Chapter Fifteen

Countermeasures

People generally tend to do whatever they can to keep from embarrassing themselves. In our business, we must be ever alert that some people will not want us to know the whole truth and will often try to “beat the polygraph.”

This subject matter is extremely sensitive and the information is to help you better cope with countermeasures by knowing how to counter the countermeasures.

You may well be confronted with an individual who will attempt to defeat the polygraph test through conscious and deliberate actions.

This person may attempt to create responses, which they hope will cause you, the examiner, to render a non-deceptive, or at least an inconclusive opinion. The research indicates that a guilty subject could be diagnosed as innocent.

Countermeasures range from sophisticated, subtle mental disorienting techniques to the crude, easily recognized movement of various limbs on the person’s body, to the examinee taking two aspirins with a coke before coming in for his/her test.

Polygraph countermeasures are deliberate techniques which a deceptive subject will use in an attempt to appear innocent when his/her physiological functions are being recorded and monitored during a polygraph examination.

Mental Countermeasures are attempts by the subject taking the polygraph examination, to control his / -her mental state in order to control the outcome of the test. The following is a discussion of the more common types of mental countermeasures.

Dissociation:

The subject may attempt to completely ignore the content of the question and try to answer automatically in response to the sound of your voice.

Usually this is only possible with a test in which the answer to each question is always the same, such as in a Peak of Tension Test.

Dissociation capitalizes upon this inherent weakness by allowing subjects to focus attention upon some irrelevant object or thought, such as counting the number of holes in a square of soundproofing on the wall.

The mind is totally involved in a monotonous, non-exciting task, thereby allowing the subject to ignore the question content and automatically answer no.
We tend to believe that dissociation can be effective only where all the answers are the same, such as "NO," or if the examinee could somehow memorize the order of the question sequence and concentrate on the sequence of yes and no answers. Simple, basic pretest and in-test procedures can assure that question recognition must be present to ensure appropriate answers, and when this is properly done, application of the dissociation countermeasure could well be rendered ineffective.

**Countering the Dissociation Countermeasure:**

Have the examinee repeat a key word from the question along with his no answer. i.e. 

"Steal - NO!"

"Shoot - NO!"

"Stab - NO!"

Mix up the question order on Chart 2 and subsequent charts to preclude pattern recognition. You may choose to mix up just the controls, or just the relevants or both.

Randomly insert irrelevant questions!

Use irrelevant questions that have both yes and no answers.

Advise the examinee up front that there is no specific order for the questions.

Watch for the examinee who seems detached from where he really is.

Watch for the examinee that answers too slowly or too quickly.

Watch for the examinee that answers all questions in a subdued voice and in exactly the same tone of voice.

**Rationalization:**

If the examinee can convince him/herself that the question you are asking simply does not pertain to him/her and he/she believes that rationalization, then we could have not only an effective countermeasure but also an effective ego defense mechanism as well.

We must be careful at this point to assure ourselves that the subject initially realized that the question did apply to him/her and he has subsequently sought to evade the issue by rationalizing and thus employing a countermeasure.

Countering rationalization might be one of the more difficult countermeasures since it might be impossible for us to determine when it is being employed.
We recommend routine semantic consideration during your pretest interview and careful
question formulation. You may ask yourself:

Could the examinee have committed the offense and still answered my question truthfully?

We recommend that you anticipate possible rationalizations and then word your test questions
accordingly.

Sometimes you may wish to have the examinee explain to you exactly what his/her
understanding of the question is. Have him/her express in his/her own words what she / he thinks
the question includes and what it means - If you think you have a potential problem, reword the
question so you won't.

**Stimulating thoughts:**

This is a major type of mental countermeasure, which is used to generate responses to questions
other than the relevant questions.

We would imagine that the examinee would resort to erotic imagery while exercising his/her
stimulating thoughts and think hard about sexual experiences or fantasize about a sexual act he
or she wishes they had experienced.

