Editorial

Deliberately Chipping Holes in the Wall: A Modest Goal for the Journal

(*In a first editorial as a new Editor-in-Chief, I think it is customary to first acknowledge those whose efforts have preceded you and it may be appropriate to follow at least some customs*). Thanks to the Academy, editorial staff, and editorial board for their many contributions over the years to get the Journal to this point. There are too many to mention in a short column, but let me briefly flag three contributors in particular. I would like to give a special shout out to Dr. Khrista Boylan, our outgoing Editor-in-Chief, who has put years of work into the Journal and who will stay on as an Editor Emerita to help get me up to speed. Dr. Joshua Fogel has been one of our longest serving Editorial Board members and significantly contributed to the launching of the Journal now many years ago. Dr. Fogel has agreed to stay on the Editorial Board to continue to help us with statistical reviews. I would also like to acknowledge Dr. Kristin Cleverley who is stepping down from her Assistant Editor role, a post she has held for almost ten years. She is also going to continue to contribute to the Journal as a new member of our expanded Editorial Board. Please take a look at the updated masthead for the Journal at https://www.cacap-acpea.org/learn/journal/ to see who are all involved.

One initiative in the works is to add some new features to the Journal. In this issue, find a trial of a Recommended Reading page which suggests child mental health articles, published in other journals, that you are encouraged to check-out. Some interesting articles on self-harm are suggested in this issue. Also find in this issue a practical pharmacology piece by our in-house psychopharmacology expert and psychopharmacology section head, Dr. Dean Elbe. Other special columns will debut in upcoming issues. I hope that you will read these and give us feedback.

(*Next, something should be said that is [a] inspirational, [b] profound, or [c] provocative. I'll need to select [c] given my skill deficits for both [a] and [b]*). I have had a long-standing interest in research-practice gaps in the child mental health field (McLennan, Wathen, MacMillan, & Lavis, 2006), or as one title in the field termed it, the “chasm” (Graham, 2000). This interest was precipitated for me by a disconcerting lecture given by Dr. John R. Weisz at a conference in Niagara-on-the-Lake in which he contrasted the substantial positive effect sizes for outcomes from psychotherapeutic treatments of child mental health problems within studies of evidence-based interventions TO a mean effect size hovering around zero for outcomes from a set of more typical community mental health services (Weisz, Donenberg, Han, & Weiss, 1995). The possibility that some or many of our typically delivered services might have little to no effect was and is troubling.

Living in both academic and clinical worlds, and slowly learning from others, I have come to better understand that problems contributing to the research-practice gaps must be considered from both directions, i.e., not just a simplistic research-to-practice one-way street, but at least a two-way street with a practice-to-research direction. This is captured in the evolution of terminology in the field from “knowledge translation” (KT) to “knowledge exchange” (KE) (Graham et al., 2006). However, despite increased use of enlightened language (i.e., from KT to KE), it seems that both sides of the research-practice gap are still fraught with problems. The research side is not infrequently marred by problems with bias and inadequate rigour such that some of its findings need not be translated or transported across the metaphorical bridge. And on the clinical side, there is not infrequently practices that are underpinned by simplistic and outdated theories or a commitment to practice approaches that are impervious to new empirical research that may challenge such practices. Further obstructing pathways for productive exchange is the debris from contrived claims of clinical implications of some research findings (McLennan & Offord, 2003) and the claimed use of research to inform practice and policy when a stance has already been chosen and research findings

then selectively sought post-hoc to be used as ammunition against those who challenge already chosen courses, the so-called “political model” of research use (Weiss, 1979).

(*Try to finish with something positive to take off the provocative edge. Remember your lecture on potential harms from well-intentioned interventions from which the feedback was that your talk was “demoralizing”*). To one-up the previous visual metaphors, I propose there is also a wall at the bottom of the chasm (or perhaps canyon) that further contributes to research-practice gaps. Whereas the chasm or canyon may be a natural formation given the differing natures and philosophical foundations of research and clinical practice, the wall is a person-made obstacle, perhaps constructed to protect local beliefs and for fear of the potentially influencing ideas of the other. But as with non-metaphorical walls built for similar purposes, they are porous and can be penetrated or breached. While I hold no delusion that the Journal can meaningfully fill a canyon, I do hope our Journal can contribute to chipping ever increasing holes in the wall.

John D. McLennan
Editor

References

Graham, I., Logan, J., Harrison, M. B., Straus, S. E., Tetroe, J., Caswell, W., & Robinson, N. (2006). Lost in knowledge translation: Time for a map? *Journal of Continuing Education in the Health Professions*, *26*(1), 13-24. https://doi.org/10.1002/chp.47

Graham, P. (2000). Treatment interventions and findings from research: Bridging the chasm in child psychiatry. *British Journal of Psychiatry*, *176*(5), 414-419.

McLennan, J. D., Wathen, C. N., MacMillan, H. L., & Lavis, J. N. (2006). Research-practice gaps in child mental health. *Journal of the American Academy of Child and Adolescent Psychiatry*, *45*(6), 658-665. https://doi.org/10.1097/01.chi.0000215153.99517.80

McLennan, J., & Offord, D. R. (2003). Clinical and policy implications for prevention. *Journal of the American Academy of Child and Adolescent Psychiatry*, *42*(5), 513. https://doi.org/10.1097/01.CHI.0000056735.04343.13

Weiss, C. (1979). The many meanings of research utilization. *Public Administration Review*, *39*(5), 426-431.

Weisz, J. R., Donenberg, G. R., Han, S. S., & Weiss, B. (1995). Bridging the gap between laboratory and clinic in child and adolescent psychotherapy. *Journal of Consulting and Clinical Psychology*, *63*(5), 688-701. https://doi.org/10.1037/0022-006X.63.5.688