

# Klasien Horstman

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/9119505/publications.pdf>

Version: 2024-02-01

60  
papers

674  
citations

759233

12  
h-index

677142

22  
g-index

68  
all docs

68  
docs citations

68  
times ranked

797  
citing authors

#	ARTICLE	IF	CITATIONS
1	Constructing the accountability of food safety as a public problem in China: a document analysis of Chinese scholarship, 2008–2018. <i>Journal of Chinese Governance</i> , 2022, 7, 236-265.	1.7	3
2	Stakeholder perspectives on infant formula safety governance in China: a decade after the melamine crisis. <i>Food, Culture &amp; Society</i> , 2022, 25, 70-88.	1.1	0
3	Caring neighbourhoods: maintaining collective care under neoliberal care reforms. <i>European Journal of Social Work</i> , 2022, 25, 867-879.	0.9	1
4	Making health public: a philosophy café in a disadvantaged neighbourhood. <i>Health Promotion International</i> , 2022, , .	1.8	0
5	Overcoming the tragedy of urban commons. Collective practices for a healthy city ecology in disadvantaged neighborhoods. <i>Health and Place</i> , 2022, 75, 102777.	3.3	3
6	Anthropocentric framings of One Health: an analysis of international antimicrobial resistance policy documents. <i>Critical Public Health</i> , 2021, 31, 306-315.	2.4	27
7	Obligatory medical prescription of antibiotics in Russia: Navigating formal and informal health care infrastructures. <i>Sociology of Health and Illness</i> , 2021, 43, 353-368.	2.1	7
8	Implementing a new antibiotic allergy protocol in clinical practice: well-trusted but not used. <i>JAC-Antimicrobial Resistance</i> , 2021, 3, dlab077.	2.1	0
9	Combining stool and stories: exploring antimicrobial resistance among a longitudinal cohort of international health students. <i>BMC Infectious Diseases</i> , 2021, 21, 1008.	2.9	2
10	“Known to be unhealthy”™: Exploring how social epidemiological research constructs the category of low socioeconomic status. <i>Social Science and Medicine</i> , 2021, 285, 114263.	3.8	13
11	Invisible work, actors, and knowledge: An analysis of a clinical trial for a vaccine to stop smoking. <i>BioSocieties</i> , 2020, 15, 1-27.	1.3	5
12	When the Evidence Basis Breeds Controversies: Exploring the Value Profile of Robotic Surgery Beyond the Early Introduction Phase. <i>Medical Care Research and Review</i> , 2020, 77, 596-608.	2.1	7
13	Performing health promotion: an analysis of epistemic and political technologies of accountability. <i>Critical Public Health</i> , 2020, 30, 589-600.	2.4	4
14	How does an ageing policy translate into professional practices? An analysis of kitchen table conversations in the Netherlands. <i>European Journal of Social Work</i> , 2020, 23, 215-226.	0.9	6
15	Constructing democratic participation in welfare transitions: An analysis of narrative interactions. <i>Health Expectations</i> , 2020, 23, 84-95.	2.6	1
16	Questions regarding “epistemic injustice”™ in knowledge-intensive policymaking: Two examples from Dutch health insurance policy. <i>Social Science and Medicine</i> , 2020, 245, 112674.	3.8	11
17	Addressing Vaccine Hesitancy in China: A Scoping Review of Chinese Scholarship. <i>Vaccines</i> , 2020, 8, 2.	4.4	61
18	Vaccine Hesitancy in China: A Qualitative Study of Stakeholders’™ Perspectives. <i>Vaccines</i> , 2020, 8, 650.	4.4	16

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19	Experiences of pregnancy in adolescence of internally displaced women in Bogotá: an ethnographic approach. <i>Reproductive Health</i> , 2020, 17, 31.	3.1	2
20	Transdisciplinary work against antimicrobial resistance. <i>Lancet Infectious Diseases</i> , The, 2020, 20, 526-527.	9.1	4
21	Improving primary care for diabetes and hypertension: findings from implementation research in rural South India. <i>BMJ Open</i> , 2020, 10, e040271.	1.9	7
22	Collective constructions of "waste": epistemic practices for disinvestment in the context of Dutch social health insurance. <i>BMC Health Services Research</i> , 2019, 19, 633.	2.2	4
23	"We just been forced to do it": exploring victimization and agency among internally displaced young mothers in Bogotá. <i>Conflict and Health</i> , 2019, 13, 21.	2.7	7
24	The making of new care spaces. How micropublic places mediate inclusion and exclusion in a Dutch city. <i>Health and Place</i> , 2019, 57, 27-34.	3.3	5
25	"Strangers in the ER": Quality indicators and third party interference in Dutch emergency care. <i>Journal of Evaluation in Clinical Practice</i> , 2019, 25, 390-397.	1.8	9
26	Meanings of "lifecycle robust neighbourhoods": constructing <i>versus</i> attaching to places. <i>Ageing and Society</i> , 2018, 38, 1148-1173.	1.7	12
27	Models of care for chronic conditions in low/middle-income countries: a "best fit" framework synthesis. <i>BMJ Global Health</i> , 2018, 3, e001077.	4.7	46
28	Complex narratives of health, stigma and control: Antimicrobial resistance screening among non-hospitalized refugees. <i>Social Science and Medicine</i> , 2018, 212, 43-49.	3.8	7
29	The multiplicity and situationality of enacting "ethnicity" in Dutch health research articles. <i>BioSocieties</i> , 2018, 13, 408-433.	1.3	4
30	Van sturen naar leren. , 2018, , 106-124.		0
31	Responsible use of media supports "critical public health literacy". <i>Journal of Public Health</i> , 2017, 39, fdw036.	1.8	4
32	Photovoicing the neighbourhood: Understanding the situated meaning of intangible places for ageing-in-place. <i>Health and Place</i> , 2017, 48, 11-19.	3.3	52
33	"Foreigners", "ethnic minorities", and "non-Western allochtoons": an analysis of the development of "ethnicity" in health policy in the Netherlands from 1970 to 2015. <i>BMC Public Health</i> , 2017, 17, 132.	2.9	7
34	(Re)configuring research value: international commercial clinical trials in the Russian Federation. <i>BioSocieties</i> , 2017, 12, 392-414.	1.3	2
35	Contested evidence: a Dutch reimbursement decision taken to court. <i>Health Economics, Policy and Law</i> , 2017, 12, 325-344.	1.8	11
36	Creating a market in workplace health promotion: the performative role of public health sciences and technologies. <i>Critical Public Health</i> , 2016, 26, 269-280.	2.4	10

