



Photo by Jody Horton

Knights of Columbus Open Critical Conversation for Parents on Child Sex Abuse

Most parents operate under a naive belief their family is 'immune' from sex abuse — but without proper awareness, experts indicate they could actually be the most vulnerable.

Jeff and Judy share their story in a video published by the Knights of Columbus called 'Protecting Our Children: A Family's Response to Sexual Abuse.'

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NEW HAVEN, Conn. — Jeff and his wife, Judy, thought they had an invincible circle of protection around their children to keep them safe from sexual abuse. A Knights of Columbus family, with a strong Catholic faith, they lived in a secure, upscale neighborhood, had solid relationships with their children, and kept a close eye on their children's friends and told them to be wary of strangers.

But like most parents in the U.S., Jeff and Judy were "naive." They diligently looked for potential perpetrators of sexual abuse in all the places except the circles where experts say they were most likely to be found: trusted friends and family.

"It was so hard to think that someone we loved so dearly, and trusted so much, would hurt our child and strip his innocence," Judy said in a video published by the Knights of Columbus called "Protecting Our Children: A Family's Response to Sexual Abuse." The video explains this Catholic family's personal and practical account of how they addressed their son's abuse by a close family friend and includes expertise outlining the actual scope and scale of the risks of sexual abuse to children that families face today, as well as practical steps for how to keep children safe or respond if they are harmed.

"This is not a Catholic Church problem," explained Jeff. "This is a societal issue, this is a heart issue, and our hope is that our story can affect change so people will be on guard to protect their children, protect their church and protect their community."

The Knights of Columbus is the largest Catholic fraternal association in the world and is opening a conversation among Catholics about child sex abuse: what it is, how to prevent it, and how to respond. Most parents have a hard time engaging the topic, in no small part due to pervasive stereotypes that offer a false reassurance that their family is immune from child sexual abusers.

According to 2016 data from a CDC-Kaiser Permanente study, one in five children (24.7% of women and 16% of men) are sexually abused by the time they turn 18. U.S. Department of Justice information on sexual offenders states that most victims knew their abuser, and approximately 30%-50% of young victims are sexually abused by other youth.

Supreme Knight Carl Anderson told the Register in an interview the Knights were glad to work with Jeff and Judy and their son to share their family's story and banish these stereotypes and false assumptions that misinform families and put them at risk. The reality is that if it can happen to their family, it can happen to any family, he said.

"We just thought [the video] was really a fresh way of entering into the problem, to understand the problem better, what to look for, and what to do when you see it," Anderson said.

“It does away with the stereotype of who do we think is the bad guy and the stereotype of who we think will never be the bad guy,” Anderson added. “It moves away from stereotypes (which we should move away from), so we can then look at conduct, at action, and be aware of what that can mean.”

Monica Applewhite, who has a Ph.D. in clinical social work and is a leading practitioner in the field of abuse prevention, collaborated with the Knights on the video, told the Register that this conversation on child sexual abuse is overdue. She said generating grassroots awareness of the truth about child sexual abuse and the signs to look for is the best route to preventing sexual predation of children.

Applewhite explained that child sexual abuse is underreported because only one out of three children will ever disclose sexual abuse. The dynamics of sexual abuse — including involuntary sexual response to abuse — are confusing for a child to process. One thing a child will do before attempting to disclose, Applewhite explained, is to “test” their parents with a less serious disclosure to see how they’ll react.

In the Knights video, the son’s “test” at 10 years old was to confide to his father that he had watched pornography. Applewhite explained that the father’s loving and compassionate response to his son laid the groundwork for the son to reveal his abuse by one of his parents’ closest friends. But had the parents exploded, the abuse might never have come to life, and the victimization would have continued.

Applewhite said that children who confide need to be assured they are safe, that they are believed, that it is not their fault, and that everything will be okay.

“Your children have to trust that they can talk to you,” she said.

Applewhite said parents need to be aware of potential abuse symptoms, such as sudden changes in behavior, inexplicable terror and fear in the presence of a particular person, or significant, intense separation anxiety.

She also said parents need to realize that it is “common” for perpetrators to abuse a child right under their nose and in their presence, such as on a couch covered by a blanket, in a dark movie theater or in the pool. It is a common tactic to deceive the child that their parents are somehow okay with the abuse or to convince the parents that the abuse was impossible.

KNOWING THE PERPETRATOR

In nine out of 10 cases, parents will know the person who sexually abused their child, explained Matthew Hartvigsen, director of outreach at Defending Innocence, a project of the Yunique Foundation, which helps equip parents with prevention tools and graphics to have the right conversation with their children about sex abuse.

“You want to be looking closely at what we call ‘the circle of trust,’” he told the Register. He said that is a “hard transition” for parents to make, but he said parents cannot afford to keep themselves in the dark.

“The risk is still there, whether you’re acknowledging or understanding where it comes from,” he said.

The dangers are not just coming from trusted adults, but other children, as well. Ric Peeler, Defending Innocence’s director of awareness, explained the perpetrator may be within the same family or the older sibling of a child’s friend, or another child the same age.

