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La clinica

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SEPARATION ANXIETY IN A COMMUNITY SAMPLE OF ITALIAN EMERGING ADULTS AND ITS RELATIONSHIP WITH PERSONALITY DIMENSIONS

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Abstract

The shift towards adulthood could account to an increased risk of developing feelings and symptoms of separation anxiety. Adult Separation Anxiety Disorder (ASAD) can make normal developmental activities, like moving away from home, very difficult. Moreover, all studies were carried out giving attention to the identification of adult separation anxiety symptoms from a categorical perspective instead of from a dimensional approach, sustaining the creation of a personality profile in which symptoms and relied emerging factors may

describe typical features of adult separation anxiety or risk of separation anxiety symptoms. Few papers focused on these issues and they were carried out in clinical populations. Studies on a community sample, in which ASAD clinical diagnosis is not the milestone, were very few. Standing the gaps in the literature, the general aim of the current study was to describe the occurrence of separation anxiety symptoms in a dimensional perspective and its correlations with anxiety levels and personality traits in a community sample of Italian emerging adults. Preliminary analysis was to assess the psychometric characteristics of Adult Separation Anxiety Questionnaire-27 (ASA-27). The sample included 260 (207, 79.6% female) Italian college students (18-31 years old; $M=21.22$, $SD=1.91$) who completed ASA-27, Personality Assessment Inventory, and State and Trait Anxiety Inventory-Y. To attest the factor structure of ASA-27 two Confirmatory Factor Analyses (CFA) were carried out. Findings highlighted a bi-factorial structure of ASA through CFA, by not confirming the mono-factorial structure identified by the authors through an Exploratory Factor Analysis (EFA). ASA factors were significantly and positively correlated -in particular- with PAI Borderline scale, as well as with Somatic Complaints. Moreover, mediation model showed that ASA had an influence on the PAI Borderline scale. Clinical implications and limitations of the study were discussed.

THE ROLE OF NEGATIVE AFFECTIVITY AND DYSFUNCTIONAL PERSONALITY TRAITS ON PSYCHOPATOLOGY IN PATIENTS WITH A FIRST DIAGNOSIS OF CANCER

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Abstract

Introduction: Studies on psychological factors associated to cancer diagnosis show that many patients have difficulty coping with the event, and their mental health and well-being can be affected by an extreme focus on the disease and its negative consequences. The aim of the study was to investigate which risk factors increased psychological impairments in patients with a first diagnosis of cancer.

Method: The study was conducted on 104 patients (54.8% females) aged between 20 and 80 years old ($M = 55.86$, $SD = 14.92$) with first diagnosis of cancer, consecutively recruited from

September 2018 to January 2019 at an hospital in Palermo. The participants completed the clinical and anamnestic forms and a series of measures on positive and negative and affect (PANAS), general psychopathology (DSM-5 Level-1), traumatic experiences (TEC), maladaptive personality traits (PID-5-BF) and alexithymia (TAS-20).

Results: Linear regression analyses showed that increased negative affects, traumatic experiences and maladaptive personality traits predicted the levels of psychopathology in cancer patients [$F_{(10,93)}=9.57$, $p<.001$; R-square=.45], explaining 50% of the variance of global psychopathology.

Conclusions: This study highlights the relevance of difficulties in processing negative experiences and emotions in cancer patients, and the negative impact of maladaptive personality features in their psychological adjustment to the disease. Our findings also evidenced the need to improve the assessment of mental functioning domains in cancer patients, to help them receiving tailored psychological treatment.

BETWEEN ATTACHMENT AND PSYCHOPATHOLOGY: THE MEDIATION ROLE OF MENTALIZATION

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Abstract

Introduction. Insecure attachment styles and mentalization failures have been shown to represent crucial constructs for understanding the development of psychopathology. Accordingly, this study examined the relationships between the attachment styles, mentalization difficulties and global psychopathology in a large sample.

