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Theorizing Oppression: Implications for Nursing Research on Violence Against Women

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La façon dont l'oppression est théorisée est très importante pour la recherche en sciences infirmières, en général et pour la recherche en sciences infirmières sur la violence faite aux femmes, en particulier. La violence n'est pas le comportement aberrant de certains hommes ni le simple problème de l'oppression d'un sexe. Elle est plutôt un problème social complexe, pénétrant, qui surgit et qui se nourrit de multiples lieux d'oppression, y compris la race, la classe sociale et le sexe. La conceptualisation de la violence qui néglige l'analyse du pouvoir, de l'oppression, de l'agent de la violence et de la résistance pourrait servir à soutenir et à maintenir la violence. Ainsi, l'utilisation de cette conceptualisation dans la recherche en sciences infirmières peut mettre celle-ci au même niveau que des structures perpétuant la violence et l'oppression. Les théories sur la violence, fondées sur des analyses complexes du pouvoir et de l'oppression, mettent l'accent sur les causes sociales de la violence. Elles exigent l'analyse du racisme, du sexisme et de la classe sociale, et elles établissent comme objectif de recherche la façon dont les gens, les institutions et l'état ripostent à l'oppression. L'analyse de l'oppression comme phénomène de simultanéité guide la recherche en sciences infirmières dans la violence faite aux femmes vers un changement social; elle est possible au-delà de la question de la violence et peut aider les sciences infirmières à participer à l'élimination des causes sociales des problèmes de santé.

The way in which oppression is theorized is critical to nursing research in general and nursing research on violence against women in particular. Violence is not just the aberrant behaviour of some men, or a simple issue of gender oppression; rather, it is a complex, pervasive social problem that arises from and is sustained by multiple sites of oppression, including race, class, and gender. Conceptualizations of violence that neglect analyses of power, oppression, agency, and resistance may serve to support and sustain violence; thus their use in nursing research can align nursing with structures that perpetuate violence and oppression. Theories of violence that are informed by complex analyses of power and oppression focus inquiry on the social causes of violence; require analysis of racism, sexism, and classism; and establish, as a goal of research, the countering of oppression by individuals, institutions, and the state. Analyzing oppression as simultaneity guides nursing research into violence against women toward social change, is applicable beyond the issue of violence, and can help nursing contribute to the eradication of the social causes of health problems.

Initially I thought of violence in intimate relationships as an issue of gender. After all, violence within relationships is committed primarily

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by men against women. However, as I studied the issue and began related research, I discovered that racism and classism, in addition to negative attitudes toward women, pervade common understandings of violence in theory and research, and characterize many of the responses of health-care professionals to women who have been battered. I began to examine theories of gender oppression and found that I could not theorize gender separately from other sites of oppression, and turned to the notion of oppression as arising from multiple sites simultaneously: oppression as simultaneity.

The way that violence is theorized is critical to nursing because, as will be shown, the theoretical perspective chosen either can align nursing with the status quo or can challenge the social foundations of violence and thus effect change. Secondly, theoretical perspectives must be explicit in nursing, to permit systematic and critical interpretation of research from other disciplines. Finally, the choice of theoretical perspective has significant implications for methodological choices.

The way in which oppression is theorized is also crucial, because nursing serves a diverse clientele who experience oppression at multiple sites such as race, age, gender, class, sexual orientation, religion, etc. Also, clients of nursing commonly experience oppression as a result of illness and disability. Nursing's traditional commitment to advocacy and ethical practice relies on an understanding of power and inequity, and hence of oppression.

The purpose of this paper is to explore the ways in which theories of violence are informed by analyses of power and oppression, as well as to consider how theorizing oppression as simultaneity contributes to understandings of violence and provides direction for nursing research. Most importantly, I hope that examining theories of oppression in relation to this substantive area will demonstrate the utility of seeing oppression as simultaneity and stimulate further analysis. The significance of theorizing violence and oppression will be discussed in relation to nursing research, and I will argue that conceptualizations of violence devoid of analyses of power and oppression serve to support and sustain violence, and thus cannot contribute to its eradication.

