

RETRACTION

Retraction of: Parra, A., & Giménez Amarilla, P. (2017). Anomalous/paranormal experiences reported by nurses in relation to their patients in hospitals. *Journal of Scientific Exploration*, 31(1), 11–28.

<https://10.31275/20212063>

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The *Journal of Scientific Exploration* is retracting this article because of multiple instances of plagiarism, with no attribution (no quotation marks used, no text citations). The first source is not cited at all and does not appear in the References. The second source is cited once but not in relation to the plagiarized text, but it does appear in the References list. Here are some examples of the text taken from the two unattributed sources:

Text taken from:

Qaid, R. T. A. (2011, June). *Patients' and nurses' perspectives on patients' experience for coronary care unit stressors using a mixed method approach*. Ph.D. thesis, School of Health Sciences and Social Care, Brunel University.

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p. 13 of Parra & Giménez Amarilla, 2017, paragraph 2

Stress is usually defined from a 'demand-perception-response' perspective (see Bartlett, 1998; Lazarus & Folkman, 1984; Lehrer & Woolfolk, 1993; Crandall & Perrewe, 1995).

p. xxvii of Qaid, 2011, paragraph 2

Stress is usually defined from a 'demand-perception-response' perspective (Bartlett, 1998). Lazarus and Folkman (1984) integrated this view into a cognitive theory of stress, that has become the most widely applied theory in the study of occupational stress and stress management (Lehrer & Woolfolk 1993; Rick & Perrewe 1995).

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p. 13 of Parra & Giménez Amarilla, 2017, paragraph 2

The transition to severe distress is likely to be most detrimental for nurses, closely linked to staff absenteeism, poor staff retention, and ill-health (Healy & McKay, 2000; McGowan, 2001; Shader, Broom, West, & Nash, 2001).

p. lxx of Qaid, 2011, paragraph 2

It is the transition to severe distress that is likely to be most detrimental for nurses, and is closely linked to staff absenteeism, poor staff retention, and ill-health (Healy & McKay, 1999; McGowan, 2001; Shader et al., 2001).

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p. 13 of Parra & Giménez Amarilla, 2017, paragraph 3

In fact, nursing provides a wide range of potential workplace stressors, as it is a profession requiring a high level of skill, teamwork in a variety of situations, provision of 24-hour delivery of care, and input of what is often referred to as ‘emotional labour’ (Phillips, 1996).

p. lxx of Qaid, 2011, paragraph 2

Nursing provides a wide range of potential workplace stressors, as it is a profession that requires a high level of skill, team working in a variety of situations, provision of 24-hour delivery of patient care, and input of what is often referred to as ‘emotional labour’ (Phillips and Pearson, 1996).

Text taken from:

Fenwick, P., Lovelace, H., & Brayne, S. (2009, October). Comfort for dying: Five year retrospective and one year prospective studies of end of life experiences [preprint]. September–October 2010 article in *Archives of Gerontology and Geriatrics*, 51(2), 173–179.

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p. 12 of Parra & Giménez Amarilla, 2017, paragraph 2

More recent anecdotal accounts from nurses and doctors suggest

that APEs consist of a much wider range of phenomena than purely deathbed visions (Barret, 1926; Osis & Haraldsson, 1997; Kubler Ross, 1971). They may include coincidences around the time of death involving the dying person appearing to a relative or close friend who is not present at the time of death, or a need to settle unfinished business such as reconciling with estranged family members or putting affairs in order before death (Baumrucker, 1996).

p. 1 of Fenwick, Lovelace, & Brayne, 2009, paragraph 1

More recent anecdotal accounts from nurses and doctors suggest that ELEs consist of a much wider range of phenomena than purely deathbed-visions (Barratt, 1926; Osis & Haraldsson, 1997). These phenomena include the ability to transition to and from other realities, usually involving love and light (Kubler Ross, 1971), coincidences around the time of death involving the dying person appearing to a relative or close friend who is not present at the time of death and a need to settle unfinished business such as reconciling with estranged family members, or putting affairs in order before death (Baumrucker, 1996).

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p. 12 of Parra & Giménez Amarilla, 2017, paragraph 3

O'Connor (2003) conducted research with care nurses suggesting that they find APEs neither rare nor surprising, which our own research has found corroborated even among palliative care professionals (Katz & Payne, 2003; Kellehear, 2003). Many people now die in hospitals, where, unfortunately, nurses have neither the time nor the training to deal adequately with this very important aspect of the dying and grieving process.

p. 1 of Fenwick, Lovelace, & Brayne, 2009, paragraph 3

Research conducted by O'Connor (2003) with end-of-life care nurses suggests that they find ELEs neither rare nor surprising. And yet our own research has found that even amongst palliative care professionals, ELE training is lacking and many palliative care nurses feel inadequate when dealing with such spiritual issues (Katz & Payne; 2003; Kellehear, 2003). Many people now die in hospital but unfortunately, nurses have neither the time nor the training to deal adequately with this very important aspect of the dying and grieving process.

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p. 12 of Parra & Giménez Amarilla, 2017, paragraph 3

Imhof (1996) points out that, since death is not taught as a medical subject, and 'dying right' is not part of medical studies, this special awareness of the dying process is often ignored by those who care for the dying.

p. 1 of Fenwick, Lovelace, & Brayne, 2009, paragraph 3

Imhof (1996) points out that since death is not taught as a medical subject, and 'dying right' is not part of medical studies, this special awareness of the dying process is often ignored by those who care for the dying.

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p. 12 of Parra & Giménez Amarilla, 2017, paragraph 3

Thus coincidences that occur around the time of death, involving the appearance of the dying person to a close relative or friend who is not physically present (Kubler Ross, 1971; Fenwick & Fenwick, 2008), may be missed. Phenomena occurring around the time of death such as clocks stopping, strange animal behavior, or lights and equipment turning on and off (O'Connor, 2003; Betty, 2006; for review see Fenwick, Lovelace, & Brayne, 2010), similarly may be overlooked.

p. 2 of Fenwick, Lovelace, & Brayne, 2009, paragraphs 7 & 8

Coincidences which occur around the time of death, involving the appearance of the dying person to a close relative or friend who is not physically present (Kubler Ross, 1971; Fenwick & Fenwick, 2008). Phenomena which occur around the time of death such as clocks stopping, strange animal behavior, or lights and equipment turning on and off (O'Connor, 2003; Betty, 2006).

 For another current retraction of Parra's work, see the "Retraction Notice," *EdgeScience*, 45(March 2021), p. 5. Moreover, Parra's book *The Last Farewell Embrace* has been withdrawn by Nova Science Publishers.