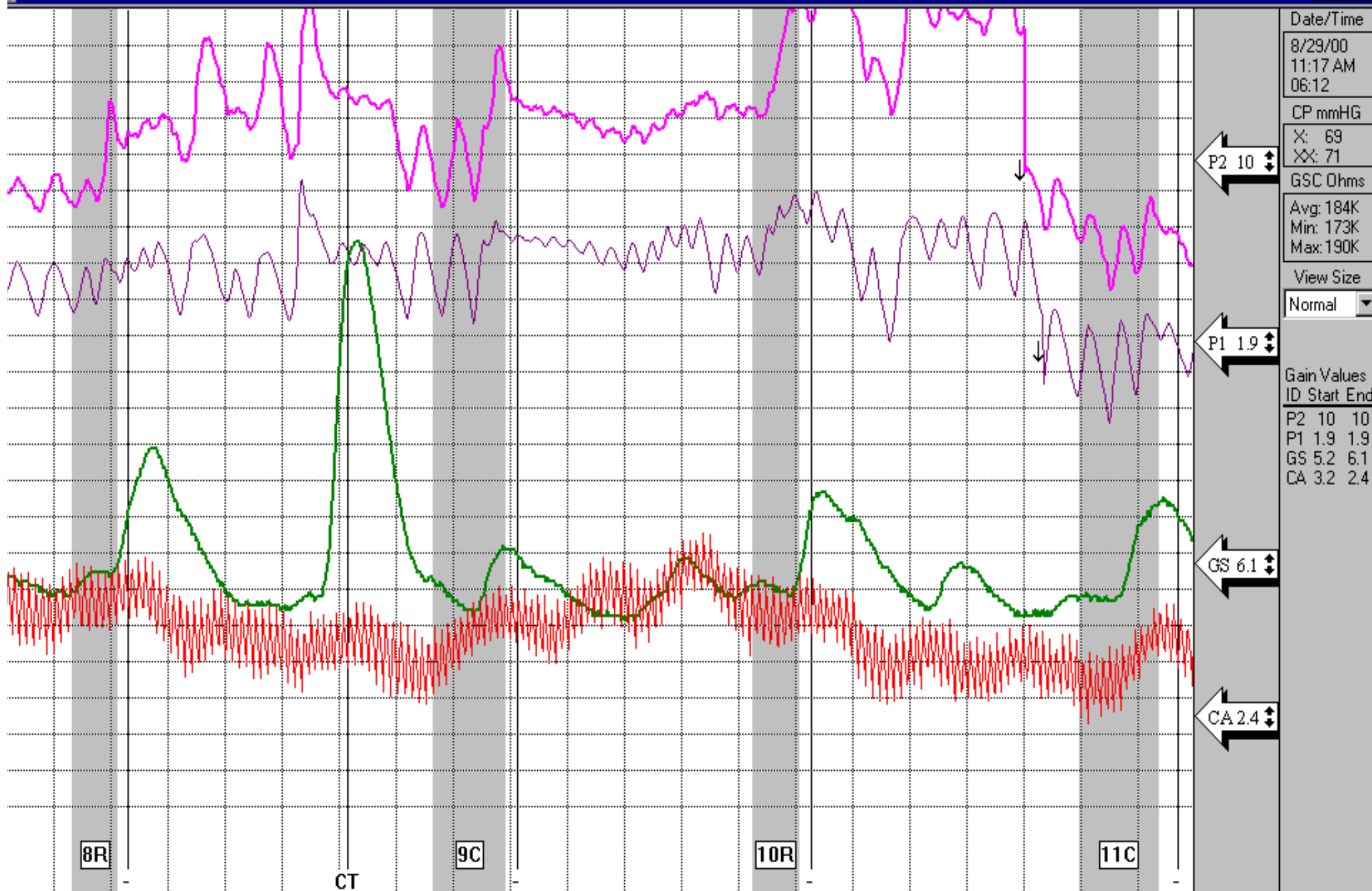


FIGURE NO. 4



Figure 4 illustrates still another pneumo reaction which is manipulated by simply inhaling a normal amount of air and then taking a series of five to seven shallow breaths with your lungs partially full.



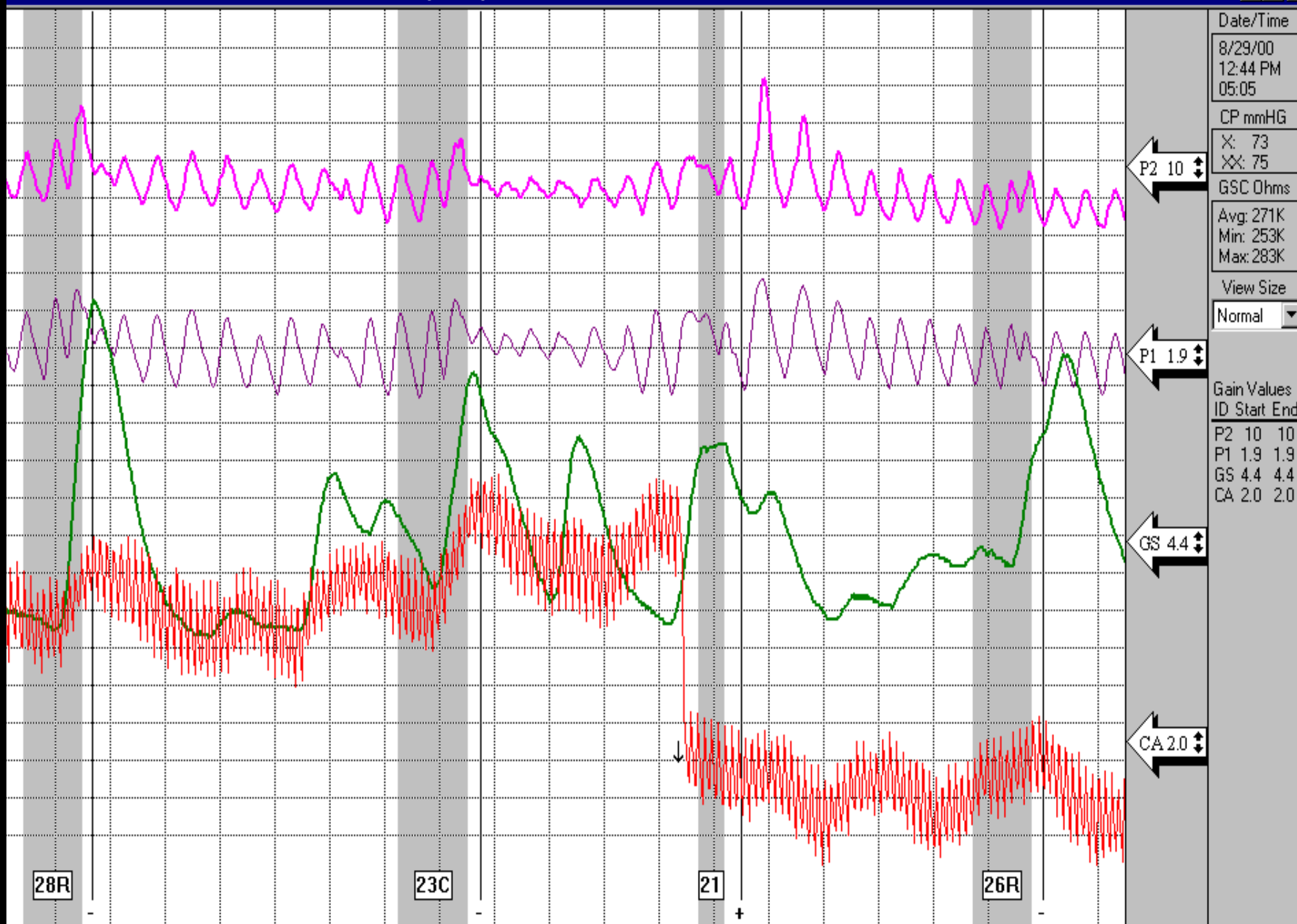


9C (N) Before applying w/the SS, DYE betray the confidence of someone who trusted you?

FIGURE NO. 5



Figure 5 is a variation of figure 4 except that you take five to seven shallow breaths with your lungs almost empty.

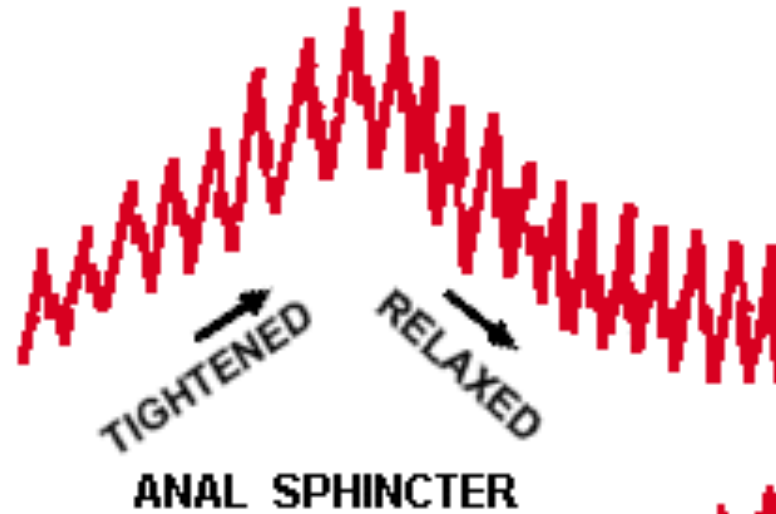


(N) Before submitting your application, DYE lie to get out of trouble or cover something up?

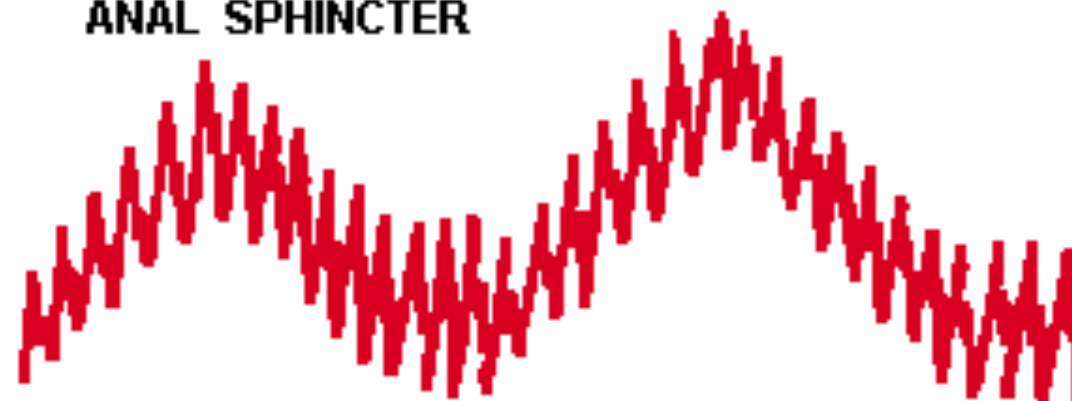
EXHIBIT F

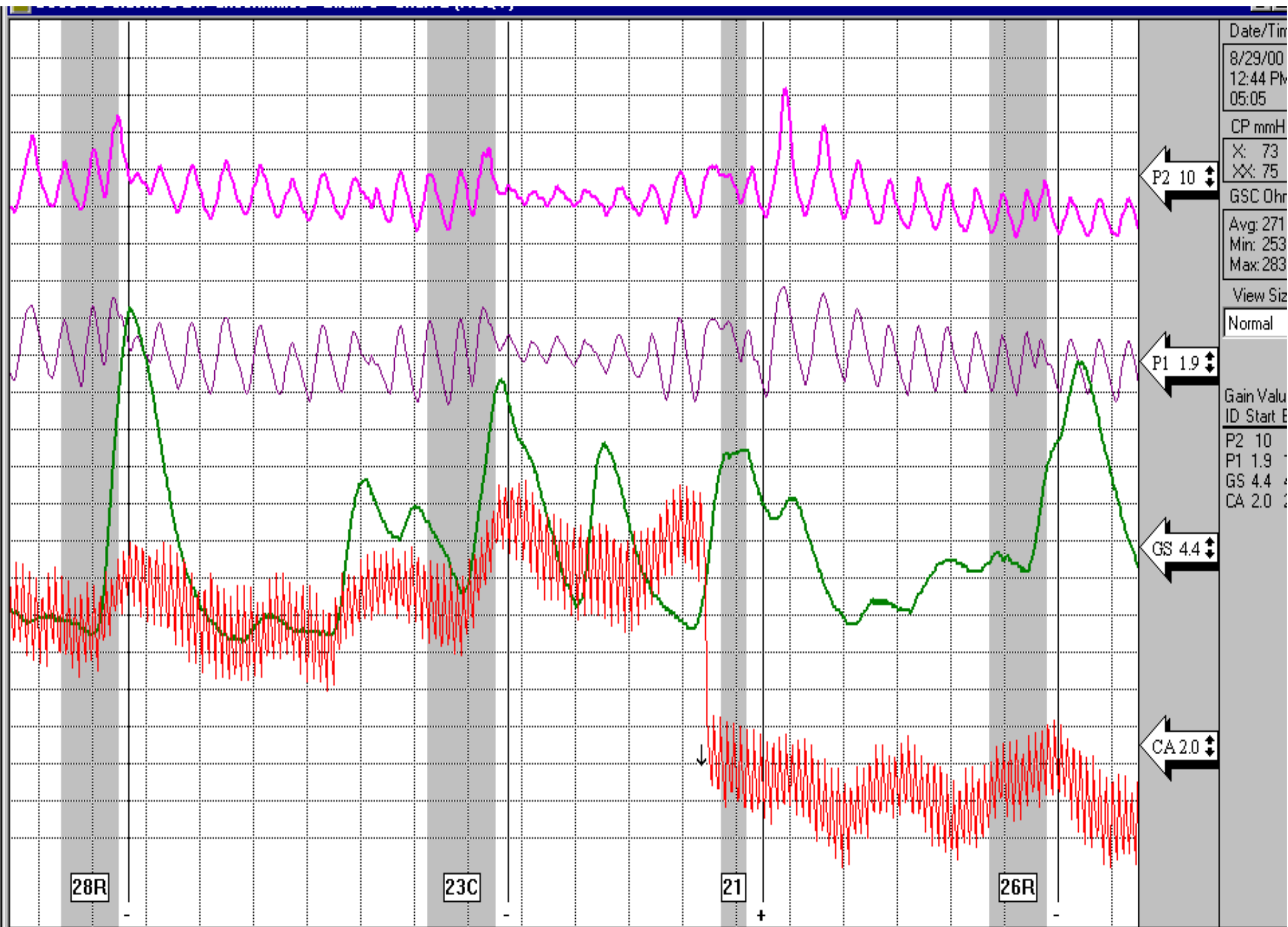
CARDIO REACTIONS

CARDIO RISE

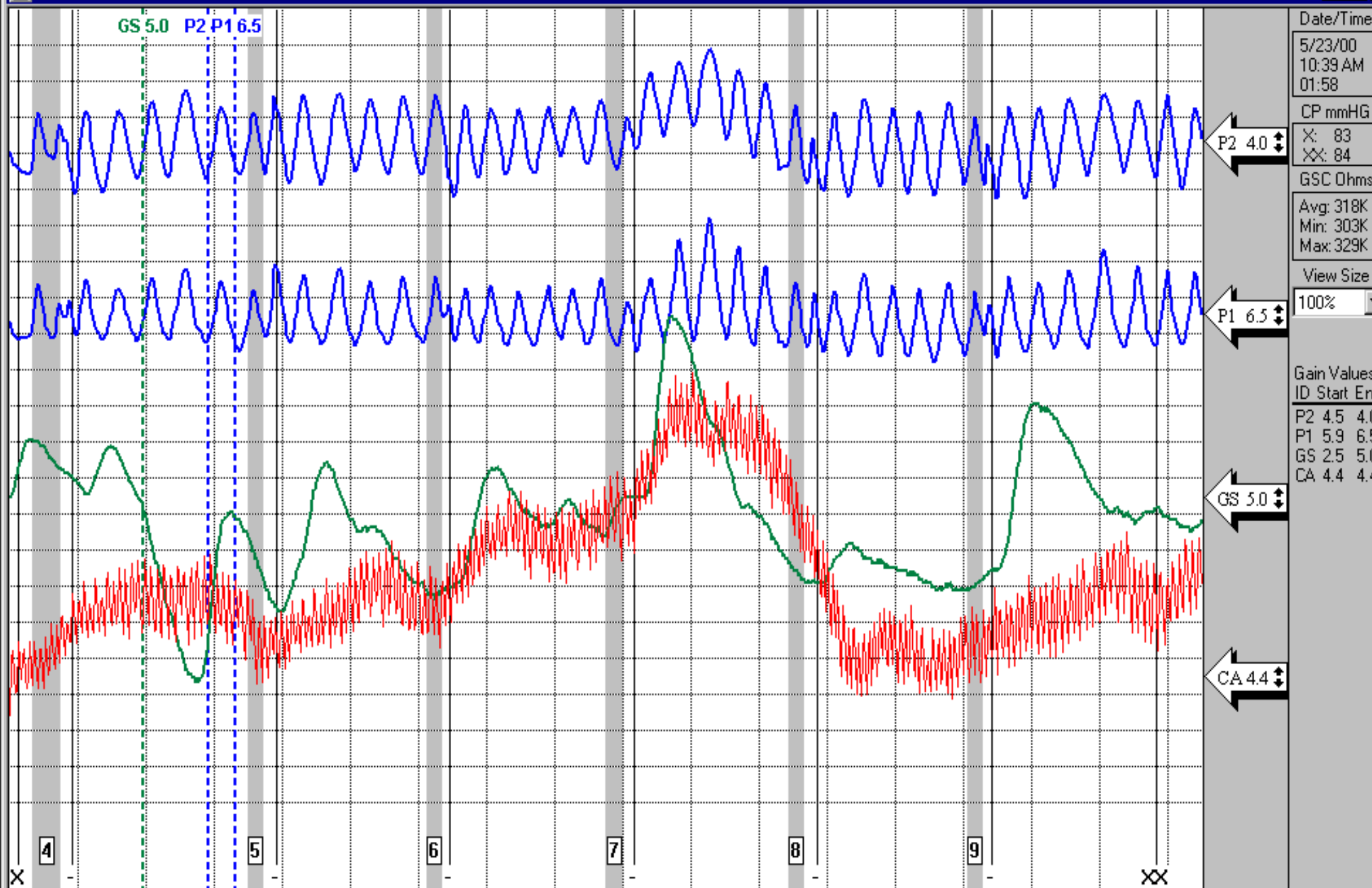


DOUBLE CARDIO
RISE



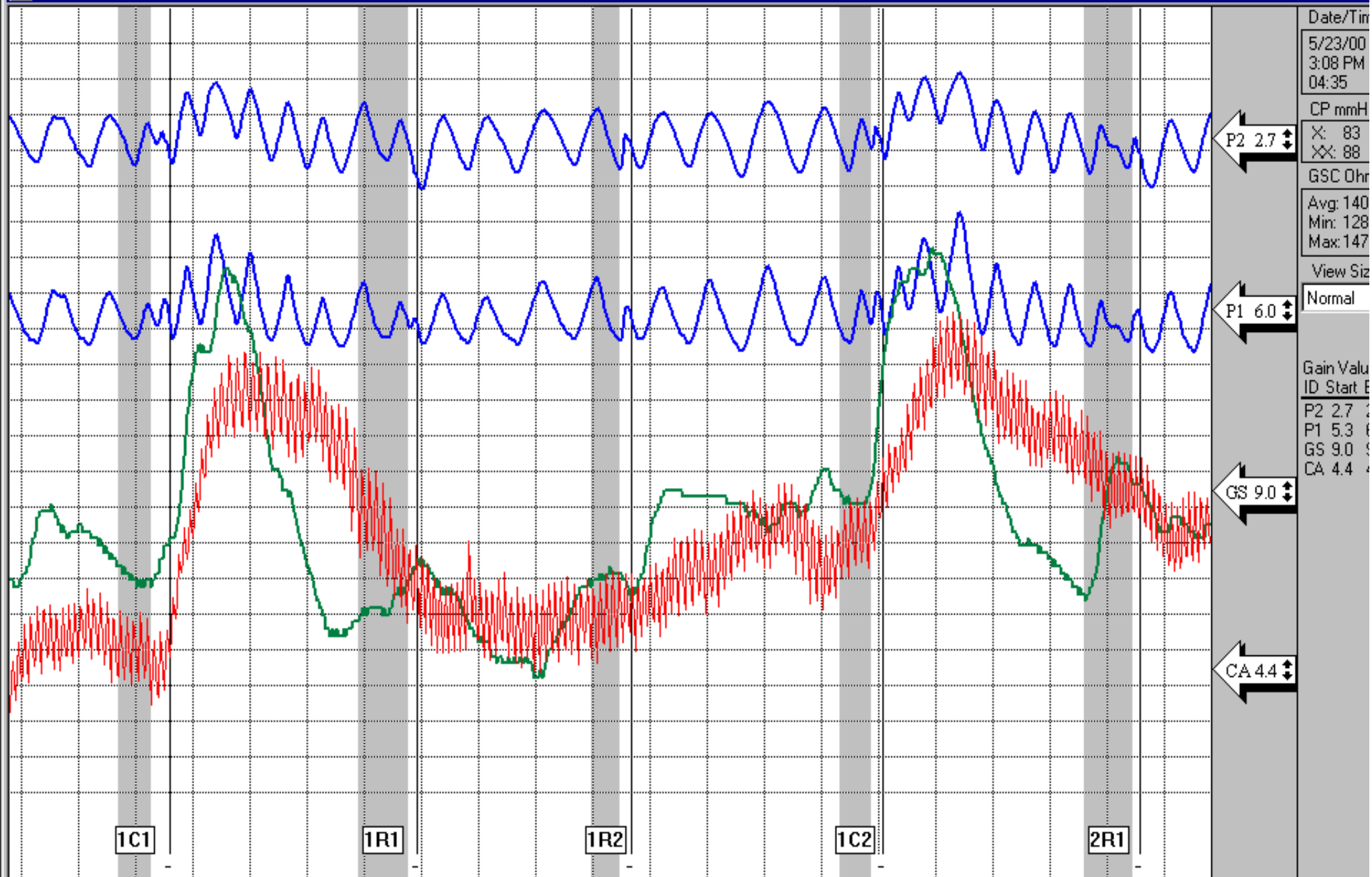


23C (N) Before submitting your application, DYE lie to get out of trouble or cover something up?



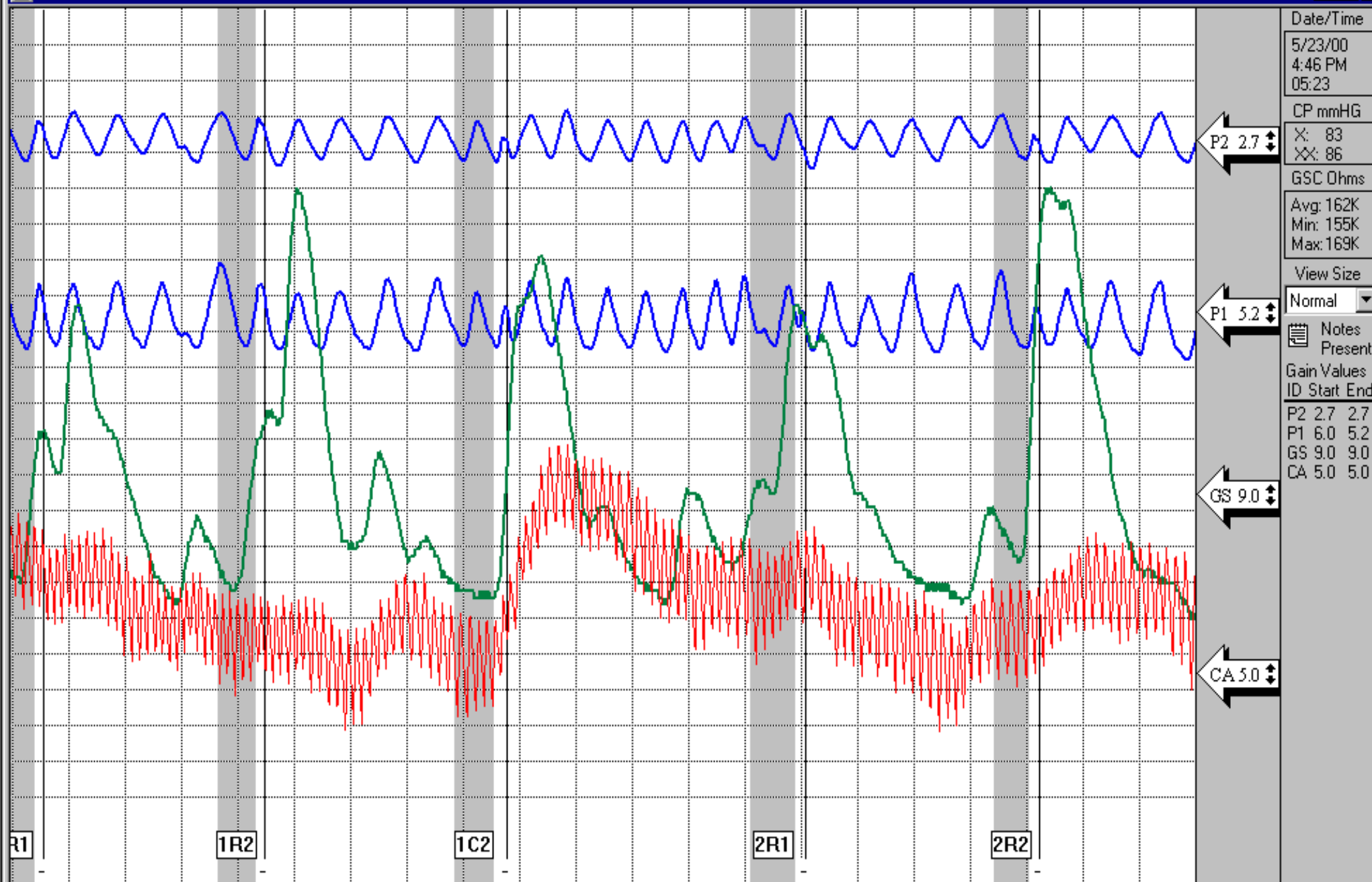
7 (N) DID YOU WRITE THE NUMBER 7?

4 5 6 7 8 9



No Question Selected.

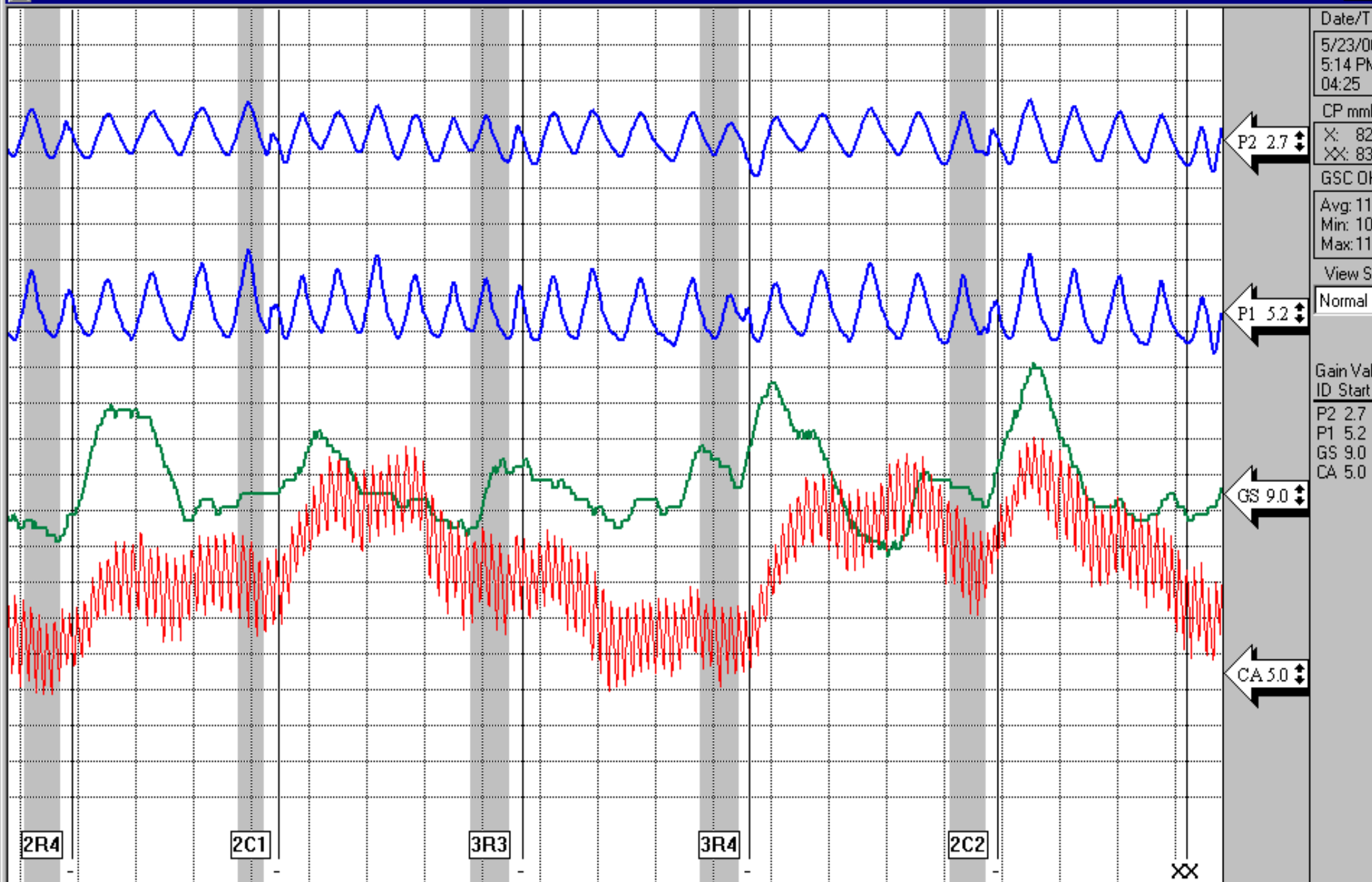
← I1 I2 SR 1C1 1R1 1R2 1C2 2R1 2R2 2C1 →



1C2 (N) C 308.0 DID YOU EVER SAY SOMETHING IN ANGER, THAT YOU LATER REGRETTED?

Law of Inequalities

- Whenever you see a reaction on a *control question* that's "too good to be true," it's probably artificial.
- Whenever you see a reaction on a *relevant question* that's "too good to be true," it's probably genuine.
- Therefore, *whenever* you see a reaction that's "too good to be true," probe!
 - Never tell them it's "too good to be true."
 - Don't show them the charts (don't give any biofeedback)
 - Never explain what aroused your suspicions.



3R4 (N) R 24.24 HY KNOWINGLY GIVEN CLASSIFIED MATERIAL TO ANY UNCLEAR PERSON ?

1C1 1R3 1R4 1C2 2R3 2R4 2C1 3R3 3R4 2C2

The first big Internet CM case

Peter S. London

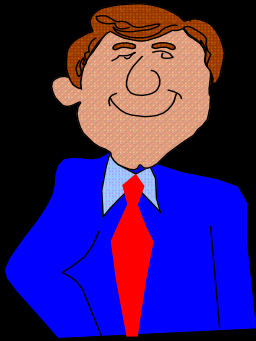
February - June 1997

Case Study #2



London, Peter S. & Krapohl, Donald J.
(1999). *Polygraph*, 28 (2), 143-148.

Initial Case Facts



- Applied for position with a sensitive Govt. agency.
- Highly desired because of his education & scientific/technical experience.
- Nothing from his background investigation prepared the examiners to expect CMs, which were:
 - Sophisticated, multi-layered, and involved outside coaching.
- After confessing to other issues, he laid out his CM methodology, providing an educational opportunity for the polygraph profession.

First Session

Pretest interview

- 42 year old male
- Very likable
- Intelligent
- Well educated: Ph.D.
- Global knowledge
- Confident
- Cooperative
- Good verbal & nonverbal behavior

The pretest interview took longer than usual because the subject talked so much about his background in defense technology and counterintelligence matters.

The examiner was kept busy making notes and asking questions, as the subject went from topic to topic.

The subject later confessed that this had been a CM strategy on his part. Overload the examiner with so much detailed info that he managed control the direction of the pretest and to avoid areas he wished to conceal.

End of First Session



- Information obtained
 - Weapons technology
 - Attempting to sell technology to two foreign intelligence services
- There were unresolved reactions on the charts

Second Session

the next day



- Re-examined by the same examiner.
- Much of the same information discussed.
- Conducted a breakdown on concealing contact with a foreign intelligence service.
- There continued to be unexplained reactions on the charts

Third Session - 4 Months Later

Objectives

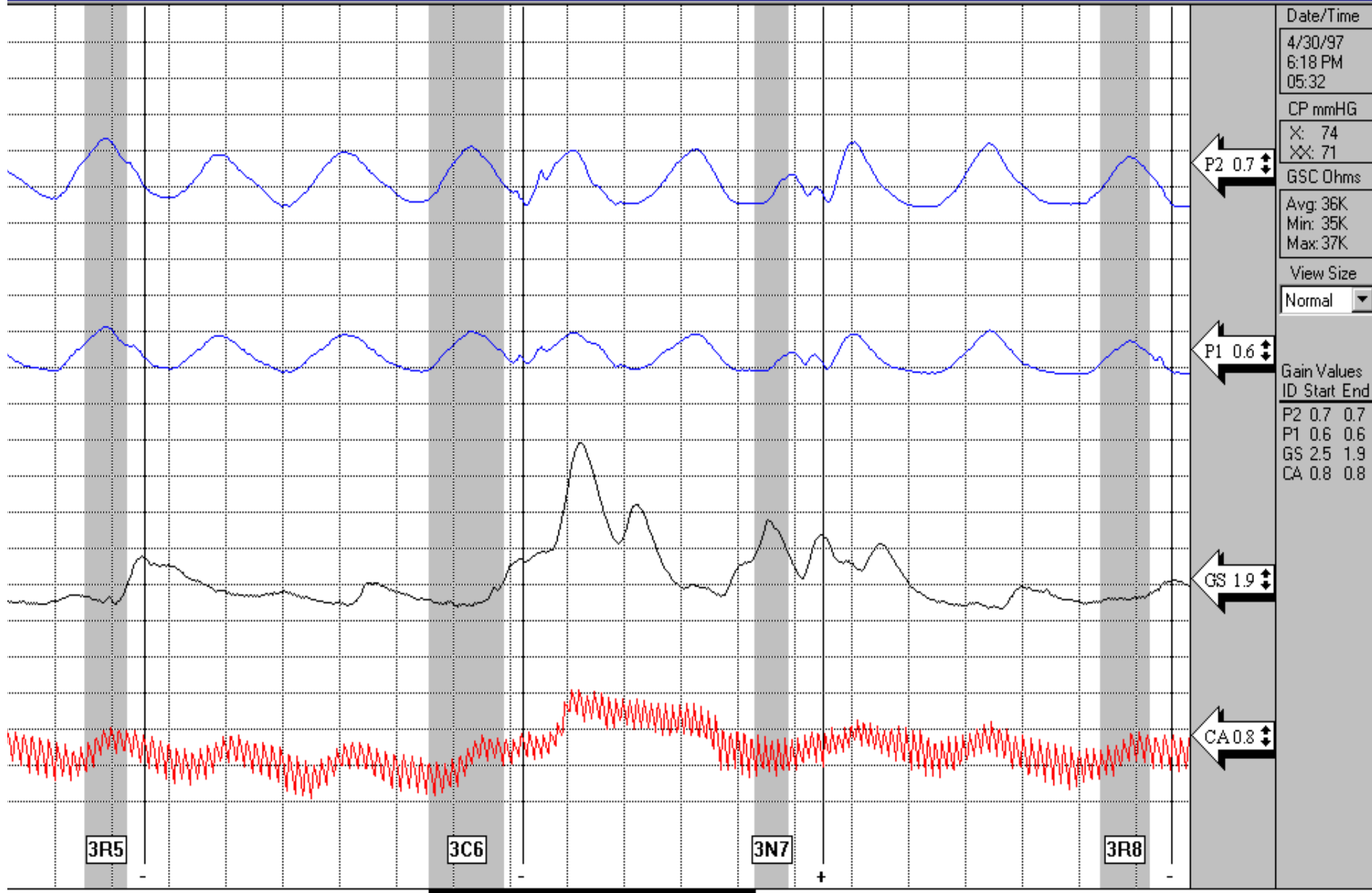


- A different examiner conducted test: Peter London
- Resolve foreign intelligence contacts
- Explore potential penetration of U.S. Intelligence
- Explore selling of weapons technology

Pretest



- As a military officer, he had served as a General's aide.
 - At meetings, he assessed participants' verbal, nonverbal behavior, and briefed the general on whom he believed to be truthful or not.
 - London and John sized each other up, decided each knew a lot.
- John admitted his PhD was honorary, not earned; and awarded by an organization, not a university. He has since been deliberately misrepresenting his academic background.
- John also admitted manipulating the previous examiner by information overflow.
- London attached the sensors and ran the first chart.



