

# Sulakshana Nandi

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/4486296/publications.pdf>

Version: 2024-02-01

18  
papers

672  
citations

1039406

9  
h-index

940134

16  
g-index

18  
all docs

18  
docs citations

18  
times ranked

505  
citing authors

#	ARTICLE	IF	CITATIONS
1	Covid-19 pandemic and the social determinants of health. <i>BMJ</i> , The, 2021, 372, n129.	3.0	422
2	From primary health care to universal health coverageâ€”one step forward and two steps back. <i>Lancet</i> , The, 2019, 394, 619-621.	6.3	53
3	Hospital utilization and out of pocket expenditure in public and private sectors under the universal government health insurance scheme in Chhattisgarh State, India: Lessons for universal health coverage. <i>PLoS ONE</i> , 2017, 12, e0187904.	1.1	49
4	Addressing the social determinants of health: a case study from the Mitanin (community health) Tj ETQq0 0 0 rgBT /Overlock_10 Tf 50 6	1.0	33
5	What the Good Doctor Said: A Critical Examination of Design Issues of the RSBY Through Provider Perspectives in Chhattisgarh, India. <i>Social Change</i> , 2013, 43, 227-243.	0.1	24
6	Assessing geographical inequity in availability of hospital services under the state-funded universal health insurance scheme in Chhattisgarh state, India, using a composite vulnerability index. <i>Global Health Action</i> , 2018, 11, 1541220.	0.7	17
7	Uncovering Coverage: Utilisation of the Universal Health Insurance Scheme, Chhattisgarh by Women in Slums of Raipur. <i>Indian Journal of Gender Studies</i> , 2016, 23, 43-68.	0.1	16
8	When state-funded health insurance schemes fail to provide financial protection: An in-depth exploration of the experiences of patients from urban slums of Chhattisgarh, India. <i>Global Public Health</i> , 2020, 15, 220-235.	1.0	16
9	Using an equity-based framework for evaluating publicly funded health insurance programmes as an instrument of UHC in Chhattisgarh State, India. <i>Health Research Policy and Systems</i> , 2020, 18, 50.	1.1	16
10	Rural retention strategies in the South-East Asia Region: evidence to guide effective implementation. <i>Bulletin of the World Health Organization</i> , 2020, 98, 815-817.	1.5	8
11	A study of Rashtriya Swasthya Bima Yojana in Chhattisgarh, India. <i>BMC Proceedings</i> , 2012, 6, .	1.8	6
12	Reiterating the Importance of Publicly Funded and Provided Primary Healthcare for Non-communicable Diseases: The Case of India Comment on "Universal Health Coverage for Non-communicable Diseases and Health Equity: Lessons From Australian Primary Healthcare". <i>International Journal of Health Policy and Management</i> , 2021, , .	0.5	4
13	Public health advocacy to reinstate reproductive rights of Particularly Vulnerable Tribal Groups (PTGs) in Chhattisgarh. <i>BMC Proceedings</i> , 2012, 6, .	1.8	3
14	Struggle against outsourcing of diagnostic services in government facilities: Strategies and lessons from a campaign led by Jan Swasthya Abhiyan (Peopleâ€™s Health Movement) in Chhattisgarh, India. <i>Journal of Social and Political Psychology</i> , 2018, 6, 677-695.	0.6	3
15	Denying access of Particularly Vulnerable Tribal Groups to contraceptive services: a case study among the Baiga community in Chhattisgarh, India. <i>Reproductive Health Matters</i> , 2018, 26, 84-97.	1.3	1
16	Resisting privatization and marketization of health care: Peopleâ€™s Health Movementâ€™s experiences from India, Philippines and Europe. <i>SaÃºde Em Debate</i> , 2020, 44, 37-50.	0.1	1
17	Indigenous womenâ€™s struggles to oppose state-sponsored deforestation in Chhattisgarh, India. <i>Gender and Development</i> , 2017, 25, 387-403.	0.4	0
18	Universal Healthcare and Universalising Health Insurance: Examining the Binary Through the RSBY/MSBY in Chhattisgarh. , 2021, , 155-172.		0