

# Casting a wide net to curb violence against women



**The nursing community** was shocked and saddened to hear that on November 12, Windsor RN Lori Dupont, 37, was murdered while on the job at Hotel-Dieu

Grace Hospital. She was killed by her former boyfriend, an anesthesiologist at the same hospital. Five days later, Lori's funeral was held in Amherstburg and an honour guard of 24 RNs lined the walk from the hearse to the service, each one holding a single, red rose over the casket in respectful remembrance of their colleague and friend.

Lori's tragic death, and the death of RN Lorraine Egan, 29, who was shot by her half brother in June, remind us of the pervasive abuse and violence that women face in our society – inside and outside the workplace. While violence affects all of us, Statistics Canada data for 2000 show that women make up 86 per cent of victims of sexual assault. Women also account for 85 per cent of the victims of spousal violence. And data for 2001 show four out of five victims of spousal homicide were women.

Lorraine and Lori's murders reinforce the critical importance of effective harassment, abuse and violence prevention programs everywhere, including health-care facilities. And they remind us that we need to educate people about what we can and must all do to prevent violence and abuse.

As citizens, nurses and members of RNAO, we must urge governments, employers, our own communities, and all society's institutions, including the courts, to make this a top priority. That's what RNAO called for on behalf of all nurses when we issued a public statement about Lori's murder. We expressed not only the profession's sorrow, but also our resolve to work on system

change. Members expressed their appreciation and support for that approach. We received more than a dozen heartfelt responses from members, one from a nurse in London who offered to travel to Windsor to cover the shifts of Lori's colleagues while they were at the funeral.

Members also rallied with RNAO to help bring the issue of violence against women to the public on December 6th, the *National Day of Remembrance and Action on Violence Against Women*. I attended a candlelight vigil in Amherstburg, and would like to thank Essex Chapter President Lynda Monik and University of Western Ontario nursing student Jennifer Verkoeyen for their initiative and help at the event. RNAO executive director Doris Grinspun spoke at several events in Toronto. And chapter presidents, their political action officers, and many other RNAO members participated in events in Kitchener, Cornwall, Kingston, Brampton, Ottawa, Sioux Lookout, and other communities across the province.

In their everyday practice, nurses have also shown their support for helping curb violence against women by embracing RNAO's best practice guideline, *Woman Abuse: Screening, Identification and Initial Response*, released publicly November 28. With routine screening of all women aged 12 and older, more education on woman abuse in nursing curricula, and enhanced skills and standardized approaches that nurses can rely on to help women open up, we can all do our part to help prevent further violence against women.

Studies have shown 22 to 40 per cent of women looking for help in a hospital emergency room are there because of abuse

inflicted by an intimate partner. We need to remember that we – nurses – are the first person they encounter when they enter the health-care system – whether we're in the ER, in the community, in schools, or in their homes as their friends and family. And they want – and need – to be helped.

Nurses in all sectors of the health-care system have an important role to play in providing that help not only by identifying victims of abuse, but by validating their experiences and framing abuse as a health-care issue, supporting them through physically and emotionally trying times, encouraging them to explore options for safety, and offering them access to resources that will help them protect themselves and any children who may be at risk.

The senseless deaths of Lorraine Egan and Lori Dupont serve as a poignant reminder to all nurses that we must be proactive in our nursing practice, advocating on behalf of abused

women at the bedside and beyond. We must partner with other health-care professionals, community service providers, and the justice system to get abused women the care, support and action they need. The women of this country – including nurses – need greater action and improved collaboration between hospitals, public health units, schools, police, mental health and other health-care professionals and politicians so they can live and work in safe and healthy environments. Let us never forget what is at stake if we fail to act.

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