

Susan May Cleary

List of Publications by Year in descending order

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Version: 2024-02-01

61
papers

1,907
citations

257450

24
h-index

276875

41
g-index

64
all docs

64
docs citations

64
times ranked

2474
citing authors

#	ARTICLE	IF	CITATIONS
1	A retrospective study assessing the clinical outcomes and costs of acute hepatitis A in Cape Town, South Africa. <i>BMC Infectious Diseases</i> , 2022, 22, 45.	2.9	4
2	Sexually transmitted infection screening to prevent adverse birth and newborn outcomes: study protocol for a randomized-controlled hybrid-effectiveness trial. <i>Trials</i> , 2022, 23, .	1.6	7
3	Economic evaluation and health systems strengthening: a review of the literature. <i>Health Policy and Planning</i> , 2021, 35, 1413-1423.	2.7	6
4	Cost-effectiveness of intensive care for hospitalized COVID-19 patients: experience from South Africa. <i>BMC Health Services Research</i> , 2021, 21, 82.	2.2	83
5	Strengthening health systems to improve the value of tuberculosis diagnostics in South Africa: A cost and cost-effectiveness analysis. <i>PLoS ONE</i> , 2021, 16, e0251547.	2.5	4
6	Cost-effectiveness of universal HIV testing and treatment: where next?. <i>The Lancet Global Health</i> , 2021, 9, e573-e574.	6.3	1
7	Prevention of hepatitis B mother-to-child transmission in Namibia: A cost-effectiveness analysis. <i>Vaccine</i> , 2021, 39, 3141-3151.	3.8	8
8	Economic evaluations of psychological treatments for common mental disorders in low- and middle-income countries: protocol for a systematic review. <i>Global Health Action</i> , 2021, 14, 1972561.	1.9	3
9	A review of simulation models for the long-term management of type 2 diabetes in low-and-middle income countries. <i>BMC Health Services Research</i> , 2021, 21, 1313.	2.2	3
10	The impact of social, national and community-based health insurance on health care utilization for mental, neurological and substance-use disorders in low- and middle-income countries: a systematic review. <i>Health Economics Review</i> , 2020, 10, 11.	2.0	9
11	Economic burden of maternal depression among women with a low income in Cape Town, South Africa. <i>BJPsych Open</i> , 2020, 6, e36.	0.7	4
12	Integrating a brief mental health intervention into primary care services for patients with HIV and diabetes in South Africa: study protocol for a trial-based economic evaluation. <i>BMJ Open</i> , 2019, 9, e026973.	1.9	5
13	The household economic costs associated with depression symptoms: A cross-sectional household study conducted in the North West province of South Africa. <i>PLoS ONE</i> , 2019, 14, e0224799.	2.5	4
14	Mental health system costs, resources and constraints in South Africa: a national survey. <i>Health Policy and Planning</i> , 2019, 34, 706-719.	2.7	135
15	Comparing dedicated and designated models of integrating mental health into chronic disease care: study protocol for a cluster randomized controlled trial. <i>Trials</i> , 2018, 19, 185.	1.6	47
16	Implementing large-scale health system strengthening interventions: experience from the better health outcomes through mentoring and assessments (BHOMA) project in Zambia. <i>BMC Health Services Research</i> , 2018, 18, 795.	2.2	4
17	The everyday practice of supporting health system development: learning from how an externally-led intervention was implemented in Mozambique. <i>Health Policy and Planning</i> , 2018, 33, 801-810.	2.7	13
18	Accountability mechanisms and the value of relationships: experiences of front-line managers at subnational level in Kenya and South Africa. <i>BMJ Global Health</i> , 2018, 3, e000842.	4.7	21

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19	Brief interventions to address substance use among patients presenting to emergency departments in resource poor settings: a cost-effectiveness analysis. <i>Cost Effectiveness and Resource Allocation</i> , 2018, 16, 24.	1.5	11
20	Enabling relational leadership in primary healthcare settings: lessons from the DIALHS collaboration. <i>Health Policy and Planning</i> , 2018, 33, ii65-ii74.	2.7	38
21	Setting healthcare priorities: a description and evaluation of the budgeting and planning process in county hospitals in Kenya. <i>Health Policy and Planning</i> , 2017, 32, czw132.	2.7	31
22	Hospitals as complex adaptive systems: A case study of factors influencing priority setting practices at the hospital level in Kenya. <i>Social Science and Medicine</i> , 2017, 174, 104-112.	3.8	60
23	Everyday resilience in district health systems: emerging insights from the front lines in Kenya and South Africa. <i>BMJ Global Health</i> , 2017, 2, e000224.	4.7	138
24	Exploring the Functioning of Decision Space: A Review of the Available Health Systems Literature. <i>International Journal of Health Policy and Management</i> , 2017, 6, 365-376.	0.9	32
25	The influence of power and actor relations on priority setting and resource allocation practices at the hospital level in Kenya: a case study. <i>BMC Health Services Research</i> , 2016, 16, 536.	2.2	36
26	Adherence clubs for long-term provision of antiretroviral therapy: cost-effectiveness and access analysis from Khayelitsha, South Africa. <i>Tropical Medicine and International Health</i> , 2016, 21, 1115-1123.	2.3	58
27	Setting priorities in health research using the model proposed by the World Health Organization: development of a quantitative methodology using tuberculosis in South Africa as a worked example. <i>Health Research Policy and Systems</i> , 2016, 14, 10.	2.8	3
28	Does treatment collection and observation each day keep the patient away? An analysis of the determinants of adherence among patients with Tuberculosis in South Africa. <i>Health Policy and Planning</i> , 2016, 31, 454-461.	2.7	11
29	Setting healthcare priorities in hospitals: a review of empirical studies. <i>Health Policy and Planning</i> , 2015, 30, 386-396.	2.7	49
30	The economic burden of TB diagnosis and treatment in South Africa. <i>Social Science and Medicine</i> , 2015, 130, 42-50.	3.8	122
31	Disability Grant: a precarious lifeline for HIV/AIDS patients in South Africa. <i>BMC Health Services Research</i> , 2015, 15, 227.	2.2	21
32	Setting Healthcare Priorities at the Macro and Meso Levels: A Framework for Evaluation. <i>International Journal of Health Policy and Management</i> , 2015, 4, 719-732.	0.9	46
33	Resources, attitudes and culture: an understanding of the factors that influence the functioning of accountability mechanisms in primary health care settings. <i>BMC Health Services Research</i> , 2013, 13, 320.	2.2	107
34	Investigating the affordability of key health services in South Africa. <i>Social Science and Medicine</i> , 2013, 80, 37-46.	3.8	44
35	Cost Effectiveness of Cryptococcal Antigen Screening as a Strategy to Prevent HIV-Associated Cryptococcal Meningitis in South Africa. <i>PLoS ONE</i> , 2013, 8, e69288.	2.5	112
36	A Novel Markov Model Projecting Costs and Outcomes of Providing Antiretroviral Therapy to Public Patients in Private Practices versus Public Clinics in South Africa. <i>PLoS ONE</i> , 2013, 8, e53570.	2.5	9

