



# Position Statement

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## VIOLENCE

### CNA POSITION

Violence<sup>1</sup> has serious implications for the physical and mental health of individuals, families, groups and societies. In all its forms – interpersonal, self-directed, physical and/or psychological – violence is dramatically increasing in Canada and the world. Nurses, often the first to interact with individuals affected by violence and often victims themselves, have critical roles to play in dealing with and eliminating violence.

As trusted health care professionals, nurses have a responsibility to the public to become knowledgeable about issues of violence and to incorporate this knowledge into all facets of their practice. Working as members of multidisciplinary care teams, nurses provide a full range of interventions from health promotion strategies, such as promoting non-violent interactions in families, to support and treatment for victims and survivors of violence.

CNA believes nurses have an equally important role to play in advocating the elimination of violence in society. Nurses in all practice settings must take an active role in communicating the fundamental principle that everyone has a right to live a life free from violence. Refusal to accept violence plays a role in changing societal attitudes.

Of critical importance to nurses is the elimination of violence in the workplace. A trend toward increasing violence is found in all health care settings, rural as well as inner city and urban areas.<sup>2</sup> Nurses are at particularly high risk of verbal and emotional abuse, physical violence and sexual harassment in the course of their work. CNA takes the position of zero tolerance of violence in the workplace. Nurses must assertively refuse to tolerate violence and harassment and support those who have been abused by taking individual and collective action within the workplace and through nursing organizations.

CNA further takes the position that it is the responsibility of all employers to ensure a safe and secure work environment for nurses and all employees. This includes implementing an environment of open communication with policies and protocols to support employees reporting violence in the workplace.

Nurses cannot manage and/or eliminate violence alone. The approach must be multidisciplinary, multisectoral and multi-faceted. The public, professionals and workers across sectors, employers, unions and governments have roles to play that ensure legislation, education, research, administrative supports and adequate resources are in place to deal with the impact of violence and to promote changes in societal attitudes.

### BACKGROUND

Violence is recognized as a social act involving a serious abuse of power. Over the past decades, it has become a public health concern of epidemic proportion with serious consequences both for those who provide and those who receive health care.<sup>3</sup> CNA defines violence in a broad sense to encompass verbal and emotional abuse, physical violence and sexual harassment.

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<sup>1</sup> Violence is a generic term that incorporates all acts causing physical and/or psychological harm (Kingma, 2001).

<sup>2</sup> (ICN, 1999).

<sup>3</sup> (Kingma, 2001).

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Violence has many manifestations (e.g., violence against women, spousal/partner abuse, dating violence, abuse or neglect of children and the elderly) and takes place in diverse settings including homes, schools and places of work. Violence is deeply rooted in cultural values and traditional social structures that particularly disempower women and children, who are the most common victims. Different cultures may have different interpretations as to what actions are considered violence.

A report of the International Labour Organization (1998) concluded that workplace violence is becoming increasingly global and crosses borders, work settings and occupational groups. It also reported that women are especially at risk because so many are concentrated in high-risk occupations.

Health care workers, especially nurses, are at a high risk of violence in the workplace. The risk of health care workers experiencing violence may be 16 times greater than the risk for other service workers. Health care workers are more likely to be attacked at work than prison guards, police officers, transport workers, retail or bank employees.<sup>4</sup>

Violence includes client or colleague abuse with health care workers themselves as the aggressors. Provincial/territorial nursing regulatory bodies have established mechanisms for the public to report incidents of violence or abuse of clients by nurses. They also have standards that provide guidelines for what constitutes acceptable or appropriate behaviour in any situation involving a client and a nurse. Nurses are guided by *The Code of Ethics for Registered Nurses* in dealing with issues of violence.

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- Kingma, M. (2001). Workplace violence in the health sector: A problem of epidemic proportion. *International Nursing Review*. 48, 129-130.

#### Replaces:

- Violence in the Workplace (1993)  
Interpersonal Violence (1996)

#### Also see:

- CNA Position Statement: *Quality Professional Practice Environments for Registered Nurses* (2001)  
CNA Position Statement: *Nursing Professional Regulatory Framework* (2001)

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