Date/Time
4/30/97
6:18 PM
05:32

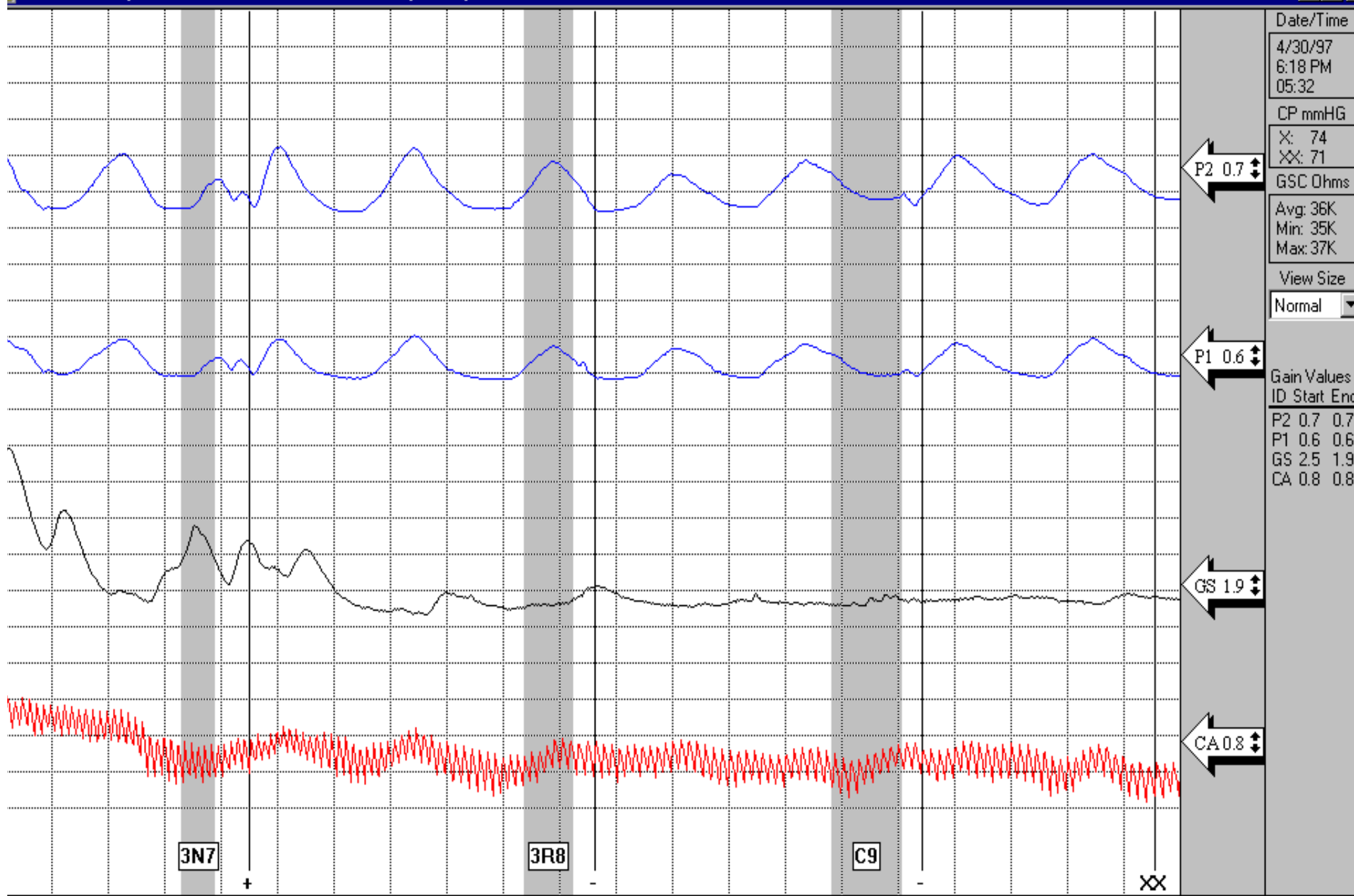
CP mmHG
X: 74
XX: 71

GSC Ohms
Avg: 36K
Min: 35K
Max: 37K

View Size
Normal

Gain Values
ID Start End
P2 0.7 0.7
P1 0.6 0.6
GS 2.5 1.9
CA 0.8 0.8

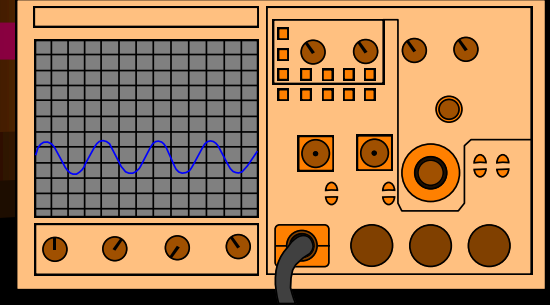
3C6 (N) DTWWD, have you ever misrepresented you academic abilities to make yourself look important?

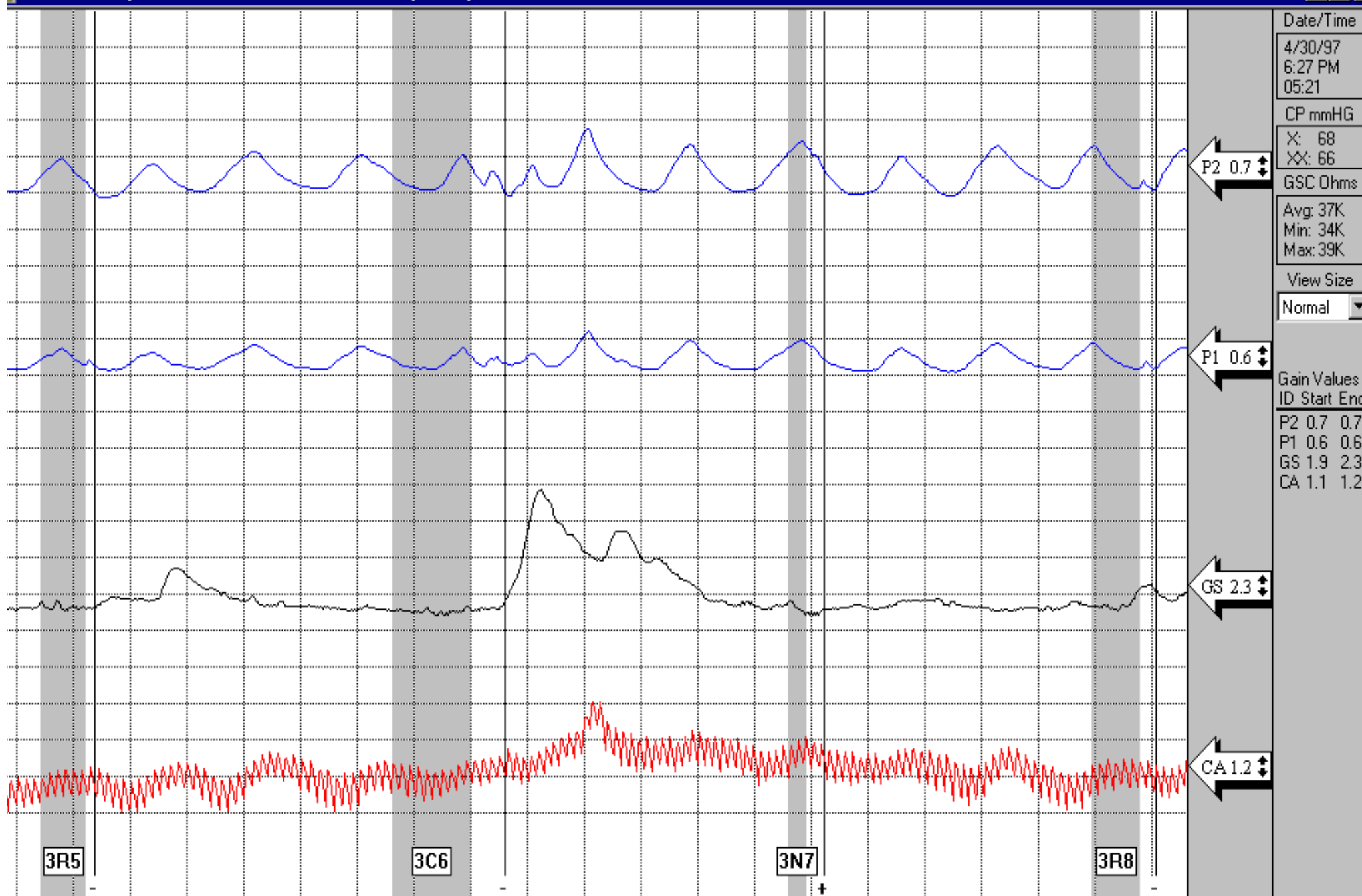


C9 (N) Before joining the military, did you ever lie about anything that you don't want the CIA to find out about?

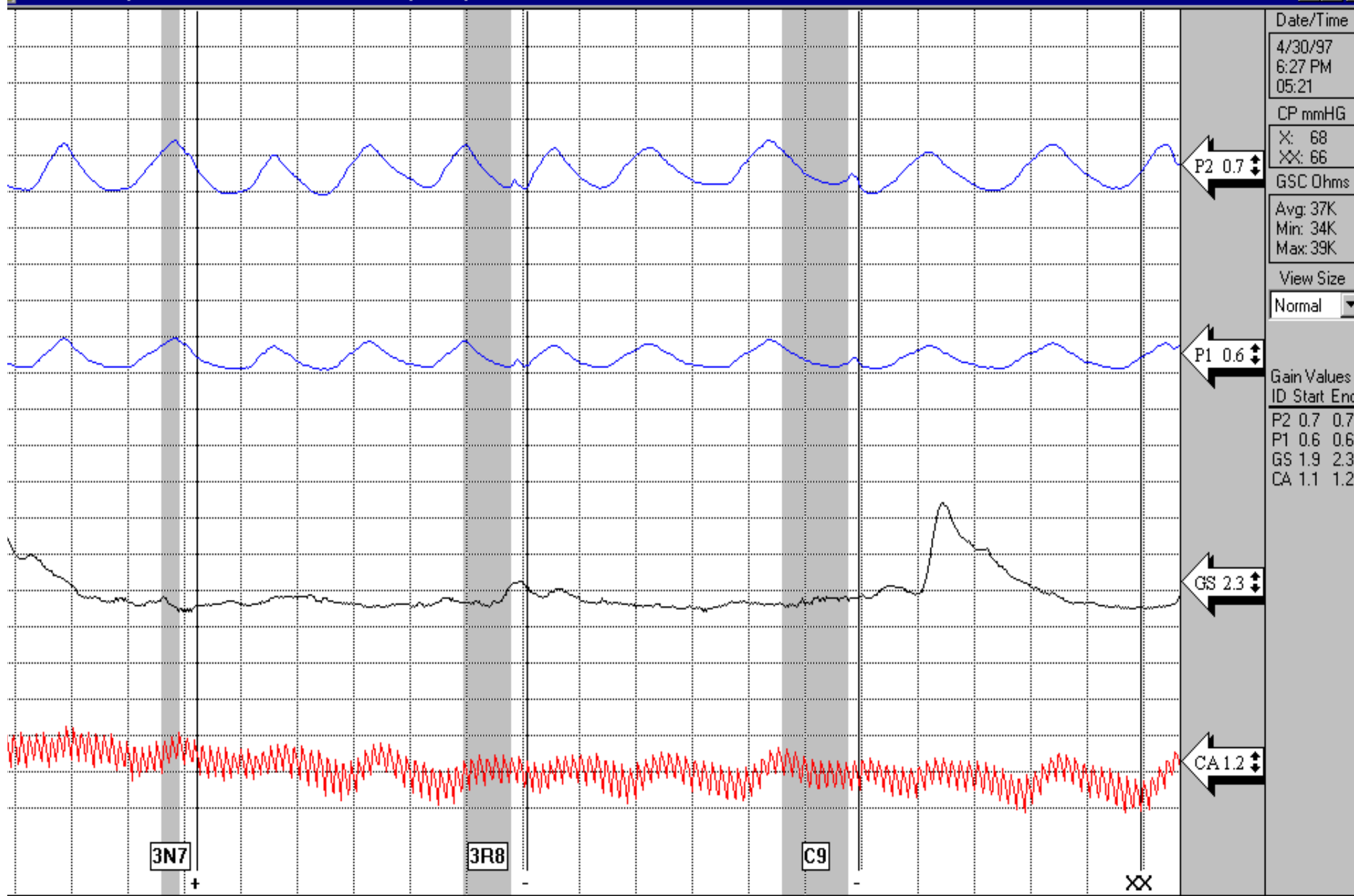
Data Collection

- London suspects possible CMs.
 - Observed slow breathing
 - not always a CM
- Why a big response on 3C6, but nothing on C9?
- London then ran the 2nd chart.
- Watched Subject very closely between questions.
 - No movements
 - No visual indicators of manipulation





3C6 (N) DTWWD, have you ever misrepresented your academic abilities to make yourself look important?

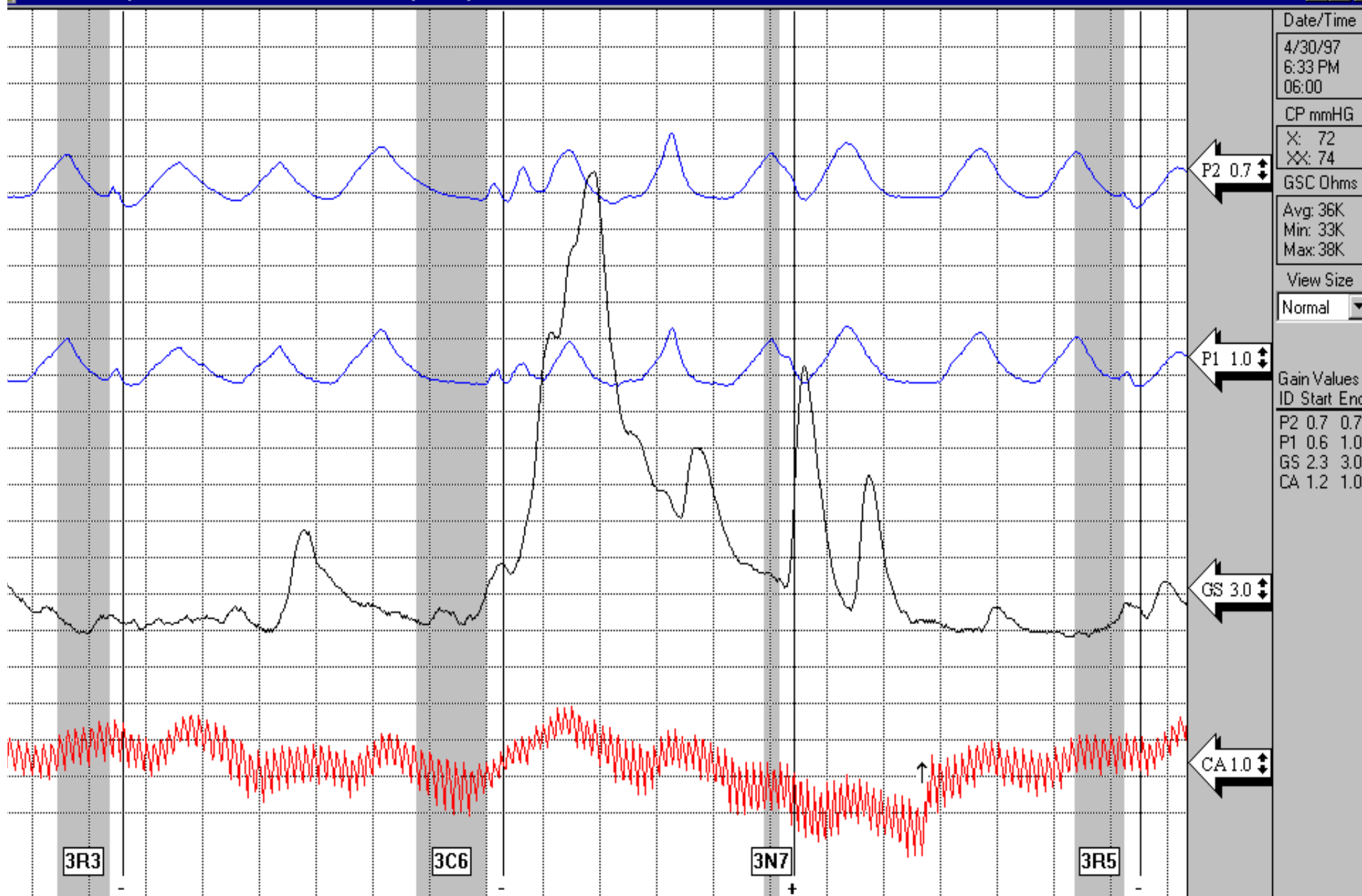


C9 (N) Before joining the military, did you ever lie about anything that you don't want the CIA to find out about?

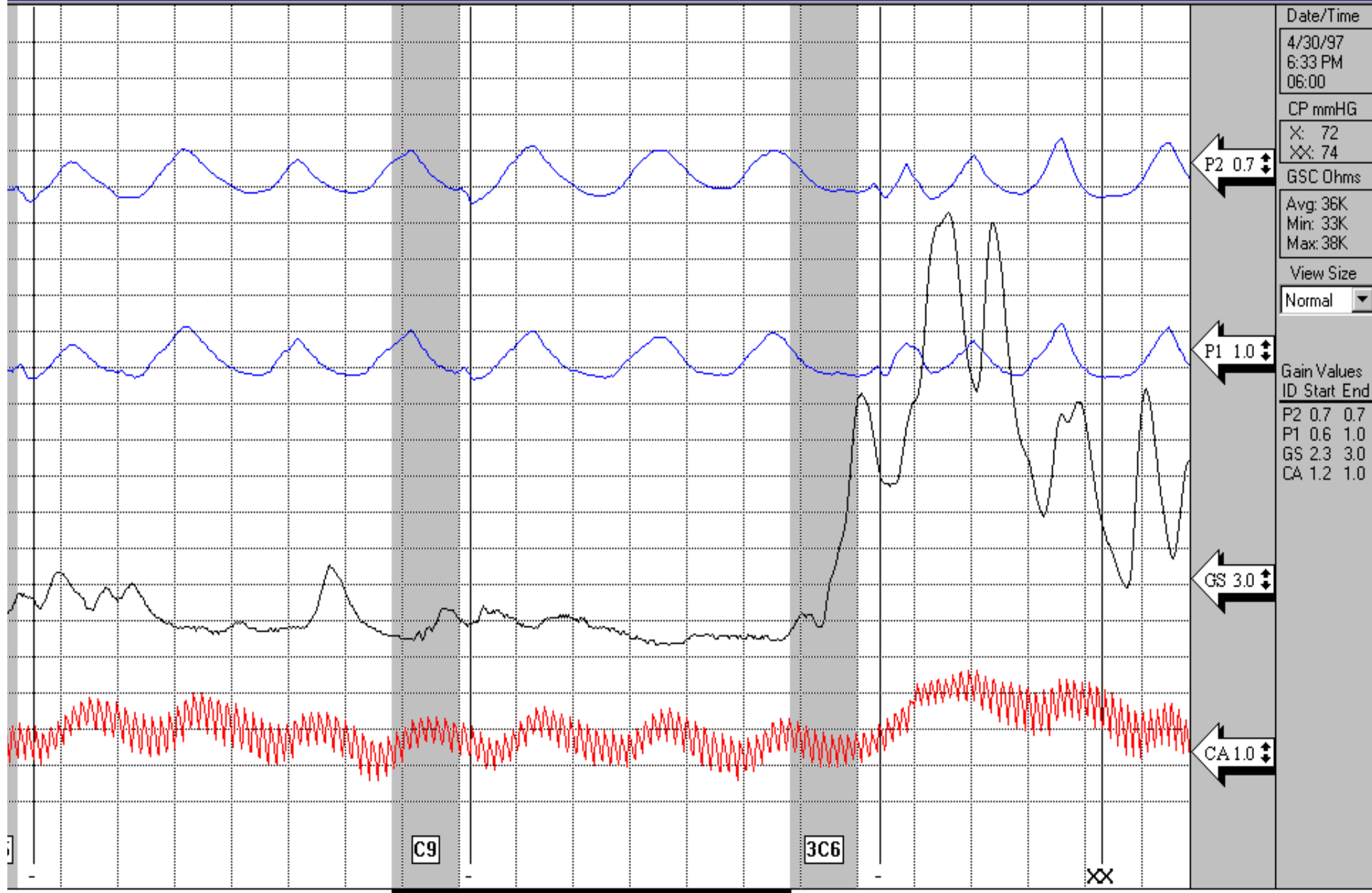
Increased Suspicion



- Slow breathing - too consistent.
- Controls - too much response.
- Controls - similar responses; like from a cookie cutter.
- Never looked at examiner between charts.
- Unable to determine exactly *what* John was doing to create the reactions, London decided to run a 3rd chart to verify that the reactions were deliberate.
 - Watched more intensely
 - Repeated controls back-to-back to collect evidence that supported Subject using CMs



3C6 (N) DTWWD, have you ever misrepresented your academic abilities to make yourself look important?



C9 (N) Before joining the military, did you ever lie about anything that you don't want the CIA to find out about?

Posttest on CMs

- Interrogated re manipulating the test. London didn't mention the C word.
- At first - who me?
- Themes
 - it was obvious what he was doing
 - credibility diminishing
 - too smart to throw everything away
 - conducting an experiment





Subject's Confession *re: Preparation*

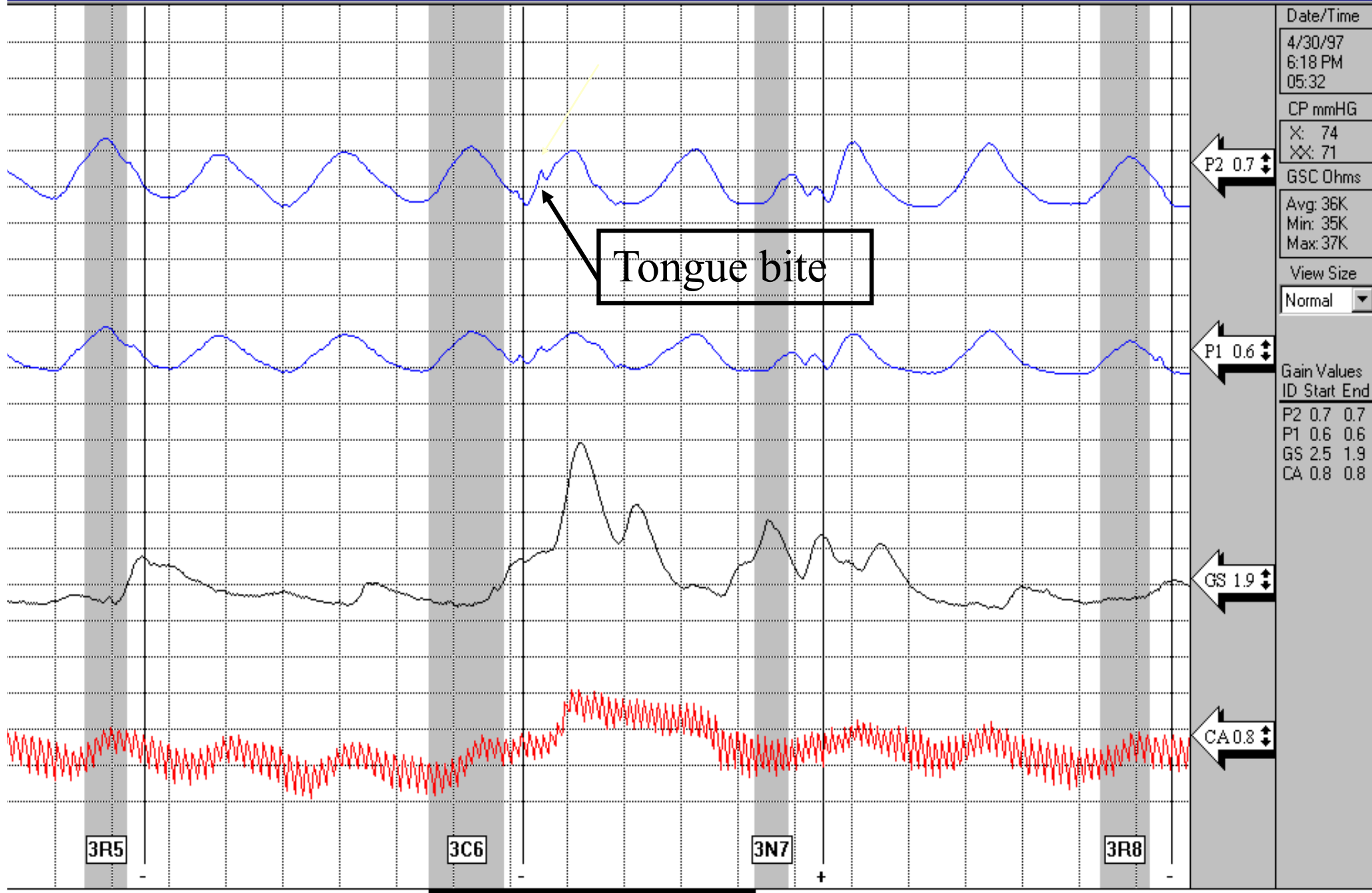
- When he was called back for a third exam, he decided to apply countermeasures.
- Accessed Internet and library resources
- Bought and studied “How to Sting the Polygraph”
- Called Doug Williams to discuss CM strategy.
- Tried buying polygraph
- Bought cardio cuff to practice sphincter & tongue bite.
- Practiced controlling his breathing.
- Thought out and rehearsed a detailed CM strategy involving behavioral and physical CMs.

Subject's Confession

Regarding CMs



- Biting tongue on charts 1 & 2
- Anal sphincter contracted on chart 3
- Would not look at examiner
- He did not recognize C9 as a CQ, hence did nothing on that question.



3C6 (N) DTWWD, have you ever misrepresented your academic abilities to make yourself look important?

How & why he was caught



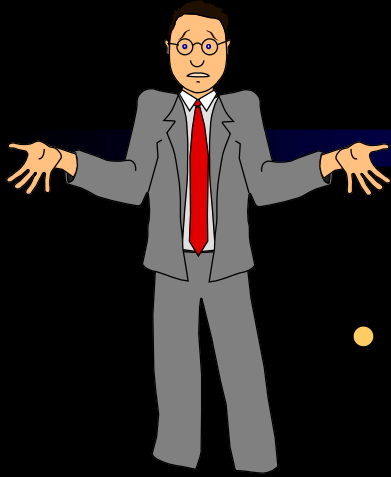
- Peter London was alert for countermeasures.
- Once his suspicions were aroused, he devised a plan for confirming their use.
- He interrogated. He persisted.
 - He didn't accuse him of using countermeasures.
 - He provided plausible rationalizations.
 - He provided advantages for coming clean about them.

Interrogation strategy



- Don't use word "countermeasure."
- Do suggest he, being intelligent, of course surfed the net re: polygraph. Wanted to "help himself." Perfectly normal, understandable.
- This was just an experiment, to see what would happen.
- Once he admits to that, get full details on what sites, booklets he read; real reason why he did it (intent); what he's covering up.
- (optional): Run GKT or POT re: CM teachers & manuals
 - (E.g. Doug Williams, George Maschke).

Why are we able to catch Williams' trainees?



- They have only a verbal description to guide them
- They don't know how “hard” to do it.
 - If they do it too hard, they risk being caught CM-ing
 - If they don't do it hard enough, their lies will outweigh the manipulation

One quiet word of advice



- Don't tell them how you caught them!
 - Don't tell them what made you suspicious.
 - Don't explain what they did wrong.
 - Above all...DON'T SHOW THEM THE CHARTS.
- Telling them how we're catching them will only make them refine their advice, making it harder to detect counter-measures.

AntiPolygraph BBS, 22 Jul 02

Beechtrees, taunting PolyCop:

- When asked to produce **any** example of your ability to detect countermeasures, you have repeatedly ignored the requests or declined to do so-- instead you insist you absolutely, positively can detect countermeasures, you have done so many times, and anyone who attempts them has a good chance of being 'caught' by you. When your bluff is called again, you beg off and say words to the effect that you can't describe how you do it, but if we were there in real time you could 'show' us-- I guess the entirety of the English language isn't up to the job that simple finger-pointing at the poly chart and-- what, grunts and clicks?-- can do. **Fine, for the second time I suggest backing up your assertions by getting out your Big Red Pen, scanning charted examples of countermeasures and sending them to George, whom I am almost certain will be happy to post them.** Get a hotmail account, access it through an anonymizing proxy, and send the proof. NOTE: Telling me you **really, truly, abso-positively-lutely** can detect countermeasures will not suffice as a response, polycop. Neither will shrill accusations of felonious behavior on my part nor the outrageous attempts to link this website to pedophilia.

Remember Doug's current advice:

- 1st chart: Sphincter and different resp patterns on all CQs
- 2nd chart: Sphincter only, on only one CQ
- 3rd chart: Do nothing

The CQT & CMs



- The CQT is peculiarly susceptible to mid-level CMs. When used with DLCs, it invites CMs even from naïve Ss.
- The decision-making process should *begin* -- not *end* -- with numerical scoring.

CQT decision-making in a CM environment



1. Always double check scores by summing across
 - a. questions,
 - b. charts,
 - c. components.

All three dimensions should yield precisely the same score.

Within all three dimensions (questions, charts, & components), the scores should have no significant disagreement.

Decision-making (cont.)

2. Always inspect charts for CMs.

Movement artifacts

Erratic breathing, esp on RQs or CQs

Unusual, physiologically suspect reactions

Massive, often double saddle cardio reactions

HR too slow (drugs)

GSR flat or plunging (drugs)

Overly messy charts (very variable)

Controlled breathing (SDB) not necessarily a CM; some innocent Ss resort to it.

Increasingly, some innocent subjects will manipulate their reactions;
Just because there is CM activity doesn't mean the subject is guilty.

Decision-making (cont)

3. If numerically NDI, evaluate charts as if it were an RI test.

Ignore the CQ reactions; are there any significant RQ reactions?

Does S consistently react to one RQ more than the others?

It is encumbant upon the examiner to determine the reason for unexplained reactions. Don't accept a plausible explanation without verifying it by additional testing.

Decision-making (Cont.)



4. If numerically NDI, compare scores to S's behavior.

If everything is consistent, you can be reasonably confident in your decision.

If there is any significant discrepancy along any of these four dimensions, develop hypotheses and test them. If unable to resolve, consider going inconclusive.

Decision-making (cont.)



- When a person used CMs, even if on only one chart, *never* call that person NDI.

If there is a possibility that the person is truthful,
conduct a re-examination.

– Dick Arther, 1998

Debrief!!



- After your subject has confessed, debrief him regarding countermeasures...regardless of whether you suspect he CMd or not.
- On interesting cases, *Please* send me copies of your charts, report, and debriefing form.
 - *I can best be reached at*
Barland@DirecWay.com
 - *No “t” in DirecWay*

The Sad SAT case

Case Study #3



Examiner: Ed Gelb

August 24, 2002

Prepared by Gordon H. Barland, Ph.D.

Case facts

- John, a high school senior, took the SAT on November 3, 2001. He applied to Stanford, and was accepted.
- In March, Stanford received an anonymous letter: John had paid Mike \$ 3,000 to take the SAT for him.
- Stanford asked the Educational Testing Service (ETS) to investigate. ETS hired a handwriting expert to examine John's and Mike's SAT writing. He said the handwriting matched Mike's, not John's.
- Based upon the handwriting analysis, Stanford notified John he would not be allowed to matriculate.

First exam



- John's father had John polygraphed: NDI.
- Stanford conducted its own investigation. They hired a different handwriting analyst, who also concluded the handwriting on the disputed exam matched that of Mike, not John.
- Stanford agreed to re-admit John if he passed a 2nd polygraph administered by an examiner of their choice: Ed Gelb.
- Ed administered a Zone Comparison Test on August 24, 2002.

Gelb's Pretest Interview



- Ed asked if John had searched Internet. John said no. Ed said “There’s a lot of misinformation out there. If you’re considering countermeasuring, forget it!”
- John denied hiring Mike; it would have been illogical, since Mike isn’t as smart. Mike had a lower SAT score than John did.
- He said the test didn’t match his normal handwriting because he’d had a cast on his arm.



4/2002

14:07:52 08

Numbers Test



“Choose a number between 2 and 10. ... What number did you choose?”

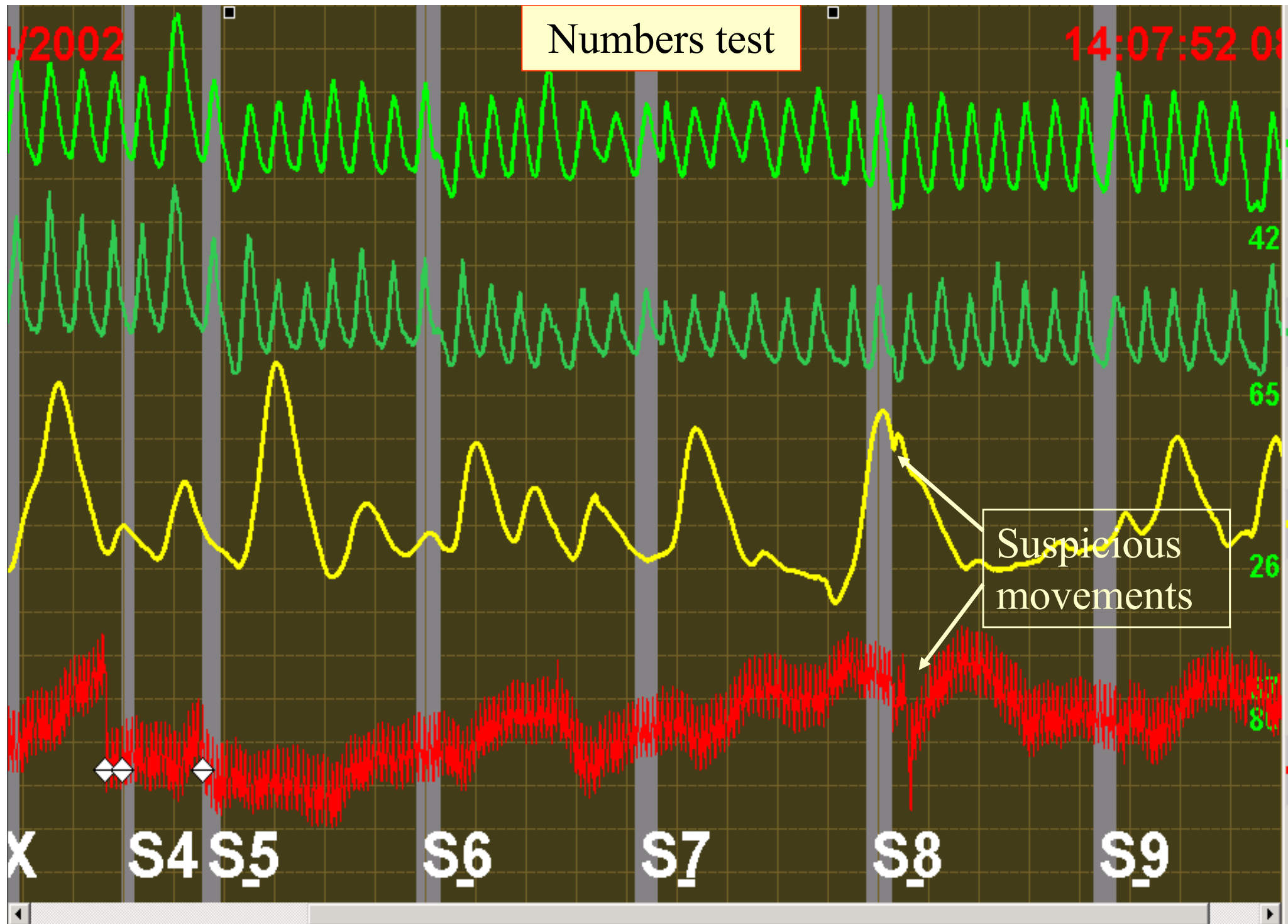
“7”

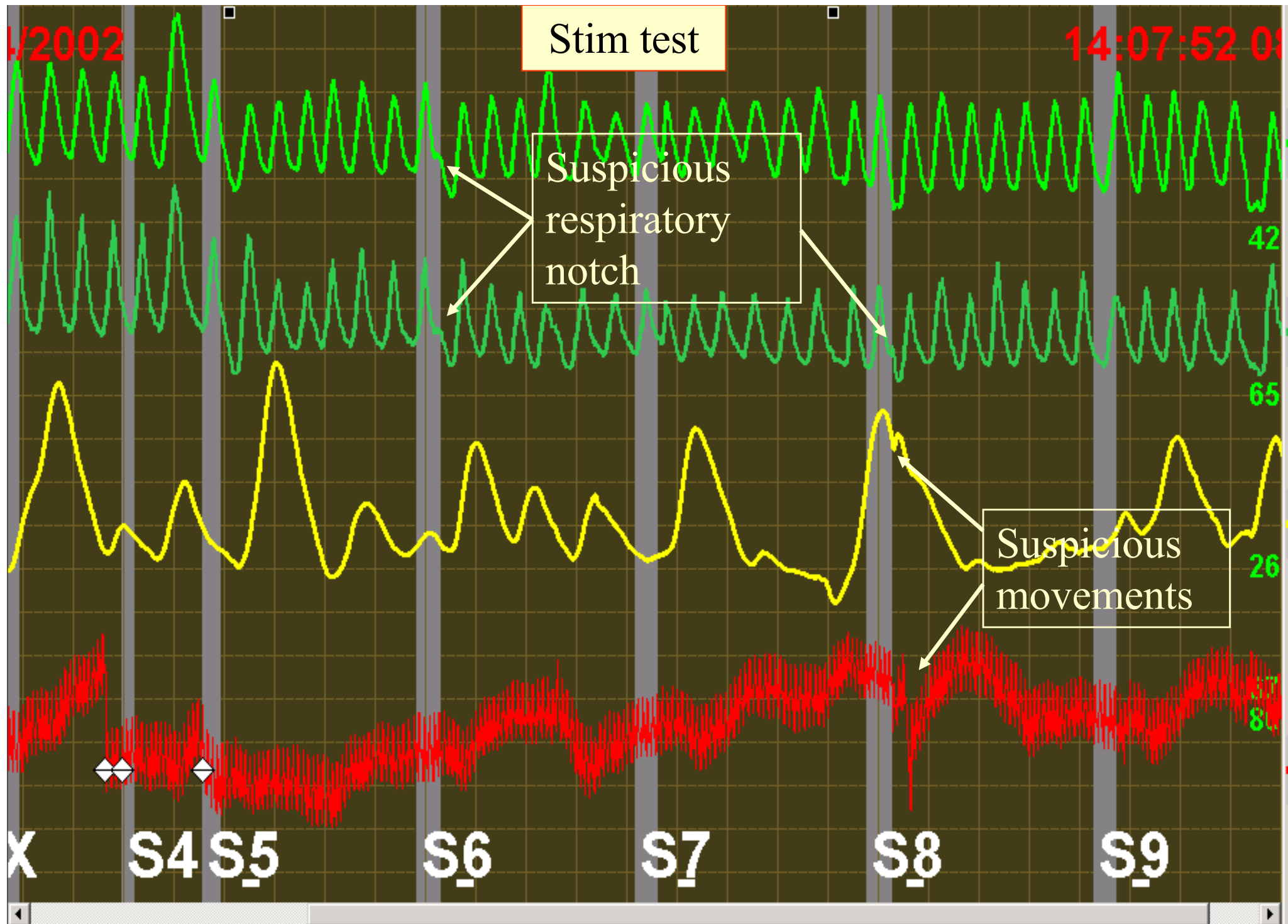
John wrote 7; Ed added 4, 5, 6; 8, 9.

