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THE EVALUATION OF NARCISSISTIC PERSONALITY DISORDER THROUGH FORMAL PSYCHOLOGICAL ASSESSMENT

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Abstract

Introduction: Narcissistic Personality Disorder (NPD) is characterized by overt and covert symptoms. The co-occurrence of opposite aspects, such as grandiosity and vulnerability, often implies high personal and social burdens. Consequently, the assessment of NPD has a key role to plan the most suitable treatment. The available assessment tools, despite their undoubted efficacy, show some critical issues, such as a non-exhaustiveness in investigating all the symptoms, redundancy and a time-consuming administration for both people and clinicians. This contribute aims at providing a new self-report tool to exhaustively and efficiently assess NPD in all its facets.

Method: In order to reach this goal, the Formal Psychological Assessment (FPA) was applied to build a new tool able to analyze an exhaustive set of NPD's symptoms, starting from the specific set of items. An initial list of 154 items was chosen from the 11 most used questionnaires and interviews assessing NPD, investigating a list of 42 clinical criteria taken from the literature and DSM-5. After the lists definition, the relations among items and clinical criteria were set and studied.

Results: A final list of 41 necessary and sufficient items investigating 39 clinical criteria emerged, allowing also to observe new relations among items, based on the clinical criteria they investigate.

Conclusions: The proposed tool could represent a new valid modality to evaluate NPD, since allows clinicians to investigate all the symptoms using less items, without loss in accuracy. The clinical implications are several, such as a quantitative and qualitative depiction of the patient's symptomatology, beyond its score; an easy distinction among the heterogeneous variants of narcissism, including overt and covert presentations. Finally, the possibility to choose the best individualized treatment, based on the patient answers.

THE RELATIONSHIP BETWEEN ATTACHMENT, DEFENSE MECHANISMS AND EATING DISORDERS

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Abstract

Introduction: Previous research has highlighted the role played by Attachment and Defense Mechanism (DM) in Eating Disorders, but few studies have verified the role played by the DM in mediating the relationship between attachment and food disorders. The purpose of this research is to fill this gap to better understand the mechanisms involved in Eating Disorders.

Method: The 5 questionnaires were administered to 283 subject aged between 18 and 49 years ($M = 22.33$, $DS = 4.81$). *TAS-20* consist of 3 scales: *ASQ* consist of 5 scales: Confidence (CON), Discomfort with closeness (DC), Relationships as Secondary (RS), Need for approval (NA), Preoccupation with Relationships (PR). *DSQ* consist of 4 scales: Maladaptive Style (MS), Image-distorting Style (IS), Self-sacrificing Style (SS) and Adaptive Style (AS). *EDI-2*, it is composed of many scales, we used two scales: General Psychological Maladjustment (GPM) and Eating Disorder Risk (EDR).

Results: Path analysis was conducted to test a model with Alexithymia as predictor variable, DM as mediators, and ED, Anxiety and Depression as outcome. The saturated model was executed, subsequently, in according with common procedure to test the saturated model all nonsignificant paths were removed and several indices indicated that the data fit the final model, $\chi^2(27) = 38.31$; $p = .07$, $CFI = .99$, $RMSEA = .03$ (90% CI = .00 – .06). The results showed a significant path from MS to EDR ($\beta = .30$; $p < .05$) and from MS ($\beta = .47$; $p < .05$), AS ($\beta = -.09$; $p < .05$), CON ($\beta = -.23$; $p < .05$), NA ($\beta = .17$; $p < .05$), to GPM. The results showed a significant path from CON ($\beta = -.30$; $p < .05$), NA ($\beta = .27$; $p < .05$), PR ($\beta = .26$; $p < .05$) to MS and from DC ($\beta = .18$; $p < .05$), RS ($\beta = .14$; $p < .05$) to IS. Moreover there was a significant path from PR ($\beta = .23$; $p < .05$) SS.

Conclusions: The results can have important effects in clinical practice, because they highlight the role played by the DM in mediating the relationship between Attachment, EDR and GPM.

DIAGNOSTIC EFFICIENCY OF THE RORSCHACH PERCEPTUAL AND THINKING INDEX (PTI) IN DISCRIMINATING ULTRA HIGH RISK (UHR) ADOLESCENT HELPSEEKERS FROM NON-UHR

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Abstract

Introduction. Rorschach Perceptual and Thinking Index (PTI) has been proved effective in differentiating adolescents at ultra-high risk for psychosis (UHR) from non-UHR patients, evaluated with the Structured Interview for Prodromal/Psychosis-risk Symptoms (SIPS). However, the diagnostic efficiency of Rorschach PTI has never been examined. The aim of this study is to evaluate the diagnostic efficiency of the Rorschach PTI in discriminating UHR from non-UHR adolescents helpseekers.

Methods. A sample of 155 patients, 47% males, (14-18 years) were included and referred to the clinic for Anxiety and Mood Disorders in Adolescence (Department of Psychiatry of Sant'Andrea Hospital in Rome). Subjects met diagnostic criteria for the following DSM-5 diagnoses: Anxiety Disorders (30%), Depressive Disorders (40%), Bipolar Disorders (15%), Obsessive-Compulsive Disorders (10%); UHR patients were 19. The sample was evaluated with the Rorschach (calculated according to the standard Comprehensive System Method) and with the SIPS. The cut-off for the PTI index was fixed to 3.

Results. Rorschach PTI reported the current efficiency diagnostic indexes: Overall Correct Classification (OCC) was 0,87; Sensitivity (SENS) was 0,63; Specificity (SPEC) was 0,90; Positive Predictive Power was 0,48; Negative Predictive Power was 0,94; Cohen's κ was 0,47.

Conclusions. Rorschach shows a moderate ability to differentiate UHR from non-UHR adolescent patients, especially in the identification of the subjects that do not present UHR.

PSYCHOLOGICAL SOCIAL AND EMOTIONAL IMPAIRMENTS ARE ASSOCIATED WITH ADHERENCE AND HEALTHCARE SPENDING IN TYPE 2 DIABETIC PATIENTS: AN OBSERVATIONAL STUDY

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Abstract

More than three million of Italians suffer from diabetes. The economic impact could be explained by poor adherence to the treatment. Previous studies showed that emotional, psychological and social impairments may have an influence on adherence to the treatment in diabetics.

The aim of the present study was to assess the association among anxiety, depression, stress, social and emotional abilities with adherence and healthcare spending.

Sixty-four type 2 diabetic patients were enrolled. Interpersonal Processes of Care (IPC), Toronto Alexithymia Scale (TAS-20), Rapid Stress Assessment Scale (RSAS), Morisky Medication Adherence Scale (MMAS-4), Visual Analogic Scale (VAS) and a questionnaire regarding the economic healthcare spending in the last 12 months were administered.

The correlation analysis showed that anxiety and social support scores (RSAS) were significantly related to Morisky Medication Adherence scores ($r=-.26$ $p=.035$; $r=.27$ $p=.028$). Mathematical linear regressions models confirmed the predictive effect of anxiety and social support (RSAS) on Morisky Medication Adherence scores. Moreover, medication adherence was significantly correlated to anxiolytics use ($r=-.26$ $p=.040$) and the mathematical linear regressions models showed a predictive effect of adherence scores on anxiolytic use. Finally, anxiety, depression and aggressiveness scores (RSAS) were related to the number of general check-up ($r=.31$ $p=.013$; $r=.38$ $p=.002$; $r=.43$ $p<.001$). TAS-20 total and TAS-20 F3 were positively correlated with the number of hospitalization days ($r=.41$ $p=.001$; $r=.31$ $p=.011$), while physician-patient communication (IPC) showed a negative correlation to the number of hospitalization days ($r=-.35$ $p=.005$).

Future studies should test whether brief psychological intervention may increase the adherence and reduce the healthcare spending in diabetic patients.

AFFECTIVE NEUROSCIENCE PRIMARY BRAIN EMOTIONAL SYSTEMS BETWEEN ULTRA-HIGH-RISK (UHR) AND NON-UHR ADOLESCENT HELPSEEKERS

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Abstract

Introduction. Several risk factors have been identified at the onset of schizophrenia and other psychotic disorders, especially in *Ultra-High-Risk* (UHR) samples. It might be useful to focus attention on structural characteristics of personality in order to identify individuals at risk for psychosis more accurately. The aim of the present study is to investigate the differences of the six primary brain emotional systems between UHR and non-UHR adolescent patients.

Methods. A sample of 95 patients, 48% males, (14-18 years) were included and referred to the clinic for Anxiety and Mood Disorders in Adolescence (Department of Psychiatry of Sant'Andrea Hospital in Rome). Subjects met diagnostic criteria for the following DSM-5 diagnoses: Anxiety Disorders (30%), Depressive Disorders (40%), Bipolar Disorders (15%), Obsessive-Compulsive Disorders (10%); UHR patients were 12. The sample was evaluated with the Affective Neuroscience Personality Scales 2.4 (ANPS 2.4) and with the Structured Interview for Prodromal/Psychosis-risk Symptoms (SIPS).

Results. There were no significant differences based on gender ($F=0,747$; $p=.390$) and age ($F=1,850$; $p=.177$). With regard to emotional-motivational systems, there are significant differences between non-UHR and UHR in SEEKING ($F=9.233$; $p=.003$) and Dominance ($F=7.371$; $p=.008$).

Conclusions. UHR adolescent patients showed a higher level of “mental energy” to explore, to discover and to over-interpret surroundings, as well as a greater propensity to read social reality in terms of competition, rank and control.

MATERNAL BONDING, SELF-ESTEEM AND EATING DISORDER RISK. THE ROLE OF BODILY SHAME

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Abstract

Introduction. Despite considerable evidence on the association between bodily shame and eating pathology, unfortunately, less is known about predisposing factors linked to these feelings and the pathways through which they may operate in eating disorder development. The aim of the present study was to contribute to this field by providing a preliminary understanding of the relationships among perceived maternal bonding, self-esteem, body shame, and eating disorder risk in a non-clinical population. Specifically, the path analysis examined whether the association between maternal bonding and body shame would be mediated by self-esteem. Also, the model tested the potential mediating roles, in the link between self-esteem and eating disturbances vulnerability, of bodily shame and exploring the moderator effect of gender and body mass index on the association between eating disorder risk and feelings of body shame.

Methods. 1156 high school students ages 14-18 were screened by means of self-report measures of parental behavior as perceived by the offspring, self-esteem, body shame and eating disorder risk. Each individual was weighed and his/her height measured. The AMOS software was used to analyze the hypothesized mediation model through a path analysis.

Results. The perception of maternal hyper-involvement and lack of sufficient caring had an indirect influence on body shame via self-esteem. The experience of shame related to one's body appeared to have a significant influence on eating disturbances vulnerability and it also serves as a mediator between self-esteem and eating disturbance risk. Moreover, the impact of body shame on eating disturbances vulnerability is moderated by the participants' gender, but not by body mass index.

Conclusions. The emotion of shame may enhance our understanding of eating disorders, as well as being a salient factor for development of preventive programs and treatment approaches. Further studies on this construct would be very useful.

PREVENTION AND TREATMENT OF CHILDHOOD OBESITY: DESIGN AND IMPLEMENTATION OF AN INTERACTIVE TOOL FOR DAILY USE

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Abstract

This presentation offers an overview of the methodological and theoretical construct of an innovative intervention program on childhood obesity. A controlling and intrusive parental attitude is considered to adversely affect child's self esteem and ability to recognize and self-regulate interoceptive experiences. The lack of interoceptive awareness leads to an increased risk of alterations in their eating behavior. Because of the triggered vicious cycle, the sense of inadequacy and lack of interoceptive awareness could lead to compensatory overeating, which in turn, would give raise to greater overprotective parenting, promoting the maintenance of unhealthy eating habits. The linkage between these variables is the main focus of our research project.

The program will be implemented through the development of an interactive tool and the child will share his identity with a game. It consists of two elements. The first is a character (robot) on which the child will transfer information regarding his lifestyle and healthy diet. The second is a device, worn on a daily basis, that will monitor some of the child's vital parameters, and also gather information with regards to his activities that will be transferred to the static element. The game is characterized by a set of sounds, colors and expressions that will indicate the emotional and physical state of the character: these will depend on the child's diet and physical activities.

This playful device will be proposed as an enabler of the child's responses, it will support the development of sensitivity to bodily signals and sensations, leading thus to greater autonomy and self-awareness, which could support the avoidance of dysfunctional eating behaviors. It will be through this device that children can access progressively healthier lifestyle. The current project appears to be an innovative study in the field of childhood obesity, and represents a new avenue for the development of intervention programs.

PSYCHOLOGICAL OUTCOMES OF GENETIC TESTING FOR HEREDITARY CANCER RISK: A REVIEW OF THE LITERATURE

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Abstract

The presence of mutations in BRCA1 and BRCA2 genes is associated with an increased lifetime prevalence of developing breast and/or ovarian cancer in women, and a higher risk of prostate cancer in men (Thompson et al., 2002). Hence, in the last few years the detection of these genes has opened new fields to individualize medicine and an expanded approach for genetic testing. In general, BRCA1 and BRCA2 mutation carriers are offered a surveillance program aimed at detecting a possible early onset of disease.

Thus, the BRCA genetic testing has both medical and psychosocial consequences for individuals and for their family (Hamilton et al., 2016).

The aim of present study was to conduct a systematic review of short- and intermediate-term psychological effects of genetic testing in BRCA mutation carriers.

Scopus and PubMed databases were searched over the period 1998-2018. Through the PRISMA method, a total of 22 articles were included in the current review: nine comprised women and men, twelve only women and one manuscript only men. The total number of females and males considered in these papers is rather unbalanced with men representing only 10% compared with women.

With regard to affective states, seven studies focused specifically on anxiety and depression, nine on distress, four on both distress and anxiety/depression and two studies on emotional states.

Overall, findings showed that genetic test is associated with the presence of negative emotion such as anger and hostility, high levels of anxiety and depression, that persist over time, in correspondence to positive genetic results.

However, in the considered research we noticed a lack of specific measurements, which could more clearly identify psychological outcomes of cancer-affected mutation carriers.

Hence, wider investigations are required to deeper the knowledge about the affective experience of individuals who undergo the genetic testing, also in order to plan appropriate psychological interventions.

SCREENING FOR SYMPTOMS OF ANXIETY IN EPILEPSY: A CLINIMETRIC ANALYSIS

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Abstract

Anxiety has been considered one of the most important but still under-detected symptoms affecting patients with epilepsy. The latest consensus statement looking for a comprehensive clinical evaluation in epilepsy recommended the Hospital Anxiety and Depression Scale (HADS) as screening measure for anxiety in epilepsy. However, a recent research report clearly evidenced the psychometric inadequacies of the HADS total scale score covering not the pure symptoms of anxiety but a mixture of psychic and somatic anxiety combined with aspects of psychological well-being. In the attempt to answer to the urgent need to provide a clinically valid screening measure for anxiety in this medical setting, we have performed a clinimetric analysis aimed at evaluating to what extent one single item is statistically sufficient for screening for symptoms of anxiety in epilepsy. In this regard, the individual anxiety item from the Screen for Children Anxiety Related Emotional Disorders Scale (SCARED) was selected and tested according to clinimetric principles. The total sample consisted of patients with a medical diagnosis of epilepsy compared to a control group of healthy participants. The single item identified symptoms of anxiety in 24.1% of patients with epilepsy with a percentage of 0.0% among controls, whereas prevalence rates of 72% and 24% in the epilepsy group and healthy respondents respectively were found when using the conventional SCARED anxiety subscales. This was obviously a problem of over-diagnosis leading to false positives. Such a problem has not been found with single item that was statistically and clinically superior to the conventional anxiety subscales as screening measure for detecting symptoms of anxiety in epilepsy.

FINE MOTOR SKILLS IN PRE-SCHOOL CHILDREN WITH ACUTE LYMPHOBLASTIC LEUKEMIA COMPARED WITH HEALTHY PEERS: A PRELIMINARY STUDY

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Abstract

CNS-directed leukemia therapies can adversely affect the acquisition of new skills, such as motor skills (Taverna et al., 2017), with schooling difficulties (Tremolada et al., 2018) and self-esteem problems (Tremolada et al., 2017). The goal of the present study is to assess fine motor skills in pre-school children with leukemia during the acute phase of first year of treatment and comparing their performance with those of matched healthy peers.

Participants were 13 children, with a mean age of 58.31 months (SD=9.09; range: 44-70), including 7 females and 6 males. All participants were affected by acute lymphoblastic leukemia (ALL), 7 with a high risk leukemia and 6 with a standard risk leukemia. Children were assessed with the manual dexterity scale of the MABC-2.

A series of non-parametric Wilcoxon tests were run to identify the possible significant mean ranks differences between pediatric patients and healthy peers in the several scales of the motor development skills. Results showed a significant difference between the two groups in: 1. posting coins standardized score when using the non-preferred hand ($Z=-3.11$, $p=0.002$) with patients obtaining lower scores (Mean=7.69, SD=3.19) than the control group (Mean=11.38; SD=1.89); 2. in the thread beads standardized task ($Z=-2.72$, $p=0.006$) with the clinic group with a worse performance (M=9.31, SD=3.27) than the healthy one (M=13.23, SD=2.94); 3. in general manual dexterity standardized score ($Z=-2.32$; $p=0.02$), lower in patients (M=8.92, SD=3.09) than controls (M=11.53, SD=1.66). ALL participants' age was negatively significantly correlated with the grapho-motor task performance ($\rho = -0.74$; $p=0.004$).

Children with ALL showed a poorer fine motor skill's general performance than healthy controls and older age of ALL participants was associated with higher risk of impaired grapho-motor abilities. Occupational therapy intervention is needed children with leukemia in order to improve their fine motor abilities.

THE TERTIARY VICTIMS: RISK FACTORS AND PROTECTION

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Abstract

In the last ten years the Psychology of Emergency has been accredited in Italy as an important field of application. This research has spread throughout the country investigating the coping strategies, resilience and the ability to infer the intentions and emotions of the emergency workers. The research involved 381 rescuers (M = 55%, M = 45%) related to both professionals and volunteers to the area of emergency medical technician who recruited via the internet (mean age 34 years, SD = 8.13). Three self-report tests were administered: RSA, MET, COPE-60. The average age of service is about 7 years (SD = 99.1). From the correlation analysis it showed that the avoidance strategies correlate negatively with all RSA size, for which the subjects are able to adaptively cope with highly stressful situations. Interesting data is the average MET score (23.0, ds = 5.74). The participants, however, manage to fill this deficit through the implementation of functional coping strategies such as orientation to the problem and positive attitudes. The results show a statistically significant difference between the Professionals and the Volunteers, the professionals have the highest future perceptions of the volunteers ($F = 4.64$; $p < 0.01$) (MP = 15.28; MV = 13.40). Furthermore, social skills and family support are also higher in professionals ($F = 5.06$; $p < 0.01$) (MP = 20.13 MV = 16.99); $F = 6.06$; $p < 0.05$) (MP = 17.77 MV = 16.11). The results show that despite the work in highly stressful situations, the operators are able to self-regulate and prevent possible clinical outbreaks through the use of adaptive strategies and skills.

BODY IMAGE, RESILIENCE AND QUALITY OF LIFE IN PATIENTS OF TYPE 1 DIABETES

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Abstract

The Italian population with diabetes is in 5.3% of the entire population. The disease is most prevalent in the South where there emerges a percentage of 5.8% compared to 4.0% in the North.

The objectives of this work are:

- observe the possible presence of body disperception in patients with type 1 diabetes mellitus;
- consider how these patients perceive their illness in relation to the body image;
- to evaluate the presence of a statistically significant correlation between the perception of the disease and the resilience strategies.

The research was conducted on a sample of 157 subjects, 92 females and 65 males, with a mean age of 23.18 (dst = 8.23) through the administration of a test battery formed by the Illness Perception Questionnaire to assess the perception of the disease, Quality of Life to evaluate the perceived quality of life, Resilience Scale for Adults to observe the strategies of resilience and Body Uneasiness Test to evaluate the perception of the body image. The subjects were recruited in various Sicilian clinics.

This study confirms the literature on the presence of bodily disperception in diabetic subjects (GSI = 1,204 dst = 0.79). There is a correlation between body despair and the duration of the disease ($p < 0.01$), which confirms the literature. In the end the results show a statistically significant correlation between the size of the RSA and the perception of the disease ($p < 0.01$), except for the size of the duration of the disease that does not correlate with resilience.

BUILDING EMOTIONAL SECURITY IN MIDDLE CHILDHOOD THROUGH PARENTAL MENTALIZATION

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Abstract

Introduction: Mentalization, operationalized as Reflective Function (RF; Fonagy *et al.*, 1991), involves the capacity to consider self and others in terms of mental states and also the ability to understand that self and other behaviors are underpinned by psychological motivations, thought, feelings and desires. Despite the considerable number of studies that underlain the importance of parental mentalization as a protective factor for child's development (Slade *et al.*, 2005), data on the relationship between parental RF and emotional security in middle childhood are still lacking.

Aim: this study aims to investigate the role of parental mentalization in influencing their children's emotional security in middle childhood.

Method: the study involved 75 participants (25 Italian family triads): 25 mothers, 25 fathers, 25 children aged 9-14 ($M = 11.29$, $SD = 2.42$). All parents completed the *Adult Attachment Interview* (George *et al.*, 1985), coded using the *Reflective Functioning Scale* (RFS; Fonagy *et al.*, 1998), while children completed the *Child Attachment Interview* (CAI; Shmueli-Goetz *et al.*, 2008).

Results: data showed significant positive association between maternal RF and security CAI subscales, as Emotional Openness ($r .492$, $p=.015$) and Resolution of Conflicts ($r .479$, $p=.015$), and negative association between maternal RF and Involving Anger with both mother ($r -.397$, $p=.050$) and father ($r -.485$, $p=.016$). Regression analysis showed that maternal RF represents a significant predictor ($p < .05$) of Emotional Openness ($\beta =.43$) and Resolution of Conflicts ($\beta =.42$). None associations between paternal RF and CAI subscales were found.

