# **Advancing New Frontiers with** *Clinical Psychological Science***: Editorial**

February 29, 2012

The Association for Psychological Science has launched a new journal, *Clinical Psychological Science (CPS)*, to publish advances in clinical science and provide a venue for cutting-edge research across a wide range of conceptual views, approaches, and topics. The journal encompasses core domains that define clinical psychological science, but also developments from all disciplines and areas of science that enhance our understanding of clinical dysfunction broadly conceived. For example, among the key topics of the journal are underlying mechanisms and etiologies of psychological health and dysfunction; basic and applied work on the diagnosis, assessment, treatment, and prevention of mental illness; service delivery; and promotion of well-being. Many disciplines connect with these topics and are welcome in the journal.



CPS takes a unique role among journals in clinical psychology. First, the journal presents the best science from all domains of clinical psychological science. This is different from many journals that divide the field by domain, subtopic, or conceptual view about the nature of dysfunction or interventions (e.g., abnormal psychology, addictions, violence, personality disorders, family psychology, and psychotherapies of various persuasions, to mention a few). Specialization has its obvious advantages, but bears a price of fractionation of our field. Some might ask, "Where would be the one place to see the latest research from the many areas of clinical psychology?" CPS was conceived to answer the question.

Second, connecting clinical psychology to core topics of the larger field is strongly encouraged by the journal. The field of clinical psychological science draws on key models, paradigms, and findings from

other areas of psychology. Cognitive and social neuroscience, memory, attention, perception, emotion, decision making, and choice — all topics of psychological science with strong traditions and research — can inform and elaborate clinical phenomena (e.g., schizophrenia, autism, domestic violence, and trauma).

Third, the journal draws from the many disciplines that inform and can be informed by clinical psychological science. Among the relevant domains are psychiatry, neuroscience, epidemiology and public health, and genetics and epigenetics. Advances in science include, among other things, recognition of the interdependencies of fields as specific phenomena (e.g., health, psychopathology) are more finely studied. These interdependencies are reflected in core topics of the journal, such as the underpinnings of mental health, psychological precursors of physical health, and biological precursors of mental disorders, as well as shared methodologies (e.g., neuroimaging techniques) that often bring together collaborators from diverse fields.

Fourth, the journal is keenly interested in clinical psychological science world-wide. Nationality, culture, and ethnicity are rich moderators in need both of theory- and hypothesis-driven research to inform our understanding of clinical functioning and its many manifestations. Further, collaborative work in the sciences spans many boundaries, including national boundaries, and the accelerated development of science in many nations means that advances are coming from several quarters, not just a small set of countries. At the same time, there is increased recognition that psychological dysfunction plays a critical role in the health, welfare, and care of citizens of the world and relates directly to other issues of national and international concern (e.g., economic disadvantage, natural disasters, war). These influences argue for recognition and fostering of clinical psychological science from a global perspective.

#### **Substantive Focus of the Articles**

I have conveyed that the journal is open to the range of topics within clinical psychology and from other disciplines that study and inform clinical dysfunction. The range of topics is broader than most journals can consider. For example, *CPS* is quite interested in:

- Translational articles that help move from basic research to application or point the concrete paths through which that could be accomplished;
- Research using animal models that has clear and direct implications for understanding mechanisms underlying development of clinical dysfunction and its prevention or amelioration;
- Research on novel preventive and treatment interventions and models of delivering them to the large swaths of individuals in need of services;
- Investigations using diverse methodologies (e.g., novel statistical models, qualitative studies, single-case designs) that reveal or elaborate phenomena in new ways;
- Mathematical, computer, and computational models that can place clinical psychological phenomena in a new light and that enhance empirical research; and
- Theory-driven research that recasts important phenomena in novel ways and that tests predictions to show what we have gained from the theory.

It is useful to focus on the broader notion these examples reflect; namely, the journal is keen on publishing research that advances the field, is of broad interest to clinical researchers, and reflects if not

sets the standards for clinical psychological science. By the very nature of this work, we cannot identify all of the domains ahead of time.

## **Types of Articles**

The journal is intended to emphasize empirical research, although both empirical studies and reviews are welcome. We plan to publish the following types of articles:

- *Empirical articles* (12,000-word maximum, inclusive of front and back matter, plus a combination of up to four tables and figures in total)
- *Brief empirical reports* (5,000-word maximum, inclusive of front and back matter, plus a combination of up to two tables and figures in total)
- *Theoretical, review, or methodological articles*, (17,000-word maximum, inclusive of front and back matter; plus a combination of up to five tables and figures in total) that clearly provide an advance beyond encapsulating the current status of a given literature, that are likely to have broad appeal, and that are not readily accommodated by review journals.
- Short communications and commentaries (3,500-word maximum, inclusive of front and back matter, plus one table or figure) that cast multiple perspectives and conceptual views that might advance research or recast findings in a given area of clinical research. Although most of these will be invited, they may be submitted in response to an article.

#### **Review Process and Article Selection**

The review process is slightly different from that of many other journals, in keeping with the overall mission. The review process has two tiers. The submission will be evaluated by the editors to determine whether the manuscript will be sent out for review. If one of two editors (editor and an associate editor) views the submission as constituting a potentially important contributions, the manuscript will be sent out for review. If two editors independently indicate reservations about the contribution, the manuscript will be returned to the author without further review or consideration.

When a manuscript is sent out for review, consulting editors and reviewers are asked to evaluate the importance of the contribution and to focus on the larger picture and context of the study. For all manuscripts that are reviewed, the rationale for the editorial decision will be provided, as expected as part of the peer-review process. If the manuscript is recommended to be accepted for publication, reviewers will make comments about how to present the manuscript in its optimal light. If the manuscript is rejected, reviewers are not asked to provide an extensively detailed methodological critique and evaluation of the study. Thus, the primary focus of the review process and criterion for publication are whether the submission is a substantive contribution that advances clinical psychological science. Every effort will be made to streamline the delay between submission and editorial decision, for all manuscripts submitted to the journal.

## **Closing Comments**

CPS joins a set of enormously successful journals: Psychological Science, Perspectives on Psychological Science, Current Directions in Psychological Science, and Psychological Science in the Public Interest. These journals present the best of psychological science and have been recognized as such. As Editor, it

is a privilege to join a family with standards for rigor and relevance that are widely appreciated and recognized. In keeping with the standards set by our sibling journals, we are eager to represent, illustrate, and reflect clinical psychological science at its finest. I look forward to a diverse set of articles, contributors, and disciplines that will help understand and ameliorate clinical disorders and sources of impairment.

Suggestions for topics, series, and articles that can advance clinical psychological science are welcome at any time. We cannot preview papers or abstracts prior to submission, but conversations about potential research projects in particular are welcome. I can be reached at akazdin@psychologicalscience.org.