

# Anne E. MacFarlane

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/7041140/publications.pdf>

Version: 2024-02-01

90  
papers

4,916  
citations

186265

28  
h-index

102487

66  
g-index

94  
all docs

94  
docs citations

94  
times ranked

6498  
citing authors

#	ARTICLE	IF	CITATIONS
1	The relevance of stroke care for living well with post-stroke aphasia: a qualitative interview study with working-aged adults. <i>Disability and Rehabilitation</i> , 2022, 44, 3440-3452.	1.8	9
2	Service User and Service Provider Perceptions of Enablers and Barriers for Refugee and Asylum-Seeking Women Accessing and Engaging with Perinatal Mental Health Care Services in the WHO European Region: A Scoping Review Protocol. <i>International Journal of Environmental Research and Public Health</i> , 2022, 19, 937.	2.6	1
3	The impact of economic recession on the health of migrant fathers over time: results from the Growing up in Ireland longitudinal study. <i>BMC Public Health</i> , 2022, 22, 166.	2.9	0
4	Regulating emotional responses to aphasia to re-engage in life: a qualitative interview study. <i>International Journal of Language and Communication Disorders</i> , 2022, 57, 352-365.	1.5	3
5	Translational framework for implementation evaluation and research: a normalisation process theory coding manual for qualitative research and instrument development. <i>Implementation Science</i> , 2022, 17, 19.	6.9	50
6	Conceptualising, operationalising, and measuring trust in participatory health research networks: a scoping review. <i>Systematic Reviews</i> , 2022, 11, 40.	5.3	6
7	Life-Course Marginalities of Positive Health and Aging: A Participatory Approach Integrating the Lived Experiences of Older Irish Travelers and Older Homeless Adults in Multistakeholder Research Processes. <i>Qualitative Health Research</i> , 2022, 32, 1139-1152.	2.1	3
8	Implementation of clinical guidelines for osteoarthritis together (IMPACT): protocol for a participatory health research approach to implementing high value care. <i>BMC Musculoskeletal Disorders</i> , 2022, 23, .	1.9	3
9	Participatory health research with migrants: Opportunities, challenges, and way forwards. <i>Health Expectations</i> , 2021, 24, 188-197.	2.6	25
10	“If relevant, yes; if not, no”: General practitioner (GP) users and GP perceptions about asking ethnicity questions in Irish general practice: A qualitative analysis using Normalization Process Theory. <i>PLoS ONE</i> , 2021, 16, e0251192.	2.5	7
11	“I hated being ghosted” – The relevance of social participation for living well with post-stroke aphasia: Qualitative interviews with working aged adults. <i>Health Expectations</i> , 2021, 24, 1504-1515.	2.6	13
12	Involving migrants in the adaptation of primary care services in a “newly” diverse urban area in Ireland: The tension between agency and structure. <i>Health and Place</i> , 2021, 70, 102556.	3.3	7
13	Migrants’ involvement in health policy, service development and research in the WHO European Region: A narrative review of policy and practice. <i>Tropical Medicine and International Health</i> , 2021, 26, 1164-1176.	2.3	12
14	Migrant health and language barriers: Uncovering macro level influences on the implementation of trained interpreters in healthcare settings. <i>Health Policy</i> , 2021, 125, 1085-1091.	3.0	6
15	Barriers to the use of trained interpreters in consultations with refugees in four resettlement countries: a qualitative analysis using normalisation process theory. <i>BMC Family Practice</i> , 2020, 21, 259.	2.9	9
16	Conceptualising, operationalising and measuring trust in participatory health research networks: a scoping review protocol. <i>BMJ Open</i> , 2020, 10, e038840.	1.9	11
17	Positive health among older Traveller and older homeless adults: A scoping review of life-course and structural determinants. <i>Health and Social Care in the Community</i> , 2020, 28, 1961-1978.	1.6	6
18	Participatory implementation research in the field of migrant health: Sustainable changes and ripple effects over time. <i>Health Expectations</i> , 2020, 23, 306-317.	2.6	9

