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Clinical & Forensic Psychology

National Judicial Network Presentation
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My Background

Dr. Michael Bourke is a licensed clinical and forensic psychologist and retired U.S. federal law enforcement officer. He spent the first eight years of his post-doctoral career interviewing, evaluating, polygraphing, treating, and researching sex offenders at a federal prison. For the next 13 years he served as the Chief Psychologist for the United States Marshals Service (USMS). There he created and ran the USMS Behavioral Analysis Unit (BAU) to assist with the identification, investigation, apprehension, and prosecution of sex offenders.

Dr. Bourke and his team have worked a number of high-profile cases around the globe, and he has personally interviewed or evaluated more than 1,000 sex offenders as part of comprehensive risk assessments.

An active researcher, he co-authored the "Butner Study" and published seminal work on the use of tactical polygraph with sex offenders. He has also published numerous studies in the area of psychological safeguarding and employee wellness, served on the editorial boards for several professional journals, and authored three books in the area of behavioral criminology and first responder mental health.

Dr. Bourke has presented and provided case consultation for decades at the FBI Academy, the Central Intelligence Agency and Defense Intelligence Agency, the U.S. Secret Service Training Academy, the Johns Hopkins Applied Physics Laboratory, the United Nations, the National Center for Missing and Exploited Children, and many other agencies around the globe. He has also worked closely with international police agencies, whether to provide training or to help investigate cases, in approximately 30 countries.

He has been on faculty with The George Washington University's Master's Program in Forensic Psychology since 2016. His volunteer activities include serving as a founding Board Member for Raven, a nonprofit focused on finding legislative solutions to combat child exploitation in the United States, as well as serving as the National Chair of the Youth Protection Committee for Scouting America.

Presentation Summary

1. *The correlation between early childhood abuse and later sexual offending*

There is no causal link between early victimization and committing a sexual offense later in life. In fact, there is not even a specific correlation between the two factors; adverse childhood experiences are only correlated with criminality, in general.

2. *Motivational pathways for committing crimes against children*

There are three primary motivations for engaging in the abuse of a child: paraphilic, psychopathic, and hedonistically indiscriminate. And, contrary to popular belief, pedophiles do not comprise the largest group of child abusers.

3. *The relationship between child sexual abuse material and contact offending*

Crimes involving CSAM and "hands-on" offending are often adjunctive manifestations of the similar motivational pathway (e.g., sexual interests in children). Studies that imply the groups differ, especially with risk, are based on methodology that underestimates risk.

4. *Recidivism*

Most studies that describe recidivism rates are based on re-conviction data, which is not the same as re-offense data. Data suggests that official records, which are used by many academics in their research, reflects approximately 1-3% of offenses.

5. *Emerging threats: Artificial intelligence and sadistic online extremism*

- Offenders use AI to extort youth, create artificially-generated CSAM, and "nudify" photos of children. AI also presents unique threats to victim identification efforts.

- There has been a frightening rise in sadistic online extremism, including neo-Nazi satanic groups (e.g., "O9A") and nihilistic sadistic extremists (e.g., "764").

6. *Intervention and treatment efficacy*

There is no cure for pedophilia, or any other paraphilia.

Treatment providers use a management model, not a curative model. Since we cannot change their thoughts and fantasies, we work to stop them from acting on their urges.

Research on treatment efficacy suggests treatment may reduce recidivism by about 4-6%.

- Cognitive-behavioral treatment programs that customize treatment for each offender's unique risk factors are more effective than "generic" programs.

- Treatment programs where the intervention is provided by licensed clinical psychologists have better outcomes than programs where the group therapy is delivered by less qualified paraprofessionals.

- Treatment is most effective when it is offered to youth younger than 18.

- Men who offend against adults (e.g., rapists, exhibitionists) do better in treatment than those who offend against children.

- Non-completion of treatment doubles the risk of re-offending.

- Volunteerism is important. Mandated (e.g., court-ordered) treatment appears particularly ineffective.

A new drug, Degarelix, shows promise in decreasing deviant sexual urges and fantasies. The medication has been approved only to treat prostate cancer; we are currently in the initial stages of running a Phase 2 Drug Trial (Phase 1 was completed in Sweden), with the hope of securing FDA approval to pilot the medication here in the U.S.

7. The Butner Study

There are many inaccurate rumors about the Butner Study, and their propagation is a painful aspect of my professional life.

For those interested in the truth: the study is methodologically sound and was conducted according to ethically appropriate standards. Many of the myths that have been mentioned in open court are not only inaccurate, they are impossible. But facts have not deterred defense counsel or experts from continuing to poison the well and mis-characterize the study's merits in courtrooms across the country. Fortunately, they have not persuaded most judges, but I have seen transcripts from a few sentencing hearings where the judge bought the story.

You may be interested in know the Butner Study came up in testimony before the United States Sentencing Commission. The Chair, the Hon. Judge Patti B. Saris, met with me and asked me to provide a testimonial document, written under oath, about the arguments I heard from other witnesses. This document is available on DOJ and USSC websites, but it's an easy read (in FAQ format), and I will include it in your handouts for your review.

All that aside, since the Butner Study was published there have been others that support our findings, including Delisi et al. (2016), Drury et al. (2020), and Bourke, et al. (2014). These papers have also been included in your handouts.