CORA Cork Open Research Archive
Cartlann Taighde Oscailte Chorcaí

Title	Explaining plagiarism for nursing students: An educational tool
Authors	Goodwin, John;McCarthy, Joan
Publication date	2020-05-14
Original Citation	Goodwin, J. and McCarthy, J. (2020) 'Explaining plagiarism for nursing students: An educational tool', Teaching and Learning in Nursing, 15(3), pp. 198-203. doi: 10.1016/j.teln.2020.03.004
Type of publication	Article (peer-reviewed)
Link to publisher's version	10.1016/j.teln.2020.03.004
Rights	© 2019, Organization for Associate Degree Nursing. Published by Elsevier Inc. All rights reserved. This manuscript version is made available under the CC BY-NC-ND 4.0 license. - https://creativecommons.org/licenses/by-nc-nd/4.0/
Download date	2026-10-16 20:55:26
Item downloaded from	https://hdl.handle.net/10468/10185

UCC
University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

Explaining plagiarism for nursing students: An educational tool

ABSTRACT
Plagiarism is a concern among nursing students. Students may sometimes plagiarise intentionally; however, students also plagiarise unintentionally, as they demonstrate a poor understanding as to what constitutes plagiarism. Here, we provide a tool for nurse educators to use with students which demonstrates the concept of plagiarism in visual form Four categories of plagiarism are identified: Copy-and-Pasting, Minimalist Paraphrasing, Pathworking, and The Twisted Grapevine. Three original pieces of art are presented. These pieces are then altered in order to give students visual examples of the four categories of plagiarism. Text-based examples of plagiarism are also provided, in order to give students a comprehensive insight into this area.

INTRODUCTION

The word “plagiarism” is rooted in the Latin word “plagiare”: to kidnap. It is the intentional or unintentional use of another person’s work, including words and ideas, where due credit is not provided (Khadilkar 2018). Plagiarism is an age-old problem. The first recorded instance of plagiarism is claimed to have occurred in Ireland in AD561, when a monk, Colmcille, copied a religious manuscript written and illustrated by his colleague Finnian (Logue 2004). Today, plagiarism can take a variety of forms e.g. Hollywood directors have recycled narratives originally conceived by novelists (Greven 2017), and academics have reproduced the published or unpublished work of other academics as their own (Banerjee 2015; Ulrich et al. 2015). While different in form, what these plagiarists have in common is that they fail to acknowledge their original sources.

Academic staff – including nurse educators – have expressed concerns about rates of undergraduate plagiarism, and about the perceived deterioration in students’ writing and citing abilities (Gourlay & Deane 2012; Stonecypher & Wilson 2014; Macale et al. 2017). While rates of plagiarism are reported with regard to students studying courses such as Commerce or Languages (29%) (Ba et al. 2017) and Business Studies (31%) (Walker 2010),

plagiarism is much higher in nursing students: it has been found that between 47-60% of nursing students plagiarise their assignments (Hart & Morgan 2010; Theart & Smit 2012; Krueger 2014). Despite the availability of a myriad of software packages to support students in identifying where they may not be crediting original sources (Bristol 2011; Whitney and Ábrego 2011; Luksanapruksa & Millhouse 2016), students frequently struggle to recognise when they are plagiarising. In the past, students copied the work of former students or took text from obscure sources. Nowadays, students can also copy text from online sources, or pay online paper mills to churn out assignments for them (Fischer & Zigmond 2011; Ba et al. 2017). In fact, Ba et al. (2017) report that assignments written by online paper mills accounted for one fifth of all reports of undergraduate plagiarism in their study sample.