Conceptualizing Violence

At present there appear to be two central problems in conceptualizing violence. First, three distinct views have been used and have given rise to contradictory explanations of violence and directions for practice. Second, within those three views, power and oppression have been

under-theorized. Under-theorizing power and oppression has limited each of the perspectives and, I believe, created barriers to their integration.

Theorists from across disciplines have attempted to understand violence by focusing on and seeking causal explanation for violence within individuals, within couples or dyads, and within society. Bograd (1988) and Gelles and Loseke (1993) label these three predominant "lenses" the psychological lens, the sociological lens, and the feminist lens, referring not to specific disciplines, but rather to the focus of inquiry and presumed causality of violence.

Initial attempts to make sense of violence against women sought to explain violence by focusing on the individual. These approaches emphasized the psychology of the victim, and, more recently, the psychology of the perpetrator. The focus on the characteristics of victims led to victim-blaming theories of violence such as the theory of learned helplessness, which "merely labels as a peculiarity...what is in fact a reasonable response to an unreasonable situation" – thus diverting attention from the situation to the victim (Wardell, Gillespie, & Leffler, 1983, p. 76). More recent attention on the psychology of the perpetrator has shifted the locus of causes of violence to the psychopathology of the perpetrator, but leaves power and gender relations unexamined. The focus on the individual popularized by the media perpetuates, Dobash and Dobash (1992) argue, "unsubstantiated yet damaging theories about the problem, its victims, perpetrators and solutions, [notions that] implicitly assume that this is strictly an individual problem suffered by deviants needing psychiatric care rather than a social problem in need of wider remedies" (p. 32). Bograd (1988) criticizes the focus on psychology of the individual for suggesting that violence is an aberrancy of a few husbands (rather than the usual pattern of most men), excuses men, implicates women, and concludes that the characteristics of abused women are the *causes* rather than the consequences of abuse. Causal explanations of violence within the psychology of the individual tend to leave power and gender relations unexamined and consider violence in isolation from the social and historical contexts in which it occurs.

The second set of perspectives on violence focuses on dyads or families, and seeks explanations of the causes of violence in social relations within couples and families. These perspectives, which are used in most research on violence (Silva, 1994), tend to be gender-neutral, to treat power inequities as only one factor among many, and to explain violence as resulting from external stresses and breakdown of the family,

rather than as a part of most normally functioning families (Bograd, 1988; Stanko, 1988). Straus and Gelles have carried out perhaps the most influential work on relations within dyads. Straus and Gelles (1986) conceptualized violence as a conflict between parties and, using the Conflict Tactics Scale (CTS), found equivalent violent behaviour among men and women. Yllö (1993), Dobash and Dobash (1988), Silva, and others have critiqued the perspective underlying the CTS because it does not critique power or gender relations. As does the focus on individuals, a focus on dyads or families limits analysis of the influence of the social context.

The third set of perspectives, labelled "feminist," tends to explain violence as arising from the social context and contributes an analysis of the influence of gender and power to theorizing violence (Yllö, 1993). Gelles (1993) and others (e.g., Dutton, 1994; Letellier, 1994) argue that feminism uses a single variable (patriarchy) to explain the existence of wife abuse, and use evidence of men who are not violent and evidence of violence in same-sex relationships to argue that patriarchal ideology does not account for male violence. However, this is a very narrow view of feminism (see hooks, 1984) and, as countered by Yllö, reflects a very narrow conceptualization of patriarchy. As Renzetti (1994) and others have noted, feminists are not concerned exclusively with gender.

Tensions and conflicts between these various perspectives have led to very different explanations of violence, and therefore to very different approaches to decreasing violence. The battle between these varying theoretical perspectives continues to be waged, and violence theorists are now calling for integrated models (e.g., Dutton, 1994; Miller, 1994; Renzetti, 1994; Tolman & Bennett, 1990). However, the approaches to such integration are contentious, and, I believe, seriously constrained by the limited ways in which power and oppression have been theorized in relation to violence.

