



Memory Contamination and Deception Assessment (MCDA)

Verbal Indicator	Description
Inconsistencies in Narrative	<ul style="list-style-type: none"> • Within-Statement Contradictions: Contradictory details provided within a single account or disclosure. • Inconsistency with Material Facts: Significant changes to key (material) facts across multiple retellings. • Frequent Changes or Contradictions: Constant shifts in the story, particularly on crucial points.
Rehearsed or Parroted Responses and Structured Language	<ul style="list-style-type: none"> • Rehearsed Language: Overly polished, scripted, or memorized phrasing. • Parroting: Repeated phrases or concepts introduced by others (e.g. caregivers, investigators, lawyers, advocates). • Structured Narrative: A well-organized story lacking the natural flow of spontaneous recall. • Illogical Flow: Event sequencing may contradict logic or expectations.
Lack of Specificity and Vagueness	<ul style="list-style-type: none"> • Vagueness and Generalization: Failure to provide sufficient quality or quantity of details about key moments. • Missing Critical Details: Evasive responses when asked for reasonable specific details. • Selective Detailing: Detailed in some areas while glossing over difficult-to-explain moments.
Lack of Clarity on Time or Location Information	<ul style="list-style-type: none"> • Inconsistent or Vague Time/Location: Unclear or changing descriptions of timelines or places. • Signs of Deception: Ambiguous or shifting details regarding when or where key events occurred.
Evasive Language	<ul style="list-style-type: none"> • Avoiding Direct Answers: Sidestepping questions or changing the subject. • Answering Questions with Questions: Deflecting or buying time to think, instead of giving straightforward answers. • Vague Descriptions: Using nonspecific language, lacking concrete or realistic sensory details.
Distancing Language	<ul style="list-style-type: none"> • Use of Impersonal Pronouns: Shifting from “I” to “he/she/they” to distance from ownership/togetherness with people or events. • Minimizing Own Role: Using passive voice or omitting involvement in key actions. • Shifting Focus to External Factors: Focusing on other’s actions rather than their own experience.
Blame-Shifting Language	<ul style="list-style-type: none"> • Redirecting Blame: Shifting responsibility for inconsistencies to external factors. • Projecting onto the Accused: Attributing their own behaviors, without reasonable explanation, to the accused. • Deflecting Accountability: Blaming misunderstandings or others instead of acknowledging personal responsibility or errors.
Hedging and Qualifiers	<ul style="list-style-type: none"> • Uncertain Language: Using qualifiers like “maybe,” “I think,” or “possibly” to soften personal commitment to facts provided. • Deflecting Commitment: Phrases like “as far as I remember” to distance from claims of truthfully provided information. • Hesitant Phrasing: Using fillers (e.g., “well...,” “um...,” or “huh...?”) to avoid providing an answer or clarification.
Excessive, Non-Relevant Details (Hedging with Stories)	<ul style="list-style-type: none"> • Providing Unnecessary Information: Offering irrelevant stories to distract from gaps. • Overloading with Trivial Details: Including insignificant details to create the illusion of credibility. • Lengthy Explanations: Long-winded answers to simple questions, signaling discomfort.
Flat Affect and Unusual Levels of Certainty or Uncertainty	<ul style="list-style-type: none"> • Flat Affect without Deviations: Lack of emotional variation or anxiety, even when describing traumatic events. • Unusual Certainty or Uncertainty: Expressing extreme or unusual levels of confidence or doubt on details unlikely to be remembered with such precision (e.g., exact times, specific dialogues).
Exaggerations of Severity	<ul style="list-style-type: none"> • Impressionistic and Overly Dramatized Speech: Statements excessively emotional or dramatic without concrete information. • Fantastical, Exaggerated Elements: Unrealistic details that defy logic, physical laws, or realistic circumstances.
Immediate Backtracking or Recanting	<ul style="list-style-type: none"> • Frequent Retractions and Reassertions: Changing or withdrawing allegations only to reaffirm them later, and multiple times.
Minimization Language	<ul style="list-style-type: none"> • Downplaying Seriousness: Downplaying their own behavior to make the accused’s actions appear disproportionate. • Softening Incidents: Minimizing their involvement while exaggerating the accused’s actions. • Understanding Emotional Reactions: Minimizing emotional reactions to contrast exaggerated claims against the accused.
Rationalizing Language	<ul style="list-style-type: none"> • Explaining Away Questionable Behavior: Rationalizing inconsistencies (e.g., not calling the police because they were “confused”). • Attributing to External Factors: Explaining false claims by pointing to logical-sounding external influences (e.g., alcohol, stress). • Inevitable Claims: Presenting their actions as unavoidable.
Justification Language	<ul style="list-style-type: none"> • Moral or Ethical Justifications: Justifying actions based on higher moral reasoning (e.g., “I did it to protect the children”). • Cultural or Social Norms: Justifying actions based on societal expectations. • Defending as Proportional: Framing their behavior as proportional self-defense or reasonable in the situation.
Signs of External Influences/Motivations	<ul style="list-style-type: none"> • Coaching: Use of adult-like phrases (by children) or terminology inconsistent with typical speech patterns, indicating influence. • External Influence or Pressures: Allegations that align closely with media narratives or are made under third-party pressures.
Absence of Incremental Disclosure	<ul style="list-style-type: none"> • Immediate/Detailed Disclosure: False allegations often involve sudden, fully formed disclosures without the gradual release of information and typical guarded or anxiety-filled responses of genuine cases.
Lack of Reality Anchoring (Corroborative Elements)	<ul style="list-style-type: none"> • No Corroborative Evidence: Absence of witnesses, physical evidence, context history, propensity and/or precipitating factors, trauma symptoms or other evidence that can be independently verified to corroborate the story provided.
Invocation of Religion or Virtuous Association	<ul style="list-style-type: none"> • Religion: Use of religious themes, calls upon God or faith, in an attempt to align themselves with righteous principals to appear more credible. • Virtuous Association: Name-dropping or referring to powerful people or organizations they may have an affiliation with in order to either intimidate or associate themselves with virtuous and power ideas to appear more credible.