Countering the "stimulating thought" countermeasure:

This could also be a difficult countermeasure to counter, since it might be impossible to
determine when it is being employed. If you suspect that the examinee is attempting to defeat
you using this method, we recommend that:

You consider using the Irrelevant / Relevant testing technique.

Or if you are using a comparison question, introduce your comparison questions in such a
convincing manner that the examinee will not know that they are comparison questions.

Sometimes by telling the examinee that the Irrelevant Questions are Known Truth Questions the
examinee will automatically be led to believe the irrelevants are in fact Comparison/Control
Questions and that the Comparison/Control questions are in fact relevant.

The technique of applying this countermeasure in a comparison question test, if the examinee is
well trained, could be difficult to detect. It seems as though, in our experience, that even a
trained examiner will often display anticipation in the pneumograph recordings and you will
denote "early" responses.
**Meditation:**

Meditation is a form of inward turning yoga, modified for use by the layman in his everyday life. Deep yoga practices are much too difficult for the average person and are correctly practiced only by persons who devote their lives to them.

Meditation or transcendental meditation is designed to bring the benefits of meditative or inward turning yoga to everyone, regardless of age or occupation.

In all the various forms of meditation, the person trains him/herself to achieve and maintain a very calm and stable state, both physiologically and psychologically.

This is accomplished by assuming a comfortable seated position, and concentrating on some internal phenomenon.

This may be a sound the person generates in his head.

It might be a spot they imagine inside their head.

It could be a breath control exercise with visualization of movement of the air in and out of the lungs.

It might be counting inside the head, visualizing a bird and many other possible activities.

The important point is that the attention is concentrated on this one internal phenomenon and the person becomes increasingly proficient at doing this as they practice.

When the person becomes highly proficient at this meditative practice, the person ends up in a state in which he is awake, and all of his senses are functioning, but all sensory inputs are prevented from reaching consciousness or awareness.

This person's mind is totally focused on the internal phenomenon.

This person has no awareness of the external environment and does not have any interest in the external environment.

This person may not be able to hear, see, or move.

People who become moderately proficient, but who do not reach the state just described will experience various degrees of withdrawal from external reality, will have reduced awareness of sensory phenomena, and will become to various degrees, indifferent to their environment.

How to recognize a person who is in a meditative state.

The person will often sit unnaturally still, yet will appear very relaxed about it, once he/she is in the examination chair and the examination begins. By this definition and description it is
obviously impossible for an examinee to practice meditation during the pretest portion of the examination.

The person will tend not to hear the questions, leading to slow and/or indecisive answers or no answers at all. To what degree this happens will depend on the person’s degree of meditative proficiency.

Once in the state, to any degree, the person will tend to seem indifferent toward his surroundings.

Is meditation an effective countermeasure to the polygraph technique?

After researching this, the AAPP Board of Directors tends to believe that meditation is a poor countermeasure and should cause the capable examiner few if any problems in conducting the examination, because:

It is normally easy to recognize a person attempting meditation.

It takes several minutes to get into this state, even with very proficient persons. There is no instantaneous movement into or out of this state.

A person deeply into the state will not hear your questions, and his body will not respond.

Meditation will tend to produce flat charts, even where there is not complete withdrawal, because the examinee is not aroused to anything. Thus, there will be no differential between control and relevant questions, which in itself should be a flag that something is wrong.

Extremely few mediators will be able to seriously enter the meditative state under the force of the stresses of the polygraph examination situation.

Most people who claim to be meditating are just sitting still with their eyes closed, trying to think of nothing. This is quite different from the true meditative state.

These people can still hear you and if your pretest has been effective, will still respond.

**Hypnosis:**

Hypnosis is a well-publicized, very controversial and widely misunderstood mental countermeasure.

Not only is the general public confused, but also the experts themselves differ drastically as to what it is and how to define it.

The AAPP Board of Directors believes that hypnosis is a condition or state of consciousness that can be artificially induced and is characterized by marked susceptibility to suggestion and loss of sensation.
It is obviously within the realm of mental countermeasures, yet there are certain aspects which tend to put it into a separate category.