There are several reasons why students plagiarise. Intentional plagiarism often occurs when students feel under pressure to complete an assignment in time (Fischer & Zigmond 2011), or when they have no interest in the topic. Unintentional plagiarism, on the other hand, is often the result of a lack of understanding about academic writing convention (Fischer & Zigmond 2011; Chen & Chou 2017; Lynch et al. 2017). For example, the ease of online "cutting and pasting" can result in bad habits, and in students forgetting to cite information taken from internet-based sources (Tunville 2015). There is also a great deal of uncertainty around what is constituted as plagiarism. Park et al. (2013) found that 44.8% of nursing students did not see an issue with copying the work of another person and not giving them credit. Whether or not the act is intentional or unintentional, plagiarism is intellectual theft, and students run the risk of failing class and even expulsion from educational institutions (Fischer & Zigmond 2011).

Granted the potentially serious consequences for students who plagiarise, understanding the academic context within which it happens is increasingly viewed as a

necessary part of addressing plagiarism. The International Center for Academic Integrity (ICAI) (2014), for example, argues that integrity, or the lack thereof, should not be viewed simply as a feature of individual conduct on the part of students. Instead, the ICAI (2014) suggest that educational institutions as a whole should embrace what they call academic integrity as a core dimension of their mission. The ICAI (2014) defines academic integrity as "a commitment to five fundamental values: honesty, trust, fairness, respect, and responsibility" (p. 16) and, in addition, "the courage to act on them even in the face of adversity" (ICAI 2014 p. 16). According to the ICAI (2014), academic communities should encourage personal and intellectual honesty in all of the different spheres of university life, e.g. learning, teaching, research, and service provision. They should also foster a climate of mutual trust where ideas can be freely exchanged. The third value, that of fairness, requires academic communities to "establish clear and transparent expectations, standards, and practices to support fairness in the interactions of students, faculty, and administrators" (ICAI 2014 p. 22). Respect is also understood as underpinning the relational nature of learning because it promotes cooperation and the inclusion of diverse opinions, while the value of responsibility ensures that academic standards are mutually agreed and actions are taken when wrongdoing happens. Finally, the ICAI (2014) argue that courage is needed in order to translate the values of honesty, trust, fairness, respect, and responsibility into action – "standing up for them in the face of pressure and adversity" (p. 28).

The ICAI's (2014) understanding of academic integrity has been widely used to inform research investigating cheating and academic dishonesty among several different cohorts of students enrolled in programmes in the natural sciences, engineering, law, and nursing (McCabe et al. 2001; Hart and Morgan 2010; Morgan and Hart 2013). Applied to nursing, Devine and Chin (2018) suggest that the defining attributes of the concept of

integrity include honesty, ethical behaviour, and professionalism. Devine and Chin (2018) suggest that one of the key antecedents of integrity on the part of nursing students is the role-modelling of staff who "demonstrate respect for students by creating reasonable assignments, clear expectations, and through the delivery of quality education" (p.136). Echoing the ICAI's (2014) account of integrity, Devine and Chin (2018) suggest that nursing students do best where mutual respect, honesty, trust, fairness and responsibility characterize student/faculty relationships.

It is important that the standards of academic integrity are instilled in students early on, as it has been noted that healthcare students who engage in plagiarism may carry such dishonest practices into the working environment. For example, Dyer (2016) notes the case of a psychiatrist who copied material from websites and a student's paper while trying to complete a certificate in cognitive behavioural therapy. In practice, this individual was caught cutting and pasting notes from other practitioners, passing this work off as her own. Furthermore, she claimed a continuing professional development credit for a course she did not attend. Concerning nurses, there is evidence to suggest that there may be a relationship between plagiarism as a student nurse and a dishonest approach when in clinical practice (Balik et al 2010; Krueger 2014). Birks et al. (2018), for example, reported a positive correlation between nurses who plagiarised in university, who also fabricated patient's vital signs, or breached patient confidentiality.

