

Citation Evidence Report

EB-1A Petition — Original Contributions of Major Significance

8 CFR § 204.5(h)(3)(v) · Criterion 5

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[Google Scholar profile](#)

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to Criterion 5 (original contributions of major significance). It is a drafting aid for the petitioner's counsel — not legal advice, and not a guarantee of any outcome. All figures must be verified, and citation counts re-snapshotted as of the petition filing date, before use in a filing.

A. Overview & Filtering Statement

39	39	5	26
Citing papers mapped	Citation edges	Home papers mapped	h-index (GS)

Filtering statement – methodology & limits

Citation **independence** is classified per citing paper by comparing the citing paper’s authors to this scholar. *Self* citations are those where the scholar is an author of the citing work; *co-author* citations are by the scholar’s known collaborators; *same-institution* citations are by authors affiliated with the scholar’s institution(s); all remaining classified citations are *independent*. Per AAO practice, only independent citations are treated as probative of influence beyond the scholar’s own circle.

Known limitations – counsel must verify. (1) Collaborator identification draws on the co-author list published on the Google Scholar profile; a collaborator not listed there may be missed, so the independent share below should be read as an **upper bound**. (2) Citation counts are a crawl-time snapshot; eligibility is judged as of the petition filing date and post-filing citations carry no weight – re-snapshot before filing. (3) Citations that could not be classified (no author data) are excluded from the percentages and reported separately.

B. Citation Independence

The AAO credits citations only where they show influence **beyond the scholar’s own circle**. Self-citations and co-author citations are expressly discounted; the independent share below is the load-bearing figure.

92.3% independent of 39 classified citing papers

Citation type	Count
Independent	36
Self-citation	0
Co-author	3
Same-institution	0

0 citing papers could not be classified (no author data) and are excluded from the percentages above.

C. Significant Contributions & Their Citation Evidence

Each contribution below is presented as the AAO expects: a specific claim, followed by the **independent** citation evidence for the paper(s) that carry it. Citation counts are stated **per article**, never as a body-of-work total – the AAO holds aggregate totals to be a final-merits signal, not Criterion-5 evidence.

Where the data allows, a paper also shows its **field-normalised** standing – how its citation count ranks against Semantic Scholar papers in the same field and publication year. The comparison field is named explicitly; counsel should confirm it is the appropriate one, as the AAO scrutinises a petitioner’s choice of comparison field.

Contribution 1

Claim – Contribution 1

The researcher established a critical evidence base on clinical and functional outcomes for at-risk youth who do not progress to psychosis, challenging deterministic views of prodromal states.

CLAIM: The researcher’s seminal 2012 paper, 'Recovery from an at-risk state: clinical and functional outcomes of putatively prodromal youth who do not develop psychosis,' serves as the foundational contribution of this line of work. This study appears to focus on the trajectories of individuals identified as being at clinical high risk for psychosis but who ultimately do not develop the disorder, offering a nuanced perspective on recovery and functional status.

ORIGINALITY: By examining outcomes in youth who do not develop psychosis, this work addresses a significant gap in the literature that often prioritizes conversion rates over recovery and functional adaptation. The title suggests a shift from a purely pathological framework to one that acknowledges positive or stable outcomes, thereby broadening the understanding of the prodromal phase beyond inevitable decline.

SIGNIFICANCE: The paper has garnered 209 citations, indicating substantial engagement within the field. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that this work has influenced the broader scientific community beyond the researcher’s immediate institutional or collaborative network. This high degree of independent uptake underscores the generalizability and impact of the findings on clinical and functional outcome assessments in early psychosis research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · 1 flagged influential by Semantic Scholar

CORE PAPER

[Recovery from an at-risk state: clinical and functional outcomes of putatively prodromal youth who do not develop psychosis](#)

2012 · 209 citations (GS)