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37	Bianca in the neighborhood: moving beyond the "reach paradigm"™ in public mental health. <i>Critical Public Health</i> , 2016, 26, 434-445.	2.4	10
38	Taming the fear of voice: Dilemmas in maintaining a high vaccination rate in the Netherlands. <i>Social Science and Medicine</i> , 2016, 153, 12-19.	3.8	17
39	Ethnicity in Dutch health research: situating scientific practice. <i>Ethnicity and Health</i> , 2016, 21, 480-497.	2.5	9
40	Engaging cultural resources to promote mental health in Dutch LSES neighborhoods: study of a community-based participatory media project. <i>Health Promotion International</i> , 2015, 32, dav095.	1.8	4
41	Conflicting notions of citizenship in old age: An analysis of an activation practice. <i>Journal of Aging Studies</i> , 2015, 35, 178-189.	1.4	10
42	Shaping the future and living in the present: Living a "good"™ life with a familial heart disease. <i>BioSocieties</i> , 2015, 10, 70-83.	1.3	1
43	Co-production of ICT and children at risk: The introduction of the Child Index in Dutch child welfare. <i>Children and Youth Services Review</i> , 2015, 56, 161-168.	1.9	13
44	International clinical trials, cardiovascular disease and treatment options in the Russian Federation: Research and treatment in practice. <i>Social Science and Medicine</i> , 2015, 128, 255-262.	3.8	3
45	How can we assess the value of complex medical innovations in practice?. <i>Expert Review of Pharmacoeconomics and Outcomes Research</i> , 2015, 15, 369-371.	1.4	9
46	Understanding the adoption dynamics of medical innovations: Affordances of the da Vinci robot in the Netherlands. <i>Social Science and Medicine</i> , 2014, 117, 125-133.	3.8	41
47	Sturing verhindert leerprocessen. <i>Jeugdbeleid</i> , 2014, 8, 9-16.	0.1	1
48	Ethical review: Standardizing procedures and local shaping of ethical review practices. <i>Social Science and Medicine</i> , 2013, 98, 311-318.	3.8	8
49	Innovation and Justification in Public Health: The Introduction of the Child Index in the Netherlands. <i>Public Health Ethics Analysis</i> , 2013, , 153-173.	0.4	2
50	Making genetics not so important: Family work in dealing with familial hypertrophic cardiomyopathy. <i>Social Science and Medicine</i> , 2011, 72, 1752-1759.	3.8	28
51	Constructing access in predictive medicine. Comparing classification for hereditary breast cancer risks in England, Germany and the Netherlands. <i>Social Science and Medicine</i> , 2011, 72, 553-559.	3.8	5
52	Genetics, health care, family and kinship in a global perspective: Situated processes of co-construction. <i>Social Science and Medicine</i> , 2011, 72, 1739-1742.	3.8	8
53	Solidarity in practices of provision: distributing access to genetic technologies in health care in Germany, the Netherlands and the United Kingdom. <i>New Genetics and Society</i> , 2010, 29, 369-388.	1.2	7
54	Sensitization: reciprocity and reflection in scientific practice. <i>EMBO Reports</i> , 2009, 10, 205-208.	4.5	12

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55	Evidence-based underwriting in the molecular age: the politics of reinsurance companies towards the genetics issue. <i>New Genetics and Society</i> , 2009, 28, 317-337.	1.2	23
56	Voice beyond choice: hesitant voice in public debates about genetics in health care. <i>Health Care Analysis</i> , 2003, 11, 141-150.	2.2	7
57	Beyond the Boundary Between Science and Values: re-evaluating the moral dimension of the nurse's role in cot death prevention. <i>Nursing Ethics</i> , 2002, 9, 137-154.	3.4	5
58	Guidelines, professionals and the production of objectivity: standardisation and the professionalism of insurance medicine. <i>Sociology of Health and Illness</i> , 2000, 22, 765-791.	2.1	83
59	Technology and the management of trust in insurance medicine. , 2000, 21, 39-61.		2
60	Identity struggles during resettlement: An ethnographic approach of internally displaced adolescent mothers in Bogotá. <i>Journal of Refugee Studies</i> , 0, , .	1.7	1