According to some experts, the few studies dealing with hypnosis as a possible countermeasure are largely plagued with serious methodological weaknesses.

Some literature suggests that hypnosis might be employed by instructing the examinee, through hypnosis:

To totally relax on all of the polygraph questions.

To totally relax on only the relevant issue questions.

To have total amnesia pertaining to the issue being tested.

To express response or anxiety on all control questions.

We have learned, and it is on the Internet teaching inquiring minds, of certain hypnotic instructions. We have listed some of them below that are advertised and purported to work.

"When the examiner states, the test is about to begin, you will automatically go deep into hypnosis and follow all of the instructions that were given to you here today".

"You will go deeper and deeper relaxed as the polygraph examiner attaches each instrument component to your body, and when you are completely attached to the instrument, you will be completely and deeply relaxed, in a deep state of hypnosis and will follow all of the instructions which were suggested to you here today".

"Amnesia for the entire incident will take place when the polygraph examiner attaches any device or component to your body".

"You will immediately forget everything about the issue being tested, when the polygraph examiner attaches any device to your body".

"You will automatically return to a fully wakened state when the polygraph examiner tells you that the test is over".

As discussed immediately above, hypnosis will most likely take the form of post-hypnotically suggested amnesia with regard to the specific incident or a given period of time.

Some studies will lead you to believe this works while others will lead you to believe this does not work.

In any event, it should become apparent during a well-conducted pretest interview that there is something amiss due to the examinees reactions during conversation.
However, beyond that reasonable assumption, there may or may not be evidence to suggest that the hypnosis procedure may well be ineffective anyway.

There are studies wherein subjects committed mock crimes and then were subjected to hypnotically suggested amnesia for all events in a seven-day period (covering their mock crimes). These subjects were then examined by polygraph and their involvement in the mock crimes were detected by polygraph. The items stolen were located by searching peak of tension tests (Gordon Barland, AAPP Conference, April 18, 2007).

Posthypnotic manipulation of arousal levels is, however, a possibility.

Consider a specific issue examination in which time/location bars will be used in the comparison/control questions. Assuming the examinee is familiar with or has been trained in the comparison / control question technique, post hypnotic arousal at key words likely to be in control questions could be a possibility, because:

- Did you... is typically used on relevant questions.
- Are you the kind of person..
- Prior to....
- Before....
- are typically used on comparison/control questions.

The Board of Directors has no information that this has ever been done, but it could be something to think about.

Countering the Hypnosis Countermeasure. We recommend looking for the examinee that looks hypnotized!

- Look for a tendency to stare fixedly.
- Look for a lethargic appearance.
- Look for a demeanor suggesting examinee is physically here, but mentally somewhere else.
- Look for a relaxed state, accompanied by exaggerated, slow breathing.
- Look for a delay in answering questions.
- Look for the answering of questions in a soft tone of voice, which is different than in the pre-test interview.
Take a break, walk the examinee around and see what you think. If you deem it necessary, bring his/her condition to his/her attention.

Consider telling him/her that he/she does not look right or normal, advise the examinee that this demeanor might have an adverse effect on the examination.

Have examinee repeat key words during the testing sequence to ensure you that the examinee is intellectually aware of the question content.

**BioFeedback:**

There are studies that report people who have undergone biofeedback training are able to suppress autonomic nervous system functions of the body in the areas of the Galvanic Skin Response, pulse rate and probably the Cardio Activity Monitor or perhaps a PLE.

The literature suggests that Biofeedback is essentially the use of sensing devices to pick up changes in one's physiological processes, which can then be displayed, or fed back, either visually or auditorially to the person from whom they are being taken.

We are advised that essentially Biofeedback helps the person learn what physically or psychologically effects their response capability.

This points out then, that timeliness would be our counter countermeasure in this particular event. We don't know of anyone who is able to create and then suppress these activities within 25 seconds of each other.

The Hypnotherapist Certification Board of California, which purports to be a private professional examining body, sells a GSR Biofeedback System to provide a person with immediate knowledge of an internal bodily process, i.e. heart rate, breathing, perspiration and body temperature and how to learn how to control those processes.