Conclusion: results show that maternal RF plays a crucial role in middle childhood for the development of children's emotional security, considered as the ability to contemplate a complex range of feelings within the relational life episodes. On the other hand, paternal RF will probably display a stronger role during permanent adolescence.

MALADAPTIVE EMOTIONAL-BEHAVIORAL FUNCTIONING IN ADOLESCENCE: AN EMPIRICAL STUDY

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Abstract

International literature pointed-out the high prevalence of mental health problems among adolescents. A few number of studies tried to deepen adolescents' emotional and behavioral functioning related to road accidents, but peculiar psychopathological issues in this developmental stage are not yet clear. The present study aims to identify adolescents' maladaptive profiles (in terms of alexithymics traits, impulsivity, internalizing and externalizing symptoms) in a sample of adolescents victims of road accidents. The research sample consists of N=100 adolescents addressing emergency departments following motor vehicle accidents, who filled out a set of questionnaires: Youth Self-Report (YSR), Toronto Alexithymia Scale-20 (TAS-20), Barratt Impulsiveness Scale-11 (BIS-11) and Binge Eating Scale (BES). The results indicated a specific cluster of adolescents, involved in high number of road accidents, who show severe psychopathological profiles, such as binge eating behaviors, high levels of internalizing and externalizing symptoms, alexithymic symptoms and impulsivity. Others participants, involved in a moderate numbers of road accidents, show binge eating symptoms, moderate levels of emotional-behavioral problems and alexithymic traits. A last group of adolescents with a moderate number of accidents, didn't show binge eating problems or other emotional and behavioral difficulties. This study indicated that nonfatal injuries among adolescents could be associated with maladaptive psychological symptoms. The results of the present study offer an empirical support to clinical and therapist working with adolescents, indicating specific psychopathological profiles to be taken into account for the organization of prevention and intervention programs.

A MODEL OF PROBLEMATIC FACEBOOK USE: HIGHLIGHTING THE ROLE OF PREFERENCE FOR ONLINE INTERACTION AND MOOD REGULATION

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Abstract

A validated theoretical model of Problematic Facebook Use (PFU) is currently lacking in the literature. The cognitive-behavioral model of generalized Problematic Internet Use (PIU) proposed by Caplan (2010) may provide a conceptual basis for understanding the problematic use of Social Networking Sites. The present study aimed at contributing to the discussion on the conceptualization of PFU by testing the feasibility of the cognitive-behavioral model of generalized PIU in the context of PFU.

The Italian version of the Problematic Facebook Use Scale (PFUS; including five subscales, i.e., preference for online social interaction (POSI), mood regulation, cognitive preoccupation, compulsive use, and negative outcomes) was administered to 815 young Italian adults. A Structural Equation Modeling analysis was used to test the theoretical model and its predictions. Direct effects: POSI resulted to be a positive predictor of Facebook use for mood regulation ($\beta = .46, p < .001$) and of deficient self-regulation ($\beta = .30, p < .001$); using Facebook for mood regulation was a positive predictor of deficient self-regulation ($\beta = .53, p < .001$); and deficient self-regulation resulted to be a positive predictor of negative outcomes of Facebook use ($\beta = .92, p < .001$). Indirect effects: a positive relationship was found between POSI and deficient self-regulation, mediated by mood regulation ($\beta = .24, p < .001$); between POSI and negative outcomes, mediated by deficient self-regulation ($\beta = .28, p < .001$); and between mood regulation and negative outcomes, mediated by deficient self-regulation ($\beta = .49, p < .001$).

The results supported the cognitive-behavioral model of PFU. Using Facebook to regulate mood and preference for online social interaction appear to predict difficulties in regulating Facebook use, which in turn predicts negative outcomes of Facebook usage. This finding may help further studies to focus on potential targets for prevention and treatment of PFU.

THE IMPACT OF ADULT ATTACHMENT ORIENTATIONS ON PERSONAL WELL-BEING: THE MEDIATING ROLE OF RESILIENCE AND MINDFUL AWARENESS

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Abstract

Personal well-being is a multidimensional concept of great relevance to individuals' health and adjustment (Ryff, 1989) and it's directly and indirectly affected by several subjective and environmental factors, among which attachment orientations play a central role (Mikulincer & Shaver, 2007).

The aim of this study was to verify the mediating role of personal resilience and mindful awareness in the impact of attachment orientations on personal well-being. In this cross-sectional study, 101 adult participants (59 females; age 19-70 years) completed the following self-report instruments: Experiences in Close Relationships Scale-Revised (ECR-R); Psychological Well-Being (PWB); Acceptance and Action Questionnaire – II (AAQ-II); The Five Facet Mindfulness Questionnaire (FFMQ); Resilience Scale for Adults (RSA). To verify the direct influence of attachment on personal well-being and the mediating role of resilience and mindful awareness, correlation and multivariate mediational analyses were carried out.

The results of the mediational analyses showed a significant negative direct impact of attachment-anxiety and attachment-avoidance on personal well-being, which was fully mediated by resilience, mindful awareness, and acceptance. In other words, attachment insecurities tend to decrease individual levels of resilience and mindful awareness, which in turn lower personal well-being.

The present study suggests that developing mindful awareness and resilience abilities, also through mindful awareness and resilience based interventions, might enhance positive functioning and well-being could be improved.

SYMPATHETIC-ADRENO-MEDULLAR STRESS REACTIVITY IN A SAMPLE OF FIRST EPISODE PANIC DISORDER

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Abstract

Introduction: Reported findings on reactivity to stress of the sympathetic-adreno-medullar (SAM) and hypothalamic-pituitary-adrenal (HPA) systems in panic disorder (PD) are very variable. This inconsistency may be explained by differences in treatment exposure, illness duration and emotion regulation strategies. The present study examined the reactivity to mental stress of the SAM and HPA axes in a sample of first episode, drug naïve patients with PD which avoids confounds of medications exposure and illness chronicity.

Methods: Activation of the SAM axis was evaluated by dosage of salivary alpha-amylase (sAA) and heart rate. Activation of the HPA axis was tested by dosage of salivary cortisol. Psychological assessments were done by the Self-Rating Depression Scale, the Self-Rating Anxiety Scale, the State-Trait Anxiety Inventory, the Cope Orientation to Problems Experienced (COPE) Inventory and the 16 Personality Factor Questionnaire(16PF).

Results: Patients showed reduced sAA stress reactivity ($p = .005$), higher baseline cortisol levels ($p = .001$) and a more rapid decrease in stress cortisol levels as compared with controls ($p = .001$). A significant correlation was found between active coping strategies and cortisol levels (response to stress) ($p = .04$).

Conclusions: The findings suggest that blunted SAM stress reactivity and a rapid decrease in stress cortisol levels reflect traits that may enhance vulnerability to psychopathology in patients with PD.

ARE EMOTIONAL AWARENESS AND TRAIT EMOTIONAL INTELLIGENCE INDEPENDENT CONSTRUCTS? AN EXPLORATION DURING CHILDHOOD

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Abstract

The present study sought to compare the two constructs of Emotional Awareness (EA) and trait Emotional Intelligence (EI) in a sample of Italian school aged children. EA has been defined as the ability of an individual to identify and describe one's own emotional experiences and those of others (Lane & Schwartz, 1987). In order to measure EA in childhood, Bajgar and co-workers (2005) have recently created the Level of Emotional Awareness Scale for children (LEAS-C). Results of previous validation studies suggest that the reliability of the LEAS-C is acceptable and the inter-rater reliability is high. EA could be considered a central constituent of EI and LEAS has been defined as an attractive methodology for the measurement of EI as it combines characteristics of both the trait and the ability approach. However, to our knowledge, no studies have explored the relationships between EA measured using the LEAS-C and trait EI an umbrella construct for the emotion-related aspects of personality (Petrides et al., 2007). Five hundred and fourteen students (52,87 % females) ranging in age from 8 to 12 years (*Age* = 10.08; *SD* = 1.38), recruited from primary and middle State Schools, were asked to complete the LEAS-C and the Trait Emotional Intelligence Questionnaire (TEIQue-CF; Mavroveli et al, 2008; Cronbach α = .88). Pearson correlation revealed a low association ($r = .14$; $p < .01$) between the scores. This result seems to testify a relatively independence between EA and trait EI during childhood. From a theoretical point of view, this result is consistent with the different theorizations at the basis of the TEIQue, which provides a self-assessment of the emotional perceptions located at the lower levels of personality hierarchies, and the LEAS, an emotion-based performance task. As trait EI takes into accounts emotion perception, regulation and management, which are central variables for children's emotional experience, such construct might account for individual differences in a more comprehensive way than EA.

TRAIT EMOTIONAL INTELLIGENCE AND DRAW-A-PERSON EMOTIONAL INDICATORS: PRELIMINARY OUTCOMES IN CHILDREN

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Abstract

Developed originally by Goodenough (1926), the Draw-A-Person test (DAP) is a projective drawing task that is often used in psychological assessments of children to develop hypotheses about the subject's cognitive, developmental, and emotional functioning, as well as personality style. Given the link between the child's graphic activity and the expression of emotions, this work focuses on the DAP test as an expressive area intrinsically linked to both personality and emotions, as described by the trait Emotional Intelligence (EI) model (Petrides et al., 2007). Scholars has shown a link between trait EI (a constellation of emotional self-perceptions located at the lower levels of personality) and psychological health in adults, as well as in children, together with a strong association of the construct with expression of emotions which is crucial to experience and to the expression of behavior and thoughts, and it may be well-represented by children drawings.

We assume that trait EI can be a reliable predictor of emotional expression revealed by the DAP test, over and above personality traits, as measured by the Big Five Questionnaire for Children (Barbaranelli et al., 2002). A self-report form to assess trait EI, a personality questionnaire and the DAP test were administered to a sample of 82 Italian children (51.2% females; *Mage* = 8.11; *SD* = 0.35). Data from hierarchical regression analysis support the hypothesis and suggest a predictive significant effect of trait EI on emotional indicators in children's drawings ($\beta = .36, p < .05$). Moreover, the effect of the Big Five decreased and was no more significant when trait EI was entered into the model.

Future investigations should replicate these results in larger samples and in cross-cultural settings, as children's drawings are partially reflective of their culture. Notwithstanding these limitations, our results may have practical implications particularly with respect to programs and policies addressing the prevention of emotional distress in children.

TYPE A BEHAVIOR IN THE GENERAL POPULATION: PREVALENCE AND CORRELATES

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Abstract

Type A behavior (TAB) has been studied especially in cardiac patients, while it has been less investigated in the general population.

This cross-sectional study examined the prevalence of TAB and its demographic and psychological correlates in a community sample.

Five hundred subjects (50% men, mean age 41 ± 16.1 years, 49.4% married or living as married) completed the Bortner Scale, the Symptom Questionnaire, the Perceived Stress Scale, the Brief Coping Orientation to Problems Experienced, and the Big Five Inventory-10.

According to the Bortner Scale cut-off values, 24 subjects (4.8%) were classified as type A1, 314 (62.8%) as A2, 160 (32%) as B2, and 2 (0.4%) as B1.

TAB was positively associated with younger age, female gender, perceived stress, anxiety and hostility symptoms, conscientiousness, extraversion, and venting and planning coping strategies. Type A subjects were also less prone to adopt the behavioral disengagement coping strategy and had lower agreeableness and emotional stability scores than type B subjects. In logistic regression analysis, younger age, hostility, conscientiousness, extraversion, and lower levels of emotional stability and behavioral disengagement independently predicted the presence of TAB.

Our results are consistent with previous findings of a significant relationship between TAB and stress, hostility, and anxiety. Also a positive association between TAB and neuroticism found in preliminary studies seems to be confirmed.

Although type A subjects are more emotionally distressed than type B subjects, they also show some adaptive personality traits and coping strategies. The strengthening of these coping and personality resources could be a target of psychological interventions for TAB, especially in the setting of cardiac rehabilitation programs.

Further studies are needed to confirm our findings through an interviewer-based assessment of TAB and identify which specific components of TAB account for the observed significant associations.

POST-PARTUM DEPRESSION: A PSYCHODYNAMIC RESEARCH IN A MATERNITY WARD

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Abstract

Post-partum depression (PPD) affects 10–15% of women (ISTAT, 2016). Psychodynamic studies show that the main consequence of PPD is the repercussion on maternal function in terms of difficulty in responding to requests for childcare, insufficient holding and lack of responsiveness (Ammaniti, 2014; Monti, 2005). Several studies (Milgrom et al, 2008; Mirabella et al., 2017) have highlighted the early interventions' need, aimed at preventing the risk and reducing the consequences. Few studies (Saita et al, 2017) report interventions carried out a few days after the birth, evaluating not only the post-partum phase but also the perinatal one, in line with the changes of DSM-5 (APA, 2013), in which the statement "with postpartum onset" "has been replaced by "with peripartum onset". For these reasons, our study aims to identify for the first time, possible PPD indicators at 1 day after delivery. We met, few hours after the birth, 91 women (M: 32,93; SD: 5,02 years) at the maternity ward of San Paolo Hospital in Naples. Edinburgh Post-Natal Depression Screening Scale (EPDS) (Cox et al, 1987; Benvenuti et al, 1999), and Beck Depression Inventory-II (BDI-II) (Beck et al, 1996; Ghisi et al, 2006) were administered. In our study, the internal consistency coefficients for the scales are .78 for EPDS and .70 for BDI-II. The 9% of the sample is considered at risk by BDI-II compared to 64% of mothers considered at risk by the EPDS. Data analysis showed PPD indicators already a few hours away from the birth, especially through EPDS. Furthermore, we plan to verify them through a longitudinal study on the sample to prove if they reflect a maternity blues or a depressive symptomatology.

RISKING DEVELOPMENTAL PATHWAYS OF PRESCHOOL CHILDREN AFTER ONE YEAR OF CANCER TREATMENTS

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Abstract

During infancy children acquire abilities that could later predict positive school success. Three main areas have been investigated by recent studies underling long term effects of cancer disease in young children: cognitive sequelae (Shah et al., 2008; Lewis et al., 2013), motor performance delays (Scheede-Bergdahl et al., 2013; Götte et al., 2015), and social impairments (Tremolada et al., 2017). This study aimed at identifying more at risk developmental areas in preschool children after one year of treatments matching very young patients with healthy peers of same age and gender.

Participants were 48 children and their families recruited at Haematology-Oncologic Clinic of the Department of Child and Woman Health (University of Padua), paired with healthy preschoolers contacted through pediatricians' ambulatories. Children's mean age was 4.36 years (SD=1.07, range=1.91-6 years), equally distributed by gender, mostly diagnosed of Acute Lymphoblastic Leukemia (N=44).

Participants were assessed with the Vineland Adaptive Behavior Scales (Balboni et al., 2003) a semistructured interview investigating communication, daily living skills, socialization and motor skills. Paired-sample t-tests revealed that the clinical group showed a lower performance on verbal communication, especially in receptive ($t_{47} = - 5.40$; $P = .001$) and expressive language ($t_{47} = - 5.42$; $P = .001$), social domain ($t_{47} = - 5.52$; $P = .001$) and gross ($t_{47} = - 2.38$; $P = .002$) and fine motor skills ($t_{47} = - 1.93$; $P = .05$).

Findings of this study reveal that already one year after treatments ALL children need to fill the gap with healthy peers on communication skills and motor performance. Taking into account the importance of these domains on later academic achievement, specialized interventions for parents and for cancer children are suggested to fill the delays on these developmental pathways.

HRQoL IN PATIENTS WITH PSORIASIS. ASSOCIATIONS WITH THE ILLNESS SEVERITY, PERSONALITY PATTERNS AND PSYCHIATRIC SYMPTOMS

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Abstract

Psoriasis is a chronic inflammatory skin disorder with a complex immune-mediated pathophysiology affecting between 0.91% and 8.5% of the general population. Various psychopathological conditions are associated with psoriasis, and they either result from or contribute to psoriasis. Several studies reported lower quality of life in subjects with psoriasis and psychiatric presentations compared to patients with psoriasis alone. This study aimed at evaluating the quality of life in patients with psoriasis related to the illness severity, psychiatric symptoms and personality patterns. Notably, no research has examined the relationship between quality of life and personality patterns using clinician assessment. *Methods:* The study is based on a multi-method and multi-informant design. 50 patients, 25 assigned to a biologic therapy and 25 to a topical therapy, were evaluated with self-report measures, such as the Symptom Checklist-90-R (SCL-90R) and Psoriasis Index of Quality of Life (PSORIQoL). Patients' personality and psychological functioning were also evaluated by external raters using the Shedler-Westen Assessment Procedure (SWAP-200) (based on the Clinical Diagnostic Interview; CDI). Finally, the severity and area of their psoriatic lesions were evaluated with the Psoriasis Area Severity Index (PASI). *Results:* Significant differences between groups (biologic vs topical therapy) were found in PASI scores: patients assigned to biological therapy have shown lower levels of illness severity. Nevertheless, no differences between groups were found in PSORIQoL scores. The quality of life was negatively associated with various dimensions of SCL-90R, as well as with borderline and dependent personality styles/disorders; on the contrary, it did not relate to PASI. *Conclusions:* Results seem to suggest that the quality of life in psoriatic patients is more influenced by personality characteristic and psychiatric symptoms rather than by the severity of psoriatic lesions.

PHYSICAL PROBLEMS IN EARLY ADOLESCENCE: A STUDY ON EARLY PARENTAL LOSS

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Abstract

International literature underlined that early parental loss represents a potentially traumatic experience, that could expose children to higher risk development, with the onset of psychopathological symptoms. In particular, empirical research has widely confirmed that childhood parental loss is a crucial risk factor for the adolescent's onset and maintaining of both internalizing and externalizing psychopathological difficulties. Furthermore, early parental loss was correlated with physical illness in adolescence, but few attention was given to the mechanism underpinning. The present longitudinal study aims to better understand the link between parental death in infancy and physical illness during adolescence, considering the role played by youths' and surviving parents' psychological profiles.

From a larger normative sample, we selected 418 early adolescents who lost a parent in their first three years of life. Our sample also includes also their surviving parents. Univariate and Multivariate Cox proportional hazard regression analysis with time-dependent variables were used to examine the predictive values of adolescents' and surviving parent's psychopathological symptoms, and youths' demographic characteristics (sex and age) for the occurrence of physical illness during a 6-year period of follow-up. Analysis showed that surviving parent's psychopathological risk, and adolescents' Affective problems and Dissociation were found to predict the occurrence of physical illness. These results didn't influence by adolescents' sex. Moreover, dissociation was the most significant predictors of the occurrence of relevant physical problems. Our results are relevant and add to the previous literature in the field of prevention and intervention practices in samples of adolescents who lost a parent in their early childhood, orientating clinical work.

VARIABLES INFLUENCING PSYCHOLOGICAL HEALTH CONDITIONS IN INFERTILE COUPLES: GENDER DIFFERENCES IN RISK AND PROTECTIVE FACTORS

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Abstract

Infertility is a distressing experience that may induce mood disorders, anxiety and depression. Research highlighted risk and protective factors influencing psychological health in infertile patients, but their interplay has not been considered. The present study aims to analyse main and interaction effects of Individual characteristics (Age; Educational level; Employment status), Infertility-related characteristics (Type of diagnosis; Duration of infertility), Infertility-related stress dimensions and Couple's Dyadic Adjustment on perceived levels of Anxiety and Depression of infertile patients, also identifying gender differences. A questionnaire consisted of Socio-demographics, Infertility-related characteristics, Fertility Problem Inventory-Short Form (FPI-SF; Zurlo et al., 2017), Dyadic Adjustment Scale (DAS), the State scale of the STAI-Y and the Edinburgh Depression Scale (EDS) was administered to 250 couples undergoing infertility treatments. Data were analysed using Descriptive Statistics and Logistic Regression Analyses. Findings on main effects revealed: Duration of Infertility and stress dimensions of Couple's Relationship Concern and Social Concern as significant risk factors in both genders; Male diagnosis as specific risk factor in male patients; Age, Female and Unexplained diagnosis, and stress dimensions of Need for Parenthood and Rejection of Childfree Lifestyle as specific risk factors in female patients. With respect to protective factors, data revealed significant main effects of Educational Level and Employed status only in female patients and of Couple's Dyadic Adjustment in both genders. Interaction Analyses highlighted significant moderating effects of Employed status in female and of Couple's Dyadic Adjustment in both genders. Findings highlighted significant risk and protective factors useful to develop focused counselling interventions to promote psychological health in both members of infertile couples.

INTOLERANCE OF AMBIGUITY AND INTOLERANCE OF UNCERTAINTY AS PERSONALITY FACTORS IN PSYCHOPATHOLOGY AND ADDICTIONS

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Abstract

Despite the fact that Intolerance of Ambiguity (IA) and Intolerance of Uncertainty (IU) may appear as an overlapping construct, they tap into different personality characteristics. IU is a hierarchical construct critical for the diagnosis of affective disorders. IA is a multidimensional construct that has implications for social judgments and interpersonal behaviour. The tendency to view people and situations as either "all good" or "all bad" is a hallmark of Borderline Personality Disorders (BPD). Affective disorders like Depression (D) and Obsessive-Compulsive Disorder (OCD) are characterized by worrying about future uncertain events. It might be tempting to speculate that IA factors (e.g., rigid dichotomizing into fixed categories and resorting to “black-white solutions”) might be higher among BPD. By contrast, IU is supposed to be lower for BPD patients. The present study explored how IU and IA differently characterized BPD, OCD, and D. To this purpose a mixed clinical sample was recruited (75 patients with Substance Use Disorder, 33 of which had a comorbid BPD; 34 patients with Depression; 55 patients with OCD). A control group of 164 University students was also included. The groups completed the IA scale (MAAS), the IU scale (IUS), and the Borderline Personality Disorder Checklist (BPDCL). The groups were compared using parametric and non-parametric analyses. Depressed individuals were the highest IU group, followed by BPD. Unexpectedly, IU was lower than the average for OCD patients. Regarding IA, all clinical groups were higher than controls on dichotomous thinking. IA and IU are separate non-overlapping constructs. The inability to contemplate "shades of gray" was a generalized cognitive bias among all clinical groups. This latter finding calls for further investigations of mental rigidity and stereotyping processes across different psychopathologies.

