

ABCT 2022 Reviewer Criteria Questions- Clinical Round Tables

Clinical Round Tables Description: Discussions (or debates) by a range of informed individuals (e.g., researchers, clinicians, community stakeholders, consumers, persons with lived experience of mental illness) on an important topic directly related to patient care, treatment, and/or the application/implementation of a treatment. Examples of topics for Clinical Round Tables include (but are not limited to): challenges/suggestions for treating a certain disorder or group of patients, application of a treatment protocol or type of treatment to a novel population, considerations in applying CBTs to marginalized communities and/or minority groups, discussions about the implementation/application of research findings into clinical/community settings. Clinical Round Tables are organized by a moderator and include between 3-6 panelists with a range of experiences and attitudes. The total number of speakers may not exceed 7.

1. SIGNIFICANCE

Please rate the significance of the topic. Significance refers to the impact of the topic being discussed on patient care, treatment, and/or the application/implementation of a treatment.

4 = Excellent: The clinical round table addresses a topic of critical significance, and the abstract clearly details the importance of the topic to patient care, treatment, and/or the application/implementation of a treatment.

3 = Good: The clinical round table addresses a topic of moderate significance, and the abstract moderately details the importance of the topic to patient care, treatment, and/or the application/implementation of a treatment.

2 = Adequate: The clinical round table addresses a topic of nominal significance, and the abstract marginally details the importance of the topic to patient care, treatment, and/or the application/implementation of a treatment.

1 = Limited: The clinical round table addresses a topic of marginal significance, and the abstract does not detail the importance of the topic to patient care, treatment, and/or the application/implementation of a treatment.

0 = Poor: The authors did not provide an adequate explanation for the significance of the clinical round table.

2. APPROACH

Please rate the quality of evidence provided in the abstract to support the proposed topic of discussion (Note: Evidence can be in the form of randomized trials, open trials, feasibility or acceptability studies, mixed-methods approaches, program evaluation, etc.). Please base evaluations on *what evidence is provided*, not what evidence the reviewer is aware of.

4 = Excellent: The quality of the evidence to support the proposed topic of discussion is excellent.

3 = Good: The quality of the evidence to support the proposed topic of discussion is good.

2 = Adequate: The quality of the evidence to support the proposed topic of discussion is adequate.

1 = Limited: The quality of the evidence to support the proposed topic of discussion is limited.

0 = Poor: The quality of the evidence to support the proposed topic of discussion is poor.

3. INNOVATION

Please rate the extent to which the clinical round table discusses a topic with the potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a

community setting.

4 = Excellent: Submission has excellent potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a community setting.

3 = Good: Submission has good potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a community setting.

2 = Adequate: Submission has modest potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a community setting.

1 = Limited: Submission has limited potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a community setting.

0 = None: Submission does not have potential to impact patient care, treatment, and/or the application or implementation of a treatment/practice in a community setting.

4. INCLUSION OF DIVERSE POPULATIONS

Please rate the extent to which the clinical round table addresses a topic related to diverse populations including traditionally underrepresented groups and individuals across the lifespan and/or presents a topic with clearly stated implications for diverse populations.

4 = Excellent: Submission clearly addresses a topic related to diverse populations, and/or presents a topic with clearly stated implications for diverse populations.

3 = Good: Submission moderately addresses a topic related to diverse populations, and/or presents a topic with clearly stated implications for diverse populations.

2 = Adequate: Submission nominally addresses a topic related to diverse populations, and/or presents a topic with clearly stated implications for diverse populations.

1 = Limited: Submission marginally addresses a topic related to diverse populations, and/or presents a topic with clearly stated implications for diverse populations.

0 = None: Submission does not address a topic related to diverse populations, and does not present a topic with clearly stated implications for diverse populations.