Their "machine" is allegedly used in stress reduction, pain alleviation and as an induction method to achieve hypnosis.

They claim it is the only fully integrated, portable system available, putting body and stress control in the "palm of your hand", allowing "you'll monitor and control tension easily, anywhere".

Their GSR2 biofeedback system includes a handheld sensing plate unit, GSR finger probes, skin temperature sensors, visual meter, earphone for privacy and complete instructions.

At our last contact with these people, they were selling the unit for $149.50 plus $5.00 S/H.
Physical Countermeasures.

These require subtle manipulation of the body to create recordings which appear to be responses. The AAPP is familiar with:

- Tensing and relaxing (called "flexing" by some examiners) of the arm on which the cuff is located which can create responses in the cardio component.
- Voluntary contraction of the anal sphincter muscle.
- Pressing toes against the floor.
- Pressing thighs against the chair.
- Crossing the eyes.
- Squinting the eyes.
- Gritting the teeth.
- Pressing the tongue against the roof of the mouth.

Pain.

Self-induced pain is crude, but effective, and relatively easy for the examinee to apply. It is difficult to detect if done subtly and with some degree of sophistication. It can include:

- Tongue biting.
- Having a sharp object in the mouth to press against.
- Concealing the proverbial tack in the shoe. (However, just try and walk even a short distance, with a tack in your shoe, we have and it is not easy to do without being discovered.)

Countering the Pain Countermeasure:

Careful scrutiny of the examinee is essential and will often serve to detect self-induced pain measures, since at least minimal movement is necessary.

- Tongue biting is sometimes discernible through jaw movement.
- The examinee may attempt to overcome this by placing the tongue between his teeth at the beginning of the chart and keeping it there throughout the question sequence, eliminating the need to move the jaws.
The examiner can usually detect this by the lack of lip and jaw movement at the point of the answer and a somewhat different tonal and diction quality than that displayed by the examinee at other times.

A movement bar under the examinee’s chair is recommended along with frontal observation or video recording of the examination maybe even simultaneously splitting the screen to show examinee and the chart.

**Adrenal Exhaustion:**

This is a term that traditionalists in polygraph have, in the past, referred to as a possible physical countermeasure. However, recent teachings in physiology classes of recognized schools of polygraph, assert that adrenal exhaustion does not effect a polygraph examination in any way.

Lynn MARCY purports to have conducted an examination on an individual who had his adrenal glands surgically removed as a result of a disease and the examination was successful.

**Controlled Breathing:**

Some examiners strongly believe in not ever mentioning the word breathing to an examinee.

Depending on the polygraph school you went to, pretest interview classes were taught according to the way the instructor had been taught. Consequently, some examiners believe you can talk about breathing and others do not.

The AAPP Board of Directors collectively cannot recall having had this problem, consequently, we recommend that the individual examiner make his/her own determination based on experience.

There is a lot of controversy among polygraph examiners about whether or not this will draw the examinees attention to his breathing and create a breathing problem that we might not have otherwise encountered. Who knows?

The normal rate of breathing is 13 -to 18 times per minute.

Controlled or altered breathing is a physical countermeasure, which can be detected by administering a silent chart.

Controlled breathing is not normal breathing. Examples are:

- Rapid breathing
- Slow breathing
- Deep breathing
Shallow breathing

**Countering Controlled Breathing.**

With this Countermeasure, we recommend:

If controlled breathing is prevalent, stop, advise the examinee not to talk to you or move about, but to listen carefully to you.

Then proceed to ask the person to cooperate by sitting still, listening to the question, answer the question etc.

Make small talk for two minutes or so.

All this time you should be observing the individuals breathing by the movement of the chest assemblies, additionally you have left both pneumos operational and the kymograph running so as to permit you to record a true normal respiratory pattern.

Compare this to what you had and then continue. If this controlled breathing persists, you may confront the person head on and show him/her what is normal and what he/she was doing on the chart.

