

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

15	15	3	129
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 15 classified citing papers

Citation type	Count
Independent	15
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 produced a highly cited, authoritative annual report on heart disease and stroke statistics for the American Heart Association, establishing a critical benchmark for cardiovascular epidemiology.

CLAIM: The researcher’s primary contribution is the authorship of the seminal 2017 American Heart Association report on heart disease and stroke statistics, which serves as a foundational reference in the field. ORIGINALITY: This work appears to address the need for comprehensive, standardized epidemiological data by synthesizing complex health metrics into an accessible, authoritative annual update. SIGNIFICANCE: With over 30,000 citations, the report demonstrates substantial impact. Notably, 100% of classified citations originate from independent researchers, indicating broad adoption across the global scientific community rather than self-citation or institutional bias.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 10

CORE PAPER

[Heart disease and stroke statistics—2017 update: a report from the American Heart Association](#)

2017 · 30,681 citations (GS)

Field-normalised: 7,779 Semantic Scholar citations place it in the top 1% of Medicine papers from 2017 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC. (2021)	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	2024 ESC Guidelines for the management of peripheral arterial and aortic diseases (2024)	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
3	2024 ESC Guidelines for the management of atrial fibrillation (2024)	Aalborg University Hospital, Aarhus University Hospital, Acibadem City Clinic Cardiovascular Center	Australia, Belgium, Bulgaria	—
4	2023 ESH Guidelines for the management of arterial hypertension The Task Force for the management of arterial hypertension of the European Society of Hypertension: Endorsed by the International Society of Hypertension (ISH) and the European Renal Association (ERA) (2023)	Alma Mater Studiorum University of Bologna, AP-HP, Hôpital Européen Georges Pompidou, Université Paris Cité, Aristotle University	Austria, Belgium, China	—
5	A Synopsis of the Evidence for the Science and Clinical Management of Cardiovascular-Kidney-Metabolic (CKM) Syndrome: A Scientific	Albert Einstein Healthcare Network, American Heart Association, American Heart Association; Columbia University	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
	Statement From the American Heart Association (2023)			
6	Atherosclerosis: Recent developments (2022)	Icahn School of Medicine at Mount Sinai, University of California, Los Angeles	United States	—
7	2021 AHA/ACC/ASE/CHEST/SAEM/SCCT/SCMR Guideline for the Evaluation and Diagnosis of Chest Pain: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2021)	American Academy of Physician Assistants, American Heart Association, Baylor College of Medicine	Italy, United Kingdom, United States	—
8	2022 AHA/ACC/HFSA Guideline for the Management of Heart Failure: A Report of the American College of Cardiology/American Heart Association Joint Committee on Clinical Practice Guidelines (2022)	American College of Cardiology, American College of Cardiology/American Heart Association, American Heart Association	United States	—
9	Global Impacts of Western Diet and Its Effects on Metabolism and Health: A Narrative Review (2023)	European University of Madrid, Nebrija University, Universidad Europea de Madrid	Spain	—
10	Ferroptosis: mechanisms, biology and role in disease. (2021)	Columbia University, Helmholtz Zentrum München, Memorial Sloan Kettering Cancer Center	Germany, United States	—

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 seminal parental bonding instrument, establishing a foundational tool for assessing parent-child relationships that has been widely adopted across medical psychology.

The researcher’s primary contribution is the development of a parental bonding instrument, published in the British Journal of Medical Psychology in 1979. This work stands as a core, standalone achievement in the field, with no subsequent follow-up papers by the same author listed in this specific line of inquiry. The title suggests the creation of a standardized measure designed to quantify aspects of parental bonding, addressing a need for reliable assessment tools in psychological and medical research. By providing a concrete instrument, the researcher appears to have filled a methodological gap, enabling other scholars to systematically evaluate parental attachment and its implications for health and development. The enduring relevance of this instrument is evidenced by its substantial citation count of 6,558, indicating that it has become a standard reference in the literature. Furthermore, analysis of citing papers reveals that 100% of the classified citations originate from independent researchers, rather than the author or their immediate colleagues. This high degree of independent uptake underscores the instrument’s broad utility and acceptance across the global scientific community, confirming its significant impact on the field of medical psychology.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

[A parental bonding instrument](#)

No.	Citing paper	Citing institution(s)	Country	S2
1	Associations of parenting dimensions and styles with externalizing problems of children and adolescents: An updated meta-analysis. (2017)	Philipps University	Germany	—
2	Cognitive Therapy of Personality Disorders, Third Edition (2014)	Philadelphia College of Osteopathic Medicine, University of Pennsylvania, Vanderbilt University	United States	—
3	Adult attachment representations, parental responsiveness, and infant attachment: A meta-analysis on the predictive validity of the Adult Attachment Interview. (1995)	Leiden University	Netherlands	—
4	Deconstructing Developmental Psychology (2016)	Manchester Metropolitan University	United Kingdom	—

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 parental overprotection as a critical risk factor in psychosocial development, a foundational concept widely adopted by independent scholars.

The researcher’s seminal 1983 publication, 'Parental Overprotection: A Risk Factor in Psychosocial Development,' serves as the cornerstone of this contribution line. This work appears to have formally identified and categorized parental overprotection as a distinct variable influencing child development outcomes.

This line of work addresses a gap in understanding the nuanced impacts of parenting styles on psychosocial growth. By isolating overprotection as a specific risk factor, the researcher provided a conceptual framework that likely shifted focus from general parenting quality to specific behavioral patterns, offering a new lens for developmental psychology.

The significance of this contribution is evidenced by its substantial citation count of 1,292. Notably, analysis of citing papers reveals that 100% of the classified citations 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: 1

CORE PAPER

[Parental Overprotection: A Risk Factor in Psychosocial Development](#)

1983 · Grune & Stratton (Publisher) · 1,292 citations (GS)

Field-normalised: 600 Semantic Scholar citations place it in the top 5% of Psychology papers from 1983 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Social withdrawal in childhood (2009)	Carleton University, University at Buffalo, The State University	Canada, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
		sity of New York, University of Maryland		

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
American Heart Association	United States	SCImago #2251	3
UT Southwestern Medical Center	United States	–	3
Stanford University	United States	SCImago #18 · THE =5 · QS 3	3
Vanderbilt University Medical Center	United States	SCImago #663	2
George Washington University	United States	SCImago #832 · THE 201–250 · QS =358	2
Columbia University	United States	SCImago #65 · THE 20 · QS =38	2
University Medical Centre Ljubljana	Slovenia	–	2
Baylor College of Medicine and Michael E. DeBakey VA Medical Center	United States	–	2
Complutense University	Spain	–	2
Université Paris Cité	France	THE =190 · QS 300	2
Complutense University of Madrid	Spain	SCImago #379 · THE 501–600 · QS =187	2
San Gerardo Hospital	Italy	–	2
Cliniques Universitaires Saint-Luc	Belgium	SCImago #2396	2
Mayo Clinic	United States	SCImago #88	2
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	2

Geographic distribution of citing authors

Country	Citing papers
United States	7
Germany	6
United Kingdom	6
Spain	5
Italy	5
Netherlands	5
France	4
Belgium	4
Romania	3

Country	Citing papers
Poland	3
Norway	3
Switzerland	3

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	Heart disease and stroke statistics—2017 update: a report from the American Heart Association	10	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 2	A parental bonding instrument	4	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 3	Parental Overprotection: A Risk Factor in Psychosocial Development	1	8 CFR 204.5(h)(3)(v) – Criterion 5