5. APPROPRIATENESS TO CONVENTION THEME

Please rate the relevance of this submission to this year's convention theme: "**Emergency & Disaster Preparedness and Response: Using Cognitive and Behavioral Science to Make an Impact.**" ABCT's 56th Annual Convention will spotlight research that helps us answer the question of where we are in the development of robust theory and sound science to be able to respond the public and mental health emergencies and syndemics our world is facing including but not limited to: disasters, climate change, pandemics/epidemics, systemic racism, police brutality, firearm & mass violence, homelessness, suicide & NSSI, substance use, depression, anxiety, serious mental illness, trauma, etc. Do we have the basic science to respond to these mental and public health emergencies? Do we know enough about the mechanisms of action and essential ingredients of our interventions so that we can quickly develop, adapt, and deploy cognitive and behavioral interventions to prepare and respond? Do we have the public health systems and evidence-based polices in place to recognize mental and public health emergencies and respond to them effectively? Do we have evidence-based ways to communicate the evidence for cognitive behavioral interventions to the public and policymakers to effect change? Are we equipping current and future professionals with the necessary tools to respond? We encourage submissions across the spectrum of science (i.e., basic, translational, clinical, and public policy) to effectively meet the behavioral health needs of our communities during and after mental and public health emergencies and disasters. Reviewer, please reference the call for abstracts for more information to inform your rating: <https://www.abct.org/convention-ce/call-for-abstracts/>

- 4 = Excellent:** Submission is highly relevant to this year's convention theme.
- 3 = Good:** Submission is moderately relevant to this year's convention theme.
- 2 = Adequate:** Submission is somewhat relevant to this year's convention theme.
- 1 = Limited:** Submission is minimally relevant to this year's convention theme.
- 0 = Poor:** Submission appears to have no relevance to this year's convention theme.

6. RELEVANCE TO ABCT'S MISSION AND GOALS

Please rate the relevance of this submission with ABCT's mission and strategic goals. The Association for Behavioral and Cognitive Therapies is a multidisciplinary organization committed to the enhancement of health and well-being by advancing the scientific understanding, assessment, prevention, and treatment of human problems through behavioral, cognitive, and biological evidence-based principles. ABCT's strategic plan includes the following five goals: 1) Innovation in the science of behavioral health; 2) Building relationships with members and diverse stakeholders; 3) Dissemination of CBT; 4) Public education through partnerships; and 5) Ethical delivery of science-based interventions.

- 4 = Excellent:** Submission is particularly relevant to ABCT's mission and strategic goals.
- 3 = Good:** Submission is moderately relevant to ABCT's mission and strategic goals.
- 2 = Adequate:** Submission is somewhat relevant to ABCT's mission and strategic goals.
- 1 = Limited:** Submission has minimal relevance to ABCT's mission and strategic goals.
- 0 = Poor:** Submission appears to have no relevance to ABCT's mission and strategic goals.

7. CONTRIBUTING TEAM

Please rate the expertise of the contributing team (presenters and co-authors) based on the information provided. This can include: relevant training (formal or informal), supervision received or provided, research and scholarship (e.g., publications, presentations, community-engaged research, dissemination/implementation experience), service delivery, teaching and inclusion of a diverse range of informed individuals who can speak about the topic from diverse perspectives including researchers, clinicians, community stakeholders, consumers, persons with lived experience of mental illness.

- 4 = Excellent:** The contributing team described significant relevant experience in the proposed topic and includes representation of a diverse range of informed individuals including researchers, clinicians, community stakeholders, consumers, persons with lived experience of mental illness.
- 3 = Good:** The contributing team identified relevant experience in the area for most contributors, with others having less experience, but remaining qualified. The team is moderately representative of a diverse range of informed individuals who can speak about the topic from diverse perspectives.

2 = Adequate: The contributing team identified nominally relevant experience in the area, with some contributors having less experience in the specific area of interest. The team is marginally representative of a diverse range of informed individuals who can speak about the topic from diverse perspectives.

1 = Limited: The contributing team identified marginally relevant experience in the area. The team is marginally representative of a diverse range of informed individuals who can speak about the topic from diverse perspectives.

0 = Poor: The team does not describe the relevant experiences for the submission and is not

representative of a diverse range of informed individuals who can speak about the topic from diverse perspectives.