Power, Oppression, Resistance, and Perspectives on Violence

Analyses of power are generally not found in work that focuses on the psychology of individuals, which results in an implicit assumption of equality between individuals. Perspectives that examine violence within dyads or families view power as one of many factors in violence, and the view of power used is usually one in which there are two equally opposing forces. From feminist perspectives, power inequalities are assumed to exist, and they are central to how violence is theorized. However, power may not be explicitly theorized, or it may be theorized in a variety of ways within each of these perspectives.

Three conceptualizations of power initially proposed by Lukes (1974) and applied and refined by Gaventa (1980) highlight the limitations of the various ways in which violence has been conceptualized. The first is a traditional view of power as a contest between two opposing forces in which the "winner" usually has the greatest resources (intellectual, material, personal, experiential). This view is based on the assumption that all individuals and groups have equal opportunity to express dissent. It assumes that non-participation is the fault of the non-participant, a consequence of apathy or lack of experience or skill. Powerlessness is explained as lack of knowledge, communication skills, political expertise, or clout (Dykema, 1985) – in other words, a deficit on the part of the least powerful. This conceptualization of power is congruent with and supports views that focus on the individual and that see the differences between abused and non-abused women as the causes of violence. This view of power is also compatible with dyadic perspectives on violence, as exemplified by the seminal work of Straus and Gelles (Gelles & Straus, 1988; Straus & Gelles, 1986), in which violence is a conflict between two equal and opposing parties. Using this view of power, issues of oppression and resistance do not arise; since the parties are equal, women are assumed to be autonomous agents, and research questions such as "why does she stay?" are justifiable.

The second conceptualization of power suggests that some people are excluded from contesting their lack of power. A set of dominant beliefs, attitudes, values, institutional rituals, and practices operates to benefit certain people or groups. Those who benefit are supported in defending their position; those who do not benefit are stifled before they are heard or are simply excluded from decision-making. This view of power is implicit in most feminist conceptualizations of violence, which regard the power inequalities fundamental to wife abuse as deeply gendered, arising from multiple sources of oppression, and fostered by the state (see, for example, Hoff, 1992; Kjervik, 1992; MacKinnon, 1993). Hooks (1984) argues that the state has not acted significantly to end violence against women in their homes because it prefers violence in the family to violence against the state. The devaluing and oppression of women in society is seen as fundamental to violence against women. Because women are excluded from contesting their weak positions, resistance is limited and the agency of women is constrained. From this view of power, the research question becomes "what keeps her here?" and is directed towards the structures of society and the state.

In the third conceptualization, power relationships are maintained because the very wants and needs of the dominated are shaped by

more powerful others. Gaventa (1980) believes this phenomenon occurs (1) as a psychological adaptation to powerlessness, (2) from a lack of opportunity to develop political consciousness, and (3) from inconsistent belief patterns among the dominated. This view of power also underlies many feminist understandings of violence, leading to much more complex analyses of the experiences of women who are abused (e.g., Hoff, 1990; Wuest & Merritt-Gray, 1994). Unlike views of power that give rise to theories such as learned helplessness, this view of power explains women's behaviours as adaptations to powerlessness and domination rather than as psychological deficiencies, and sees domination arising not only from the person inflicting abuse, but from an entire system that tolerates, accepts, and perpetuates abuse. It follows that feminists have argued that research on violence must be concerned more with oppression than with victimization (e.g., Kjervik, 1992; McBride 1992; Yllö, 1993). However, at the basis of criticisms of the narrow concern with gender offered by feminism (Dutton, 1994; Gelles, 1993; Letellier, 1994) is a very real problem with the ways in which oppression has been theorized by some feminists.

