

Book Review

***The Last Farewell Embrace: Spirituality, Near-Death Experiences, and Other Extraordinary Events Among Nurses.* By Alejandro Parra (2019). Hauppauge, NY: Nova Science Publishers Inc. 155 pages. ISBN-10: 1536153435; ISBN-13: 978-1-536-15343-9 (pb). AUD \$133.10 (USD \$91.54; GBP £73.22).**

Many people in modern society are not very comfortable with the numinous. Our attitudes perhaps become most apparent when the topics of death and the afterlife are central in debate and discourse. The confronting nature of these discussions often polarises people on two fronts—one, the religious and spiritual attitude, and two, what we might call materialist atheism. Professor Alejandro Parra's book *The Last Farewell Embrace* explores attitudes towards death in the nursing profession as a specific point of focus.

Parra cites attitudes and experiences of nurses who deal with their patients' accounts of near-death and life-threatening circumstances; circumstances which often culminate in a period of intensive psycho-spiritual development and personal transformation. As he eloquently points out, physicians and surgeons tend to hold a sceptical viewpoint towards anomalistic and transpersonal experiences that are recorded in palliative care and in cases of near-death experience (NDE). Well-suited explanations of hallucination and/or epiphenomenal perceptions (due to the use of heavy medications) have been cited by those within the medical profession who firsthand find themselves inundated with anecdotes of a numinous tone.

Yet, it is nurses rather than doctors who experience direct contact with patients in a medical and social support capacity, often even more so than their primary physicians. Interestingly, Parra's work has demonstrated that nursing professionals are far more open-minded than their physician counterparts. Afterlife visions, accounts of visiting relatives (who had passed), and reports of spiritual beings that had manifested were predominantly approached with open curiosity and empathy rather than dismissal. I was surprised to learn that it is more often the case (than not) that nurses have personally come across at least a handful of patient accounts of encounters with the numinous throughout their professional career. It is refreshing to note that nurses emphasise and discuss the personal significance of these accounts with their patients from an open-minded and receptive vantage point.

Another strength of the book lies in the formative guidelines for best practice that are proposed. Parra offers medical professionals various prompts and structured questions that can be applied to support the discussion and elaboration of patient experiences. Several of these prompts can be seamlessly included as part of direct conversations with patients. He cites evidence of patients' own interpretations of what has been effective (or not so effective) in their interactions with nurses and doctors as a basis for the developed prompts and conversational cues offered.

To follow from these suggestions, Parra brings attention to the lack of training in palliative care centred on the psycho-spiritual characteristics of death and transition. While nurses receive training to support patients in a physical and sometimes emotional capacity, they often lack the required skills to approach topics relevant to transpersonal or psychospiritual experiences common in terminal illness or near-death cases.

In sum, Parra has cogently shown that (1) these encounters occur more frequently than we may anticipate, (2) many nurses are aware of and receptive to patient accounts, and that (3) there exists a lack of training and skills development to facilitate patient's communication and integration of their experiences. Perhaps the next step that can be inferred from this work relates to further needs-assessment of both patients and nurses in terms of formalised training requirements in the area of psycho-spiritually centred care.

There is a broad problem with a lack of frameworks to facilitate conversations on this subject matter, which have been exemplified in Parra's work. While Parra notes that both psycho-spiritual and psychological explanations can be given for anomalistic phenomena, the medical establishment is predominated by the latter and often discounts the former. The scope of these accounts is well-known by parapsychologists, but perhaps not well-recognised by scientists or medical professionals, as Parra points out. In that sense, the distinction between hallucinations and visionary experiences is perhaps one of the most captivating points we are left to contemplate after reading this work. "Should we take these experiences seriously?". That is a question relevant not only to attitudes of medical practitioners, but more broadly pertinent to our cultural worldview and our comfort level with the topic of death and transition.

Asking that important but perhaps uncomfortable question will help further the conversation that Parra has commenced here. Only when medical professionals begin to engage with the importance of this subject matter shall revised approaches to palliative care emerge; approaches that further the psycho-spiritual theory centred around the most final of life experiences: death.

For nurses, doctors, and other medical practitioners this book is a 'must-read'. Those who have faced a confrontation with death and the

grieving process firsthand will also find this book well worth the time. Finally, anyone with a general interest in transpersonal psychology, transformation, and the life-death process will find it worthwhile acquainting themselves with this research.

—ALEXANDER DE FOE

Psychology (School of Health and Biomedical Sciences)
124 LaTrobe Street
Melbourne, VIC 3000
AUSTRALIA

Email: adf@alexdefoe.com

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***The Bothell Hell House: Poltergeist of Washington State* (2nd edition). By Keith Linder (2018). Middletown, DE: Independent Publishing. 434 pages. ISBN-13: 978-1-983-98836-3 (pb). AUD \$24.85 (USD \$17.00; GBP £13.62).**

This book is about a poltergeist case, a haunted house case; a very, very haunted house case. The Bothell House was haunted long before the author Keith Linder moved into the place. He stayed there for four years. The house is still haunted today and someone else lives there now, so it's still an ongoing case.

What becomes clear to the reader is that Linder and his girlfriend Tina were not the cause of the poltergeisty; they were the victims. In Keith's case he is still being followed by the 'polts' (i.e., poltergeists) everywhere he goes. Haunted people, haunted places; it's the same problem.

The leading academic theory in parapsychology since about 1940 is that in some unknown way, some unknown energy emanating from the telekinetic or psychokinetic mind of a disturbed pubescent adolescent is causing the poltergeisty and that these expressions of repressed conflicts, hostilities and/or psychosexual problems are at the centre of the problem. Well, in the Bothell Hell house there are no pubescent girls or boys involved in this case. Where Harry Price got that idea from, I don't know, but then later Price did admit that he knew nothing whatsoever about poltergeists; puberty has nothing to do with it, it never did.

Leading academic authorities on poltergeists, Prof. George Owen, Guy Lyon Playfair, Prof. Alan Gauld, and Tony Cornell, and even Dr.