DESCRIPTION

The Journal of Substance Abuse Treatment (JSAT) features original research; systematic reviews and meta-analyses; and commentaries and symposia/conference proceedings that advance the care of substance use disorders (including alcohol, illicit and prescription drugs, cannabis and nicotine) and their consequences.

JSAT values high-quality empirical research relevant to the care of persons with substance use problems by scholars, clinicians, and scientists in all disciplines, in any setting. In general, JSAT articles should address policies, systems of care, assessment techniques, and intervention approaches that have clear relevance for addiction treatment, harm reduction, and recovery support. JSAT is particularly interested in addiction health services research, including the design, organization, delivery, implementation, accessibility, quality, cost, effectiveness, equity, patient experience, and workforce characteristics of interventions for persons with substance use problems in all service settings.

AUDIENCE

Physicians, Psychiatrists, Psychologists, Nurses, Social Workers, and Counselors in both private and public sectors.

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INTRODUCTION
The Editors of JSAT believe that research on substance use disorders should meet the same scientific standards as that for any other health-related condition, disorder, or disease. Thus, research articles submitted to JSAT should adhere to rigorous standards of reliability, validity, and empiricism. Such research may take many forms, for example randomized controlled trials, prospective field evaluations, or time-series evaluations. Small pilot studies are important and necessary first steps to larger discoveries. Qualitative studies can provide rich insights into observed phenomena. Regardless of the study type, authors should apply the most rigorous, applicable standards for research conduct and reporting.

JSAT follows the Farmington Consensus. All authors must have been involved personally and substantively in the research and writing of the manuscript. The article must specify that the research was conducted ethically and adhered to appropriate human subject protections, including that an Institutional Review Board or equivalent approved or exempted the study protocol. The authors must ensure that the work has not been previously published and is not being considered elsewhere for publication. Authors must declare sources of funding and conflicts of interest, and register clinical trials.

In drawing conclusions, authors are expected to use a parsimonious, cautious, and conservative approach to the interpretation of findings. Adequately powered studies with null findings should be reported as such. Hyperbole and overgeneralization beyond the data are common reasons that submitted manuscripts are returned without review.

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JSAT publishes three types of articles:

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Stylistic Guidelines
Abstracts should be 350 words or fewer, structured into sections describing the Introduction, Methods, Results, and Conclusions. Do not include in-text citations in the abstract.

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The editors of JSAT will not consider manuscripts that use pejorative expressions. With the exception of reference to a journal or institute name, JSAT requires articles to use person-first language and avoid terminology that can stigmatize people who use alcohol, drugs, or other substances or are involved with the criminal justice system (see https://www.isaje.net/addiction-terminology.html).

All manuscripts should report demographic characteristics of the sample (e.g., age, sex, gender identity, race, ethnicity, social class). It should detail how the study assessed and analyzed these characteristics, and note any limitations to the approach in the discussion section. Please make every effort to use correct terminology for sex and gender (Richie, 2019). Manuscripts with largely homogeneous samples (e.g., cis-gender, male, White participants) should frame findings with the studied sociodemographic group in mind, and comment on generalizability limitations in the discussion. Consider using gender-neutral terms for ethnicity such as Latinx or Latine (Cardemil, Millan & Aranda, 2019). The text should treat race and ethnicity not as biological variables, but as proxies for social, cultural, environmental, economic, and other structural factors, including systemic racism.

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