NANCY CABELUS, DNP, APRN, AFN-BC, a Connecticut Nurses Association member, has been a state trooper, a major crimes detective, a forensic nurse, and a U.S. diplomat. She’s traveled the world putting her nursing skills to work for women’s justice and prevention of child abuse, human trafficking, and sexual violence. She now divides her time between private practice, teaching part-time at the University of Saint Joseph in West Hartford, Connecticut, contributing to the American Nurses Association’s (ANA) #EndNurseAbuse Professional Issues Panel, leading the International Association of Forensic Nurses Connecticut chapter, and taking care of her mom. ANA recently spoke with Cabelus about violence prevention and her varied career.

Tell us about your career path. It’s taken a lot of turns.

I started out as a surgical technologist. That’s when I first noticed nurse abuse. Physicians would throw instruments during surgery—it was like a war zone. To pursue career options, I went to nursing school in 1983 and also took the police academy exam—I have many relatives in law enforcement. I got my first nursing job after graduation but then accepted an offer to work for the state police. I started out on highway patrol, later moving into roles serving on Connecticut Governor Lowell Weicker’s security detail and as a major crimes detective. I retired from the state police in 2006 and completed my DNP [doctor of nursing practice] in 2007. The following year, I moved to Nairobi as a U.S. diplomat to train prosecutors, judges, police, and nurses on how to work on sexual assault cases.

How have your different vocations informed the work you do in each?

It’s all interconnected. In law enforcement, I took my nursing skills to work with me every day, whether I was interviewing a victim of child abuse or examining a crime scene. When I became a detective, my nursing skills helped me do a thorough assessment. I spent a lot of time in the medical examiner’s office documenting and collecting evidence. It felt like an extension of my nursing job.

What can nurse leaders do in the face of rising workplace violence against nurses?

Start by educating about the warning signs. Abuse among nurses and physicians can start with verbal abuse, turn into bullying, and escalate to violence. Create awareness of policies. Every employee should have workplace training on the rights of the employee and the rights of the patient. Nurses may be afraid to report, so we need to encourage them to come forward and speak up.

What do you find most rewarding about forensic nursing? Would you recommend it?

There is a great need for it! Forensic nurses are trained to keep evidence from getting lost or contaminated. Forensic nursing is a very broad field. It’s not just sexual assault—it’s elder abuse, child abuse, exploitation, and even motor vehicle accidents. Unfortunately, there’s no room in the RN curriculum for forensic nursing courses. Even if nurses can take just one credit in forensic nursing, they’ll learn how to document injuries, which is critical because injuries may heal by the time a case is presented in court.

What motivated you to participate in ANA’s #EndNurseAbuse panel?

Nurses put up with more than they should have to. We need to empower ourselves as professionals. We’re so busy protecting patients that we forget about ourselves.

Interview by Elizabeth Moore, MFA, writer at ANA.

Learn about ANA’s #EndNurseAbuse initiative to increase awareness of physical and verbal abuse against nurses at tinyurl.com/ybzcwykt.