#	ARTICLE	IF	CITATIONS
19	Ethnicity recording in health and social care data collections in Ireland: where and how is it measured and what is it used for?. <i>International Journal for Equity in Health</i> , 2020, 19, 2.	3.5	16
20	Optimising individual and community involvement in health decision-making in general practice consultations and primary care settings: A way forward. <i>European Journal of General Practice</i> , 2020, 26, 196-201.	2.0	10
21	The use of music as an arts-based method in migrant health research: a scoping review protocol. <i>HRB Open Research</i> , 2020, 3, 75.	0.6	8
22	â€œParticipation is integralâ€™: understanding the levers and barriers to the implementation of community participation in primary healthcare: a qualitative study using normalisation process theory. <i>BMC Health Services Research</i> , 2019, 19, 515.	2.2	26
23	Migrant health research in the Republic of Ireland: a scoping review. <i>BMC Public Health</i> , 2019, 19, 324.	2.9	21
24	Interdisciplinary team working in the Irish primary healthcare system: Analysis of â€œinvisibleâ€™ bottom up innovations using Normalisation Process Theory. <i>Health Policy</i> , 2019, 123, 1083-1092.	3.0	11
25	The Helen Lester Memorial Lecture 2018: the leper squint: spaces for participation in primary health care. <i>British Journal of General Practice</i> , 2019, 69, 255-256.	1.4	7
26	Perspectives of people with aphasia post-stroke towards personal recovery and living successfully: A systematic review and thematic synthesis. <i>PLoS ONE</i> , 2019, 14, e0214200.	2.5	58
27	Defining a framework for medical teachersâ€™ competencies to teach ethnic and cultural diversity: Results of a European Delphi study. <i>Medical Teacher</i> , 2019, 41, 68-74.	1.8	28
28	Material practices for meaningful engagement: An analysis of participatory learning and action research techniques for data generation and analysis in a health research partnership. <i>Health Expectations</i> , 2018, 21, 159-170.	2.6	28
29	Ethnic Minority Health in Irelandâ€™Co-creating knowledge (EMH-IC): a participatory health research protocol. <i>BMJ Open</i> , 2018, 8, e026335.	1.9	10
30	Implementing community participation via interdisciplinary teams in primary care: An Irish case study in practice. <i>Health Expectations</i> , 2018, 21, 990-1001.	2.6	10
31	Participatory methods for research prioritization in primary care: an analysis of the World CafÃ© approach in Ireland and the USA. <i>Family Practice</i> , 2017, 34, cmw104.	1.9	61
32	Exploring barriers to primary care for migrants in Greece in times of austerity: Perspectives of service providers. <i>European Journal of General Practice</i> , 2017, 23, 129-135.	2.0	16
33	Supporting the use of theory in cross-country health services research: a participatory qualitative approach using Normalisation Process Theory as an example. <i>BMJ Open</i> , 2017, 7, e014289.	1.9	8
34	Assessing the facilitators and barriers of interdisciplinary team working in primary care using normalisation process theory: An integrative review. <i>PLoS ONE</i> , 2017, 12, e0177026.	2.5	66
35	Learning from doing: the case for combining normalisation process theory and participatory learning and action research methodology for primary healthcare implementation research. <i>BMC Health Services Research</i> , 2016, 16, 346.	2.2	33
36	Exploring levers and barriers to accessing primary care for marginalised groups and identifying their priorities for primary care provision: a participatory learning and action research study. <i>International Journal for Equity in Health</i> , 2016, 15, 197.	3.5	65