ANXIETY AND ATTENTIONAL CONTROL: THE ROLE OF EMOTIONAL STIMULI

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Abstract

The relationship between anxiety and attentional process is unclear. Many studies show an attentional bias in the detection of threatening stimuli. This attentional bias could be related to a poor cognitive control. The Flanker Task could be used to the assessment of executive control. In this task, the participant is instructed to respond to the target ignoring the distractor stimuli (the flankers). The Attentional Network Test for Interaction (ANTI-I) combines a spatial cuing paradigm with a flanker procedure and examines the interaction between the attentional networks (alerting, orienting and executive control). The alerting is involved in the maintaining an alert state. The orienting is engaged in the selection of the information. The executive control allows the conflict resolution.

The aim of the study is to analyze the relation between anxiety and attentional networks. We used a modified version of ANTI. In the ANTI – Emotion (ANTI-E), we replaced the arrows in the flanker task with neutral and threatening faces.

Anxious individuals (AI; N=36) and No Anxious individuals (NA; N=31) have completed the State Trait Anxiety Inventory and the ANTI-E. A Group (AI; NA) x Alerting (no warning;warning) x Validity (valid; invalid;no cue) x Congruency (congruent;incongruent) x Emotion (threatening;neutral) ANOVA on mean reaction times (RTs) confirms all the main effects and shows a significant Group x Congruency x Validity interaction, which reveal shorter RTs in the Congruent compared to Incongruent No-Cue trials (869ms vs 916ms; $F_{1,38}=5,19$; $p=.02$, $d=.56$) only in AI group.

The AI shows a higher attentional focus when the target is a neutral face rather than a threatening face, i.e., AI, compared to NA, have shown slower RTs in the incongruent condition. These findings could suggest a poor cognitive control in AI, compared to NA. These results could have implications in clinical training aimed to increase the cognitive control in anxious individuals.

MATERNAL ATTACHMENT STYLE IN CHILDHOOD OBESITY: THE MEDIATOR ROLE OF FEEDING PRACTICES

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Abstract

Several studies on the determinants of childhood obesity show that parental practices during meal-time play an important role in the development and maintenance of child difficulties in self-regulation, child eating disorder and consequently, child obesity. Other parental features, like adult attachment, have recently received attention for their power in predicting the risk for childhood obesity (Mazzeschi et al., 2014). According to Bost and colleagues (2014) parents' insecure attachment is related to the use of negative emotion-feeding practices, considered as risk factors for unhealthy child food consumption and higher child weight status. Conversely, secure attachment of the parents seem to be correlated to positive feeding practices, characterized by parental ability to manage of their children meal and by parental ability to promote an healthy eating considered a protective factor for child overweight/obesity. Seem to be necessary more evidence in order to better understand the possible relations between parental attachment and feeding practice and their role with respect to the child's weight.

On this basis, the aim of this paper is to explore the parental features and the mediational role of parents feeding practices in the relationship between parents attachment and child's weight in a sample of 578 Italian mothers (Mage=37.93, SD=4.99) of 6 years - old overweight and obese children.

"Process" macro developed by Preacher & Hayes (2008) and the bootstrapping technique were performed in order to test the direct and indirect effects of mothers' attachment style (assessed with Adult Attachment Questionnaire) on children BMI, mediated by parents feeding practices (assessed with Child Feeding Questionnaire). Data showed indirect effect both of secure and insecure attachment style on children BMI mediated by the caregiver ability during the mealtime. These results may have important implications both in research and in clinical field.

VIGILANCE AND ATTENTION IN CHILDREN WITH ATTENTION DEFICIT HYPERACTIVITY DISORDER

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Abstract

The Attention Deficit Hyperactivity Disorder (ADHD) is one of the most common psychiatric disorders in childhood and it is characterized by inattentiveness, over-activity and impulsivity. There are significant amount of neuropsychological evidence showing that one of the main ADHD symptoms could be an impairment of attentional processes. Recent findings seem to indicate that a low level of arousal/alerting could explain part of the ADHD symptoms. The aim of this study was to evaluate the efficiency and interactions of attentional systems in children with ADHD. Seventy-four drug-naïve children, twenty-nine ADHD and forty-five typically developing children/adolescents (TDC) aged between 6 and 15 completed the Attention Network Test for Interaction and Vigilance (ANTI-V), which allows to simultaneously evaluate the three attentional networks (alerting, orienting, executive) and directly measure the vigilance. A Group (ADHD, TDC) x Warning (present, absent) x Cue (valid, invalid, no-cue) x Congruency (congruent, incongruent) ANOVA on the mean reaction times (RTs) showed a significant Group x Warning x Congruency interaction. The results of the Group x Warning ANOVA on the conflict effect (RTs incongruent condition – RTs congruent condition) showed that ADHD children's performance is similar to that shown by TDC group only when phasic alerting was increased by a warning tone ($F(1,72)=13.34$; $p=.001$; $\eta^2=.16$). Furthermore, a decrease in the d' sensitivity index ($F(1,72)=4.02$; $p=.049$; $\eta^2=.05$) indicated a deteriorated vigilance performance of ADHD children compared to TDC group. These findings confirm our previous results, highlighting as ADHD children could present a prevalent disease in Alerting and Vigilance networks. This low arousal level might be responsible to the executive impairment shown by ADHD children. These findings could help to develop an *ad hoc* treatment for children with attentional deficits.

AFTER PRETERM BIRTH: BABIES AND THEIR MOTHERS

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Abstract

In the premature birth the process of transition to parenting can take place differently from that of a full-term childbirth. The prematurity may induce the mother to alienate herself from the experience of motherhood with possible important impact also in the follow-up.

The aim of this research was to study mothers' attitudes towards their premature babies after discharge, exploring the maternal emotional state and the child's development. The sample consisted of premature infants ($EG \leq 37$ w) admitted to the Neonatal Intensive Care Unit and their mothers. At the time of birth and during the follow-up (3-24 months), mothers completed the Edinburgh Postnatal Depression Scale (Cox et al., 1987). Infant levels of development were assessed through the Griffiths Mental Development Scales (Griffiths, 1996). The mothers' attitude towards their children and their mental state has been assessed qualitatively through the Five Minute Speech Sample (Magana et al., 1986). By the analysis of 50 interviews, four main themes were revealed: idealization of the child, self-sacrificing, minimization of difficulties and problems in separation from the child. These results have been usefully compared with maternal depressive symptomatology and child's psychomotor development. The findings appear to indicate that the relational patterns between mothers and premature babies during the follow-up are influenced by specific and recurrent themes. The results showed a significant reduction of maternal depressive symptoms at the moment of the first follow-up, but an increase of depressive symptomatology was reported from the first follow-up to the last one.

The results confirmed the impact of prematurity on maternal affective state and on mother-child relationship. A timely intervention focused on the approach of mothers to the complex reality of prematurity, also during the follow-up, could be useful to prevent future difficulties in both mothers and children.

PARENTS ON THE WEB. AN ANALYSIS OF FORUM INTERACTIONS AND FUNCTIONING

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Abstract

The diffusion of digital devices has modified people's seeking behaviors for health information (Cioni et al, 2016; Pandey et al, 2012). Particularly, parents of children with life-threatening illnesses are active Internet users, searching for information to improve knowledge about health and therapies, as well as needing for emotional sharing (Knapp et al, 2011; Tozzi et al, 2013).

Currently, online communities provide experiences of comparison, contributing positively to parenting (McDaniel et al, 2012; Nieuwboer et al, 2013), and feeding the need for information and social support, particularly for parents of children with special needs (Gibson & Hanson, 2013; Niela-Vilén et al, 2014; Roffeei et al, 2015; Kirk & Milnes, 2016). Indeed, e-groups specifically help parents of children with Autism Spectrum Disorders (ASDs) to cope with the symptoms (Jordan, 2010) and stop social isolation (Kirk & Milnes, 2016). No study specifically investigated the role of e-groups for parents of children with Down Syndrome (DS). We aim to explore why and how Italian parents of children with ASDs and DS use online forums and analyze their functioning. We selected 3486 posts from two Italian forums specifically directed to parents of children with DS and ASDS, and we analyzed data through a latent thematic analysis (Braun & Clarke, 2006). Results confirm that online communities play a key role for caregivers facing with their children's disease. Online forums help parents to acquire knowledge, sharing information and experiences about their child's difficulties, parenting troubles and daily management. As a consequence, the social support they receive, contribute to stop isolation and support them emotionally. Decision making emerges as a specific function of these e-groups, as well as the identity parental construction represents a significant point of discussion. Nevertheless, a specific child's image and a different way of living difficulties emerge through the e-parents posts.

DEPRESSION IN GAMBLING DISORDER: THE ROLE OF EMOTION DYSREGULATION

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Abstract

Introduction: Gambling Disorder (GD) is a relevant worldwide health issue, being related to a wide range of negative individual and social consequences. Moreover, GD is often associated with other psychiatric conditions such as mood disorders or pathological personality. Despite depressive mood tone might be considered a consequence of GD, Depression has been also thought to act as a vulnerability factor for the development of GD. Also, models of GD often asserted that gamblers would gamble in order to regulate negative emotional states.

Methods: We administered to a sample of addicted gamblers (n=90) and a sample of healthy controls (n=105) the South Oaks Gambling Screen (SOGS, Lesieur & Blume, 1987), the Difficulties in Emotion Regulation Scale (DERS, Gratz & Roemer, 2004) and the Depression Anxiety Stress Scale (DASS, Lovibond & Lovibond, 1995).

Results: As expected, addicted gamblers scored higher on the SOGS, DERS and DASS scales. Moreover, SOGS scores were positively and significantly related to both DERS and DASS scores. Finally, we found that emotion dysregulation fully mediated the relationship between Depression and GD severity.

Conclusions: As a whole, results underline the need to pay a greater attention to the role played by emotion dysregulation in the relationship between Depression and GD. Clinical implications and futures direction for research are discussed.

NEUROBEHAVIORAL DEVELOPMENT AND EARLY REGULATORY PROBLEM IN PRETERM INFANTS

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Abstract

Children born preterm have more neurodevelopmental difficulties compared with full-term peers, including difficulties with cognitive function, self-regulation, attention, executive function, and emotional regulation. Children born preterm have also been found to have regulatory difficulties (defined as excessive crying, sleeping, or feeding problems) in early childhood, which in turn are early warning signs of future problems. The aims of the study is: 1) to investigate the specificity of neurobehavioral profile in preterm (PT) and full-term (FT) infants; 2) to explore differences in regulatory problems expressed by infants born preterm and infants born at full term (FT) during the first month of life. Method: This prospective longitudinal study will involve 30 PT and 20 FT infants recruited in the Hospital Policlinico Umberto I of Rome, Sapienza University. Neurobehavioral features (orientation, habituation, hypertonicity, hypotonicity, excitability, arousal, lethargy, nonoptimal reflexes, asymmetric reflexes, stress, self-regulation, quality of movement, handling) will be assessed at 36 w gestational age for PT infants and at term for the FT infants with the NICU Network Neurobehavioral Scale (Lester & Tronick, 2004). Maternal and Paternal stress will be assessed with the Parental Stressor Scale: Neonatal Intensive Care Unit (Miles, Funk, Carlson, 1993). Regulatory Problem will be assessed at term (corrected age for PT) with a standard interview of mothers (Cry, Feed and Sleep Interview). Results will be discussed, with a specific focus on the neurobehavioral factors that might be associated with regulatory problems at birth. Clinical implication and future direction will be presented.

QUALITY OF LIFE, PSYCHOLOGICAL AND COGNITIVES ASPECTS IN PATIENTS AFFECTED BY CHRONIC PAIN

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Abstract

Background: Chronic pain is disabling and affects every aspect of the patient's life: the perception of one's own body becomes a negative experience, autonomy is limited in movements or sometimes even in self-care, work and social habits are distorted and the tendency to isolate oneself from others is common.

Objective: To analyze how the life of patients suffering from chronic pain is compromised by their state of health.

Method: The sample consisted of 154 patients (women N = 104; men N = 50), between 24 and 80 years old, suffering from chronic pain, recruited at the Pain Therapy clinic – Polyclinic of Bari and subjected to a test battery: Raven, SF-36, BMQ, Brief Pain Inventory and HADS.

Results: The collected data were analyzed with SPSS. The analysis of the results obtained by HADS showed the presence of anxiety (46.1%) and depression (40.3%). No significant association between education level and anxiety ($\chi^2 = 1,271$ p= 0,736) and depression ($\chi^2 = 0,9$ p= 0,825). 66,7% of those with greater cognitive impairment have high levels of anxiety. The prevalence of anxiety decreases in relation to the improvement of cognitive performance ($\chi^2 = 6,629$ p= 0,008). Instead, no association with depression was observed ($\chi^2 = 4,814$ p= 0,307). Anxiety and depression correlate negatively with all the subscales of SF-36, negatively affecting the overall perception of well-being of the subject and undermining the adherence to pharmacological treatment.

Conclusions: The results that emerged confirmed the literature data and allowed us to state that patients with chronic pain have pervasive depressive and anxious symptoms. Chronic pain involves profound and significant consequences on psychophysical health in those who suffer from it, a decrease in cognitive performance and a marked impairment of quality of life.

MEMORY IN AGING: EVALUATION OF MNESTIC FUNCTIONS BETWEEN NORMALITY AND MILD COGNITIVE IMPAIRMENT

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Abstract

Background: Neurodegenerative diseases are characterized by cognitive impairment, such as deficits in memory and often involves different brain areas, such as temporomial-medial area (in particular hippocampus) and lateral neocortex. Therefore, it becomes increasingly important to use effective diagnostic tools, for a greater contribution to early and precise diagnosis.

Objective: The present study aimed to verify the hypothesis that two diagnostic tools that evaluate different aspects of verbal memory can discriminate the prodromal phases of dementia.

Methods: To date, 90 subjects aged between 55 and 75 years old, were divided into two groups of equal number based on the presence / absence of cognitive impairment assessed by MMSE. Subjects completed the Rey Audiority Learning Test and the Babcock Story Recall Test, which respectively evaluate the learning of new verbal information and episodic memory.

Results: The collected data were analysed with SPSS. A significant negative correlation emerges at a 0.01 level between the transition from a normal to a cognitive impairment condition and a drastic decline in the performances obtained by the subjects in the immediate and deferred re-evocation of both memory tests.

Conclusion: Both verbal memory tests used are highly predictive in diagnosing the presence of cognitive impairment in the early phases.

ENVY-RELATED DYNAMICS IN CRIMINAL CONDUCT: A CASE-CONTROL STUDY BETWEEN MALE INMATE AND GENERAL POPULATION AND FURTHER INSIGHTS ON MURDERERS

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Abstract

Despite envy having been suggested as a potential trigger of criminal conduct, no research evidence exists in this regard. The present study has a two-fold aim: 1. To examine differences on envy-related dynamics between male perpetrators and non-perpetrators. 2. To test differences on envy, personality characteristics and psychopathy between murderers and non-murderers among perpetrators.

The sample included 40 male inmates who had committed violence in intimate relationships - respectively homicide (19), sexual assault (10) and physical violence (10) - and a comparison group of 40 men balanced by age from the general population.

The Projective Envy Technique (PET) was used for both the groups, whereas the Rorschach Test and the Psychopathy Checklist - Revised were also administered to perpetrators.

Independent samples t-tests and Mann–Whitney U tests were performed.

Statistically significant results were found only on PET indexes.

With regard to group comparison, perpetrators take more time to complete the PET ($M=718.78$, $SD=376.95$) than their counterpart ($M=516.03$, $SD=218.67$), $t(55,21)=2.82$, $p=.005$. As well, they show lower frustration scores ($M=3.25$, $SD=2.62$) than non-perpetrators ($M=4.73$, $SD=3.75$), $t(78)=-2.04$, $p=.045$. In respect of the differences between murderers and non-murderers, the former report higher aggressiveness scores ($Mdn=1$) than the latter ($Mdn=0$), $U=119.000$, $p=.029$, $r=.37$.

The greater time in taking the test by perpetrators suggests a potential inhibition tendency in coping with envy-evoking stimuli; as well the lower frustration reveals the difficulty to express sadness and disappointment when failing to achieve one's desires. It could be hypothesized that perpetrators tend to suppress envious feelings through easing the painful and self-threatening experiences.

Compared to other perpetrators, murderers show additional strategies based on destructive responses towards others, which seem to indicate the acting-out of the suppressed frustration.

SUICIDAL IDEATION IN THE PERINATAL PERIOD IN CLINICAL AND NON-CLINICAL RESEARCH SAMPLES: A QUALITATIVE REVIEW

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Abstract

Worldwide, depression and suicidal ideation are among the major predictors of maternal suicide, although with different characteristics in clinical and non-clinical samples. To explore these aspects, bibliographic research was carried out in the international databases PubMed and PsycInfo, and on the Google Scholar search engine using the keywords "item 10", "EPDS", "pregnancy", "suicide" and "postpartum". These research criteria identified 16 scientific publications. In clinical samples in particular, there is a significant correlation between a tendency towards suicide and psychopathology (in more than 80% of cases), with markedly high frequencies of suicidal ideation, especially in women hospitalized for self-injurious action. Suicidal ideation also seems to be influenced by past abuses, negative childhood experiences and episodes of sexual/physical violence on the part of the partner, in association with some cultural aspects related to gender and marital status, family dynamics, unplanned pregnancy, the indecision of interrupting the pregnancy or not, low social status and a low level of education. On the other hand, in non-clinical research samples, suicidal ideation occurs in 11.5% to 22.3% of women, mostly in the presence of childhood trauma and unexpected pregnancies. In these subjects, suicidal ideation seems to emerge in the days of hospital stay postpartum with a frequency of 3%-4%, and, in 90% of cases, accompanied by total scores on the Edinburgh Postnatal Depression Scale (EPDS) which are clinically significant (equal to or higher than 10-13). The presence of suicidal ideation in both clinical and non-clinical samples strongly suggests the need to activate routine screening protocols to identify women who are suffering psychologically and at risk of suicidal acts during pregnancy and after delivery.

DIFFERENCES BETWEEN INTIMATE PARTNER HOMICIDE PERPETRATORS: A CASE STUDY OF TWELVE INMATES

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Abstract

Research underlines the need to identify risk factor of Intimate Partner Homicide (IPH), however the difference between the IPH perpetrators is still minimized.

This work proposes a case study to identify the personality characteristics of twelve males detained for IPH. The subjects were involved in the project “Assessment and management of risk of violent recidivism” of the Lazio Order of Psychologists and the Italian Department of Prison Administration.

The assessment of perpetrators was conducted with the HCR-20v.3 procedure that implies psychological tools for the diagnosis. The Psychopathy Checklist–Revised (PCL-R), the Rorschach Test and clinical interviews were administered.

The PCL-R highlights the low presence of psychopathic traits ($M=16.72$, $SD=9.47$) and social deviance characteristics ($M=7.75$, $SD=6.27$) but reveals interpersonal and affective deficits ($M=8,3$, $SD=5.93$). The 58.3% show an adequate reality cognitive perception and the 83.3% have a good social adaptability, at the Rorschach Test. The perpetrators show the following personality characteristics: 5 narcissistic/perverse; 2 borderline/histrionic; 5 avoidant/obsessive.

Overall, the IPH perpetrators show low psychopathic traits and are socially adequate. Nevertheless, the homicide committed by borderline and avoidant/obsessive personalities represent the end of a conflictual relational dynamics between the murderer and his victim. The violence represents the inability of these subjects to manage negative emotions when they feel threatened. Whereas, the narcissistic/perverse personalities aim to intentionally destroy the other, experienced as miserable object. Indeed, these are psychological untreatable because manipulate and destroy every relationship. On the contrary, it is possible to implement psychological interventions addressed to borderline and avoidant/obsessive personalities, if they are still able to experience the dependence on the other.

THE EFFECTIVENESS OF BRIEF PSYCHOLOGICAL INTERVENTION AT A UNIVERSITY COUNSELING SERVICE

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Abstract

Recent research has highlighted that a considerable number of university students request access to University Counseling Services for psychopathological symptoms (e.g., anxiety and depression). Several studies have contributed to prove the effectiveness of psychological interventions for the students who benefit from a university psychological counselling intervention, demonstrating a significant decrease in emotional distress and an improvement in academic adjustment. The interest on outcome studies of psychodynamic counselling intervention is increasing. The present study aimed to explore the change of clinical symptomatology (i.e., anxiety symptoms) at the end of a time-limited psychodynamic intervention illustrating a single case of B., a university student who asked for help at Psychological Counseling Center of Sapienza University of Rome.

The intervention contemplated four sessions, plus a follow-up session after three months. The student's personality was assessed using the Shedler-Westen Assessment Procedure [SWAP-200] Both the Outcome Questionnaire 45.2. [OQ-45.2.] and the Adult Self Report [ASR] were used as outcome measures. The psychological-clinical evaluation of B. revealed a "generalized anxiety disorder with panic attacks" according to DSM-5 criteria. Personality assessment using the SWAP-200 highlighted the presence of an avoidant (62.13 (T)), obsessive (61.79) and dependent style (60.41). At the end of the intervention, a considerable improvement of complained symptomatology was observed, in line with the significant improvement detected by OQ-45 (pre-intervention total score = 103; post-intervention total score = 80). The follow-up evaluation showed a complete symptomatic remission, in line with the findings of OQ-45 (follow-up total score = 39).

