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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.

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It is recognized that research-based evidence may take many forms, such as randomized controlled trials; case-controlled field evaluations; or time series evaluations. In early stages of research development, qualitative study or small trials may be appropriate and necessary first steps. Regardless of the specific type of study, authors of research articles should aim to: (1) Use one or more reasonable comparison or control conditions in the design and analysis of collected data, (2) Use data collection methods and measures that have been previously validated in the subject population, and (3) Analyze data (qualitative or quantitative) with the use of appropriate statistical methods.

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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INTRODUCTION

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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.

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