Although it has been reported that nursing students understand the value of academic integrity (Woith et al. 2012), it is important that they become familiar with academic writing skills, expectations, and standards early on in their education. Educational institutions need to demonstrate a commitment to promoting academic integrity at student, faculty, and systems levels (Woith et al. 2012). Previous work in this area has

focussed on educational classroom-based initiatives. For example, Smedley et al. (2019) provided nursing students with tutorial sessions on academic writing and asked them to complete some exercises on plagiarism; they noted improvements in knowledge and understanding of plagiarism. Chertok et al. (2014) adopted an experimental approach, using explicit examples of what plagiarism is – they gave some of the students in their sample the opportunity to observe specific examples of what should be avoided when writing academic assignments. They reported that this approach significantly lowered rates of plagiarism in the intervention group when compared with the control group. However, the use of these educational tools is only described within these published texts (Chertok et al. 2014; Smedley et al. 2019), and the tools themselves are not made available as educational resources. Studies in other areas have indicated that students report visual reference guides to be more effective in developing understanding when compared with written or verbal approaches (Curley et al. 2018). It would seem timely and appropriate then to develop some educational tools for use in educational interventions on plagiarism. Moreover, the need to do so is all the more pressing in the context of nurse education.

It has been noted that educating students about avoiding plagiarism is "neither difficult nor time consuming" (Landau et al. 2002, p. 115). However, previous peer reviewed literature has neglected to provide students with practical – rather than simply descriptive – examples of plagiarism. The aim of this paper is to provide nursing educators with a tool to explain to nursing students what constitutes plagiarism in academic writing. Categories of plagiarism were initially derived from the extant literature, but these were adapted by the authors, based on their considerable first-hand experiences of identifying instances of plagiarism in students' assignments and their subsequent meetings with students. Four categories of plagiarism are illustrated here: Copy-and-Pasting, Patchworking, Minimalist

Paraphrasing, and The Twisted Grapevine. In addition to visual examples of plagiarism, textual references, using nursing texts, are also provided, in order to give students a comprehensive overview as to what constitutes plagiarism.

In order to illustrate the categories of plagiarism, original pieces of artwork are presented. These pieces are presented first in their original form; these are then transformed in order to reflect individual categories of plagiarism.

Fig. 1: Ambulance on Street

Fig. 2: University Hospital

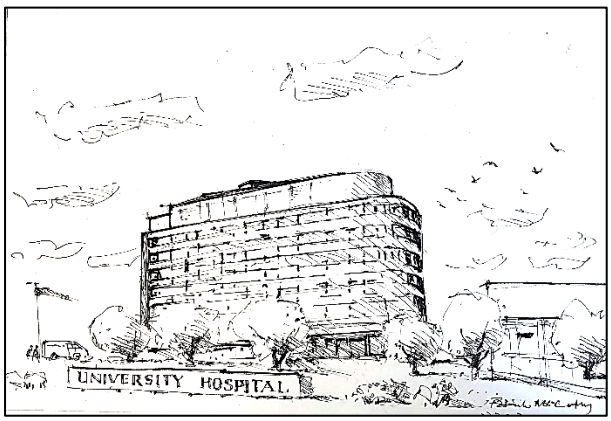

Fig. 3: Nurse and Patient

5.1. Copy-and-Pasting

Copy-and-Pasting involves taking pieces of text from other sources, such as the internet, another student, a book, or journal article, and presenting this information as the student's own work. The author of the original text is not credited (Fischer & Zigmond 2011; Turnitin 2012). This is arguably the most egregious example of plagiarism, and it is unlikely that such an act is perpetrated unintentionally by the student. Fig. 4 is an identical version of the piece of artwork presented in Fig. 1. The only alteration made to this piece is the signature at the bottom right of the image. Here, a piece of art is being credited to an individual who had no part to play in producing the original piece, and this clearly constitutes plagiarism.

Fig. 4: Ambulance on Street with New Signature (Copy-and-Pasting)

Table 1 (Copy-and-Pasting)

Text from Original Paper A caring clinical instructor can inspire authentic dialogue that facilitates integration of students' emotions with the principles of nursing practice. However, clinical teaching is a challenging endeavor, and faculty must balance and reconcile the emotions of self, students, and patients amidst the perpetual chaos of the clinical environment (Mosca 2019) **Text from Student Assignment** A caring clinical instructor can inspire authentic dialogue that facilitates integration of students' emotions with the principles of nursing practice. However, clinical teaching is a challenging endeavor, and faculty must balance and reconcile the emotions of self, students, and patients amidst the perpetual chaos of the clinical environment (Mosca 2019)

Similarly, Table 1 presents text from an original paper, with the authors of this paper clearly cited. Following this, we see an example of how a student might take such a piece, reproduce it identically, but neglect to give the original author due credit.

