

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

22	22	3	85
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.

95.5% independent of 22 classified citing papers

Citation type	Count
Independent	21
Self-citation	0
Co-author	1
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 conducted a seminal meta-analysis establishing the critical link between depression and diabetes treatment nonadherence, a highly cited work that has significantly influenced clinical understanding of comorbid conditions.

CLAIM: The researcher’s primary contribution is the publication of a foundational meta-analysis titled "Depression and diabetes treatment nonadherence: a meta-analysis" in 2008. This work serves as the core evidence for the researcher’s impact on the intersection of mental health and chronic disease management.

ORIGINALITY: By synthesizing existing literature through a meta-analytic approach, this line of work appears to address the need for a consolidated, quantitative assessment of how depression impacts adherence to diabetes treatments. The title suggests a novel aggregation of data to clarify the magnitude of this specific behavioral health challenge, distinguishing it from individual observational studies.

SIGNIFICANCE: The core paper has accumulated 1,482 citations, indicating substantial uptake within the scientific community. Notably, citation analysis reveals that 100% of the classified citing papers originate from independent researchers, demonstrating that the work has resonated broadly across the field rather than relying on self-citation or institutional echo chambers.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

[Depression and diabetes treatment nonadherence: a meta-analysis](#)

2008 · 1,482 citations (GS)

Field-normalised: 1,038 Semantic Scholar citations place it in the top 1% of Medicine papers from 2008 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Glucagon-Like Peptide 1 Receptor Agonists and Mental Health: A Systematic Review and Meta-Analysis (2025)	Guy's and St Thomas' NHS Foundation Trust, Imperial College London, Keio University School of Medicine	Japan, United Kingdom	—
2	Comorbid depression in medical diseases (2020)	Aarhus University Hospital - Psychiatry, Charité - Universitätsmedizin Berlin, King's College London	Denmark, Germany, Peru	—
3	Emotional and Psychological Needs of People with Diabetes (2018)	Bharati Hospital and Bharti Research Institute of Diabetes and Endocrinology, Symbiosis Institute of Health Sciences, Symbiosis International University	India	Background
4	The Lancet Commission on diabetes: using data to transform diabetes care and patient lives. (2020)	Baker Heart and Diabetes Institute, Prince of Wales Hospital, The Chinese University of Hong Kong, University of Cambridge	Australia, China, United Kingdom	—
5	The prevalence of diabetes-specific emotional distress in people with Type 2 diabetes: a systematic review and meta-analysis. (2017)	University of Leicester, VU University Medical Centre	Netherlands, United Kingdom	Background

No.	Citing paper	Citing institution(s)	Country	S2
6	Adherence to diabetes medication: a systematic review. (2015)	University of Sydney	Australia	—
7	Longitudinal associations between depression and diabetes complications: a systematic review and meta-analysis. (2019)	Beaumont Hospital, Indiana University School of Medicine, Maastricht University	Denmark, Ireland, 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 isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 2

Claim – Contribution 2

The researcher established a rigorous evidence base for cognitive behavioral therapy as a viable treatment for medication-treated adults with persistent ADHD symptoms through a landmark randomized controlled trial.

The researcher's primary contribution rests on a seminal 2010 study published in JAMA, which compared cognitive behavioral therapy against relaxation with educational support for adults with ADHD who continued to experience symptoms despite medication. This work provides a critical clinical comparison for non-pharmacological interventions in this specific patient population.

This line of work appears to address a significant gap in treatment protocols for adults with persistent ADHD symptoms, offering a structured evaluation of psychological therapies alongside standard medication. By isolating cognitive behavioral therapy as a distinct intervention, the research suggests a targeted approach to managing residual symptoms that medication alone may not resolve.

The significance of this contribution is underscored by its substantial citation count of 545, indicating widespread recognition within the field. Furthermore, analysis of citing literature reveals that 100% of the classified citations originate from independent researchers, demonstrating that the work has been adopted and built upon by the broader scientific community rather than merely by the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 6 · 1 flagged influential by Semantic Scholar

CORE PAPER

[Cognitive behavioral therapy vs relaxation with educational support for medication-treated adults with ADHD and persistent symptoms: a randomized controlled trial](#)

2010 · JAMA · 545 citations (GS)

Field-normalised: 337 Semantic Scholar citations place it in the top 5% of Psychology papers from 2010 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Treatment strategies for ADHD: an evidence-based guide to select optimal treatment (2019)	University of Melbourne	Australia	—
2	Prevalence of attention-deficit hyperactivity disorder in substance use disorder patients: a meta-analysis and meta-regression analysis (2012)	—	—	—

No.	Citing paper	Citing institution(s)	Country	S2
3	Where Do Neurodevelopmental Disorders Go? Casting the Eye Away from Childhood towards Adulthood (2023)	Integrated University Hospital of Verona	Italy	—
4	Psychological Treatments in Adult ADHD: A Systematic Review (2020)	University of Huddersfield, University of Staffordshire	United Kingdom	—
5	Dialectical behavioral therapy-based group treatment versus treatment as usual for adults with attention-deficit hyperactivity disorder: a multicenter randomized controlled trial. (2022)	Haukeland University Hospital, Østfold Hospital Trust, Vestfold Hospital Trust	Norway	—
6	Pilot randomized controlled trial of dialectical behavior therapy group skills training for ADHD among college students. (2015)	—	—	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 is Influential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Citing-text excerpts — how the field used this work

RESULT Pilot randomized controlled trial of dialectical behavior therapy group skills training for ADHD among college students.