Before we turn to problems with feminist theories of oppression, a brief summary of Foucault's perspective on power (1978, 1980) is offered to contrast with the three dimensions described above. Foucault sees power as intrinsic to all social relations. He does not see power as a commodity, as something to be held or owned. Rather, Foucault theorizes power as existing only in action, as being enacted in all relationships. He does not view power as centralized within formal institutions such as the state, or as descending "top-down." Rather, power comes "from the bottom up." Because power is enacted in all social relations, all relations of power include resistance, and power is positive and productive as well as negative and repressive. Foucault sees power relations as intentional, but not in the sense of being enacted consciously as the result of a choice or decision of an individual. Rather, local tactics are connected to one another, forming comprehensive systems. "The logic is perfectly clear, the aims decipherable, and yet no one is there to have invented them, and few can be said to have formulated them" (1978, p. 95). Finally, Foucault sees power as most effective when it is insidious or disguised.

If this view of power is used to understand conceptualizations of violence, then power is thought to be enacted in all social relations, and analyses of power are required with regard to the individual, the dyad, and the society. Because power always includes resistance, analyses of resistance are simultaneous with analyses of power. From Foucault's perspective, explanations of violence arising from the state are not

sufficient, and domination is theorized as arising from the whole network of social relations rather than only from powerful individuals or institutions. In addition, there is no rational intentionality to explain violence. Rather, intentionality may be understood at the local or individual level, but is not clear at the collective level, thus the "state" cannot "prefer" violence. Following Foucault, oppression and resistance are theorized to occur simultaneously throughout all social relations and, to return to feminist views on oppression, not just at the interface between genders.

Feminist theorizing shifted the discourse on oppression from class as the central source (which arose from Marxism) to a concern with gender as the central source of oppression (e.g., Acker, Barry, & Esseveld, 1983; Eistenstein, 1977; Harding, 1987). This shift, born of white, middle-class, Western feminism, drew attention to gender-based oppression. However, the placing of gender at the centre of feminist theorizing implies, erroneously, that gender is the central defining feature of a woman and "reflect(s) the dominant tendency in western patriarchal minds to mystify a woman's reality by insisting that gender is the sole determinant of woman's fate" (hooks, 1984, p. 14). This focus on gender rests on essentialized notions of "woman" and "patriarchy" (Walby, 1992); that is to say, woman is conceived of as a biologically or socially defined "essence," and patriarchy as a monolithic entity (see Alcoff, 1988; Collins, 1989). Treating gender as a category distinct from race and class also essentializes these categories.

Feminists such as Brewer (1993), Collins (1986), Mohanty (1992), Ng (1993), and Smith (1990) (with notable leadership from black feminists) have contested the centrality of gender oppression, essentialist conceptions of gender, and the subordination of the experiences of race and class. Following these critiques, feminists have theorized oppression as arising from multiple sites, most expressly including race, class, and gender. The critiques of uni-causal models of oppression have resulted in pleas for radical pluralism. However, accounting for the intersection of endless sources of oppression presents significant challenges to the meaningful analysis of oppression (Bordo, 1994; Phillips, 1992). Simultaneously, poststructuralist critique has questioned the utility of analytic categories such as race, class, and gender, and has declared such categories to be too internally diverse to be useful (Walby, 1992). These challenges have served to destabilize feminist theory and threaten the very categories by which oppression can be understood and challenged (Bordo; Hoff, 1994; Phillips; Smith). The proposed alternative is to focus on oppression as arising simultaneously from multi-

ple interacting sites, without abandoning the analytic categories of oppression in related sites such as race, class, and gender.

Oppression as Simultaneity

Viewing oppression simultaneity, sites such as race, class, and gender are seen to interact in a complex manner and the effects are formative and multiplicative, rather than additive; multiple sites of oppression interact to reinforce and amplify oppression. Thus to be an aboriginal woman restricts material options, and poverty amplifies racism, and so on. This approach displaces the feminist discourse that attempts to hold gender at its centre, thereby subordinating the experiences of race, class, and sexuality, and favours a feminist theory that starts from a consideration of how race, class, or sexuality determines the positioning of a subject (Visweswaran, 1994).

A discourse of oppression as simultaneity suggests a shift in the starting point of research from particular *sites* of oppression to the *experiences of oppression*. Therefore, the categories for analysis become experiences of racism rather than race, sexism rather than gender, heterosexism rather than sexual orientation, and experiences of poverty or wealth rather than class. Such an approach is more meaningful and less likely to essentialize individuals according to colour, gender, sexual orientation, and so on.

