

Editorial

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Once again, a change has occurred. As you probably noticed, the color of the cover for this issue of the *Journal of Consulting and Clinical Psychology (JCCP)* is different, signaling the “changing of the guard” of the editorial team. *JCCP* has a long-standing legacy of excellence in publishing high-quality, cutting-edge, and innovative research and scholarship in clinical psychology. Its increasing Institute for Scientific Information (ISI) impact factor rating continues to attest to its influence on the field overall. As the new editor, I intend to do my utmost to preserve this reputation. Moreover, I am humbled upon reflecting on those before me in this position, as well as excited about shepherding such a premier journal over the course of the next 6 years. I am cognizant not only of the impact that this journal has on the *science* of clinical psychology but also of its influence on clinical practice and service delivery via the dissemination and adoption of evidenced-based interventions. In this context, I am grateful for having been able to assemble such a high-caliber team of associate and consulting editors. The following are some ideas I have for the future of *JCCP* in terms of content, structure, and format.

Diversity

American Psychological Association (APA) journals have a long-standing history of advocating for increased research attention regarding diverse populations. However, for this research to truly have an impact, it needs to be widely disseminated amongst our profession. Elsewhere I have argued that such articles need to be published in “mainstream journals” such as *JCCP* (Nezu, 2005). Unfortunately, during a randomly chosen recent 3-year period (i.e., 2006–2008), the number of articles published in *JCCP* specifically focusing on diverse populations was less than 4% of the total number (i.e., 13 out of 328). As such, I am advocating for more research with diverse populations in general, as well as calling for more submissions to this journal that address such groups in particular. I define *diversity* as including those groups of individuals traditionally underrepresented in psychological research, be it as participants or investigators. Diversity categories, therefore, would include age, sex, sexual orientation, ethnicity, race, religion/spirituality, and physical disabilities. Given that the most recent U.S. Census Bureau statistics indicate that by 2042 ethnic “minorities” will constitute the majority of the U.S. population (U.S. Census Bureau, 2008), I would particularly like to increase the number of submissions focused on such populations. Such an initiative is very much in keeping with the recommendations of the APA Presidential Task Force on Enhancing Diversity (2005).

Dissemination

One major goal of research clinical psychologists is to have a “real-world impact” of our efforts. For example, developing efficacious treatments for depression in the research laboratory should ultimately have an influence on both professionals outside an academic setting (i.e., practitioners) as well as the general public. This dissemination journey too often never begins or is curtailed prematurely. As such, I am encouraging researchers to submit their work regarding effectiveness studies to *JCCP* that can provide information to practitioners that “academically based research” can and should translate into real-world clinical practice.

Public Education

Related to the above, I am often discouraged with our ability as scientist–practitioners to have a positive influence on the knowledge base of clinical psychology on the general public. Television newsmagazine programs, for example, too often get it wrong—what appears to be generally accepted principles among psychologists rarely see the light of day among the lay public (e.g., the negative effects of corporal punishment on children, the health consequences of stress, the tentative veracity of eye-witness testimony). As such, despite decades of research, our ability and efforts to properly inform the general public about matters of

mental health and its treatment has been limited. Within this context, during my tenure as editor, I would like to explore ways in which *JCCP* can better inform the public. For example, I will explore the possibility of developing a policy whereby authors whose manuscripts are accepted are invited to write a second, more user-friendly abstract of their study emphasizing the public health significance and “real-world” implications of their findings. This is similar to what is currently required when writing a National Institutes of Health grant application. These abstracts can then be used in a variety of ways to foster dissemination (e.g., they can be placed on a web page open to both professionals and the lay public alike). These could especially be used in press release efforts by the journal or APA in general to inform the media. Because they would be written by the researchers themselves, there would be less likelihood of the information being misrepresented. I would like both contributors and readers of *JCCP* to share their thoughts with me regarding this issue (E-mail: amn23@drexel.edu).

