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**Editorial**

**Editorial: A Call for Greater Specification of Core Beliefs**

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Recently, there is a growing interest in scientific dissemination. This is due, as highlighted in other contributions (Beck et al., 2019; Loi & Di Guardo, 2015; Montesinos, 2008; Settineri & Merlo, 2022), to choices made by both university institutions and individual scientists. In the case of clinical psychology, this growing interest opens up the possibility of dialogue that includes different perspectives that can contribute to our understanding of the mind. In fact, clinical psychology would allow us to understand what is possible in terms of receiving information, processing it and using it to guide action. With direct reference to the current pandemic, psychological models of uncertainty and intolerance to uncertainty and alexithymia were capable of accounting for people's mental health difficulties, both in terms of normal and pathological responses to threat (Baker et al., 2020; Barchetta et al., 2021; Di Giacomo et al., 2020; Freeston et al., 2020; Koffman et al., 2020; Li et al., 2022; Merlo et al., 2021; Martino et al., 2021; Moroianu et al., 2021; Yousfi et al., 2021). In these terms clear definitions of the above-mentioned difficulties are fundamental.

Mental health difficulties are pervasive and researchers are increasingly recognising the impact of traumatic experiences on psychological welfare (Myles & Merlo, 2021; Myles et al., 2020; Spratt et al., 2022). Accordingly, it is critical that theoretical frameworks conceptualise mental health difficulties in a valid and reliable manner. Contemporary clinical theories advocate the importance of an individual's beliefs on their psychological welfare (Johnstone & Dallos, 2013; Westbrook, Kennerley & Kirk, 2011). However, 'core beliefs' are poorly defined and there is limited conceptual understanding of the origins and bases of core beliefs. This paper will discuss the theoretical role of core beliefs in mental health difficulties, with reference to several popular theories of the origins and nature of beliefs. Contemporary and past theories based on beliefs are numerous, often linked to different epistemological frameworks. The necessity for future research to evaluate the validity of these theories will be emphasised, with reference to the authors' own research and the conceptual challenges that have arisen in their fields.

Cognitive Behavioural Therapy (CBT) represents one of the most popular approaches to conceptualising and treating mental health difficulties (Johnstone & Dallos, 2013; Westbrook et al., 2011), with NICE guidelines recommending the use of CBT to support people with a variety of psychiatric diagnoses. Cognitive behavioural therapy supports people to identify and recognise the relationships between their thoughts, emotions, behaviours and physical sensations, and helps people to alter these facets to improve their psychological welfare. Furthermore, this theory argues that one's thoughts, emotions, behaviours and physical sensations arise as a consequence of one's 'core beliefs,' which reflect relatively stable assumptions about the nature of the self, world and future (Beck, 1979). However, the nature of core beliefs and their representation in the mind remains unclear.

Associative learning theory argues that the formation of associations underpins cognitions and behaviours. Specifically, it is argued that any discrepancy between the predicted outcome of a stimulus and the perceived outcome produces an increment in associative strength between the stimulus and outcome (Le Pelley, 2004; Le Pelley, Mitchell, Beesley, George & Wills, 2016; Mackintosh, 1975; Pearce & Hall, 1980; Pearce & Mackintosh, 2010; Rescorla & Wagner, 1972; Wagner, 1981). Thus, core beliefs may represent a network of associations culminating in assumptions about probabilistic relationships between stimuli and outcomes. Moreover, the label used to describe the respective core belief, such as "I am worthless," may reflect the most comprehensive verbal description of the way that the individual has learnt to think and behave. These associations may have a subsequent effect on thoughts, emotions, behaviours and physical sensations (Myles, 2021a, 2021b). For example, an individual may learn that the

contingency between their actions and outcomes is low, which has been reported to result in a reduced perception of control over their lives (Myles & Merlo, 2022a; Myles et al., 2021). Learning that the contingency between one's actions and outcomes is low may result in a core belief of 'helplessness' (Abramson et al., 1989; Abramson et al., 1978). Understanding the nature of such beliefs is essential, as this can inform the clinical interventions to better support people that feel helpless (Myles & Merlo, 2022b).

With reference to a completely different epistemological framework, what is referred to as 'dynamic psychology' opens up an alternative theory for conceptualising core beliefs; this explanatory framework takes into consideration the difference between the imaginary, the symbolic and the real (Lacan, 1974).

