Instructions to Authors

Crisis: The Journal of Crisis Intervention and Suicide Prevention
Aims and Scope of Crisis – The Journal of Crisis Intervention and Suicide Prevention

Crisis – The Journal of Crisis Intervention and Suicide Prevention is an international periodical that publishes original articles on suicidology and crisis intervention. Papers presenting basic research as well as practical experience in the field are welcome. Crisis also publishes potentially life-saving information for all those involved in crisis intervention and suicide prevention, making it important reading for clinicians, counselors, hotlines, and crisis intervention centers.

Crisis – The Journal of Crisis Intervention and Suicide Prevention publishes the following types of articles

Research Trends
Papers for this section may be up to 4,000 words (excluding references).

Short Reports
Papers for this section may be up to 1,500 words (excluding references).

Clinical Insights
These are clinically oriented papers and may be up to 4,000 words (excluding references).

Manuscript Submission

Manuscripts should be submitted online at http://www.editorialmanager.com/cri. Only papers that have not previously appeared in or are currently under consideration for another publication can be considered for publication. Manuscripts are subject to peer review and may be returned to authors for revision. Should you have any editorial/content questions, please contact the Editorial Assistant, Wendy Iverson (E-mail crisis@griffith.edu.au, Tel. +61 7 3735-3379, Fax +61 7 3735-3450). Please direct any technical queries regarding the submission through Editorial Manager to production@hogrefe.com.

Manuscript Format

Manuscripts should be prepared according to the Publication Manual of the American Psychological Association (6th ed.) as regards both style and presentation. In particular, statistical and mathematical copy as well as references and their text citations, should conform to the Publication Manual.

The Title Page of each paper should include, in the following order: title of the article; author name(s) preceded by first names, but without academic titles; name of the institute or clinic (if there is more than one author or institution, affiliations should be indicated using superscript Arabic numerals); an address for correspondence (including the name of the corresponding author with fax and phone numbers); and the author note (including acknowledgments, disclosures, and funding sources). Authors should remove all potentially identifying information from the remaining parts of the submission to ensure anonymous peer review, replacing names and any indication of the university where a study was conducted by neutral place-holders.

A structured Abstract (maximum length 200 words) should be divided into the following sections: Background, Aims, Method, Results, Limitations (only for Short Reports and Research Trends), Conclusion. A maximum of 5 keywords should be given after the abstract.

Figures and tables should be numbered using Arabic numerals. Each table and figure must be cited in the text and should be accompanied by a legend. Please submit tables and figures via Editorial Manager as separate files. Figures must be supplied in a form suitable for reproduction: preferably high-resolution bitmaps (e.g., jpg, 300 dpi) or as vector graphics files. Figures will normally be reproduced in
black and white only. While it is possible to reproduce color illustrations, authors are reminded that they will be invoiced for the extra costs involved.

Authors should follow the guidelines of the APA Manual regarding style and nomenclature. It is recommended that authors who are not native speakers of English have their papers checked and corrected by a native-speaker colleague before submission. Standard US American spelling and punctuation as given in *Webster’s New Collegiate Dictionary* should be followed.

Please make sure to avoid stigmatizing language concerning suicidal behavior by using neutral terms. Here are some examples:

<table>
<thead>
<tr>
<th>Stigmatizing Language</th>
<th>Neutral Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>to commit / complete suicide</td>
<td>to die by suicide; to end his/her life</td>
</tr>
<tr>
<td>a successful suicide / attempt</td>
<td>a fatal suicide attempt</td>
</tr>
<tr>
<td>an unsuccessful suicide</td>
<td>a non-fatal suicide attempt</td>
</tr>
<tr>
<td>a failed attempt</td>
<td>a non-fatal suicide attempt</td>
</tr>
<tr>
<td>suicide victims</td>
<td>those who died by suicide</td>
</tr>
</tbody>
</table>

**Reviews and Decisions**

Manuscripts are all subject to anonymous peer review. Therefore, authors should remove all potentially identifying information from the manuscript and accompanying files, with the exception of the title page. Based on the title and abstract, two or more reviewers will be requested to review the manuscript. Upon receipt of the reviews, the editor-in-chief will make his editorial decision and notify the corresponding author of the result. There are four kinds of decisions: accept, accept conditionally upon (minor) revision, resubmit after major revision, and reject. Rejected manuscripts cannot be resubmitted. The entire review process is completely reliant on electronic communication in order to ensure speedy processing. A request by the editor for revision of a manuscript does not constitute a decision to publish. All revised manuscripts will be reevaluated, and the editors reserve the right to reject a paper at any point during the revision process.

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