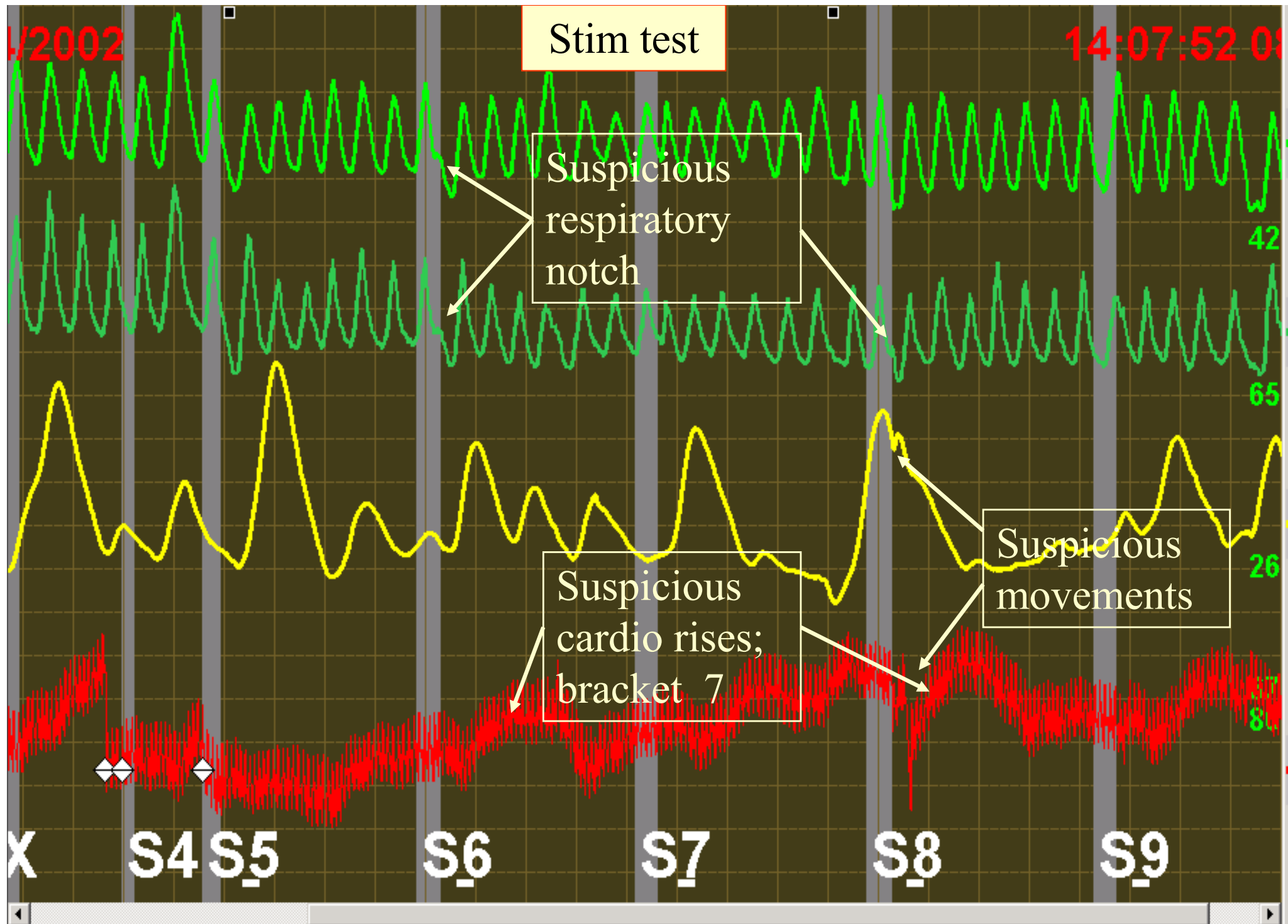
“Answer ‘no’ to every question. Try not to get caught.”

Ed drew a typical cardio baseline peaking at 7,
explained how a person relaxes afterwards.

“You can try a.t. you want, mental or physical, not to have your lie at 7 detected.”







PLEASE REMAIN STILL, THE TEST IS ABOUT TO BEGIN.

Numbers test (detail)



11 beats per 5 seconds
= 132 BPM

Stim test



- Ed didn't show the chart. He merely said, "Great! Now the computer is programmed to know exactly how your body reacts when you lied."
- "Now we'll run the main test."

Question list

- 14. Are you now sitting down?
- 39. DY plan to tell the truth on this test about whether someone else took those SAT II tests for you Nov. 3, 2001?
- 25. Are you convinced I won't ask you an unreviewed question?
- C46. Before 2001, DYE cheat or take unfair advantage to get what you wanted?
- R33. DY take both of those [last name] SAT II tests, Nov. 3, 2001?
- C47. Before 2001, DYE try to appear truthful when you knew you were lying?
- R35. Did someone else take either of those SAT II tests for you last Nov. 3?
- C48. Before 2001, DYE break a rule, regulation, or the law and not get caught?
- 26. Is there something else you're afraid I'll ask you a question about, even though I told you I would not?

Chart I-1



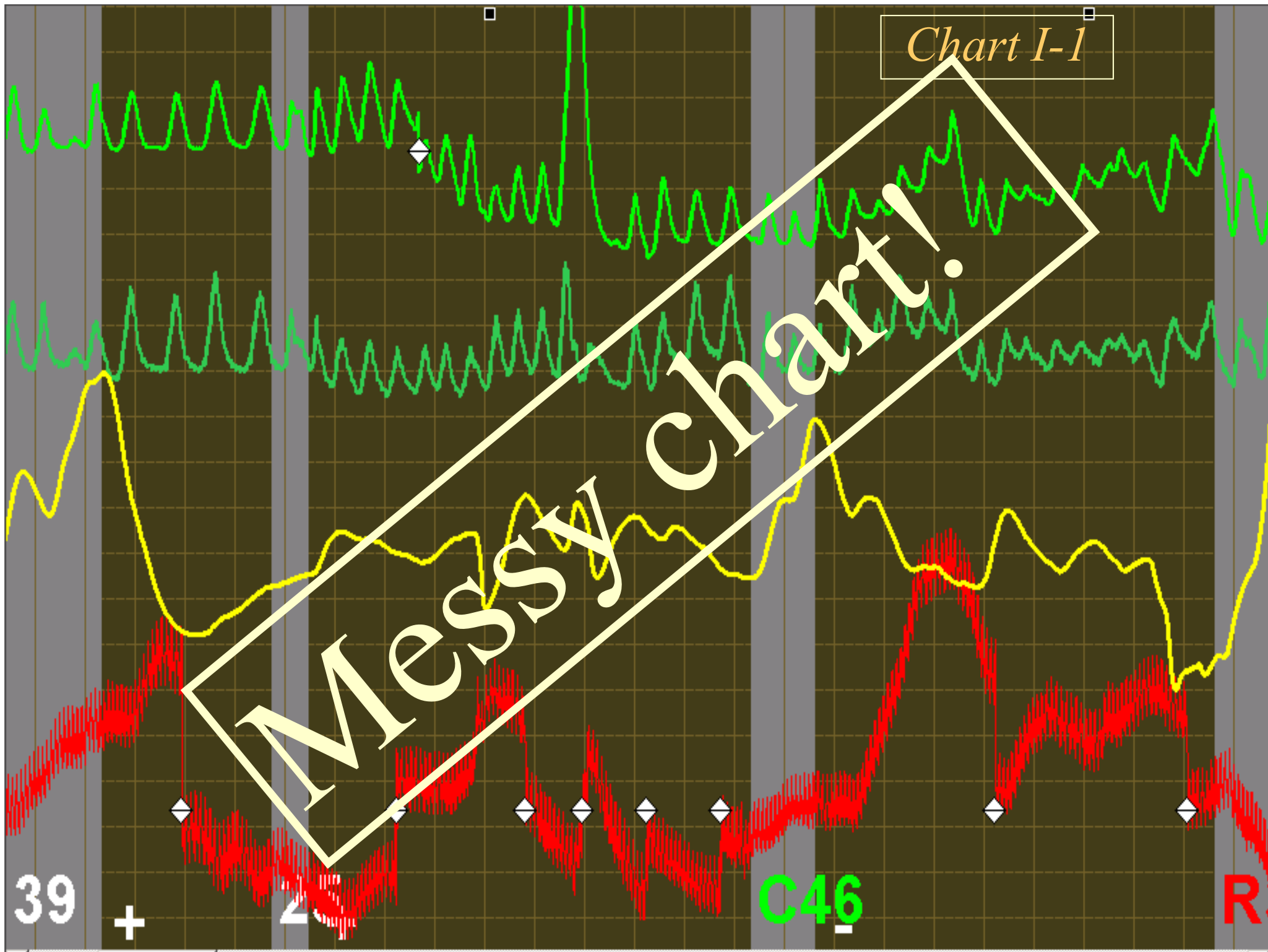


Chart I-1

Messy Chart!

Significant change
from numbers test!

39

+

2

C46

R

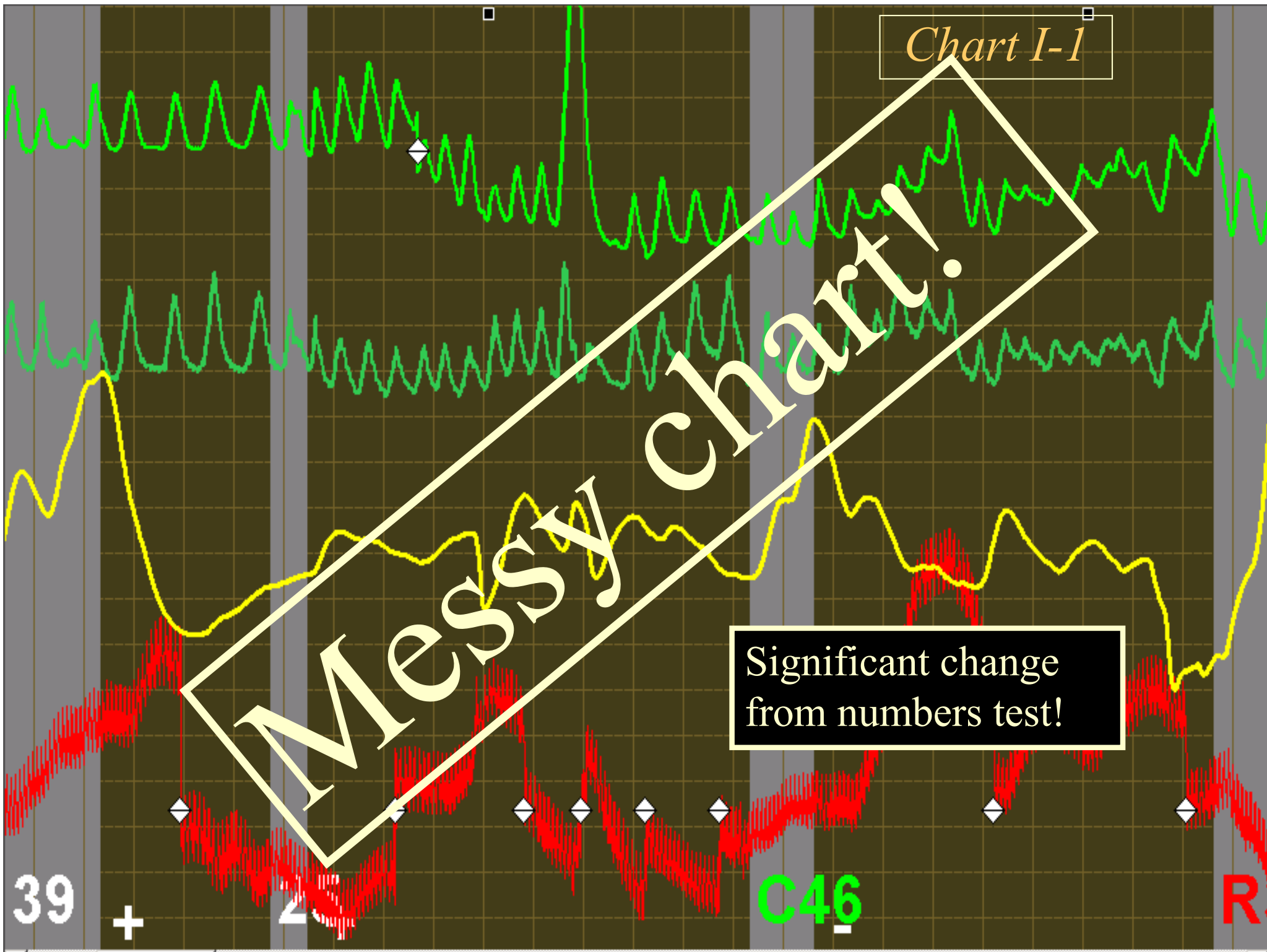


Chart I-1

Baselines
diverge

Suspicious
activity

Suspicious
activity

Latency,
amplitude,
triple saddle

39

+

25

C46

R

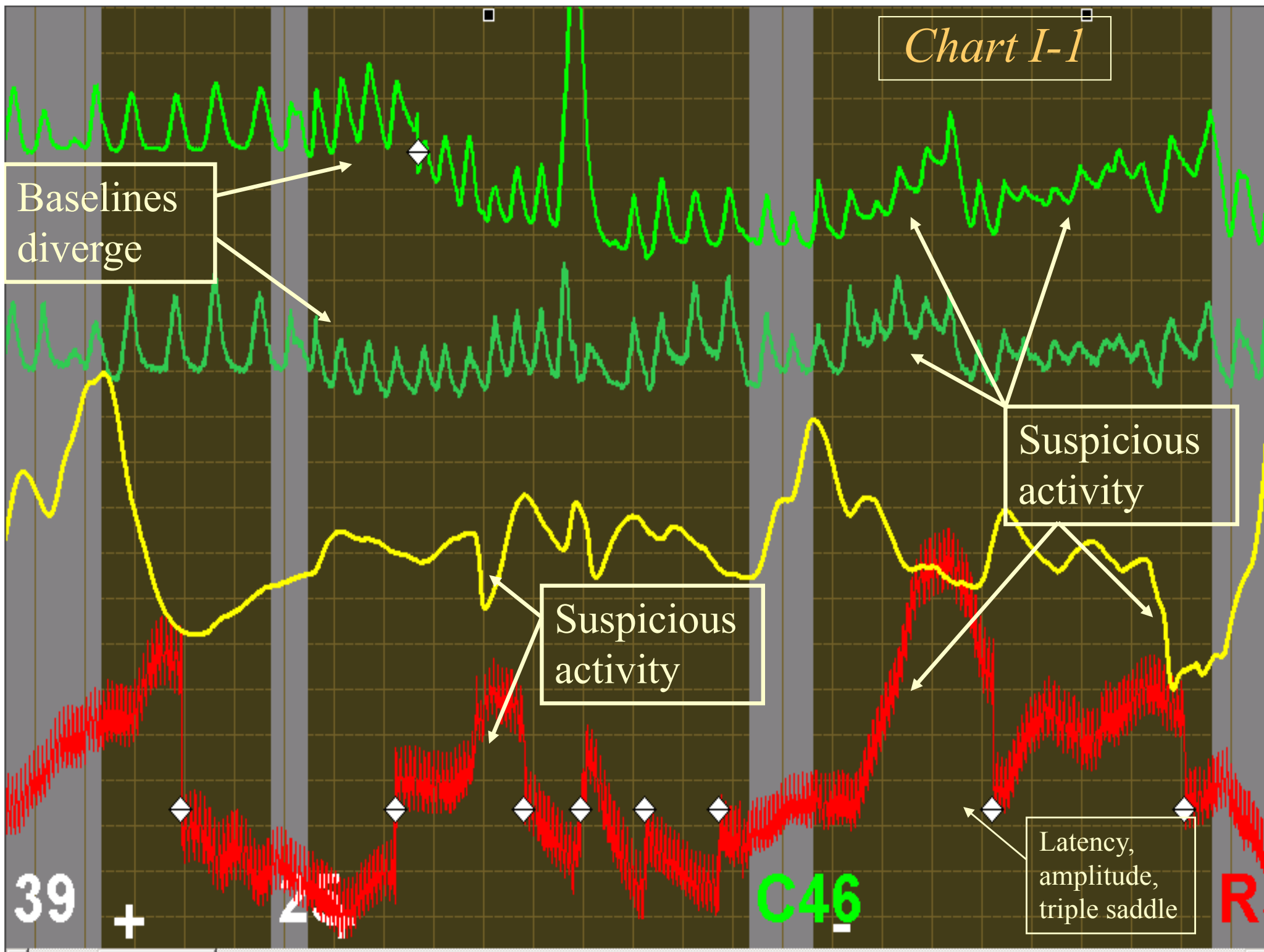
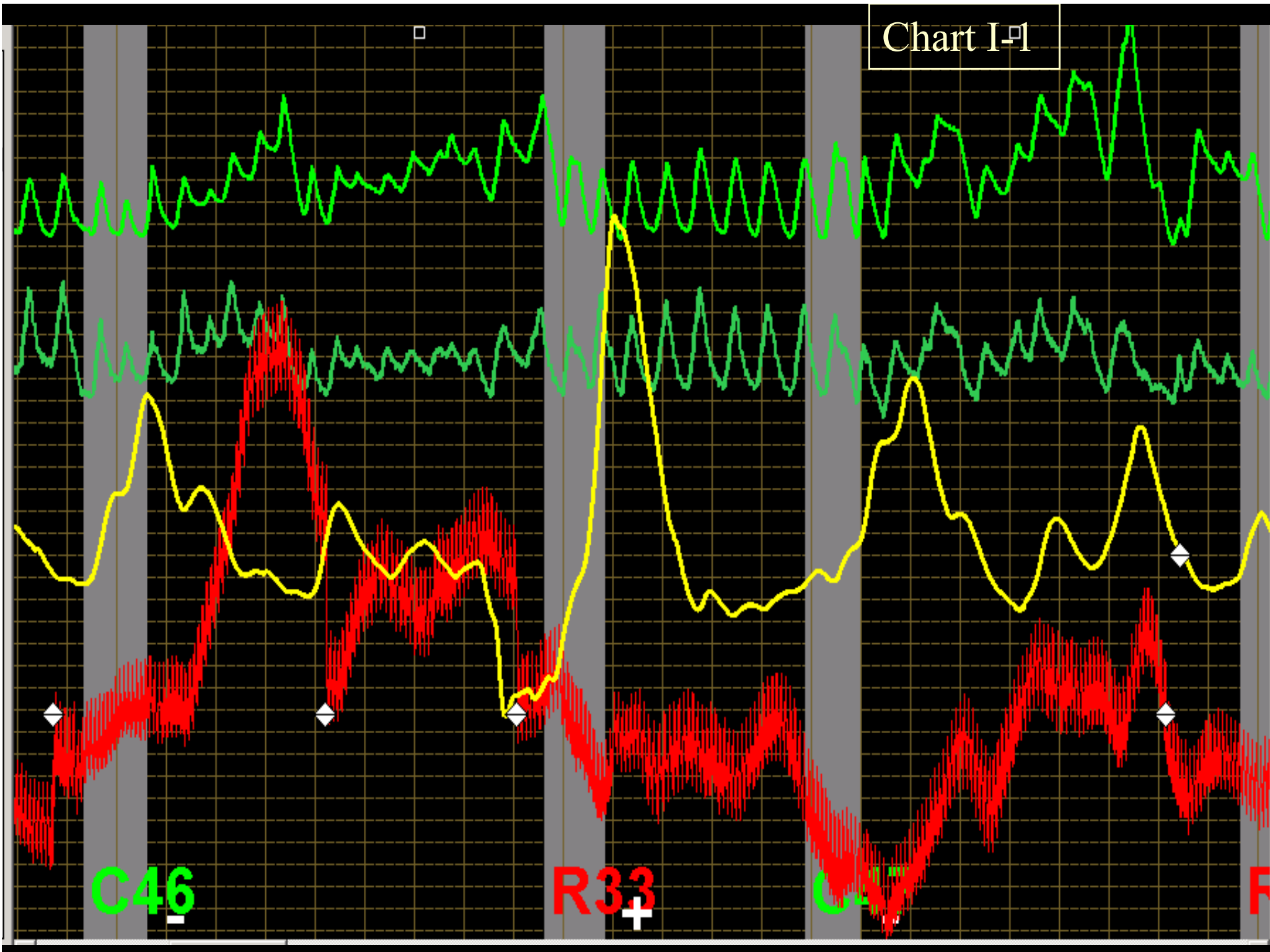


Chart 1 (detail)



HR = $11 \frac{1}{2}$ beats in 5 secs
= 138 BPM

Chart I-1



DGW pattern “2”⁵

Chart I-1

DGW pattern “2”;
holds breath twice

Suspicious EDA activity

Delayed onset
Excessive amplitude
Triple saddle

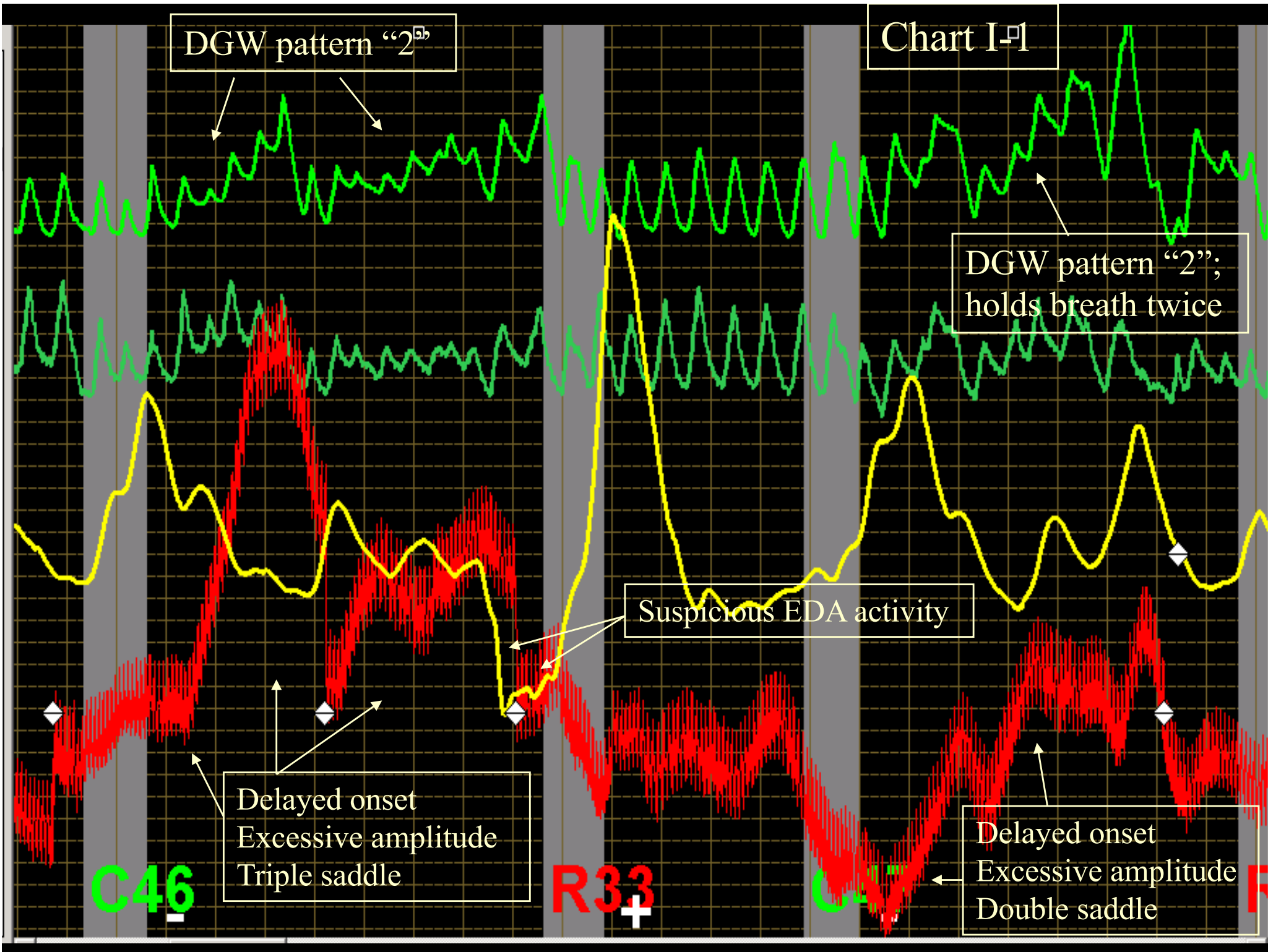
Delayed onset
Excessive amplitude
Double saddle

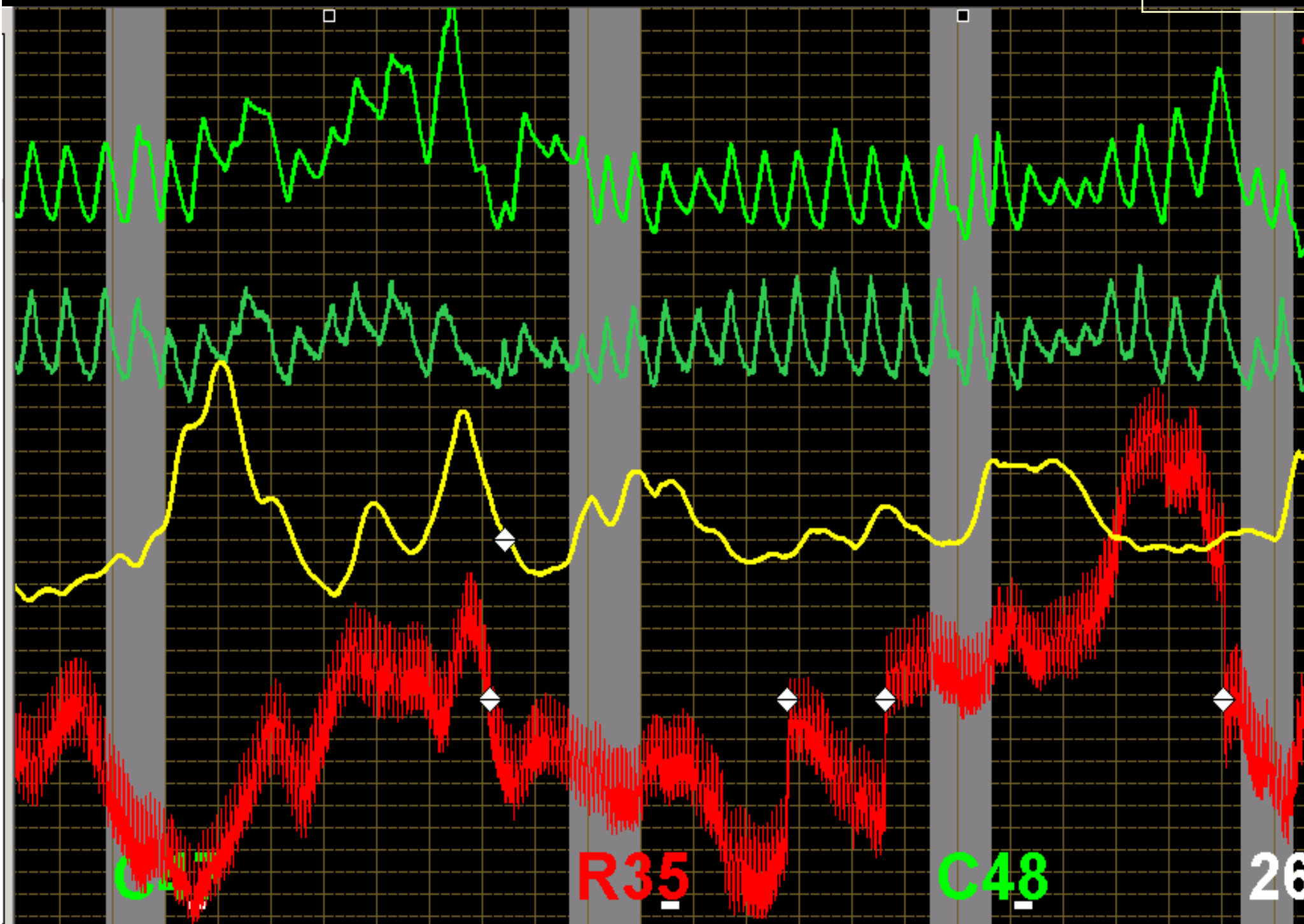
C46

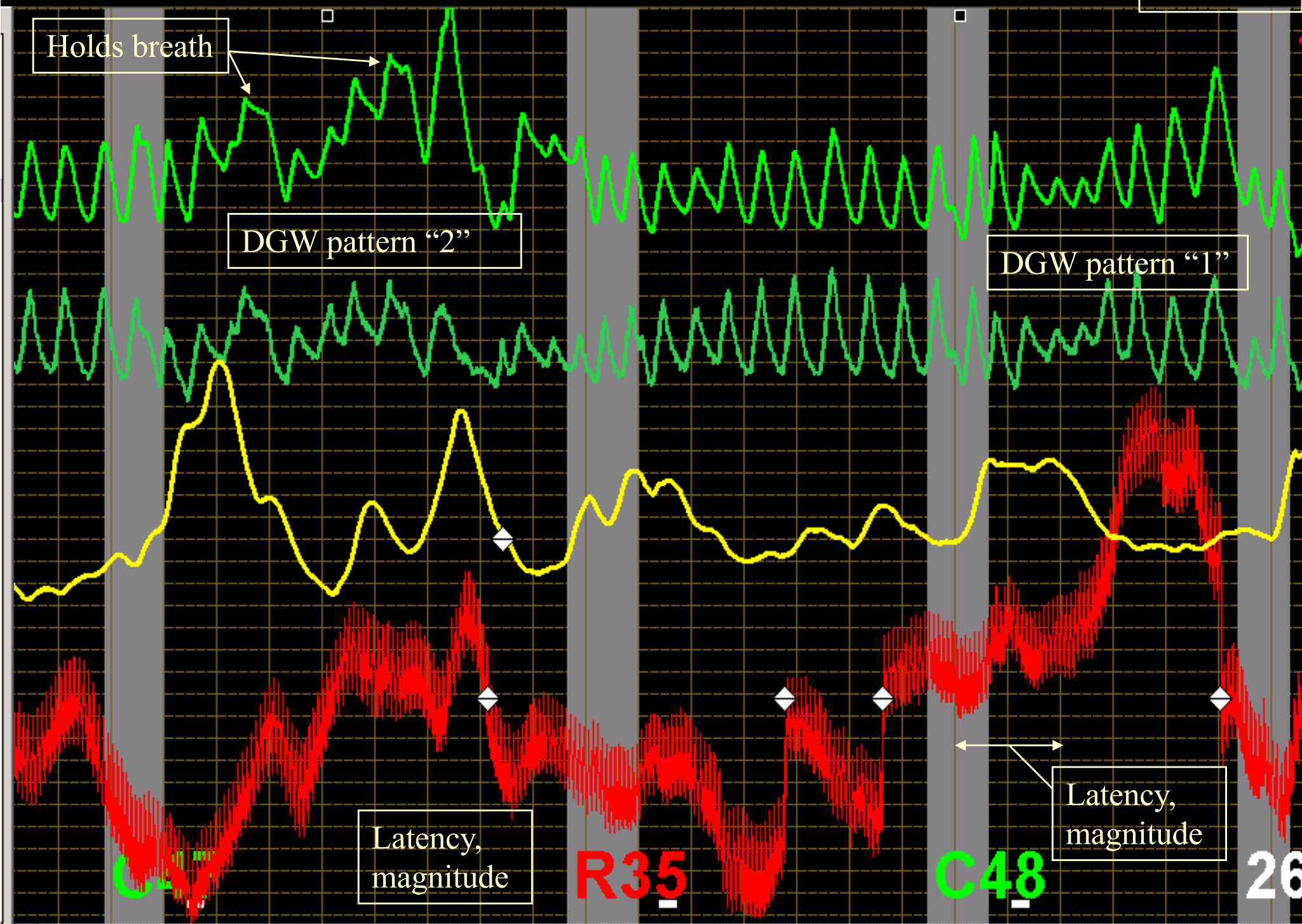
R33+

C46

R33







Discussion after 1st chart

- Ed noticed massive responses to all CQs, and that the cardio reaction was about 2 seconds late each time.
- He gently reminded John not to try to help things along; if he's telling the truth, Ed would have no trouble determining that.

