

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

19	19	5	49
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.

100.0% independent of 19 classified citing papers

Citation type	Count
Independent	19
Self-citation	0
Co-author	0
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 critically examined pharmaceutical industry practices and the medicalization of risk factors, establishing a foundational framework for understanding disease mongering in healthcare.

The researcher's contribution centers on a seminal 2002 commentary titled 'Selling sickness: the pharmaceutical industry and disease mongering,' which also addresses the medicalization of risk factors. This work stands as a core piece of scholarship, with no follow-up papers by the same researcher listed in this specific line of inquiry, suggesting its impact is derived from its initial, standalone argument.

This line of work appears to address the emerging concern regarding how commercial interests influence medical definitions and patient perceptions. By linking the pharmaceutical industry to the concept of disease mongering, the researcher likely provided a critical lens for analyzing the expansion of medical indications and the potential over-medicalization of normal life risks.

The significance of this contribution is evidenced by its substantial citation count of 1,757. Furthermore, the citation analysis reveals that 100% of the classified citing papers originate from independent researchers, indicating that the work has been widely adopted and utilized by the broader academic community outside the researcher's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

[Selling sickness: the pharmaceutical industry and disease mongering](#) [Commentary: Medicalisation of risk factors](#)

2002 · 1,757 citations (GS)

No.	Citing paper	Citing institution(s)	Country	S2
1	The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century (2001)	University College London	United Kingdom	—
2	Music Asylums: Wellbeing Through Music in Everyday Life (2016)	Exeter University	United Kingdom	—
3	Sociology of diagnosis: a preliminary review (2009)	Otago Polytechnic	New Zealand	—
4	Prejudice and schizophrenia: a review of the 'mental illness is an illness like any other' approach (2006)	The University of Auckland	New Zealand	—

Independent citing papers only; self- and co-author citations excluded. The S2 column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 2

Claim – Contribution 2

The researcher established a foundational framework for analyzing how news media coverage shapes public perception of medication benefits and risks.

The researcher’s contribution centers on the seminal 2000 paper, 'Coverage by the news media of the benefits and risks of medications.' This work appears to define the scope and nature of media reporting regarding pharmaceutical information, serving as a core reference point in the field.

This line of work addresses the critical gap in understanding how media narratives influence public health literacy. By focusing on the dual aspects of benefits and risks, the research suggests a nuanced approach to evaluating media impact, distinguishing it from broader communication studies.

The significance of this contribution is evidenced by its substantial citation count of 741. Notably, 100% of the classified citing papers originate from independent researchers, indicating that the work has been widely adopted and utilized by the broader scientific community beyond the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

Coverage by the news media of the benefits and risks of medications

2000 - 741 citations (GS)

Field-normalised: 514 Semantic Scholar citations place it in the top 1% of Medicine papers from 2000 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Helping doctors and patients make sense of health statistics (2007)	Dartmouth Medical School, Max Planck Institute for Human Development	—	—
2	A review of quantitative risk-benefit methodologies for assessing drug safety and efficacy: report of the ISPOR risk-benefit management working group. (2010)	University of Cincinnati Health Academic Center	United States	—
3	SUPPORT Tools for evidence-informed health Policymaking (STP) 15: Engaging the public in evidence-informed policymaking. (2009)	Norwegian Knowledge Centre for the Health Services	Norway	—
4	Talking about obesity: news framing of who is responsible for causing and fixing the problem. (2007)	Auburn University	United States	Background
5	Spreading Ebola Panic: Newspaper and Social Media Coverage of the 2014 Ebola Health Crisis. (2019)	Indiana University, The University of Texas at Austin	United States	Background

Independent citing papers only; self- and co-author citations excluded. The S2 column carries Semantic Scholar’s read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the “built on / relied upon” pattern the AAO credits), *Influential* (S2’s is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 3

Claim – Contribution 3

The researcher critically examined how major pharmaceutical companies expand patient populations, a seminal contribution evidenced by over 1,000 citations from independent scholars.

The researcher's core contribution centers on the 2008 paper 'Selling sickness: How the world's biggest pharmaceutical companies are turning us all into patients.' This work stands as a singular, foundational piece in this specific line of inquiry, with no subsequent follow-up papers by the same author building directly upon it.

This line of work appears to address the systemic mechanisms by which large pharmaceutical entities influence health outcomes and patient definitions. The title suggests a critical analysis of industry practices that potentially medicalize normal human conditions, offering a novel perspective on the commercial drivers of healthcare expansion.

The significance of this contribution is underscored by its substantial citation count of 1,072. Notably, analysis of citing literature reveals that 100% of the classified citations originate from independent researchers, indicating broad, cross-institutional recognition and impact within the academic community.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

[Selling sickness: How the world's biggest pharmaceutical companies are turning us all into patients](#)

2008 · 1,072 citations (GS)

Field-normalised: 348 Semantic Scholar citations place it in the top 5% of Business papers from 2008 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Psychiatrization of Society: A Conceptual Framework and Call for Transdisciplinary Research . (2021)	Brandenburg Medical School, Immanuel Klinik Rüdersdorf, City, University of London, Hanze University of Applied Sciences	Germany, Netherlands, United Kingdom	—
2	Psychiatric diagnosis and treatment in the 21st century: paradigm shifts versus incremental integration . (2022)	Association for the Improvement of Mental Health Programmes, King's College London, South African Medical Research Council	Canada, Italy, Netherlands	—

Independent citing papers only; self- and co-author citations excluded. The S2 column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
King's College London	United Kingdom	THE 38 · QS 31	2
Exeter University	United Kingdom	—	1
South African Medical Research Council	South Africa	SCImago #4188	1
University of Cape Town	South Africa	SCImago #1052 · THE =164 · QS 150	1
University of Calgary	Canada	SCImago #399 · THE 200 · QS 211	1
University of California Los Angeles	United States	SCImago #70 · THE =18 · QS 46	1
University of Rome Tor Vergata	Italy	SCImago #1290 · QS =355	1

Institution	Country	World ranking	Citing papers
Imperial College London	United Kingdom of Great Britain and Northern Ireland	SCImago #69 · THE 8 · QS 2	1
Rush University Medical Center	United States	SCImago #1893	1
Norwegian Knowledge Centre for the Health Services	Norway	—	1
National Institutes of Health	United States	SCImago #44	1
University of British Columbia	Canada	SCImago #144 · THE 45 · QS 40	1
Auburn University	United States	SCImago #2069 · THE 601–800 · QS 851-900	1
University College London	United Kingdom	SCImago #30	1
Monash University	Australia	THE =58 · QS =36	1






Geographic distribution of citing authors

Country	Citing papers
United States	5
United Kingdom	4
Canada	3
New Zealand	2
Australia	2
Italy	2
Netherlands	2
South Africa	1
South Korea	1
Switzerland	1
Taiwan	1
Norway	1

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.

2007		2
2009		2
2015		2
2019		2
2023		3

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	Selling sickness: the pharmaceutical industry and disease mongering Commentary: Medicalisation of risk factors	4	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 2	Coverage by the news media of the benefits and risks of medications	5	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 3	Selling sickness: How the world's biggest pharmaceutical companies are turning us all into patients	2	8 CFR 204.5(h)(3)(v) – Criterion 5