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37	Unequal access to ART: exploratory results from rural and urban case studies of ART use. Sexually Transmitted Infections, 2012, 88, 141-146.	1.9	17
38	A Multifaceted Intervention to Improve the Quality of Care of Children in District Hospitals in Kenya: A Cost-Effectiveness Analysis. PLoS Medicine, 2012, 9, e1001238.	8.4	33
39	Gender differences in experiences of ART services in South Africa: a mixed methods study. Tropical Medicine and International Health, 2012, 17, 820-826.	2.3	16
40	Out-of-pocket costs for paediatric admissions in district hospitals in Kenya. Tropical Medicine and International Health, 2012, 17, 958-961.	2.3	11
41	Equity in the use of antiretroviral treatment in the public health care system in urban South Africa. Health Policy, 2011, 99, 261-266.	3.0	13
42	Cost and Cost-Effectiveness of Switching From d4T or AZT to a TDF-Based First-Line Regimen in a Resource-Limited Setting in Rural Lesotho. Journal of Acquired Immune Deficiency Syndromes (1999), 2011, 58, e68-e74.	2.1	22
43	Claims on health care: a decision-making framework for equity, with application to treatment for HIV/AIDS in South Africa. Health Policy and Planning, 2011, 26, 464-470.	2.7	13
44	Equity and efficiency in scaling up access to HIV-related interventions in resource-limited settings. Current Opinion in HIV and AIDS, 2010, 5, 210-214.	3.8	19
45	Association of Antiretroviral Therapy Adherence and Health Care Costs. Annals of Internal Medicine, 2010, 152, 18.	3.9	59
46	Scaling up health policies and services in low- and middle-income settings. BMC Health Services Research, 2010, 10, 11.	2.2	27
47	Financing equitable access to antiretroviral treatment in South Africa. BMC Health Services Research, 2010, 10, S2.	2.2	17
48	Improving the evidence base of Markov models used to estimate the costs of scaling up antiretroviral programmes in resource-limited settings. BMC Health Services Research, 2010, 10, S3.	2.2	6
49	Equity and efficiency in HIV treatment in South Africa: the contribution of mathematical programming to priority setting. Health Economics (United Kingdom), 2010, 19, 1166-1180.	1.7	38
50	Commentary: Trade-offs in scaling up HIV treatment in South Africa. Health Policy and Planning, 2010, 25, 99-101.	2.7	5
51	Early and Late Direct Costs in a Southern African Antiretroviral Treatment Programme: A Retrospective Cohort Analysis. PLoS Medicine, 2009, 6, e1000189.	8.4	45
52	Affordability – the forgotten criterion in health care priority setting. Health Economics (United Kingdom), 2009, 17, 111-117.	1.7	11
53	Early severe morbidity and resource utilization in South African adults on antiretroviral therapy. BMC Infectious Diseases, 2009, 9, 205.	2.9	13
54	The potential cost-effectiveness of adding a human papillomavirus vaccine to the cervical cancer screening programme in South Africa. Vaccine, 2009, 27, 6196-6202.	3.8	47

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55	Clinical and financial burdens of secondary level care in a public sector antiretroviral roll-out setting (G. F. Jooste Hospital). South African Medical Journal, 2009, 99, 320-5.	0.6	13
56	THE BURDEN OF HIV/AIDS IN THE PUBLIC HEALTHCARE SYSTEM. South African Journal of Economics, 2008, 76, S3.	2.2	18
57	When to initiate highly active antiretroviral therapy in low-resource settings: the Moroccan experience. Antiviral Therapy, 2008, 13, 241-51.	1.0	11
58	When to Initiate Highly Active Antiretroviral Therapy in Low-Resource Settings: The Moroccan Experience. Antiviral Therapy, 2008, 13, 241-252.	1.0	15
59	Does public opinion influence willingness-to-pay? Evidence from the field. Applied Economics Letters, 2006, 13, 821-824.	1.8	18
60	When to initiate highly active antiretroviral therapy in sub-Saharan Africa? A South African cost-effectiveness study. Antiviral Therapy, 2006, 11, 63-72.	1.0	47
61	When to Initiate Highly Active Antiretroviral Therapy in Sub-Saharan Africa? A South African Cost-Effectiveness Study. Antiviral Therapy, 2006, 11, 63-72.	1.0	79