# Hebe Gouda

## List of Publications by Year in Descending Order

| 40 papers | 12,698 citations | 16 h-index | 43 g-index |
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| 43 ext. papers | 14,996 ext. citations | 12.7 avg, IF | 4.02 L-index |

| # | Paper | IF | Citations |
|---|-------|-----|-----------|
| 40 | Improving methods to measure comparable mortality cause (IMMCMC) gold standard verbal autopsy dataset. *BMC Research Notes*, **2021**, 14, 422 | 2.3 | 1 |
| 39 | Comorbidity between depressive symptoms and chronic conditions - findings from the Indonesia Family Life Survey. *Journal of Affective Disorders*, **2021**, 280, 236-240 | 6.6 | 2 |
| 38 | Examining the evidence of microfinance on non-communicable disease health indicators and outcomes: A systematic literature review. *Global Public Health*, **2020**, 1-15 | 3.5 | 2 |
| 37 | Burden of non-communicable diseases in sub-Saharan Africa, 1990-2017: results from the Global Burden of Disease Study 2017. *The Lancet Global Health*, **2019**, 7, e1375-e1387 | 13.6 | 228 |
| 36 | Socio-economic status and behavioural and cardiovascular risk factors in Papua New Guinea: A cross-sectional survey. *PLoS ONE*, **2019**, 14, e0211068 | 3.7 | 9 |
| 35 | Women's knowledge of maternal danger signs during pregnancy: Findings from a cross-sectional survey in Papua New Guinea. *Midwifery*, **2019**, 72, 7-13 | 2.8 | 4 |
| 34 | The epidemiological transition in Papua New Guinea: new evidence from verbal autopsy studies. *International Journal of Epidemiology*, **2019**, 48, 966-977 | 7.8 | 6 |
| 33 | Reporting of ethics in peer-reviewed verbal autopsy studies: a systematic review. *International Journal of Epidemiology*, **2018**, 47, 255-279 | 7.8 | 1 |
| 32 | Regulating the for-profit private healthcare providers towards universal health coverage: A qualitative study of legal and organizational framework in Mongolia. *International Journal of Health Planning and Management*, **2018**, 33, 185-201 | 2.2 | 7 |
| 31 | New challenges for verbal autopsy: Considering the ethical and social implications of verbal autopsy methods in routine health information systems. *Social Science and Medicine*, **2017**, 184, 65-74 | 5.1 | 17 |
| 30 | Beyond health: five global policy metaphors for civil registration and vital statistics. *Lancet, The*, **2017**, 389, 1084-1085 | 40 | 9 |
| 29 | Strengthening health information systems for disability-related rehabilitation in LMICs. *Health Policy and Planning*, **2017**, 32, 384-394 | 3.4 | 11 |
| 28 | Monitoring and evaluation of disaster response efforts undertaken by local health departments: a rapid realist review. *BMC Health Services Research*, **2017**, 17, 450 | 2.9 | 5 |
| 27 | Civil Registration and Vital Statistics, Emergencies, and International Law: Understanding the Intersection. *Medical Law Review*, **2017**, 25, 314-339 | 0.8 | 2 |
| 26 | Prevalence of non-communicable disease risk factors in three sites across Papua New Guinea: a cross-sectional study. *BMJ Global Health*, **2017**, 2, e000221 | 6.6 | 17 |
| 25 | Implementing the PHMRC shortened questionnaire: Survey duration of open and closed questions in three sites. *PLoS ONE*, **2017**, 12, e0178085 | 3.7 | 3 |
| 24 | Measuring Quality of Maternal and Newborn Care in Developing Countries Using Demographic and Health Surveys. *PLoS ONE*, **2016**, 11, e0157110 | 3.7 | 9 |

