



School of
Social Work

BEST PRACTICES IN MENTAL HEALTH

Journal

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Best Practices in Mental Health EDITORIAL POLICY AND SUBMISSION GUIDELINES

Aims and Policies

Best Practices in Mental Health is a refereed publication intended for an interdisciplinary audience of mental health practitioners, administrators, and scholars. The journal publishes original, practice focused articles that are in keeping with the best possible evidence about what works in clinical, community, and/or organizational settings. Each issue includes information on innovative programs, interventions, new research efforts, book reviews, and descriptions and links to relevant websites. The journal seeks to provide readers with an array of articles on topics ranging from the micro application of a single practice intervention, such as psychoeducation, to macro applications, such as accreditation standards. Manuscripts are solicited from the entire mental health community and also invited from other educators, researchers, policy makers, and practitioners whose focus is on strengthening the knowledge base of mental health practices.

Categories of Best Practices

Best practices is a term with a broad definition that has numerous applications. The journal reviews four areas of mental health practices: (1) best practices, (2) emerging practices, (3) practice-based evidence, and (4) evidence-based practice. We ask that contributors ensure submissions meet at least one of these categories of best practices as described below.

Best practices for mental health can be described as a method or technique that has consistently shown results superior to those achieved with other means and is often used as a benchmark for others to base their practices on. Additionally, best practices guidelines are determined through a thorough process that includes research findings, clinical experience, and implementation guidelines which are then debated and discussed by panels of specialists including clinicians, researchers, program administrators, and client advocates.

Emerging practices are defined as treatments and services that are promising, are less thoroughly documented than evidence-based practices, and have a strong research foundation but

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fewer than five scientifically rigorous published studies. Emerging practices are often administrative or clinical practices that have proven effective at achieving a specific aim, hold promise for other organizations, and show effectiveness in small-scale projects where research designs are less rigorous or self-reporting measures are used.

Practice-based evidence is defined as evidence of real-world data collection and focuses heavily on improving practice. Descriptions are focused on effectiveness and practice, and studies often describe routine practices that have high external validity but little inferential generalizability.

Evidence-based practices are those interventions for which there is consistent scientific evidence showing that they improve client outcomes, with one or more replications of the original studies. Overall, best practices are broadly seen as activities, programs, and guidelines that have been created based on careful identification and synthesis of the best available evidence in a particular field of practice.

Types of Articles

Best Practices accepts regular articles and brief reports, both of which can include conceptual papers (e.g., descriptive best practices), research reports (e.g., empirically supported best practices), and specialty topic literature reviews (e.g., best practices for transition-age youth). Anyone interested in submitting such material should contact the editor. From time to time, the editor will solicit articles on special topics and will feature such special topics as consumer-selected best practices, commentaries, and field notes. Book reviews are a regular feature of the journal and are usually solicited by the editor. The following section describes the recommended format and procedures for conceptual and research manuscripts and book reviews.

Conceptual articles. The format for conceptual articles is introduction, best practices program or intervention description, preliminary findings, discussion (e.g., including implications for best practices), and conclusion. The introduction can include literature review, issues, problem statement, and identification of best practice category. The program or intervention description can include theoretical perspective, program description or design, components, steps for implementing best practice, or curriculum description. Preliminary findings can reference evaluation efforts and results, and note whether informed consent and institutional review board approval were obtained. The discussion section can describe findings, limitations of the intervention or program, recommendations for future development, and implications for best practices. The conclusion section pulls it all together and refers to main findings or conclusions supported by the discussion.

Research reports. The standard format for research reports is introduction, methods, results, discussion (with implications for best practices), and conclusion. In the last paragraph of the introduction, state the purpose of the research as either a statement or a research question, indicate type of study design (e.g., experimental, survey), and identify which category of best practice this article represents. Include descriptive data of participants or population, dates for original data collection, and statement of whether

informed consent or institutional review board approval was obtained. In the methods section, describe the data analysis procedures in a manner understandable to non-statisticians. In the results section, report findings directly related to the research purpose or question. This section can report numbers of all percentages (in either text or table) as well as statistically significant results (e.g., values, degrees of freedom, probability levels). The discussion section should describe limitations as well as explicitly discuss the findings in relation to application and implications for best practices.

Book reviews. The journal's intent is to publish book reviews that are relevant to readers interested in resources for best practices in mental health. Books to be considered for review should be sent to Amy C. Traylor, Associate Professor, The University of Alabama, P.O. Box 870314, 108 Little Hall, Tuscaloosa, AL 35487-0314, or atraylor@sw.ua.edu. Potential reviewers should contact Professor Traylor.

