## Nicola Kay Gale

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/141448/publications.pdf

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52 papers

7,082 citations

393982 19 h-index 205818 48 g-index

53 all docs 53 docs citations

53 times ranked

11841 citing authors

#	Article	IF	CITATIONS
1	Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC Medical Research Methodology, 2013, 13, 117.	1.4	5,867
2	The effects of educational curricula and training on LGBTâ€specific health issues for healthcare students and professionals: a mixedâ€method systematic review. Journal of the International AIDS Society, 2017, 20, 21624.	1.2	173
3	The Sociology of Traditional, Complementary and Alternative Medicine. Sociology Compass, 2014, 8, 805-822.	1.4	100
4	The effect of complementary and alternative medicine on the quality of life of cancer survivors: A systematic review and meta-analyses. Complementary Therapies in Medicine, 2013, 21, 417-429.	1.3	69
5	Patient and general practitioner attitudes to taking medication to prevent cardiovascular disease after receiving detailed information on risks and benefits of treatment: a qualitative study. BMC Family Practice, 2011, 12, 59.	2.9	66
6	Survival following a diagnosis of heart failure in primary care. Family Practice, 2017, 34, cmw145.	0.8	66
7	<b>Towards a sociology of risk work: A narrative review and synthesis</b> . Sociology Compass, 2016, 10, 1046-1071.	1.4	51
8	Telehealth as †peace of mind': embodiment, emotions and the home as the primary health space for people with chronic obstructive pulmonary disorder. Health and Place, 2013, 21, 140-147.	1.5	46
9	Synthetic social support: Theorizing lay health worker interventions. Social Science and Medicine, 2018, 196, 96-105.	1.8	39
10	Individualised and complex experiences of integrative cancer support care: combining qualitative and quantitative data. Supportive Care in Cancer, 2009, 17, 1159-1167.	1.0	38
11	Patterns of self-management practices undertaken by cancer survivors: variations in demographic factors. European Journal of Cancer Care, 2015, 24, 683-694.	0.7	38
12	Reply to Forsyth et al., commenting on our paper â€~Survival following a diagnosis of heart failure in primary care'. Family Practice, 2017, 34, 502-503.	0.8	33
13	The Role of Self-Management Practices as Mechanisms for Re-Establishing Normality in Cancer Survivors. Qualitative Health Research, 2017, 27, 520-533.	1.0	31
14	From bodyâ€ŧalk to bodyâ€stories: body work in complementary and alternative medicine. Sociology of Health and Illness, 2011, 33, 237-251.	1.1	30
15	Improving the care pathway for women who request Caesarean section: an experience-based co-design study. BMC Pregnancy and Childbirth, 2016, 16, 348.	0.9	28
16	From breathless to failure: symptom onset and diagnostic meaning in patients with heart failureâ€"a qualitative study. BMJ Open, 2017, 7, e013648.	0.8	26
17	Subjective experience or objective process. Journal of Health Organization and Management, 2014, 28, 714-730.	0.6	25
18	'You give us rangoli, we give you talk': using an art-based activity to elicit data from a seldom heard group. BMC Medical Research Methodology, 2012, 12, 7.	1.4	22