Methodological and Statistical Reporting

The high standards requiring sound research methodology long set forth by *JCCP* currently serves as a model for the field. However, this educational function is mostly *indirect*; whereas younger or less experienced researchers are able to view what is considered sound, state-of-the-art research and statistical analytic strategies, more can be provided in a *direct* manner within the pages of *JCCP*. As such, I am calling for more empirical and conceptual articles to be submitted that focus on advances in research methodology and statistics as they pertain to topics included within the scope of this journal. Potential topics might include the role of treatment integrity on outcome, the influence of missing data, the need for translational research, the advisability of continuing to use null hypothesis testing, how to best analyze mediators and moderators of treatment outcome, and how cautionary should we be when interpreting underpowered studies. Whereas the high rejection rate of *JCCP* is in part due to the limited space compared with the large number of papers submitted, too often what would have been interesting and important papers are rejected because of suboptimal methodology and statistical analyses. I am hopeful that this can be changed.

To that end, I am particularly pleased that the visionary efforts of previous *JCCP* editors—such as Phil Kendall (1997) and Annette La Greca (2005), with specific regard to requiring that authors report both effect size estimates (ESs) and associated confidence intervals (CIs)—have been successful (see Fidler et al., 2005; Odgaard & Fowler, 2010). I would like to add my support to these requirements and further direct authors who report the findings of a clinical outcome study to, in addition to ESs and CIs, also describe considerations of clinical significance, ones that are appropriate and relevant to their investigation (see Atkins, Bedics, McGlinchey, & Beauchaine, 2005; Lambert, Hansen, & Bauer, 2008).

Randomized Clinical Trials (RCTs)

JCCP is especially known for publishing high-quality articles describing the evaluation of various psychosocial interventions for the treatment of abnormal and disordered behavior. As such, this journal previously required compliance with the CONSORT (Consolidated Standards of Reporting Trials) statement (see www.consortstatement.org/), which originated with editors of medical journals. However, APA has more recently developed reporting standards specific to psychology. As such, authors should refer to the APA Journal Article Reporting Standards (JARS), which are contained in the *American Psychologist* (APA Publications and Communications Board Working Group on JARS, 2008) as well as in the Appendix of the 6th edition of the *APA Publication Manual* (APA, 2010). Individuals interested in submitting manuscripts to *JCCP* describing a RCT need to be in compliance with JARS, including providing a chart showing the flow of participants through each stage of an experiment. Note that when a RCT is not fully compliant with JARS, such limitations need to be acknowledged and discussed in the text of the paper.

Part of the JARS statement involves the need to assess for, and report the findings of, the degree to which a given intervention was delivered as intended. This issue refers to treatment integrity (often referred to as treatment fidelity) and generally encompasses three dimensions: *adherence* (the degree to which therapists complied with a treatment protocol, such as a manual), *competence* (the degree to which the therapists delivered the treatment in a skillful manner), and *differentiation* (whether treatments that are compared with each other are actually different along various important characteristics; Nezu & Nezu, 2008). Unfortunately, previous requests to comply with all CONSORT guidelines when reporting RCTs, including those suggesting that treatment integrity be assessed and reported, have not been particularly successful (Perepletchikova, Hilt, Chereji, & Kazdin, 2009; Perepletchikova, Treat, & Kazdin, 2007). As such, I would like to emphasize the importance of complying with JARS guidelines and underscore its inclusion in reports of RCTs as a *requirement* for consideration in *JCCP*.

Nonrandomized Trials

Similar to RCTs, related guidelines have also been previously developed for nonrandomized designs that are frequently used in public health and mental health interventions. Authors reporting such studies were previously required to comply with the TREND (Transparent Reporting of Evaluations with Nonrandomized Designs) statement (www.cdc.gov.trendstatement/). The TREND statement is now replaced by JARS, which does describe the types of information recommended for inclusion in papers reporting the collection of new data regardless of research design (e.g., randomized vs. nonrandomized).

Meta-Analyses

JCCP also publishes meta-analyses of RCTs. Authors wishing to submit such manuscripts previously needed to comply with PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines. Similar to JARS, the APA also developed recommendations specific to the reporting of meta-analyses (Meta-Analysis-Reporting Standards [MARS]), which are also contained in the 2008 *American Psychologist* article noted previously as well as in the Appendix of the 6th edition of the *APA Publication Manual*. Compliance with MARS, as now required by *JCCP*, also requests the submission of a flow diagram that describes the progress through the stages of the meta-analysis. Note that when a meta-analysis is not fully compliant with MARS, such limitations need to be acknowledged and discussed in the text of the paper.