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Overly Specific or Confabulated Details	<ul style="list-style-type: none"> Hyper-Specific Recall: Unlikely levels of detail (e.g., exact times, trivial details) that are inappropriate or highly suggestive of external contamination (such as exposure to pornography). Confabulation: Filling in gaps in memory with fabricated but plausible details.
Signs of External Memory Sources	<ul style="list-style-type: none"> Media or Therapy Influence: Incorporation of details from media or therapy into the account. Misattribution: Confused between actual experiences and suggestions from others.
Imagination and Fantasy Elements	<ul style="list-style-type: none"> Fantasy-Based or Stereotypical Elements: Incorporating cliches or stereotypes (e.g., “the villain persona” or typical pornography plots and scenarios) Elements that Defy Logic: Claims that violate physical laws or involve implausible events.
Memory Fragmentation/Unusual Narrative Gaps	<ul style="list-style-type: none"> Fragmented Recall: Gaps in memory that suggest contamination or external influence.
Absence of Realistic Emotional Correlation	<ul style="list-style-type: none"> Emotional Disconnect: Describing horrific events without genuine corresponding emotional or traumatic symptom signs.
Case Dynamics Indicators	Description
Custody and Divorce Disputes	<ul style="list-style-type: none"> High-Conflict Divorce: Allegations arising during divorce/custody battles. Parental Alienation: Use of false abuse claims to turn a child against their parent or family.
Retaliation or Revenge	<ul style="list-style-type: none"> Post-Breakup Allegations: Allegations surfacing after a romantic relationship ends, especially if infidelity was involved. Workplace Retaliation: False allegations following professional demotions, disciplinary actions or terminations.
Mental Health Factors	<ul style="list-style-type: none"> Personality Disorders: Some individuals with “toxic” personality traits or personality disorders (e.g., Borderline Personality Disorder, Narcissistic Personality Disorder, Antisocial Personality Disorder, Histrionic Personality Disorder, and Schizotypal Personality Disorder) may be more prone or have a propensity for fabricating allegations due to their unstable relationships and disturbed or exploitative thought and behavior patterns. Factitious Disorder: False abuse allegations as a part of a broader pattern of pathological deception or attention-seeking behaviors to fulfill severe emotional disturbances/deficits. Psychosis: Significant mental health conditions that lend themselves to a highly unstable sense of reality, which may produce false allegations of abuse and other conspiracy-theory schemas.
Financial Gain or Legal Leverage	<ul style="list-style-type: none"> Litigation Motive: False claims for financial compensation via lawsuits, blackmailing and extortion. Access to Services: Seeking housing, welfare services, or legal immigration status through fabricated allegations. Malingering: Similar to falsification of medical conditions for personal gain (e.g., dodging military service, staying home from work, or “playing hookie”) but through the application of false claims of abuse instead of false medical ailments or injuries.
Involvement of Third Party Influence	<ul style="list-style-type: none"> Coercion or External Pressure: Allegations are driven by external influences (e.g., family, friends, legal advisors). Therapeutic Misguidance: False memories or exaggerated claims following suggestive therapy (e.g., repressed memory therapy and hypnosis).
Attention-Seeking or Manipulation	<ul style="list-style-type: none"> Need for Sympathy: Fabricated claims to gain sympathy from social groups. Drama Creation: Allegations used to escalate interpersonal conflicts.
No Independent Corroboration	<ul style="list-style-type: none"> Lack of Witnesses: No third-party corroboration of events, or presence of legitimate contradictory witness statements. Lack of Trauma: No signs of symptoms indicating the presence of legitimate trauma in the alleged victim. Lack of Evidence: No physical or circumstantial evidence to suggest that the alleged abuse did occur. Lack of Psychosocial Behavioral Indicators: No behavioral indicators in the alleged offender that support the theory of abuse. Lack of Other Victims: No other victims are located to suggest that the alleged offender has a pattern of abusive behavior.
Delayed or Strategically Timed Reporting	<ul style="list-style-type: none"> Significant Delay: Allegations made long after the event without justifiable cause, and that may align with legal processes. Strategic Timing: Allegations surface at critical moments (e.g., before or after court hearings that have contextual significance).
Behavior Inconsistent with Trauma	<ul style="list-style-type: none"> Normal Activities: Quickly returning to normal routines and behaviors, despite claims of significant trauma. Failure to Seek Help: Outside of what would be contextually relevant, alleged victim deliberately chooses not to seek medical or psychological support, despite the severity of the alleged incident.
False Allegations as a Defensive Strategy	<ul style="list-style-type: none"> Preemptive Accusations: Allegations made to deflect from their own potential wrongdoing. Counter-Allegations: In cases of mutual abuse, or in cases of allegations made by a legitimate victim, another party makes false allegations to discredit the original victim or other party.
Non-Cooperation with Authorities	<ul style="list-style-type: none"> Failure to Aid in Investigative Efforts: Alleged victim will not cooperate with police or CPS investigations. Failure to Obtain Requested Exam: Alleged victim refuses to get a medical evaluation where the findings of the exam might prove whether or not the abuse occurred as alleged.