Copy-and-Pasting is not limited to reproducing the work of another: self-plagiarism is also a form of Copy-and-Pasting. Here, the student reproduces an assignment that they have previously submitted for another module/course (Jawad 2013; Turville 2015). There may be instances when students are permitted to submit work previously submitted elsewhere (Palmer et al. 2019); however, educators should have clear policies in place to guide students in this area.

5.2. Minimalist Paraphrasing

Minimalist Paraphrasing involves the student changing only some words within the text, but relying heavily on the original source, resulting in a largely unoriginal piece of work (Turnitin 2012). While this is not as blatant as Copy-and-Pasting, there is still a lack of effort made on the student's behalf to interpret information and develop an original argument. In Fig 5., the plagiarist reproduces a piece of artwork virtually identical to that of Fig. 2. The only (subtle) alteration is the removal of the birds, which does not constitute a new piece of art. Although the plagiarist has credited the original author for their work, this can still be regarded as intellectual theft.

Fig. 5: University Hospital with Birds Removed (Minimalist Paraphrasing)

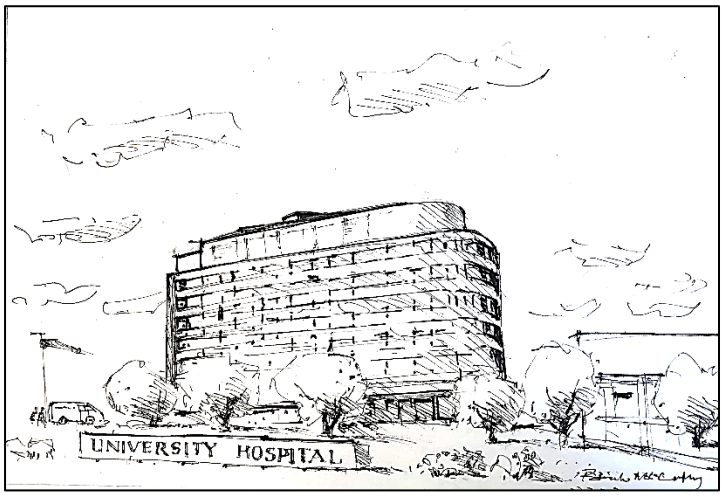

Table 2 (Minimalist Paraphrasing)

Text from Original Paper Nurse educators and clinicians become peer evaluators for various reasons, including professional growth, networking, and continuing education. Yet, one of the most compelling reasons to become a peer evaluator is having a voice in the review process (Beasley et al. 2019) **Text from Student Assignment** Nurse educators and clinicians become peer evaluators for various reasons, **such as** professional growth, networking, and continuing education. **However**, one of the most compelling reasons to become a peer evaluator is having a voice in the review process (Beasley et al. 2019)

In Table 2, again, although the author of the original text is credited, the student has not made a substantial alteration to this text – only several minor words have been changed. In this regard, the student does not demonstrate an understanding of the topic; instead, they are merely reproducing the work of another, with only a minimal effort at interpretation made. Rather than taking pieces of text and altering minor sections, the student should make an attempt to offer their own interpretation of texts, and reporting this in their own words/terms, thus demonstrating a comprehension of the subject manner.