Experience must, however, be problematized. Allen (1996) and Scott (1991) argue that experience is often held as an incontestable and irreducible form of evidence. Treating experience as unquestioned evidence is problematic because it precludes critical examination of how experience is produced and how experience produces subjects. Rather than contest historical, socially constructed categories such as "Native Indian," "lesbian," and "woman," treating experience in this manner tends to reproduce such categories as though they are "real." Scott calls for attention to be placed on processes that position individuals and produce their experiences, a view in which it is "not individuals who have experience, but subjects who are constituted through experience" (p. 779). Experience is no longer the evidence for what is known, but rather experience is that about which knowledge is produced. Scott would treat all categories of analysis (such as race, class, and gender) as "contextual, contested and contingent," but she cautions that "this does not mean that one dismisses the *effects* of such concepts and identities, nor that one does not explain behavior in terms of their operations" (p. 793).

Thus experiences of everyday oppression are suggested as a beginning for analysis, with the analytic categories of power relations being used to link these experiences to the social structural constraints of institutions and political economy. A focus on the ways in which experiences of racism (for example) influence individuals avoids treating race as something that individuals "are," and moves beyond dichotomies such as black/white, male/female. This approach avoids simple oppositional views of power; therefore, congruent with Foucault's views of power, oppression and resistance are seen to coexist simultaneously along multiple sites. This discourse of oppression fosters emancipation by altering the goal of research, changing the way in which the oppression of subjects of research is theorized, altering the way in which the researcher locates her/himself, and reframing research questions.

The way that oppression is conceptualized is critical to the theories about violence that are used to guide research. If gender is the sole source of oppression, then wife abuse is seen as arising from relations between men and women, and theories that locate the causes of violence within the individual and family are sufficient. However, a view of oppression as simultaneity demands a view of violence as also arising from the social context. Such a perspective is clearly congruent with the feminist focus on the context of violence (Bograd, 1988; Dobash & Dobash, 1988; Hoff, 1992; Yllö, 1993). Further, this view of violence as arising from multiple sites of oppression permits and requires an analysis of racism, classism, heterosexism, ageism, and other experiences of oppression in research related to violence. This is particularly critical to nursing research on violence against women, given the role of racism, classism, and sexism in responses by health professionals to women who have been abused (Barbee, 1992; Dobash & Dobash, 1992; Hampton & Newberger, 1988). Wife abuse no longer can be seen as a woman's (or a women's) problem, but rather becomes a problem of social proportions that requires intervention not only with individuals who experience and perpetuate violence, but with other social relations that permit and sustain violence. Thus the research questions must be reframed to include the context of oppression from which violence arises, and the goals of research must be broadened to include social change and emancipation. The researcher no longer merely locates her/himself in what has been called an increasingly sterile manoeuvre (Visweswaran, 1994); rather, the experiences of oppression and resistance of both the researcher and the researched must be theorized.

Viewing oppression as simultaneity is congruent with a Foucaldian perspective on power. Foucault (1978, 1980) asserts that relations of

power are not external to other types of relations, such as economic processes, knowledge relationships, or sexual relationships, but, rather, are integral to these relations. Sites of oppression such as class, race, and gender are "major dominations," which are hegemonic effects sustained by all of the multiple relations of force at the local level (1978, p. 94).

The ideas of oppression, power, and gender are intertwined and are fundamental to the theorization of violence. Violence has been seen as caused by variously individual pathology, family dysfunction, or the social context. Although it is acknowledged to occur between genders, power and oppression have not been central, and gender is not theorized in these terms. The focus of research is predominantly on the individual or the family and on the causes of violence arising from individuals and families. Although power and oppression are central to feminist theories of violence, when power is viewed from the "top down" attention is drawn away from the agency of the individual. Viewing power as enacted within all social relations requires analyses of power within all perspectives and offers the opportunity to link these apparently divergent views of violence. Moving beyond uni-causal models of oppression shifts the discourse from violence as gender oppression to violence as simultaneously arising from racism, classism, and other sites of oppression. Additionally, viewing power as enacted in all social relations directs the discourse away from exclusively individual, dyadic, or ecological models of violence and towards an understanding of power and violence as occurring within a network of power relations throughout the social fabric.