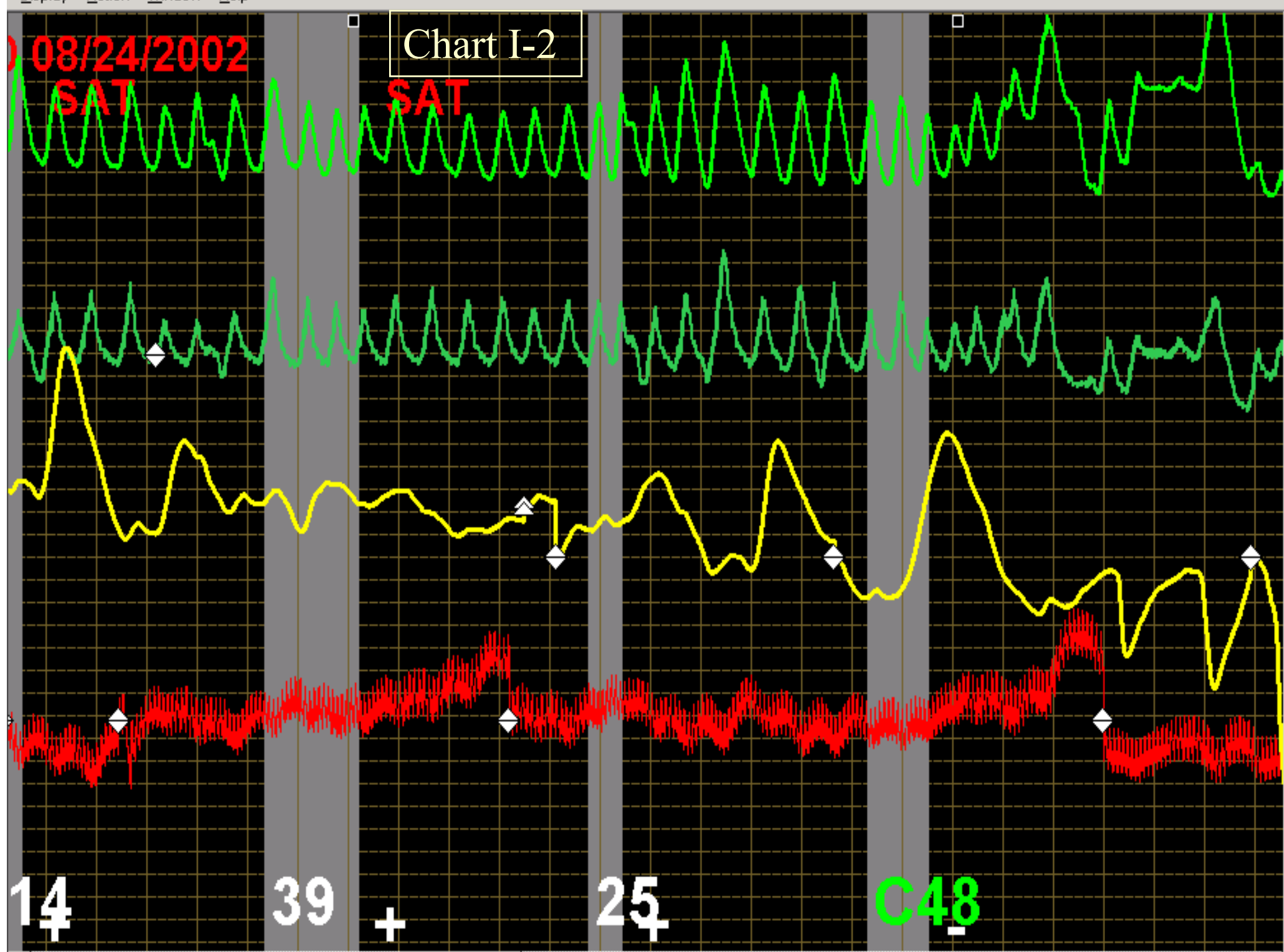


Chart I-2

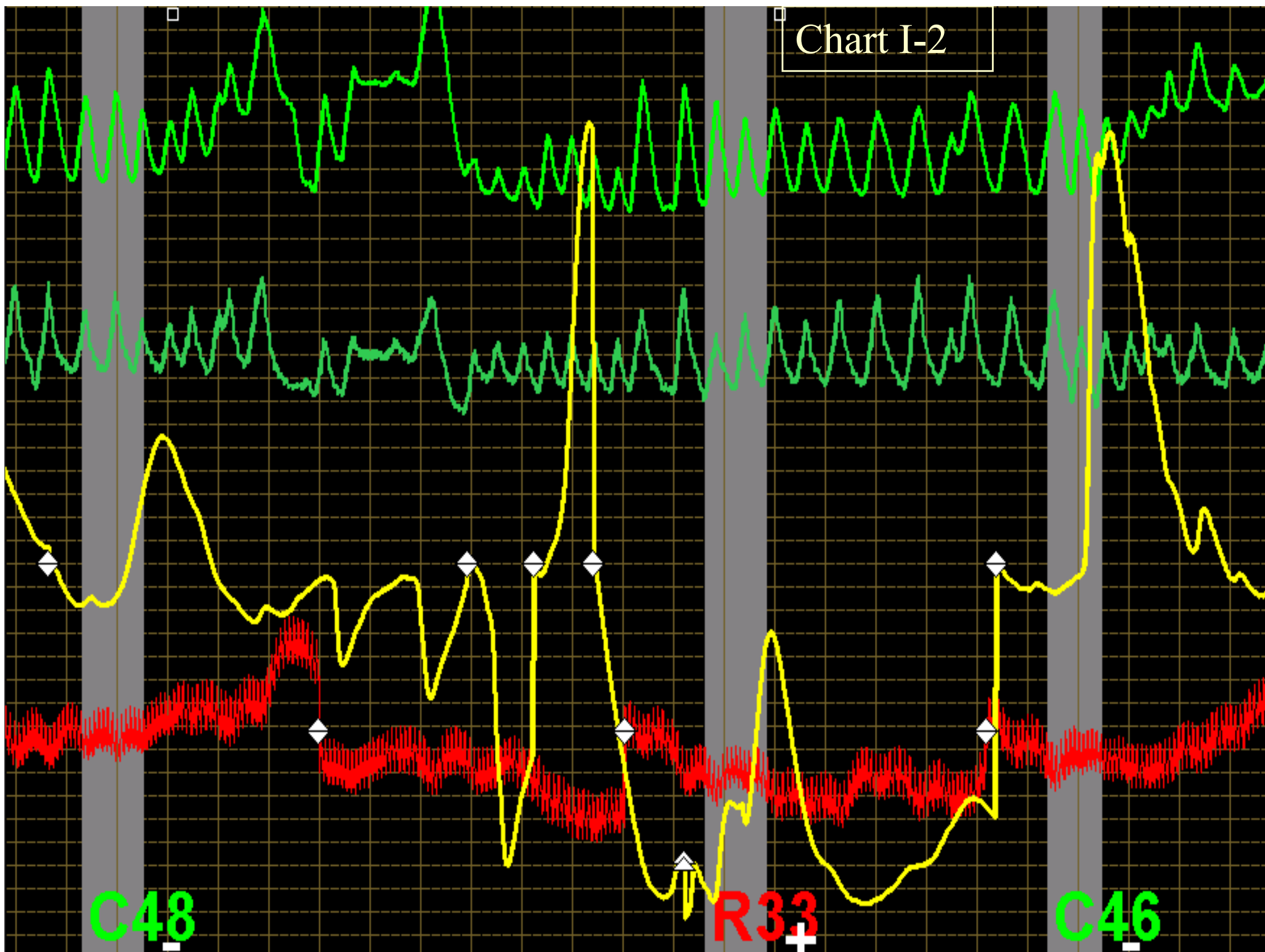


Chart I-2

Floating baseline

Holding breath

Suspicious activity

Suspicious, sustained
reaction (25-30 secs)

C48

R33+

C46

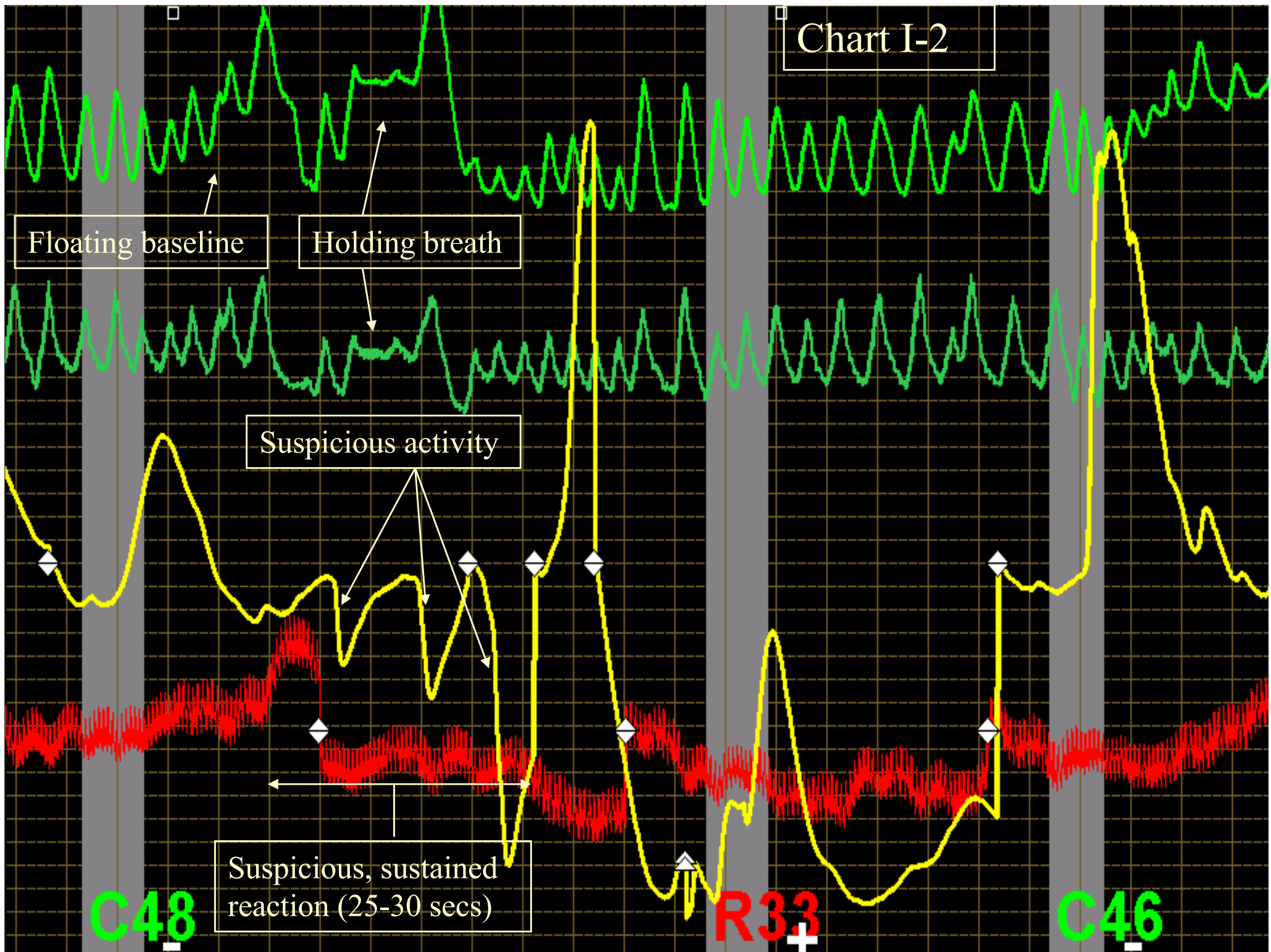


Chart I-2

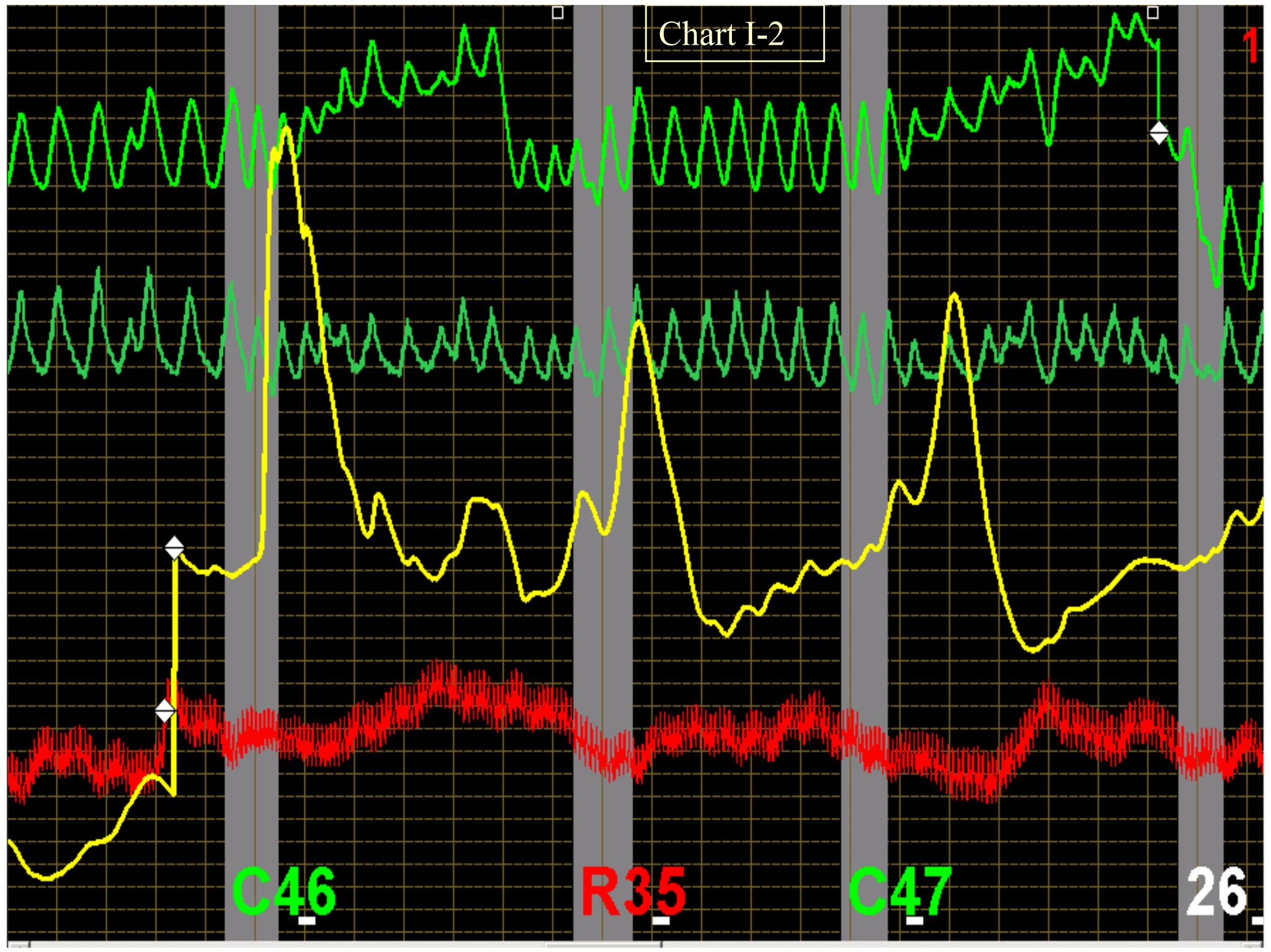
C46

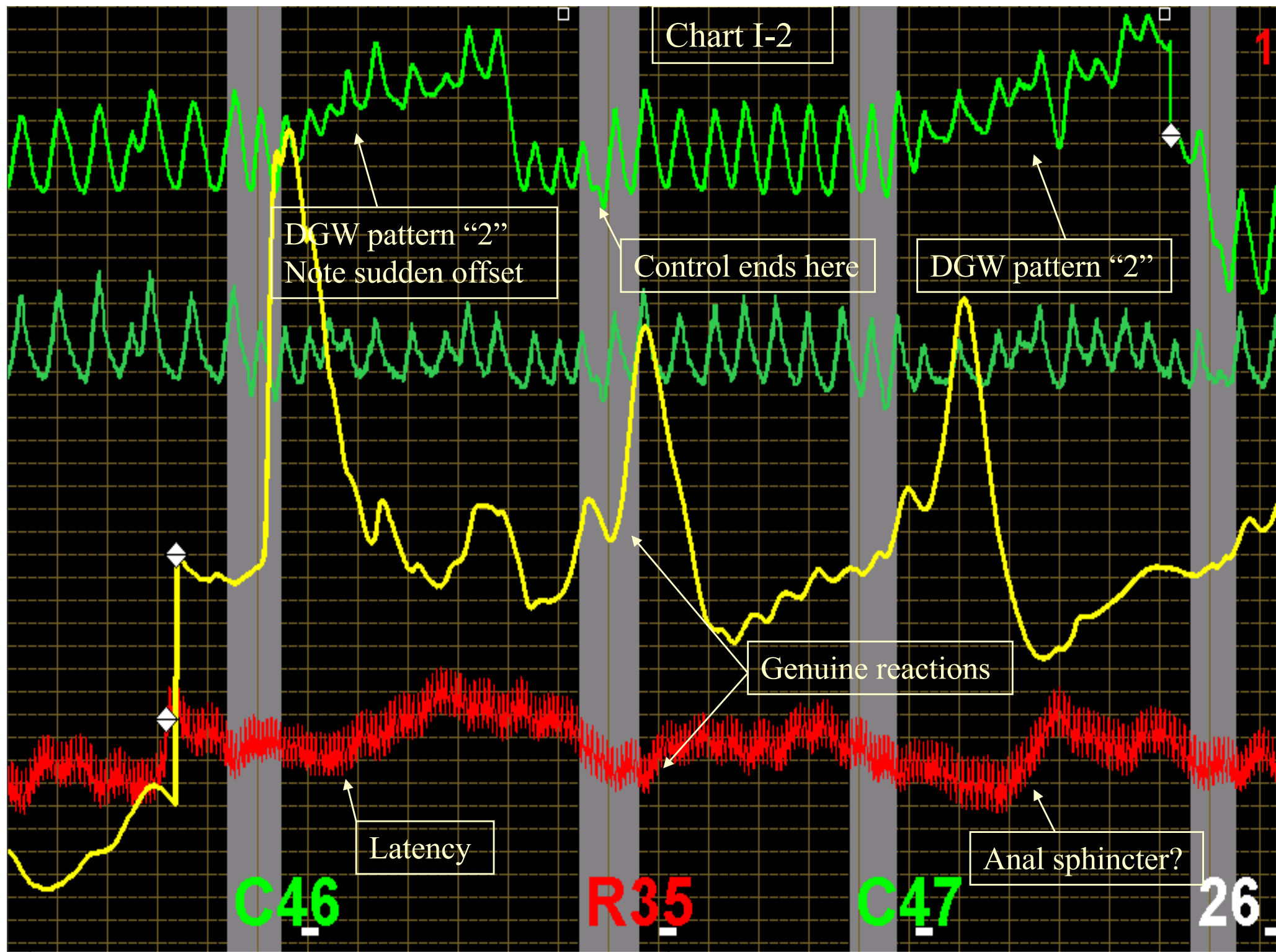
R35

C47

26

1





Between chart discussion

- Ed very forcefully told him to knock it off.

Chart I-3



Chart I-3

14:29:3

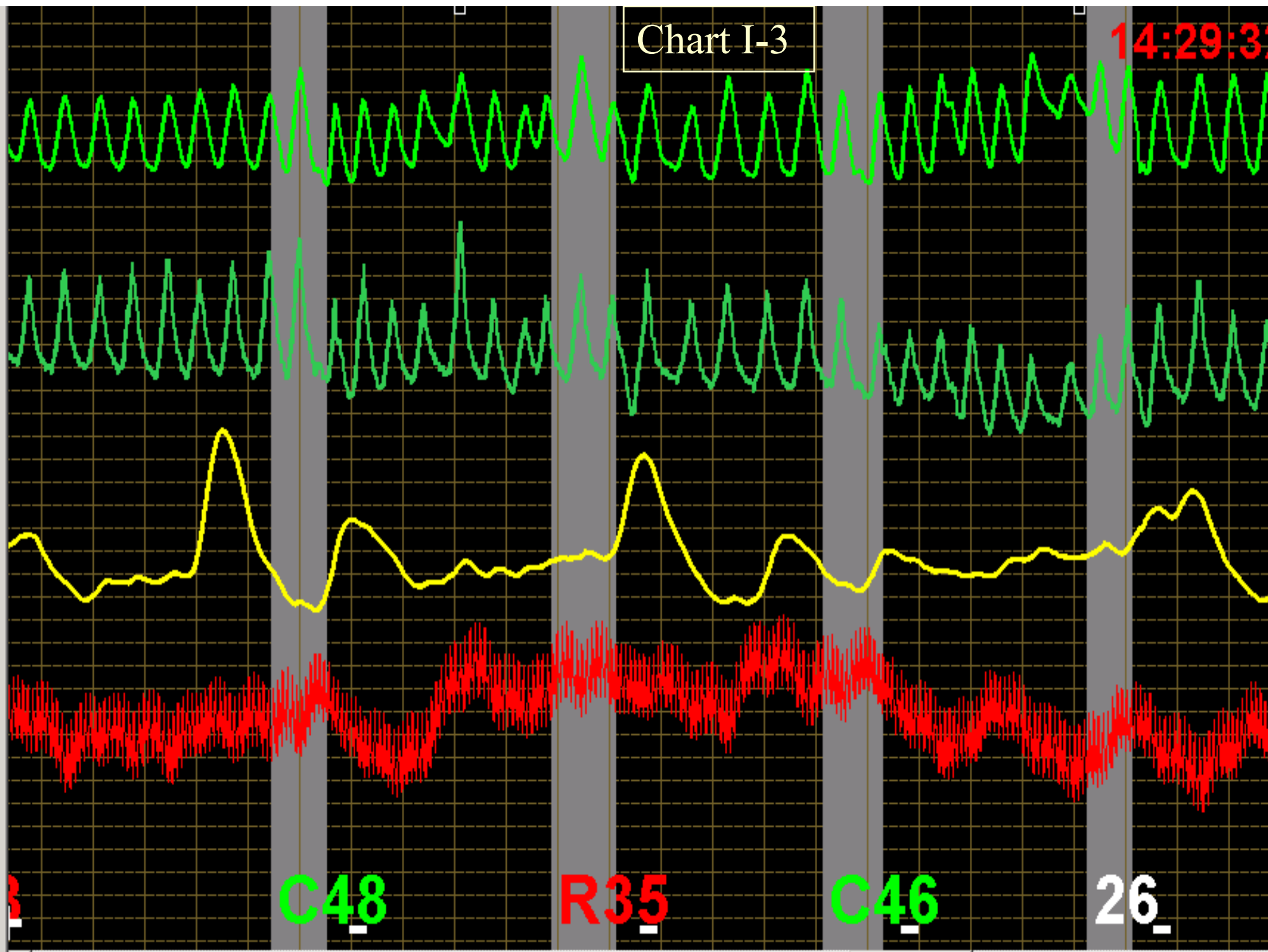
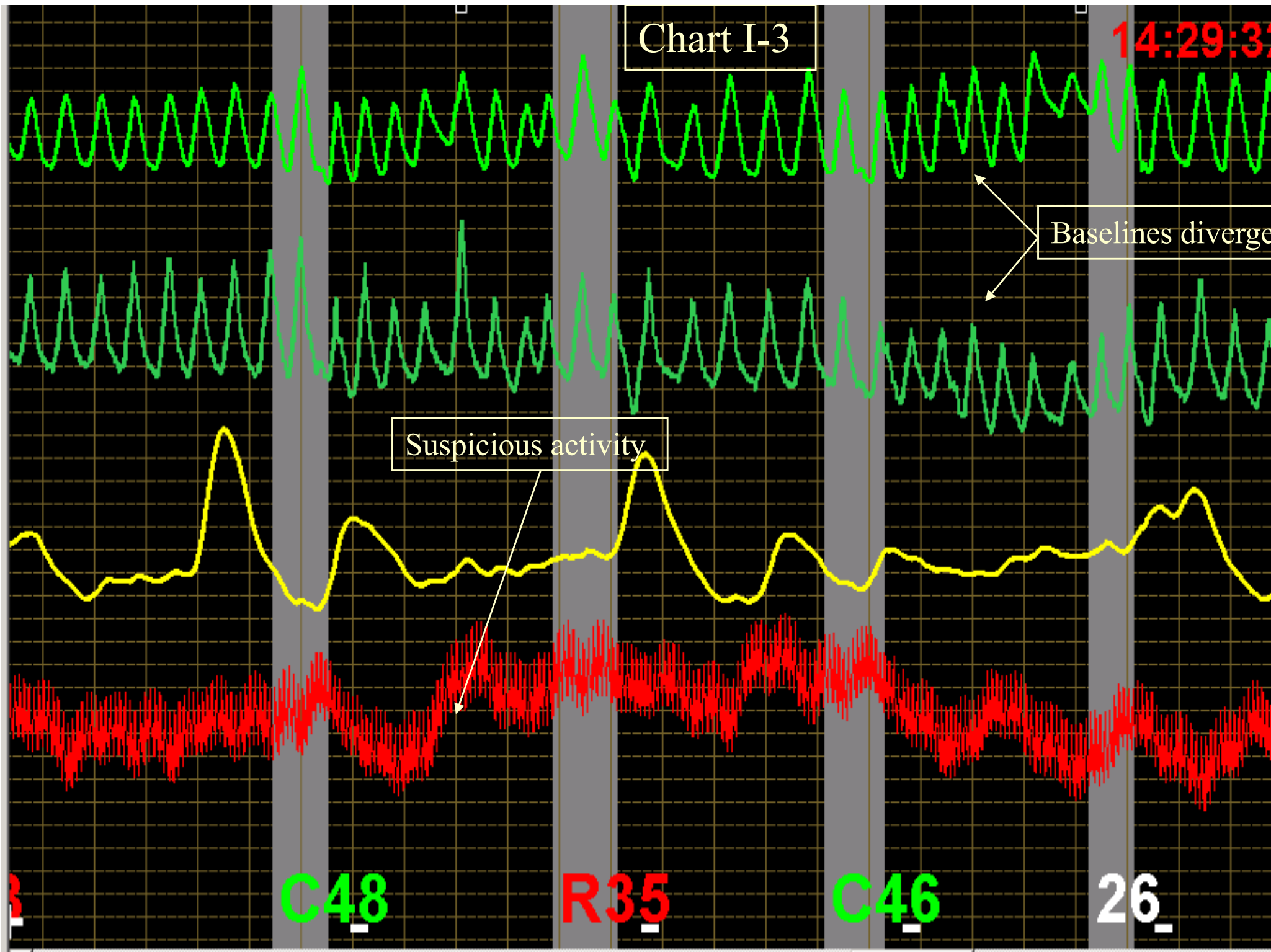


Chart I-3

14:29:3

Baselines diverge

Suspicious activity

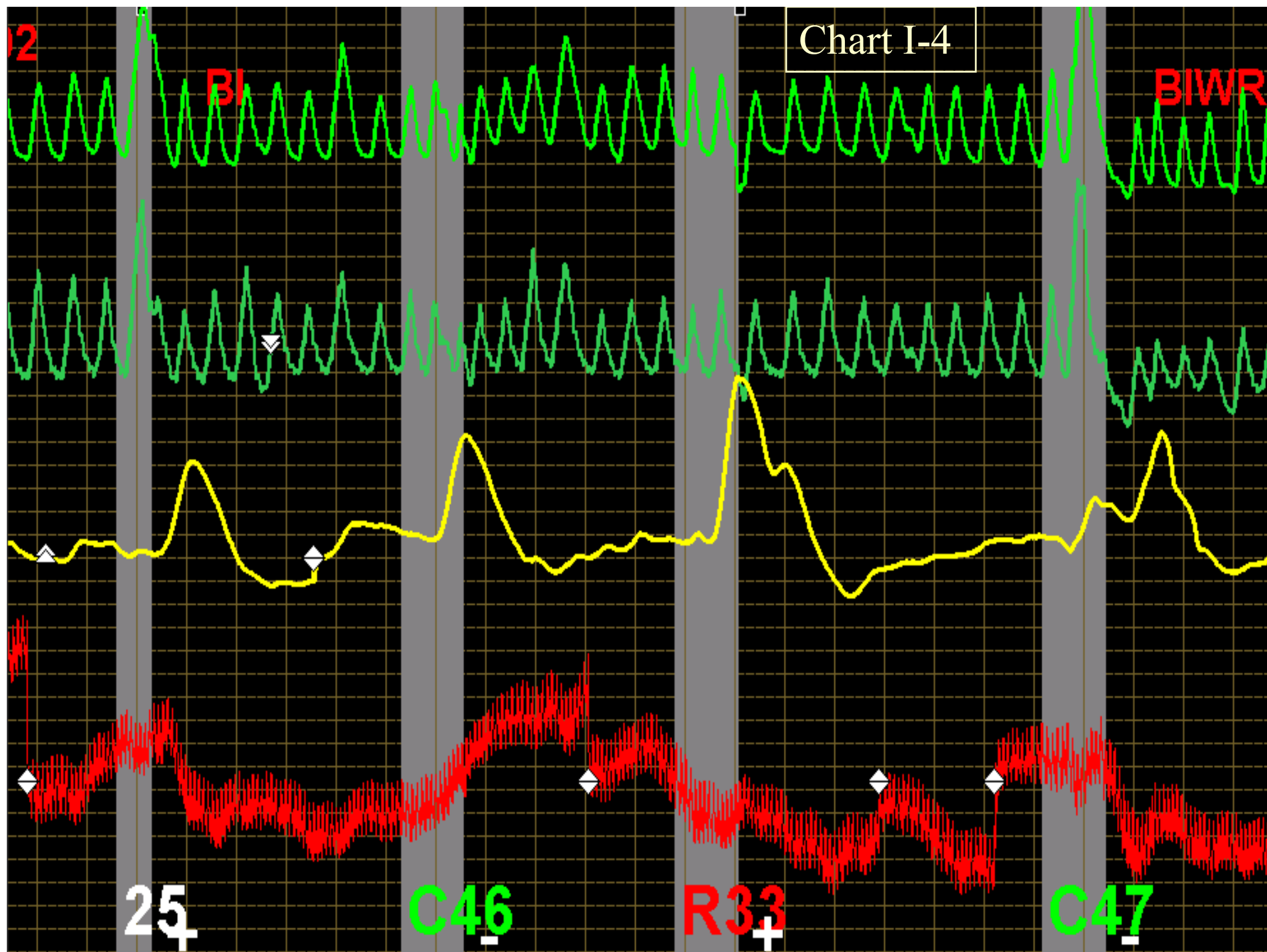


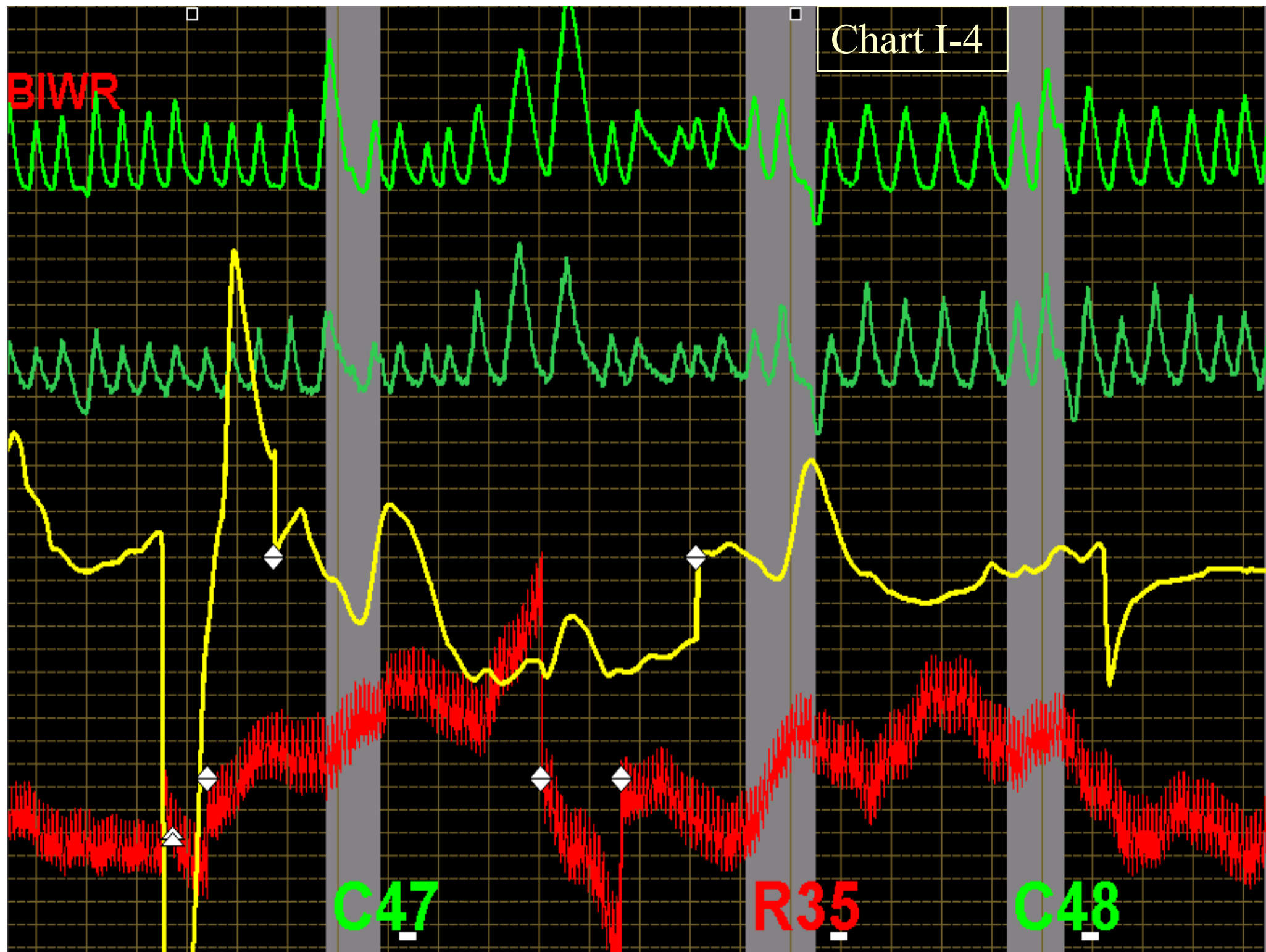
C48

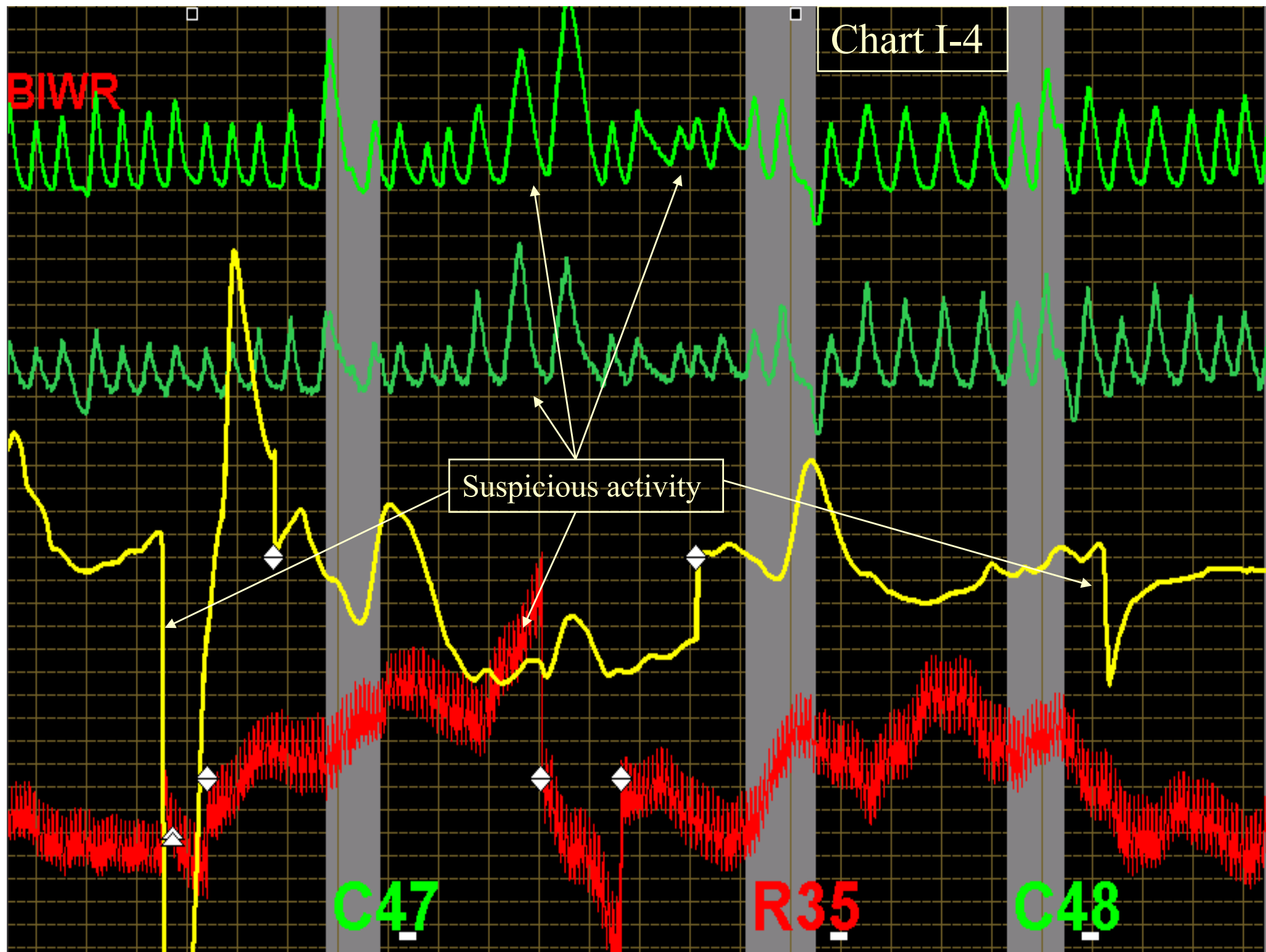
R35

C46

26_







Post-test

- Ed told John the test was inconclusive because of patterns similar to those in persons attempting CMs. John did not pass the test.
- John: “What is a countermeasure?”
- Ed: “John, you’re a smart boy. What do you think it means?”
- John: “Well, counter means against, so it’s something against the measure.” [John had not questioned this during the pretest discussion.]
- Ed did not interrogate (John’s father was in the waiting room), and John made no admission.

Ed Gelb's post script

- Evidence against John, in addition to anonymous letter, included two independent decisions by handwriting analysts.
- During pretest, John claimed he had gotten a higher SAT score than Mike. ETS says not so; John scored 600, Mike scored 763. This establishes motive.
- Ed Gelb uses ACM of telling subject up front CMs don't work. But John beat the previous examiner. When Ed's TI showed he wasn't being fooled, John backed off on using CMs in last two charts, went DI. As test progressed, Ed's credibility increased, Internet's credibility decreased.
- PolyScore scored final two charts DI ($p = 0.96$).

SAT presumed CMs: summary



- Pretest (behavioral).
 - Lied during pretest
 - Denied Internet research
 - Claimed he got higher SAT score than Mike
 - Claimed had broken his arm
- Numbers test
 - Tried to avoid a peak by creating reactions to numbers immediately preceding and following the critical item. Did not focus on breathing; possibly bit tongue.

SAT presumed CMs:

Summary



- Chart I-1 & I-2:
 - Used DGW respirations on 1st OSI & both CQs.
 - Probable anal sphincter on CQs
 - U/I manipulation affecting EDR
- Post test:
 - Played dumb re knowledge of CMs
- Conclusion: Followed DGW's manual.
Insufficient data to know if he also read M&S manual, but logic suggests he probably did.

Significant events

- Late 1950s HoIS establishes 1st CM program
- 1979 DGW publishes CM manual
- 1984 Kalashnikov manual published
- 19?? 1st CM site goes online
- 1996 March DGW's CM manual goes online
- 2000 Sep 18 Maschke & Scalabrini manual

Doug Williams' replacement



- The next generation:
 - George W. Maschke
 - Gino J. Scalabrini



AntiPolygraph.org

- Officially opened 18 Sep 00
- Web masters are George Maschke & Gino Scalabrini
- Is an activist site.
 - They have a very active bulletin board
 - They distribute an excellent polygraph manual, with an extensive chapter on CMs



George W. Maschke aka CPT Jones

- Born about 1964. Graduated from Westhampton Beach HS in 1982.
- 1983 - enlisted in MI as interrogator. Became Arabic linguist.
- 1987 - ROTC scholarship to complete bachelor's degree
- 1989 - Baccalaureate in Near Eastern Studies from UCLA
 - Arabic & Persian (Farsi) languages (took French in High School)
- 1990 - Attended MIOBC at Ft. Huachuca (TS/SCI clearances). In reserves.
- Fall 1990 - starts Master's degree in Persian at UCLA Dept. of Near Eastern Languages & Cultures.
- Jan 1991 - Recalled to AD for Operation Desert Storm, attached to FBI's WMFO
- Jun? 1993 - completes Master's degree, starts on doctorate to be done by mid 1995
- Aug? 1993 - Recalled to AD for TRADEBOMB, attached to FBI's NYFO.
Upon release, returns to UCLA. Remains in reserves.



George W. Maschke aka CPT Jones

- Fall 1994 - applies for FBI position.
- May 15, 1995 -- failed FBI polygraph exam
- Fall 1997 - Moves to Den Haag to work as a translator at the Iran-US Claims Tribunal
- mid-1998 - Still working on doctorate in Persian
- January 1999 - Re-interviewed by Army CI re security clearance BI. FBI had reported derog info to Army based on their polygraph.
- July 1999 - Discovers NoPolygraph.com; posts as Cpt. Jones.
- Sep 18, 2000 - Opens AntiPolygraph.org with Gino J. Scalabrini
- Nov 2002 – Posts first photo of self on his site

*Playmate of the Month,
Nov. 2002*



George, My Idol

December 2002



- Photo I first saw on 26 Dec 02; could have been posted as early as about 12 Dec.

Sample Maschke posting w/ photo

George W. Maschke

Especially Senior User




Posts: 1346



Polygraph Haiku: What is
polygraph? The Greek means
"many writings," but who can
read them?



 **Re: Intercept/Ed Gelb in LA--any experience?**

« Reply #51 on: 02/12/03 at 04:59:44 »

 quote  modify

PROAc,

None of the the individuals named on the American Polygraph Association web page you referenced are current APA officers (as your post implies). Note that they are merely listed as the authors of publications available from the APA.

 Logge

George W. Maschke
maschke@antipolygraph.org
My PGP Public Key: [2012AAF6](#)
Voice mail/fax: 1 (206) 666-4271
[iVisit](#) ID: George Maschke



WHO WILL POLYGRAPH THE POLYGRAPHERS?

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"...the theory and methods of polygraphic lie detection are not rocket science, indeed, they are not science at all."

Polygraph "Testing" Is a Fraud

THE DIRTY LITTLE SECRET behind the polygraph is that the "test" is fundamentally dependent on your polygrapher *lying to and otherwise deceiving you*. Among other deceptions, you can expect to be misled about the function of the so-called "control" questions (your polygrapher secretly assumes your answers will be untrue), the function of irrelevant questions (they don't show a "baseline for truth" and are not even scored), and the purpose of the "stim" test (a gimmick designed to dupe you into believing the polygraph can detect deception). And in a "post-test" interrogation, anything goes. Don't be your polygrapher's fool. Educate yourself.