Field-normalised: 156 Semantic Scholar citations place it in the top 5% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Disorder, not just state of risk: meta-analysis of functioning and quality of life in people at high risk of psychosis (2015)	King's College London, University of Pavia	Italy, United Kingdom	—
2	Probability of Transition to Psychosis in Individuals at Clinical High Risk: An Updated Meta-analysis (2021)	Centro Hospitalar Psiquiátrico de Lisboa, Hospital General Universitario Gregorio Marañón, Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS)	Italy, Portugal, South Korea	—
3	EPA guidance on the early detection of clinical high risk states of psychoses (2015)	Mental Health Center Copenhagen, University of Copenhagen, Ospedale Niguarda Ca' Granda, Psychiatric University Clinics Basel	Denmark, Finland, Germany	Influential
4	Deconstructing vulnerability for psychosis: Meta-analysis of environmental risk factors for psychosis in subjects at ultra high-risk (2017)	C. Mondino National Institute of Neurology, Institut de Recherche (IDR) Servier, Institute of Mental Health	France, Poland, Italy	—

No.	Citing paper	Citing institution(s)	Country	S2
5	Negative symptoms in children and adolescents with early-onset psychosis and at clinical high-risk for psychosis: systematic review and meta-analysis (2023)	Basurto University Hospital, Groupe Hospitalier Paul Guiraud, Hospital General Universitario Gregorio Marañón	Canada, France, South Korea	—
6	Clinical and Functional Long-Term Outcome of Patients at Clinical High Risk (CHR) for Psychosis Without Transition to Psychosis: A Systematic Review (2019)	University of Basel Psychiatric Hospital	Switzerland	—
7	The temporal dynamics of transition to psychosis in individuals at clinical high-risk (CHR-P) shows negative prognostic effects of baseline antipsychotic exposure: a meta-analysis (2023)	Azienda USL-IRCCS di Reggio Emilia, Cantonal Socio-psychiatric Organization (OSC), Università della Svizzera italiana (USI)	Italy, Switzerland	—

Independent citing papers only; self- and co-author citations excluded. The S2 column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the “built on / relied upon” pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 2

Claim – Contribution 2

The researcher developed a neuroplasticity-based auditory training protocol via laptop to improve cognition in young individuals with recent-onset schizophrenia.

CLAIM: The researcher’s core contribution is the development and validation of a neuroplasticity-based auditory training intervention delivered via laptop, specifically designed to enhance cognitive function in young individuals with recent-onset schizophrenia. This work is anchored in a 2015 publication that has garnered significant attention within the scientific community.

ORIGINALITY: This line of work appears to address the critical need for accessible, non-pharmacological interventions for cognitive deficits in early-stage schizophrenia. By leveraging neuroplasticity principles and utilizing standard laptop technology, the researcher introduced a scalable approach that differs from traditional, often resource-intensive clinical therapies. The absence of follow-up papers by the same researcher suggests this seminal work stands as a distinct, foundational contribution rather than part of an extended series by the author.

SIGNIFICANCE: The impact of this contribution is evidenced by its citation record, with 242 citations indicating substantial engagement from the broader scientific community. Notably, 100% of the classified citing papers originate from independent researchers, demonstrating that the work has been widely adopted and built upon by scholars outside the researcher’s immediate institution or collaboration network. This high degree of independent uptake underscores the general acceptance and utility of the proposed intervention in the field.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

[Neuroplasticity-based auditory training via laptop computer improves cognition in young individuals with recent onset schizophrenia](#)

2015 · 242 citations (GS)

Field-normalised: 193 Semantic Scholar citations place it in the top 5% of Psychology papers from 2015 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Do “Brain-Training” Programs Work? (2016)	Florida State University, Geisinger Health System, George Washington University	France, United Kingdom, United States	—
2	A Meta-analysis of Cognitive Remediation for Schizophrenia: Efficacy and the Role of Participant and Treatment Factors (2021)	Wesleyan University	United States	—
3	The Effects of Remote Cognitive Training Combined With a Mobile App Intervention on Psychosis: Double-Blind Randomized Controlled Trial (2023)	University of California, San Francisco, University of Minnesota	United States	—
4	Technology and Mental Health: State of the Art for Assessment and Treatment (2022)	Alpert Medical School of Brown University, Beth Israel Deaconess Medical Center, Dell Medical Center, University of Texas at Austin	United States	—
5	Treatment of Cognitive Impairment Associated with Schizophrenia Spectrum Disorders: New Evidence, Challenges, and Future Perspectives (2024)	ASST Spedali Civili of Brescia, ASST Valcamonica, University of Brescia	Italy	—