The register of the imaginary condenses what Freud had already said about narcissism (Freud, 1914; Lacan, 1936-1949) and the mechanism of identification (Lacan, 1961), key concepts to explain the process of constitution of the Ego. Indeed, the ego has a narcissistic constitution, as it is the product of the subject's identifications with the signifiers of relevant subjects. This reference is particularly relevant because:

- first, it considers the subject's imaginary register as directly involved in the structuring of beliefs (at a neurotic level);
- on the other hand, it never excludes the implication of the subject in existential dynamics, be it a neurotic or psychotic question (where belief assumes the characteristics of delusional subjective certainty, Lacan, 1958; 1975-1976);
- finally, we can consider the fact that what derives from the use that the subject makes of information is always linked to the imaginary and therefore to the narcissistic structure of the individual, therefore declined to individual narcissistic needs.

At this point, it is possible to understand that what is stated, transmitted and proposed by authoritative sources of scientific knowledge, even if of the highest level and supported by undeniable evidence, is always filtered by the subject's narcissistic imagination, which produces a personal declination of information which benefits and increases self-esteem rather than decreasing it. This must be considered with particular reference to the fact that the narcissistic disposition of each subject will not admit frustration, but rather satisfaction. These points are absolutely fundamental for understanding how the use of the subject's information is capable of constituting phenomena of considerable significance on a clinical level, as in the case of illness denial and what follows from it on a medical level (Corvino et al., 2011; Popoviciu et al., 2022).

In conclusion, despite fundamental models of mental health difficulties claiming that core beliefs maintain a fundamental role in psychological welfare, core beliefs are poorly defined and there is limited conceptual understanding of the origins and bases of core beliefs. In the above-mentioned examples, some of the fundamentals have been considered in order to highlight the necessity to keep methodological and theoretical roots as key concepts. This will help to avoid scientific failures, fake news and other phenomena that currently negatively impact people's lives (Coelho et al., 2020; Karos et al., 2020; Ho et al., 2020; Suthaharan et al., 2021; Settineri & Merlo 2020).

### **Conflict of Interest Statement**

The authors declare that the research was conducted in the absence of any potential conflict of interest.

## References

1. Abramson, L. Y., Metalsky, G. I., & Alloy, L. B. (1989). Hopelessness depression: A theory-based subtype of depression. *Psychological review*, 96(2), 358–372. <https://doi.org/10.1037/0033-295X.96.2.358>
2. Abramson, L. Y., Seligman, M. E., & Teasdale, J. D. (1978). Learned helplessness in humans: Critique and reformulation. *Journal of abnormal psychology*, 87(1), 49–74. <https://doi.org/10.1037/0021-843X.87.1.49>
3. Baker, S. R., Bloom, N., Davis, S. J., & Terry, S. J. (2020). *Covid-induced economic uncertainty* (No. w26983). National Bureau of Economic Research. <https://doi.org/10.3386/w26983>
4. Barchetta, S., Martino, G., Craparo, G., Salehinejad, M. A., Nitsche, M. A., & Vicario, C. M. (2021). Alexithymia is linked with a negative bias for past and current events in healthy humans. *International Journal of Environmental Research and Public Health*, 18(13), 6696. <https://doi.org/10.3390/ijerph18136696>
5. Beck, A. T. (Ed.). (1979). *Cognitive therapy of depression*. Guildford press.
6. Beck, S., Mahdad, M., Beukel, K., & Poetz, M. (2019). The value of scientific knowledge dissemination for scientists—A value capture perspective. *Publications*, 7(3), 54. <https://doi.org/10.3390/publications7030054>
7. Coelho, C. M., Suttiwan, P., Arato, N., & Zsido, A. N. (2020). On the nature of fear and anxiety triggered by COVID-19. *Frontiers in psychology*, 11, 581314. <https://doi.org/10.3389/fpsyg.2020.581314>
8. Covino, J. M., Stern, T. W., & Stern, T. A. (2011). Denial of cardiac illness: consequences and management. *The primary care companion for CNS disorders*, 13(5), 26217. <https://doi.org/10.4088/PCC.11f01166>
9. Di Giacomo, D. (2020). Public Health emergencies and quarantine: virtual patient engagement as challenge and opportunity for Mental Health strategy. *Mediterranean Journal of Clinical Psychology*, 8(2). <https://doi.org/10.6092/2282-1619/mjcp-2533>
10. Freeston, M., Tiplady, A., Mawn, L., Bottesi, G., & Thwaites, S. (2020). Towards a model of uncertainty distress in the context of Coronavirus (COVID-19). *The Cognitive Behaviour Therapist*, 13. <https://doi.org/10.1017/S1754470X2000029X>
11. Freud, S. (1914). Introduzione al narcisismo, vol. 7. *VII, OSF, Boringhieri*.
12. Ho, C. S., Chee, C. Y., & Ho, R. C. (2020). Mental health strategies to combat the psychological impact of COVID-19 beyond paranoia and panic. *Ann Acad Med Singapore*, 49(1), 1-3. <https://doi.org/10.47102/annals-acadmedsg.202043>
13. Johnstone, L., & Dallos, R. (2013). *Formulation in psychology and psychotherapy*. Routledge.
14. Karos, K., McParland, J. L., Bunzli, S., Devan, H., Hirsh, A., Kapos, F. P., ... & Ashton-James, C. E. (2020). The social threats of COVID-19 for people with chronic pain. *Pain*, 161(10), 2229. <https://doi.org/10.1097/j.pain.0000000000002004>
15. Koffman, J., Gross, J., Etkind, S. N., & Selman, L. (2020). Uncertainty and COVID-19: how are we to respond?. *Journal of the Royal Society of Medicine*, 113(6), 211-216. <https://doi.org/10.1177/0141076820930665>
16. Lacan, J. (1936-1949). Le stade du miroir comme formateur de la fonction du Je. *Revue française de psychanalyse*, 13(4), 449-455.
17. Lacan, J. (1958). *D'une question préliminaire à tout traitement possible de la psychose* (1966). Écrits. Le Seuil.
18. Lacan, J. (1961-1962). *Il Seminario. Libro IX: L'identificazione*, ed. it. a cura Di Ciaccia A., Einaudi, Torino.