Psychodynamic counseling intervention appears to be effective in facilitating symptomatic resolution and in providing support to B. to overcome her study block.

FEEDING AND EATING DISORDERS AND ILLNESS PERCEPTION IN PATIENTS WITH NON-CELIAC GLUTEN SENSITIVITY AND CELIAC DISEASE

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Abstract

Introduction. Celiac Disease (CD) and Non-Celiac Gluten Sensitivity (NCGS) are two gluten-related disorders, characterized by a wide variety of intestinal and extra-intestinal symptoms. It has been demonstrated an association between CD and stress, anxiety, depression, chronic fatigue, and social and relational problems. Instead, no data are available about psychological factors related to NCGS.

Methods. We consecutively evaluated 26 NCGS and 27 CD patients, who completed the Eating Disorder Inventory-3 (EDI-3) and the Illness Perception Questionnaire-revised (IPQ-R).

Results. Respect to EDI-3, we found statistically significant differences as regards to “low self-esteem”, “personal alienation”, and “interpersonal alienation” (NCGS *vs* CD $P= 0.02, 0.03,$ and $0.03,$ respectively), and to “ineffectiveness”, “interpersonal problems”, and “general psychological maladjustment composite” (NCGS *vs* CD $P= 0.01, 0.04,$ and $0.03,$ respectively). Respect to IPQ-R, we found statistically significant differences as regards to “identity”, “consequences”, “timeline cyclical”, and “emotional representations” (NCGS *vs* CD $P= P 0.007, 0.03, 0.008,$ and $0.004,$ respectively), to “pain”, “nausea”, and “upset stomach” (NCGS *vs* CD $P= 0.04, 0.03,$ and $0.04,$ respectively), and, finally, to “causes”, especially for “my own behaviour”, “my mental attitude”, “family problems or worries”, “overwork”, “my emotional state”, “ageing”, and “my personality” (NCGS *vs* CD $P= 0.003, 0.003, 0.0002, 0.03, 0.002, 0.003,$ and $0.0008,$ respectively).

Conclusions. Our study demonstrated that NCGS patients have a worse symptomatic and psychological picture than CD patients, and they are more likely to consider non-organic psychosocial factors as the causes of their illness. It is possible that psychological support, together with correct information, could reduce the negative impact of the disease, due to the difficulties posed by this “new” and underestimated clinical condition, promoting adaptive coping strategies.

SUPPRESSION, SHAME, FEAR, AND NERVOSITY PREDICT EMOTION DYSREGULATION IN PSORIASIS PATIENTS

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Abstract

Aim: The first aim of this study was to examine the prevalence of expressive suppression, and cognitive reappraisal, two emotion regulation mechanisms in patients with psoriasis compared with healthy subjects. The second aim was to assess whether the presence of externalized negative and positive affects of state (emotional reactivity) and trait (emotional tendency) in psoriasis patients could predict the difficulties in regulated inner emotions.

Method: The participants comprised 172 subjects. The mean age: patients 52.50; controls 50.86 years. It were used scales to measure: the expressive suppression and cognitive reappraisal, emotion dysregulation, positive and negative affects of trait, positive affects of state, and subjective satisfaction of life.

Results: Psoriasis patients reported higher values in expressive suppression, compared with controls. Cognitive reappraisal showed no differences between the two groups, while positive and negative affect of trait and negative affect of state resulted higher in the psoriasis group. The mediation model, having emotion dysregulation as predicted variable, and negative affect of trait and state as predictors, indicated a significant effect of negative affect of trait on the emotion dysregulation. In the second step, maintaining emotion dysregulation as dependent variable, the regression method results indicated a significant effect of three trait emotions on emotion dysregulation: ashamed, nervous and afraid.

Conclusions: The results suggest that psoriasis patients used more frequently a maladaptive emotion regulation mechanism (emotional suppression), experienced more negative emotions of trait, and higher use of emotional dysregulation patterns: lack of emotional clarity, impulse control difficulties, nonacceptance of emotional responses. Three negative specific emotions resulted significantly related to emotion dysregulation in persons living with psoriasis: ashamed, nervous, and afraid.

THE PSYCHOLOGIST IN ART CENTRES, AIM AND METHODOLOGY OF INTERVENTION: THE EXPERIENCE IN A UNIVERSITY HOSPITAL

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Abstract

Introduction: International guidelines recommend the introduction of psychological support in Assisted Reproductive Technologies (ART) centres to help couples coping with the treatment and with the burden of infertility. However, little is known on how this is implemented in the Italian context. Aim of the current work is to share the clinical experience piloted at the ART centre of the S. Orsola-Malpighi Polyclinic in Bologna in the year 2016-2017, and underlay methodologies and difficulties of the proposed intervention.

Method: Psychological support was provided through two ways. First, the psychologist worked closely with the medical staff, taking part to the first medical consultation and to the communication of the pregnancy test result. This was scheduled to meet all patients at least once and offer psychological support during critical times. Second, proper individual or couple psychological support was provided to patients who requested it. This intervention was directed both to contain worries on the treatment and to explore feelings, representations, and fantasies concerning pregnancy and parenthood.

Results: 1) Interdisciplinary work was helpful to address infertility in a more holistic way; 2) Only a portion of patients (19.4%) asked for proper individual/couple psychological support (59% women, 41% couples). Of these, 49% sought help before the treatment; 45% after repeated unsuccessful treatments, 4% after miscarriages, and 2% during pregnancy; 3) Main reasons that moved the request were: worries concerning the treatment (41%), grief after miscarriages (23%), marital issues (16%), concerns on parenting (10%), social isolation (4%), other issues (6%).

Conclusion: A close collaboration between medical staff and psychologist should be promoted in ART centres, as it seems helpful both for the professionals and for the patients. Attention should be paid to ART failures, miscarriages, and male partners involvement, which often remain unaddressed issues.

PRELIMINARY STUDY ON FATIGUE IN BREAST CANCER SURVIVORS

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Abstract

Introduction. Fatigue is the most common and stressful side effect of cancer and its treatments and it occurs not only during these but it is a condition that can persist even many years after the end anti-cancer treatment (Bower E. et al., 2006) interfering substantially with the activities of daily life of the subject (Lavoy E. et al., 2016; (Fatigoni S. et al.,2015). It has been estimated that between 19% and 38% of cancer survivors experience significant levels of fatigue after treatment (ibidem, 2016). It has been shown that the onset and severity of this syndrome is not related to the type of cancer or treatment variables, making it difficult to identify populations with the greatest risk of fatigue (ibidem, 2016; Bower E. et al., 2006; Jones J.M. et al.,2016). Cancer and its treatments could explain the experience of fatigue during the course of the disease while its presence after the end anti-cancer treatment could be caused not only by the side effects of the treatment but also by the representation of the patient’s illness, a concept linked to the coping strategies used (Corbett T. et al., 2016). Knowledge about the presence of fatigue in breast cancer survivors is very limited. This syndrome has been shown to have a 30% prevalence in breast cancer survivors (Alexander S. et al 2009, Andrykosky M. et al., 2005; Reinertsen K.V. et al., 2010). The aim of the study is to assess the impact of fatigue on breast cancer survivors’ quality of life and to assess the relationship between fatigue and patients’ strategies to cope illness.

Method. 30 women breast cancer survivors (in follow-up from 1 to 10 years) were tested with the following instruments: Distress Thermometer, EORTC-C30, MINI MAC and Fatigue Severity Scale.

Results. The major results show that there is a negative correlation between the fatigue and quality of life ($r = -, 618$; $p = 0.01$) and there is a positive correlation between the fatigue and the “anxious preoccupation” coping style($r =, 462$; $p = 0.05$) and “helplessness-hopelessness” ($r =, 478$; $p = 0.01$) but there is a negative correlation between the fatigue and fighting spirit ($r = -, 427$; $p = 0.05$).

Conclusions. The negative association between fatigue and overall quality of life observed in this and other studies highlights the importance of identifying and treating this group of fatigued women. Results from this study also may be useful in improving specific psychological intervention after the end of anticancer treatment.

EXPLORING EMOTIONS IN DIALOG BETWEEN HEALTH PROVIDER, PARENT AND CHILD IN PEDIATRIC PRIMARY CARE

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Abstract

This paper aims to identify Dialogical Interaction Patterns in pediatric primary care, paying particular attention to the causal link between the most typical expressions of emotions of participants (parent and child) and health providers subsequent responses.

We documented conversations in 265 visits; we audio-recorded, transcribed and analyzed them with Verona Coding Definitions of Emotional Sequences (Del Piccolo et al., 2010) and responses were analyzed through Redundancy Analysis (Wollenberg, 1977), aimed to establish a quantitative relationship between these pair of groups of variables considering the asymmetrical relationship between them.

Six Dialogical Interaction Patterns were obtained by interpreting these relationships; they show dialogs mainly aimed at obtaining information useful for diagnosis and treatment, with a limited exploration of emotions or issues related to the condition of the child. Pediatric conversations seem to be characterized by a very high attention to cognitive aspects of medical questions with a poor consideration of emotions as useful information to medical practice.

These dialogs seem to ensure the rapidity and the efficiency of medical visits. Nevertheless, we propose consultative interventions as a training opportunity for health provider in order to support the relationship with their users in the performance of practices and in the pursuit of shared objectives (Freda & Dicé, 2017).

CAREGIVING AND PROSOCIAL BEHAVIOR: ATTACHMENT, EMPATHY AND AUTONOMOUS MOTIVES TO VOLUNTEER FOR PEOPLE IN NEED

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Abstract

Although most people probably care more easily for those to whom they are closely related, most caregiving motives and behaviors can be applied more widely to all suffering human beings. The *Caregiving System* (CS) has been hypothesized as a motivational key constituent of caring to others who are in need.

The first aim of this study was to investigate whether differences in the activation of the CS (Hyperactivation, Deactivation), measured by means of the Caregiving System Scale (CSS), are related to individual's attachment orientation and empathic tendency. The CSS (Italian version; Meneghini et al., 2015) has been administered to 410 university students ($M_{age}=22.08$; $SD=4.74$; females=61.1%). Attachment orientation and empathic tendency have been assessed by means of the *Attachment Style Questionnaire* and the *Interpersonal Reactivity Index*.

According to our expectations, correlations and multiple regressions indicated that an avoidant attachment orientation and low levels of Perspective Taking and Empathic Concern were significantly associated and made a significant contribution to CSS Deactivation scores. On the other hand, anxious attachment orientation and high level of Personal Distress (IRI) were also significantly associated and made a significant contribution to CSS Hyperactivation scores.

A further goal of this study was to examine the associations between differences in CS functioning and the quality of individual's motivation to volunteer for people in need (controlled, autonomous). For this reason some participants (N=40), more specifically those students who serve as volunteers with disadvantaged people at the *Centro Disabili di Ateneo*, were also asked to complete the Volunteer Motivation Scale (Meneghini, 2013). The correlation between the *index of relatively self-determined motivation* (Güntert et al., 2016) and the CSS scores showed that who volunteer on the basis of more autonomous motives report lower scores of CSS Deactivation ($r = -.707$; $p < .01$).

IS THE PERSONALITY INVENTORY FOR DSM-5 (PID-5) REALLY USEFUL FOR THE ASSESSMENT OF MALADAPTIVE PERSONALITY TRAITS? A STUDY ON A GROUP OF INMATES

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Abstract

Introduction: The use of reliable and valid measures to assess personality domains is crucial to examine the psychological phenomena underlying criminal conduct. The current study explored the relationship between maladaptive personality traits as measured by the Personality Inventory for DSM-5 (PID-5) and psychopathy as measured by the Psychopathy Checklist-Revised (PCL-R) in a sample of adult male inmates.

Method: The study was conducted on a group of convicted male individuals (N=27). The average age of inmates was 41,41 (DS=12,40). The assessment protocol included a sociodemographic schedule, the PID-5 and the PCL-R. The PID-5 was examined in both its extended (PID-5) and brief (PID-5-BF) forms, by calculating the scores of each personality trait and domain (negative affect, disinhibition, antagonism, detachment and psychoticism).

Results: Qualitative and quantitative analyses were conducted, and the correlations between PID-5/PID-5-BF scores and the components, factors and items of PCL-R were analysed. Personality traits considered as specific indicators of psychopathy (e.g., callousness, grandiosity, manipulateness) did not correlate significantly with the correspondent items and facets of the PCL-R.

Conclusions: The lack of significant correlations between PID-5 traits traditionally linked to psychopathy and PCL-R scores suggests that the use of self-reported personality measures might be inappropriate for individuals from prison and forensic samples, as they may show reduced self-awareness and/or a tendency to present a positive image of themselves. Therefore, an assessment by means of clinical interviews and self-reported measures including scales on malingering and self-reflective capacities should be preferred for forensic evaluation.

FEMALE NARRATIVES OF NON-SUICIDAL SELF-INJURY: THE EMOTION REGULATION THROUGH THE BLOG

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Abstract

The current literature shows that the non-suicidal self-injury (NSSI) is more common amongst adolescents (Muehlenkamp, Claes, Havertape & Plener, 2012; Cerutti, Manca, Presaghi & Gratz, 2011), with a female prevalence (Bresin & Schoenleber, 2015; Gargiulo & Margherita, 2014). Furthermore, it is demonstrated that NSSI performs the function of emotion regulation (Haza & Keller, 2005; Klonsky & Glenn, 2009), in particular for anger, boredom and sadness.

Concerning the NSSI websites, which are virtual environments where young girls share their experience about NSSI through texts and images of body wounds, the participants are most often female (Dyson et al., 2016; Gargiulo & Margherita, 2016).

From a psychodynamic perspective, we are interested in the narrative construction of Self-experience (Bruner, 1991), believing that the narration is the elective device for the construction of meanings (Neimeyer, Burke, Mackay & van Dyke Stringer, 2010). In this sense, we focus on blog, which allows the construction, expression and representation of identity, and can generate a sense of belonging, emotional support and social integration (Anderson-Butcher et al., 2010).

The study aims at exploring the female narratives developed into non-suicidal self-injury blogs, in order to understand the main themes and the common meanings shared by the female NSSI community.

A thematic analysis of 70 Italian blogs, written by young women and relating to non-suicidal self-injury, was performed through T-Lab (Lancia, 2004), a quali-quantitative software for text analysis. The blogs have been previously selected and monitored for one year.

Four thematic clusters related to love relationships, female identity, melancholic emotions and self-injurious symptom emerged. The analysis of the blogs enables us to understand how the NSSI female e-community is becoming a place for a gendered narrative, based on the sharing of pain and on the mutual support among girls.

Reflections on the clinical functions of NSSI blogs as space of aggregation and emotion regulation will be discussed.

THE SEXUAL ASSISTANT ITALIAN PROFILE: AN EXPLORATIVE STUDY ON A NATIONAL SURVEY

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Abstract

The aim of this study is to make it clear the path followed to identify the possible new figure of the Italian Sexual Assistant for disabled people. The main idea is that disabled people have the same needs and rights as the so-called "normal" people as regard sexuality.

The participants selection was promoted in July 2014 and July 2017 from Italian Committee LoveGiver through the first official press announcement disclosed on internet through social network and at the same time on national newspapers. The application form referred to send of the own curriculum with photo and a motivation letter for the formation of a group of people to select for the first Sexual Italian Assistance course in Disabled People. Initially, we collected more than 70 nomination requests from all Italian areas. The candidate selection was divided in two phases. the first was been the first matching contact. In the second the participants were invited to appear at Italian Institute of Scientific Sexology in Rome to undergo the test battery (BEES about Empathy, Irritability and Rage Scale, Emotional Fragility Scale MMPI-2 and Sexual Disability Questionnaire) and a clinical interview.

To the 70 nomination requests, the participants who have come at last to define our sample for this study were 39 volunteers subjects of which 16 male and 23 female, with age range between 24 and 55 years old (M: 39,85; SD 9,069).

The qualitative analysis has allowed us to select the possible future Italians "Love Givers" highlighting psychological, emotional and relational characteristics. All that to understand the abilities and the limits of this professional helping figure in accompanying the disable people in their erotic and sexual experience in a respect way; moreover to differentiate the Sexual Assistance by simple prostitution.

The scientific protocol could be a starting point for several studies in Italy and other countries should apply to a selection about the professionals Sexual Assistants.

THE SELF-HELP GROUP: PSYCHOLOGICAL SUPPORT FOR PATIENTS WITH CHRONIC OPHTHALMIC DISEASES

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Abstract

In the context of chronic visual pathology, which due to its progressive and untreatable degenerative character deeply marks the individual in his self-confidence and in his psychological balance, it is becoming increasingly clear the need to identify tools that can offer psychological support to patients to cope with the onset of depression and anxiety that can have a strong impact on their quality of life and hinder their rehabilitation. In this sense, the self-help group can be a tool to promote psychological and social welfare, because it can offer people who live in a similar condition the opportunity to share their experiences and to show each other how to deal with similar problems. In our low-vision rehabilitation center (Polo Nazionale) we introduced the AMA group, directed by a psychologist, as a psychosocial rehabilitation tool. Following the participation in the group, we evaluated, to test its effectiveness, if the visually impaired subjects obtained changes in the scores of the following scales: Coping orientation to problems experienced (Sica et al. 2008), General Self-Efficacy Scale (Schwarzer, 1992), Self-rating anxiety state (Zung, 1971), Beck Depression Inventory (1967). The first data show that participation in the AMA group helps macular pathological impaired patients to improve mood: 75% of those who before participating in the group had depressive symptoms was reduced to 9%, while subjects showing a moderate high anxiety level went down from 91.5% to 17%. The score on the self-efficacy scale is significantly improved ($p < 0.0001$), as well as positive attitude ($p < 0.0001$), orientation to the problem ($p < 0.001$), social support ($p < 0.001$), while avoidance strategies decrease ($p < 0.001$). Therefore, the AMA group appears to be an effective tool in promoting psychological and social welfare.

BURNOUT, REFLECTIVE FUNCTIONING AND ATTACHMENT IN A SAMPLE OF PALLIATIVE HOME CARE WORKERS

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Abstract

Palliative care is an approach that improve the quality of life of the patients and their families that confront with the problem associated with life-threatening illness. On the other hand, home care workers have daily face with death and suffering of their families. In this perspective, palliative home care can produce highly stressful and negative emotions in workers. In fact, the burnout syndrome is a state of exhaustion related to stress at work. More specifically, burnout is a state of emotional exhaustion, depersonalization, and reduced personal accomplishment. The failure to successfully down-regulate negative emotions is a key risk factor for a severe form of discomfort, known as burnout syndrome. Reflective functioning and attachment style could be related to the risk of burnout.

The goal of this study is to examine the risk of burnout in palliative home care workers and its relationships with reflective functioning and attachment style.

The study examined a group of forty-four operators (M =20; F = 24) working in a team of Integrated Home Palliative Care in Sicily. The study was based on a self-report protocol including: a questionnaire to determine demographic features of the participants; the Italian Version of Maslach Burnout Inventory (MBI) to measure presence of burnout; the Reflective Functioning Questionnaire (RFQ), and the Attachment Style Questionnaire (ASQ). Analysis Statistic was conducted by using SPSS.

The results did not show a problematic level of burnout and metacognitive elements. Specific correlations between burnout, attachment and reflective functioning were found.

The results highlight the role to tailored specific interventions of prevention and promotion for health care workers.

MEANING-MAKING TRAJECTORIES OF RESILIENCE PROCESSES IN NARRATIVES OF ADOLESCENTS WITH SM

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Abstract

Multiple sclerosis is an inflammatory and degenerative pathology of the central nervous system with an autoimmune nature. In the last few years, the statistical data identify a substantial increase in the diagnosis before 18 years of age. That phase of life is characterized by specific developmental tasks of re-shaping of one's own identity that the onset of pathology risks to interrupt.

The resilience plays a key role in coping and managing with the experience of illness and maintaining a good quality of life during young age. Indeed many studies have been conducted through quantitative methodologies, furthermore few studies adopted a qualitative methodology to explore the narrative processes of resilience.

Twenty-nine narrative interviews with adolescent with SM were conducted through the qualitative use of CYRM (The Child and Youth Resilience Measure) and for each interview the quantitative version of CYRM was administered.

Within a mixed-method framework of analysis, this paper aims to identify the meaning-making trajectories of resilience processes within clusters of narratives with high, medium and low level of resilience. Narrative interviews with medium level of resilience were analyzed through the data analysis methodology proposed Auerbach and Silverstein (2003, 2015) which has allowed to highlight five trajectories of meaning-making processes of resilience: The need between dependence and autonomy; Reconstructing the lines of time; Integration of limit; Enlargement of assumptive worldview; Connecting emotions and thought.

These meaning-making trajectories are declined in a specific and peculiar way in narratives with high and low level of resilience highlighting more or less effective strategies of resilience. The results allow us to reflect on clinical practices aimed at supporting processes to promote resilience in adolescents with SM.

ALEXITHYMIA IN OBESE PATIENTS SEEKING SURGICAL TREATMENT: COMPARISON BETWEEN TORONTO STRUCTURED INTERVIEW FOR ALEXITHYMIA AND 20-ITEM TORONTO ALEXITHYMIA SCALE

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Abstract

Recent studies highlight the need to investigate the presence of psychological factors in obese patients because they show an influence on the weight loss after bariatric surgery. Alexithymia could represent a psychological risk factor for the outcome of the surgical treatment, although actually the relation between alexithymia and obesity is uncertain. The literature on alexithymia measurement claims the importance of a multimethod assessment.

The first aim is to assess alexithymia in severely obese patients by using a multimethod measurement (self-report and interview). Further aim is to investigate the relationship between alexithymia and body weight.

Forty-five severely obese patients (30 Female; mean age 42,6; mean body weight 122,13 Kg) underwent the 20-item Toronto Alexithymia Scale (TAS-20) and the Toronto Structured Interview for Alexithymia (TSIA), which represents the first clinically structured interview.