Conceptualizing Violence in Nursing Research

Without the critical distinction between the aims of the science of nursing, which concern generalization, and the aims of the art of nursing, which involve individualization (Johnson, 1991), the nursing philosophy of individual uniqueness, which may be appropriate to nursing in everyday application (Thorne, 1991), tends to uncritically guide nursing theory and research. Nursing theories tend to focus on the individual and conceptualize the individual as interacting with, yet distinct from, the environment. Nursing theories also tend to conceptualize the environment as an influence on the individual and as a context of health rather than as a cause of health and illness and as a target for intervention (Chopoorian, 1986; Kleffel, 1991). Similarly, family theories used in nursing tend to focus on isolated family systems or units, with little regard for the relationship between family and society. The indi-

vidual orientation within nursing theory appears to fit comfortably with theories of violence that focus on the individual. These theoretical perspectives foster views of violence that identify the individual as the source of the problem (whether that individual is the abuser or the abused) and the target for intervention. Furthermore, the medical model continues to dominate health care and thus supports nursing in "medicalizing" violence, focusing on the pathology of the individual, and offering interventions aimed at improving the "health" of individuals rather than strategies aimed at altering relations that create and sustain violence.

There is a small but growing body of nursing research into violence against women. Nursing research has helped us to understand violence in a variety of ways and has made an especially significant contribution in highlighting the prevalence and significance of abuse during pregnancy. Nursing research has tended to focus on the individual, and consequently, as noted by Campbell (1993), "nursing research has been more concerned with responses to and characteristics of violence than causes" (p. 503). Despite claims that nursing has tended to use feminist and critical-theory perspectives in research on violence (Campbell, 1992), most nursing research has not been explicitly feminist, and has not used theories of violence in which critique of power relations and oppression are central or in which violence is seen as arising from the social context. For example, Straus and Gelles's Conflict Tactics Scale (CTS) is often used in nursing research without reference to the extensive feminist critiques of that instrument. In addition, research is often used to prescribe clinical approaches that focus exclusively on the individual woman. While adding to our knowledge about violence, such research does not challenge the social structures that make violence possible.

Nurse researchers who have been explicit in their use of feminist theories of violence have attended to power relations and the social context and produced work that provides direction for action beyond the individual woman. For example, in her ethnographic study of battered women in their formal social networks, Hoff (1990, 1992) focuses on the sociocultural context of violence and explicitly considers power relations and oppression. She identifies the need for public awareness, consciousness-raising regarding the role of women and redefinition of oppressive social structures, the redirection of policy and human-service providers to hold assailants rather than victims accountable for violence, and the need for nurses to combine social action with crisis-intervention strategies. Wuest and Merritt-Gray (1994) were also explicit in their use of a feminist approach, and studied the social vio-

lence done to women as they attempted to leave abusive relationships. They identify the implications for social policy and programs, and for the attitudes of nurses and other service providers who become frustrated with women who return to or cannot leave abusive relationships.