For the truth about polygraph "tests"
(and how to pass them)...

[Download The Lie Behind the Lie Detector](#) (739 kb PDF)

Polygraph Countermeasure Challenge Clock

On 28 January 2002, Dr. Drew C. Richardson reiterated his [challenge to the polygraph](#)

179

We have a new
voice mail/fax
number:
1-206-666-4271

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LET'S TELL PRESIDENT BUSH: END POLYGRAPH SCREENING NOW!

[READ AND SIGN THE ON-LINE PETITION](#)



**Is Celebrity Polygrapher
"Dr." Ed Gelb (a Past
President of the American
Polygraph Association)
Masquerading as a Ph.D.?**

- This Week in Polygraph History -

22 Jan. 1976 - U.S. House of Representatives Committee on Government Operations approves report no. 97-795, concluding, "It is the recommendation of the committee that the use of polygraphs and similar devices be discontinued by all Government agencies for all purposes."

For the truth about
polygraph "tests"
(and how to pass
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on Presidentially
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Initiative](#): Download,
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new
AntiPolygraph.org
posters at a college

"...the theory and
methods of

Apg.Ord re Ed Gelb — 27 Jan 03



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- ONE YEAR OF COWARDICE -

28 Jan. 2003 marks the one year anniversary of Dr. Drew C. Richardson's [polygraph countermeasure challenge](#). To date, no polygrapher has mustered the courage to accept it. Polygraphers publicly claim they can detect countermeasures (techniques for beating the polygraph). Why are they afraid to prove it? This banner is shaded yellow in their honor.

For the truth about
polygraph "tests"
(and how to pass
them)...

[Download The Lie
Behind the Lie
Detector](#)
(739 kb PDF)

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NSA poly coming
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Polygraph, Sent FBI
on Presidentially
Authorized Wild
Goose Chase](#)

LET'S TELL PRESIDENT BUSH: END POLYGRAPH SCREENING NOW!

[READ AND SIGN THE ON-LINE PETITION](#)



**[Is Celebrity Polygrapher
"Dr." Edward I. Gelb \(a Past
President of the American
Polygraph Association\) a
Phony Ph.D.?](#)**

"...the theory and
methods of
polygraphic lie
detection are not
rocket science,
indeed, they are not

Campus Poster initiative

Dec 13, 2002

 Author

Topic: Campus Poster Initiative (Read 79 times)

George W. Maschke

Especially Senior User



Posts: 1250



Polygraph Haiku: What is polygraph? The Greek means "many writings," but who can read them?



Campus Poster Initiative

« on: 12/13/02 at 00:03:59 »

 quote  modify

A key strategy in ending polygraph abuse, and ultimately bringing about the abolishment of polygraph screening, is to enlighten those whom our government would polygraph about "the lie behind the lie detector." College campuses are a key recruiting ground for agencies like the CIA, FBI, NSA, and others that subject applicants (and even interns) to this voodoo science. Thus, AntiPolygraph.org is beginning an initiative to inform students on America's campuses **before** their first seance with a polygraph chartgazer.


If you are a college student or faculty member, or if you live near a college campus, please print out and post copies of AntiPolygraph.org's new poster in appropriate places on your campus. You can download it as a PDF file here:

<http://antipolygraph.org/publicity/campus-poster-001.pdf>

After printing, use scissors to create detachable strips at the bottom with AntiPolygraph.org's internet address.

Appropriate places for posting would include public message boards and kiosks in dormitories, student unions, and individual departments.

Advantages of this approach, which has the potential to reach many thousands nationwide, are that it is inexpensive and can be done with a high degree of anonymity: you needn't fear official retaliation.

 Logged

George W. Maschke

maschke@antipolygraph.org

My PGP Public Key: 2012AAF6

Voice mail/fax: 1 (206) 666-4271

iVisit ID: George Maschke

Apg.Org re poster – 7 Feb 03



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- 10 Latest Posts
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"...the theory and
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Non campus poster
Dec 26, 2002

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Polygraph "Testing" is a Crapshoot

Your future is on the table. Before you allow anyone to play this high stakes game of craps with your reputation, be sure to learn the hidden rules.

The polygraph "test" is a pseudoscientific fraud that depends on your ignorance and fear.



The dice are loaded against you: polygraphy has an inherent bias against the truthful. And yet liars can beat the polygraph using countermeasures that polygraph operators cannot detect.

Don't be played for a fool. Educate yourself.

AntiPolygraph.org

(a non-profit, public interest website)

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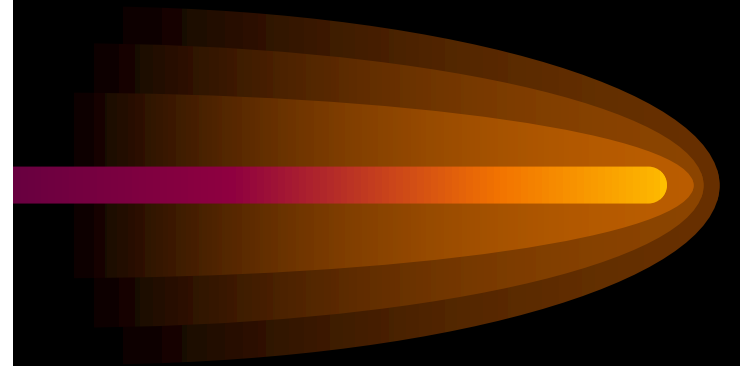
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Poster, Feb 7, 2003



PRECISION-AND-TO-FIT FOUR MILLION LACER OBJECT

9 Oct 00

Current time: 10/09/00 at 12:39:49

YaBBNews: Anyone may post a message here; registration is not required. To post anonymously, simply type a hyphen "-" as your e-mail address. For better anonymity and security, you can post through a proxy such as the [Secure Anti-Censorship Proxy](#) at MIT. If you would like to create a free, secure e-mail account for use with this message board, try [ZipLip](#).

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[YaBB: Action Alerts: New Polygraph Lawsuit](#)

Author **Topic: New Polygraph Lawsuit**

George Maschke

YaBB Junior Member



Posts: 3

New Polygraph Lawsuit

Date posted: 10/09/00 at 12:06:54

Mark Zaid has kindly provided AntiPolygraph.org with the full text of three recent filings in his federal polygraph litigation, including a brand new complaint filed on 5 October 2000. You'll find these documents at:

<http://antipolygraph.org/read.shtml#litigation>

If you are interested in taking similar action, or if you have information that might be useful to the plaintiffs in these cases, please contact Mr. Zaid by e-mail to ZaidMS@aol.com.

Apg home page 2/16/03



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Poster No. 1 Modified 14 Feb. 2003 -->



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[What We Want](#)

[Publications](#)

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[FAQ](#)

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"...the theory and
methods of
polygraphic lie
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Done

Apg home page, Feb 26, 2003

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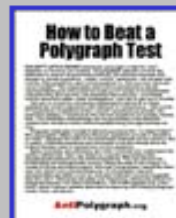
Federal Polygraph Examiner Advocates Public Speech Ban

**[A Response to Paul M. Menges Regarding the
Ethical Considerations of Providing Polygraph
Countermeasures to the Public](#)**

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FAQ

Message Board

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Polygraph News

Reading Room

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Polygraph Litigation

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Links

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Search

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Polygraph "Testing" Has No Scientific Basis

*Junk science fundamentally unfair to individuals,
a danger to national security and public safety*

Despite claims of better than 90% accuracy, polygraph "testing" has not been proven through peer-reviewed scientific research to reliably work at better-than-chance levels under field conditions.

This non-profit, public interest website is dedicated to telling the truth about lie detectors that the polygraph operators don't want you to know.

The dirty little secret behind the polygraph is that the "test" is fundamentally dependent on your polygrapher **lying to and otherwise deceiving you** (and your ignorance and fear). Among other deceptions, you can expect to be misled about the function of the so-called "control" questions (your polygrapher secretly assumes your answers will be untrue), the function of irrelevant questions (they don't show a "baseline for truth" and are not even scored), and the purpose of the "stim" test (a gimmick designed to dupe you into believing the polygraph can



Government-sponsored quackery...

**For the truth about
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[Letter to the West Virginia House of Delegates Judiciary Committee](#): House Bill 2780 would institute mandatory polygraph screening for sex offender probationers and parolees

[Failed the exam](#)

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"...the theory and

Anonymizers 2/16/03

AntiPolygraph.org

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02/16/03 at 14:03:54

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Registered Users: 701 • Posts: 6838 • Topics: 951

Please welcome [smithmm](#), our newest registered user.











AntiPolygraph.org Message Board

AntiPolygraph.org Message Board - News






AntiPolygraph.org Message Board - News			
Forum name	Topics	Posts	Last post
« Polygraph and CVSA Forums »			
 Polygraph Policy How the polygraph is currently used.	249	1855	02/15/03 at 13:17:45 by x_X_x
 Polygraph Procedure What goes on in a polygraph "test" and how to ensure that you pass.	250	1888	02/13/03 at 16:43:20 by Anonymous

Apg BBS table of contents 2/16/03

http://andpolygraph.org/cgi-bin/forums/rabb.pl

Forum name	Topics	Posts	Last post
« Polygraph and CVSA Forums »			
 Polygraph Policy How the polygraph is currently used.	249	1855	02/15/03 at 13:17:45 by x_X_x
 Polygraph Procedure What goes on in a polygraph "test" and how to ensure that you pass.	250	1888	02/13/03 at 16:43:20 by Anonymous
 Share Your Polygraph or CVSA Experience Let others know exactly what went on during your polygraph or CVSA interrogation. Feel free to include agency names, polygraph questions, etc.	197	1645	02/15/03 at 18:23:54 by Skeptic
 The Lie Behind the Lie Detector Post your comments and suggestions for new editions here.	18	157	02/13/03 at 12:17:14 by deras
 Action Alerts & Announcements Efforts to put an end to the polygraph and upcoming events.	56	232	02/09/03 at 05:31:34 by Codebreaker
 Pending Federal Lawsuit This section will provide regular updates regarding the ongoing lawsuit against several federal law-enforcement agencies challenging the use of pre-employment polygraphs.	7	21	12/11/02 at 16:34:37 by The_Breeze
 California Polygraph Reform Initiative Help abolish lie-detectors from the workplace in California. Share information and ideas, and network here.	7	75	04/26/02 at 19:14:54 by MissionPoly-ban
 CVSA Computer Voice Stress Analysis--polygraphy's sister pseudoscience.	25	140	12/16/02 at 23:06:20 by Administrator
 Post-Conviction Polygraph Programs Discuss polygraph "testing" programs for probation, parole, and other court-ordered programs here.	19	146	01/23/03 at 20:06:38 by orolan
 Off-Topic Posts This section is for posts not directly related to polygraphy or CVSA	30	130	02/01/03 at 11:51:31 by Twoblock

Apg BBS table of contents 2/16/03

	Off-Topic Posts This section is for posts not directly related to polygraphy or CVSA	30	130	02/01/03 at 11:51:31 by Twoblock
« Employment Forums (Non-polygraph related) »				
	Police, Sheriffs', and Corrections Departments Discuss non-polygraph related aspects of local, county, and state law enforcement hiring processes here.	60	317	02/04/03 at 14:52:28 by THE_NEW_HOT_CHICK
	Federal Law Enforcement Post questions about FBI, Secret Service, DEA, US Customs, US Marshals Service, INS, and other federal law-enforcement agencies here.	20	112	02/14/03 at 10:45:48 by beech trees
	Intelligence Agencies This forum is for discussing the CIA, NSA, NRO, and other US intelligence agencies.	7	84	02/16/03 at 11:35:51 by anonymouse1
	Military Post questions and comments on the US Army, Navy, Air Force, Marine Corps, and Coast Guard here.	6	36	01/31/03 at 18:45:49 by False +

AntiPolygraph.org Message Board - Info Center

» Recent Posts



Recent Posts

View the most recent post from each of the 10 most recently updated topics on the board. "[CIA/NRO interview process ...](#)" is the most recently updated topic (02/16/03 at 11:35:51)

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Guests: 4

Registered Users: [George W. Maschke](#), [x_X_x](#)

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Note!

220

Policy BBS, 2/16/03

http://antipolygraph.org/cgi-bin/forums/1abb.pl?board=Policy


AntiPolygraph.org Message Board






Polygraph and CVSA Forums

Polygraph Policy

How the polygraph is currently used.

Pages: 1 2 3 4 5 6 7 »

 new thread

Subject		Started by	Replies	Views	Last post
	 FBI Relies on Polygraph to Dismiss Terror Report	George W. Maschke	6	108	02/15/03 at 13:17:45 by x_X_x
	 Deception	Concerned Patriot	2	59	02/14/03 at 17:18:27 by CP
	 Paper on polygraphs....	RASCAL	1	42	02/13/03 at 13:08:27 by Poster-Boy
	 NSA Application Process	anon1234	2	75	02/10/03 at 13:51:21 by False +
	 Soviet Spy in Israel Beat Multiple Polygraph Tests	George W. Maschke	2	105	02/10/03 at 07:22:49 by George W. Maschke
	 Anna Nicole Show to Feature Lie Detector	George W. Maschke	2	51	02/09/03 at 16:30:55 by George W. Maschke
	 DoD Polygraph Program Report for FY 2002	George W. Maschke	0	47	02/05/03 at 12:59:21 by George W. Maschke
	 The FBI, the Polygraph, and the CIA Spy Suspect	George W. Maschke	11	326	02/04/03 at 07:25:11 by Fair Chance
	 Counterintelligence Scope / TES polygraph	polygraph4u	4	96	02/03/03 at 20:10:53 by polygraph4u
	 Back to the Basics « 1 2 »	Inquest	61	1322	02/03/03 at 02:46:23 by sie
	 Source: Cuban Spy Montes Passed DIA Polygraph	George W. Maschke	21	1744	02/02/03 at 00:09:50 by George W. Maschke
	 Interesting perspective on poly screening benefits	Guest	9	89	02/01/03 at 15:11:39 by Fair Chance

Procedures (CMs) BBS, 2/16/03


Antipolygraph.org Message Board




Polygraph and CVSA Forums

Polygraph Procedure

What goes on in a polygraph "test" and how to ensure that you pass.

Pages: 1 2 3 4 5 6 7 »

 new thread

Subject		Started by	Replies	Views	Last post
	 When to pinch my cheeks	I need 2 lie	19	510	02/13/03 at 16:43:20 by Anonymous
	 Passing the Poly is easy	Peter Fonda	1	58	02/12/03 at 12:27:57 by steinj
	 Intercept/Ed Gelb in LA--any experience? « 1 2 »	Nobody	51	1423	02/12/03 at 04:59:44 by George W. Maschke
	 Certain things I did in College and then sum	Imagoodperson	11	324	02/09/03 at 00:08:00 by The Truth
	 Failed FBI polygraph, now trying for DOJ	anon1223	0	41	02/09/03 at 00:06:53 by anon1223
	 i want to be a police officer	louie_417	27	464	02/08/03 at 23:45:39 by The truth
	 Polygraph Countermeasure Challenge « 1 2 3 »	Drew Richardson	88	5787	02/08/03 at 21:59:17 by x_X_x
	 EPSQ AND LIFE POLY	jennifer	14	304	02/07/03 at 17:24:54 by Marty
	 I can't believe this place	Porthos	8	172	01/24/03 at 10:03:12 by Fair Chance
	 UK TV SERIES	chuck	2	53	01/23/03 at 20:51:40 by asdf1
	 Sinus Arrhythmia and Polygraphs	TiredOfPolygraphs	0	44	01/21/03 at 20:49:59 by TiredOfPolygraphs
	 TS clearance for the Army	Martin	16	535	01/16/03 at 06:53:53 by Guest
	 countering the polygraph « 1 2 »	AM-	49	984	12/24/02 at 01:22:40 by George W. Maschke
	 The Problem is the Examiner. not the Polvaraph	Eastwood	6	193	12/20/02 at 07:02:03 by Eastwood

Apg CM lecture announcement 10/22/02

Author

George W. Maschke

Especially Senior User



Posts: 1121



Polygraph Haiku: What is polygraph? The Greek means "many writings," but who can read them?



Topic: Gordon H. Barland to Speak on Countermeasures (Read 68 times)

Gordon H. Barland to Speak on Countermeasures

« on: 10/22/02 at 09:53:42 »

 quote  modify

Dr. Gordon H. Barland is scheduled to give a presentation on "Identifying and Preventing Countermeasures" on Friday, 25 October 2002 at a polygraph seminar to be held at the Holiday Inn Charleston House, Charleston, W. VA. The conference, which is sponsored by a number of state polygraph associations, including the [Virginia Polygraph Association](#) and the [Maryland Polygraph Association](#), begins on Thursday. According to the [seminar description](#) on the Virginia Polygraph Association website, the seminar is open to non-members, who will be charged \$175. According to the [seminar schedule](#) on the Maryland Polygraph Association website, Dr. Barland will be speaking from 8:00 A.M. until 5:00 P.M., with morning and afternoon refreshment breaks and a break for lunch.

One wonders how Dr. Barland is going to speak all day about a "identifying and preventing countermeasures" when no polygrapher has demonstrated the ability to do such. Dr. Barland's talk is presumably not based on any alleged classified government research, since the conference is open to people without national security clearances.

Perhaps Dr. Barland would care to demonstrate his ability to "identify and prevent countermeasures" by being the first to accept Dr. Richardson's [polygraph countermeasure challenge](#)?



« Last Edit: 10/22/02 at 10:07:38 by George W. Maschke »

 Logged

CM question re CIA, May 8, 2003

 Polygraph Procedure
 CIA Polygraph

« No topic | Next topic »

Pages: 1

 Reply  Notify of replies  Send Topic  Print

 Author

Topic: CIA Polygraph (Read 19 times)

guyincognito

New User



CIA Polygraph

« on: May 7th, 2003, 8:51pm »



Quote



Modify

Howdy,

I have my CIA polygraph coming up, and had a few questions about the test. I have read TLBTLD about 2-3 times, and also gone through most of the messages on this site.

1: The most important question I had was, does constricting the sphincter muscle or thinking exciting thoughts "guarantee" enhancing the cardio response. Is it full-proof^{???} 😊

2: Are the control questions (20 examples) mentioned on pages 84-85 of TLBTLD, if asked, always going to be control questions? What I'm trying to ask more specifically is, is the question about driving under the influence, always a control question or can it be a relevant question?

3: What is the best way to recognize control questions? The book has given tips, and also said that in the case of confusion, assume that the question is a relevant question. But what if I cant make out the difference in any of the questions, is there an easy way to detect control questions (so that I can employ the countermeasures)?

4: What "type" of polygraph test do they employ at the CIA? After reading through the book, and the website at best I can conclude that it will be the CQT, but was not sure.

Thank you in advance for any help/advice offered!



IP Logged

George W. Maschke

Especially Senior User



Re: CIA Polygraph

« Reply #1 on: Today at 12:32am »



Quote



Modify

GM success story 6/6/03

Did It Myself

Guest



Re: "how to sting the polygraph"

« Reply #20 on: Jun 5th, 2003, 9:25pm »



Quote



Modify



Remove



Hello...

I have used countermeasures on two polygraphs and passed both.

On both, I made sure I didn't allow my breathing pattern to change after answering the relevant questions (used a slight deep breath after some controls, slight increase in breathing rate after other controls..very subtle and not overexaggerated by any means).

I used the tac in the shoe trick on one polygraph (removed the inside removable padding from my dress shoe and stuck a tac through facing up just past my big toe so that when I was being hooked up to the machine I was able to plant my foot and force my foot in to position over the tack/place big toe over tac....then pressed down with increasig pressure as soon as recognized control question and held for 3-5 seconds).

On the other I used the tongue biting technique on controls, held for 3-5 seconds with gradually increasing pressure (both tac and tongue bite used until I felt a level of slight uncomfport, then held at that level).

Key is to act like you are up to absolutely nothing during your trip to take the poly..

Even go as far as using behavioral countermeasures during the interview (for instance, when asked about control question information I manipulatively acted all nervous and took a deep breath and moved my eyes to one side to make the examiner think that was my behavioral tendancy when lying).

You need to go in there and remember that those sons of bitces are going to be the ones that might cost you your job.

Look them straight in the face and lie to them, and then fuck them on the poly...

Peace

Query re CMs (May 15, 2003)

treetop

New User



Countermeasures

« on: May 15th, 2003, 2:37pm »



Quote



Modify

Anal pucker

Exciting thoughts

tounge/lip biting

tack in the shoe (though not recommended)

Breathing countermeasures

What othercounter measures can one use to effect control questions?

Sweat countermeasures?

What about taking St. John's Wart or Kava Kava to help "mellow" a person out before the test to keep the nervousness down?

Any thoughts or advise on countermeasures not listed in "The Lie Behind the Lie Detector"



Posts: 3



IP Logged

Answer to query (May 17, 2003)

George W.
Maschke

Especially Senior User



Polygraph Haiku: What is polygraph? The Greek means "many writings," but who can read them?



Re: Countermeasures

« Reply #1 on: Today at 4:55am »



Quote



Modify

Scopolamine, an anticholinergic drug used in anti-nausea preparations for motion sickness, can suppress reactions on the electrodermal channel. It is conceivable that this might be helpful as a countermeasure to the Relevant/Irrelevant technique, to inhibit reactions to the relevant questions. But it might not be as helpful with the much more commonly used "Control Question Test."

I don't know about St. John's Wart or Kava Kava, but see the message thread [meds to alter reactions](#) for more on pharmaceutical countermeasures.




IP Logged

George W. Maschke
maschke@antipolygraph.org

Query: CMs too strong? (May 16, 2003)

 Polygraph Procedure

 Countermeasures Too Strong?

[« Previous topic](#) | [Next topic »](#)

Pages: 1

 [Reply](#)  [Notify of replies](#)  [Send Topic](#)  [Print](#)

 Author


Topic: Countermeasures Too Strong? (Read 60 times)

sham

New User




Posts: 2

 **Countermeasures Too Strong?**

« on: May 16th, 2003, 11:00am »

 [Quote](#)  [Modify](#)

Ive read TLBTLD and I understand the countermeasures but the one thing Im not sure of is how not to over-do it. How do you know how much to do?

Do you just change your breathing for 20-30sec along with the anal-pucker and that will do it? What is too much? ^{???} 

 IP Logged

Maschke's reply (May 16, 2003)

George W.
Maschke

Especially Senior User



Polygraph Haiku: What
is polygraph? The Greek
means "many writings,"
but who can read them?



Posts: 1512



Re: Countermeasures Too Strong?

« Reply #1 on: May 16th, 2003, 12:50pm »



Quote



Modify

Note that in *The Lie Behind the Lie Detector*, we suggest a duration of 5-20 seconds for breathing reactions (*not* 20-30 seconds).

There is no sure way of knowing for sure how strong an anal pucker might be too strong. We suggest that submaximal effort be applied.

You might consider mental countermeasures as an alternative if you are concerned that an anal pucker might produce too strong a reaction.



IP Logged

George W. Maschke
maschke@antipolygraph.org
My PGP Public Key: 2012AAF6
Voice mail/fax: 1 (206) 666-4271
iVisit ID: George Maschke

Sham's next query (May 16, 2003)

sham

New User



Posts: 2



Re: Countermeasures Too Strong?

« **Reply #2** on: May 16th, 2003, 2:42pm »



Quote



Modify

Thanks for the input. What type of mental measures work best?

If you just alter your breathing and use a controlled anal-pucker will it produce a reaction higher than a relevant question reaction even if you are lying?



IP Logged

Maschke's reply (May 16, 2003)

George W.
Maschke

Especially Senior User



Polygraph Haiku: What
is polygraph? The Greek
means "many writings,"
but who can read them?



Posts: 1512



Re: Countermeasures Too Strong?

« Reply #3 on: May 16th, 2003, 4:10pm »



Quote



Modify

It is not clear which type of mental countermeasures might work best (mental arithmetic vs. thinking frightening, unpleasant, or exciting thoughts) for any particular individual.

One cannot be absolutely certain that augmented responses to "control" questions will be stronger than any reactions to relevant questions. One thing you need to be clear on is that there is no "Pinnochio response" that people produce when lying. One may or may not produce significant physiological reactions measurable by the polygraph when lying.

« Last Edit: May 16th, 2003, 4:11pm by George W. Maschke »



IP Logged

George W. Maschke
maschke@antipolygraph.org
My PGP Public Key: 2012AAF6
Voice mail/fax: 1 (206) 666-4271
iVisit ID: George Maschke

GM's rationale for providing CM info, 5/24/03

Thank you also for explaining what you meant by capabilities of the polygraph of which you believe some of us are ignorant. Perhaps "benefits" would have been a better word than "capabilities." I don't see any need for you to cite from your personal experience examples of cases that have been solved, or innocent people who have been exonerated, thanks to admissions/confessions obtained with the polygraph. This is part of the *utility* of polygraphy that I readily acknowledge. But this utility is not to be confused with *validity* (or any inherent "capability").

With regard to the robustness of polygraphy against countermeasures, the National Academy of Sciences concluded (at p. 8-2 of its [report](#)), "...the evidence does not provide confidence that polygraph accuracy is robust against potential countermeasures." Why should we believe you instead of the NAS?


You wrote:

Quote:

But, whether or not polygraph is robust against the use of countermeasures is not the point I raise when I reference your willingness to provide countermeasure information to anyone who asks. You can not possibly have any idea as to who you are helping, or what circumstances bring them to this site. However, it is rather obvious, you do not care. That is my point on this particular issue.

It is because of the waste, fraud, and abuse associated with employment-related polygraph screening that I (and others) see a compelling need for public dissemination of countermeasure information. I think the need for the truthful to protect themselves against polygraph abuse outweighs the polygraph community's need for public ignorance of polygraph procedure and countermeasures.

If there were a practical way to provide countermeasure information only to the well-intentioned, I would be inclined to adopt it. But there is no such way, is there? In order to reach those who legitimately need it, countermeasure information must be made available to all. Those in the polygraph community need to understand that "the genie is out of the bottle" when it comes to countermeasures, and it's not going back.

 IP Logged

Sacrifice relevant, May 30 2003, 7:08 AM

AntiPolygraph.org Message Board
Polygraph and CVSA Forums
Polygraph Procedure
Sacraficial relevent quetions

May 30, 2003

« No topic | Next topic »

Pages: 1

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 Author

Topic: Sacraficial relevent quetions (Read 2 times)

no_poly

New User



 **Sacraficial relevent quetions**

« on: **Today** at 7:08am »

 [Quote](#)  [Modify](#)

In a specific incident test regarding sexual fiedelity how should one handle a question like:

Do you intend to lie on this polygraph?

or

Have you been completely truthful?


or

Have you answered all these questions truthfully?

Control or relevent question? Produce reaction or not?



Posts: 1

 IP Logged

Sacrifice relevant, 2:44, 2:55 pm

no_poly

New User



Re: Sacraficial relevent quetions

« Reply #4 on: May 30th, 2003, 2:44pm »



Quote



Modify

Took my test today regarding sexual matters and passed.

Thanks to George for all his help



Posts: 6



IP Logged

George W.
Maschke

Especially Senior User



Re: Sacraficial relevent quetions

« Reply #5 on: May 30th, 2003, 2:55pm »



Quote



Modify

no poly,

Lest anyone should think your post above was sarcastic (since I had not yet posted in this message thread), perhaps I should note that I replied to the private e-mail that you sent me on this topic. 😊

The questions no poly asked about, "Do you intend to lie on this polygraph (examination)?" and "Have you been completely truthful?" are **relevant**, not "control" questions, and one would not want to augment one's reactions to them. Note that these questions are commonly used as "sacrifice" relevant questions and are not scored.

Note also, however, that in a technique called the "[General Question Test](#)" (GQT) such questions served as "concealed controls" in what otherwise appears to be a relevant/irrelevant format. The GQT was used by the U.S. Government for screening purposes. It is no longer taught at DoDPI and most persons facing a polygraph examination are unlikely to encounter it.



Polygraph Haiku: What is polygraph? The Greek means "many writings," but who can read them?



Posts: 1558

The Lie Behind the Lie Detector



George W. Maschke

&

Gino J. Scalabrini

2d edition, © 2002

Contents



1. On the Validity of Polygraphy
2. On Polygraph Policy
3. Polygraphy Exposed
4. Polygraph Countermeasures
5. Grievance Procedures
 - Appendices A – D
 - Bibliography

1. On the Validity of the Polygraph



- Polygraph Screening
- False Positives and the Base Rate Problem
- Specific-Issue “Testing”

2. *On Polygraph Policy*

- Doesn't the Government Know?
- The Joint Security Commission Report
- The Aldrich H. Ames Espionage Case
- The CIA's Reaction to the Ames Case
- The FBI Reacts
- The FBI Reacts...Again
- The Department of Energy Polygraph Program
- On the DOE False Positive Rate
- On the DOE False Negative Rate

2. On Polygraph Policy (cont.)

- The Case of Wen Ho Lee
- The Department of Defense Polygraph Program
- The Case of Petty Officer Daniel M. King
- The Marine Embassy Guard Scandal
- Other Agencies
- If They Know Polygraphy is Unreliable, Why Do They Rely on It?
- Polygrapher Bias
- Inflation/Fabrication of Admissions

2. On Polygraph Policy (cont.)

- The Case of David A. Tenenbaum
- Predetermined Outcomes
- How Can They Be So Blind?
- A Modest Proposal
- Summary

3. Polygraphy Exposed



- The “Pre-Test” Interview
- The “Stim Test”
- Reviewing the “Test” Questions
- CIA Applicants Beware!
- Question Types
- Relevant Questions
- The “Sacrifice” Relevant Question
- Probable-Lie “Control” Questions
- Directed-Lie “Control” Questions

3. Polygraph Exposed (cont.)

- Hypothetical “Control” Questions
- Concealed “Control” Questions
- Irrelevant Questions
- Symptomatic Questions
- The “In-Test” (Polygraph) Phase
- Chart Scoring
- The “Post-Test” Interrogation
- Other Polygraph Formats

4. Polygraph Countermeasures

- Just Say No
- Complete Honesty
- Two Types of Countermeasures
- Make No Admissions
- ...And Sign No Statements
- Polygraph “Tests” are Interrogations
- Recognizing Common Interrogation Tactics
- Make a Good First Impression
- Arrive Early to Avoid Being Late

4. Polygraph CMs (cont.)

- A Warning to U.S. Secret Service Applicants
- Remember, You Are Being Watched
- The “Pre-Test” Interview
- How Polygraphers May Expect Truthful Subjects to Behave
- How Polygraphers May Expect Deceptive Subjects to Behave
- Mind Games
- “So What Do You Know About Polygraph Testing?”

4. *Polygraph CMs (cont.)*

- Tips for Identifying “Control” Questions
- Ambiguity in “Control” Questions
- “Read” the Polygrapher
- Want to Get Anything Off Your Chest? No!
- Chart-Recording Manipulations
- Breathing Countermeasures
- Cardio Countermeasures
- Countermeasures and the “Stim Test”
- Practice Makes Perfect

4. *Polygraph CMs (cont.)*

- What About the Relevant Questions?
- Countermeasures and the Relevant/Irrelevant “Test”
- It’s Not Over Till It’s Over
- To Explain or Not to Explain Responses to Relevant Questions
- Don’t Stay for a “Post-Test” Interrogation
- Can’t Polygraphers Detect Countermeasures?
- What If I’m Accused of Employing Countermeasures?
- An Anecdote
- Keep Notes!

5. Grievance Procedures



- Start Keeping Records
- Write a Letter of Protest
- Report Abusive Behavior
- File a Privacy Act Request
- Write your Elected Representatives
- Investigate Legal Action
- Post Your Experience on the Internet

Appendices



- Appendix A: modified General Question “Test”
- Appendix B: Zone Comparison “Test”
- Appendix C: Sample Privacy Act Request Letter
- Appendix D: Minnesota Polygraph Statute
- Bibliography

Differences Between Williams & Maschke



- Williams

- Old-time examiner
 - First-hand info
 - Fossilized
- Operates alone
- Average intellect
- Average education
- Source: Feedback from Ss
- Crusade driven by emotions

- Maschke

- Researcher, not examiner
 - 2d hand info
 - On the cutting edge
- Leader of a dedicated group
- Superior intellect
- Superior education
- Source: Scientific research
- Crusade driven by logic

Case Study # 4: *Sexual fraternization*



U.S. Army CID
David Reisinger, examiner
May, 2002

Case facts

- Location: Camp X-Ray, Guantanamo Bay, Cuba
- Date: 23 February 2002
- Scene: A party in a barracks.
- Action: A female ensign throws up after drinking too much. She is helped upstairs by a male Sgt. so she can brush her teeth. As they enter the room upstairs, they see a Lieutenant hastily climb off another Navy female ensign. The Lieutenant's shorts are down around his thighs, exposing his buttocks.
- The two people entering turn around and leave.

Investigation:

*Conduct unbecoming an officer;
attempted adultery; false swearing*

- The Lieutenant and the ensign admit being alone in the room together. She said she was not feeling well and lay down on the bed. The Lt. said he was present to make sure she was okay.
- Both denied engaging in any sexual activity. The Lt. denied his shorts were down.
- He agreed to take a polygraph test, which occurred on May 30, 2002 at Ft. Benning, GA.

The polygraph: Pretest interview



- The Lieutenant was a 33 year old, married white male, with a college education. He is an Army MP officer. He served as an enlisted man prior attending OCS, with tours in the U.S., Korea, and Kuwait.
- He reported no medical or psychiatric problems; excellent health; no pain; no drugs or medication in last 24 hours. No convictions.

The polygraph: Pretest interview

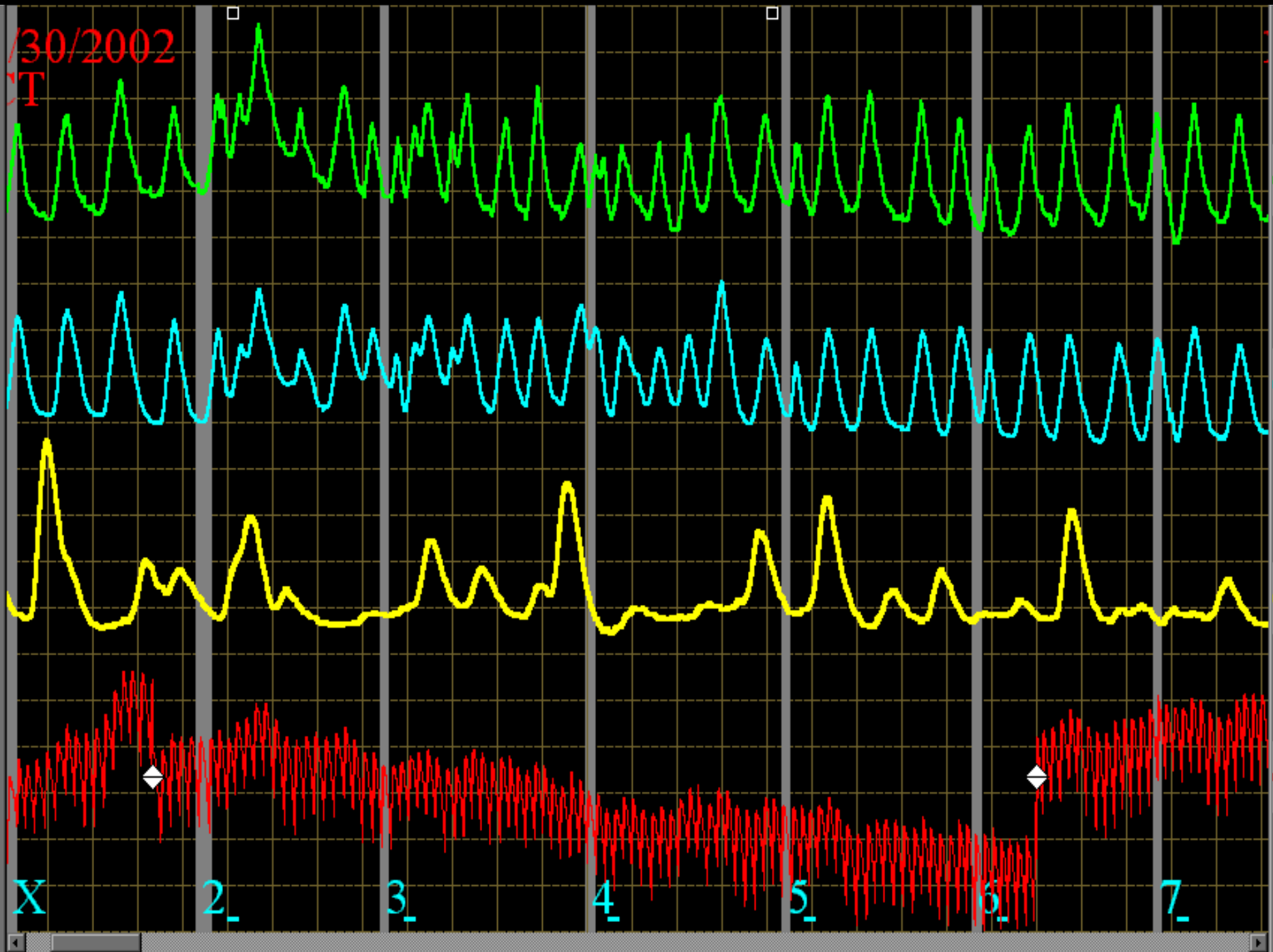


- He reported having had pre-employment polygraph tests, but never one from DOD.
- He reported he had not studied any literature concerning the polygraph in an effort to prepare for the exam.
- When asked what he knows about the polygraph, he replied, “As much as you do.”

The test

- David Reisinger conducted an acquaintance [numbers] test followed by a 3-chart Zone Comparison Test.
- During question review, Dave referred to the 3 RQs and 3 CQs as the “six relevant questions.” He introduced 3 irrelevant questions as “comparison questions.”
- On the numbers test, the Lt. chose no. 5.