5.3. Patchworking

Adopting a Patchwork approach is different from the previous approaches highlighted, in that the student does not rely on one single source; instead, multiple sources are combined to give the impression of the development of an argument (Turnitin 2012). The plagiarist can take information from multiple sources and give the impression that they have developed an original, coherent argument. Other attempts at Patchworking are more obvious, as the writing styles of the various authors do not complement each other very well. Fig. 6 is an example of taking three separate images and forming a composite piece of work; again, the plagiarist does not credit the artist from whom the images are taken and attempts to pass this work off as their own. While some attempt is made to form a coherent piece by changing the sign above the crowd from “Newsagent” to “University Hospital”, the inclusion of the lampshade from Fig. 6 is a random choice, and the cohesiveness of the composite image falls apart.

Fig. 6: Three Images Combined (Patchworking)

Table 3 (Patchworking)

Text from Original Paper (1) Nursing students need to critically reason to provide safe patient care (Edwards et al. 2019) **Text from Original Paper (2)** Teaching strategies must challenge students to solve problems, prioritize patient care, and think critically (Staykova et al. 2017) **Text from Original Paper (3)** Being "innovative" when addressing a program challenge implies that one is going to step outside the norm, using creative and novel approaches to implement change and achieve the desired outcomes (Halstead 2020) **Text from Student Assignment** Nursing students need to critically reason to provide safe patient care. Teaching strategies must challenge students to solve problems, prioritize patient care, and think critically. Being "innovative" when addressing a program challenge implies that one is going to step outside the norm, using creative and novel approaches to implement change and achieve the desired outcomes (Halstead 2020)

In Table 3, the student provides a sophisticated attempt at a Patchworking approach to plagiarism. The content from three different papers is copied and pieced together, with only one author cited, giving the impression that the student has formulated a coherent argument. While this argument is intelligible, it is still plagiarism: there is no attempt made on the student's behalf at developing their own argument. Developing critical thinking skills is important in nursing. A key element of critical thinking involves reading multiple texts, and drawing conclusions based on a range of different information sources (Chan 2013; Perez et al. 2018). However, the act of just taking various pieces of text and assembling them together in Patchwork form does not constitute a critical approach, and students need to be aware that they have an active role to play in the interpretation of information.

5.4. The Twisted Grapevine

The final category of plagiarism involves the attribution of information to an incorrect author, or the inappropriate use of secondary sources (Fischer & Zigmond 2011; Turnitin 2012). For example, the student may wish to report epidemiological information from the opening paragraph of a recent paper but observes that this information is outdated by several years. Instead, the student chooses to report this information, but only cites the author of the recent paper, giving the impression that they have consulted a recent epidemiological source. In this sense, the student does not credit the original author – only a secondary reporting of data. It is also recommended that students avoid secondary citations, as these may be inaccurate or irrelevant (Fischer & Zigmond 2011; Turnitin 2012). In Fig. 7, the plagiarist attempts to recreate a piece of art depicting a nurse and a patient. However, they provide an inaccurate representation of the original source, and important details within the original image are not present in the “new” image. This results in a vague, unclear reproduction, and the final product is not representative of the work of the original author.

Fig. 7: Nurse and Patient with Detail Missing (The Twisted Grapevine)

Table 4 (The Twisted Grapevine)

Text from Primary Citation (1) In contrast, 56% (n = 14/25) of the males and only 8% (n = 2/25) of the females had successful IM injections (Chan et al. 2007)
Text from Primary Citation (2) Our study has shown that, when using a 1.5 inch (38.1 mm) needle, an intramuscular injection administered at the dorsogluteal site in 98% of women and 37% of men (Zaybak et al. 2007)
Text from Secondary Citation For example, it has been found that between 37% to 56% of men and 8% to 9% of women do not receive medication into the intended plane via the 38.1-mm needle (Chan et al., 2006; Zaybak et al., 2007) **(White et al. 2018)**
Text from Student Assignment White et al. (2018) found that between 37% to 56% of men and 8% to 9% of women do not receive medication into the intended plane via the 38.1-mm needle

In Table 4, the information that the plagiarist reports is an accurate representation of the original texts (i.e. Chan et al. 2007 and Zaybak et al. 2007). However, rather than crediting these authors, they cite the work of a secondary source (White et al. 2018). Secondary sources collate information from primary sources for the purpose of a background to a

study, or perhaps as part of a literature review, but these sources should not be treated as true primary sources of evidence. It is important that students do not rely on secondary citations, and always consult – and cite – original authors.