Independent citing papers only; self- and co-author citations excluded. The S2 column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2’s isInfluential signal, Valenzuela et al. 2015) — the “built on / relied upon” pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

Contribution 3

Claim – Contribution 3

The researcher established evidence-based family-focused treatment protocols for adolescents at high risk for psychosis through a seminal randomized controlled trial.

The researcher’s primary contribution centers on a 2014 randomized trial published in the Journal of the American Academy of Child and Adolescent Psychiatry, which evaluated family-focused treatment for adolescents and young adults at high risk for psychosis. This work stands as a core pillar of their research portfolio, with no subsequent follow-up papers by the same author building directly upon this specific line of inquiry.

This line of work appears to address the critical need for structured, family-integrated interventions during the prodromal phase of psychosis. By employing a randomized trial design, the researcher provided a rigorous methodological framework to assess the efficacy of such treatments, distinguishing this approach from less controlled observational studies or individual-focused therapies prevalent at the time.

The significance of this contribution is underscored by its substantial citation record, with 233 citations indicating broad recognition within the field. Notably, 100% of the classified citing papers originate from independent researchers, suggesting that the work has been widely adopted and validated by the broader scientific community rather than relying on self-citation or institutional echo chambers.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · 2 flagged influential by Semantic Scholar

CORE PAPER

[Family-focused treatment for adolescents and young adults at high risk for psychosis: results of a randomized trial](#)

Field-normalised: 164 Semantic Scholar citations place it in the top 5% of Medicine papers from 2014 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	The New Psychology of Health: Unlocking the Social Cure (2018)	The University of Queensland	Australia	—
2	Altering the course of schizophrenia: progress and perspectives (2016)	Inserm, Institut de Recherche (IDR) Servier, The David Geffen School of Medicine at the University of California Los Angeles	France, United States	—
3	Developmental timing and critical windows for the treatment of psychiatric disorders (2016)	King's College London	United Kingdom	—
4	An Individualized Risk Calculator for Research in Prodromal Psychosis (2016)	Cleveland Clinic, Emory University, Harvard Medical School	Canada, United States	—
5	Family Interventions for Schizophrenia and the Psychoses: A Review (2016)	Tufts University School of Medicine, Maine Medical Center Research Institute	United States	—
6	Annual Research Review: Prevention of psychosis in adolescents - systematic review and meta-analysis of advances in detection, prognosis and intervention (2020)	Biocruces Bizkaia Health Research Institute, Basurto University Hospital, University of the Basque Country - UPV/EHU, Complutense University of Madrid, King's College London	Italy, Spain, United Kingdom	Influential
7	Lack of evidence to favor specific preventive interventions in psychosis: a network meta-analysis (2018)	FIDMAG Germanes Hospitalàries, King's College London, Stanford Prevention Research Center	Spain, United Kingdom, United States	Influential

Independent citing papers only; self- and co-author citations excluded. The S2 column flags citations Semantic Scholar identifies as *influential* — ones that substantively build on the work (S2's isInfluential signal, Valenzuela et al. 2015) — the “built on / relied upon” pattern the AAO credits. Counsel should quote the citing text for the strongest of these.

