### THE JOURNAL OF BEHAVIORAL HEALTH SERVICES & RESEARCH (JBHS&R)

# **Types of Submissions**

The *JBHS&R* has two major types of submission categories: 1) Original Contributions; and 2) Opinions & Ideas. Note that page totals for each submission type apply to the main body of the paper and *exclude* (when applicable) tables, figures, and references. Abstracts are narrative in style, not structured. A narrative Abstract consists of a summary of the manuscript no more than 150 words in length. There are no subheadings within an abstract as well as no references in the abstract.

## **Original Contributions**

These types of submissions are peer reviewed and include Regular Articles, Brief Reports, Policy Perspectives, Literature Reviews, Systematic Reviews, Case Studies, and Commentaries. The JBHS&R supports the use of appropriate guidelines for reporting health research. Please consult the EQUATOR Network at https://www.equator-network.org/ for specific guidelines and include the selected guidelines on the Title Page and in the Methods section of the submission.

### **Opinions and Ideas**

These types of submissions include *Notes from the Field, Letters to the Editor*, and *Book Reviews*. *Letters to the Editor* and *Book Reviews* are not peer reviewed.

### **Original Contributions**

## **Regular Articles**

Regular Articles contain original data from the results of empirical studies in the field of behavioral health, which the JBHS&R defines as the study of alcohol, drug use, and mental disorders from a population or public health perspective. Regular Articles may be up to 20 pages in length, not including tables, figures, and references. Manuscripts submitted for consideration as Regular Articles must have an Introduction and separate sections for Methods, Results, Discussion, Implications for Behavioral Health, and References. In general, the JBHS&R does not publish pilot studies or preliminary results of empirical studies. There may be some exceptions, but the JBHS&R is interested in the results of a full study that comes after the piloting.

# **Brief Reports**

Brief Reports also contain original data from the results of an empirical study in the field of behavioral health. However, a *Brief Report* must be less than 13 pages in length, not including tables, figures, and references. *Brief Reports* must have an Introduction and separate sections for the Methods, Results, Discussion, Implications for Behavioral Health, and References.

### **Policy Perspectives**

Policy Perspectives synthesize the results of one or multiple studies and may be up to 16 pages in length, not including tables, figures, and references. A *Policy Perspective* highlights a significant gap between research evidence and its use by policymakers. This submission type includes an Introduction stating the objectives of the manuscript, and sections to describe the magnitude or significance of a problem, what is currently being done, recommendations, and implications for behavioral health.

### **Literature Reviews**

Literature Reviews focus on recent behavioral health literature and may be up to 20 pages in length, not including tables, figures, and references. Literature Reviews must have an Introduction and separate sections for the Methods, Results, Discussion, Implications for Behavioral Health, and References.

### **Systematic Reviews**

Systematic Reviews (up to 20 pages, not including tables, figures, and references) have clearly formulated questions and use systematic and explicit methods to identify, select, and critically appraise relevant research and to collect and analyze data from the studies that are included in the reviews. The paper must have an Introduction and separate sections for Methods, Results, Discussion, Implications for Behavioral Health, and References.

### **Case Studies**

Case Studies report step-by-step emergence of information or developments in behavioral health practice and describe how behavioral health professionals reason and respond in each iteration or report specific instances of interesting patient phenomena up to 8 pages in length, not including tables, figures, and references. Case Studies summarize the facts as they occurred and do not speculate about underlying mechanisms of the process or clinical treatment. This submission type provides detailed interactions to help frame questions for more rigorously designed clinical studies. These submission types must include an Introduction and separate sections for Methods, Results, Discussion, Implications for Behavioral Health, and References.

#### Commentaries

Commentaries provide in-depth comments or discussions on topics of current interest in behavioral health up to 16 pages in length. Commentaries must have an Introduction and separate sections for Implications for Behavioral Health and References.

## **Opinions and Ideas**

#### **Notes from the Field**

*Notes from the Field* describe the implementation and evaluation of interventions or practices which have implications for the practice of behavioral health up to 10 pages in length. These manuscripts must have an Introduction and separate sections for Implications for Behavioral Health and References.

### **Letters to the Editor**

Letters to the Editor are brief comments, replies, or discussions of articles previously published in the JBHS&R up to 1 page in length. Letters to the Editor do not contain an abstract. Letters to the Editor must include an Implications for Behavioral Health and References sections.

#### **Book Reviews**

Book Reviews do not include an abstract and must begin with the following information in this order:

- Book Review (as a title);
- Information about the book (full title and subtitle; author's name; city and state in which the publisher is based; full name of the publisher; publication date; number of pages; ISBN number or numbers; and
- Reviewed by and name of the reviewer(s) with credentials

Book Reviews should address the following topics in behavioral health up to 1 page in length:

• The subject of the book and its relationship to the literature on its major subject;

- The reviewer(s) central argument(s) or major findings;
- The methodology the reviewer(s) used to develop and test the central argument(s) and/or major findings described in the book;
- Strengths and weakness of the book;
- The reviewer's overall judgment of the book and its contribution to the literature of behavioral health; and
- Notes at the end of the review with the reviewer's affiliation(s) and correspondence details.