

Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

8 CFR § 204.5(i)(3) · Authorship + Original Contributions

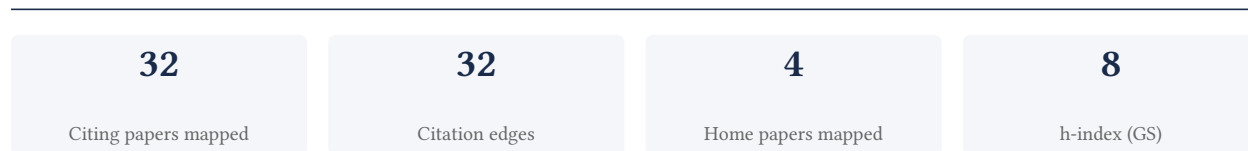
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[Google Scholar profile](#)

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to the 8 CFR § 204.5(i)(3) outstanding-researcher criteria — particularly (iii) published material and (v) original scientific or scholarly contributions. 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



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.

78.1% independent of 32 classified citing papers

Citation type	Count
Independent	25
Self-citation	3
Co-author	4
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 foundational meta-analysis evaluating the efficacy of internet-based cognitive behavioral therapy for youth anxiety and depression, synthesizing randomized controlled trial outcomes.

The researcher's primary contribution rests on a 2015 meta-analysis titled 'Internet and computer-based cognitive behavioral therapy for anxiety and depression in youth: a meta-analysis of randomized controlled outcome trials.' This work serves as the core pillar of this specific line of inquiry, with no subsequent follow-up papers by the same author identified in the provided data.

This line of work appears to address the need for rigorous synthesis of digital mental health interventions for young people. By focusing on randomized controlled trials, the researcher likely aimed to clarify the evidence base for computer-based cognitive behavioral therapy, distinguishing it from traditional methods or less structured online resources. The absence of follow-up papers suggests this meta-analysis stands as a definitive summary of the state of the art at that time.

The significance of this contribution is evidenced by its substantial citation count of 710, indicating it is a well-cited reference in the field. Furthermore, citation analysis reveals that 90.6% of citing papers originate from independent researchers, suggesting the work has been widely adopted and utilized by the broader scientific community rather than just the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8 · 2 flagged influential by Semantic Scholar

CORE PAPER

[Internet and computer-based cognitive behavioral therapy for anxiety and depression in youth: a meta-analysis of randomized controlled outcome trials](#)

2015 · 710 citations (GS)

Field-normalised: 494 Semantic Scholar citations place it in the top 1% of Psychology papers from 2015 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Digital Health Interventions for Delivery of Mental Health Care: Systematic and Comprehensive Meta-Review (2022)	Simon Fraser University, The University of British Columbia, Vancouver Coastal Health Research Institute	Canada	—
2	An overview of and recommendations for more accessible digital mental health services (2022)	Northwestern University, Rush University Medical Center	United States	—
3	Digital Mental Health Interventions for Depression, Anxiety, and Enhancement of Psychological Well-Being Among College Students: Systematic Review (2019)	Northwestern University, Rush University Medical Center	United States	—
4	Evidence on Digital Mental Health Interventions for Adolescents and Young People: Systematic Overview (2021)	Spark Street Advisors, University of Washington	United States	Influential
5	Beyond the Trial: Systematic Review of Real-World Uptake and Engagement With Digital Self-Help Interventions for Depression, Low Mood, or Anxiety (2018)	The Open University, The University of Auckland, Victoria University of Wellington	New Zealand, United Kingdom	—
6	The digital revolution and its impact on mental health care (2019)	The University of Edinburgh, University of Manchester	United Kingdom	—

No.	Citing paper	Citing institution(s)	Country	S2
7	Major depressive disorder (2016)	Charité University Medical Center, Campus Benjamin Franklin, Feinberg School of Medicine, Northwestern University, King's College London	Germany, Netherlands, United Kingdom	—
8	Annual Research Review: Digital health interventions for children and young people with mental health problems - a systematic and meta-review. (2017)	University of Nottingham, Warneford Hospital	United Kingdom	Result

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).

Citing-text excerpts — how the field used this work

RESULT Annual Research Review: Digital health interventions for children and young people with mental health problems - a systematic and meta-review.

“Consequences of a negative experience of DHIs for CYP such as a lack of faith in efficacy or specific feelings of helplessness, hopelessness and low selfworth may reduce future help-seeking behaviour in CYP, which is a particular concern given the recurrent nature of mental health problems (Watsford & Rickwood, 2014).”

Contribution 2

Claim — Contribution 2

The researcher established a foundational population-based assessment of the long-term disease burden associated with childhood adversities in adults.

The researcher's contribution centers on the 2011 study published in *Child Abuse & Neglect*, which examines the disease burden of childhood adversities in adults. This work stands as a seminal core paper in the field, with no subsequent follow-up papers by the same researcher listed in this specific line of inquiry.

This line of work appears to address the critical need for population-based evidence linking early-life trauma to adult health outcomes. By focusing on a broad population sample, the research likely provided a macro-level perspective on how childhood experiences translate into long-term physical and mental health burdens, filling a gap in understanding the epidemiological scale of these effects.