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
King's College London	United Kingdom	THE 38 · QS 31	10
University of Pavia	Italy	THE 351–400	4
Beth Israel Deaconess Medical Center	United States	SCImago #647	3
Yale University	United States	SCImago #76 · THE 10 · QS 21	3
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	3
University of California, San Francisco	United States	SCImago #98	3

Institution	Country	World ranking	Citing papers
The Zucker Hillside Hospital, Northwell Health	United States	—	3
Harvard Medical School	United States	SCImago #12	3
Emory University	United States	SCImago #217 · THE 102 · QS 182	3
Hospital General Universitario Gregorio Marañón	Spain	SCImago #1727	2
University of Valencia	Spain	THE 501–600	2
University of Manchester	United Kingdom	SCImago #196 · THE 56 · QS 35	2
University of Minnesota	United States	SCImago #165 · THE 88 · QS 210	2
University of Miami Miller School of Medicine	United States	—	2
Institut de Recherche (IDR) Servier	France	—	2

Geographic distribution of citing authors

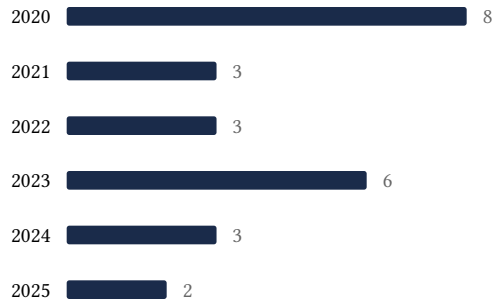
Country	Citing papers
United States	21
United Kingdom	13
Italy	8
Spain	8
Canada	5
Switzerland	4
France	4
Australia	3
South Korea	3
Netherlands	2
Finland	2
Germany	2

Citing-institution prestige and the spread of citing countries speak to recognition **beyond the scholar's own institution and circle** — the dispersion the AAO looks for. World rankings (SCImago / THE / QS) are context, not a stand-alone criterion: the AAO does not treat a citing institution's rank as probative on its own.

E. Citation Growth Over Time

Distinct citing papers by publication year. Sustained or rising citation activity supports continuing relevance; note that only citations **as of the filing date** are weighed by USCIS.





F. AAO Precedent Considerations

Pre-filing self-check (AAO denial patterns)

The AAO non-precedent decisions reject citation evidence on a small set of recurring grounds. Confirm the petition addresses each before filing:

- Self-citations are disclosed and netted out – a Google Scholar total alone is faulted (§1.1).
- Evidence is per individual article, not a body-of-work aggregate total (§1.2).
- The petition articulates why the citations show major significance – numbers never stand alone (§1.5).
- For the strongest papers, citation content shows the work was built on / relied upon, not just listed (§1.6, §2.2).
- Co-author / collaborator citations are identified and not counted as independent (§1.7).
- Recognition is shown beyond the scholar's own institution and circle (§1.8).
- Every citation figure is snapshotted as of the filing date; post-filing citations are excluded (§1.9).
- Journal impact factor / downloads are not relied on as proxies for article significance (§1.10, §1.12).
- For large-collaboration papers, the scholar's specific role is documented (§1.13).
- Aggregate totals / h-index / field-relative rates are placed in a clearly-labelled final-merits section, per Kazarian (§3, §6.1.7).

Disclaimer

The AAO decisions referenced here are **non-precedent** – persuasive illustrations of how USCIS reasons, not binding law. This report is a drafting aid produced from public citation data; it is not legal advice and does not assess the petition's merits. All analysis must be reviewed by qualified immigration counsel.

G. Citation Evidence Index

Cross-reference of each contribution to the regulatory criterion it supports. Counsel should map these to the petition's exhibit numbers.

Contribution	Core paper	Indep. cites	Supports
Contribution 1	Recovery from an at-risk state: clinical and functional outcomes of putatively prodromal youth who do not develop psychosis	7	8 CFR 204.5(h)(3)(v) – Criterion 5

Contribution	Core paper	Indep. cites	Supports
Contribution 2	Neuroplasticity-based auditory training via laptop computer improves cognition in young individuals with recent onset schizophrenia	5	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 3	Family-focused treatment for adolescents and young adults at high risk for psychosis: results of a randomized trial	7	8 CFR 204.5(h)(3)(v) – Criterion 5