#	ARTICLE	IF	CITATIONS
37	Reducing the health care burden for marginalised migrants: The potential role for primary care in Europe. <i>Health Policy</i> , 2016, 120, 495-508.	3.0	80
38	A critical analysis of the implementation of service user involvement in primary care research and health service development using normalization process theory. <i>Health Expectations</i> , 2016, 19, 501-515.	2.6	51
39	Engaging migrants and other stakeholders to improve communication in cross-cultural consultation in primary care: a theoretically informed participatory study. <i>BMJ Open</i> , 2016, 6, e010822.	1.9	35
40	Using Participatory Learning & Action research to access and engage with "hard to reach"™ migrants in primary healthcare research. <i>BMC Health Services Research</i> , 2015, 16, 25.	2.2	46
41	Involving migrants in the development of guidelines for communication in cross-cultural general practice consultations: a participatory learning and action research project. <i>BMJ Open</i> , 2015, 5, e007092.	1.9	26
42	Guidelines and training initiatives that support communication in cross-cultural primary-care settings: appraising their implementability using Normalization Process Theory. <i>Family Practice</i> , 2015, 32, cmv022.	1.9	16
43	Addressing the long-term impacts of aphasia: how far does the Conversation Partner Programme go?. <i>Aphasiology</i> , 2015, 29, 889-913.	2.2	38
44	"Who decides what criteria are important to consider in exploring the outcomes of conversation approaches? A participatory health research study" Aphasiology, 2015, 29, 914-938.	2.2	25
45	Mental health problems of undocumented migrants in the Netherlands: A qualitative exploration of recognition, recording, and treatment by general practitioners. <i>Scandinavian Journal of Primary Health Care</i> , 2015, 33, 82-90.	1.5	18
46	Primary care teams in Ireland: a qualitative mapping review of Irish grey and published literature. <i>Irish Journal of Medical Science</i> , 2015, 184, 69-73.	1.5	8
47	Communication in cross-cultural consultations in primary care in Europe: the case for improvement. The rationale for the RESTORE FP 7 project. <i>Primary Health Care Research and Development</i> , 2014, 15, 122-133.	1.2	43
48	Training socially responsive health care graduates: Is service learning an effective educational approach?. <i>Medical Teacher</i> , 2014, 36, 291-307.	1.8	30
49	Healthcare for migrants, participatory health research and implementation science"better health policy and practice through inclusion. The RESTORE project. <i>European Journal of General Practice</i> , 2014, 20, 148-152.	2.0	20
50	A qualitative systematic review of studies using the normalization process theory to research implementation processes. <i>Implementation Science</i> , 2014, 9, 2.	6.9	265
51	Who are we and where are we going? Primary care academics in non-clinical posts. <i>Primary Health Care Research and Development</i> , 2014, 15, 96-103.	1.2	1
52	Health-care access for migrants in Europe. <i>Lancet</i> , The, 2013, 382, 393.	18.7	30
53	Community participation in primary care in Ireland: the need for implementation research. <i>Primary Health Care Research and Development</i> , 2013, 14, 126-139.	1.2	9
54	Service Users™ and Caregivers™ Perspectives on Continuity of Care in Out-of-Hours Primary Care. <i>Qualitative Health Research</i> , 2013, 23, 407-421.	2.1	19

#	ARTICLE	IF	CITATIONS
55	Patients' views about the use of their personal information from general practice medical records in health research: a qualitative study in Ireland. <i>Family Practice</i> , 2013, 30, 105-112.	1.9	29
56	REsearch into implementation STRategies to support patients of different ORigins and language background in a variety of European primary care settings (RESTORE): study protocol. <i>Implementation Science</i> , 2012, 7, 111.	6.9	38
57	Using a Theory-Driven Conceptual Framework in Qualitative Health Research. <i>Qualitative Health Research</i> , 2012, 22, 607-618.	2.1	156
58	The e-health implementation toolkit: qualitative evaluation across four European countries. <i>Implementation Science</i> , 2011, 6, 122.	6.9	23
59	The impact of direct provision accommodation for asylum seekers on organisation and delivery of local primary care and social care services: A case study. <i>BMC Family Practice</i> , 2011, 12, 32.	2.9	12
60	Evaluating complex interventions and health technologies using normalization process theory: development of a simplified approach and web-enabled toolkit. <i>BMC Health Services Research</i> , 2011, 11, 245.	2.2	173
61	Public attitudes to the use in research of personal health information from general practitioners' records: a survey of the Irish general public. <i>Journal of Medical Ethics</i> , 2011, 37, 50-55.	1.8	65
62	"I'm worried about what I missed": GP registrars' views on learning needs to deliver effective healthcare to ethnically and culturally diverse patient populations. <i>Education for Health: Change in Learning and Practice</i> , 2011, 24, 494.	0.3	7
63	An exploration of evidence-based policy in Ireland: health and social inclusion. <i>Evidence and Policy</i> , 2010, 6, 255-268.	1.0	6
64	Normalisation process theory: a framework for developing, evaluating and implementing complex interventions. <i>BMC Medicine</i> , 2010, 8, 63.	5.5	858
65	Expanding the value of qualitative theories of illness experience in clinical practice: a grounded theory of secondary heart disease prevention. <i>Health Education Research</i> , 2009, 24, 357-368.	1.9	13
66	Arranging and negotiating the use of informal interpreters in general practice consultations: Experiences of refugees and asylum seekers in the west of Ireland. <i>Social Science and Medicine</i> , 2009, 69, 210-214.	3.8	57
67	Research activity and capacity in primary healthcare: The REACH study: A survey. <i>BMC Family Practice</i> , 2009, 10, 33.	2.9	21
68	A postal survey of data in general practice on the prevalence of Acquired Brain Injury (ABI) in patients aged 18-65 in one county in the west of Ireland. <i>BMC Family Practice</i> , 2009, 10, 36.	2.9	8
69	Development of a theory of implementation and integration: Normalization Process Theory. <i>Implementation Science</i> , 2009, 4, 29.	6.9	839
70	Language barriers in health and social care consultations in the community: A comparative study of responses in Ireland and England. <i>Health Policy</i> , 2009, 92, 203-210.	3.0	16
71	Responses to language barriers in consultations with refugees and asylum seekers: a telephone survey of Irish general practitioners. <i>BMC Family Practice</i> , 2008, 9, 68.	2.9	25
72	Participatory approach works. <i>BMJ: British Medical Journal</i> , 2008, 336, 405.4-406.	2.3	3