CONCLUSION AND RECOMMENDATIONS

We have presented four categories of plagiarism for nursing students. In order to avoid plagiarism, students need to be aware that plagiarism in any form is intellectual theft. Plagiarism can take the form of copying information verbatim (Copy-and-Pasting); reporting information almost verbatim, changing only minor portions of the original source (Minimalist Paraphrasing); taking the work of multiple authors and piecing it together, presented as "new" text (Patchworking); or neglecting to consult original sources, and engaging in the reporting of secondary information (The Twisted Grapevine). Furthermore, students need to be aware that, in order to assess understanding, they must actually communicate their understanding of the subject matter; such assessment is not possible if all that is being reported is the uninterpreted work of other authors.

We encourage students to consult this tool when tasked with completing academic work. We also encourage nurse educators to bring this tool to students' attention, particularly in the first year of their education, in order to develop good writing habits early on, and to avoid plagiarism entirely. While we have found this tool to be useful in explaining plagiarism to nursing students in class, we recommend that its effectiveness is rigorously measured using pre/post-tests. Finally, we recommend that educational institutions put clear policies in place for students to guide them in maintaining academic integrity and avoiding plagiarism.

REFERENCES

Ba, K. D., Ba, K. D., Lam, Q. D., Le, D. T. B. A., Nguyen, P. L., Nguyen, P. Q., & Pham, Q. L. (2017). Student plagiarism in higher education in Vietnam: An empirical study. *Higher Education Research & Development*, 36(5), 934-946. DOI: 10.1080/07294360.2016.1263829

Balik, C., Sharon, D., Kelishek, S. l., & Tabak, N. (2010). Attitudes towards academic cheating during nursing studies. *Medicine and Law*, 29, 547-563.

Banerjee. A. (2015). Principles and practice of plagiarism: Perpetrators' perspective. *Journal of Pharmacology and Pharmacotherapeutics*, 6(2), 61-62. DOI: 10.4103/0976-500X.155480

Beasley, S. F., Farmer, S., Ard, N., & Nunn-Ellison, K. (2019). A voice in the accreditation process: The Role of the Peer Evaluator. *Teaching and Learning in Nursing*. 14, A3-A5. DOI: 10.1016/j.teln.2019.06.001

Birks, M., Smithson, J., Antney, J., Zhao, L.,, & Burkot, C. (2018). Exploring the paradox: A cross-sectional study of academic dishonesty among Australian nursing students. *Nurse Education Today*, 65, 96-101. DOI: 10.1016/j.nedt.2018.02.040

Bristol, T. J. (2011). Plagiarism prevention with technology. *Teaching and Learning in Nursing*. 6, 146-149. DOI: 10.1016/j.teln.2011.05.002

Chan, Z. C. Y. (2013). Critical thinking and creativity in nursing: Learners' perspectives. *Nurse Education Today*, 33, 558-563. DOI: 10.1016/j.nedt.2012.09.007

Chan, V.O., Colville, J., Persaud, T., Buckley, O., Hamilton, S., & Torreggiani, W.C. (2006). Intramuscular injections into the buttocks: Are they truly intramuscular? *European Journal of Radiology*, 58, 480- 484. DOI: 10.1016/j.ejrad.2006.01.008

Chen, Y., & Chou, C. (2107). Are we on the same page? College students' and faculty's perception of student plagiarism in Taiwan. *Ethics, & Behavior*, 27(1), 53-73. DOI: 10.1080/10508422.2015.1123630

Chertok, I.R.A., Barnes, E. R., & Gilleland, D. (2014). Academic integrity in the online learning environment for health sciences students. *Nurse Education Today*, 34(1), 1324-1329. DOI: 10.1016/j.nedt.2013.06.002

Curley, L. E., Wu, Z., & Svirskis, D. (2018). Using technology in pharmacy education: pharmacy student performance and perspectives when visual aids are integrated into learning. *Frontiers in Pharmacology*, 25(9), 1062. DOI: 10.3389/fphar.2018.01062.