Significant discordance was found between the two alexithymia measures: TSIA scores highlighted a greater level of alexithymia compared with self-report scores. Furthermore only TSIA total score was significantly related to Body Weight ($p = .03$; $r = .34$).

We can hypothesize that the TSIA is a more sensitive instrument in evaluating alexithymia: minimizing obese patients' negation tendency. A multimethod measurement seems useful to have clinically relevant information on our sample.

THE IMPACT OF PROBLEMATIC MOBILE PHONE USE ON SLEEP QUALITY IN PREADOLESCENCE: THE MEDIATING ROLE OF SOMATIC SYMPTOMS

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Abstract

In preadolescence and adolescence communication and connectedness with peers is an essential part of adolescents' social life. Mobile Phone (MP) may be considered a way to maintain both communication and connectedness. However, recent studies noted that problematic MP use may negatively affect nocturnal sleep with a variety of negative health, developmental and performance outcomes. The present study aims to explore the association between problematic MP use and sleep quality in preadolescence investigating the mediating role of somatic symptoms.

221 preadolescents (105 males, 47.5%) aged 10 to 14 years (mean age = 13.07; SD = 1.14) were recruited from three Italian secondary public schools located in Rome. Participants completed measures assessing somatic symptoms (Children's Somatization Inventory, CSI-24), problematic MP use (Brief Multicultural Version Test of Mobile Phone Dependence, TMD brief) and sleep quality (PROMIS Sleep Disturbance Short Form).

Descriptive statistics on CSI-24 showed that females reported significantly higher scores about somatic symptoms ($F(1, 220) = 11.32, p < .001$) and poor sleep quality ($F(1, 220) = 5.11, p < .05$) than males.

A significant correlation between problematic MP use and somatic symptoms was found ($r = .273, p < .001$) demonstrating that MP problematic users are more likely to experience a low psychophysical wellbeing. Furthermore, data indicated a significant association between sleep quality and somatic symptoms ($r = .361, p < .001$). Finally, findings highlighted the mediating role of somatic symptoms in the association between problematic MP use and sleep quality (estimated indirect effect = .04, $SE = .01$ [95% CI 0.02 to 0.08]). Results of this study support our hypotheses, predicting that higher levels of problematic MP use may predispose preadolescents with somatic symptoms to have poorer sleep quality, with an impact on functioning. Further research with larger sample sizes is needed to confirm our data.

THE RELATION BETWEEN CLINICIAN'S INTERVENTIONS, GROUP CLIMATE, AND ACADEMIC PERFORMANCE IN GROUP COUNSELLING: A CASE STUDY

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Abstract

In psychotherapy research, it's recognized the key role of clinicians' interventions in therapy outcomes, as well as the influence of clinicians theoretical model in orienting these interventions. Nevertheless, there are few studies relating to clinician's interventions in group therapy and few observer-rated measures to assess group clinician's interventions from a transtheoretical perspective (Chapman et al, 2010).

This case study aims to analyze the relation between group clinician's interventions, group climate and academic performance in underachieving university students participating to a group counselling.

A group of 7 students (M=3; F=4; mean age=26.29; SD=5.52) was considered. Two measures of outcome were used: a) the Academic Performance Inventory (Esposito et al., 2017), to assess the improvements of the academic performance of participating students; b) the Group Climate Questionnaire Short-form (Costantini et al, 2002), a 12 items questionnaire, which measures three group climate dimensions (Engagement, Conflict, Avoidance). Transcripts of nine sessions were coded according to the Group Psychotherapy Intervention Rating Scale Basic Skills Version (Chapman et al., 2010), a reliable process measure that analyzes group clinician's interventions, grouped in three domains (Group Structuring, Verbal Interaction, Emotional Climate).

Outcome results showed no significant improvement ($Z=-1.633$; $p=.102$) of the academic performance, and relating to group climate high Engagement, low Conflict and high Avoidance scores. The process analysis showed that the clinician's interventions covered the three domains of the scale, but the interventions aimed at managing conflict in the group were absent. Overall, results showed that conflict among members was basically absent and that the group depended on the clinician's guide and avoided conflict themes.

Future studies may consider more groups with different outcomes in order to understand if these results are replicable.

SEXUALITY IN BREAST CANCER SURVIVORS: AN EXPLORATIVE STUDY

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Abstract

Introduction: Cancer and its treatment often affect several dimensions of patients' quality of life, not only in the short term, but also in the long term. In detail, the treatment for breast cancer often involves years of hormonal therapy, which has a significant impact on sexuality and couple intimacy. This study aims to evaluate sexual functioning in a sample of women with a history of breast cancer.

Methods: The participants were 57 breast cancer survivors in an ongoing couple relationship who had completed cancer treatments (except hormonal therapy) at least 12 months earlier. A self-report questionnaire was used to collect sociodemographic and clinical characteristics and the Female Sexual Function Index (FSFI) was administered in order to evaluate sexual functioning.

Results: The age range of the sample was 29–67 years (mean=49.2; DS=8.45). The Student's t test found a significant ($p<0.0001$) difference in the mean score obtained on the FSFI between our sample and the normative data. In addition, 77.2% of the sample presented a clinically relevant score on the FSFI.

Discussion: As reported in the literature, this study shows a high prevalence of sexual issues among breast cancer survivors. This result suggests the importance of promoting communication about these issues. In future research, it may be important to identify women that are more vulnerable to sexual problems in order to target specific communication techniques within the couple and plan multidisciplinary interventions aimed at providing a better quality of life to patients.

THE ROLE OF CRAVING AND MALADAPTIVE PERSONALITY TRAITS IN ADOLESCENT GAMBLING

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Abstract

Although the gambling disorder criteria do not explicitly address craving, craving has received increased attention as a critical phenomenon in gambling addiction, since it was found to be a significant predictor of gambling severity and might help explain why some gamblers continue to gamble despite adverse consequences. Furthermore, recent findings have suggested that both alcohol consumption and maladaptive personality dimensions may serve as risk factors among adult pathological gamblers. To date no study analyzed the relative contribution of these factors in adolescent gambling behavior.

This study aims to investigate the relationship between gambling severity, craving, maladaptive personality traits, and alcohol use in adolescence.

The sample comprised 430 high school students (47.9% males), aged between 14 and 18 (mean age = 15.73; $SD = 1.37$). Participants were administered the South Oaks Gambling Screen-Revised for Adolescents (SOGS-RA), the Gambling Craving Scale (GACS), the Personality Inventory for DSM-5 - Brief Format (PID-5-BF), and the Alcohol Use Disorders Identification Test (AUDIT).

Data were submitted to univariate and mixed ANOVAs, and linear regression analysis.

Results indicated that, relative to both non-gamblers and non-problem gamblers, at-risk and problem gamblers scored significantly higher on the GACS and the PID-5-BF dimensions, as well as on the AUDIT total scores. Regression analysis showed that, along with gender and age, the best predictors of adolescent gambling involvement were the Anticipation and Desire GACS subscales, the Negative Affectivity PID-5-BF dimension, and the AUDIT total score.

This finding provides the first evidence of an association among problematic gambling, craving, alcohol consumption, and maladaptive personality trait dimensions in adolescence.

ALEXITHYMIA, STRESS AND SEVERITY OF THE DISEASE IN CHILDREN AFFECTED BY CHRONIC CONDITIONS

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Abstract

Introduction: In a previous study (Freda et al, 2017) alexithymia and high levels of perceived stress were found in children with Hereditary angioedema with C-inhibitor deficiency (C1-INH-HAE). C1-INH-HAE is a rare chronic disease characterized by recurrent edema of unpredictable localization, frequency and severity. Stress, anxiety, and low mood are among the triggering factors most frequently reported in patients’ narratives (Savarese et al, 2017; Fouche et al. 2013).

The aim of this study is: a. to confirm the presence of alexithymia and stress in a wider group of children with C1-INH-HAE; b. to explore whether they are also present in children affected by other chronic diseases; c. to investigate their relationship with C1-INH-HAE severity.

Method: Within a quantitative component of a qualitatively-driven research design, data from children with C1-INH-HAE (n=28) from four reference centers in Italy were compared with data from children with type 1 diabetes (T1D; n=23) and rheumatoid arthritis (RA; n=25). Alexithymia was assessed using the Alexithymia Questionnaire for Children scale (AQC - Di Trani et al., 2010); perceived stress was assessed using the Coddington Life Event Scale for Children (CLES-C – Sogos et al., 2009).

Results: Alexithymia scores were similar among disease groups, highlighting generalized difficulties in emotion regulation in all the children within the research group. Perceived stress scores tended to be worse in C1-INH-HAE children. C1-INH-HAE severity was found to correlate

significantly and positively with alexithymia ($p=0.046$), but not with perceived stress. Alexithymia correlated positively with perceived stress.

Conclusions: Alexithymia seems to be generalized in children with chronic diseases. In C1-INH-HAE it may play a role in the increased levels of perceived stress therefore increasing the probability to trigger edema attacks. Psychological interventions for children and their parents may positively influence the management of C1-INH-HAE.

NO COUNTRY FOR YOUNG AFRICAN WOMEN: GENDER DIMENSIONS IN ASYLUM SEEKERS' WOMEN NARRATIVES

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Abstract

Introduction: Among the generable category of asylum seekers and refugees, women and minors have to be considered as vulnerable populations by virtue of their susceptibility to sexual and gender-based violence and of their specific needs (UNHCR, 2017). Studies focused on women as forced migrants have mainly looked at their higher exposure to sexual violence (Bradley & Tawfiq, 2006; Rogstad & Dale, 2004; Boersma, 2003) as well as on their higher risk, compared to men, to develop post-traumatic stress disorders (Breslau & Anthony, 2007; Tolin & Foa, 2006), somatic symptoms or emotional outbursts (Renner & Salem, 2009) as consequence of traumatic events. However, although the displacement phenomenon, in its current serious state, is relatively recent and the international literature on asylum seekers and refugees is wide, research on vulnerable populations, especially on women, is still underdeveloped and need to be increased (Keygnaert et al., 2014; Kalt et al., 2013).

Method: The present study aimed to explore the meanings that asylum-seekers women attribute to their migratory experiences. 10 Nigerian asylum seekers women (mean age 25), hosted in an Extraordinary Reception Centre were met. Semi-structured interviews based on the whole migratory experience were administered and analysed according to the principles of the Interpretative Phenomenological Analysis methodology (Smith & Osborn, 2003; Smith et al., 2009).

Results: 3 Superordinate themes emerged: *No Country for young African women; Face to face with death; Learning to be myself.*

Discussion: On the background of the complexity of all migratory phases, the gender dimension assumes a key role in defining and influencing experiences. Being an African woman exposes to a high mandate in the Mother Earth as well as to stigma and preconceptions in the hosting country. The capability to resist and re-invent themselves as women and/or mothers emerged as positive aspect to face with challenges and obstacles.

SOMATOFORM DISORDERS IN EARLY ADOLESCENCE: ANALYSIS OF AFFECTIVE AND COGNITIVE FEATURES USING THE THEMATIC APPERCEPTION TEST

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Abstract

A large number of early adolescents referred to Hospital complaining about headache or pains refer to a part of their body, unexplained by a general medical condition (Mohapatra, Deo, Satapathy, & Rath, 2014). Somatoform disorders tend to comport impairment in social and cultural context such as academic difficulties and/or the capacity of socialization with peers in developmental age (Deshpande, Ganapathy, & Bendre, 2015). Literature highlights the role of environmental aspects, as possible risks factors for the onset of somatoform disorders. Just a few studies consider the link between inner relational representations and affective interpersonal relationships, in somatoform disorder at this age. The aim of this pilot study was to verify the quality of relational representations and interpersonal relationships in a sample of early adolescents (N=20; 11-15 years), with somatoform disorders, in respect with anamnestic and psychosocial variables. The quality of affects, cognitive, and verbal productivity in Thematic Apperception Test (TAT; Murray, 1943) stories were analyzed with the method of Social Cognition and Objects Relations Scale (SCORS; Abbate & Massaro, 2007); the affective themes and conflicts were assessed with the grid of scoring of Objects Relations Technique (ORT; Lis, Zennaro, Giovannini, Mazzeschi, & Calvo, 2002). Correlational analysis pointed out that adolescents tend to present more muscle and articular pain than other symptoms (gastro-intestinal and pseudo-neurological) when they show a high percentage of family conflicts or academic difficulties. More they present gastro-intestinal symptoms, more they tend to express aggression themes; and more subjects complain these last symptoms, less they present family conflicts. Findings highlighted how adolescents use their body as a privileged way to express own distress inside the family and the academic context in which they are involved. Clinical implications are discussed.

INHIBITORY FUNCTIONING OVER MEMORY AND MOTOR REPRESENTATIONS IN PATHOLOGICAL GAMBLING

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Abstract

Addictive disorders are generally characterized by several inhibitory deficits, whose nature (unitary vs. domain-specific) is still debated. Here, these different inhibitory deficits were examined in a sample of twenty outpatients with pathological gambling, compared with a matched sample of twenty healthy controls. The research protocol included two sessions. In the first one, the Retrieval Practice Paradigm was administered, aimed at assessing an effect thought to mark the integrity of inhibition over interfering memories, known as Retrieval-Induced Forgetting (RIF). In the second session, the Sustained Attention to Response Task (SART) was used to test the integrity of response inhibition. Self-report questionnaires assessing impulsivity were also administered. Based on our previous data using the same paradigm in the domain of substance-related disorders (i.e., alcohol and drug addictions) we hypothesized for patients with gambling disorder a specific impairment in memory inhibition compared with motor inhibition. Unexpectedly, RIF was present and not statistically different in the two groups, suggesting a preserved ability to inhibit interfering memories also in the clinical group. Remarkably, patients showed more commission errors during SART performance compared with controls, suggesting that a vulnerability in response inhibition might be the most reliable marker of their altered inhibitory abilities. Thus, our sample of patients with gambling disorders appeared to be characterized by different (and complementary) inhibitory deficits compared with previous samples of patients with substance-related disorders. Determining an inhibitory profile for different categories of patients (by using tasks assessing various aspects of inhibitory functioning) can be a valuable means not only to orient patients' treatment based on their specific impairments, but also to better typify them within the broad diagnostic category of addictive disorders.

THE IMPACT OF MOTOR FUNCTIONING ON SOCIAL COGNITION IN PRESCHOOL CHILDREN WITH AUTISM SPECTRUM DISORDER (ASD)

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Abstract

Introduction: In this study, the aim was to investigate the association between motor competency and social communication in children with Autism Spectrum Disorder (ASD) compared with children with intellectual disabilities (ID) and typically developing (TD) children.

Method: Social Communication Questionnaire (SCQ), Autism Classification System of Functioning: Social Communication (ACSF:SC), Movement Assessment Battery for Children, second edition (MABC-2), and Leiter International Performances Scale Revised (Leiter-R) were administered in the three groups.

Result: The ASD+ID and ID groups showed lower MABC-2-manual dexterity mean scores, MABC-2-aiming and catching mean scores, MABC-2-static and dynamic balance mean scores and MABC-2-TTS compared with the TD group ($p < 0.05$). In addition, the ASD+ID group had lower MABC-2-aiming and catching mean scores compared with the ID group. In the ASD+ID group, we found a significant negative correlation ($p < 0.001$) between MABC-2-aiming and catching scores with SCQ scores, nonverbal IQ and ACSF:SC levels.

Conclusion: This study highlighted the specificity of motor impairment in ASD comparing performances on a frequently used measure of motor impairment between clinical groups (ASD+ID and ID) and a non-clinical group. While previous research has suggested that multiple deficits in motor functioning may be present in ASD, our findings suggest that deficits in tasks involving the ability to integrate visual and motor cues (aiming and catching task) are somewhat specific to ASD.

HOARDING DISORDER (HD) AND EMOTIONAL REGULATION: A PILOT STUDY ABOUT BELIEFS AND EMOTIONS RELATED WITH INDUCED HOARDING FRAMEWORK

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Abstract

Associated with HD symptoms are dysfunctional beliefs and peculiar cognitive/emotional processes. Indeed, hoarders show a difficulty in control/tolerate intense negative emotions experienced especially when they have to reject stuff; moreover, seems that hoarders' dysfunctional beliefs increase the difficulty to discarding objects (Shaw et al., 2015; Frost, et al., 2015). Thus far, the research between HD and emotional/cognitive processes is still ongoing but other studies are required to better understood this topic. Therefore, our main aims were to investigate the emotional/beliefs processes related to "discarding" possessions and their different manifestation between two groups of subjects extracted by a non-clinical sample (N=511), respectively composed by 36 individuals that met HD symptoms (HighHDi) and 30 individuals without HD features (LowHDi). All the participants completed a series of self-report questionnaires in order to assess emotional regulation strategies, distress tolerance, appraisals of negative emotions, emotional intensity/tolerance and hoarding dysfunctional beliefs. All the subjects were assessed at two different times, before (T1) and after (T2) the experimental condition (leave an important possession at the laboratory for a week); moreover, they were asked to fill out a self-monitoring notepaper for seven days between T1 and T2. At T1, preliminary results of a one-way ANOVA ($F(1,64)=3.3$; $p=0.04$) showed a greater difficulty to regulate emotion of HighHDi rather than LowHDi. In line with literature subjects with hoarding features have a difficulty to control/regulate emotions. Moreover, results of a Student's t-test analysis ($3.06 < t_{(1,64)} < 3.52$; $p < .05$) put in evidence that HighHDi had a greater number of thoughts and negative emotions related to their objects during the week than LowHDi. These results are promising and future investigations considering also a hoarders sample are usefull for implementing increasingly suitable treatments.

ROMANTIC JEALOUSY AS A RISK FACTOR FOR PSYCHOLOGICAL ABUSE IN ROMANTIC RELATIONSHIPS

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Abstract

Romantic jealousy is an adaptive and complex emotional state widely diffused within romantic relationships. Research stated that jealousy feelings could constitute a significant risk factor for psychological abuse conducts in couples' dynamics (Guerrero et al., 2004). However, to date, no studies have investigated the role played by different cognitive, emotional and behavioral aspects of jealousy feelings in predicting abusive conducts within couple relationships. The main focus of this paper is to fill this gap.

192 participants (38% males, from 19 to 30 years old, mean age = 21.84, SD = 2.47) were recruited for this study. Inclusion criterion was a romantic relation of at least six months. The range of the relationship length was from 6 to 99 months (mean = 28.29, SD = 17.04).

The *Italian Short Form of the Multidimensional Jealousy Scale* (Tani & Ponti, 2016) was used to investigate the three main dimensions of jealousy.

The *Italian Adaptation of the Multidimensional Measure of Emotional Abuse* (Bonechi & Tani, 2011) was employed to assess the different aspects of psychological abuse.

To evaluate the relationship between the three dimensions of romantic jealousy and couple abuse, two distinct multiple regression analyses were conducted, for suffered and acted abuse separately, inserting gender and relationship length as control variables.

Findings showed that, independently of gender and length of relationship, the three dimensions of jealousy play a different role in predicting psychological abuse. In particular, both suffered and acted abuse appears to be significantly and positively predicted by cognitive and behavioral jealousy, while emotional jealousy doesn't have any significant influence.

Overall, our results are in line with the studies that see jealousy as a risk factor for abuse (Buss, 2000), highlighting the different role of the three dimensions of romantic jealousy.

ATTACHMENT INTERGENERATIONAL TRASMISSION AND INTIMATE PARTNER VIOLENCE: THE MEDIATING ROLE OF ROMANTIC ATTACHMENT

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Abstract

A vast amount of literature has documented that Intimate Partner Violence (IPV) tends to repeat across generations (Stuth et al., 2010; McClellan & Killeen, 2000) and it is strictly linked to romantic attachment style (Barbaro et al., 2016; Shechory, 2013). The attachment theory, through the Internal Working Model construct, gives a relevant contribution to understand how violence can be transmitted across generations and maintained within romantic relationships. Despite this, no studies have examined the role that early attachment bond and adult attachment bond conjointly play on IPV. The main focus of this study is to fill this gap. Specifically, the study explores if and which attachment styles are linked to IPV and analyzes the attachment intergenerational transmission investigating both direct and indirect associations among early attachment bond, romantic attachment and IPV.

29 women ($M_{age} = 39.52$, $SD = 8.36$) victims of physical IPV and 31 women ($M_{age} = 39.84$, $SD = 7.62$) who were not victims of IPV in their romantic relationships were recruited for the present study. All participants completed the Italian version of the Inventory of Parent and Peer Attachment (Guarnieri et al., 2010) and of the Experiences in Close Relationships-Revised (Picardi et al., 2002). Multivariate analysis of variance and mediational analysis were conducted.

Results revealed that women victims of IPV report higher levels of insecurity in their attachment bonds, both to their mothers and their romantic partners, than women of the control group. Moreover, insecure romantic attachment results linked to IPV victimization. Finally, the early attachment bond to mother is linked to a woman's propensity to have a violent romantic relationship in an indirect way, through insecure attachment to the romantic partner. This result confirms that intergenerational transmission of attachment can be a relevant risk factor for violence in romantic relationships (Stith et al., 2000).

