DESCRIPTION

The *Journal of Substance Abuse Treatment (JSAT)* features original research, systematic reviews and reports on meta-analyses and, with editorial approval, special articles on the assessment and treatment of **substance use** and **addictive disorders**, including **alcohol**, **illicit** and **prescription drugs**, and **nicotine**. *JSAT* values high quality empirical research that is relevant for translation by treatment practitioners from all disciplines and across any setting where persons with **substance use problems** are encountered. The editors emphasize that *JSAT* articles should address **assessment** techniques and **treatment** approaches that have clear relevance for routine practice. Accordingly, the scope of *JSAT* includes health services research, including the design, organization, delivery mechanisms and workforce characteristics of treatments in routine settings.

It is the policy of *JSAT* that treatment research for individuals with substance use disorders meet the same scientific evaluative standards as treatments for those with any other health-related condition or illness. Thus, research articles submitted for publication in *JSAT* are expected to achieve the same empirical standards of reliability, validity, and empiricism. Theoretical models, clinical experience, and case vignettes are recognized as important supplements to, but not as substitutes for, research-based evidence.

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Authors must insure that the research as reported was conducted ethically, and that all protections to human subject participants were afforded. This insurance must be verified by the appropriate institutional review board or committee for the protection of human subjects. In addition, the editors of *JSAT* will not consider articles that use pejorative and stereotypical expressions when discussing individuals who suffer from **substance use disorders**.

In drawing conclusions, authors are expected to use a parsimonious, cautious and conservative approach in the interpretation of findings. Hyperbole and overgeneralization beyond the data are considered irresponsible.
AUDIENCE

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

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