| # | Reference | IF | Cites |
|---|---|---|---|
| 23 | The Impact of Healthcare Insurance on the Utilisation of Facility-Based Delivery for Childbirth in the Philippines. *PLoS ONE*, **2016**, 11, e0167268 | 3.7 | 16 |
| 22 | Disability, noncommunicable disease and health information. *Bulletin of the World Health Organization*, **2016**, 94, 230-2 | 8.2 | 27 |
| 21 | "Whenever they cry, I cry with them": Reciprocal relationships and the role of ethics in a verbal autopsy study in Papua New Guinea. *Social Science and Medicine*, **2016**, 163, 1-9 | 5.1 | 12 |
| 20 | Health information systems and disability in the Lao PDR: a qualitative study. *International Journal of Health Planning and Management*, **2016**, 31, 446-458 | 2.2 | 5 |
| 19 | Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015. *Lancet, The*, **2016**, 388, 1659-1724 | 40 | 2431 |
| 18 | Global, regional, national, and selected subnational levels of stillbirths, neonatal, infant, and under-5 mortality, 1980-2015: a systematic analysis for the Global Burden of Disease Study 2015. *Lancet, The*, **2016**, 388, 1725-1774 | 40 | 413 |
| 17 | Measuring the health-related Sustainable Development Goals in 188 countries: a baseline analysis from the Global Burden of Disease Study 2015. *Lancet, The*, **2016**, 388, 1813-1850 | 40 | 302 |
| 16 | Universal Health Coverage and the Right to Health: From Legal Principle to Post-2015 Indicators. *International Journal of Health Services*, **2015**, 45, 495-506 | 2 | 21 |
| 15 | Global, regional, and national disability-adjusted life years (DALYs) for 306 diseases and injuries and healthy life expectancy (HALE) for 188 countries, 1990-2013: quantifying the epidemiological transition. *Lancet, The*, **2015**, 386, 2145-91 | 40 | 1203 |
| 14 | Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks in 188 countries, 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. *Lancet, The*, **2015**, 386, 2287-323 | 40 | 1776 |
| 13 | Health information priorities for more effective implementation and monitoring of non-communicable disease programs in low- and middle-income countries: lessons from the Pacific. *BMC Medicine*, **2015**, 13, 233 | 11.4 | 7 |
| 12 | Improving performance of the Tariff Method for assigning causes of death to verbal autopsies. *BMC Medicine*, **2015**, 13, 291 | 11.4 | 55 |
| 11 | 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. *Lancet, The*, **2015**, 386, 743-800 | 40 | 3802 |
| 10 | The science of epidemiology and the methods needed for public health assessments: a review of epidemiology textbooks. *BMC Public Health*, **2014**, 14, 139 | 4.1 | 5 |
| 9 | Global, regional, and national levels of neonatal, infant, and under-5 mortality during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. *Lancet, The*, **2014**, 384, 957-79 | 40 | 497 |
| 8 | Global, regional, and national incidence and mortality for HIV, tuberculosis, and malaria during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. *Lancet, The*, **2014**, 384, 1005-70 | 40 | 653 |
| 7 | Global, regional, and national levels and causes of maternal mortality during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. *Lancet, The*, **2014**, 384, 980-1004 | 40 | 950 |
| 6 | Why choice of metric matters in public health analyses: a case study of the attribution of credit for the decline in coronary heart disease mortality in the US and other populations. *BMC Public Health*, **2012**, 12, 88 | 4.1 | 8 |

| 5 | The burden of trachoma in South Sudan: assessing the health losses from a condition of graded severity. *PLoS Neglected Tropical Diseases*, **2012**, 6, e1538 | 4.8 | 2 |
|---|---|---|---|
| 4 | Why my disease is important: metrics of disease occurrence used in the introductory sections of papers in three leading general medical journals in 1993 and 2003. *Population Health Metrics*, **2011**, 9, 14 | 3 | 2 |
| 3 | Sociodemographic factors associated with maternal health care utilization in Wosera, East Sepik Province, Papua New Guinea. *Papua and New Guinea Medical Journal*, **2011**, 54, 154-63 | | 6 |
| 2 | The association between the peroxisome proliferator-activated receptor-gamma2 (PPARG2) Pro12Ala gene variant and type 2 diabetes mellitus: a HuGE review and meta-analysis. *American Journal of Epidemiology*, **2010**, 171, 645-55 | 3.8 | 169 |
| 1 | What will happen if we do nothing to control trachoma: health expectancies for blinding trachoma in southern Sudan. *PLoS Neglected Tropical Diseases*, **2009**, 3, e396 | 4.8 | 3 |