Devine, C.A., & Chin, E.D. (2018). Integrity in nursing students: A concept analysis. *Nurse Education Today*, 60. 133-138. DOI: org/10.1016/j.nedt.2017.10.005.

Dyer, C. (2016). Psychiatrist struck off for repeated plagiarism. *The BMJ*, 354, i4872. DOI: 10.1136/bmj.i4872

Edwards, T., Boothby, J., & Succheralli, L. (2019). Escape Room: Using an innovative teaching strategy for nursing students enrolled in a maternity clinical course. *Teaching and Learning in Nursing*. 14, 251-252. DOI: 10.1016/j.teln.2019.05.001

Ellery, K. (2008). Undergraduate plagiarism: A pedagogical perspective. *Assessment, & Evaluation in Higher Education*, 33(5), 507–516. DOI: 10.1080/02602930701698918

Fischer, B. A., & Zigmond, M. J. (2011). Educational approaches for discouraging plagiarism. *Urologic Oncology: Seminars and Original Investigations*, 29, 100-103. DOI: 10.1016/j.urolonc.2010.11.014

Gourlay. L., & Deane, J. (2012). Loss, responsibility, blame? Staff discourses of student plagiarism. *Innovations in Education and Teaching International*, 49(1), 19-29. DOI: 10.1080/14703297.2012.647780

Greven, D. (2017). *Queering The Terminator: Sexuality and Cyborg Cinema*. New York: Bloomsbury Academic.

Halstead, J. A. (2020). Fostering innovation in nursing education: The role of accreditation. *Teaching and Learning in Nursing*. 15, A4-A5. DOI: 10.1016/j.teln.2019.10.003

Hart, L., & Morgan, L. (2010). Academic integrity in an online registered nurse to baccalaureate in nursing program. *The Journal of Continuing Education in Nursing*, 41(11), 498–505. DOI: 10.3928/00220124-20100701-03

International for Academic Integrity (2014). *The Fundamental Values of Academic Integrity*. (2nd ed). South Carolina: Clemson University.

Jawad, F. (2013). Plagiarism and integrity in research. *Journal of Pakistan Medical Association*, 63(11): 1446-1447.

Khadilkar, S. S. (2018). The plague of plagiarism: Prevention and cure!!! The Journal of Obstetrics and Gynecology of India, 68(6), 425-431. DOI: 10.1007/s13224-018-1182-9

Krueger, L. (2014). Academic dishonesty among nursing students. *Journal of Nursing Education*, 53(2), 77–87. DOI: 10.3928/01484834-20140122-06.

Landau, J. D., Druen, P. B., & Arcuri, J. A. (2002). Methods for helping students avoid plagiarism. *Teaching of Psychology*, 29(2), 112-115.

Logue, R. (2004). Plagiarism: The internet makes it easy. *Nursing Standard*, 18(51), 40-43.

Luksanapruksa, P., & Millhouse, P. W. (2016). Guidelines on what constitutes plagiarism and electronic tools to detect it. *Clinical Spine Surgery*, 29, 119-120.

Lynch, J., Everett, B., Ramjan, L. M., Callins, R., Glew, P., & Salamonson, Y. (2017). Plagiarism in nursing education: An integrative review. Journal of Clinical Nursing, 26, 2845-2864. DOI: 10.1111/jocn.13629

Macale, L., Ghezzi, V., Rocco, G., Fida, R., Vellone, E., & Alvaro, R. (2017). Academic dishonesty among Italian nursing students: A longitudinal study. *Nurse Education Today*, 50, 57-61. DOI: 10.1016/j.nedt.2016.12.013

McCabe, D. L., Trevino, L. K., & Butterfield, K. D. (2001). Cheating in academic institutions: A decade of research. *Ethics Behav*, 11(3), 219–232. DOI: 10.1207/S15327019EB1103_2.