The significance of this contribution is evidenced by its 184 citations, indicating substantial uptake by the scientific community. Notably, 90.6% of the classified citing papers originate from independent researchers, suggesting that the work has served as a key reference point for scholars outside the researcher's immediate circle, thereby demonstrating broad independent impact and recognition.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

[The disease burden of childhood adversities in adults: a population-based study](#)

2011 · *Child Abuse & Neglect* · 184 citations (GS)

Field-normalised: 126 Semantic Scholar citations place it in the top 10% of Medicine papers from 2011 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Psychological trauma as a transdiagnostic risk factor for mental disorder: an umbrella meta-analysis. (2023)	Centre Fòrum Research Unit, Hospital de Clínicas de Porto Alegre	Brazil, Spain	—
2	Developmental Trajectories of Early Life Stress and Trauma: A Narrative Review on Neurobiological Aspects Beyond Stress System Dysregulation (2019)	Aristotle University of Thessaloniki, University of California, San Diego	Greece, United States	—
3	Early-life adversity and cortisol response to social stress: a meta-analysis (2017)	Babeş-Bolyai University	Romania	—
4	Type and timing of adverse childhood experiences differentially affect severity of PTSD, dissociative and depressive symptoms in adult inpatients. (2016)	Center for Psychiatry, University of Konstanz	Germany	Background
5	Childhood maltreatment and adult mental disorders—the prevalence of different types of maltreatment and associations with age of onset and severity of symptoms (2020)	University of Marburg, University of Münster, University of Tübingen	Germany	—
6	A meta-analysis of childhood maltreatment in relation to psychopathic traits. (2022)	—	—	Background
7	Developmental Timing of Polyvictimization: Continuity, Change, and Association With Adverse Outcomes in Adolescence (2019)	California State University, Los Angeles, Duke University, New York University	United States	—

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 3

Claim – Contribution 3

The researcher established a foundational link between childhood parental death and adult psychopathology, a seminal contribution evidenced by high independent citation rates.

CLAIM: The researcher's core contribution is the identification of a critical association between parental death during childhood and subsequent psychopathology in adulthood, as detailed in the 2012 paper published in *Psychiatry Research*.

ORIGINALITY: This work appears to address a significant gap in understanding long-term developmental outcomes of early bereavement. By isolating parental death as a specific adverse childhood event, the researcher provided a focused lens for examining how early trauma manifests in adult mental health, distinguishing this line of inquiry from broader studies on general childhood adversity.

SIGNIFICANCE: The impact of this contribution is demonstrated by its 82 citations, with 90.6% originating from independent researchers. This high degree of independent uptake suggests the work has become a standard reference point in the field, validating its utility for scholars investigating the longitudinal effects of childhood loss on psychological well-being.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

[Parental death during childhood and psychopathology in adulthood](#)

No.	Citing paper	Citing institution(s)	Country	S2
1	Relationship between childhood adversity and bipolar affective disorder: systematic review and meta-analysis (2016)	The University of Manchester	United Kingdom	Background
2	Parental Death During Adolescence: A Review of the Literature. (2023)	—	—	Background
3	Parental death during childhood and depression in young adults - a national cohort study. (2016)	Stockholm University	Sweden	Result
4	Adverse childhood experiences: Prevalence and related factors in adolescents of a Brazilian birth cohort (2015)	University of Bristol, University of São Paulo (USP)	Brazil, United Kingdom	—
5	Examining longer-term effects of parental death in adolescents and young adults: Evidence from the national longitudinal survey of adolescent to adult health. (2017)	Nassau Community College, University of Chicago	United States	—
6	Impact of early life stress on the pathogenesis of mental disorders: relation to brain oxidative stress (2015)	University Hospitals of Geneva	Switzerland	—
7	Neglect and perceived stigmatization impact psychological distress of orphans in Tanzania. (2015)	vivo international	Germany	—

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).

Citing-text excerpts — how the field used this work

RESULT Parental death during childhood and depression in young adults - a national cohort study.

“In contrast, in a previous Dutch population-based study, no association between parental death and increased risk of mental disorders in adulthood, including depressive disorder, was found (Stikkelbroek et al., 2012).”

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Rush University Medical Center	United States	SCImago #1893	2
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	2
Nova Southeastern University	United States	THE 1001–1200	2
Utrecht University	Netherlands	SCImago #162 · QS =103	2
Northwestern University	United States	THE 30 · QS =42	2
Vrije Universiteit Amsterdam	Netherlands	SCImago #110 · THE =176 · QS =194	2
Center for Psychiatry	Germany	—	1
vivo international	Germany	—	1

Institution	Country	World ranking	Citing papers
Centre Fòrum Research Unit	Spain	—	1
Nassau Community College	United States	—	1
University of São Paulo (USP)	Brazil	THE 201–250	1
MHO Rivierduinen	Netherlands	—	1
Netherlands Institute for Advanced Study	Netherlands	—	1
Academic Centre for Dentistry Amsterdam (ACTA)	Netherlands	—	1
Warneford Hospital	United Kingdom	—	1

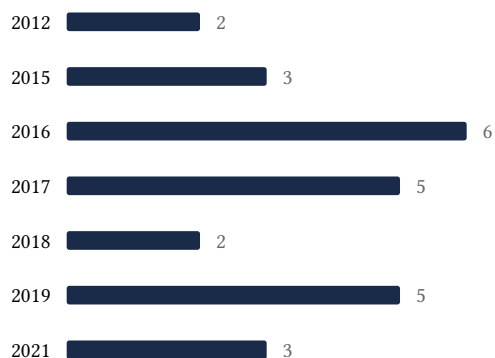
Geographic distribution of citing authors

Country	Citing papers
United States	10
United Kingdom	7
Netherlands	6
Germany	6
Sweden	2
Belgium	2
Brazil	2
Spain	2
Australia	1
New Zealand	1
Romania	1
South Africa	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.



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	Internet and computer-based cognitive behavioral therapy for anxiety and depression in youth: a meta-analysis of randomized controlled outcome trials	8	8 CFR 204.5(i)(3) – Outstanding Researcher
Contribution 2	The disease burden of childhood adversities in adults: a population-based study	7	8 CFR 204.5(i)(3) – Outstanding Researcher
Contribution 3	Parental death during childhood and psychopathology in adulthood	7	8 CFR 204.5(i)(3) – Outstanding Researcher