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Protecting God's Children for Adults

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Superpowers: Safe Adults Have Them

By [Crispin Ketelhut Montelione](#)

Adults have tremendous power when it comes to protecting children. Of course, we have surely heard of cases

where adults have lifted vehicles to protect children or seemed to have inhuman speed to



move children out of the path of a disaster. But then there are the less obvious superhero qualities... For example, when adults work together as a community, studies show that we have the superpower of being able to collectively prevent abuse from happening in the first place. But our superpowers shine more brilliantly when we recognize that we individually have great power in positively influencing a child's ability to disclose abuse. This gives us opportunities to stop abuse and influence a child's rate and pace of healing *and* resilience. What we do as safe adults can actually change the trajectory of a child's wellbeing over their entire lifetime. Here is how that works:

Studies show that when children know that adults are willing to believe them, and advocate for them, they're more willing to come to adults with their problems. When children are more willing to come to us with their problems, they are much more likely to disclose abuse. Here are the facts: Children do not actually talk about the abuse that happens to them right away, in the

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Crispin Ketelhut Montelione

Crispin Ketelhut Montelione is the Associate Director of the VIRTUS® Programs. Before her full-time employment with VIRTUS, she worked as a Program and Training Specialist in the Virginia Diocese of Arlington's Office of Child Protection. Prior to working in the Diocesan Chancery Offices, she was also employed at the Parish level and became familiar with child protection policies from the ground up.

Crispin has presented the Protecting God's Children program to several thousand participants. She

surrounding years or later—in fact, most children do not disclose at all.¹ If a child is able to disclose, there is typically a delay until adulthood,² and even then, the average age of someone who ultimately discloses is 52 (if ever).³ When there is a disclosure in childhood, most people believe that children will go to their parents about abuse or potential abuse. However, studies show that children will first go to their peers with disclosures,⁴ but they will also go to other adults more frequently than they do their parents (though sometimes they attempt with their parents and don't get far).⁵ This shows us that safe adults in the community are extremely important in giving children a conduit to talk about their problems, and to help them when they are experiencing abuse.

has also trained and managed a diocesan team of facilitators through multiple Train the Trainer sessions, and continues to train administrators, trainers and facilitators for the VIRTUS programs nationally and internationally.

Certain factors influence whether or not children are more likely to disclose, which include:

- having access to an adult whom they feel they can trust,
- recognizing what is happening to them is not normal,
- having an inability to cope with the emotional distress they're experiencing,
- wanting to do something about it,
- having the knowledge that they are going to be believed by the adult, and
- being directly asked by the adult about whether or not abuse is happening.⁶

When children come to us and tell us that they are being abused or that their boundaries are being violated, this allows us to put measures into place to help stop the abuse from continuing, or to help recognize signs that abuse is imminent, and we can stop it before it can start. This is one of the ways that we can actually prevent abuse or address it quickly.

We really want to address suspicions of abuse, or knowledge that comes from a child's disclosure, *quickly*, because there is a robust body of research that has shown that when a person has been sexually abused in their childhood, the risk of negative associated outcomes of the trauma increases over their lifetime.⁷ Child sexual abuse has been linked to poor mental health outcomes, more attempts at suicide, more likelihood of future sexual abuse and revictimization, greater likelihood of sexual assault and partner violence even into adulthood, more cognitive deficits, lower educational attainment, more negative physiological outcomes such as earlier onset of puberty, higher rates of eating disorders and obesity, and ultimately, a reduced life expectancy, just to name a few.⁸

Moreover, the effects of abuse for even one child can

have generational impact, to the extent that the abused child's future child and future grandchild will be more likely to experience sexual abuse.⁹ Child sexual abuse is a public health issue for each and every one of us.¹⁰ All adults are involved in the safety of children in our communities, because this issue of at least one out of every 10 children being sexually abused¹¹ affects us in our day to day lives and it affects all of our future generations.

There is hope for healing, but this can depend on a lot of factors. Our healthy and positive interactions with child survivors, even when we don't know they're survivors, is a major factor in a child's wellness, recovery, healing and resilience. Intervention from a safe adult can reduce the risk of many or all of the negative outcomes of abuse.