Morgan, L., & Hart, L. (2013). Promoting academic integrity in an online RN-BSN program. *Nursing Education Perspectives*. 34(4), 240-243.

Mosca, C. K. (2019). The relationship between emotional intelligence and clinical teaching effectiveness. *Teaching and Learning in Nursing*. 14, 97-102. DOI: 10.1016/j.teln.2018.12.009

Palmer, A., Pegrum, M., & Oakley, G. (2019). A wake-up call? Issues with plagiarism in transnational higher education. *Ethics & Behavior*, *29*(1), 23-50. DOI: 10.1080/10508422.2018.1466301

Park, E., Park, S., & Jang, I. (2013). Academic cheating among nursing students. *Nurse Education Today*, 33(4), 346-352. DOI: 10.1016/j.nedt.2012.12.015

Perez, G. A., Mason, D. J., Harden, J. T., & Cortes, T. A. (2018). The growth and development of gerontological nurse leaders in policy. *Nursing Outlook*, *66*(2), 168-179. DOI: 10.1016/j.outlook.2017.10.005

Smedley, A., Crawford, T., & Cloete, L. (2019). An evaluation of an extended intervention to reduce plagiarism in bachelor of nursing students. Nursing Education Perspectives. DOI: 10.1097/01.NEP.0000000000000492 [ePub ahead of print].

Staykova, M. P., Von Stewart, D., & Staykov, D. I. (2017). Back to the basics and beyond: Comparing traditional and innovative strategies for teaching in nursing skills laboratories. *Teaching and Learning in Nursing*. 12(2), 152-157. DOI: 10.1016/j.teln.2016.12.001

Stonecypher, K., & Willson, P. (2014). Academic policies and practices to deter cheating in nursing education. *Nursing Education Perspectives*, 35(3), 167–179.

Theart, C. J., & Smit, I. (2012). The status of academic integrity amongst nursing students at a nursing education institution in the Western Cape. *Curationis*. 35(1), 27. DOI: 10.4102/curationis.v35i1.27.

Turnitin (2012). The White Paper: The Plagiarism Spectrum: Instructor Insights into the 10 Types of Plagiarism. iParadigms, LLC. https://www.ed.ac.uk/files/atoms/files/10-types-of-plagiarism.pdf Accessed 10th January 2020.

Turville, N. (2015). How to avoid plagiarism. *Nursing Standard*. 29(30), 66.

Ulrich, C. M., Wallen, G. R., Cui, N., Chittams, J., Sweet, M., & Plemmons, D. (2015). Establishing good collaborative research practices in the responsible conduct of research in nursing science. Nursing Outlook, 63, 171-180. DOI: 10.1016/j.outlook.2014.10.007

Walker, J. (2010). Measuring plagiarism: Researching what students do, not what they say they do. *Studies in Higher Education*. 35(1), 41-59. DOI: 10.1080/03075070902912994

White, S., Goodwin, J., & Behan, L. (2018). Nurses' use of appropriate needle sizes when administering intramuscular injections. *The Journal of Continuing Education in Nursing*. 49(11), 519-525. DOI: 10.3928/00220124-20181017-09

Whitney, R. B., & Ábrego, P. C. (2011) Rapid assessment of assignments using plagiarism detection software. *Nurse Educator.* 36(6), 236-237. DOI: 10.1097/NNE.0b013e3182333c85

Woith, W., Jenkins, S. D., & Kerber, C. (2012). Perceptions of academic integrity among nursing students. Nursing Forum. 47(4), 253-259. DOI: 10.1111/j.1744-6198.2012.00274.x.

Zaybak, A., Güneş, Y., Tamsel, S., Khorshid, L., & Eşer, I. (2007). Does obesity prevent the needle from reaching muscle in intramuscular injections? *Journal of Advanced Nursing*, 58, 552-556.