Method. 812 adult volunteers (540 females, 66.5%) aged between 18 and 78 years old ($M=29.48$, $SD = 11.13$) had been administered a socio-demographic questionnaire and self-report measures on attachment styles (Relationship Questionnaire), mentalizing abilities (Reflective Functioning Questionnaire) and psychopathological symptoms (DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure - Adult). Gender differences were examined through t-test, and associations between the investigated constructs were examined through Pearson's r correlations. Regression analyses were undertaken with symptom scores as the dependent variables, and a mediation analyses were performed to examine whether mentalization

difficulties mediated the relationship between attachment styles and psychopathology, controlling for sociodemographic covariates.

Results. Males reported lower scores on fearful attachment and higher scores on secure and dismissive attachment than females. Secure attachment was negatively associated with mentalization difficulties and psychopathology; positive associations were observed between the preoccupied and fearful attachment, mentalization difficulties and psychopathology. Mediation analyses showed that mentalization difficulties partially mediate the relationships between the secure, preoccupied and fearful attachment styles and psychopathology.

Conclusions. Our findings support the view that secure attachment protects from failures in mentalization and psychopathology, whereas attachment styles comprising a negative view of the self (preoccupied and fearful) may foster failures in mentalization that increase the risk for psychopathology.

NON INVASIVE VENTILATION (NIV) PROCESSING EXPERIENCE IN CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD): A CONSTRUCTIVE GROUNDED THEORY STUDY

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Abstract

Non Invasive Ventilation (NIV) is an established treatment for people with Chronic Obstructive Pulmonary Disease (COPD), preventing endotracheal intubation, but many people use it improperly or reject it.

The main aim was to develop a theoretical account of the pattern of acceptance and adherence to NIV, conceiving barriers and facilitators related to COPD patients' experiences.

A Constructivist Grounded Theory (CGT) study was performed from June 2015 and December 2018. Three hundred thirty-six psychological consultations were carried out during the course of the adaptation process to NIV in 42 people with moderate or severe COPD (males= 19; females= 23; mean age= 77.02, SD= 7.53) at the Respiratory Rehabilitation Unit of IRCCS Fondazione Don Carlo Gnocchi, in Milan, or at the patients' home, at their convenience.

The interviews were transcribed, mutually gathered in open, selective and theoretical phases, with open, selective and theoretical coding. The analysis resulted in a theoretical model of the non-linear and dynamic process through which the participants used to balance criticality and needs experienced approaching NIV. The theory included three phases: making a decision, trying NIV, using NIV. Each phase embodied a set of subcategories specifying psychological factors, behaviour variations and coping strategies adopted by patients. The theory revealed that positive and negative NIV's experiences, beliefs, emotions and stressful mental states actively interact with each other together with acceptance and coping strategies. The emerged theoretical model should be tested in other vulnerable patients in need of NIV, and healthcare professionals may use these findings to implement new strategies and supportive NIV care.

THIRD-YEAR MEDICAL STUDENTS' NARRATIVE OF FEARED SITUATION: AN EXPLORATIVE QUALITATIVE ANALYSIS

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Abstract

Objective: Empathy and interpersonal skills are core elements in medicine. The literature has highlighted an erosion of empathy among medical students occurring from the third year. The present study is part of a broader research aimed at investigating relational and emotional components during medical studies. In particular, the following study aims to explore which aspects students perceive as difficult on an emotional and relational level in their future carriers.

Methods: As a part of a larger study, third-year medical students from the University of Milan, filled in: 1) the Jefferson Empathy Scale (HPS - version); 2) the Empathy Quotient (QE); 3) and, as a part of the present study, a written narrative regarding their “feared situation”, that is, a situation that is considered particularly difficult to deal with within their future professional practice. In a first exploratory phase, two independent coders analysed 84 randomly extracted narratives (out of 166) through a content analysis, in order to identify relevant thematic areas and lay the groundwork for the following software-based phase. The

second phase involves the analysis of the narrative through the Linguistic Inquiry and Word Count Program (LIWC).

Result: 166 students (63 male and 103 female) took part in the study. The preliminary content analysis highlighted that the most feared situations are breaking bad news, medical error communication, facing an unexpected or uncertain situation, handling doctor-patient boundaries between personal values and one's own professional role. LIWC analysis are ongoing.

Conclusions: Medicine students experience feelings of vulnerability and helplessness/impotence/powerlessness that are difficult to cope with given the high standards and expectations in medical practice.