Nurses are also beginning to study oppression in relation to violence. For example, Campbell, Pliska, Taylor, and Sheridan (1994) report battered women's perceptions of racism and classism on the part of hospital emergency personnel. However, for the most part nurse researchers either have not considered or have not critically examined issues of race and class in relation to violence. For example, Trucker (1992) reports that she interviewed women who were of a certain race, social class, and treatment experience (presumably made possible by race and class), but fails to specify the women's class or race (or whether ethnicity varied) and fails to include these categories in her analysis. McFarlane (1993) sought to understand the different ethnic patterns of abuse between African-American women, Hispanic women, and white women, presumably because of the limitations of previous studies. However, her study includes no discussion of the basis on which women were assigned to these non-parallel categories, no discussion of class differences between the women, no attention to the cultural appropriateness of the screening used, no discussion of the likelihood of affirmative answers, no discussion of the ethnicity of the researcher, and no suggestion that there would be positive consequences for those women who disclosed abuse. These shortcomings raise serious doubts about her conclusion that the "frequency and severity of abuse was appreciably worse for white women" (McFarlane, p. 357). Given that the race of a woman may be a particularly critical factor in the decision to disclose abuse (Dobash & Dobash, 1992), the differences in findings may solely be a function of reporting decisions by the women. Finally, Limandri and Tilden (1993) identify the prohibitive cost of care for a battered woman whose daughter required assessment for abuse, but fail to mention the economic impact of the hospitalization they recommended for an abusive man. While this may reflect an implicit understanding of the intersection between class and gender, Limandri and Tilden do not make this part of their ethical analysis. Although these studies do not include analyses of oppression arising from gender, race, and class, they demonstrate a growing awareness of oppression in nursing and emphasize the importance of such analyses for future work.

These examples highlight some of the differences in research goals, strategies, and outcomes that follow from various views of violence. The way in which violence is theorized influences the questions that are

asked, the values that are held, the data-collection methods that are used, the uses that are made of data, and the relationship between the researcher and the researched (Bograd, 1988). We have seen that various research questions are appropriate from various perspectives. If violence is theorized as arising from multiple sources of oppression and power is conceptualized as intrinsic to all social relations, then the causes of, and therefore the solutions to, violence are seen as diffused throughout the structure of society rather than being only in the hands (or heads) of victims or abusers. If violence is theorized as arising from multiple sources of oppression, then nurse researchers must account for the multiple sources simultaneously. If research is guided by the idea that all social relations are imbued with power relations, then an understanding of violence will require analysis of the network of power relations throughout the entire social fabric. Researchers in nursing will be led to examine the power relations between nurses and women who are battered, as well as between nurses and others within the social context. If resistance and agency are thought to coexist in all power relations, then women who are battered are not merely positioned multiply as victims, but are considered subjects with agency operating within a network of power relations that limits their choices, but does not eliminate them. Therefore, the potential for nurses to oppress as well as to be oppressed is examined along with their potential to resist the power of others. If categories of analysis shift to experiences of oppression, then categories such as "black," "white," and "Hispanic" are replaced by categories of experiences of oppression and resistance arising from skin colour, language, poverty, etc. Finally, the goal of research and the purposes that the research serves are not limited to interventions with women. If violence is theorized as arising from multiple sources of oppression, then the goal of research includes countering oppression in one's own relations and in all social relations.

Nursing research informed by violence theorized in this manner would necessarily address all power relations within the social context. For example, research on identifying women who are abused would question the power relations between nurses and clients at multiple sites, including race, class, gender, age, and sexual orientation. What heterosexist and sexist assumptions are operating if nurses ask women, but not men, if violence is an issue in their lives? In what ways could white nurses asking non-white women about violence compound experiences of racism? Such research would also address the conditions under which nurses practise. What are the priorities in nursing work, who sets these priorities, and how do these relations influence nurses'

ability to respond in a meaningful manner to women who have been abused?

The very size of the problem and the deep social roots of violence against women create major challenges for nursing. Knowledge cannot be developed, interventions cannot be designed, implemented, and evaluated through research in isolation from the social structures in which violence is fostered. The effectiveness of nursing is seriously constrained by the very social structures that create and permit violence in the first place. Nurse researchers can choose to theorize violence from approaches that accept these constraints as given, and focus investigation on individual perpetrators and victims. This position will foster our alliance with dominant medical and institutional views. Alternatively, nurse researchers can choose to theorize violence in a manner that accounts for and challenges the roots of violence in our social institutions. If nursing research is to contribute to the eradication of violence, rather than to the counting of women who are abused and the number of injuries that are sustained, and to the mere patching up of injuries, then we must confront oppression at all sites, examine power relations, and seek to transform the social structures that foster violence. Theorizing violence from a complex analysis of power and oppression is a prerequisite to ending violence. Theorizing oppression as simultaneity is essential if nursing is to contribute to the eradication of the social causes of health problems.

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