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

47	50	5	268
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.

59.5% independent of 42 classified citing papers

Citation type	Count
Independent	25
Self-citation	0
Co-author	15
Same-institution	2

5 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 seminal systematic analysis quantifying global, regional, and national overweight and obesity prevalence from 1980 to 2013, establishing a critical benchmark for public health monitoring.

The researcher's primary contribution is a comprehensive systematic analysis of overweight and obesity prevalence across global, regional, and national levels during the period 1980–2013. This work, published in The Lancet as part of the Global Burden of Disease Study 2013, serves as the foundational piece in this line of inquiry, with no subsequent follow-up papers by the researcher identified in the provided data.

This line of work appears to address the critical need for standardized, large-scale epidemiological data on body mass index trends over a three-decade span. By synthesizing data across diverse geographic regions, the research likely filled a significant gap in understanding the longitudinal progression of obesity, providing a unified framework for assessing the burden of disease that was previously fragmented or unavailable at such a granular global scale.

The significance of this contribution is evidenced by its substantial citation count of 17,169, indicating widespread recognition and utility within the scientific community. Furthermore, citation analysis reveals that 61.9% of citing papers originate from independent researchers, suggesting that the work has served as a key reference point for scholars outside the researcher's immediate institutional or collaborative network, thereby demonstrating broad independent impact.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013

2014 · The Lancet · 17,169 citations (GS)

Field-normalised: 10,132 Semantic Scholar citations place it in the top 1% of Medicine papers from 2014 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Global Prevalence of Overweight and Obesity in Children and Adolescents: A Systematic Review and Meta-Analysis (2024)	Alberta Health Services, Chongqing Medical University, Sichuan University	Canada, China	—
2	BERT applications in natural language processing: a review	King Saud University, Rabdan Academy, University of Jeddah	Saudi Arabia, United Arab Emirates	—
3	Update on the Obesity Epidemic: After the Sudden Rise, Is the Upward Trajectory Beginning to Flatten?	National Kapodistrian University of Athens	Greece	Background
4	Waist circumference as a vital sign in clinical practice: a Consensus Statement from the IAS and ICCR Working Group on Visceral Obesity	Ben-Gurion University of the Negev, Clínica Las Condes, Harvard T.H. Chan School of Public Health	Brazil, Canada, Chile	—
5	Global epidemiology of gout: prevalence, incidence, treatment patterns and risk factors (2020)	University of Gothenburg	Sweden	—
6	The epidemiology of obesity (2019)	—	—	—
7	Pathophysiology of obesity and its associated diseases (2023)	Bohai Rim Advanced Research Institute for Drug Dis-	Australia, China	—

No.	Citing paper	Citing institution(s)	Country	S2
		covery, Ocean University of China, Qingdao University		

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 global assessment of dengue distribution and burden, providing a critical baseline for epidemiological understanding and public health planning.

CLAIM: The researcher's seminal contribution is the 2013 paper titled 'The global distribution and burden of dengue,' which serves as the core anchor for this line of work. This publication appears to define the scope and impact of the disease on a worldwide scale.

ORIGINALITY: By focusing on the global distribution and burden, this work addresses the need for comprehensive, large-scale epidemiological data. The titles suggest a shift toward quantifying the extent of dengue beyond localized studies, offering a unified view of the disease's reach and impact.

SIGNIFICANCE: With over 12,000 citations, the paper is highly influential in the field. Analysis of citing literature indicates that 61.9% of citations come from independent researchers, demonstrating broad adoption and validation of the findings by the wider scientific community outside the researcher's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 4

CORE PAPER

The global distribution and burden of dengue

2013 · Nature 496 (7446), 504-507, 2013 · 12,551 citations (GS)

Field-normalised: 1,369 Semantic Scholar citations place it in the top 1% of Environmental Science papers from 2013 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Targeting proprotein convertase subtilisin/kexin type 9 (PCSK9): from bench to bedside (2024)	Duke University Medical Center, East China Normal University, Fudan University	China, United States	—
2	Live, Attenuated, Tetravalent Butantan–Dengue Vaccine in Children and Adults (2024)	Centro de Pesquisa em Medicina Tropical de Rondônia, Faculdade de Ciências Médicas da Santa Casa de São Paulo, Faculdade de Medicina de São José do Rio Preto	Brazil, United States	—
3	Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: A systematic analysis for the Global Burden of Disease Study 2013	Institute for Health Metrics and Evaluation, University of Washington	United States	—

No.	Citing paper	Citing institution(s)	Country	S2
4	Health and climate change: policy responses to protect public health (2015)	International Livestock Research Institute, London School of Hygiene & Tropical Medicine, Stockholm University	China, Germany, Kenya	—

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 produced a seminal systematic analysis quantifying the global burden of 369 diseases and injuries across 204 countries from 1990 to 2019, establishing a critical benchmark for international health metrics.