19. Lacan, J. (1974). *Il Seminario. Libro XXII "RSI"*. ed. it. a cura Di Ciaccia A., Einaudi, Torino.
20. Lacan, J. (1975-1976). *Il Seminario Libro. XXIII Il Sintomo*. ed. it. a cura Di Ciaccia A., Einaudi, Torino.
21. Le Pelley, M. E. (2004). The role of associative history in models of associative learning: A selective review and a hybrid model. *The Quarterly Journal of Experimental Psychology Section B*, 57(3b), 193-243.  
<https://doi.org/10.1080/02724990344000141>
22. Le Pelley, M. E., Mitchell, C. J., Beesley, T., George, D. N., & Wills, A. J. (2016). Attention and associative learning in humans: An integrative review. *Psychological bulletin*, 142(10), 1111–1140.  
<https://doi.org/10.1037/bul0000064>
23. Li, R., Kajanoja, J., Lindblom, J., Korja, R., Karlsson, L., Karlsson, H., ... & Karukivi, M. (2022). The role of alexithymia and perceived stress in mental health responses to COVID-19: A conditional process model. *Journal of Affective Disorders*, 306, 9-18. <https://doi.org/10.1016/j.jad.2022.03.024>
24. Loi, M., & Di Guardo, M. C. (2015). The third mission of universities: An investigation of the espoused values. *Science and Public Policy*, 42(6), 855-870. <https://doi.org/10.1093/scipol/scv012>
25. Mackintosh, N. J. (1975). A theory of attention: Variations in the associability of stimuli with reinforcement. *Psychological review*, 82(4), 276-298. <https://doi.org/10.1037/h0076778>
26. Marchini, F., Langher, V., Napoli, A., Balonan, J. T., Fedele, F., Martino, G., ... & Caputo, A. (2021). Unconscious loss processing in diabetes: associations with medication adherence and quality of care. *Psychoanalytic Psychotherapy*, 35(1), 5-23. <https://doi.org/10.1080/02668734.2021.1922492>
27. Martino, G., Caputo, A., Vicario, C. M., Feldt-Rasmussen, U., Watt, T., Quattropiani, M. C., ... & Vita, R. (2021). Alexithymia, emotional distress, and perceived quality of life in patients with hashimoto's thyroiditis. *Frontiers in psychology*, 12, 667237. <https://doi.org/10.3389/fpsyg.2021.667237>
28. Merlo, E., Sicari, F., Frisone, F., Costa, G., Alibrandi, A., Avena, G., & Settineri, S. (2021). Uncertainty, alexithymia, suppression and vulnerability during the COVID-19 pandemic in Italy. *Health Psychology Report*, 9(2), 169-179. <https://doi.org/10.5114/hpr.2021.104078>
29. Montesinos, P., Carot, J. M., Martinez, J. M., & Mora, F. (2008). Third mission ranking for world class universities: Beyond teaching and research. *Higher education in Europe*, 33(2-3), 259-271.  
<https://doi.org/10.1080/03797720802254072>
30. Moroianu, L. A., Moroianu, M., Toma, A., Barbu, R. E., Ardeleanu, V., & Nitoi, L. C. (2021). Psychopathology in patients diagnosed with SARS COV 2: A brief report. *Mediterranean Journal of Clinical Psychology*, 9(1). <https://doi.org/10.6092/2282-1619/mjcp-2982>
31. Myles, L. (2021a). The Emerging Role of Computational Psychopathology in Clinical Psychology. *Mediterranean Journal of Clinical Psychology*, 9(1). <https://doi.org/10.6092/2282-1619/mjcp-2895>
32. Myles, L. (2021b). Using Prediction Error to Account for the Pervasiveness of Mood Congruent Thoughts. *Mediterranean Journal of Clinical Psychology*, 9(2). <https://doi.org/10.13129/2282-1619/mjcp-3130>
33. Myles, L., & Merlo, E. (2021). Alexithymia and physical outcomes in psychosomatic subjects: a cross-sectional study. *Journal of Mind and Medical Sciences*, 8(1), 76-85. <https://scholar.valpo.edu/jmms/vol8/iss1/12>