Numbers test



ZCT question list

- 1A. Are you now sitting down?
- 2. Regarding whether you had any sexual contact with that woman, are you going to answer the questions truthfully?
- E3. Are you convinced I will not ask any unreviewed question?
- 1D. Are you now in the U.S.?
- C4. OTWYTMA, before this year, did you ever lie to anyone in a position of authority?
- 1C. Are the lights on in this room?

ZQT question list

- R5. DYH any sexual contact with that woman?
- C6. Before this year, DYE lie to avoid getting into trouble?
- R7. DYH any sexual contact with that woman in that room?
- E8. Is there something you are afraid I will ask you a question about, even though I told you I would not?
- 1B. Do you sometimes drink water?
- C9. OTWYTMA, before this year, DYE betray anyone's trust by lying to them?
- R10. DYH your shorts down when you were with that woman?
- 1A. Are you now sitting down?

Chart I-1 (first third)

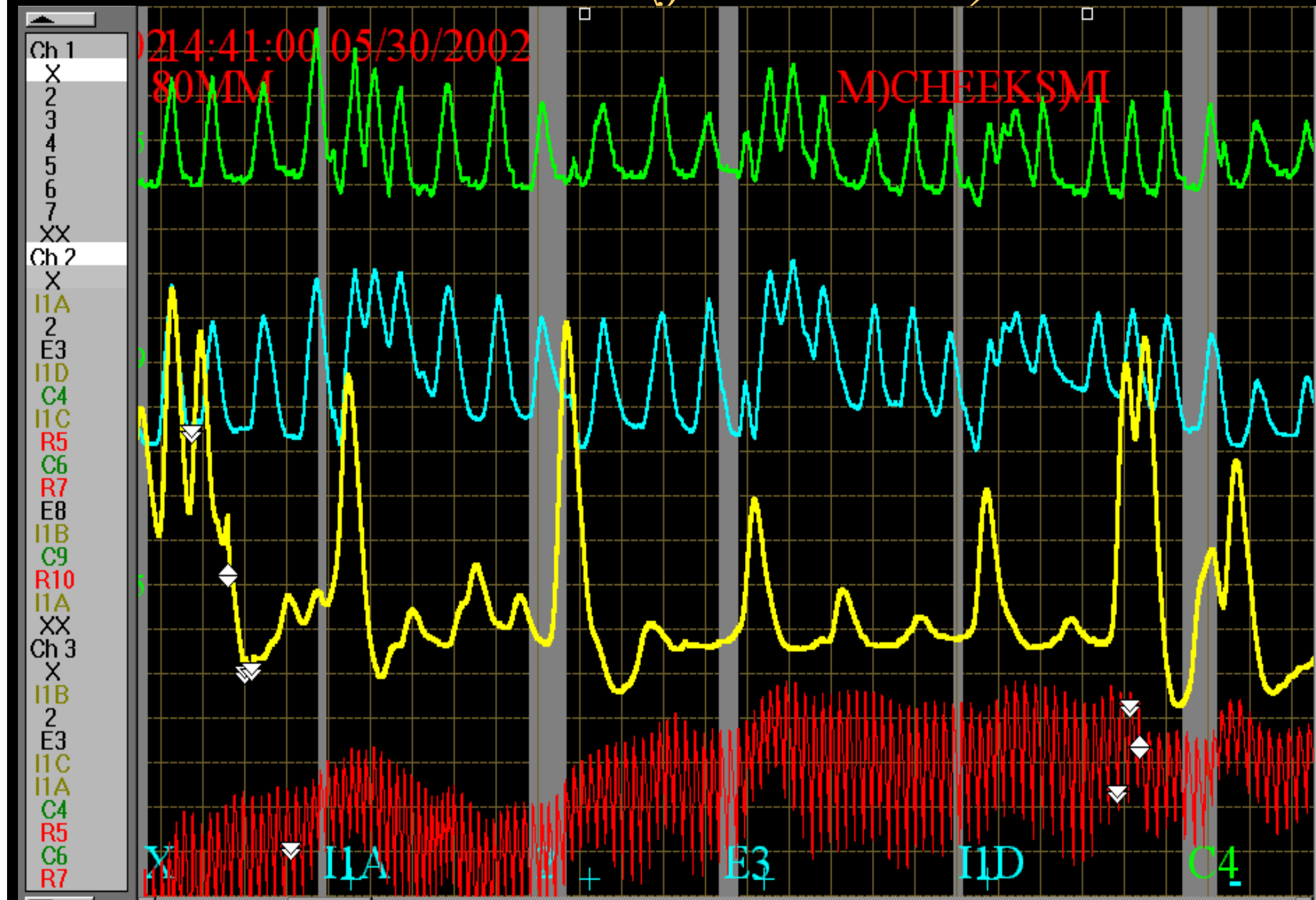


Chart I-1 (2nd third)

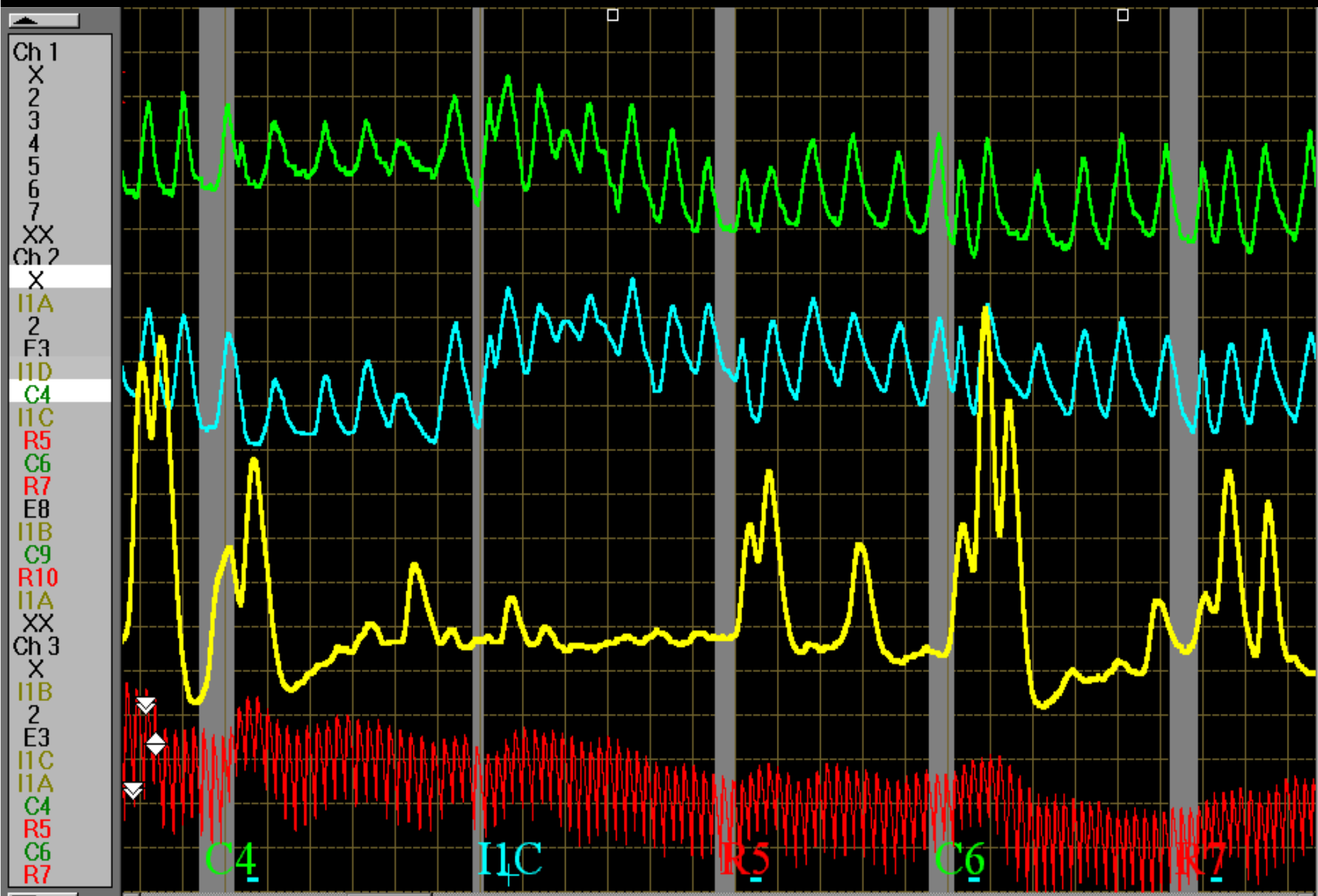


Chart I-1 (3rd third)

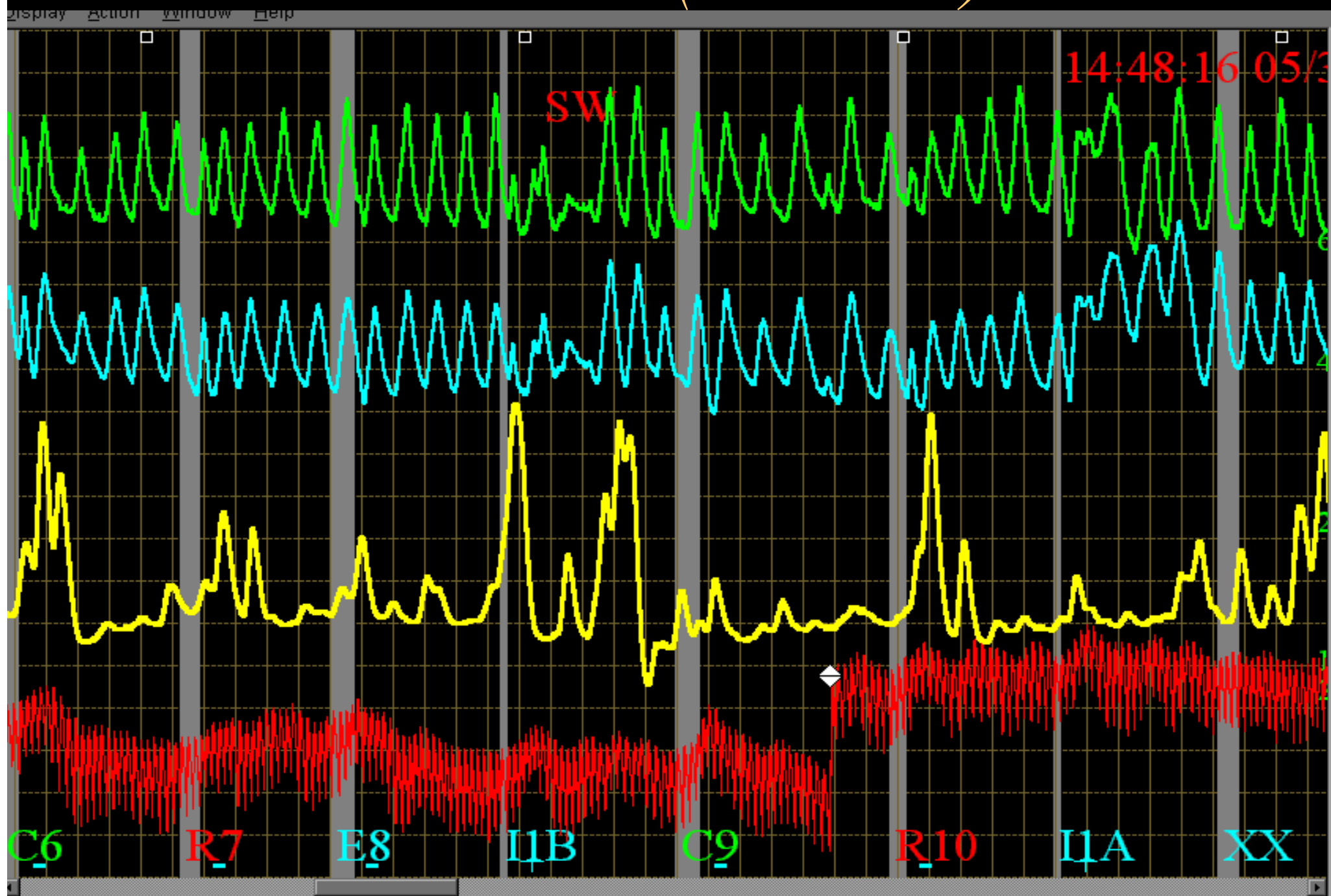


Chart I-2 (1st half)

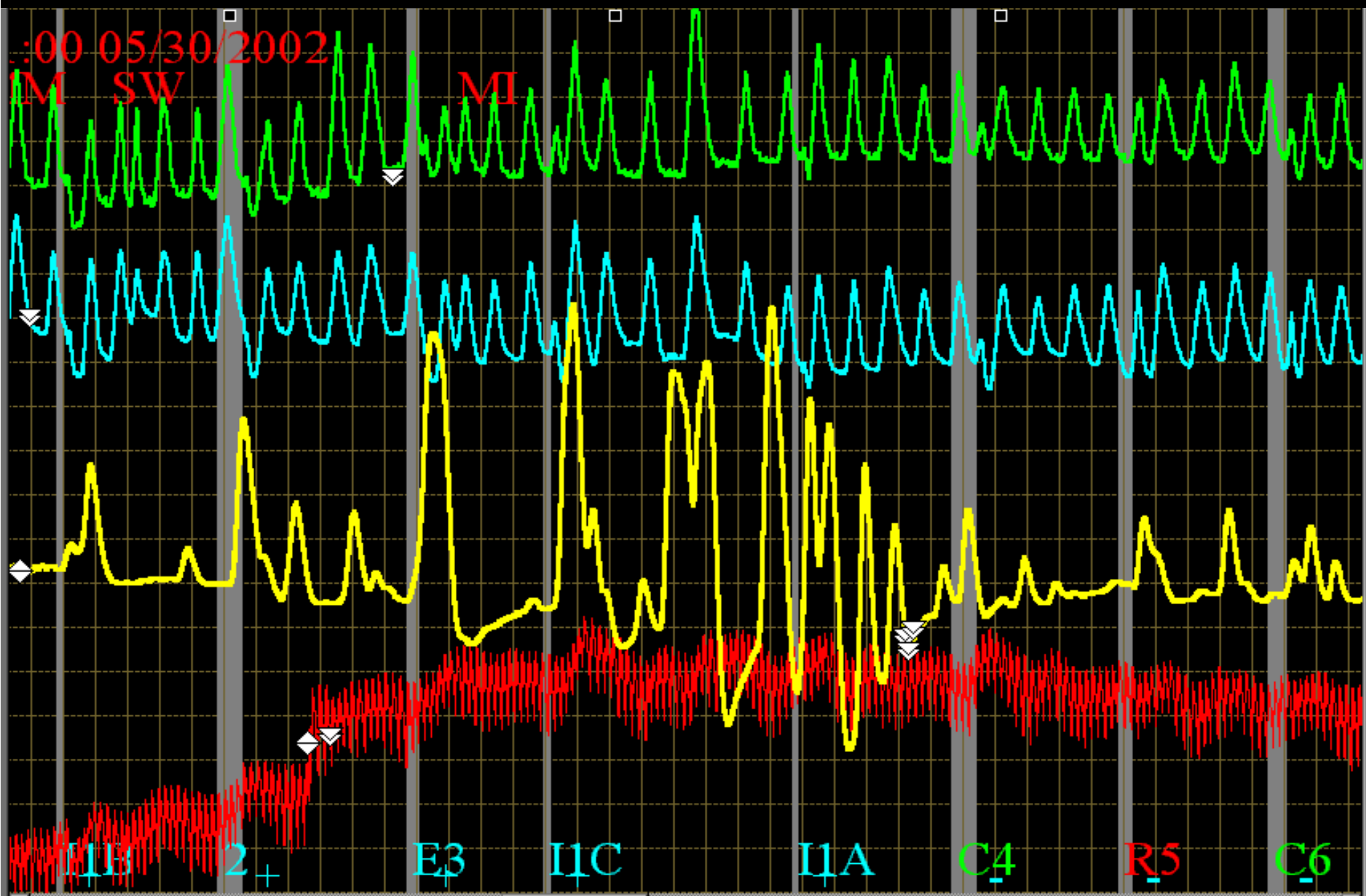


Chart I-2 (2nd half)

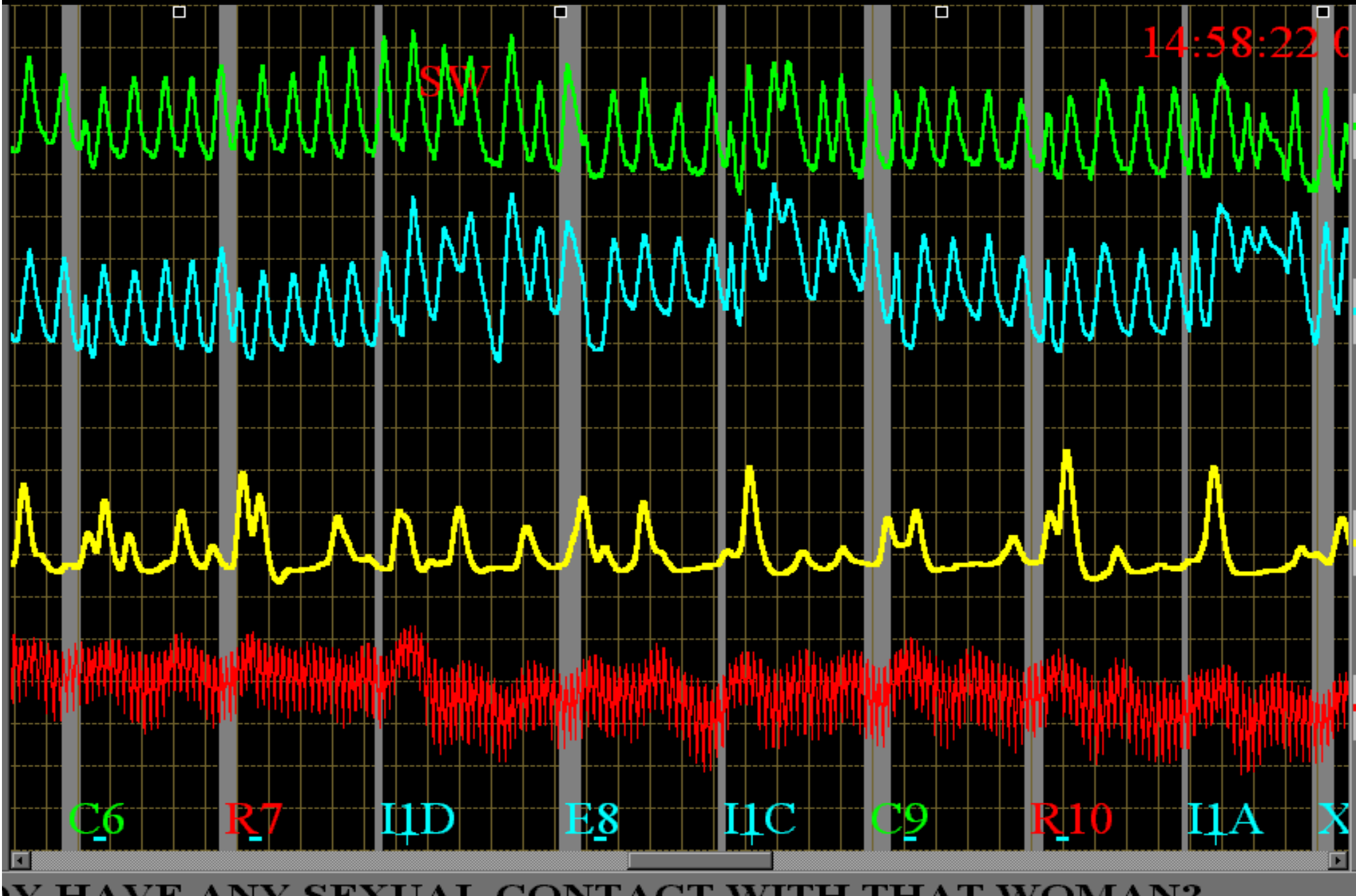
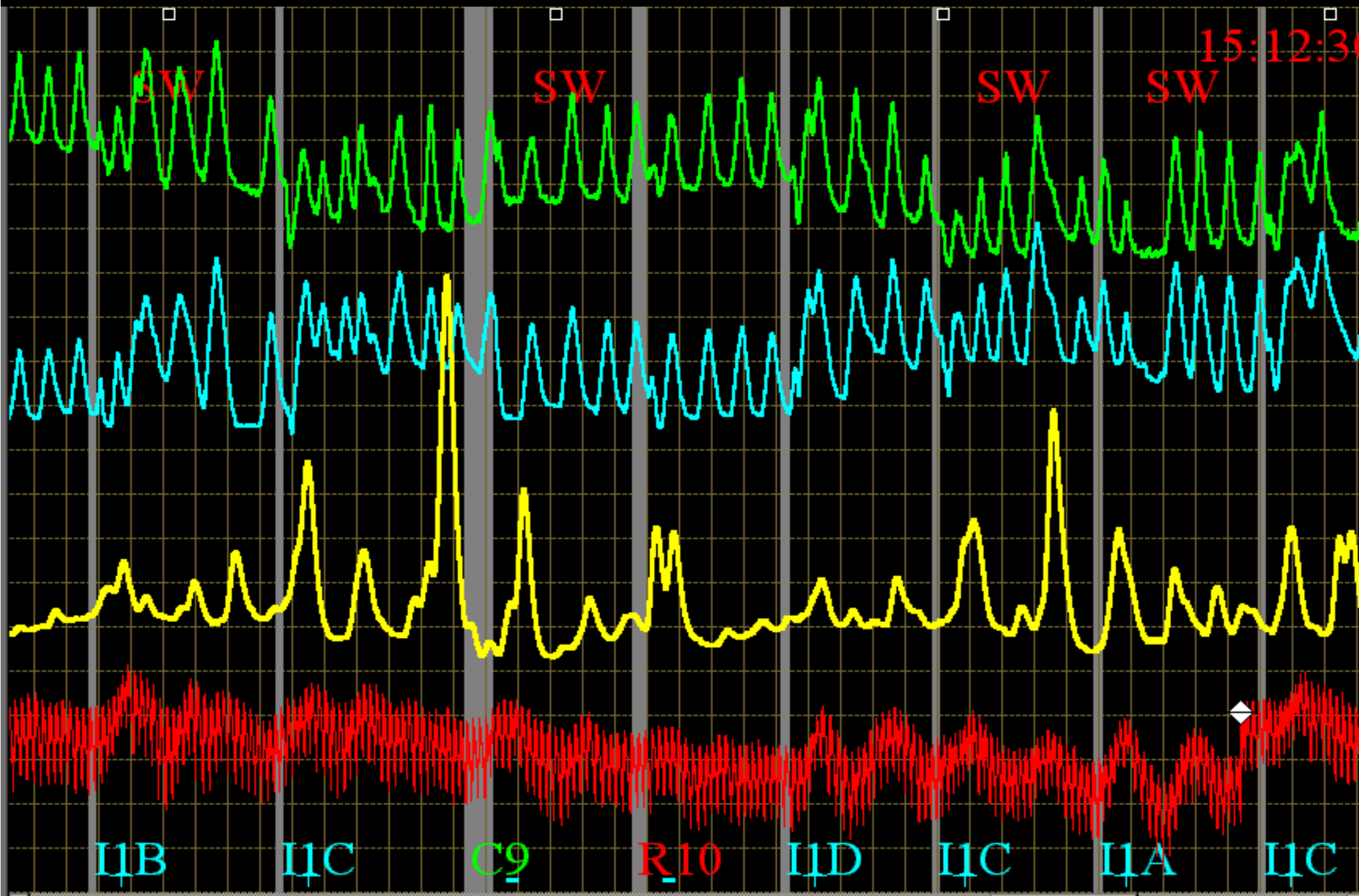


Chart I-4 (2nd half, playing with him)



Lykken's advice

Tremor in the Blood, (2d Ed., 1998) Chap. 19, Pp. 273-279.

- Inhibit RQ reactions
 - Some can do it; very difficult for most, probably impossible for many.
 - Know Q sequence in advance
 - Desensitization through rehearsal
- More effective to create CQ reactions
 - Rules require examiner to clear you, no matter how big your RQ reactions, if CQ reactions bigger.

Lykken's advice



- RQs: Sit calmly, breathe regularly
- CQs:
 - Bite tongue or lip - or -
 - Tighten anal sphincter - or -
 - Strongly contract toes - or -
 - Step on tack secreted in shoe - or -
 - Subtract 7s *seriatim* from 924
- Don't:
 - Tense arm or stomach muscles
 - Cough or hold breath or move around
- Better, permanent solution: work to abolish all polygraph testing

The M & S Countermeasure Chapter



George W. Maschke

Gino J. Scalabrini

Table of contents

Acrobat Reader - [Maschke, lie-behind-the-lie-detector.pdf]

File Edit Document Tools View Window Help

158%

4 Polygraph Countermeasures 104

- Just Say No..... 104
- Complete Honesty 106
- Polygraph Countermeasures:
 - How to Pass a Polygraph “Test” 108
- Two Types of Countermeasures 109
- Make No Admissions 109
- ...And Sign No Statements..... 110
- Polygraph “Tests” are Interrogations 110
- Recognizing Common Interrogation Tactics 111
- Make a Good First Impression 113
- Arrive Early to Avoid Being Late 113
- A Warning to U.S. Secret Service Applicants 114
- Remember, You Are Being Watched 114
- The “Pre-Test” Interview..... 114
- How Polygraphers May Expect Truthful Subjects to Behave 115
- How Polygraphers May Expect Deceptive Subjects to Behave..... 116
- Mind Games 118
- “So What Do You Know About Polygraph Testing?” 119

Behavioral CMs

7 of 176 8.5 x 11 in

Table of contents

Acrobat Reader - [Maschke, lie-behind-the-lie-detector.pdf]

File Edit Document Tools View Window Help

158%

Bookmarks

Thumbnails

Tips for Identifying “Control” Questions	120	Behavioral CMs
Ambiguity in “Control” Questions.....	123	
“Read” the Polygrapher	124	
Want to Get Anything Off Your Chest? No!.....	125	
Chart-Recording Manipulations	125	Chart CMs
Breathing Countermeasures.....	125	
Cardio Countermeasures	131	
Countermeasures and the “Stim Test”	132	
Practice Makes Perfect	133	Behavioral CMs
What About the Relevant Questions?	133	
Countermeasures and the Relevant/Irrelevant “Test”	133	
It’s Not Over Till It’s Over.....	134	
To Explain or Not to Explain Responses to Relevant Questions.....	134	
Don’t Stay for a “Post-Test” Interrogation	136	Behavioral CMs
Can’t Polygraphers Detect Countermeasures?.....	136	
What If I’m Accused of Employing Countermeasures?..	137	
An Anecdote	138	
Keep Notes!.....	139	
5 Grievance Procedures.....	140	

8 of 176 8.5 x 11 in

3 overall strategies



- Refuse to take test
- Tell *E* you know about TLBTLD & CQTs
- Countermeasure like to the max

What not to do!

- Don't take drugs (e.g. Meprobamate)
- Don't rub antiperspirant on fingertips
- Don't use meditation or hypnosis
- Don't wiggle toes
- Don't flex arms or cough
- Don't put tack in shoe

Behavioral CMs

Make favorable first impression



- Conservative haircut
- Dress professionally
- Polish your shoes
- Women: wear make-up, but not too much
- Be friendly. Smile. Look examiner in eye
- Answer Qs directly, w/ confidence and w/o hesitation. Don't mumble

Waiting room behavior

- Arrive early. USSS: eat good breakfast
- Don't fidget while waiting
- Read something highbrow
 - The Economist
 - Scientific American
 - New York Review of Books
 - A bestselling novel or professional book
- Or bring a briefcase with paperwork to work on

Pretest Interview



- Make no admissions!
 - Except minor ones to the controls
 - Sign no statements; e.g. I used MJ no more than x times at the very most.
- [M&S explain common interrogation strategies. Examiners play mind games to establish dominance. Play along. Let him think he's in control.]
- Keep your answers short
 - yes or no, where appropriate.
 - Avoid “Yes, basically” or “not really.”

“So what do you know about the polygraph?”

- *Don't* argue about the validity of this voodoo science
- I heard on TV that they're almost always accurate when used by a skilled examiner. Is that right?
- A friend of mine in law enforcement said not to worry, just go in and tell the truth, and you'll have no problem.
- I understand that polygraphs are a lot more accurate than those voice stress analyzers
- I read in the paper that the polygraph has been constantly improving with time and that the latest computerized polygraphs are very reliable

“So what do you know about the polygraph?”



- When I was in grade school, a polygraph examiner came and gave a demonstration to my class and showed us how the test is done using my teacher as a volunteer. She lied about a card she had picked, and the examiner caught her lie and was even able to figure out exactly which card she had picked!
- I heard it caught O.J. in a lie!
- I really don't understand how polygraph tests work.

Working up CQs

- M&S explain how to recognize CQs
 - Directed lie: Examiner tells you what they are
 - Probable lie:
 - Cannot be answered 100% truthfully with a “no” by the average person
 - Ambiguous, scope not clearly defined
 - Often preceded by a modifier, e.g. OTWYTMA
 - Read the examiner’s demeanor
 - Tries to manipulate you into a denial
 - When you ask for clarification, is he specific or evasive?

Chart countermeasures:

Respiration

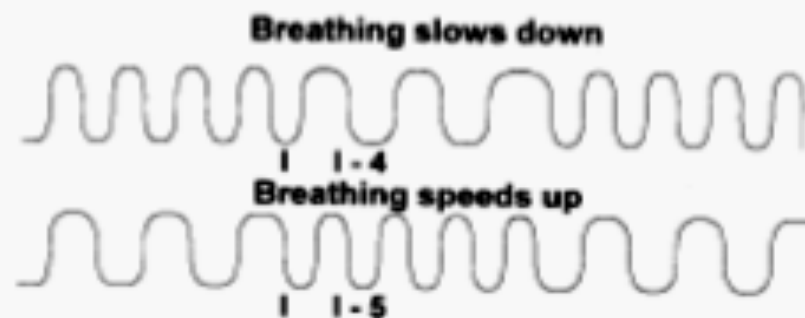


- Breathing is monitorable from moment sensors attached.
- Don't breathe slowly & deeply; breathe 15-30/min
- Continue this pattern long after last Q asked
- On test, use any of the 12 respiratory reactions taught by DoDPI
 - Start the moment you recognize a CQ or immediately after your answer
 - Change should last 5 – 20 secs
- Do *not* take a deep breath at any such manipulation!

DoDPI respiratory criteria

The first two scorable reactions, a respiration rate decrease or increase, may be produced by simply breathing more slowly or more rapidly, as illustrated in the following DoDPI graphic²²:

1. CHANGES IN RATE



DoDPI respiratory criteria

The third scorable reaction, a change in inhalation/exhalation ratio, may be effected by exhaling either more slowly or more rapidly than inhaling. The DoDPI graphic below illustrates slowed exhalation as compared with inhalation:

3. Change in inhalation/exhalation ratio



DoDPI Respiratory criteria

The fourth scorable reaction, an increase in amplitude, is effected by taking deeper (but not deep) and then progressively shallower breaths before returning to one's baseline breathing pattern:

2. Changes in Amplitude

Increase in amplitude



DoDPI respiratory criteria

The fifth scorable reaction, a decrease in amplitude (also known as suppression), may be produced by taking shallower breaths and then returning to one's baseline breathing pattern, as illustrated below:

2. Change in Amplitude

Suppression/Decrease in Amplitude



11-5

DoDPI respiratory criteria

The sixth scorable reaction is for all intents and purposes the same as the fourth, and may similarly be effected by taking deeper (but again, not deep) and then progressively shallower breaths before returning to one's baseline breathing pattern:

2. Change in Amplitude

Progressively increasing in amplitude followed by progressively decreasing in amplitude, timely with the stimulus.



1-3

DoDPI respiratory criteria

POLYGRAPH COUNTERMEASURES

129

The seventh scorable reaction is also like the fourth and sixth, except that the return to one's baseline breathing pattern need not be gradual:

2. Change in Amplitude

Progressively increasing in amplitude, timely with the stimulus and return to homeostasis.



11-5

DoDPI respiratory criteria

The eighth scorable reaction is similar to the fifth, except that breathing becomes shallower gradually before returning to one's baseline breathing pattern:

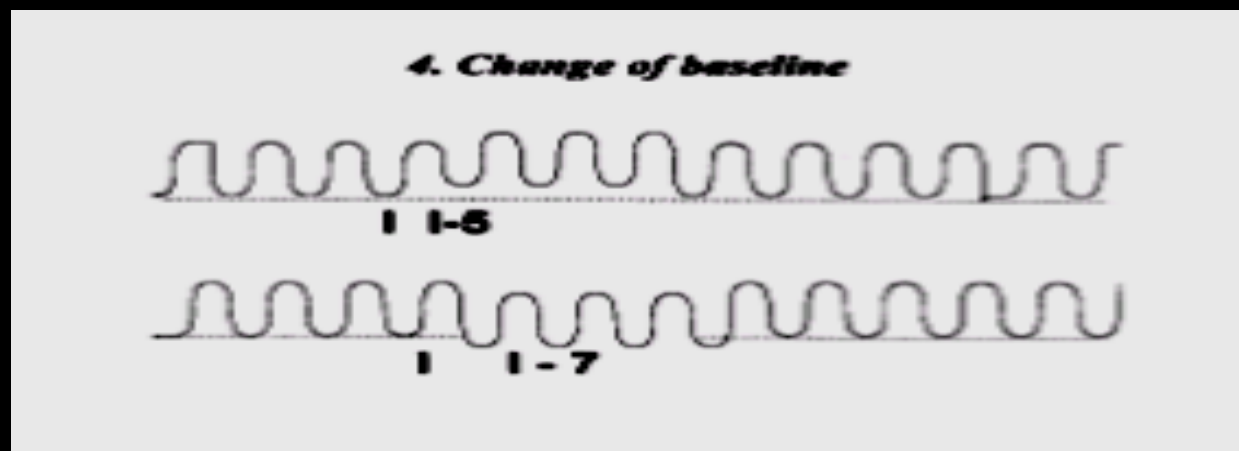
2. Change in Amplitude
Progressively decreasing in amplitude,
timely with the stimulus and return to
homeostasis.



I I - 5

DoDPI respiratory criteria

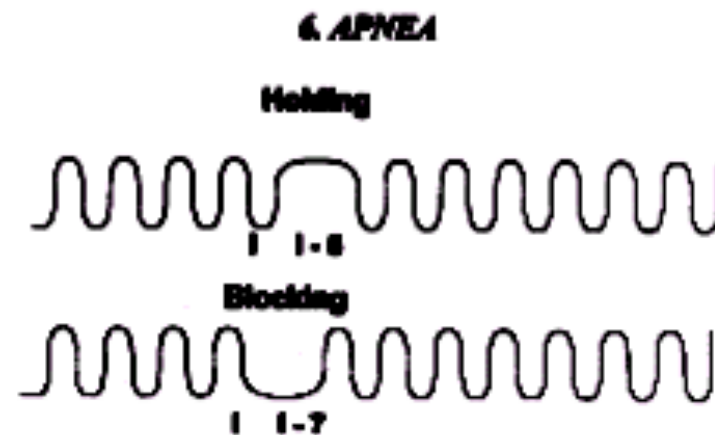
The ninth scorable reaction is a temporary change of baseline breathing pattern. A temporary rise can be created by inhaling more deeply and then continuing your baseline breathing pattern while retaining an extra volume of air in your lungs. Exhale the extra volume of air to return to your original baseline. Similarly, a temporary drop in baseline can be produced by breathing out more heavily and then continuing your baseline breathing pattern with a reduced volume of air in your lungs. Breathe in the lost volume of air to return to your original baseline. The following illustration shows both a rise and a drop in baseline:



DoDPI respiratory criteria

The tenth scorable reaction is a permanent loss of baseline. It may be produced in the same manner as described for the ninth scorable reaction, with the exception that one does not return to one's original baseline, but assumes a new one:





The eleventh scorable reaction is called “holding,” and is effected by holding one’s breath after breathing in. Although DoDPI considers this to be a scorable reaction, polygrapher James Allen Matte cautions that holding is usually voluntary and should be taken by the polygrapher as a suspected countermeasure if it occurs during the asking of a “control” question (Matte 1996, p. 374) Thus, it would be safer to avoid holding in favor of the twelfth scorable reaction, blocking, which is achieved by holding one’s breath *after* breathing out:

Cardio/EDR countermeasures



- Anal sphincter
 - Onset: as soon as you recognize a CQ or immediately after your answer.
 - Duration: 8 – 20 secs
 - Intensity: submaximal; a little goes a long way
 - Do not simultaneously tighten legs or flex buttocks; movement sensors can detect that.

Cardio/EDR countermeasures



- Bite side of tongue
 - Do it slowly
 - Hard enough to produce moderate pain
 - Do it 8 – 20 secs after recognition or answer
 - If you start when you first recognize a CQ, pause long enough to answer the question, then resume.
 - Practice in front of mirror

Cardio/EDR countermeasures



- Think exciting thoughts
 - Falling off a cliff
 - An encounter with a rattlesnake
 - Being raped at knifepoint
 - Square root of 223
- Start upon recognition of CQ or answer
- Continue 8 – 20 secs

Countermeasuring the stim test



- React to the number you actually picked
 - This makes the examiner think you really are a “screamer” and he won’t be surprised when you react strongly to the CQs.

What about the relevant Q_s ?

- Don't worry! *You* are in control, not the examiner.
- Breathe normally.
- Reaction okay as long as CQ reactions are larger.

Countermeasuring the RI test



- Don't worry!
- Test evaluation is subjective; behavioral CMs are of increased importance.
- Make no admissions!
- Prevent “consistent, specific, significant” by producing responses to 2 differing groups of 2 RQs within the different chart presentations.

Oct. 4, 2002

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- Run by
 - Steve Mickelson
 - Examiner for state troopers & local PD in Pacific NW
 - 4,000 examinations: 85% pre-employment, 15% crim
 - Peter Andrews
 - Federal examiner
 - 2,500 criminal suspects
 - Kyle Hunter
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Testimonials from our Polygraph and CVSA Manual Users

We receive many thank you letters everyday. We have included a few of these in our Web site for your viewing pleasure. If you have a success story, please write us and let us know. Our plans are to expand this page tremendously and with all of your positive experiences, we can do just that. We promise never to disclose any information that may be detrimental to you if you send us a testimonial letter. Thank you and keep em' comin'!