“It’s often another minor that’s actually the perpetrator,” Peeler said.

Unfortunately, how parents respond to these situations has played a major role in why child sex abuse is under-reported. Many parents handle these situations poorly because “they’re caught in the middle” between relationships they care about. Some respond with denial, instead of belief, which exacerbates a child’s experience of the trauma and allows the abuse to continue.

“You’ve got to get the child safe, you’ve got to intervene, and you’ve got to protect other children,” Hartvigsen said.

Because sexual perpetrators come in a variety of forms, Applewhite said parents should contact their local “child advocacy centers” about the next steps. She said they have the expertise to get the child’s story on the record once, without having to repeat it multiple times for different agencies. They also have resources to get abused children the help they need.



Photo by Jody Horton

Dr. Monica Applewhite is a leading expert in the understanding and prevention of child sexual abuse.

Applewhite said parents who discover one of their children or one of someone else's children has committed child sexual abuse need to seek help from a child advocacy center, so the victim child can be safe from repeat victimization and treated and so children who are perpetrators can get the help they need.

"The vast majority of juveniles can be successfully treated to never do that again," Applewhite said. If they do that, parents have every reason to be "optimistic" about the outcomes for their children.

But she said if parents fail to act, it increases the risk a child perpetrator will have a "deviant arousal pattern for life" as an adult. At present, she said, there is no known successful way to cure an adult.

"They have to be prevented from having those opportunities, and they have to get treatment," she said.

PERPETRATORS AND GROOMING

Experts say parents can make a profound difference for prevention in two ways: teaching healthy sexuality and boundaries and enforcing boundaries, and recognizing the signs of potential grooming.

"Generally, with perpetrators, they thrive in secrecy and on their reputation," Hartvigsen said. "They're going to do everything they can to make sure their reputation is squeaky clean and that they are thought of in high regard."

Parents need to observe potential grooming patterns, and the first place is to look closely at "who is forming really close relationships with my kids." Hartvigsen explained perpetrators are methodical and will often use touch to slowly test boundaries.

"Touch can be very appropriate at the beginning, but [the perpetrator] is methodical, and what happens over time is it escalates into inappropriate touch," he said.

Other boundary violations involve "inappropriate jokes" to see how a child reacts or communicating and sharing materials directly in a way that bypasses their parents, such as through texts, calls or email.

A later point of escalation is to get the child to test a boundary that the perpetrator knows the parents won't be happy about and "use that as an intimidation factor."

"They'll threaten [the child]: If you don't do this or that, I'll let your parents know about [what they did wrong]," Hartvigsen said.

Signs of grooming, by their nature, are far more difficult to discern. But Applewhite said parents should confidently enforce boundaries and not try to figure out first whether a potential boundary violation was intentional or accidental. She said when a parent intervenes, a person who accidentally crossed a boundary will understand, apologize and make sure never to do it again; on the other hand, a person who responds to the parent's intervention by becoming angry should not be around one's children.

Applewhite said this correction of another person should be done, ideally, in front of the child, or, if not, the child should be immediately informed that the person was corrected.

HEALTHY SEXUALITY & BOUNDARIES

Both Hartvigsen and Peeler recommended parents have regular age-appropriate conversations with their kids about appropriate signs of affection, consent, safe and unsafe touch, developmental changes in their body, puberty and the appropriate names for body parts.

Peeler said the most vulnerable children are those who cannot communicate effectively. He said parents need to establish with their children an "open and honest dialogue about what they're experiencing and the situations they're in, so the risk goes down."

"The ideas of boundaries, consent, actually having a conversation about what is safe or appropriate or inappropriate touch are all really critical conversations to have with your children," he said. Peeler added that these conversations are also critical to help prevent one's child from becoming a perpetrator.

Many times child-perpetrators are "acting out what they've seen," and, unfortunately, the average age of a child's first exposure to pornography is 11 years old.

Applewhite agreed that parents need to make sure they educate their children about healthy sexuality first, so they can talk with their children about sexual abuse and sexual boundaries. If parents are silent about sex, their children won't have any reference point to be able to identify the abuse. Because victimization happens at tender ages, waiting until a child is 18 is "too late."

Applewhite said prevention starts with teaching the sacredness of the human body. “Everyone should be able to get these resources through their dioceses,” she said. “Every diocese since 2002 has been required to have that.”

Although these discussions are difficult for parents, experts believe that large-scale awareness is key to depriving perpetrators of the secretive environment they need to abuse children.

Applewhite said she is exploring with the Knights the development of a guide for parents to discuss the video with their children, particularly in the age range of 8 to 12 years old. A spokesperson for the Knights said they would be looking at further steps following the group’s general convention.

“We can make a significant impact,” Peeler said. He pointed out that the ubiquity of home fire alarms and car seats has shown how society can successfully reduce serious harm to children. “Those statistics have all declined — we can make an improvement as a society if we want to make this an issue. Part of our job is to say: ‘This can’t continue.’”

Peter Jesserer Smith is a Register staff writer.

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