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DESCRIPTION

The Journal welcomes contributions to the understanding and treatment of psychopathology. Such contributions may stem from various theoretical perspectives, such as learning theory, cognitive science, social psychology, developmental psychology, etc. The Journal primarily focuses on experimental tests of psychological approaches to psychopathology, though contributions from medicine, biology, sociology, or epidemiology may be published. The same holds for non-experimental approaches, which may occasionally be published if deemed relevant for the field of experimental psychopathology. Papers to be published generally focus on:

• Theoretically or clinically relevant differences between specific patient groups and other groups, if experimentally tested;
• Mechanisms that cause, perpetuate or reduce disorders;
• Diagnostic or therapeutic procedures

Participants in the studies may be patients, healthy subjects, or animals, depending on the relevance of the subject characteristics for the question to be answered.

Clinical trials (RCTs and others) should be registered in an official trial register and the registration number should be reported. These studies should include a flow diagram according to the most recent CONSORT guidelines and a CONSORT checklist should accompany the submission. See http://www.consort-statement.org for the guidelines and forms.

Studies testing hypotheses on characteristics of a disorder should not only include a non-patient control group, but also an appropriate clinical control group, to assess the specificity of the effect. We cannot guarantee acceptance of studies missing an appropriate clinical control group.

Case studies, open trials, and pilot studies may be considered for publication if they are unusually innovative.

Consecutive case series with appropriate designs (i.e., contrasting at least two conditions; e.g. multiple baseline design) and appropriate statistical analyses are considered for publication.

Replications are essential in science and are, to the present editor's opinion, often undervalued. Short reports of attempts to replicate experimental studies, whether successful, or failed, and whether applied or fundamental, are considered for publication, if appropriately powered. The maximum number of words is 2500 for these reports.
All submissions will first be screened on the degree to which they match the Aims and Scope of the Journal.

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Behavioral Therapists, Psychiatrists, Clinical Psychologists

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Types of Contributions
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• Theoretically or clinically relevant differences between specific patient groups and other groups, if experimentally tested;

• Mechanisms that cause, perpetuate or reduce disorders;

• Diagnostic or therapeutic procedures

Participants in the study may be patients, non-patients or animals, depending on the relevance of the subject characteristics for the question to be answered. In line with the aims of the Journal, priority is given to studies
1) using experimental methods with
2) data derived from patient samples rather than analogue groups.

Some research questions are best answered in non-patients. This should be evident from the nature of the questions or hypotheses.

Clinical trials (RCTs and others) should be registered in an official trial register and the registration number should be reported. These studies should include a flow diagram according to the most recent CONSORT guidelines and a CONSORT checklist should accompany the submission. See External link http://www.consort-statement.org for the guidelines and forms.

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Consecutive case series with appropriate designs (i.e., contrasting at least two conditions; e.g. multiple baseline design, ABAB designs, etc.) and appropriate statistical analyses are considered for publication.

Replications are essential in science and are, to the present editor's opinion, often undervalued. Short reports of attempts to replicate experimental studies, whether successful, or failed, and whether applied or fundamental, are considered for publication, if appropriately powered. The maximum number of words is 2500 for these reports.

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