Submission of Manuscripts

General Requirements

Best Practices reviews material for publication on condition that it has not been previously published, including electronic publication, and is not being reviewed for publication elsewhere. For peer review, all submissions must:

1. Be sent electronically to dsccain@ua.edu as a file folder containing multiple documents. For example, the folder must have separate e-files for the following:

- Cover letter;
- Title page with author names, affiliations, and contact information;
- Article manuscript without author names including an abstract, key words, full article text, references, acknowledgments, and tables and figures (if any).

Files should be prepared using Microsoft Word and saved as .doc files. All tables and figures must fit on the page with portrait (not landscape) orientation; PowerPoint figures are not accepted. The entire article manuscript must be without author identification. E-mail or phone inquiries may be made directly to the Editor-in-Chief, Daphne S. Cain, dsccain@ua.edu, 205-348-9902.

2. Conform to *The Chicago Manual of Style*, 17th edition for text style; citations and references should follow the *Publication Manual of the American Psychological Association*, 6th edition (APA). Please use person-first (e.g., person with schizophrenia, not schizophrenic; research participants, not subjects) and nonsexist language.

3. Be double-spaced (including tables), using 12 point font (Times New Roman preferred) with 1-inch margins. Do not use **bold** or underline. Number pages in the upper right-hand corner.

4. Conform to word and page limits. Regular articles should not exceed 5,000 words (about twenty pages). Brief reports should not exceed 800 words (about four pages). Book reviews should be about 600 words (about three pages).

5. Identify in the cover letter all authors and their contact information, include a statement claiming that the manuscript is not under review elsewhere, and note which category the manuscript should be reviewed under (best practices, emerging practices, practice-based evidence, or evidence-based practice).

Arranging the Manuscript

Best Practices uses a blind review system, thus all manuscripts must have a separate title page that can be removed when the manuscript is sent for review. As described above, please provide TWO title pages, one with title of manuscript and all authors' names, affiliations, and contact information; and a second title page in the article manuscript with NO author identification.

Authors. Only principal writers should be listed as authors. Persons listed as authors must have made substantial contributions to the article and must be able to take public responsibility for it. Other contributors may be named in the acknowledgments. For each author, list no more than two academic degrees or certifications and the primary current affiliation (including specific title and department, agency, or university affiliation).

Acknowledgments. Acknowledgment of individuals or groups is limited to those who contributed to the article's intellectual or technical content. List all financial support, including grants and support from foundations and/or the pharmaceutical industry. For grants, include the grant number and full name of granting agency.

Abstract and key words. The abstract is meant to be a brief, succinct summary of the manuscript, no longer than about 150 words. It is recommended that authors follow the format sections described for conceptual or research papers (given above). Following the abstract, list key words that characterize your manuscript (e.g., geriatric depression; home care; screening); please provide two or three terms.

Manuscript. Whether your manuscript is a regular article (about twenty pages or 5,000 words) or a brief report (about four pages or 800 words), please structure the sections using the guidelines listed under conceptual or research.

Tables and figures. Include tables only when they present relevant numerical data more clearly than can be done in text; all tables should be referenced in text. Please limit tables to one or two per article. Figures can be used to illustrate a variety of relationships (e.g., logic models, flow charts, or program diagrams). These should be formatted in Microsoft Word (using SmartArt, drawing tools, or a text box), portrait orientation, no use of color, uncluttered, and clearly presented. Be sure to indicate in the text approximately where each table or figure should appear.

References. Please use care when preparing your article references. References cause the greatest loss of time and productivity when your article is being reviewed, copy edited, and typeset. Limit references to relevant published material cited in the text. Prior to submission of your article for review, please check to see that spelling of names, titles, years of publication, up-to-date URLs, and page numbers are correct and consistent. Please refer to previous issues of this journal for publishing style, and consult the *APA Publication Manual* for any questions on how to prepare your references.

Review Process and Editorial Decision

Manuscripts submitted for publication are sent for blind peer review to two to three editorial board members or invited guest reviewers. Final decision for publication rests with the editor.

Timeline. The journal is published twice yearly (spring and fall). The peer review process takes approximately one month, after which time the editor will communicate the editorial decision to the author(s) along with a summary of information about the decision and, if appropriate, recommendations for revision of the manuscript for publication or resubmission for a second review. Once final manuscripts are accepted and revisions (if needed) are completed, a future publication and issue date will be provided to the author(s).

Revised manuscripts. Authors may be asked whether they wish to make suggested revisions, and if so, a time frame will be given for turnaround.

Inquiries and manuscripts should be sent to:

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