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19	Theorising Risk Work: Analysing Professionals' Lifeworlds and Practices. Professions and Professionalism, 2018, 8, e1988.	0.3	22
20	Street-level diplomacy? Communicative and adaptive work at the front line of implementing public health policies in primary care. Social Science and Medicine, 2017, 177, 9-18.	1.8	20
21	Co-production in research: some reflections on the experience of engaging practitioners in health research. Public Money and Management, 2012, 32, 297-302.	1.2	19
22	Using Mixed Methods to Identify and Answer Clinically Relevant Research Questions. Qualitative Health Research, 2015, 25, 845-856.	1.0	18
23	Adapting to domiciliary non-invasive ventilation in chronic obstructive pulmonary disease: A qualitative interview study. Palliative Medicine, 2015, 29, 268-277.	1.3	18
24	The future role of receptionists in primary care. British Journal of General Practice, 2017, 67, 523-524.	0.7	18
25	Developing a sociology of risk work in client-facing contexts: an editorial. Health, Risk and Society, 2018, 20, 1-12.	0.9	18
26	Provision of Healthcare Services to Men Who Have Sex with Men in Nigeria: Students' Attitudes Following the Passage of the Same-Sex Marriage Prohibition Law. LGBT Health, 2016, 3, 300-307.	1.8	16
27	Evaluation of Lay Support in Pregnant women with Social risk (ELSIPS): a randomised controlled trial. BMC Pregnancy and Childbirth, 2012, 12, 11.	0.9	13
28	Mixed methods evaluation of targeted case finding for cardiovascular disease prevention using a stepped wedged cluster RCT. BMC Public Health, 2012, 12, 908.	1.2	13
29	Patients-people-place: developing a framework for researching organizational culture during health service redesign and change. Implementation Science, 2014, 9, 106.	2.5	13
30	A critique of the design, implementation, and delivery of a culturally-tailored self-management education intervention: a qualitative evaluation. BMC Health Services Research, 2015, 15, 54.	0.9	13
31	Long-term conditions, self-management and systems of support: an exploration of health beliefs and practices within the Sikh community, Birmingham, UK. Ethnicity and Health, 2016, 21, 498-514.	1.5	13
32	An evaluation of staff engagement programmes in four National Health Service Acute Trusts. Journal of Health Organization and Management, 2013, 27, 85-105.	0.6	11
33	Hidden healthcare populations: using intersectionality to theorise the experiences of LGBT+ people in Nigeria, Africa. Global Public Health, 2022, 17, 134-149.	1.0	11
34	Typologies for Restructuring Relationships in Cancer Survivorship. Cancer Nursing, 2018, 41, E32-E40.	0.7	10
35	Promoting patient–practitioner partnership in clinical training: a critical evaluation. Learning in Health and Social Care, 2009, 8, 13-21.	0.6	9
36	A survey investigating the associations between self-management practices and quality of life in cancer survivors. Supportive Care in Cancer, 2015, 23, 2655-2662.	1.0	9

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37	The Embodied Ethnographer: Journeys in a Health Care Subculture. International Journal of Qualitative Methods, The, 2010, 9, 206-223.	1.3	7
38	Supporting healthy ageing: Training multi-disciplinary healthcare students. European Journal of Integrative Medicine, 2014, 6, 104-111.	0.8	7
39	Risk work or resilience work? A qualitative study with community health workers negotiating the tensions between biomedical and community-based forms of health promotion in the United Kingdom. PLoS ONE, 2019, 14, e0220109.	1.1	7
40	The role of informal carers in the diagnostic process of heart failure: a secondary qualitative analysis. BMC Cardiovascular Disorders, 2019, 19, 92.	0.7	7
41	A quantitative assessment of the parameters of the role of receptionists in modern primary care using the work design framework. BMC Family Practice, 2020, 21, 138.	2.9	7
42	Women's Experience of Depressive Symptoms While Working From Home During the COVID-19 Pandemic: Evidence From an International Web Survey. Frontiers in Sociology, 2022, 7, 763088.	1.0	7
43	Starting and staying on preventive medication for cardiovascular disease. Current Opinion in Cardiology, 2012, 27, 533-541.	0.8	5
44	Protocol for using mixed methods and process improvement methodologies to explore primary care receptionist work. BMJ Open, 2016, 6, e013240.	0.8	4
45	Coâ€production in the epidemiological clinic: A decentred analysis of the tensions in communityâ€based, clientâ€facing risk work. Social Policy and Administration, 2019, 53, 203-218.	2.1	4
46	Collaboration for Impact: Co-creating a Workforce Development Toolkit Using an Arts-based Approach. International Journal of Integrated Care, 2020, 20, 11.	0.1	4
47	Exploring the clinically orientated roles of the general practice receptionist: a systematic review protocol. Systematic Reviews, 2017, 6, 209.	2.5	3
48	Using Situated Interviews to Engage Frail Older People in the Co-production of Improved Emergency Healthcare. International Journal of Public Administration, 0, , 1-11.	1.4	3
49	Methodological challenges of cross-language qualitative research with South Asian communities living in the UK. Family Medicine and Community Health, 2016, 4, 16-28.	0.6	2
50	Using a rapid prioritisation process to identify health research priorities in LMICs. , 2018, , .		2
51	'You cannot get enough of them!' The rise (and fall) of complementary therapies in British nursing practice in the 1980s and 1990s. Journal of Historical Sociology, 2019, 32, 215-231.	0.5	0
52	Colour vision deficiency and sputum colour charts in COPD patients: an exploratory mixed-method study. Npj Primary Care Respiratory Medicine, 2021, 31, 13.	1.1	0