Remember that controlled breathing will normally be prevalent in both pneumos. If only one shows exaggerated tracings, the problem may well be operational (pneumo sensor placement) and not controlled breathing.

**Chemical Countermeasures:**

These are the subject of a great deal of controversy. The AAPP suggests that chemical ingestion to defeat a polygraph examination is somewhat ineffective for control question testing. We are unaware of any drug that can selectively suppress responses at relevant questions and increase them at comparison/control questions.

Chemical Counter-Countermeasures begin in the pretest interview.

Observe the physical characteristics of the examinee.

Ingestion of depressants, stimulants or hallucinogens in any substantial dose should manifest itself in predictable physical characteristics.

Stimulant type drugs (refer to your pharmacology class) usually result in faster respiration and pulse rate.

Depressant type drugs customarily result in decreased respiration and pulse rates. Some believe that decreased GSR amplitude can result from these type drugs.
Hallucinogenic drugs can result in erratic response patterns and perhaps inappropriate answers to questions.

Available literature on how to beat the polygraph:

There are volumes of articles available on how to beat the polygraph.

If a person has successfully created false negative responses in a previous examination, chances are good that the examinee will enter your examination room with the reinforced belief that he/she can successfully do it again.

Unfortunately, there are unscrupulous examiners who have attempted to condition a person to dissipate responses through habituation.

If someone is scheduled to take a police polygraph test, they might well contact this unscrupulous examiner and arrange to be tested for two or three days so as to condition themselves for the testing procedures and the types of questions they might expect in their scheduled upcoming examination.

Think back and remember the last test you took, and you knew which questions were comparisons/controls and which were relevant. This lends itself to the more you know, the more dangerous you are to yourself.

The AAPP Board of Directors suggests that examiners are the easiest people to test, because they know that the polygraph works.

We suggest that it is difficult to train a person to enhance responses at comparison/control questions and suppress responses to relevant questions. In attempting to respond differentially to the two categories of questions, it is necessary for the subject to pay close attention to each question, and then attempt one of the two opposing types of countermeasures. This is inherently incompatible with mental dissociation.

Popular published information available on polygraph countermeasures and anti-polygraph literature may be found (among many others) at the following sites:

www.polygraph.com (“How to Sting the Polygraph”)

www.antipolygraph.org (“The Lie Behind the Lie Detector”)

www.passapolygraph.com

www.stoppolygraph.com

www.nopolygraph.com
Countermeasures References


- 14 -

THIS HANDBOOK IS INTENDED SOLEY FOR THE USE OF MEMBERS OF THE AAPP

IT IS LAW ENFORCEMENT SENSITIVE


49. Kamei, Kazutsuna; Imamura, Yoshimasa; Aoki, Tamio; Suzuki, Akihiro; Yamoaka, Kazunobu & Yamashita, Mookuni (1965). The effects of tranquilizers on Polygraph tests. Polygraph Report no. 35 (pp. 80-84), National Institute of Police Science, Tokyo.


68. Nedrud, D. R. Technique for determining whether or not subject is attempting to "beat" the polygraph by breathing too rapidly, or irregularly. Paper presented at the 9th Annual Meeting of the American Academy of Polygraph Examiners, Chicago, August 1962. 1 p.

69. Never Say Lie, CEP Incorporated, 1987, 60-103


76. Ryan, P. Trip the Lie Fantastic and Outwit the Polygraph. Smithsonian, November 1971.


78. Silverberg, B. A. A pharmacology primer for polygraphists. Toronto, Canada: Canadian Centre for Polygraph Studies, 1982.

79. Simpson, R. L. Marijuana and PSE. Stressing Comments, 1979, 7 (6), 4-5.

80. Stewart, W. S. How to Beat the Lie Detector. Esquire November 1941.


And there are numerous others.

The AAPP Board of Directors can provide this Handbook to our membership in MS-Word, Word Perfect and PDF formats. We request that each request be accompanied with a $20.00 donation to the AAPP to cover costs of preparation and shipping.