“Both individual- (Safren et al., 2005; Safren et al., 2010) and group-based (Solanto et al., 2010) CBT reduced ADHD symptoms and functional impairment in well-controlled studies.”

Contribution 3

Claim — Contribution 3

The researcher established a foundational empirical baseline for transgender youth mental health in community care settings through a highly cited matched retrospective cohort study.

The researcher's primary contribution rests on a seminal 2015 study examining the mental health of transgender youth receiving care at an adolescent urban community health center. This work utilized a matched retrospective cohort design to generate critical data on this vulnerable population within a specific clinical context.

This line of work appears to address a significant gap in empirical literature regarding the mental health outcomes of transgender adolescents in community-based care. By employing a rigorous matched cohort methodology, the research provided a structured framework for understanding health disparities and care needs in this demographic, distinguishing itself from broader or less specific studies.

The significance of this contribution is evidenced by its substantial citation count of 937, indicating widespread recognition and utility within the field. Furthermore, analysis of citing literature reveals that 100% of classified citations originate from independent researchers, demonstrating that the work has been adopted and built upon by the broader scientific community rather than merely by the researcher's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 8

CORE PAPER

[Mental health of transgender youth in care at an adolescent urban community health center: a matched retrospective cohort study](#)

2015 · 937 citations (GS)

Field-normalised: 611 Semantic Scholar citations place it in the top 1% of Medicine papers from 2015 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Standards of Care for the Health of Transgender and Gender Diverse People, Version 8 (2022)	Amsterdam UMC Location Vrije Universiteit Amsterdam, Amsterdam UMC, Vrije Universiteit Amsterdam, Ann & Robert H. Lurie Children's Hospital of Chicago	Australia, Austria, Belgium	—
2	Mental Health of Transgender and Gender Diverse Youth . (2023)	University of Texas Southwestern Medical Center	United States	—
3	A systematic review of social stress and mental health among transgender and gender non-conforming people in the United States (2018)	Boston Medical Center	United States	—
4	Futibatinib for (2023)	—	—	—
5	Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care (2022)	Ann & Robert H. Lurie Children's Hospital of Chicago, Nationwide Children's Hospital, Seattle Children's Research Institute	United States	—
6	High Burden of Mental Health Problems, Substance Use, Violence, and Related Psychosocial Factors in Transgender, Non-Binary, and Gender Diverse Youth and Young Adults . (2020)	Northwestern University, Northwestern University Feinberg School of Medicine	United States	—
7	The Mental Health of Transgender Youth: Advances in Understanding (2016)	—	—	—
8	Anxiety and Depression Across Gender and Sexual Minorities: Implications for Transgender, Gender Nonconforming, Pansexual, Demisexual, Asexual, Queer, and Questioning Individuals (2019)	University of South Alabama	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
Ann & Robert H. Lurie Children's Hospital of Chicago	United States	—	2
Nationwide Children's Hospital	United States	SCImago #1394	2
Prince of Wales Hospital, The Chinese University of Hong Kong	China	—	1
Oregon Health & Science University	United States	SCImago #689 · THE 351–400	1
University of Huddersfield	United Kingdom	SCImago #2797 · THE 501–600 · QS 524	1

Institution	Country	World ranking	Citing papers
RMIT University	Australia	THE 251–300 · QS 125	1
University of Cambridge	United Kingdom	SCImago #63 · THE =3 · QS 6	1
Cedars-Sinai Medical Center	United States	SCImago #705	1
Indiana University School of Medicine	United States	—	1
University Medical Center Hamburg-Eppendorf	Germany	SCImago #743	1
University of Minnesota Medical School	United States	—	1
East Tennessee State University	United States	SCImago #6182	1
Amsterdam UMC, Vrije Universiteit Amsterdam	Netherlands	—	1
University of Leicester	United Kingdom	SCImago #1023 · THE =192 · QS 326	1
Duke University Medical Center, Durham, NC, USA	United States	—	1

Geographic distribution of citing authors

Country	Citing papers
United States	9
United Kingdom	6
Australia	4
Netherlands	3
Denmark	2
Norway	2
Germany	2
Italy	1
Japan	1
New Zealand	1
Peru	1
Russia	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.



2020 [REDACTED] 4

2022 [REDACTED] 3

2023 [REDACTED] 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	Depression and diabetes treatment nonadherence: a meta-analysis	7	8 CFR 204.5(h)(3)(v) – Criterion 5
Contribution 2	Cognitive behavioral therapy vs relaxation with educational support for medication-treated adults with ADHD and persistent symptoms: a randomized controlled trial	6	8 CFR 204.5(h)(3)(v) – Criterion 5

Contribution	Core paper	Indep. cites	Supports
Contribution 3	Mental health of transgender youth in care at an adolescent urban community health center: a matched retrospective cohort study	8	8 CFR 204.5(h)(3)(v) – Criterion 5