False statements and the differential diagnosis of abuse allegations.

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Abstract
OBJECTIVE: Because child psychiatrists do not have a consistent way to classify the untruthful child and because there are no generally accepted definitions of the many ways in which false statements occur in allegations of abuse, the objective of this paper is to classify and define the various ways in which false statements occur in allegations of abuse.

METHOD: The author reviewed 40 articles, chapters, and books that contained examples of false statements made by children or caregivers in the context of an abuse allegation.

RESULTS: This paper clarifies the concepts of indoctrination, suggestion, fantasy, delusion, misinterpretation, miscommunication, innocent lying, deliberate lying, confabulation, pseudologia phantastica, overstimulation, group contagion, and perpetrator substitution.

CONCLUSION: The correct classification of abuse allegations is important in both clinical and forensic child psychiatry. The definitions in this paper, which are based on clinical experience, should be studied through systematic research.

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