

Volume 10, n 3, 2022

**Editorial**

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

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**Keywords:**

Core Beliefs; Clinical Psychology; Associative Learning; Dynamic Psychology.

**Citation:** Merlo, E.M., Myles, L.A.M., Settineri, S. (2022). Editorial: on Psychological Impact of Scientific Dissemination and Its Effects on General Population. *Mediterranean Journal of Clinical Psychology* 10(3).

<https://doi.org/10.13129/2282-1619/mjcp-3618>

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.

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