THE EFFICACY OF NEUROCOGNITIVE REHABILITATION IN A RANDOMIZED CONTROLLED TRAIL WITH HIV PATIENTS

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Abstract

Despite the improvement of therapies of HIV with antiretroviral treatment (cART), HIV-Associated Neurocognitive disorder (HAND) remains one of the main central complication of the disease.

In this study, we evaluated the improving of cognitive functions using a rehabilitation training program (software Erica). 55 patients in cART or at first HIV diagnosis were recruited and they were undergone a neuropsychological for detecting HAND, based on Frascati Criteria. Patients with HAND were randomly assigned to Erica training in association to cART (Intervention group) or to only cART (Control group).

We retested patients at the end of the 12 sessions (t12) and at 6 months follow-up (t6) of the last assessment.

Findings at t12 showed a decrease of HAND in the Intervention group (2/7, 28% without HAND), although nobody improved in Controls.

T scores in two cognitive domains (Attention and Working Memory, Executive Function) and in five tests (Digit Span Backward, Rey Verbal Learning Test-Delayed Recall, Rey

Complex Figure test-Delayed Recall, Stroop Test-Errors and Phonemic Fluency Task) increased in the Intervention group. Whereas, T scores didn't raise in Controls at t12. Intervention group improved also in two cognitive domains (Attention and Working Memory, Executive Function) and in Corsi block-tapping Test compared with Control group. Preliminary findings at t6 suggest a continuation of improvement in Digit Span Backward T scores in the Intervention group. Patients submitted to Erica showed an improvement in several cognitive functions and they seem to maintain some gains at the follow up. The efficacy of cognitive rehabilitation constitutes an important avenue of future investigations in a larger sample size.

INTERPERSONAL RELATIONSHIPS AND SEXUALITY IN BORDERLINE PERSONALITY DISORDER

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Abstract

Borderline Personality Disorder (BPD) is characterized by difficulties in the interpersonal domain, manifested by a bias in interpreting others' intentions, a marked sense of rejection, and intense reactions to social interactions. Moreover, sexuality is particularly problematic for BPD patients: promiscuous and dysregulated sexual behaviors are generally manifested as an attempt to regulate the intense emotional activation, and to manage the extreme and unstable intimate relationships. Although the growing attention towards interpersonal problems in BPD, less empirical data are published on how patients perceive and feel in intimacy relationships.

Physiological, eye-tracking and self-reported data were collected in BPD patients and healthy controls (HC) during a two experimental conditions: 1) interpersonal dot-probe task and 2) emotional induction paradigm (clips task). Attentional biases were evaluated in the dot probe tasks considering different neutral-target conditions (positive, negative or erotic couple interaction) and two presentation times (500 and 1500ms). Similarly, the clips task administered positive, negative, erotic and neutral interpersonal scenes, to investigate BPD reactions to social interactions.

BPD patients are expected to show hypervigilance to interpersonal stimuli in the dot-probe task as manifested by faster fixations towards the target stimulus compared to neutral ones.

They should show reduced visual exploration and attentional allocation to target stimuli. Stimuli categories and presentation time are expected to differentiate BPD and HC visual responses. Eventually, BPD patients are expected to show altered physiological and self-reported responses to interpersonal cues in the clips task.

Our data are expected to support BPD attentional bias to interpersonal context, as well as altered responsivity to social cues. Possible implications for BPD conceptualization will be discussed.

THE INFLUENCE OF THERAPISTS' CHARACTERISTICS ON THE TREATMENT OF EATING DISORDERS: A SYSTEMATIC REVIEW OF THE LITERATURE

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Abstract

Introduction: The main aims of this study are: 1) to identify the therapists' characteristics involved in the treatment of eating disorders and 2) to assess if these specific and subjective traits can promote the positive management of eating disorders, offering an improvement in the eating disorders symptoms.

Method: A systematic search was conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) guidelines and using the following databases: PubMed, Web of Knowledge, Embase, Medline, PsychINFO through Ovid. We conducted three parallel searches: the first was directed to the therapist' characteristics; the second one grouped the most common traits reported by therapists, and the last one was focused on perceived satisfaction from clients and therapists. These searches were combined with Anorexia Nervosa, Bulimia Nervosa and Binge Eating Disorders. The inclusion criteria were 1) diagnosis of eating disorders; 2) any setting and 3) study design; 4) presence of any therapists' variables (such as: empathy, warmness, attachment, reflective capacity, interpersonal characteristics, flexibility etc.); 6) both quantitative and qualitative studies.