To Peter Andrews,

I just wanted to drop you a quick note and let you know that your polygraph manual allowed me to pass my pre-employment polygraph exam with flying colors. The xxxxx Highway Patrol polygraph examiner was completely stunned at how truthful of a chart I produced. I am hoping that you will publish this testimonial on your web site. I want everyone to know that your manual is so far superior to the other manuals that are being sold. The first manual that I purchased was from a gentleman who used to be a polygraph examiner for the xxxxx Police Department. That manual was extremely longwinded and talked about items that seemed irrelevant. Your manual, on the other hand, was brief and to the point. I was very impressed in the way you conveyed the information. I am the kind of person who wants to learn something quickly and easily and your manual did exactly that. I was also very impressed at the price you charged for this extremely important information. Your manual was half the price of your competitors and seemed to have twice the information. I want everyone to know that they should save their money and purchase your manual first. They'll never regret it. I also wanted to thank you for answering all of my e-mail



Exhibit A

Exhibit B, on the other hand, shows a person who has a very consistent and even flowing breathing pattern. This is a breathing pattern that you would have watching TV or sitting in bed and reading a book. Nice, smooth, and even inhales and exhales.

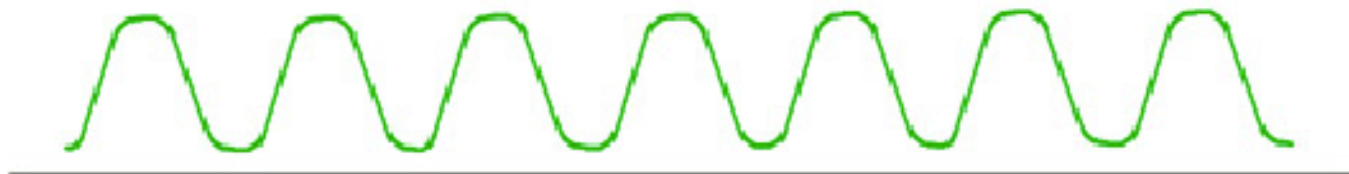


Exhibit B

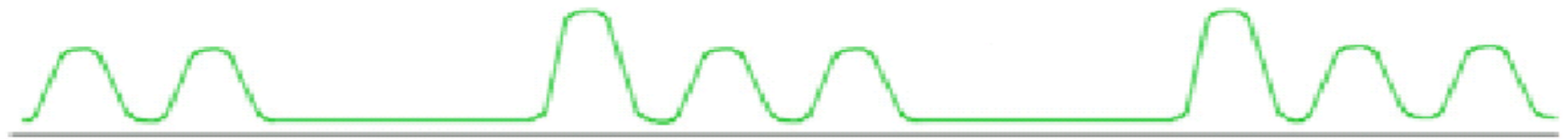
A normal breathing pattern should be maintained for all questions *except control questions*. When a control question is asked then it is up to you to produce a slight change to your normal breathing pattern. Make sure that the slight change you perform still appears to be “normal” for you. What we mean by this is that we want you to make a change to your breathing pattern but not a change that appears to be forced or obvious in anyway. Below are six different pneumo (breathing) variations that

Breathing pattern 1: Apnea

Breathing pattern #1 shows a person who is breathing normally and then holds their breath for about 6 seconds and then continues breathing normally again. This breathing pattern is the easiest to perform yet is the least desirable. The reason for this is that most people tend to not hold their breath while under an examination or other stressful event. If you feel that duplicating the other breathing patterns is difficult then use this pattern as a last result.



Breathing pattern # 2



Breathing pattern #2

Breathing pattern #2 shows a person who is breathing normally but then holds their breath after exhaling (for about three to four seconds) and then inhales more than normal and then breaths normal for two breaths and then holds their breath again after exhaling (for about three to four seconds) and then inhales more than normal again and then breaths normally from then on.

Breathing pattern #3

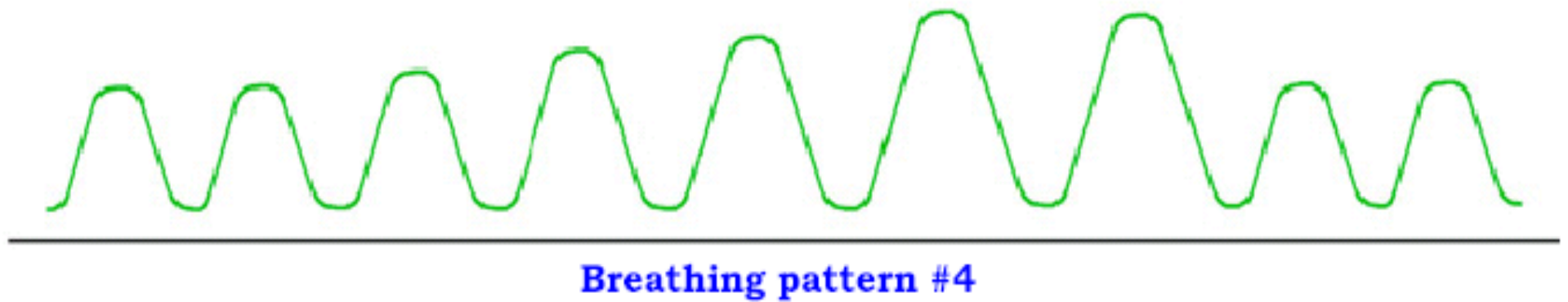
Breathing pattern #3 shows a person who is breathing normally but then begins to inhale a little more than is exhaled in a series of four minor breaths. As you can see by the chart this pneumo tracing shows that the person is always taking in a little more air each time they inhale then is being exhaled until it reaches a point where the person on their last breath fills their lungs with slightly more air than a normal breath. Then the person exhales and then takes two to three deep breaths to regain composure and then continues to breath normally.



Breathing pattern #3

Breathing pattern 4

Breathing pattern #4 shows a person who is using the most common and most widely accepted breathing technique seen by polygraph examiners. This pattern is what most of us would unconsciously do under the circumstances. This pattern shows a person who is breathing normally but then begins to inhale a little more each time. The first changing breath shows that the person inhales about 25% more than normal, holds slightly (about 1 second), and then exhales slowly, then inhales about 50% more than normal, holds slightly (about 1 second), and then exhales slowly, then inhales about 75% more than normal, holds slightly (about 1 second), and then exhales slowly. Finally the person takes two deep breaths to regain their composure and then breathes normally.



Breathing pattern 5

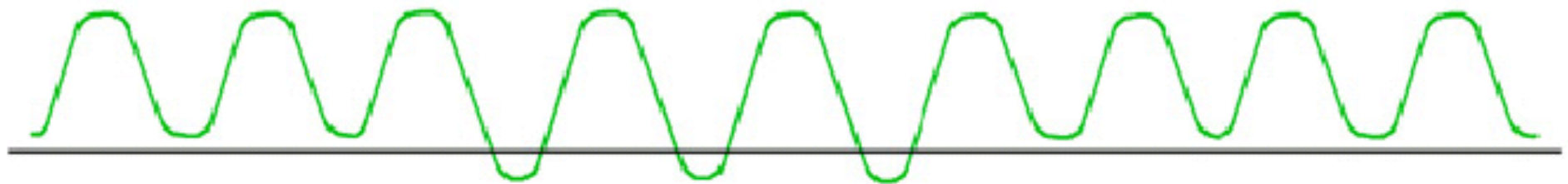
Breathing pattern #5 shows a person who is breathing normally but then takes several (four to eight) shallow breaths with the lungs about half full. After these shallow breaths the examinee will take one semi-deep breath to regain composer and then continue with normal breathing.



Breathing pattern #5

Breathing pattern 6

Breathing pattern #6 shows a person who is breathing normally but then begins to exhale more than normal and continues this pattern several times (two or three times) in a row. It is important that you do a slight hold (for about one second) at the bottom of your exhale. This breathing pattern can be difficult for the examiner to recognize so it should only be used if you have exhausted the other five breathing patterns.



Breathing pattern #6

As you practice these breathing techniques remember that you should use a different breathing pattern for each control question. Performing these breathing patterns should not be considered “Rocket Science” to you. It is not important that you replicate these breathing patterns exactly. What does matter is that show a change from what your normal breathing pattern is. By doing this you are telling the polygraph examiner that the control questions annoy you and the relevant questions do not.

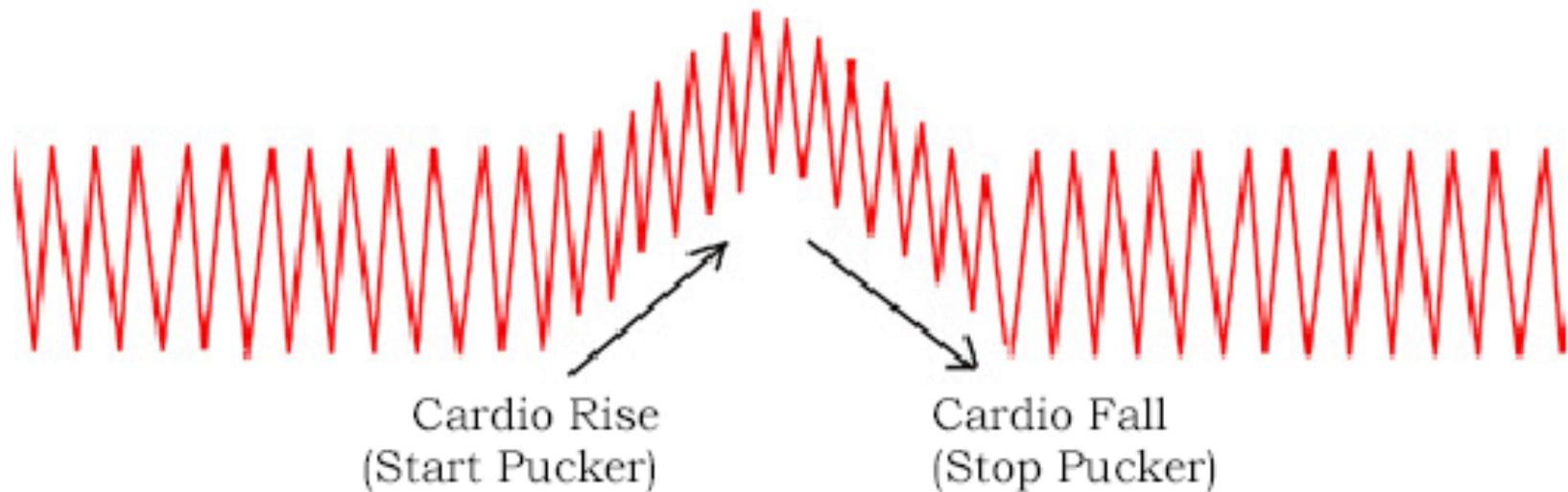
Controlling the GSR



- It's hard to control. Don't try to.
- It will follow the cardio manipulation.

The cardio [& GSR]

- On CQs:
 - Slowly tighten anal sphincter 40 to 50% of normal over 4-5 secs;
 - Then slowly relax sphincter over 4-5 secs



CM detection principles



- ALWAYS be alert for CMs, especially behavioral CMs.
- Look for clusters of CM indicators. Don't stop looking after finding one.
- Look for an underlying strategy, and any shifts in that strategy.
 - Provides invaluable insight into S's knowledgeability.
 - Provides clues as to source of knowledge, e.g. Williams or M&S

CM detection principles: pneumo

- Respiration is of renewed value in chart interpretation as a CM indicator -- especially Williams'.
- Thoracic respiration usually more productive.
 - When you see significant, unusual reactions on CQs...watch out!
- Look for abrupt offsets.
- Look for artifacts within controlled reactions that may correlate with other CMs, e.g. biting tongue or anal sphincter.

CM detection principles: cardio

- Correlate cardio with respiration to help diagnose cause of suspicious reactions; e.g., sudden respiratory artifact may signify onset or offset of sphincter contraction.

CM detection principles

- Decision-making *begins*, not ends, with numerical scoring.
- Look at *all* physiological information in the charts!
 - Tonic HR; tonic respiratory rates;
 - Tonic lability: cardio, pneumo, & EDA
 - Changes within charts
 - Changes across charts
- If CMs are suspected, I recommend you set aside an NDI numerical score; report your suspicion – *but not the detailed rationale behind it.*

CM principles

- Once you've determined the presence of CMs, evaluate the charts without reference to the CQs, looking for consistent, significant reactions to any of the relevant questions.
 - This can provide insight into the motivation to apply CMs, help distinguish between CMs and manipulation.

Differentiating between Williams' vs M & S's followers

- Behavioral symptoms
 - Post-test: reactions, how & when leaving
- Chart analysis
 - Respiratory patterns
 - DGW's 5 patterns,
 - Holding suggests DGW; avoidance suggests nothing
 - CMs on irrelevants suggests DGW; avoidance suggests M&S
- Note: Doing something or not doing something may also indicate a failure to read instructions properly; failure to understand them; inattention, forgetfulness, or stupidity.

GM v DGW 6/5/03

no_poly

New User



Re: "how to sting the polygraph"

« **Reply # 16 on:** Jun 5th, 2003, 10:34am »



Quote



Modify



Posts: 9

One major difference with Williams is that he instructs to use countermeasures for irrelevant questions as well as control questions. When I took one of my several polygraphs I tried to employ these countermeasures on irrelevant questions and it raised the flag to the examiner who had tested me before.

Then key is to understand the way a polygraph is scored and what is measured and compared. Although Williams book is informative, I would suggest following TTBTLD. I did and passed just fine. Practice with a friend or get a tape recorder, and you'll be ok.



IP Logged

Amused

Guest



Re: "how to sting the polygraph"

« **Reply # 17 on:** Jun 5th, 2003, 10:43am »



Quote



Modify



Remove



Hey, let's all gang up on Williams. As a matter of fact, let's rename this site ANTIANYPHINGBUTGEORGE.ORG



IP Logged



Polygraph Haiku: What is polygraph? The Greek means "many writings," but who can read them?



Posts: 1577

Wombat,

I am a co-author of *The Lie Behind the Lie Detector*. The countermeasure information included therein is not based on my or my co-author, Gino Scalabrini's, personal experience, but rather on the available polygraph literature, including peer-reviewed studies by Professor Charles R. Honts and collaborators and Department of Defense Polygraph Institute documentation.

I have read the 1996 version of Doug Williams' pamphlet, "How to Sting the Polygraph," which you will find cited along with other sources in the bibliography of TLBTLD. I believe that overall, TLBTLD is better researched, better documented, more informative, and better written than "How to Sting the Polygraph."

Key differences include:

- 1) Williams suggests breathing countermeasures and the anal sphincter contraction only, while TLBTLD also describes mental countermeasures and tongue biting;
- 2) Williams suggests that exhaling and briefly holding one's breath (blocking) is the least preferable breathing countermeasure; we have found no documentation to substantiate this notion, however. On the contrary, blocking is one of the Department of Defense's twelve scorable breathing reactions, and it may well be the most commonly occurring one. We see no reason not to use it.
- 3) Williams blurs the distinction between "control" and irrelevant questions; I think TLBTLD does a much better job explaining "control" questions and how to recognize them;
- 4) I understand that in the most recent version of Williams' manual (which I have not yet read), Williams suggests using breathing countermeasures and the anal pucker combined during the first chart collection, then just the anal pucker the second, then no countermeasures at all in any third chart collection. I don't think that Williams' suggestion of gradually diminishing countermeasures is necessarily well-advised, however, since it leaves open the possibility that one might show stronger reactions to the relevant questions than to the "control" questions. TLBTLD makes no such suggestion.

Back to CM overview



Taxonomy (Barland & Krapohl, 1996; Barland 1999)

- Chart
 - Mental
 - Physical
 - Pharmacological/Chemical
- Non-chart:
 - Behavioral
 - Operational
 - Third Party

All: Low-, mid-, & high-level sophistication


- 
- Point
 - Mental (some)
 - Physical (most)
 - State
 - Mental (dissociation, hypnotic amnesia)
 - Physical (SDB)
 - Pharmacological & Chemical

Chart CM Taxonomy



- Physical
- Mental
- Pharmaceutical & chemical

Physical CMs





Physical CMs

- Breathing
 - DBs, SDB, coughs, CT, irregular
- Motor movements
 - (press toes to floor, tense arm, Valsalva maneuver)
- Internal movements, e.g. anal sphincter
- Pain
 - Bite lip or tongue
 - tack in shoe
 - Note: All Physical CMs include a strong mental component.
(Barland, 1994)

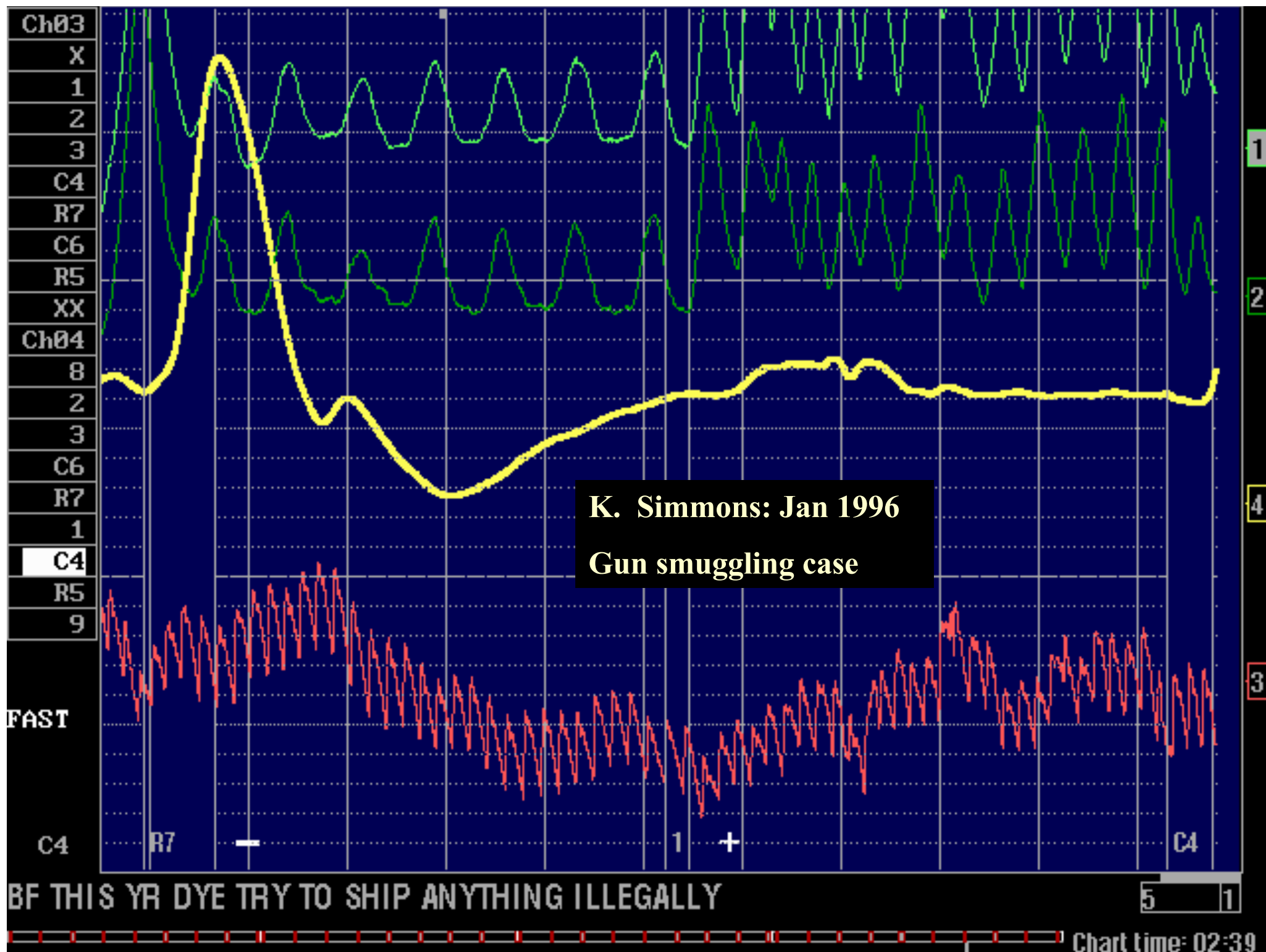
Physical CMs: Resp

- SDB probably most common low-level CM.
 - Not all SDB is CM; may be stress control
 - Both innocent & guilty want to “keep everything even.”
- Normal (95%) rate: 10 to 24 CPM; only 2 1/2% below 10
 - Gordon’s Golden Rule: Most respiration 12 BPM or slower is controlled.
- Periodic DBs: Pattern reveals Goal, strategy, sophistication
 - Random Low: Disrupt charts; goal is inconclusive
 - RQs Low: Disrupt charts; goal is inconclusive
 - Neutral Qs Low: Overshadow RQs; goal is NDI
 - CQs Mid, High: Overshadow RQs; goal is NDI
- Look for learning curve

Respiratory CM example - Low level

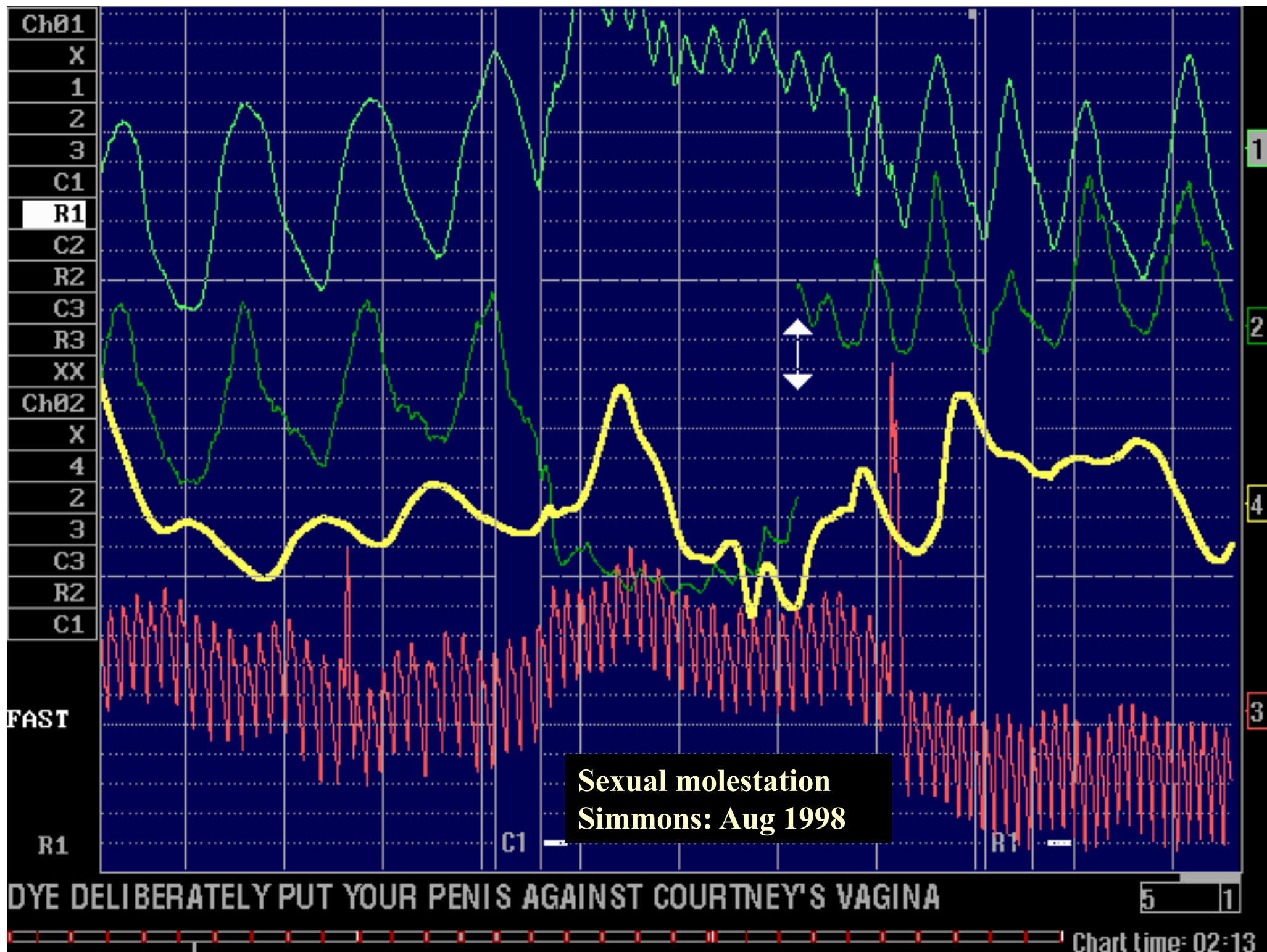


- Man suspected of shipping weapons overseas w/o authorization.
- RQs dealt with whether he knew a weapon was in the package he sent.
- CQs dealt with prior postal mis-shipments.
- Examiner noted increased resp rate on Q3, outside issue question. Possible CM?
- On final chart, *E* inserted IQ into sequence.



Respiratory CM example - Mid-level

- A convicted child abuser was in a treatment program. He failed 4 or 5 “maintenance” exams re whether he had made full disclosure. He claimed he was innocent of the original molestation that he had initially admitted to .
- After repeated, obvious respiratory CMs on the CQs, examiner Simmons interrogated.
- The subject admitted having gotten CM info from the Internet.



Detecting physical CMs



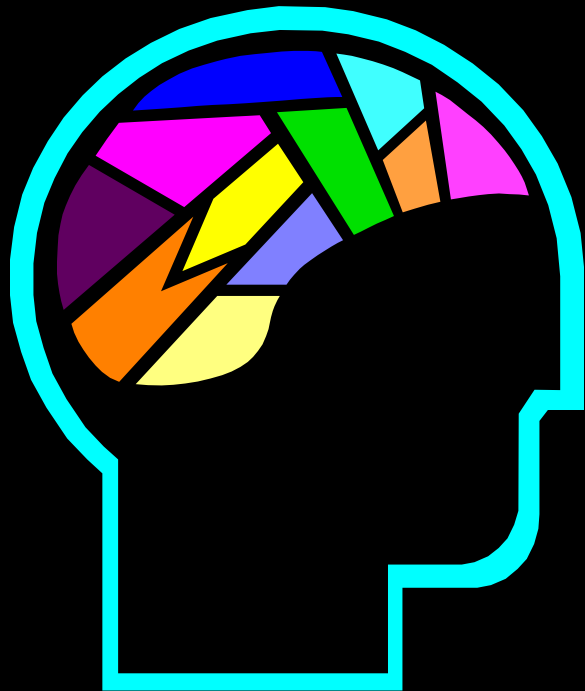
- Movement bar
- Observe S between Qs
 - Use video camera or assistant examiner
- Movement artifacts on chart
- Suspicious tracings: SDB, DBs, etc
 - **Surreptitiously record respiration**
- Debrief confessed Ss

If you suspect MCMs...

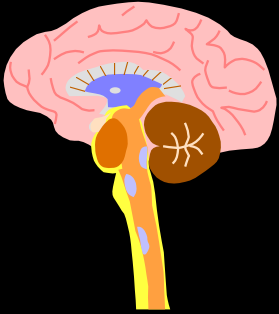


Most CM “hits” are TPs. Many “non-hits” are FNs

- If you think someone is using CMs...
he probably is!
- If you think someone’s not using CMs...
maybe he is, maybe he isn’t.
- In a high-level CM environment, DI means DI; NDI means NO.



Mental CMs

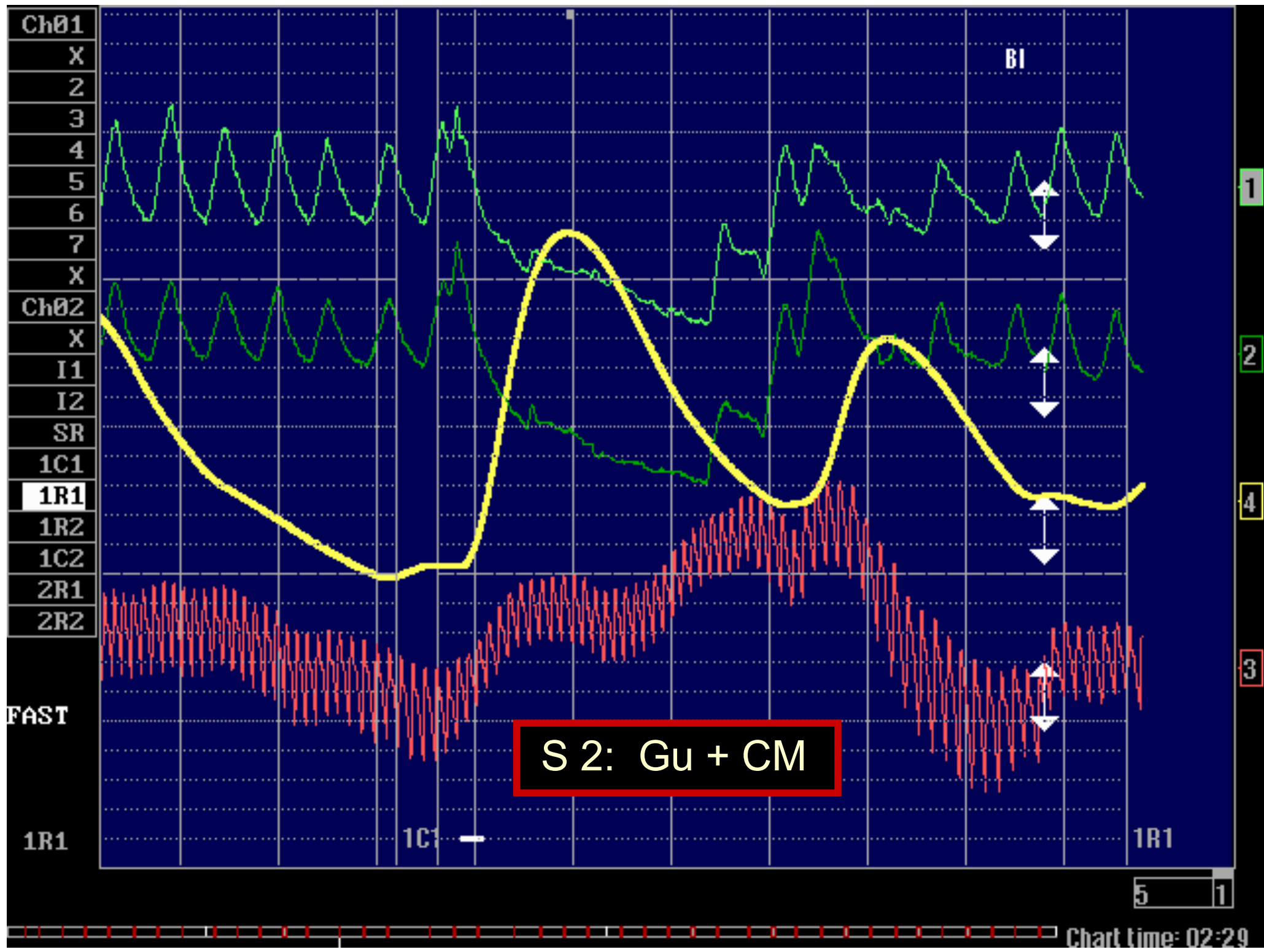


Mental CMs: Excitatory

- Exciting thoughts on CQs. Point
 - Emotional imagery
 - Mental arithmetic, cognition
 - Visualization
- Hypnosis Point
 - arousal levels State
 - amnesia
 - **Note: biofeedback is not a CM *per se*; it is a method of training used in mental & physical CMs.**

DLC breathing: Signature of a mental CM

- Can be caused by mental CMs
 - Indicates intense mental activity
 - Mental arithmetic
 - Visualizing a scene
- Defined
 - Not an OR
 - Often breathes deeper, faster
 - Looks unusual, not like a “normal” PLCQ response
 - Baseline(s) often shift and/or desynchronize
- Extreme example:



Inhibitory



- Relaxing thoughts/imagery on RQs. Point
- Rationalization State or point
- Dissociation State
- Desensitization/Conditioning State
- Hypnotic amnesia State
- Placebos (Prayer, charms, Cola) State

Rationalization



- S convinces self the RQ doesn't apply: "I can answer that truthfully."
 - Keeler, 1934: DY kill Mary?
 - Barland, 1987: HY committed an act of espionage?
- ACMs:
 - Word RQ to specific act; gut level
 - Have S word RQ and/or define it.

Dissociation



- Ignore emotional content of RQ by concentrating on spot on wall, answering automatically.
- **Detection:** vacant stare, delayed answers, soft answers, may look hypnotized.
- **CCMs:**
 - On POT, GKT have S repeat critical noun or verb
 - Reword Qs to require some “yes” answers
 - Ask unreviewed Qs after forewarning

Detection of mental CMs



- Staring fixedly into space
- Long pause before answering
- Answers very softly
- Lips moving (silent prayer), furrowed brow
- DLC breathing
- Debrief confessed Ss

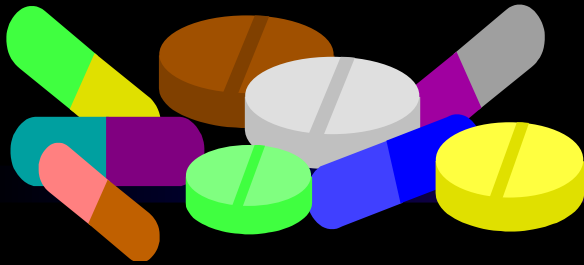
Mental CCMs



- **General instructions:** (1). “You’re doing s.t., and that’s making things look bad. As long as you’re telling the truth, you don’t need to ‘do’ a.t. else to get through the test.”
 - Challenge: “What am I doing?”
 - Answer: “You know perfectly well what you’re doing.”
- (2). “You’re still doing that. If you don’t knock it off, I’ll have to include that in my report. Remember: As long as you’re telling the truth....”
- **Dissociation:** Reword Qs to require mixed answers. If still no responses, ask unreviewed Qs after so informing S.
- **Imagery (DLC brthg):** If using DLCs, switch to PLCs.

Pharmacological

Taken internally



- Drugs of abuse
- “uppers”, stimulants
- Anxiolytics, tranquilizers, “downers”, alcohol
- Beta-blockers - target cardio
- Rx medications - not necessarily CMs
- OTC medications - ditto

Psychological effect (Arther, 1998)



- Aside from the pharmacological effect, what psychological -- placebo -- effect does the drug have?
 - Truthful person (Rx): None.
 - Guilty person (CM): Could be significant.

Detecting drugs



- **Behavior (pretest):** Note unusual pupillary diameter, slurred speech, rapid/slow speech, posture, motor activity.
- **Charts:** Unusually flat, labile, or plunging GSR; Unusually flat cardio or steady HR. Cheyne-Stokes respiration.
- **Urine specimen:** With QC approval, keep cups in desk drawer. Get specimen if charts suggest drugs.
- **Debrief** confessed Ss.

Cheyne-Stokes respiration

Cyclical waxing, waning of amplitude interspersed with apneas independent of Qs

Occurs when normal reflexes are abolished; last ditch effort by body to keep breathing. Often a precursor to death. Sometimes caused by drug overdose.



Drug CCMs



- If test N.O. or NDI, reschedule. Instruct S not to take non-prescribed drugs. Get urine specimen at outset of retest.
- Include drug Q on retest.

Chemical

Applied externally, degrade EDA

- Antiperspirants
- Hand lotions - not necessarily a CM
- Hair gel / oil sheen
- Shoe polish; gun oil
- Barriers (Liquid Gloves, paper)
- Soap under armpit - mental component
- BenGay - ditto



MYTHS

What we used to know... but it just ain't so!

- If someone tries to move, we'll see either the movements themselves or movement artifacts.
- If someone has taken enough downers to affect the test, you can tell it just by looking at him.
- CMs are not effective against an experienced examiner.



What we do know



- Except for refusing to take the test, there is no “silver bullet” which guarantees success; merely shifts in probabilities -- even with high level CMs.
- It is easy to create realistic-looking reactions at will.
- It's hard to suppress genuine reactions.
- CQ methodology is known to the educated public, especially those motivated to search the Internet. Incidence of mid-level CMs is rapidly increasing.
- The gap between mid- and low level CMs is widening; between mid- and high level CMs is decreasing.

Knowledgeability of Subject



- Determines strategies, types of CMs you will encounter.
- Varies along continuum from naïve to sophisticated.
 - Low level Not taught Usually easy to detect.
 - Mid level Self taught Can be hard to detect.
 - High level Trained Usually hard to detect.

Catalogs



- Delta Press
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The logic between the thumbtack technique here, by the way, is that if you do as stated the **polygraph** will end up showing a strong response (due to the pain) to every question, thus making it impossible to tell the lies from the truth. I wouldn't advise a *lot* of Valium or Xanax, as it may make it evident that you are on something (a few tablets, on the other hand, may very well help.) Just don't take Valium and also use the thumbtack trick at the same time, as they would cancel out (the idea behind taking Valium is that it will tend to relax you, thus muting the response to any question.)

--

Low, Mid- & High level CMs



Low level CMs

The kind we love to see!

- **User:** Lower class criminal; stupid!
- **Sources:** Friends, booklets
- **Strategy:** No real plan. Flies by seat of pants. Goal: Inconclusive or NDI.
 - CQT only a vague concept
 - Believes he can control only respiration
 - Primarily clumsy physical CMs, street drugs or tranq.

Low level CMs (Cont)

- Strategy evolves, sometimes radically
 - Initially to disrupt RQs or entire chart
 - **Movement distortion**
 - **Erratic breathing**
 - **Drugs**
 - Later to enhance CQs
 - **Movements, breathing, exciting thoughts**
- Easily detected, countered. Behavior easily influenced by *E*.
- **Effectiveness:** FN rate about 10% (i.e. unchanged) unless *Examiner* is naive.