#	ARTICLE	IF	CITATIONS
73	The complexity of patients' satisfaction with out-of-hours care: A qualitative study. <i>European Journal of General Practice</i> , 2007, 13, 83-88.	2.0	3
74	Understanding the implementation of complex interventions in health care: the normalization process model. <i>BMC Health Services Research</i> , 2007, 7, 148.	2.2	495
75	Telemedicine services in the Republic of Ireland: An evolving policy context. <i>Health Policy</i> , 2006, 76, 245-258.	3.0	34
76	Helping each other to learn – a process evaluation of peer assisted learning. <i>BMC Medical Education</i> , 2006, 6, 18.	2.4	128
77	Patients' perceptions of joint teleconsultations: a qualitative evaluation. <i>Health Expectations</i> , 2006, 9, 81-90.	2.6	78
78	A qualitative study of the educational potential of joint teleconsultations at the primary-secondary care interface. <i>Journal of Telemedicine and Telecare</i> , 2006, 12, 22-24.	2.7	23
79	Patients and health professionals' perspectives on the sociocultural influences on secondary cardiac behaviour: a qualitative study of the implications in policy and practice. <i>Family Practice</i> , 2006, 23, 587-596.	1.9	10
80	A qualitative study of factors influencing antimicrobial prescribing by non-consultant hospital doctors. <i>Journal of Antimicrobial Chemotherapy</i> , 2006, 58, 840-843.	3.0	78
81	A qualitative study of communication during joint teleconsultations at the primary-secondary care interface. <i>Journal of Telemedicine and Telecare</i> , 2006, 12, 24-26.	2.7	11
82	Role flexibility among telemedicine service providers in the north-west and west of Ireland. <i>Journal of Telemedicine and Telecare</i> , 2005, 11, 62-64.	2.7	7
83	Understanding the Normalization of Telemedicine Services through Qualitative Evaluation: Table 1. <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2003, 10, 596-604.	4.4	130
84	Why do telemedicine systems fail to normalize as stable models of service delivery?. <i>Journal of Telemedicine and Telecare</i> , 2003, 9, 25-26.	2.7	37
85	Implementation of Telemedicine: The Problem of Evaluation. <i>Journal of Telemedicine and Telecare</i> , 2002, 8, 39-40.	2.7	30
86	The Benefits of a Qualitative Approach to Telemedicine Research. <i>Journal of Telemedicine and Telecare</i> , 2002, 8, 56-57.	2.7	19
87	Concepts of illness causation and attitudes to health care among older people in the Republic of Ireland. <i>Social Science and Medicine</i> , 2002, 54, 1389-1400.	3.8	20
88	Implementation of telemedicine: the problem of evaluation. <i>Journal of Telemedicine and Telecare</i> , 2002, 8, 39-40.	2.7	13
89	The benefits of a qualitative approach to telemedicine research. <i>Journal of Telemedicine and Telecare</i> , 2002, 8, 56-57.	2.7	5
90	Translational framework for implementation evaluation and research: Protocol for a qualitative systematic review of studies informed by Normalization Process Theory (NPT). <i>NIHR Open Research</i> , 0, 2, 41.	0.0	4