PSYCHOLOGICAL DISTRESS AND HOUSING CONDITIONS AMONG UNIVERSITY STUDENTS

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Abstract

Emerging adulthood (Arnett, 2000) is a phase of development characterized by many transitions and challenging tasks (Furnham, 2004; Miller, 2017). For some young men and women, this phase coincides with the years of University, that imply further tasks: transferring, performance demands, changes in living conditions, making a career choice, and facing a social and educational context far from the ones experiences before. To investigate psychological dynamics in University students, a systematic review was conducted on studies published in the last 10 years in the major electronic databases (e.g.: Scopus, Web of Science, MEDLINE/PubMed, ProQuest Psychology Journals). Among other results, moderate or severe depression was found in 9% to 39.5% of students (Beiter et al., 2015; Deb et al., 2016; Peltzer et al, 2013; Reyes-Rodríguez et al., 2013; Schofield et al., 2016); severe or extremely severe anxiety in 15% of students (Beiter et al., 2015); and suicidal behavior at least once in the past in 7.6% to 15% students (Chesin & Jelic, 2012; Poorolojal et al., 2017; Tang, Byrne, & Qin, 2018). Moreover, students living away from home showed higher psychological distress, regardless of parental financial support (Flett, Endler & Besser, 2009; Stroebe et al, 2002; Vershuur, Eurelings-Bontekoe, Spinhoven, 2004; Watson, Barber & Dziurawiec, 2016). Unlike in most other countries, only a few Italian studies has focused on psychological distress and mental health of University students (Eskin et al., 2016; Piumatti, 2017; Piumatti et al, 2018; Pompili et al., 2017; Kara et al., 2015). Moreover, preliminary elaboration on 2014 cross-sectional IT-Silc data showed that students living on their own experience a higher general health well-being than the ones who still live with their parents, in every geographical area. These data suggest the importance of investigating psychological distress in University students in relation to their housing conditions in an Italian sample.

THE RELATIONSHIP BETWEEN THE ALEXITHYMIC TRAIT AND THE ATTITUDE TOWARDS DREAMS

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Abstract

The present research was designed to explore the relationship between alexithymia and dreaming correlates in a non-clinical sample. The early clinical impression that alexithymia might be associated with an impoverished dream experience has been empirically evidenced in several studies. Characteristics of the alexithymia trait, such as the deficit in the symbolic representation of emotions together with a limited imaginative ability, can have an impact on the richness or quality of dreams production and recall.

A group of 30 non-clinical subjects (20 females) participated to the study. Alexithymia was assessed with the Toronto Structured Interview for Alexithymia (TSIA), an observer-report instrument composed of 24 questions with the purpose of assessing a general subjective level of alexithymia and 4 dimensions of alexithymia: Identifying emotional feelings (DIF), Describing emotional feelings (DDF), Imaginal Processes (IMP); and Externally oriented thinking (EOT). The subjective dreaming activity was assessed using the Mannheim Dream Questionnaire (MADRE), an instrument that was designed to elicit some form of dream history including dream recall, nightmares, lucid dreaming, attitude towards dreams, and the effects of dreams on waking life. In the present study we considered the attitude towards dreams scale, which includes eight items.

A series of standard linear regression analysis on each of the eight MADRE-attitude statements were carried on. TSIA and its factors were considered as separate predictor variables and different attitudes towards dreams as the responses variables.

Results showed that the IMP and the DIF scales of the TSIA (impoverishment of imaginative processes and verbal capacity) are significant predictors of several dimensions of dream's attitude, such as for example the meaning attributed to dreams production. In future, it would be interesting to use a larger sample and also different clinic samples such as nightmare sufferers, patients with sleep and/or mental disorders.

EMOTION REGULATION AND AFFECTIVE FUNCTIONING: CORRELATIONS AMONG DIFFERENT MEASURES IN AN ITALIAN SAMPLE

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Abstract

Emotion regulation is crucial for different aspects of healthy adaptation ranging from affective functioning to social relations. Two main emotion regulation strategies have been identified: cognitive reappraisal and expressive suppression. Previous results show that reappraisal correlates positively with positive affect and negatively with negative affect, while suppression is related to less experience of positive emotions, and greater levels of negative affect (PANAS) (Gross & John, 2003). However, in a recent study based on an Italian sample (Balzarotti, Gross, John, 2010), suppression showed the predicted negative link to positive affect but not the predicted positive relation to negative affect. In the present study the link between emotion regulation and affective functioning was investigated through the use of multiple measures of positive and negative affect. The sample comprised 132 Italian university students (88 female, M age = 24.4 years). Participants completed the Emotion Regulation Questionnaire (ERQ), the Emotional Intensity Scale (EIS), the Affect Intensity Measure (AIM) and the Positive and Negative Affect Schedule (PANAS). The ERQ subscale reappraisal correlated positively with the positive affectivity subscale of the AIM ($r = .22, p < .05$), and with the PANAS positive affect ($r = .33, p < .005$) while it correlated negatively with the PANAS negative affect ($r = -.21, p < .05$). The ERQ suppression correlated positively with the AIM negative intensity subscale ($r = .28, p < .01$) and negatively with the EIS positive emotions ($r = -.29, p < .005$). Consistent with previous studies, reappraisal was related to greater experience of positive affect and less experience of negative affect. Suppression was not related to PANAS scores but a negative link to positive experience was found using the AIM and a positive relationship to negative affect was found using the EIS.

THE ROLE OF SEXUAL NARCISSISM IN THE SEXUAL FANTASIES AND MARITAL SATISFACTION

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Abstract

Introduction: Sexual narcissism (Widman & McNulty, 2010) is a construct including a number of sexual attitudes (sexual exploitation S-EX, sexual entitlement S-EN, low sexual empathy LSE and a grandiose sense of sexual skill SSS) to objectify the partner. Sexual narcissism influences negatively the quality of marital satisfaction, except for the sexual skill that is positively correlated with couple satisfaction (Widman & McNulty, 2013). The aim of this study is to verify the influence of sexual narcissism on marital satisfaction and erotic imaginary in Italian couples.

Methods: 70 heterosexual couples from southern Italy, medium age 35.6 (sd=4.1), married by M= 5.2 (sd =2.5) years, signed a privacy form and completed a set of questionnaires: the Sexual Narcissism Scale (Widman & McNulty, 2010), the Dyadic Adjustment Scale (Spanier, 1976), and the Erotic Imagery Questionnaire (Panzeri, Fontanesi, 2015).

Results: Results show different effects of the facets of sexual narcissism on the couple adjustment. In males, S-EX ($B = -1.08, p < .001$), sense of sexual skill ($B = -.34, p < .05$) influence negatively the adaptation of the couple S-EN ($B = -1.23, p < .001$) and the LSE ($B = .38, p < .001$) are positively associated with couple adjustment. In females, S-EX ($B = -.28, p < .01$) and LSE ($B = -.31, p < .05$) influence negatively the couple adjustment; S-EN ($B = .31, p < .05$) and the SSS ($B = .40, p < .05$) are positively associated with couple adjustment. Again, in females we observed that S-EX is negatively associated with the erotic imaginary ($B = -.16, p < .01$), while is positively associated with erotic fantasies ($B = .62, p < .001$). Otherwise, in males S-EX ($B = 1.04, p < .01$) and the SSS ($B = .70, p < .01$) positively influence the erotic imaginary, while S-EN ($B = -1.09, p < .01$) influence it negatively.

Conclusion: Preliminary results partially confirmed Widman and McNulty (2013) work. Differences can be related to the cultural differences on sexuality and we are now testing our hypothesis on a larger sample.

DEVELOPMENT AND VALIDATION OF THE HEMODIALYSIS CAREGIVING QUESTIONNAIRE (HCQ)

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Abstract

Chronic kidney failure is a pathology leading to progressive disability, both because of the need to resort to hemodialysis replacement therapy and because of its correlation with other major chronic diseases. Several authors have analyzed the difficulties faced by who provide assistance to the chronically ill, especially when it is a family member to be the caregiver. Nevertheless, a test to assess the characteristic and the psychological condition of those subjects don't exist.

The aim of the study is to develop a sensitive and valid tool to intercept the needs of family-caregivers of patients in dialysis treatment.

87 hemodialysis centers in the territory of Naples and Caserta, in the south of Italy, participated at the study. 1,200 caregivers (Mean Age 53.76) completed a specially structured questionnaire of 29 items aimed at detecting their psychological characteristics and problems.

The items of questionnaires completed by the subjects aggregated in territory of Naples, were used to performed a Principal Component Analysis (PCA) with varimax rotation; the questionnaires completed by the subjects aggregated in territory of Caserta were used to develop the Confirmative Factor Analysis (CFA). The internal consistence of the test was measured using the Crombach's alpha index. PCA showed that the HCQ is articulated in 4 components named: emotional and physical impact, care load, needs, perceived tension. It shows a good value of Crombach's alpha (0,86) and the 4 components explain a high percentage of variance (57%). The CFA confirmed structure of HCQ based on 4 factors strongly related one another.

In this phase of psychometric validation, HCQ shows an acceptable internal consistence and may be a useful tool for clinical assessment and develop specific actions that can help the family caregivers of patients cope with the burden of caring for them and have a positive influence on the well-being of the patient as well as on the harmony of the whole family system.

THE WEALTH OF ITALIAN GESTALT THERAPY: A SEMANTIC ANALYSIS OF THE DIFFERENT DECLINATIONS OF THE FIELD CONCEPT

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Abstract

Introduction - The concept of *field* is a central assumption in Gestalt Therapy. It was born from the studies of the early Gestalt psychologists and it has allowed Fritz Perls to develop his powerful insights on the flow of experience within a psychotherapeutic system. Over the years, the concept of *field* has expanded beyond the limits of the original formulation and, in Italy it has assumed complex and original meanings. In order to develop a common theory of gestalt therapy, this study aims to develop an organic revision of these modern concepts.

Method – with the aim of identifying the current declinations of “field concept” developed by the Italian schools of Gestalt, the scientific articles produced in the last 20 years by Italian Gestalt Therapists were analyzed with a “topic modeling approach” that allows us to discover the central topics from a collection of documents. For example, a group of words that are frequently written in the same text represents a topic. Specifically, we used the Latent Dirichlet Allocation a hierarchical Bayesian method where every report may be expressed as a probabilistic distribution of latent topics, and a latent topic is represented as a probabilistic distribution of words. The model uses the documents and words to compute two hidden parameters, topic-document distributions, and word-topic distributions.

Results - The preliminary results show an amount of 11 topics that describe the wide develop of the issue focused. Three topics, characterized by terms like figure/ground, organism/environment relationship/subject, are most popular among the corpus dataset and are related to the primary description of the gestalt *field* concept.

Conclusion –These topics represent the common roots and the integrative criteria for gestalt therapists and allow us to individuate in the concept of relational field one of the columns of a common gestalt therapy model in Italy.

THE AUTONOMIC REACTIVITY OF SOCIAL EXCLUSION IN PATIENTS WITH PSORIASIS: A THERMAL IMAGING STUDY

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Abstract

Psoriasis is a chronic skin disease often associated with emotion regulation deficits and with the experience of stigmatization. In this study, we investigated the behavioral and physiological consequences of social exclusion in psoriasis participants (N=17) and a control group (N=17). Participants underwent the social induction phase by playing the Cyberball Game in which they were excluded or included by other players. Then they played the Trust Game (TG) as investor. In the TG, the investor decides how much of €10 to invest on familiar and unfamiliar players. The familiar (bad vs good) players were the ones previously encountered in the Cyberball Game. Participants' peri-orbital temperature during the task was measured by means of thermal imaging. Higher temperature in this area reflects the activation of the sympathetic system. Behavioral results showed that unfamiliar players were trusted more after social exclusion than inclusion. Interestingly, the analysis on the temperature of peri-orbital regions showed that: i) while controls had a lower temperature during inclusion with respect to exclusion, patients' temperature during social inclusion was as high as the one recorded during social exclusion; ii) during social inclusion, patients' periorbital temperature was higher respect to controls' one. Taken together, these results seem to suggest that for patients, social inclusion was as stressful as exclusion. In line with this physiological result, we found that while controls reported to be much happier after social inclusion than exclusion, patients' emotional state was not enhanced by being included. Finally, we found that higher temperature during social exclusion predicted higher trust investments towards unfamiliar opponents in patients but not in controls. This result suggests that patients might have difficulties in regulating the sympathetic activation experienced during painful social interactions and need to adjust future behavior consequently.

BEST POSTER AWARD

OPERAZIONALIZING THE CONSTRUCT OF AGENCY AMONG WAR AFFECTED CHILDREN. A QUANTITATIVE PILOT STUDY IN PALESTINE

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Abstract

Over one billion children are growing up throughout the world in contexts of political violence and armed conflict. Exposure to political violence has been linked to high rates of psychological distress, increased sensitivity to conflict and odds of maladjustment. In Palestine, many studies linked exposure to armed clashes, bombardment and houses' demolitions to depression, traumatic stress and anxiety in children exposed. However, a growing corpus of research has shown that Palestinian children continue to display positive functioning and good abilities in adjusting to trauma. Moving from a socio-ecological perspective, this study aimed at investigating attitudes of agency and psychological adjustment to trauma in children living in different areas of Palestine. We hypothesized that the more children are showing good life satisfaction, hope and agency, the less they suffer of traumatic symptoms (intrusion and avoidance).

Self-reported measures were administered to 200 children (120 from West Bank, 80 from Gaza strip, Age 11,2; s.d.2,03; range 7-13). PANAS-C was used to assess positive and negative affects; MSLSS was designed at measuring children's life satisfaction in five domains (self, family, friends, school, and living environment). FS was measuring self-perceived happiness. CHS detected agency and hope, whilst CRIES-13 traumatic responses (intrusion and avoidance) among children. Pearson correlation and linear regression were carried-out in order to test our hypothesis. Results showed that positive emotion and life satisfaction contribute to mitigate the impact of traumatic events. Linear regression analyses pointed-out that positive emotions significantly contributed to children's life satisfaction. Agency and hope significantly correlated to positive emotions. These findings may give a more comprehensive picture on children's abilities in adjusting to trauma and provide guidance for clinical interventions oriented at enhancing children's well-being.

THE ANXIETY-BUFFER HYPOTHESIS TO PROTECT CRISIS-RELATED PATIENTS FROM HOPELESSNESS AND SUICIDAL IDEATION

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Abstract

Introduction. Despite the recent economic crisis is almost over, mental health (MH) disorders due to its impact still occur worldwide – as well as the requests for psychological help (Starace et al., 2017). This kind of patients – called “Crisis-Related” (CRP; Rossi, Frera & Giannelli, 2016) – show strong psychological suffering (e.g.: clinical anxiety disorders) that often lead to a crisis-related hopelessness that in turn could drag the CRP to suicidal ideation. However, the *Anxiety-Buffer Hypothesis* (Greenberg et al., 1992) suggests that self-esteem could be considered as a shield (buffer) against several threats to individual MH, as: fearful thoughts and end-of-life-related feelings. The aim of the study was to test the process – triggered by crisis-related anxiety – in which self-esteem should buffer the path that leads to suicidal ideation through the experience of hopelessness.

Methods. An observational research design was used. Patients ($n=185$) were enrolled at the “Crisis and Psychopathology Observatory” – Ospedale Maggiore Policlinico, Milan – and tested with: Beck Anxiety Inventory ($\alpha=.87$), Beck Hopelessness Scale (KR-20=.83), Rosenberg Self-Esteem Scale ($\alpha=.85$) and the CORE-OM scale of suicidal ideation ($\alpha=.88$).

Results. A multiple step mediation analysis (5000bootstrap) showed model’s significance [$F=39.69$; $p<.001$; $R^2=.29$; Eff.Size=.213]. The relationship between anxiety and hopelessness (path a2: $\beta=.147$, $p<.001$) was partially mediated by self-esteem (path a1: $\beta=-.175$, $p<.001$; path d1: $\beta=-.433$, $p<.001$). Encouragingly, the relation between hopelessness and suicidal ideation (path b2: $\beta=.044$, $p=.002$) was still safeguarded by self-esteem (path b1: $\beta=-.033$; $p=.004$).

Conclusions. These promising findings highlight the role of self-esteem as a protective factor from suicidal ideation in CRP. They suggest new ways in which clinicians could elaborate treatments and therapies to decrease this crisis-related process that could lead to suicidal ideation.

THE RELATIONSHIP BETWEEN ALEXITHYMIA, DEFENSE MECHANISMS, EATING DISORDERS, ANXIETY AND DEPRESSION

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Abstract

Introduction: Research has investigated the role played by Alexithymia and Defense Mechanisms (DM) in disorders such as Anxiety, Depression and Eating Disorders (ED). The aim of this study is to verify if the DM mediate the relationship between Alexithymia, ED, Anxiety and Depression.

Method: The 5 questionnaires were administered to 283 subjects aged between 18 and 49 years ($M = 22.33$, $DS = 4.81$). *TAS-20* consist of 3 scales: Difficulty Identifying Feelings (DIF), Difficulty Describing Feelings (DDF) and External-Oriented Thinking (EOT). *DSQ* consist of 4 scales: Maladaptive Style (MS), Image-distorting Style (IS), Self-sacrificing Style (SS) and Adaptive Style (AS). *EDI-2*, it is composed of many scales, we used two scales: General Psychological Maladjustment (GPM) and Eating Disorder Risk (EDR).

Results: Path analysis was conducted to test a model with Alexithymia as predictor variable, DM as mediators, and ED, Anxiety and Depression as outcome. The saturated model was executed, subsequently, in according with common procedure to test the saturated model all nonsignificant paths were removed and several indices indicated that the data fit the final model, $\chi^2(24) = 32.55$; $p = .11$, $CFI = .99$, $RMSEA = .04$ (90% CI = .00 – .06). The results showed a significant path from DIF to MS ($\beta = .46$; $p < .05$), and SS ($\beta = .16$; $p < .05$), DDF was related to IS ($\beta = .18$; $p < .05$), while EOT was related with AS ($\beta = -.18$; $p < .05$). The results showed a significant path from MS ($\beta = .34$; $p < .05$), AS ($\beta = -.12$; $p < .05$), DIF ($\beta = .30$; $p < .05$), EOT ($\beta = -.14$; $p < .05$), to Anxiety and from MS ($\beta = .44$; $p < .05$), AS ($\beta = -.13$; $p < .05$), DIF ($\beta = .26$; $p < .05$) to Depression. Furthermore, there were a significant path from MS ($\beta = .49$; $p < .05$), AS ($\beta = -.11$; $p < .05$), DIF ($\beta = .32$; $p < .05$), to GPM. Moreover, there was a significant path from MS ($\beta = .30$; $p < .05$), to EDR.

Conclusions: Results showed that Alexithymia has a role in the prediction of Anxiety, Depression and GPM through the effect of DM.

WHICH SPACE TO THINK? DIACHRONIC NARRATIVE FUNCTIONS FOR PROCESSING BREAST CANCER EXPERIENCE IN UNDERFIFTY WOMEN

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Abstract

The onset of a breast cancer (BC) is a potential traumatic event that can overwhelm the personal adaptive skills; in recent years there has been an increase of 30% in women under50, vulnerable target of scientific interest. To date, however, the knowledge of narrative processing and coping with this experience by younger women appears to be lacking as well as the development of targeted psychological supports. Within IMPRONTE project, a longitudinal quali-quantitative research, this paper focus to explore, with an *ad hoc* narrative interview, the ways by which women under 50 construct meaning and coping with BC during the pre-hospitalization as first phase of the medical iter. At the Pascale Hospital of Naples, 25 narrative interviews were collected. The narrations were analyzed through an *ad hoc* methodology aimed at identifying, with a score 1-3, the articulation of the main transformative functions mediated by the narration: semiotic connection between events (CE); connection between time lines (CT); connection between feeling-emotion-thought (CET). The analysis shows a low function of connection between the cancer event, verbalized only through metaphors, and other parts of self; medical praxis are salient. Relating to CT the present is pervasive, characterized by vagueness and suspension; an articulation is possible on the theme of perceived resources: for younger women the family becomes an area of continuity of life in the discontinuity of the cancer, the children are the dimension by which a future time can be glimpsed. Relating to CET we find mostly sensorial and emotional elements, not yet thinkable; in some cases inferences on the emotions of others and reflections on the ongoing changes are verbalized. The narration becomes an opportunity to promote connections and transformations of the experience in a diachronic way, operating functions of putting into words the difficult to find words and constructing meaning in *hic et nunc* of the experience.

BINGE EATING DISORDER IN COMMUNITY GIRLS: EXPLORING THE PREDICTIVE ROLE OF ATTACHMENT AND ALEXITHYMIA

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Abstract

The Binge Eating Disorder (BED) resulted the most common eating disorder among teenagers. Many studies linked eating disorders during adolescence with insecure attachment representations and/or higher levels of alexithymia, but few studies investigated these variables specifically with respect to the risk of BED in adolescence. Besides, those studies mostly involved clinical samples, while to our knowledge there are no studies on community adolescents. In this pilot study we aimed to investigate the role of attachment and alexithymia with respect to binge eating symptoms showed by 44 community girls (aged 14-18, $M = 15.7$, $SD = 1.1$), enrolled from Ligurian high-schools. As this is the second wave of a larger study, the levels of binge eating symptoms of participants were previously screened thorough the Binge Eating Scale (BES; cut-off >17). For this study we administered the *Friends & Family Interview* (FFI) to assess attachment representations, in terms of classifications (secure, dismissing, preoccupied and disorganized) and scales; the *Toronto Alexithymia Scale* (TAS-20) to detect the levels of alexithymia, also in their factors of Difficulty to Identifying (DIF) and to Describing (DDF) Feelings and Externally Oriented Thinking (EOT). Total score of BED correlated with attachment security ($r = -.391$, $p = .009$) and preoccupation ($r = .361$, $p = .016$) and with alexithymia DIF ($r = .304$, $p = .045$). In a stepwise regression, insecure-preoccupied attachment and difficulty to identifying feelings predicted 24.7% of the variance in BES scores ($adjusted-R = .211$, $p = .011$). Eating binge may be a maladaptive strategy to cope with the difficulty to identifying and regulating feelings of anger and stress, then adolescents could be fostered in the acquisition of more adaptive emotion regulation abilities.

ASSESSING MENTALIZATION: DEVELOPMENT AND FIRST VALIDATION OF THE MODES OF MENTALIZATION SCALE

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Abstract

Aim. The aim to this work is to assess the validity and reliability of the Modes of Mentalization Scale (MMS; Colli & Gagliardini, 2016), a new clinician-report multidimensional measure of mentalization.

