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# From the Editor

## BATTLEFIELDS WHERE WAR BEGINS

“... lingering resentment, for example, grudges long held, resources clutched to rather than shared, help not offered. These are the acts of war that most threaten our homes and workplaces”<sup>1</sup>

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As the contents of this issue of *ANS* affirm, nurses are all too familiar with war that begins at home. Our familiarity stems from many factors—the focus of nursing practice on the family, the hours devoted to spending time with people at the most important and intense moments in life, and the nature of interactions that tend to emerge in a nurse/person interaction.

It is therefore appropriate that nurse scholars turn significant attention to the problems of violence and trauma in everyday experience, as the scholars of the articles in this issue of *ANS* have. The groundbreaking work of early nurse scholars in this area, such as Ann Wolbert Burgess (who formulated the concept of rape-trauma syndrome in the 1970s) and Jacqueline Campbell (who developed a widely-used danger assessment tool for women victims of domestic violence) paved the way for nurses to continue to bring new insights and knowledge related to the health hazards of violence. Their groundbreaking work, and the work of many other nurses who have followed, have formed a cornerstone for knowledge of trauma and violence for all disciplines.

Interpersonal violence in the nursing workplace has, for as long as I can recall, formed a major topic in nurses’ “water cooler” talk. The worn-out phrases “nurses are their own worst enemies,” and “nurses eat their young” still crop up all too often in my conversations with other nurses. The persistence of these messages can be attributed to the sad realities of nurses’ experiences, but these messages can be challenged with a call to recognize the significant, and growing, efforts to refocus attention not only the realities of nurses’ support for one another, but also growing initiatives to change the workplace culture in a direction of peace and harmony.

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Addressing issues of violence and trauma in the workplace requires what a friend of mine calls “courageous conversations.” These are conversations that openly acknowledge the subtle acts of workplace warfare; they are key to interrupting workplace violence. But beyond such acknowledgement, if nurses desire to turn this around, it is imperative to learn and practice acts of peace. It is widely recognized that domestic and workplace violence form the foundation upon which international conflict is built.<sup>2</sup> If we find ways to shift these damaging local interactions, then we build a reservoir for establishing a longed-for world-wide peace.

The articles in this issue of *ANS* address the approaches that nurses are using and investigating as ways to turn away from violence toward acts of peace, and to heal the harms wrought by violence. The works of these scholars make significant contributions to knowledge of healing in the face of violence. Their insights bear major implications for how nurses can address issues of workplace violence. I believe that it is incumbent upon all nurses to move these conversations beyond the realm of the water cooler and into the nurses’ stations, conference rooms, and research centers where we can expand our knowledge and understanding of our own workplace violence, and move with more determination toward peace and harmony!

—Peggy L. Chinn, PhD, RN, FAAN  
Editor

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