Results: From the first screening we found 653 studies for Anorexia Nervosa, 356 studies for Bulimia Nervosa and 196 studies for Binge Eating Disorder. Overall the main characteristics related to the therapists' profile can be grouped in three main areas: 1) personality therapists' traits, perceived from clients as valuable and essential elements to define trust and adherence

to the treatment; 2) client perceived satisfaction related to comfortable feelings; 3) client's and therapist's self-disclosure.

Discussion: Therapists' characteristics and traits seem to play an important role in the increasing of patients' treatment engagement. However, the association between therapist's characteristics and outcome remained still inconclusive.

NEGATIVE BIAS AND REDUCED INFORMATION PROCESSING IN SOCIO-EMOTIONAL CONTEXT IN BORDERLINE PERSONALITY DISORDER: A SUPPORT FOR THE HYPERSENSITIVITY HYPOTHESIS

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Abstract

The present study aims at clarifying some unanswered questions on the concept of emotional hypersensitivity in BPD. In detail, a specific focus is given to the study of altered appraisal mechanisms and information processing. Specifically, hypersensitivity manifestations were primarily studied in relation to socio-emotional cues, given the relevance of social context for BPD difficulties. Fifty-four socio-emotional pictures were administered to 20 BPD patients and 20 healthy controls (HCs) considering three different exposition times (500ms, 3s, 18s). Subjective ratings of arousal, valence and dominance, and eye-tracking indexes were recorded during the whole procedure. BPD patients showed lower valence ratings and a reduced visual exploration in response to socio-emotional stimuli compared to HCs. An effect of the exposition time was found in the 18s condition where BPD patients showed heightened avoidance of socio-emotional cues. In addition, higher levels of pre-task negative affectivity were significantly related to an enhanced visual avoidance. Eventually, BPD related dysfunctional traits (e.g., emotion dysregulation and experiential avoidance) resulted predominantly associated to subjective and visual outputs. Our study showed support for hypersensitivity as manifested by a well-established negative bias towards emotional stimuli together with a reduced processing of social information. Moreover, these aspects of BPD hypersensitivity seem to be affected by negative mood states, as well as by typical BPD dysfunctional features.

ALEXITHYMA, PSYCHOLOGICAL DISTRESS AND SOCIAL IMPAIRMENT IN PATIENTS WITH HIDRADENITIS SUPPURATIVA

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Abstract

Introduction: Hidradenitis Suppurativa (HS) is a rare, chronic, inflammatory skin disease characterized by deep-seated nodules, abscesses, and draining fistulas. HS has a substantial adverse impact in patients' lives. Only a few studies investigated the relationship between health-related quality of life (HRQoL), psychological distress, and emotional dysregulation in patients with HS. Alexithymia, namely the difficulty in describing or recognizing emotions, has been associated with various psychological disorders relating to anxiety, depression, and psychological distress. The aim of this study was to examine the prevalence of alexithymia in patients with HS, and its association with demographic and clinical variables, quality of life indices, and psychological distress.

Methods: Ninety outpatients with HS completed the Toronto Alexithymia Scale (TAS-20), the General Health Questionnaire (GHQ), the Dermatology Life Quality Index (DLQI), the Skindex-17, and the 36-Item Short Form Health Survey (SF-36). Information on socio-demographic and clinical variables were retrieved from clinical records.

Results: Alexithymia or borderline alexithymia was observed in 44.4% of patients with HS, with a higher prevalence of the alexithymic trait in women than men (51.7% vs 31.2%). We did not find any association between alexithymia and clinical variables. Of the entire sample analyzed, 46.1% reported high psychological distress; among them, 78% reported alexithymia or borderline alexithymia compared to 16.7% among GHQ non-cases. Furthermore, HS patients with alexithymia or borderline alexithymia showed significantly higher scores on the Skindex-17 psychosocial scale and the DLQI, and a lower score on the mental component of SF-36, than non-alexithymic patients.