Many of us might feel uncomfortable with potentially intervening or communicating with a child about abuse or online exploitation, and then reporting it. None of us are alone in these feelings. Feeling uncomfortable with this concept is actually common. One of the important things to remember when we consider our role as protectors is that we often need to consider the most vulnerable person (the child) and their potential needs. Knowing the increased risk of all those outcomes outlined above is a factor that compels us to act in the interest of children's current and future welfare. Sometimes, this needs to be prioritized over our own possible discomfort or cultural barriers that may make it more challenging for us to respond or report.

When safe adults are willing to place the welfare of children in the center of every decision regarding safety, rather than our own worries or fears, it increases opportunities for children to talk about abuse, reduces those negative outcomes and increases opportunities for healing and wellness. This means that we have great power in our role as employees and volunteers. We never really know when a child is going to see us as a safe person they trust. Thank you for everything that you do as a safe adult, who is willing to put those superpowers to use in protecting children, safeguarding childhoods, and promoting healthy relationships.

References

- 1 Kilpatrick, D., Saunders, B., & Smith, D. (2003). Youth Victimization: Prevalence and Implications. National Institute of Justice.
- 2 Reitsem, A., & Grietens, H. (2016). Is Anybody Listening? The Literature on the Dialogical Process of Child Sexual Abuse Disclosure Reviewed. *Trauma, Violence & Abuse*. Vol. 17(3), 330-340.
- 3 Spröber, N., Schneider, T., Rassenhofer, M., Seitz, A., Liebhardt, H., & König, L. (2014). Child sexual abuse in religiously affiliated and secular institutions: a retrospective descriptive analysis of data provided by victims in a government-sponsored reappraisal program in Germany. *JM - BMC Public Health* - March 27, 2014; 14 : 282.
- 4 Many, N., & Collin-Vézina, D. (2021). Recipients of Children's and Adolescents' Disclosures of Childhood Sexual Abuse: A Systematic Review. *Child Abuse & Neglect*. Vol. 116.
- 5 Broman-Fulks, J. J., Ruggiero, K. J., Hanson, R. F., Smith, D. W., Resnick, H. S.,

- Kilpatrick, D. G., & Saunders, B. E. (2007). Brief report: Sexual assault disclosure in relation to adolescent mental health: Results from the National Survey of Adolescents. *Journal of Clinical Child & Adolescent Psychology*, 36(2), 260-266.
- 6 Brennan, E., & McElvaney, R. (2020). What Helps Children Tell? A Qualitative Meta-Analysis of Child Sexual Abuse Disclosure. *Child Abuse Review*. Vol. 29(2), pg. 97-113.
- 7 Merrick, M.T., Ford, D.C., Ports, K.A., & Guinn, A.S. (2018). Prevalence of Adverse Childhood Experiences from 2011-2014 Behavioral Risk Factor Surveillance System in 23 states. *JAMA Pediatrics*, 172, 1038-1044.
- 8 Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.
- 9 McCloskey, L. & Bailey, J. (2000). The Intergenerational Transmission of Risk for Child Sexual Abuse. *Journal of Interpersonal* 15. 1019-1035. DOI: 10.1177/088626000015010001.
- 10 Cant, R., Harries, M. & Chamarette, C. (2022). Using a Public Health Approach to Prevent Child Sexual Abuse by Targeting Those at Risk of Harming Children. *International Journal on Child Maltreatment: Research, Policy and Practice*. Vol. 5, pg. 573-592.
- 11 Downing, N., Akinlotan, M. & Thornhill, C., (2021). The Impact of Childhood Sexual Abuse and Adverse Childhood Experiences on Adult Health Related Quality of Life. *Child Abuse & Neglect*. Vol 120, Oct 2021, 105181

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1) We have great power in our roles as employees and volunteers because:

- A) ☐ When children know that adults are willing to believe them, and advocate for them, they're more willing to come to adults with their problems.
- B) ☐ A child may see us as a safe person they can trust, and could potentially disclose abuse to us.
- C) ☐ Our healthy and positive interactions with child survivors, even when we don't know they're survivors, is a major factor in a child's wellness, recovery, healing and resilience.
- D) ☐ All of the above.

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