Study 1. Method. To test MMS factor structure and criterion validity a sample of 200 clinicians rated a patient who was at least 18 and had no psychotic disorder, using: 1) MMS; 2) Adult Attachment Questionnaire (Westen & Nakash, 2006); 3) clinical data form for data on patients, therapists, therapies. **Results.** Factor analysis suggested the presence of five scales that explained 54% of the variance: Excessive Certainty, Teleological Thought, Concrete Thinking, Good Mentalization, Intrusive Pseudomentalization. We found statistically significant and coherent associations between mentalization, attachment style, and personality pathology.

Study 2. Method. A different sample of 150 therapists and patients used a series of measures to test MMS criterion and convergent validity. Clinicians' measures were the same of Study 1. Patients' measures included: 1) Reflective Functioning Questionnaire (Fonagy et al., 2016); 2) Difficulties in Emotion Regulation Scale (Gratz & Roemer, 2004); 3) Interpersonal Reactivity Index (Davis, 1980, 1983). **Results.** The associations between MIS scales and other measures' scales were coherent, and statistically significant.

Study 3. In order to test MMS reliability, we calculated the IRR in a sample of junior (N=3) and senior (N=3) raters on a sample of 15 session transcripts: ICC ranged from sufficient ($\geq .40$) to good ($\geq .75$).

Conclusion. Results suggests that MMS is a reliable measure for the assessment of patients impairments in mentalization.

NONSUICIDAL SELF-INJURY IN ADOLESCENTS: PRELIMINARY RESULTS

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Abstract

Objective: Nonsuicidal self-injury (NSSI) is the intentional self-destruction behavior of one's own body without suicidal intent and for purposes not socially sanctioned. There is emerging evidence to suggest that NSSI is increasing among adolescents. The present study aims to investigate prevalence and rates of NSSI among an Italian adolescent sample and explore intrapersonal and interpersonal correlates.

Method: 231 high school students (122 males, 109 females; mean age = 15,16; SD = 1,54) were included in the study. They completed self-report questionnaires in order to assess emotional investment in the body, anger, self-esteem and perceived parental care. Participant who responded positively to a screening question were assessed with semi-structured interview to examine the rates, frequency, duration and type of NSSI behaviors.

Results: 12 subjects (5,2%) reported NSSI at least once in their lifetime and the average reported age of onset was 13,37 (SD = 1,24). The most common methods were cutting, scratching and interfering with wounds healing. NSSI group showed more negative feeling ($p = .005$) and lower protection ($p = .000$) toward the body. The NSSI group and no-NSSI group were different with regards to the expression of anger, inward ($p = .013$) and outward ($p = .036$) and the management of negative emotions ($p = .039$). Significant differences were found for the perceived parenting: in NSSI adolescents relationship with father was characterized by more rejection than non-NSSI group ($p = .019$).

Conclusions: These findings provide evidence that body concerns may have implications for NSSI behaviors as well as the experience of non-acceptance. Further, findings revealed an association between NSSI and control and expressions of emotions.

DORSAL ATTENTION AND COGNITIVE ENGAGEMENT DURING PRODUCTION OF COMPLEX RORSCHACH RESPONSES: AN fMRI STUDY

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Abstract

Some Rorschach responses involve a significant cognitive load, associated with sophistication, integration capacities, attention engagement, and cognitive resources. In particular, R-PAS variables Synthesis (Sy) and Complexity (Cmplx) are deemed to be the primary markers of these processes. We thus hypothesized that, from a neurobiological standpoint, the dorsal attention network should play a key role in the production of Rorschach responses characterized by Sy and Cmplx. This hypothesis was tested by the current study by analyzing archival fMRI data from 26 healthy subjects (M/F=13/13; age range=17-28). During fMRI scanning, participants were instructed to look at the Rorschach cards and think of “what they might be.” Spontaneous responses were then clarified outside the scanner. In terms of data analysis, a region of interest (ROI) was selected by using Neurosynth, a platform that analyzes published fMRI data and provides meta-analytic results based on keywords. Using the keyword “dorsal attention”, we obtained 2552 locations of activation from 65 studies. Within this ROI, we extracted BOLD activity associated with the contrast “presence vs. absence” of each selected variable, i.e., Sy and Cmplx. As expected, we found significant activations in the ROI for Cmplx ($p=0.005$; $d=0.36$) and Sy ($p=0.004$; $d=0.32$). These results suggest that the activity of the dorsal attention network is associated with Cmplx and Sy and, by extension, with the cognitive load of subjects, reflecting a widespread attention engagement during the test. This study thus provides a neurobiological basis for the use of R-PAS variable Cmplx as an index of cognitive engagement and sophistication.

THE MEDIATING ROLE OF METACOGNITIONS ABOUT SOCIAL MEDIA USE IN THE RELATIONSHIP BETWEEN EMOTIONAL RISK FACTORS AND ADDICTION

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Abstract

In recent years, a growing body of research has emphasized the mediating role of metacognitions in the relationship between negative emotions and addictive behaviors, including problematic Internet use (PIU; see Spada, Caselli, Nikčević, & Moneta, 2015). However, previous research has explored the role of general metacognitions (e.g. the need to control emotion and thinking) rather than considering metacognitions that are specifically related to the object of the addictive behavior (e.g., Internet, substances, alcohol). Moreover, previous research has given attention to general emotion dysregulation rather than focusing on those specific negative emotions which has been shown to be associated to problematic social media use (e.g., the fear of missing out, FoMo). The current study investigated the contribution of specific negative emotions associated with SNSs problematic use (i.e. FoMo, the fear of being negatively evaluated and perceived low self-presentational social skills) in predicting SNSs addiction addressing social media-related positive metacognitions (e.g. *Using social media helps me keep in touch with others*). A sample of 579 undergraduates was recruited (54.6% F; mean age = 22.39 ± 2.82). The assessed structural model produced good fit to the data [F: $\chi^2=101.11$, $df=52$, $p<.001$, $RMSEA [90\% CI]=.05[.04-.07]$, $CFI=.98$, $SRMR=.05$; males: $\chi^2=98.02$, $df=55$, $p<.001$; $RMSEA [90\% CI]=.05[.04-.07]$, $CFI=.98$, $SRMR=.07$]. The overall pattern of results confirms that FoMo predicts SNSs addiction both directly (females: $\beta=.34$, $p<.001$; males: $\beta=.38$, $p<.001$) and through metacognitions concerning the usefulness of SNSs with respect to the regulation of this specific fear (F: $P=14.07$ $p<.05$; males: $P=10.25$ $p<.05$).

PSYCHOLOGICAL WELL-BEING AND CULTURE. A CROSS-CULTURAL STUDY AMONG EMERGING ADULTS

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Abstract

The psychological meaning of subjective well-being is largely universal. Cultural factors play a role in explaining differences in their level across nations. Individualism is one of the most important dimensions for elucidating cultural variations. Evidence reveals positive link between individualism and well-being. Cultural differences can be scrutinized as part of culture as a whole or as part of beliefs people have about their relations to others. At the individual level, collectivism has positive relation with well-being, regardless cultures. However, a recent cross-cultural study didn't find any association between the individualism scores of 53 nations and well-being, whereas positive relation between individualism at individual level and well-being was found. These scholars used not well-established measures in order to evaluate individualism-collectivism both at cultural and individual levels. The aim of the present study was to investigate subjective well-being in 800 emerging adults (18-26 years old, M=19.50) coming from nations with different levels of individualism according to the Hofstede's model. The participants filled in the Satisfaction with life scale and the Vertical-Horizontal Individualism-Collectivism scale. ANOVA showed significant differences on well-being among cultures. The higher the individualism, the higher the well-being, according to this order: US, Italian, Russian and Chinese. Vertical and horizontal collectivism were positively correlated with well-being, with low-middle effect sizes, within all the groups. Individualism scales were not linked to well-being instead. Results suggest that individualism measured at cultural level predicts well-being because it is a function of workplace values and in part a reflection of social-structural conditions. Whereas life satisfaction seems to derive from interdependence and competition with out-groups, as well as successfully carrying out social roles and obligations, regardless cultures.

ARE YOU A DOMINANT OR A DEPENDENT PERSON? AN EXPERIMENTAL STUDY ON THE LINK BETWEEN TEST SCORES AND OBSERVED BEHAVIORS

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Abstract

The validity of test scores has been investigated by using correlational studies assessing predictor-criterion relationships, with only few validity studies adopting experimental procedures. Consequently, a call for experimental validation studies has been posited by different authors. The aim of the present research project was to evaluate the validity of the Rorschach Oral Dependent Language (ODL), a measure of interpersonal dependent behaviors, and the Dominance (DOM) scale of the Personality Assessment Inventory (PAI), a measure of interpersonal dominance *vs.* submissiveness, by using an experimental procedure. Sixty participants (50% men) were recruited, ranging in age from 19 to 54 years ($M = 26.8$; $SD = 6.6$). Firstly, the Rorschach was administered individually in a quiet room. Subsequently, two participants at a time completed the socio-demographic form and the PAI in a room with a one-way mirror. In order to register dependency-related behavior, the first experimenter asked nine, simple questions (e.g., do you prefer a blue pen or a black pen?) to the participants to observe whether they answered first, second, or together. The second experimenter stayed behind the mirror and registered all the interactions between the two participants. A composite, dimensional variable (named *Dominance Checklist*) was created to measure dominance (high scores) *vs.* dependency (low scores). As expected, the Dominance Checklist showed a significant, negative correlation with ODL ($r = -.318$, $p = .019$) and a small, positive correlation with DOM ($r = .217$, $p = .115$). Interestingly, the Dominance Checklist also correlated with the Verbal Aggression (AGG-V), Persecution (PAR-P), Hypervigilance (PAR-V), and Obsessive-Compulsive (ARD-O). The simple questions asked during the experimental procedure were derived from everyday behaviors: this procedure allowed us to evaluate the validity of ODL and DOM by going beyond the traditional conceptualization of test score validity.

EMOTIONAL DYSREGULATION IN INTIMATE PARTNER VIOLENCE: A PRELIMINARY STUDY

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Abstract

Intimate Partner Violence (IPV) is the most widespread form of violence against women. The American Psychological Association defines it as the physical, sexual, psychological, economical or stalking abuse, both concrete and menaced, perpetuated by current or ex-partners (1996).

Trauma is the main consequence of IPV (Ehrensaft, 2009; Herman, 1992b; Resnick et al 1993; Margherita & Troisi, 2014) and involves specific alterations in affect regulation.

The studies on emotion dysregulation in PTSD (Cloitre et al 2002; Van der Kolk, 1996) remarks that may have an impact on the maintenance of PTSD symptoms. Furthermore, affects like shame and guilt contribute to the development and maintenance of PTSD (Wilson et al, 2006).

Few studies have addressed on the specific relation between emotion dysregulation and IPV.

In this study we have explored the relationship between Intimate Partner Violence, Emotion Dysregulation and post-traumatic affects, considering the role played by the specific affects of shame, guilt, fear, in a sample comprised of 302 Italian women (M: 30,63; SD: 18,5 years), 151 victims of IPV and 151 that has no suffered of IPV.

A battery of test including *Intimate Violence and Traumatic Affect Scale- VITA Scale* (Troisi in press), *Intimate Partner Violence Check list*, obtained from the National Association DiRe Networking of Women against violence and *Difficulties in Emotion Regulation Strategies* (Ders) (Gratz & Roemer, 2004; Giromini et al, 2012) was administered online.

A comparison between the group of women that had suffered IPV and those that had not suffered IPV was conducted via ANOVA methods, it showed in the first group a higher intensity of post-traumatic affectivity and emotional dysregulation, except for the subscale *awareness*.

Future researches need to confirm the results and to measure if the emotional dysregulation is a risk factor (McNulty & Hellmuth, 2008) or a consequence of IPV.

SPECIFIC MATERNAL BRAIN RESPONSES TO THEIR OWN CHILD'S FACE: AN fMRI META-ANALYSIS

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Abstract

How special is her own child to a mother? Research that has focused on mothers' brain responses to their own child has revealed the involvement of several brain regions associated, but to date that research has been scattered, and less is known about which brain regions are systematically activated across studies.

This meta-analysis aimed to identify specific neural regions associated with "own child" compared to "other children". 209 child-mother dyads were included in this meta-analysis and the contrasts of interest were OWN > OTHER and OWN < OTHER, which reflect, respectively, greater activation and less activation in response to own-child's face when compared to another child's-face. Own child faces systematically activate responses in the left hemisphere more than their right hemisphere in mothers. Specifically, viewing their own child is associated with enhanced cerebral activation in regions underlying *memory, reward and maternal motivation* and promoting *behavior of approaches*. The left lateralization of such neural circuits bonded with parenting can represent a marker of the quality of *ownness* perceived by mothers while viewing their own child. Deviation from expected maternal brain responses to own child could represent an important clinical marker for innovative parent screening and intervention.

THE BEADS TASK AS A TOOL TO MEASURE INTOLERANCE OF UNCERTAINTY AND JUMPING TO CONCLUSION BIAS IN CLINICAL GROUPS: A REVIEW

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Abstract

Intolerance of Uncertainty (IU) is a hierarchical construct influencing behaviors conceptualized as a cognitive and emotional filter, through which the environment is viewed and uncertainty, is regarded and experienced as unacceptable and unfair. IU is a critical transdiagnostic personality factor associated with different psychopathologic conditions and Affective disorders like Generalized Anxiety Disorder (GAD), Obsessive-Compulsive Disorder (OCD) and Depression (D). Laboratory paradigms were devised to obtain in vivo measures of IU, by quantifying the relationship between self-report IU and performance on behavioural tasks involving uncertainty, capturing participants' cognitive, emotional, and behavioral responses to actual uncertain scenarios. One of such tool is the Beads Task, a probabilistic inference task to assess uncertainty reactions. Participants are shown two jars each composed of 100 beads of two different colours in a particular ratio (e.g., 85:15 red beads to blue beads vs. 85:15 blue to red). Participants are told that beads are drawn one by one from one of the jars, which have the same probability to be chosen. The aim is to decide from which jar the beads are being drawn. High IU is expected to be associated with greater requirement of pieces of beads and time to decide. Beads Task, in addition to being a behavioural measure of IU, was classically used in psychosis and delusion research area and allowed the measurement of the so called Jumping to Conclusion (JTC) bias, "a tendency or bias to the early acceptance and, to a lesser extent, the early rejection of hypotheses". A JTC style is considered to be only one of a number of factors that potentially contribute in complex ways to the formation and retention of delusions. Clinical implications and contemporary research state of the art are discussed.

THE ACTonHEART STUDY: A BRIEF MULTI-DISCIPLINARY ACT PROGRAMME FOR IMPROVING MODIFIABLE RISK FACTORS IN CARDIAC PATIENTS

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Abstract

Background. The ACTonHEART study is the first RCT to evaluate the effectiveness and feasibility of an ACT-based intervention protocol focused on promoting a change in lifestyle and reducing psychological stress of patients with Coronary Heart Disease, through an increase in psychological flexibility.

Method. Ninety-two patients were enrolled and randomized, following an unbalanced randomization ratio of 2:1, to the experimental group (N= 59) and the control group (N= 33). The control group was administered Treatment-as-Usual (TAU), while experimental subjects participated in the ACTonHEART group intervention in addition to the cardiac rehabilitation process. The ACTonHEART protocol consists in 3 sessions of 2 hours each, integrating educational topics on heart-healthy behaviours with acceptance and mindfulness skills. Participants were assessed at baseline (t0), at the end of the rehabilitation period (t1), and at a six-month follow-up (t2). A partially-nested design with three levels was used to balance effects due to clustering of participants into small therapy groups. Primary outcome measures included: Body Mass Index, Psychological Inflexibility and Well-Being.

Results. The levels of well-being significantly improved from t1 to t2 ($\beta= 3.16$, $p< .001$) regardless of the treatment condition ($\beta= -0.01$, $p=0.996$). The BMI levels decreased only in the ACTonHEART group. The time x treatment interaction showed a trend towards significance ($\beta= 0.40$, $p= 0.08$). Even for psychological inflexibility, a greater decrease over time in the ACTonHEART group was observed.

Discussion. The results of this first pilot study may inform the future implementations of the ACTonHEART program.

PERCEPTION OF SELF AND OTHERS IN YOUNG NON-PSYCHOTIC SUBJECTS WITH PARANOID IDEATION UNDERGOING THE METACOGNITIVE TRAINING (MCT)

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Abstract

Aim: Psychological models on paranoia have focused on the role of self-perception in the development and / or maintenance of the paranoid ideation (Meisel et al., 2018).

Feelings of vulnerability and low self-esteem associated with erroneous perception of the emotions expressed by others seem to predict the development of paranoid ideation in individuals with anxious and depressive symptomatology (Giusti et al., 2016), and in the non-clinical population (Freeman et al., 2014). The aim of the study was to evaluate the efficacy of the metacognitive intervention, MCT (Ussorio et al., 2016) on disturbances in the perception of self and others in young subjects affected by mental health non-psychotic disorders, presenting paranoid ideation.

Methods and Materials: The study included 87 young users affected by anxiety and depressive disorders, with high levels of paranoid ideation, referring to the University Unit Psychiatric Rehabilitation Treatments, Early Intervention (TRIP) of L'Aquila.

The subjects were randomly assigned to the experimental group (MCT; n = 44), undergoing the metacognitive training (MCT), and to the control group (TAU; n = 43). At the entry and at the end of the study, the level of self-esteem, the self-reflectivity, and the ability to decode the emotions from the gaze were assessed.

Results: At the end of the study, compared to the control group, the experimental group showed a statistically significant improvement in the levels of self-esteem, paranoid ideation, self-reflectivity and the ability to decode the emotions from the gaze.

Conclusion: The results of the study suggest the importance of implementing metacognitive strategies to improve the disturbances of the perception of oneself and of others, even in non-psychotic individuals, leading to a greater psychological discomfort.

A DEEPENING OF THE ROLE PLAYED BY EMPATHY IN PEOPLE WITH NARCISSISTIC TRAITS

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Abstract

Empathy is a construct widely debated in many fields, included clinical psychology; different description of this construct have been proposed in various contexts, but a basic, endorsable definition of it has not yet reached. In the last twenty years, the scientific community not only realized that empathy is characterized by an affective component (which determines the quality of the experience) and a cognitive one (which, places it in a frame of meaning), but also that these two components do not always coexist.

The Narcissistic Personality Disorder (NPD) is overall defined as a pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy, beginning by early adulthood and present in a variety of contexts. More specifically, the 6th and the 7th diagnostic criteria define people with NPD as interpersonally exploitative (i.e. takes advantage of others to achieve his or her own ends), and lacking of empathy as far as are unwilling to recognize or identify with the feelings and needs of others. However, among narcissistic traits there are also the ability to manipulate and influence people who have to do with them, so their empathy deficits are more related to the emotionally evocative stimuli than with the capability to put their selves in other's shoes.

In this study, we tried to deepen the relationship between empathy and the NPD traits using the Personality Assessment Inventory along with the R-Pas, in order to benefit from their incremental validity, and the Questionnaire of Cognitive and Affective Empathy, for the assessment of both types of empathy.

The results help to better understand the role played by the two types of empathy in people with NPD traits, which is more complex than a general "lacking of empathy". In particular, narcissistic features seem to be more related with a lack of the affective empathy than with the cognitive one.

STRONG AND CONSISTENT EVIDENCE FOR DETECTING PSYCHOSIS WITH THE RORSCHACH: META-ANALYTIC FINDINGS

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Abstract

The current study aims to update Mihura and colleagues' Rorschach Comprehensive System meta-analysis (2013) including newer studies since the final search was conducted from the authors in November 2011. Moreover, we wanted to expand the study and include other variables such as R-PAS variables like the Ego Impairment Index. Eventually, we wanted to conduct subgroup analyses and other moderator analyses, focusing in particular on Criterion contamination as moderator. Based on our goals and hypotheses, we outlined the search strategies. Our selected databases were PsycINFO and MEDLINE; the keywords used were Rorschach AND (Psychosis OR Psychotic OR Schizophrenia*). As Limits we used from 1978 to 2017, Journal and English as language. The final pool consisted of 450 articles. As a main inclusion criterion we compared populations with psychotic diagnosis with a comparison sample. The diagnosis must have been assigned using DSM-III/ICD-9 or following versions or the Research Diagnostic Criteria. Findings are reported using Cohen's *d* that is the standardized difference between means. As hypothesized, the subgroup analysis showed the effect size is greater when we compare the psychotic sample with a non-clinical comparison, rather than with a clinical one. Moreover, as hypothesized, from the moderator analysis we found lower effect size in studies with criterion contamination, which are often archival studies that have more chance of errors since it's not a designed study. From the results we can say that Rorschach variables are able to detect psychosis and we noticed that effect sizes are greater adding new studies, which means that the previous studies are replicated well.

PERSONALITY AND PSYCHOPATHOLOGY IN FIBROMYALGIA: A CASE-CONTROL STUDY

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Abstract

Aim. The aim of this study was to investigate the prevalence of Personality Disorders and Personality Organization with clinician report interviews in a group of patients with Fibromyalgia (FM), compared to patients with Rheumatoid Arthritis (RA).

Methods. In this cross-sectional study, 32 consecutive female with FM and 39 with RA were assessed by: Structured Interview of Personality Organization (STIPO), Structured Clinical Interview of Personality Disorder (SCID-5-PD), Beck Depression Inventory-II (BDI-II), Toronto Alexithymia Scale (TAS-20), Visual Analogue Scale for pain (VAS), and the SF-36 questionnaire for the Health related Quality of Life.

Results. FM patients reported significantly higher levels of depressive symptoms ($p=.012$) and difficulty in identifying emotions ($p=.021$) compared to RA patients, and lower scores for quality of life in both the physical and mental components of the SF-36 ($p<.05$). Regarding the personality organization, FM patients reported higher score in the identity diffusion, object relations, primitive defense and coping style subscales of the STIPO compared to RA patients ($p<.001$), suggesting a higher prevalence of borderline level of personality organization in FM patients. The SCID-PD showed that FM patients had a higher prevalence of personality disorders compared to RA patients ($p = .001$), with 35.5% of FM vs. 5.1% of RA patients showing a personality disorder.