Conclusions: Dermatologists should consider alexithymia in the diagnosis and treatment of HS patients, given its important role in psychological and psychosocial distress.

THE ROLE OF BASIC PSYCHOLOGICAL NEEDS, IN THE RELATIONSHIPS BETWEEN AUTONOMY SUPPORT, PSYCHOLOGICAL CONTROL AND ALEXITHYMIA

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Abstract

Introduction: Several studies investigated the relationship between Alexithymia (AL) and various problems, but there is a paucity of studies that investigated the antecedents of this outcome. Some research has shown that parenting practices are fundamental for the child's emotional development, but there are no studies that investigate the relationship between Autonomy Support maternal (ASM) and paternal (ASP), Psychological Control maternal (PCM) and paternal (PCP) and AL and the possible mediational role played by the Psychological Needs. The aim of this study is to fill this gap in order to better understand the relationship between these variables.

Method: The 5 questionnaires were administered to 209 subjects aged between 18 and 43 years ($M=25.79$; $SD=3.38$). We used TAS-20 to assess AL, POPS for Autonomy Support (AS), PCS for Psychological Control (PC), and BPNS for Need Satisfaction (NS) and Need Frustration (NF)

Results: Path analysis was conducted to test a model with ASM, ASP, PCM and PCP as predictor variables, NS and NF as mediators, and TAS 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, $\chi^2(8) = 14.57$; $p = .06$, CFI = .99, RMSEA = .06 (90% CI = .00 – .11). The results showed a significant path from PCM ($\beta = .26$; $p < .05$) and PCS ($\beta = .23$; $p < .05$) to NF, and from ASM ($\beta = .29$; $p < .05$) and ASP ($\beta = .23$; $p < .05$) to NS. AL was predicted by NF ($\beta = .41$; $p < .05$) and NS ($\beta = -.20$; $p < .05$).

Conclusion: The results confirmed a relationship between AS and PC on NS and NF in particular, which mediate the relationship between ASM, ASP, PCM, PCP and the AL. It is hoped that research will further investigate the relationship between these variables in order

to verify the implications in the educational field in order to prevent emotional difficulties such as AL.

DYSFUNCTIONAL PERSONALITY TRAITS IN DRUG-ADDICTS AND SEX-OFFENDER INMATES: ADMINISTRATION OF THE PID-5 IN A PRISON IN NORTHERN ITALY.

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Abstract

Although the extensive literature available identifies significant differences in personality trait associated with the profiles of drug-addicts and sex-offenders, important similarities exist between these kinds of inmates. The similarity can be attributed to their common antisocial nature and represents a weight greater than the other dysfunctional personality traits. The aims of the present study are: a) to identify the dysfunctional personality traits of each group considered and to highlight any differences and similarities; b) to verify whether there are patterns of dysfunctional personality traits that explain the belonging to one or the other group.

A sample of 171 Italian and foreign inmates from a prison in Northern Italy took part in the study. Of these, 90 belonging to the category of prisoners diagnosed with drug-addiction and definitively sentenced for common crimes; 81 belonging to the category of inmates definitively sentenced for sexual crimes (art. 600-609 c.p.).

In order to collect data useful to confirm or confute the initial hypothesis, we administered the questionnaire PID-5 (The Personality Inventory for DSM-5 - Adult), useful for the identification of dysfunctional personality traits.

The results showed that, in both groups, the highest scores are associated with the following facets: risk taking; anxiousness; suspiciousness; rigid perfectionism. The scores associated with the sample of drug-addict inmates are overall higher than those associated with sample of sex offenders. These results suggest that despite the different criminological profiles, the antisocial aspect, common to both categories, is the most important element to describe these subjects' personality.

Our findings could have important practical and clinical implications in orienting the internal policies of prison institutions and the treatment of inmates.

A PRELIMINARY STUDY ON ATTACHMENT STYLES AND MALADAPTIVE PERSONALITY FUNCTIONING IN PATIENTS WITH SUBSTANCE USE DISORDER

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Abstract

Although maladaptive personality functioning has been associated to insecure attachment styles (Debbanè et al., 2016), this relationship needs to be deepened in clinical samples.

The aim of this preliminary study was to explore attachment styles (ASs) and maladaptive personality functioning (MPF) in a clinical sample of Italian substance users.