34. Myles, L., & Merlo, E. (2022a). Incongruities between Perceived Control and Desire for Control: A Mechanistic Account of Depression in Adolescence. *Psychiatria i Psychologia Kliniczna*, 22(1), 40-44.  
<https://doi.org/10.15557/PiPK.2022.0005>
35. Myles, L., & Merlo, E. (2022b). Elucidating the Cognitive Mechanisms Underpinning the Therapeutic Efficacy of Behavioural Activation. *International Journal of Psychological Research*, 15(1), 126-132.  
<https://doi.org/10.21500/20112084.5400>
36. Myles, L., Connolly, J., & Stanulewicz, N. (2020). The Mediating Role of Perceived Control and Desire for Control in the Relationship between Personality and Depression. *Mediterranean Journal of Clinical Psychology*, 8(3). <https://doi.org/10.6092/2282-1619/mjcp-2589>
37. Myles, L., Merlo, E., & Obele, A. (2021). Desire for Control Moderates the Relationship between Perceived Control and Depressive Symptomology. *Journal of Mind and Medical Sciences*, 8(2), 229-305.  
<https://doi.org/10.22543/7674.82.P299305>
38. Pearce, J. M., & Hall, G. (1980). A model for Pavlovian learning: variations in the effectiveness of conditioned but not of unconditioned stimuli. *Psychological review*, 87(6), 532-552.  
<https://doi.org/10.1037/0033-295x.87.6.532>
39. Pearce, J. M., & Mackintosh, N. J. (2010). Two theories of attention: A review and a possible integration. In C. J., Mitchell & M. E. Le Pelley (Ed.). *Attention and associative learning: From brain to behaviour* (pp. 11-39). Oxford, England: Oxford University Press.
40. Popoviciu, M. S., Marin, V. N., Vesa, C. M., Stefan, S. D., Stoica, R. A., Serafinceanu, C., ... & Stoian, A. P. (2022, January). Correlations between diabetes mellitus self-care activities and glycaemic control in the adult population: a cross-sectional study. In *Healthcare* (Vol. 10, No. 1, p. 174). MDPI.  
<https://doi.org/10.3390/healthcare10010174>
41. Rescorla, R. A., & Wagner, A. R. (1972). A theory of Pavlovian conditioning: Variations in the effectiveness of reinforcement and nonreinforcement. *Current research and theory*, 64-99.
42. Settineri, S., & Merlo, E. M. (2020). Fear of contamination. *Mediterranean Journal of Clinical Psychology*, 8(1).  
<https://doi.org/10.6092/2282-1619/mjcp-2424>
43. Settineri, S., & Merlo, E. M. (2022). Clinical Psychology & MOOC (Massive Open Online Courses). *Mediterranean Journal of Clinical Psychology*, 10(1). <https://doi.org/10.13129/2282-1619/mjcp-3401>
44. Spratt, C., Myles, L., & Merlo, E. (2022). Eating Disorders in Men: A Comprehensive Summary. *Journal of Mind and Medical Sciences*, 9(2), 249-254. <https://doi.org/10.22543/2392-7674.1362>
45. Suthaharan, P., Reed, E. J., Leptourgos, P., Kenney, J. G., Uddenberg, S., Mathys, C. D., ... & Corlett, P. R. (2021). Paranoia and belief updating during the COVID-19 crisis. *Nature human behaviour*, 5(9), 1190-1202.  
<https://doi.org/10.1038/s41562-021-01176-8>
46. Wagner, A. R. (1981). SOP: A model of automatic memory processing in animal behavior. In N. E. Spear & R. R. Miller (Eds.). *Information processing in animals* (pp. 15-58). New York, NY: Psychology Press.  
<https://doi.org/10.4324/9781315798820>
47. Westbrook, D., Kennerley, H., & Kirk, J. (2011). *An introduction to cognitive behaviour therapy: Skills and applications*. Sage.

48. Yousfi, M., Zaied, Y. B., Cheikh, N. B., Lahouel, B. B., & Bouzgarrou, H. (2021). Effects of the COVID-19 pandemic on the US stock market and uncertainty: A comparative assessment between the first and second waves. *Technological Forecasting and Social Change*, 167, 120710. <https://doi.org/10.1016/j.techfore.2021.120710>



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