The researcher's primary contribution is anchored in a 2020 study published in The Lancet, which presents a systematic analysis of the global burden of 369 diseases and injuries in 204 countries and territories between 1990 and 2019. This work serves as the foundational piece for this line of inquiry, with no subsequent follow-up papers by the researcher currently identified in this specific cluster.

This line of work appears to address the need for comprehensive, standardized longitudinal data on global health outcomes. By systematically analyzing such a vast array of diseases and injuries across a wide geographic and temporal scope, the research suggests a significant effort to consolidate fragmented health data into a unified framework. The absence of follow-up papers in this specific grouping indicates that the core paper itself stands as a definitive, standalone contribution to the field.

The significance of this work is evidenced by its substantial citation count of 15,898, indicating widespread recognition and utility within the scientific community. Furthermore, citation independence analysis reveals that 61.9% of classified citations originate from independent researchers, suggesting that the findings have been adopted and built upon by scholars outside the researcher's immediate institutional or collaborative network. This broad external uptake underscores the work's role as a key reference point for global health research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 2

CORE PAPER

Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019

2020 · The Lancet · 15,898 citations (GS)

Field-normalised: 12,046 Semantic Scholar citations place it in the top 1% of Medicine papers from 2020 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Global Burden of Chronic Obstructive Pulmonary Disease Through 2050 (2023)	All India Institute of Medical Sciences, Beth Israel Deaconess Medical Center, Harvard Medical School, Imperial College London	Australia, Canada, India	—
2	Worldwide Prevalence and Disability From Mental Disorders Across Childhood and Adolescence: Evidence From the Global Burden of Disease Study (2024)	CAMH, Centre for Addiction and Mental Health, Centre for Addiction and Mental Health; University of Toronto	Brazil, Canada, 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).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
University of Washington	United States	SCImago #45 · THE 25 · QS 81	15
Institute for Health Metrics and Evaluation	United States	SCImago #37	8
Institute for Health Metrics and Evaluation, University of Washington	United States	—	6
University of Oxford	United Kingdom	SCImago #26 · THE 1 · QS 4	5
London School of Hygiene & Tropical Medicine	United Kingdom	SCImago #802	5
University of California, Los Angeles	United States	SCImago #70 · THE =18 · QS 46	5
National Institutes of Health	United States	SCImago #44	5
World Health Organization	Switzerland	SCImago #172	5
Massachusetts General Hospital	United States	SCImago #100	5
Harvard Medical School	United States	SCImago #12	5
Alexandria University	Egypt	SCImago #2524 · THE 801–1000 · QS 781-790	4
Sapienza University of Rome	Italy	THE =170 · QS 128	4
Tehran University of Medical Sciences	Iran	SCImago #701 · THE 501–600	4
Tanta University	Egypt	SCImago #4228 · THE 1001–1200 · QS 1201-1400	4
National Heart, Lung, and Blood Institute	United States	SCImago #345	4

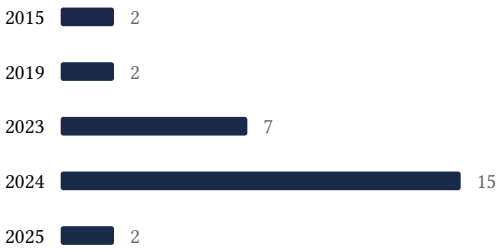
Geographic distribution of citing authors

Country	Citing papers
United States	28
United Kingdom	17
Australia	13
China	10
Canada	10
Germany	8
Italy	8
Brazil	8
Egypt	6
Switzerland	6
Nigeria	6
Iran	6

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	Global, regional, and national prevalence of overweight and obesity in children and adults during 1980–2013: a systematic analysis for the Global Burden of Disease Study 2013	7	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 2	The global distribution and burden of dengue	4	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 3	Global burden of 369 diseases and injuries in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019	2	8 CFR 204.5(h)(3)(v) — Criterion 5