Thirty patients with Substance Use Disorder were enrolled ($M_{age}=22.87$, $SD_{age}=3.39$; females = 9, 30%). Personality Inventory for DSM-5- Brief Form (PID-5-BF), and Relationship Questionnaire (RQ) were administered.

Patients' means and SDs for the four ASs measured with the RQ were: secure $M=3.10$, $SD=1.83$; preoccupied $M=3.67$, $SD=1.99$; fearful $M=2.53$, $SD=1.61$; and dismissing $M=3.07$, $SD=1.95$. We found: a negative association between the secure AS and negative affectivity ($r = -.43$; $p = .03$) and a positive correlation between the preoccupied AS and negative affectivity ($r = .49$; $p < .01$); a negative correlation between the secure AS and detachment ($r = -.51$; $p < .01$), and a positive correlation between detachment and the preoccupied AS ($r = .69$; $p < .001$) and the fearful AS ($r = .42$; $p = .02$); a positive correlation between antagonism and the secure AS ($r = .45$; $p = .01$) and the dismissing AS ($r = .52$; $p < .01$); a negative correlation between the secure AS and disinhibition ($r = -.47$; $p = .01$) and a positive correlation between disinhibition and the preoccupied AS ($r = .38$; $p = .03$); a negative correlation between the secure AS and psychotism ($r = -.40$; $p = .01$) and a positive correlation between psychotism and the preoccupied AS ($r = .56$; $p < .01$).

The overall negative association between the secure AS and MPF and the overall positive association between MPF and the insecure ASs observed in this study highlights the importance of assessing attachment styles in substance abusers to tailor specific psychological intervention directed to them.

CHANGES IN PERSONALITY ASPECTS, LOCUS OF CONTROL AND CREATIVITY IN A GROUP OF ATTENDING SUBJECTS A THEATROTHERAPY PATH

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Abstract

Theather-therapy joints psychology and theater. Specifically, the theatrotherapy approach used in the present research combines Stanislavskij's theater (Stanislavskij, 1937) with Positive Psychology (Seligman, 1998).

The aim of the research was to observe changes in the personality, in the Locus of Control and in the creativity of a voluntary group of adult participants, attending a course in Theater-therapy for six months. Participants were required to fill in at the first day and the last day of Theater-therapy path: Big Five Questionnaire (BFQ) based on Energy, Friendliness, Conscientiousness, Emotional Stability and Mental Opening (Caprara et al., 1993); Big Five Questionnaire (BFQ) focuses on Energy, Friendliness, Conscientiousness, Emotional Stability and Openness (Caprara et al., 1993); Locus of Control of Behavior Test (LCB) internal (I) and external (E) (Craig, et al., 1984), and Torrance of Creative Thinking (TTCT) (Torrance, 1988) focuses on Fluidity, Flexibility, Originality, Processing, in two series (figural series and verbal series). The meetings took place once a week for three hours. Four ANOVAs were performed in order to verify changes between the onset (test phase) and the end (retest phase) of Theater-therapy path. Results showed significant differences for BFQ means between test and retest ($F = 7.414$; gdl = 1/7; $p < 0.05$; Mean test = 70.4375; Mean Retest = 73.4375), significant differences between test and retest for TTCT in both figural and verbal forms (figura series: $F = 20.546$; gdl = 1/7; $p < 0.001$; Mean Test = 36.906; Mean Retest = 41.312), (verbal series: $F = 3.3630$; gdl = 1/7; $p < 0.001$; Mean test = 60.00; Mean test = 64.791) and a greater LCB-I at retest phase ($F = 7.515$; gdl = 1/7; $p < 0.05$; Mean test = 27.875; Mean retest = 34.625). Subjects improved aspects of creativity and personality, in particular they increase "openness", that is linked to the creativity. This result suggests an increased ability to open up to new points of view different from one's own, an increased enthusiasm, ability to reach their own goals and a better emotions handle. Furthermore, They perceive themselves as architects of their own destiny.