Known Facts: low level



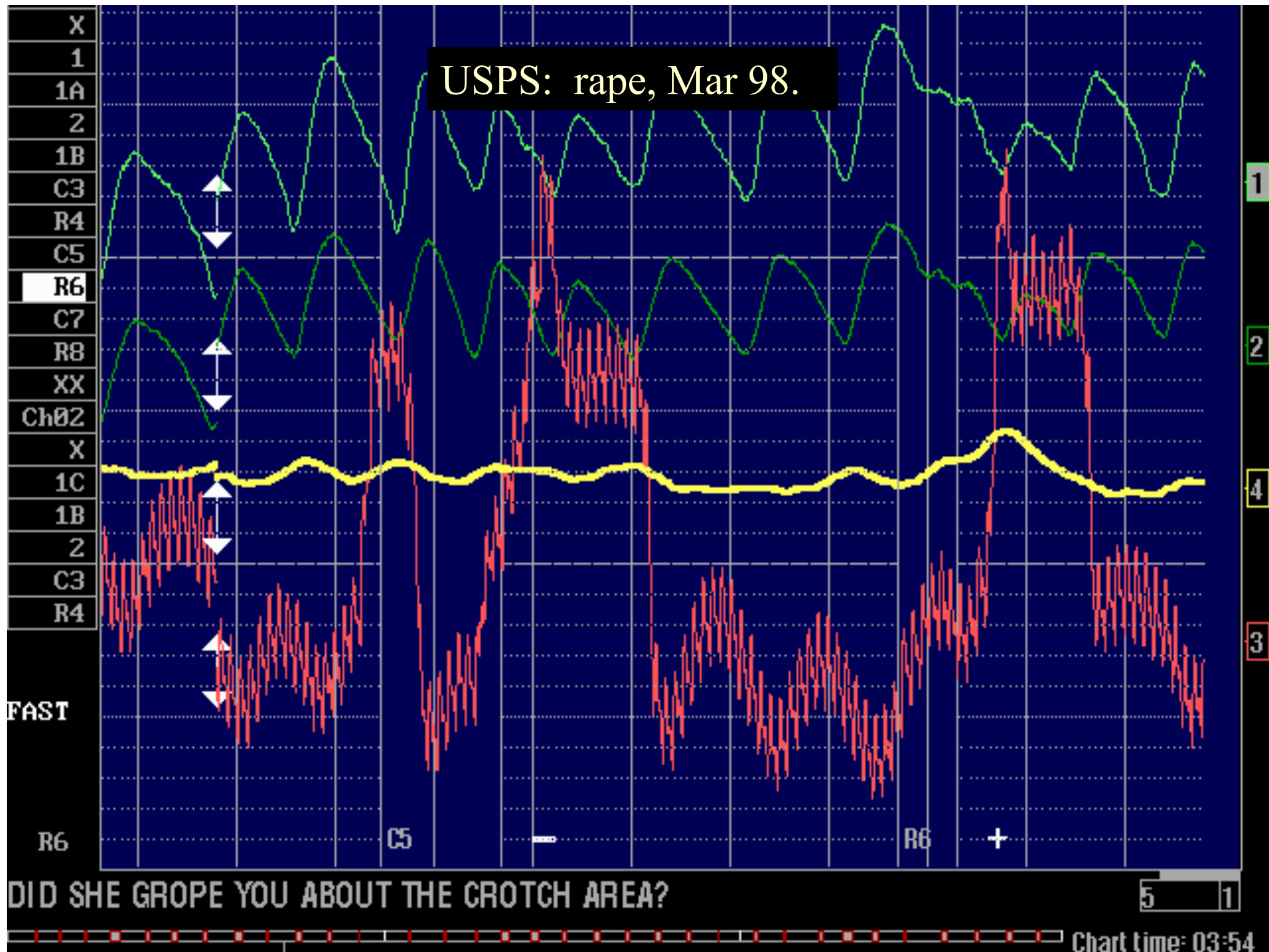
- Many Gu Ss try them. Honts: 40% to 60%
- Easy to detect (except drugs).
 - Movement artifacts
 - Erratic respiration (DBs, SDB, wandering baseline)
- Largely ineffective or counterproductive (especially when identified).

Low level chart case



- USPS female on night shift claimed she was raped OTJ by male colleague. He admitted sex, claimed she initiated it; it was consensual.
- Polygraphed Mar 98.
- Pretest: Normal. He was 31, stocky build, avg. intel.
- RQ: Did she grope you about the crotch area?

USPS: rape, Mar 98.



Analysis

- Randomly tensed, relaxed arm muscle under cardio cuff (pressed down on arm rest?)
 - Plan A: Create big reactions throughout chart to dwarf those caused by deception.
- Or
- Plan B: Disrupt chart to make test uninterpretable
- Controlled breathing

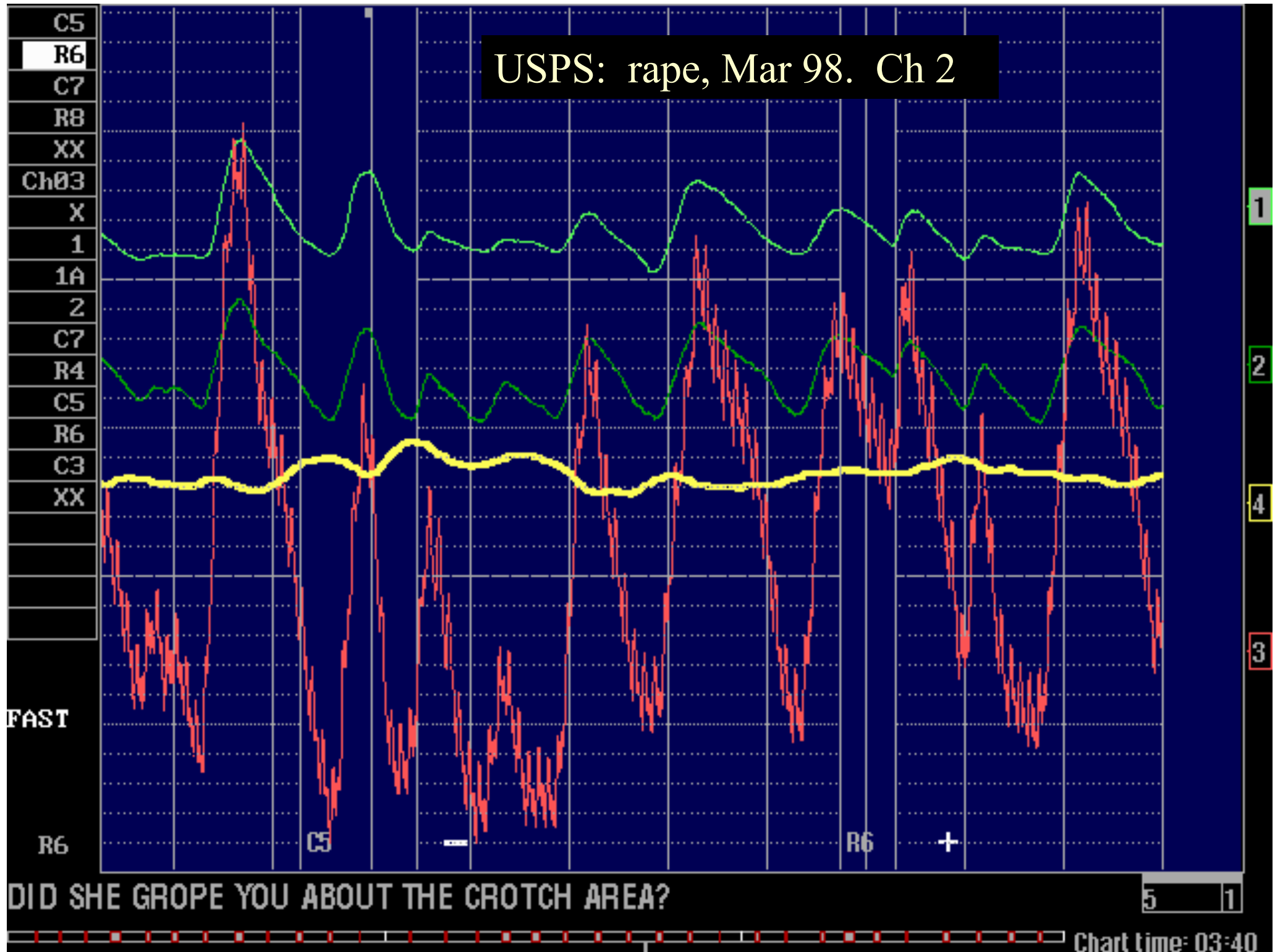
Between chart 1 & 2



- Subject complained of cuff pressure.
- Examiner allowed subject to place arms on lap.

Next chart....

USPS: rape, Mar 98. Ch 2



Analysis



- Behavioral CM designed to shorten test, make examiner cut corners, resulted in bonus: degraded cardio channel.
 - No chart CM evident in cardio. Cardio/respiratory physical interaction.
- Respiratory CM: slow breathing trying (without complete success) to keep everything even.

Mid level CMs

The kind we sometimes see



- **User:** Professional criminal; white collar
- **Sources:** libraries, internet
- **Strategy:** Has specific plan before exam: create reactions to CQs. Goal: NDI outcome
 - Physical, mental, or pharmaceutical CMs
 - Learning curve, but strategy basically constant

Mid-level CMs: Common tactics

- Physical:
 - Press toes to floor
 - Anal sphincter
 - Decoy respiratory responses
- Mental
 - Arithmetic
 - exciting thoughts
- Drugs: tranquilizer (esp. anxiolytic)

Mid-level CMs: Detection



- Patterns (clusters) of behavior
 - Pretest, test, post-test
 - Drugs, mental, physical, behavioral
- Patterns of reactions (strategy apparent)
- Learning curve
- Reactions “too good to be true”
 - too big
 - don’t habituate
 - too similar; lack normal variability

Mid-level case



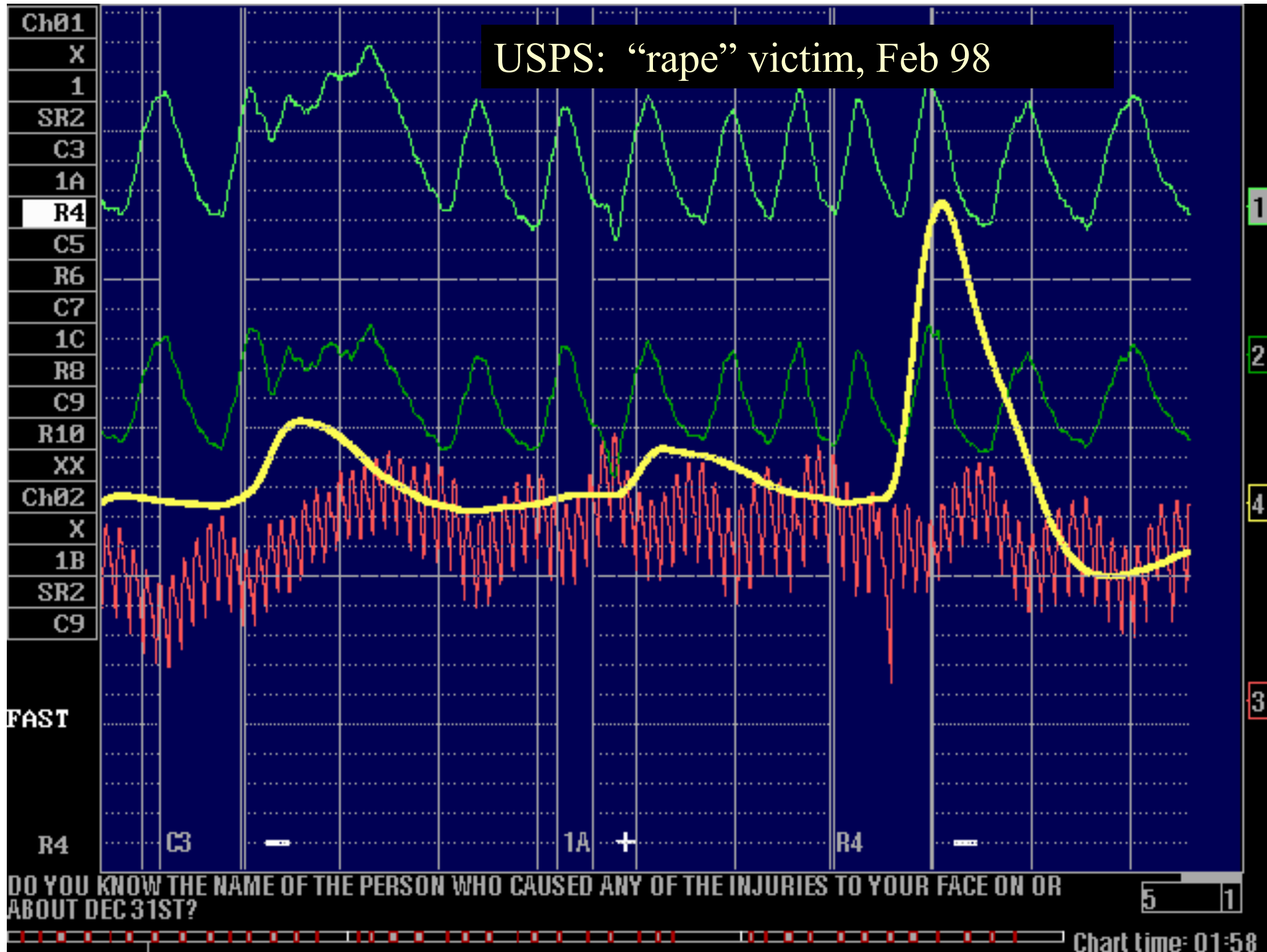
- Female USPS accountant claimed she was raped while en route home from night shift. She later received threatening notes at work.
- Admitted making false allegation years earlier.
- When asked to provide handwriting samples, she researched topic in library before giving samples.

USPS case 2, cont.



- Pretest: Intelligent, pretty, cooperative.
- Q: “DY read up on pg before test?”
A: “Uh... No. The library was closed.”
- Nothing else unusual.
- RQ: “DYK the name of the person who caused any of those injuries to your face o/a Dec 31st?”

USPS: "rape" victim, Feb 98



Analysis

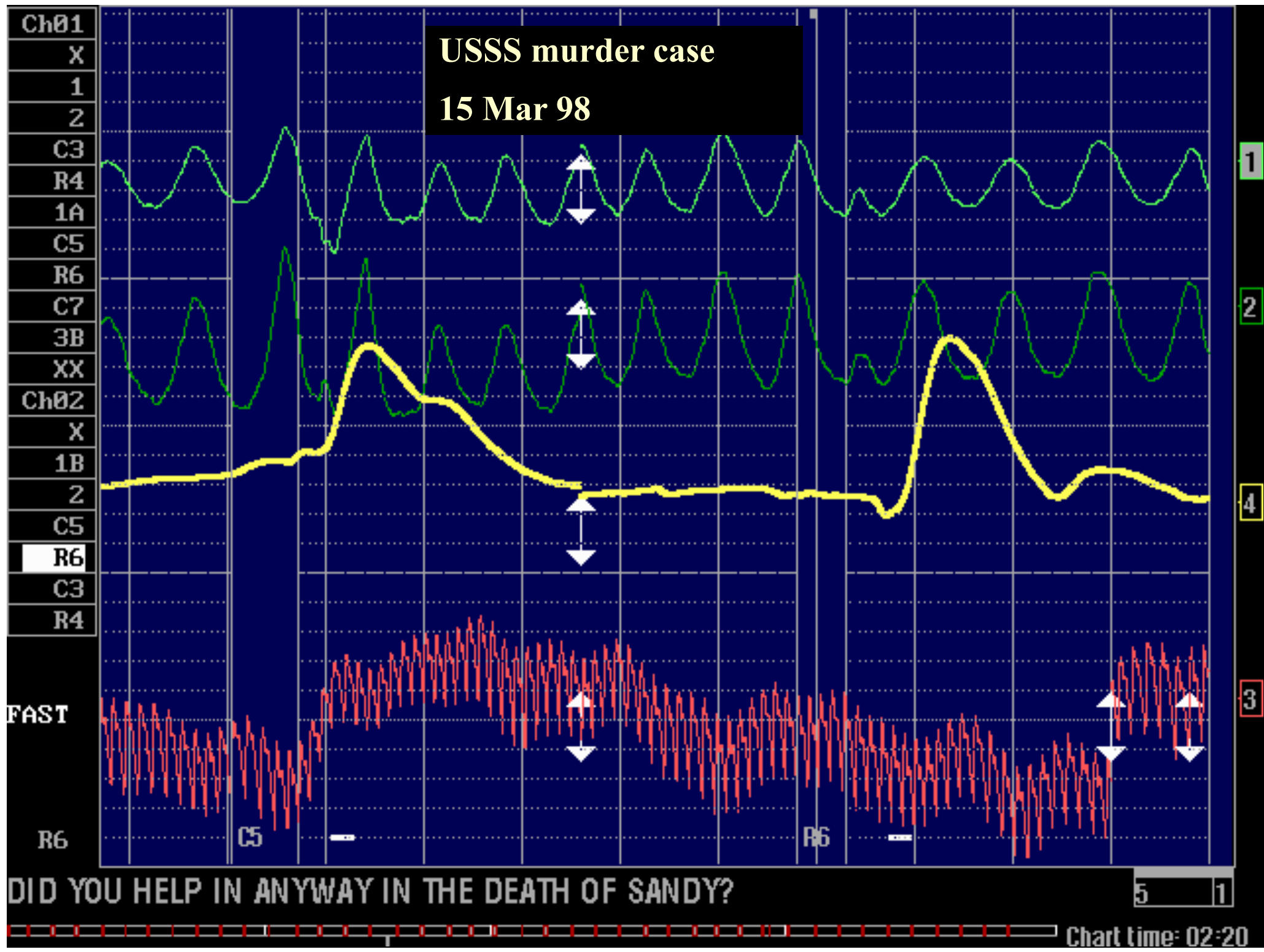


- Deliberate respiratory holding on Q3.
- Big cardio response, but not suspiciously so *per se*.
- HR fast (96 bpm) somewhat more suggestive of guilt than innocence (*not* a CM indicator). Not suspicious *per se*.
- Do these clusters appear throughout test?

USSS murder case



- A detective's ex-wife was killed. His alibi was that he spent night with his girl friend.
- Girl friend examined on polygraph.
- Pretest unremarkable.
- After pretest,
 - asked “DY want me to take my shoes off?”
 - Went to bathroom; limped out.



How CMs discovered



- Charts were inconclusive (-2).
- Interrogated 6 hrs as if DI.
 - “I know you’re using CMs.”
 - “What am I doing?”
 - “IDK for sure, but probably moving your leg.”
- No confession.
- Did confess 2-3 days later to police.

What she did



- So it couldn't be traced to her, she had a police friend order Doug Williams' CM booklet.
- Said she contracted anal sphincter on CQs.
- Denied using tack.
- My assessment: She probably started off using both tack & AS, but soon stopped using tack because of pain. (During interrogation, examiner never checked shoes for tack.)

High level CMs

The kind we never see

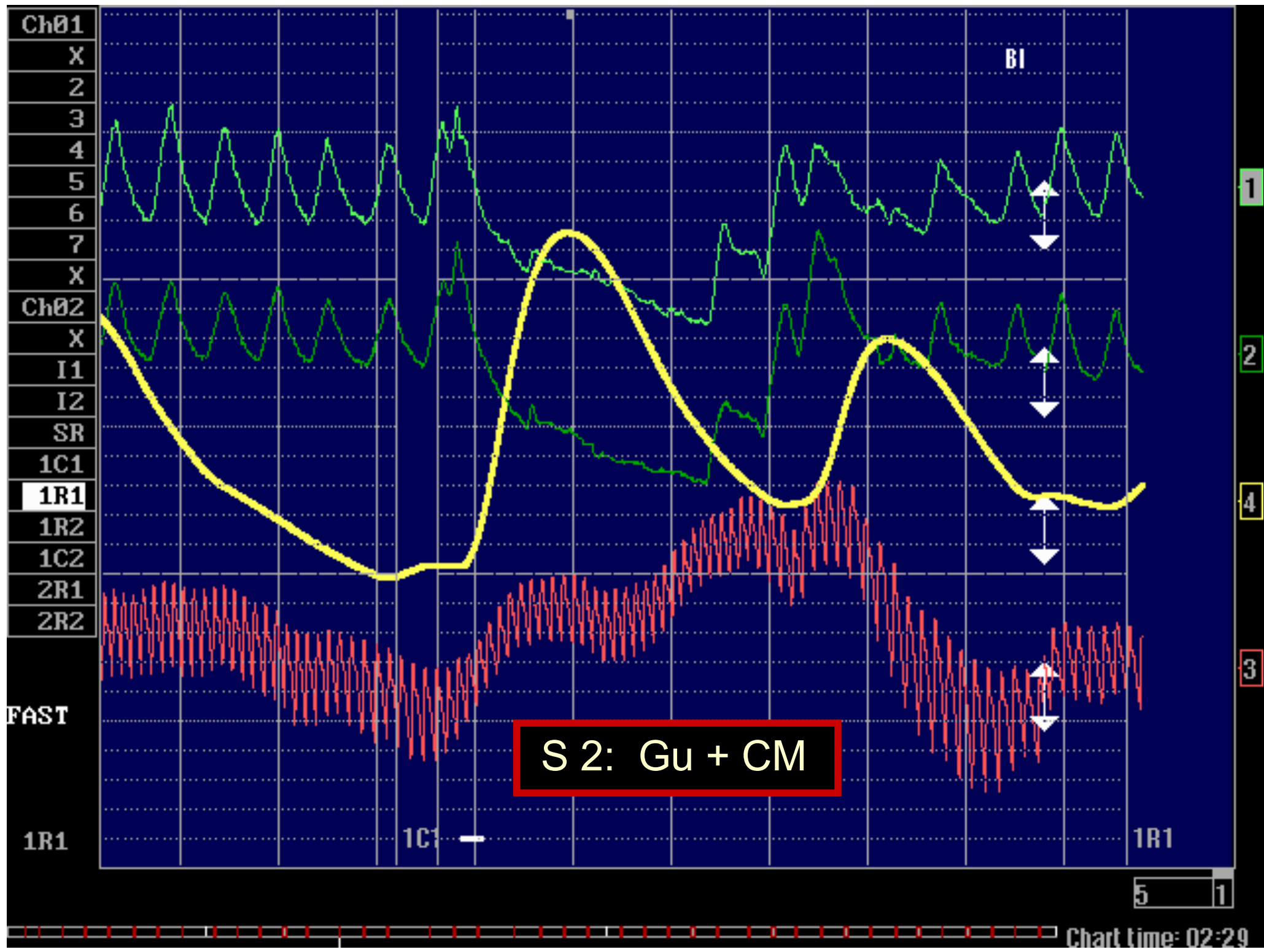


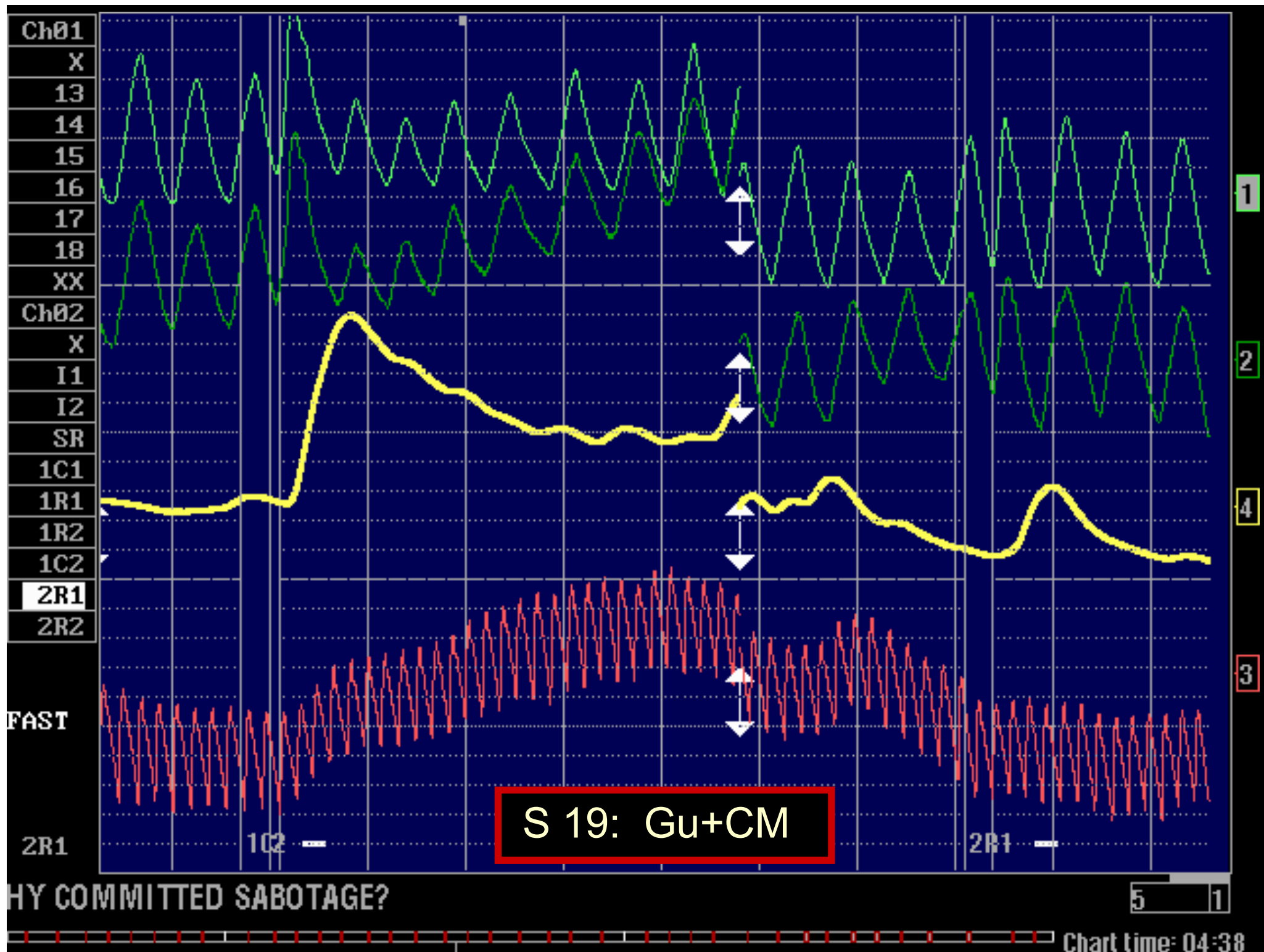
- Don't worry about them
 - Almost impossible to detect
 - Rarely applied in criminal settings
 - Require unethical examiner

Detection of mental CMs



- DLC breathing
 - Baseline “disconnects,” wanders
 - Reaction “looks different”
 - Apnea wanders
 - Breathes faster, deeper
- Lower, upper pneumos disconnect
- Massive cardio reaction. “Too good to be true”





DLCs from a CM perspective



- “On this directed lie question, I want you to think about your lie before answering. I want you to visualize your lie.”

You are identifying the CQ for the S and telling him how to enhance his reaction to it. If an unethical examiner were to tell your S to do that without your knowledge, he would be training him how to beat you. In a very real sense,

when you use the DLC on a guilty subject, you are training him how to manipulate the size of his reactions; how to beat you.

Some examiners compound this by reinforcing this coaching *between charts*, emphasizing the DLCs but not the RQs!!

Variables influencing Effectiveness of CMs


CMs are not an “all or none” phenomenon.
Degrees of effectiveness are the norm.

	<u>Under control of:</u>	
	<u>Subject</u>	<u>Examiner</u>
S's skill at using CMs	XXXX	
Type of CM employed	XXX	X
Type of test used	X	XXX
E's skill at ACM/CCMs		XXXX

Counter-countermeasures



& Anti-countermeasures

- 
- An examiner can use Counter-countermeasures and anti-countermeasures
 - What's the difference between CCMs and ACMs?

Counter-countermeasures (CCMs)



- Any action taken specifically by an examiner to verify or negate a *suspected* countermeasure
 - Urine specimen to identify drugs
 - “Yes” answered Qs on RI test

Anti-Countermeasures (ACMs)

-- Lynn Marcy (about 1990)

- Any action taken *routinely* by an examiner to identify or negate *potential* CMs
 - Urine specimen to identify drugs
 - “Yes” answered Qs on RI test

The distinction between ACMs and CCMs lies not in the action taken, but in the *reason* for the action

CCM goals of the Examiner



- Always look for CMs.
- Discourage inno Ss from using CMs. (Pretest)
- Channel Gu use of low level CMs. (Disinformation; DLC)
- Deter mid-level CM use (Competence; Movement bar).
- Detect, identify, report suspected CMs.
- Debrief confessed Ss re CMs; report.
- Become expert on CMs, ACMs, CCMs.

Marcy's Pretest ACM



- Designed to behaviorally differentiate between guilty, innocent subjects.
 - Invite naïve guilty Ss to use low level CMs
 - Preclude innocent Ss from using CMs
- Doing things distort test, can cause inconclusive results. Promise me you won't 'do' anything to try to help me.

Another pre-test ACM



- Refer to the irrelevant Q as a CQ.
 - I need a question on the test which can serve as a control...one which I know absolutely, positively you're telling the truth to: “Are you sitting down?”
- Consider inserting another irrelevant Q at the end of the chart under the same pretext to see if he tries to create a reaction.

ACMs -- Pretest



Ask what S knows about CMs:

“John, everybody knows somebody who had a friend who heard of someone who was able to beat the polygraph. What ways have *you* heard about, that a person *could* beat the test if he really had to?”

-- Barland, 1975

ACMs -- Pretest



- Ask Subject what he has read about the polygraph on the Internet.
- Follow it up with what he's read about CMs on the Internet.

- **David Reisinger, 1999**

ACMs -- Pretest



After discussing S's CM ideas, caution him:

“Countermeasures are usually discovered during the exam or during quality control. When identified, they will be reported as such.”

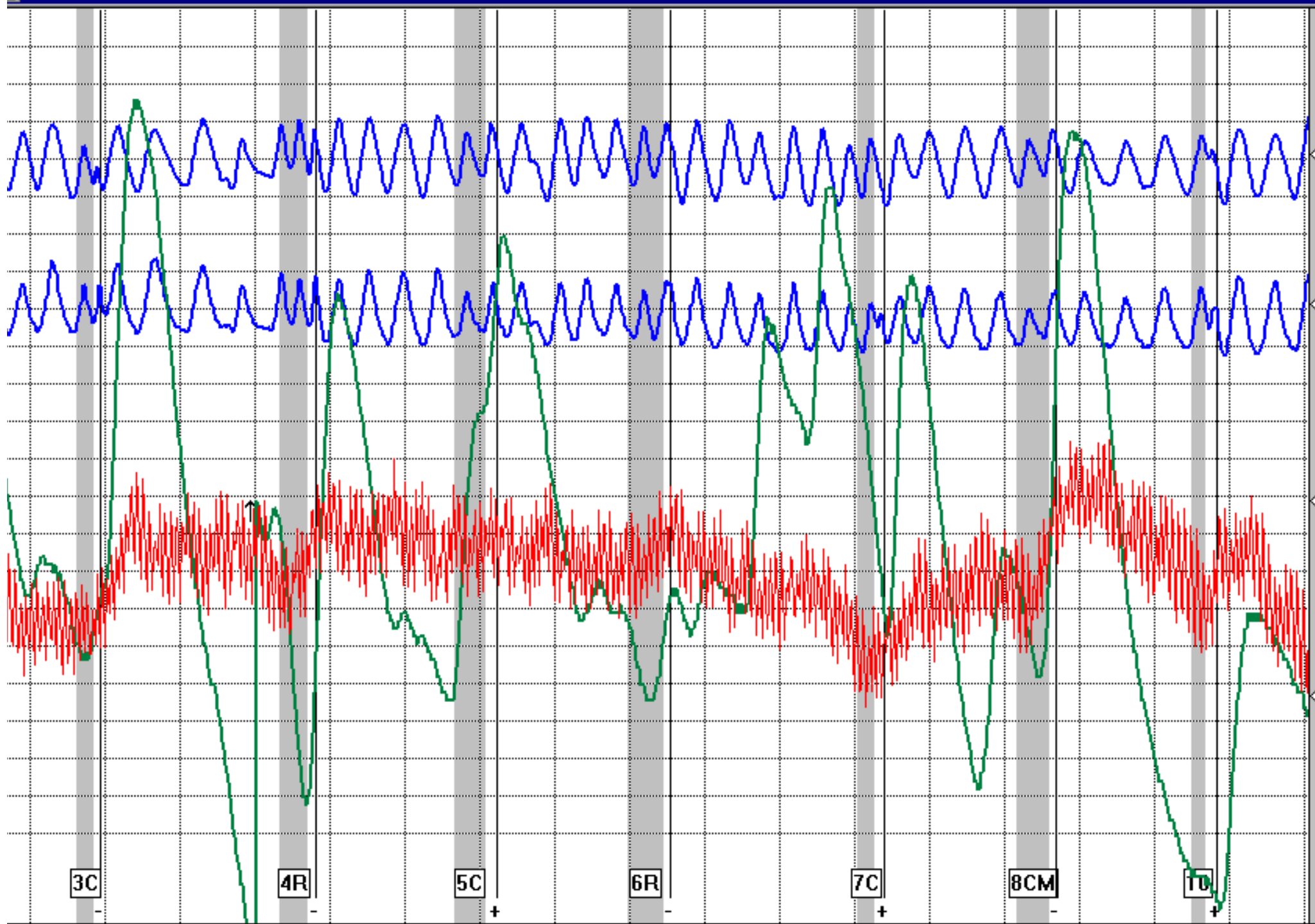
-- FIPS, 25 Jun 97

Another ACM!



- Include drug question on test.

“HY taken any drugs or pills today in order to beat the test?”



Yet another ACM!



- In-test, watch S like a hawk!
 - Arrange room so you can observe S's chin, fingers, abdomen, toes.
 - Focus on S between Qs, not on computer screen.

An important CCM



- When GSR is flat or plunging...
or you have any other reason to suspect
drugs...

Have urine specimen analyzed.

Get specimen bottles from lab, keep in desk.

Shin Bet, Mossad CCM test (Bruck, 1997; Costi, 1999)

Is CM targeted to conceal deception on RQ (Guilty S) or CQ (Innocent S)?

- Run two additional charts [C/IR & R/IR]
 - First contains no RQs
 - Second contains no CQs
- If CMs on CIR but not RIR: S knows what CQs are
- If CMs on RIR but not CIR: S is guilty
- If CMs on irrels, drop them, run only CQs, then RQs

Report CMs



- When you encounter purposeful non-cooperation (PNC), report it as such. This should be your agency's policy. Don't run excess charts in the hopes it will clear up.

-- FIPS, 25 Jun 97.

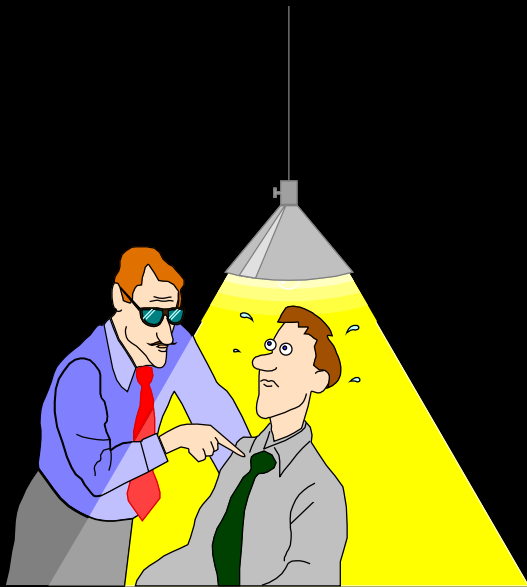
Re-exams



- When S needs to be re-examined to clarify NO or DI results, *don't* tell him which question(s) were bothering him. If it was the wrong question, it reassures the guilty person. (E.g. Ames)

-- FIPS, 25 Jun 97.

Talk!



- Following every confession, debrief subject on how he tried to beat polygraph.

PLEASE...let me know what you learn!

Barland@DirecWay.com (note: no "t")
801.943.3360

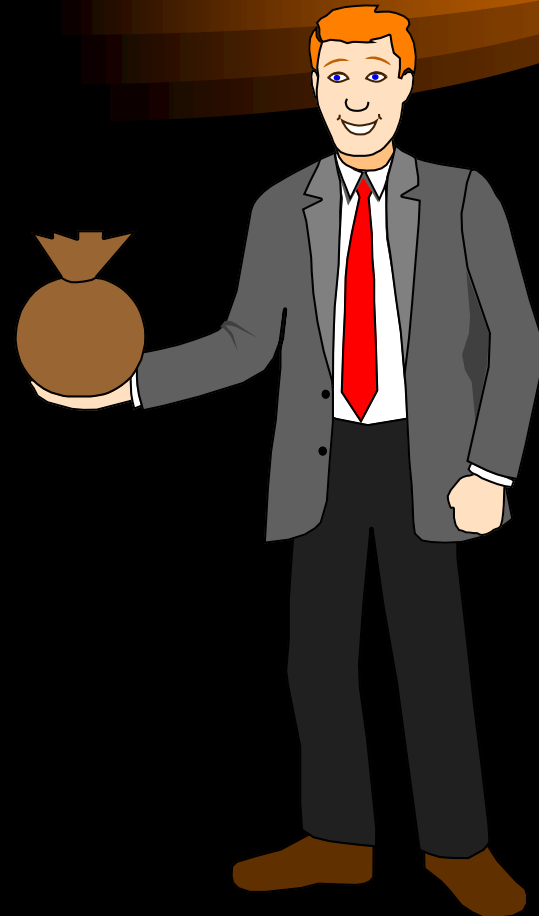
Barland's Golden Rules



- * In high risk CM environments,
DI means DI, NDI means NO.
 - Pg is security hurdle; can only bring bad news
 - Little confidence in NDI results

How you can support me

- Send me copies of confirmed CM usage.
 - Floppy disk
 - Report/memo



2 final words of advice....



- Don't become paranoid.
 - Not everybody is engaging in countermeasures!
- The polygraph is a surprisingly robust test.
 - It works remarkably well most of the time on most people in most situations, even with competence-challenged examiners.
 - Exception: When the subject is applying appropriate CMs

That's all for now, folks!

- We have a long way to go in understanding and countering CMs. But the journey has begun, and we are far ahead of where we were ten years ago.