Commentaries

With the belief that providing a venue for meaningful alternative perspectives and reasonable debates can only help advance the science of clinical psychology, *JCCP* now welcomes the occasional commentary written in response to previously published articles. This represents a slight change in editorial policy. We will accept two types of comments: brief comments and extended comments.

Brief Comment

This type of article would be written in response to a single article previously published in *JCCP*. The purpose would be to provide a meaningful insight, concern, alternative interpretation, clarification, or critical analysis that would advance our understanding. It is not intended to be pedestrian in nature (e.g., simply highlighting that a previously published study was statistically underpowered). Rather, its publication would provide for a richer and more comprehensive understanding of a methodological, conceptual, or professional issue that significantly adds to the literature.

Brief Comments should be submitted in a timely manner, no later than 9 months after publication of the original article. Upon acceptance of a Brief Comment, the author(s) of the original article would be invited to submit a response, whereupon, if acceptable, both the Brief Comment and Response would be published together.

Extended Comment

The purpose of this type of paper is essentially similar to that of a Brief Comment (i.e., to provide a meaningful insight, concern, alternative interpretation, clarification, or critical analysis) but would be written in response to a series of articles previously published in *JCCP* or that involves a more extensive and far-reaching conceptual or methodological issue. One example might include describing and analyzing the limitations of a particular statistical or methodological procedure used in several studies previously published in *JCCP*, provided along with meaningful recommendations. Similar to a Brief Comment, where and when appropriate, if such a paper is accepted, the author(s) of the original article(s) will be contacted to write a response, whereupon, if acceptable, both the Extended Comment and Response would be published together.

Conceptual/Theoretical Papers

Whereas the majority of papers published in *JCCP* involve descriptions of quantitatively based investigations, this journal also considers conceptual articles on topics of broad theoretical, methodological, or practical interest that advance the field of clinical psychology. Examples might include describing a new methodological or statistical procedure, delineating methods of enhancing dissemination of research findings from the laboratory to real-world settings, or advocating the need to increase the

profession's research efforts regarding a traditionally underserved population. Although *JCCP* tended to always consider such articles, as editor, I wish to especially highlight this type of paper to encourage increased submissions.

Content and Format of Manuscripts

Essentially, the scope and focus of *JCCP* remains the same (i.e., empirical research that focuses on the development, validity, and use of techniques of diagnosis, treatment, and prevention of disordered behavior). Beyond the addition of commentaries, the format of manuscripts also remains the same (e.g., both full and brief reports are encouraged; authors need to adhere to the 6th edition of the *APA Publication Manual*). In addition, we will continue to publish special sections devoted to timely and important topics. Individuals interested in submitting to *JCCP* are directed to our website for more details regarding the *Description* of the journal as well as specific *Instructions to Authors*. Note that a major change is the requirement to complete the Manuscript Submission Checklist, which is downloadable from our website. This checklist essentially asks authors to attest to their compliance with the basic submission guidelines outlined in the *Instructions to Authors*. This checklist not only serves to remind authors of such requirements but also serves to minimize time and energy often spent by the editorial team in determining whether such requirements were indeed followed (e.g., whether Institutional Review Board approval was obtained, whether a flow chart was submitted if the paper describes a RCT or meta-analysis, whether all listed authors have read the paper and agree to have their names identified with it). Please note that manuscripts that do not adhere to these requirements may be returned without review.

Call for Increased Participation

Last, I would like to call on people to become more involved in the overall editorial review process. As the saying goes—"it takes a village." During the past year as Incoming Editor, I have witnessed an increasing number of individuals who publish in *JCCP* and other high-quality journals decline to review manuscripts in their areas of expertise. This is not a statement of admonishment; rather, it is a plea to them and others to participate in the peer review process. The only way that high-quality journals can maintain their excellence and timely review is by having experts be willing to "go the extra mile." I realize that there is the proverbial "Catch 22"—the best people to review are often the most busy. However, the quality of this journal, and by implication, the field of clinical psychology as well, is dependent upon a peer review system that is also of high caliber.

—Arthur M. Nezu, Editor

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