Conclusion. The present study revealed a higher prevalence of personality disorders and a more pathological level of personality organization in FM patients compared to RA patients. What is more, FM patients showed higher depressive symptoms and alexithymia, and a lower quality of life than RA patients. Further studies would be needed to better evaluate the impact of personality disorders and pathological levels of personality organization on quality of life in chronic pain patients.

PARENTING AND SUBSTANCE ABUSE DISORDER: IMPLICATIONS OF LOSSES AND ALEXITHYMIA ON MATERNAL SENSITIVITY

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Abstract

Parental Substance Use Disorder (SUD) represents a complex clinical condition associated with psychosocial and emotional risk factors that could affect parenting and child development. Individuals with SUD usually report past histories characterized by traumatic experiences and significant losses. Moreover, they often present higher rates of alexithymic traits, which could worsen their clinical condition. Despite this empirical evidence, no prior studies examined how alexithymia could moderate the link between past adverse experiences and observed parenting behaviors in the context of SUD. The present study aimed to investigate the associations between the presence of past losses, alexithymia, and observed emotional availability in the context of maternal SUD.

Thirty-two mothers (M age=29.25 yrs, SD=6.69) with Substance Use Disorder (SUD), enrolled in a residential rehabilitative community program, participate into the study with their children. Participants have been tested on clinical history of SUD, with respect to alexithymia (TAS-20). Parenting behaviors were assessed during free-play mother-child interactions (EA-Scales).

Regression analysis highlighted a significant effect of alexithymia on maternal sensitivity. More specifically, a significant interaction between early experiences of parental loss and alexithymic traits was found, showing that parental losses worsen the effect of difficulties in becoming aware of someone's own emotions on maternal sensitivity. In particular, in the presence of an history of mournful experiences, maternal sensitivity appears to be less dependent on alexithymia, while when loss is not experienced a good ability in becoming aware of own feelings enables the parents to be more sensitive.

In the context of SUD significant life events should be taken into account when considering the impact psychological variables on parenting. Clinical implications for parenting-focused interventions for SUD mothers are discussed.

INVESTIGATING THE ROLE OF PATHOLOGICAL NARCISSISM IN GAMBLING ADDICTION

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Abstract

Introduction: Gambling Addiction (GA) often co-occurs with Narcissistic Personality Disorder (NPD) (American Psychiatric Association, 2013). Moreover, pathological gamblers seem to share common psychopathological features with individuals suffering from NPD as, for example, high levels of impulsivity. However, some empirical data seem to contrast with the hypothesis of a frequent narcissistic personality profile in this clinical population. For example, it has been seen that such individuals often suffer from internalizing psychological problems and a low level of self-esteem. Although some studies showed a relationship between narcissism and GA (Lakey et al., 2008; MacLaren & Best, 2013), there is a paucity of data in this field. In addition, no study investigated such topic using a multidimensional perspective, considering both overt and covert dimensions of narcissism, potentially able to account for the heterogeneity of empirical results.

Method: We administered to a sample of individuals with Gambling Addiction and a sample of healthy controls, two self-report questionnaires, namely the South Oaks Gambling Screen (Lesieur & Blume, 1987) and the Pathological Narcissism Inventory (PNI, Pincus, 2013).

Results: Comparison between group's means outlined significant and interesting differences on the subscales of the PNI. Moreover, significant correlations between some dimensions of pathological narcissism and severity of GA emerged. Finally, different types of gambling activity seem differently related to high level of narcissism, suggesting the existence of different psychopathological profiles among pathological gamblers.

Conclusions: Narcissism seems to be a central dimension to keep in mind when attempting to understand Gambling Addiction and to plan tailored treatment. Specifically, the study points out the necessity to adopt a multidimensional approach of the construct, which could account for the complexity of GA and the heterogeneity of such clinical population.

RISK FACTORS FOR EMOTIONAL- BEHAVIORAL PROBLEMS IN RESIDENTIAL-CARE AND LATE-ADOPTED ADOLESCENTS: A PILOT STUDY WITH NARRATIVE INTERVIEWS FOR ATTACHMENT AND ALEXITHYMIA

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Abstract

Adolescents in residential-care and late-adopted ones resulted high-risk to emotional-behavioural problems, showing vulnerability to risk-factors as insecure/disorganized attachments and difficulties in emotional regulation, such alexithymia. Moreover, findings suggested higher risk for residential adolescents. However, there are no studies that investigated *jointly* the role of attachment and alexithymia with respect to emotional-behavioural problems displayed by *adolescents* in those high-risk groups, as we aim to do in a larger pilot study with a multi-method approach. In this preliminary report, we subsampled 20 adolescents (aged 13-17, $M = 14.95$, $SD = 1.4$; 80% boys) with traumatic past experiences, dividing 10 late-adoptees and 10 residential-care, equalling for age and gender. We used the *Child Behavior Checklist* (CBCL 6-18) to assess emotional-behavioral problems; the *Friends & Family Interview* (FFI) to assess attachment representations, in terms of classifications and scales; the *Toronto Structured Interview for Alexithymia* (TSIA) to detect the levels of alexithymia. U-Mann Whitney confirmed that residential showed higher levels of emotional-behavioral problems - especially externalizing ones ($p = .03$) - less security ($p = .003$) and more avoidance ($p = .03$) in attachment and higher levels of alexithymia ($p = .009$) than adoptees. In the total group, correlations were found between psychopathology, less security in attachment and higher alexithymia, which also showed associations each other ($p = .029$). However, a stepwise regression only accounted the poor attachment' security as predictor of 29.9% of the variance in externalizing problems ($adjusted-R^2 = .255$, $p = .019$). Larger samples are needed, but both variables seem correlated to high-risk adolescent's adjustment: in particular, attachment security resulted a key-feature to promote especially in residential-care contexts, where the adolescents seem more vulnerable than in adoptive families.

THE NEET UNIVERSE IN THE DIGITAL AGE: AN EMPIRICAL STUDY IN ITALY

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Abstract

Introduction. The acronym “Neet” (Not in Employment, Education or Training) denotes a group of young people between the ages of 15 and 29 who do not study or work. Few today have made the connection between that topic and internet abuse. The virtual world can encourage a tendency in some young people to isolate themselves in solitary activities, resulting in a change from habit to addiction. Thus, a study has been made with the purposes of analyzing the perceptions of some young Italians, to understand some characteristics of young Neet and the possible causes influencing such a phenomenon.

Method. The research sample consists of 573 Italian subjects aged between 18 and 30. To obtain the results a semi-structured questionnaire was issued through social networks. With regards to the analysis of the data, percentage frequencies were opted for in the analysis of closed ended questions and the responses. Whilst one proceeded with the three thematic conceptual maps (compared to the open ended questions and responses).

Results. Overall the sample under examination seems to demonstrate that there could be a relationship between the “Neet generation” phenomenon and internet abuse. It has provided important feedback, above all regarding the causes determining “the excessive use of the internet”. The majority of the results in fact sustain that the aforementioned phenomenon is based on solitude and boredom.

Conclusion. The research into the Neet phenomenon and internet abuse is characterized as an investigation into young Italians. Such a study and the data revealed could provide an important starting point and point of reflection for future analyses.

WHERE COSMETIC PROCEDURES ARE GOING: CLINICA CITTÀGIARDINO EXPERIENCE

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Abstract

Objectives: The aim of this study is to produce an initial picture of cosmetic procedures number and typology, and verify any difference between 2011 and 2017, in order to try to make a qualitative analysis based on an effective database and identify sample request quality.

Design: Research design is to explore Clinic database of year 2011, compared with year 2017 one looking at the amount and typology of cosmetic procedures (surgical and not surgical ones) undergone. Hypothesis is to verify a growth in cosmetic procedure in line with scientific literature.

Methods: Clinica CittàGiardino cosmetic procedures database it has been examined, demographic information, cosmetic procedures frequencies and typology has been analyzed with SPSS statistical software.

Results: in 2011 we found 72 subject (59F, 13M); in 2016 90 (73F, 17M). In 2011 it has been undergone mastoplasty (11), liposuction (26), rinoplasty (3). In 2016 the same procedures are mastoplasty (27), liposuction (23), rinoplasty(8).

Conclusion: With this study it has been possible to have an overlook on a specific situation in a Plastic Aesthetic and Reconstructive Private Clinic in the North of Italy. We can assist to a increase in surgical request, both in male and female sample.

ORGANIZATION AND DISORGANIZATION IN THE HUMAN TRAFFICKING: A SCOPING STUDY ON THE SOCIAL CONTEXT OF TRADE

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Abstract

Introduction. Countries from which migratory flows originate are often affected by poverty, different forms of criminality and disorganized institutions, which are not ready to face up to them. Millions of people are victims of the human trafficking, an issue based on an economic system, able to handle the power. In view of this, a scoping study has been carried out in order to deepen the knowledge of the social-cultural contexts, where human trafficking occurs. This Analysis focuses on the case of *Edo State*, where the trade in women for purposes of sexual exploitations is particularly spread.

Method. The sample group has been made up of 100 people, who come from Edo State. A structured questionnaire has been used to collect data. This questionnaire has been presented to the participants by computer transmission or through some local interviewers. In conclusion, the percentage frequencies have been chosen to analyze data.

Results. The data have revealed a negative perception of the State, that is seen as a corrupt entity and a deep mistrust of the police. Moreover, some important information about the culture of the place and the family dynamics have been found: The data show the supremacy of the son over the daughter and a high level of family fragmentation. With regard to “*Black magic*” subject, the majority of respondents has stated that it has an actual effect on people.

Conclusion. These results call for an important reflection: traffickers are able to exploit the sociological characteristics of the place to increase their own business. On the contrary, the public institutions are not giving the proper importance to this matter.

This research, concerning a current topic, could be a starting point for future studies.

EARLY-LIFE TRAUMATIC EXPERIENCES AND THE SUSCEPTIBILITY TO MAJOR DEPRESSION AND COCAINE ABUSE DISORDER IN ADULTHOOD

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Abstract

The development of the nervous system is complex and characterized by series of important processes, which must be coordinated in a precise way to ensure a normal psychic development of the individual. In particular, exposure to early traumatic events may lead to pathological behavioral changes resulting in susceptibility to the development of psychopathology in adulthood.

In this study, we investigated how exposure to a traumatic childhood contributed to the development of psychiatric disorders such as Major Depression (DM) and Cocaine Abuse Disorder (AC). In particular we evaluated the existence of biomarkers that were associated with the symptoms, with the history of maltreatment and that were useful to design an appropriate therapeutic approach.

A sample of patients treated for DM and a group of patients treated for AC were recruited (N = 90), along with healthy subjects. Psychometric investigations were carried out on these groups to evaluate the history of the disease, the current symptomatology and the type of environment experienced at an early age. In parallel, a blood sampling was performed for the analysis of biomarkers.

Our investigation showed that Sirtuin1 is one of the mechanisms involved in the "translation" of exposure to early emotional neglect in alterations of the emotionality in adulthood. Furthermore, it has been observed that exposure to maltreatment induces high levels of inflammation in patients being treated for AC. Both of these alterations were associated with the symptomatology, with the lowest levels of Sirtuin1 associated with more severe depressive symptoms, and with higher levels of inflammation associated with high levels of "craving" for the substance and subsequent treatment difficulties.

For clinical purposes, the results obtained have been helpful both for the correct formulation of the diagnosis and for the application of the adequate pharmacological and psychotherapeutic treatment.

PSYCHOLOGICAL WELLNESS IN YOUTH AND ADHERENCE TO THINNESS MODEL: CROSS-SECTIONAL STUDY OF ITALIAN PHENOMENA

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Abstract

Adherence to the thinness model, self-acceptance such as self-esteem is psychological dynamics influencing the young age and emerging adulthood of women life. The purpose of this study was to investigate the girls and young women' ability to deal with adherence to thinness according to their self-body management thought healthy behaviours. We analysed their emotional patterns and body management to elucidate the Italian phenomenon. A cross-sectional study was conducted on 2287 Italian female distribute in range age 15-25 years old and distributed in girl and young women groups. Our results showed that girls had higher emotional pattern scores when their weight and shape fit the thinness model: Wilks' lambda indicated a significant effect of BMI group ($F(1,6)=7.45$; $p=0.001$; $\eta^2=1.00$), but there was no effect of age group or interaction. The within-subjects effect tests indicated significant differences in emotional pattern ($p<.001$; $\eta^2 =1.00$) and body management ($p<.007$; $\eta^2 =0.90$), as well as in the overall score for body satisfaction and behaviour ($p<.001$; $\eta^2 =1.00$). Skinny girls felt positively about their body even if when they did not take adequate care of it. Italian girls consider the underweight body mass index an adherence model. Our study has identified a severe phenomenon widespread among the Italians female population, highlighting the strong impact of sociocultural appearance on youth's emotions but not their wellness attitudes. Underweight girls tended to be more satisfied with their bodies but did not practice sports. The overweight and obese girls exhibited stronger attitudes toward managing their own bodies and shapes to reinforce their own wellness. Although the normal distribution of girls into the BMI categories within the sample is representative and it is a positive data, normal BMI girls do not appear to engage in much healthy behaviour and their physical wellbeing appears to be mostly driven by the desire for social acceptance.

WHAT DEPRESSIVE SYMPTOMS IMPACT LIFE SATISFACTION THE MOST IN ADOLESCENCE? A NETWORK ANALYSIS STUDY

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Abstract

Depression is a highly heterogeneous disorder and, even at mild to moderate levels, is associated with maladaptive outcomes for adolescents. We used network analysis to evaluate (i) which symptoms and associations between symptoms are most central to adolescent depression; and (ii) whether the most central (as compared to the most endorsed) symptoms could be linked to life satisfaction. Participants were part of a large, diverse community sample ($N = 1,059$; 65% female) of adolescents between 11 and 19 years of age. Network analysis was used to identify the most central symptoms (nodes) and associations between symptoms (edges) assessed by the Mood and Feelings Questionnaire-Short Form. In keeping with previous studies, the most central symptoms in the network were feeling worthless/self-hatred, sadness, and loneliness. Examples of strong associations between symptoms were loneliness-feeling unloved, feeling worse than others-do everything wrong, sadness-anhedonia. In line with the notion that different depressive symptoms have different impact on the individual's functioning, the analysis revealed that some symptoms (sadness) shared as much as 12.6% of the variance associated with life satisfaction, while other (feeling restless) shared as little as 2.9%. Crucially, the impact that each symptom exerted on life satisfaction was strongly correlated with symptom network centrality ($r_s = 0.76 [0.37, 0.93]$), but not with symptom mean level ($r_s = -0.24 [-0.70, 0.36]$). In other words, the most central symptoms (as compared to those most frequently endorsed) were the symptoms most likely to impact life satisfaction in adolescence. In conclusion, network analysis represents a highly innovative and promising way to decipher the complexity of adolescent depression and to generate new clinical hypotheses.

GUILT, TRANSFERENCE AND PERSONALITY: AN EMPIRICAL INVESTIGATION

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Abstract

If, on one hand, personality is a predictor of the transference (Bradley, 2005; Colli, 2016; Tanzilli, 2017), according to the Control-Mastery Theory (CMT; Weiss, 1993; Silberschatz, 2005; Gazzillo, 2016) this relationship is influenced, and mediated, among other factors, by interpersonal guilt (Bush, 2005). Following this theory, guilt is an interpersonal and prosocial emotion that become dysfunctional when alimented by pathogenic beliefs (i.e. beliefs that associate a healthy and pleasurable goal with a danger or the worry to hurt a significative one). The aim of this study is to empirically investigate the relationship between interpersonal guilt, transference and personality. The tools used are: the *Interpersonal Guilt Rating Scale-15* (Gazzillo et al., 2017) to assess interpersonal guilt; the *Personality Relationship Questionnaire* (Bradley, 2005; Tanzilli, 2017) to assess transference dimensions; and the *Psychodynamic Diagnostic Prototypes* (Gazzillo et al., 2010) to assess personality disorders/styles. Preliminary analyses showed significant relationships between different kinds of interpersonal guilt, transference dimensions and personalities styles. We investigated the relationship between transference and interpersonal guilt with the Generalized Estimated Equations and found positive and significative relationships between these constructs. Then, we repeated the model to see the relationship between these variables and personality. For example, the dependent personality disorder seems to be related to positive/working alliance, anxious/preoccupied and sexualized transference dimensions. It is also related to separation guilt, that is in turn related to anxious/preoccupied and sexualized transference dimensions. These results support the hypothesis that guilt and transference are connected and may be both considered expressions of personality. Future research will investigate the mediational role of guilt in the transference-personality relationship.

MORAL DISTRESS AND FAMILY SATISFACTION IN THE INTENSIVE CARE UNIT: TWO SIDES OF THE SAME COIN?

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Abstract

Background. Inner life of clinicians affects healthcare practice, decision-making and doctor-patient relationships. Moral distress is the painful feeling that occurs when clinicians cannot carry out what they believe to be ethically appropriate because of personal or institutional constraints. Studies showed that moral distress reduces job satisfaction and clinicians' wellbeing. However, no study has explored the impact of moral distress on patients or families satisfaction. This study aimed to assess if clinicians' moral distress is related to family satisfaction with care in the Intensive Care Unit (ICU). **Methods.** Physicians and nurses of 5 ICUs in Italy completed the *Moral Distress Scale-Revised* over a 2-week period. Family members of patients hospitalized during that timeframe, completed the *Family Satisfaction in the ICU* questionnaire. Pearson correlations were used to assess the relationships between variables. **Findings.** Overall, 122 clinicians (45 physicians and 77 nurses) and 59 family members of ICU patients participated. Clinicians' moral distress inversely correlated with family satisfaction regarding the inclusion in decision-making ($\rho = -.90$; $p = .03$). Specifically, physicians' moral distress inversely correlated with satisfaction regarding the respect shown towards the patient ($\rho = -.90$; $p = .03$). Nurses' moral distress inversely correlated with family satisfaction regarding breathlessness and agitation management ($\rho = -.90$; $p = .03$), provision of emotional support ($\rho = -.90$; $p = .03$), understanding of information ($\rho = -.90$; $p = .03$), and inclusion in decision-making ($\rho = -1.0$; $p < .000$). **Discussion.** Results suggest that moral distress is negatively related to family satisfaction with care in the ICU: when moral distress arises among clinicians, family members are less satisfied. Moral distress of physicians and nurses is related to different aspects of family satisfaction with care.

AN AVAILABLE MEASURE OF ATTACHMENT FOR ITALIAN CLINICIANS: NATIONAL DATA OF CHILD ATTACHMENT INTERVIEW

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Abstract

Introduction: Although there is a wide range of tools to assess infant and adult attachment, a 'measuring gap' has been identified in middle childhood and early adolescence. The present research documents the Italian psychometric properties of the *Child Attachment Interview*, a semi-structured interview developed from *Adult Attachment Interview* and *Strange Situation Procedure*. Method: Participants were 287 children (8-15 years) spanning two groups –a clinical group ($n=98$), comprised of children meeting each of our target diagnostic classifications (Somatic Symptoms Disorders: $N=45$; Disruptive Behavior Disorders: $N=40$), and recruited from the Gaslini Hospital, as well as a comparison group of healthy control children ($n=189$). Children completed: the *Child Attachment Interview* (CAI), *Separation Anxiety Test* (SAT), *Inventory of Peer and Parent Attachment* (IPPA), and some subscales of *Wechsler Intelligence Scale for Children IV* (Verbal Comprehension of WISC IV). Results: The psychometric properties of London study have been confirmed: 1) Interrater reliability has been show a high agreement between judges on both the classifications and the CAI scales; 2) test-retest stability from 3 to 12 months has been appreciated; 3) concurrent validity has been supported by IPPA; 4) discriminant validity has been show that the CAI discriminates the attachment of normally developing children from those with psychopathology, as well as the different attachment patterns regardless of gender and verbal comprehension. Conclusion: Findings suggest that CAI Italian version is a reliable and valid measure for assessing attachment in this developmental period and may represents a very useful tool for clinicians. It provides information on the child's experience, on family relationships and on parents' contextual availability. It may have a crucial utility in psychodiagnosis field, in the design of populations at risk's interventions, in the evaluation of child psychotherapy and child custody.

BRIEF STRATEGIC THERAPY AND COGNITIVE BEHAVIORAL THERAPY FOR OBESE WOMEN WITH BINGE EATING DISORDER: A RANDOMIZED CLINICAL TRIAL ONE-YEAR FOLLOW-UP

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Abstract

Objective: Binge eating disorder (BED) is frequently linked with obesity and related health risks like cardiovascular disease and diabetes. The purpose of this randomized clinical trial was to determine the effectiveness of brief strategic therapy (BST) compared to cognitive behavioral therapy (CBT) one year after a two-phase inpatient and outpatient telemedicine treatment for BED. *Method:* Obese Italian women with BED were recruited from a self-referred inpatient treatment program for weight loss ($N = 60$) and randomly assigned to either the BST treatment condition ($n = 30$) or CBT treatment condition ($n = 30$). Inpatient psychotherapy sessions were conducted in person and outpatient telemedicine psychotherapy sessions were conducted over the telephone. Multilevel growth curve modeling was used to estimate average growth trajectories from baseline to one year after treatment for the following outcomes: binge eating frequency, weight, and global functioning. *Results:* One year after treatment women in the BST condition decreased in binge eating frequency and women in the CBT condition did not, whereas women in both conditions improved in weight and global functioning. BST was statistically and clinically superior to CBT in improving binge eating frequency, weight, and global functioning. *Conclusions:* Examining BED given the current obesity epidemic is an important area of study. Findings suggest that BST is statistically and clinically more effective than CBT—an empirically supported treatment for BED—in treating BED, promoting weight loss, and improving global functioning among obese women one year after treatment. Telemedicine may be instrumental in reducing attrition.