DEPRESSION, WELL-BEING AND CAREGIVING IN AN ITALIAN SAMPLE: A CLUSTER ANALYSIS

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Abstract

Depression and psychological well-being are key ingredients of aging well, but their combination has been rarely evaluated in community dwellers and in association with providing caregiving. This research aimed to classify individuals according to their well-being levels (low well-being-LWB; moderate well-being-MWB; high well-being HWB) in order to identify their psychosocial correlates, including depression and being a caregiver.

250 community dwellers (60-90 years) completed questionnaires concerning Psychological Well-being, Life Satisfaction and distress. They were classified into 3 groups (LWB, MWB, HWB), following a k mean cluster analysis. Chi square and analyses of variance were used to compare the 3 clusters. Regressive analyses were performed to evaluate their psychosocial correlates.

Fifty-two individuals belonged to the HWB cluster, 68 to the LWB cluster and 97 to the MWB cluster. Individuals in the LWB cluster showed more anxiety, depression, and 61 of them reported to provide caregiving. Members of the HWB cluster were the oldest. Psychological well-being negatively correlated to depression and caregiving.

Conclusions: These results indicate that only a small proportion of community dwellers reported optimal well-being. They were older, showed lower levels of symptomatology and they did not provide caregiving. Addressing depression and alleviating caregiver burden may constitute ingredients for promoting optimal well-being in old age.

THE INFLUENCE OF ATTACHMENT AND DYADIC DIMENSIONS ON INDIVIDUAL PSYCHOLOGICAL ADJUSTMENT

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Abstract

Literature on romantic relationships has largely acknowledged the impact of attachment and dyadic dimensions on individual psychological adjustment (Mikulincer & Shaver, 2016; Uecker, 2012). However, extant studies have not yet focused on the reciprocal and mutual effects among partners, taking into account the couple as a dyadic whole. From this perspective, the aim of our study was to verify the role of individual attachment and relational satisfaction and commitment on individual psychological adjustment, using the actor–partner interdependence model (APIM).

In this cross-sectional study, 233 heterosexual adult couples (age: females $M = 28.4$; males $M = 30.3$) completed the following self-report questionnaires: Experiences in Close Relationships Scale-Revised (ECR-R), Dyadic Adjustment Scale-4 (DAS-4), Commitment subscale of the Investment Model Scale (IMS), and, as a measure of psychological disadjustment, the Patient Health Questionnaire-9 (PHQ-9). Data were analyzed using between- and within-partners correlations and APIM models.

Results of APIM analyses showed both actor and partner negative effects of insecure attachment on dyadic satisfaction; the latter, in turn, had a significant impact on individual psychological adjustment, increasing depressive symptoms levels of each member of the couple.

The current study may have important clinical implications since it highlighted the importance of considering dyadic dimensions even when treating individual psychological disadjustment.

PSYCHOLOGICAL DISTRESS AMONG ITALIAN UNIVERSITY STUDENTS

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Abstract

Emerging adulthood (Arnett, 2000; Arnett et al., 2014) 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. Many studies point out high levels of psychological distress in University students (Deb et al., 2016; Schofield et al., 2016; Tang et al., 2018; Tran et al., 2017). However, only a few Italian studies has focused on mental health of University students.

Method: One hundred and twenty four students (34.7% males) aged between 19 and 29 ($M = 22.73$, $DS = 2.39$) were enrolled. Depression (BDI-II), anxiety (STAI-Y), suicide risk (SHSS) and substance abuse (ad hoc questionnaire) were assessed.

Results: Students show minimal depressive symptoms ($M=12.31$; $DS=9.97$), with moderate to severe condition in the 23.4% of cases. SHSS shows a non-at risk mean value ($M=1.79$; $DS=2.58$), however, the 3.2% of the sample result at risk. Students show both trait anxiety ($M=47.65$; $DS=16.5$) and state anxiety ($M=44.40$; $DS=14.29$). The 43.5% of the sample reported substance abuse; among them, the 25.92% was on a weekly basis.

Conclusions: Italian data seem in line with international studies, showing significant mental health problems in University students, specifically depression, anxiety and substance abuse (Beiter et al., 2015; Deb et al., 2016; Peltzer et al., 2013; Schofield et al., 2016; Poorolajal et al., 2017). Suicide risk seems to be lower than in previous studies (Chesin & Jelic, 2012; Torres et al., 2017), but still needing attention. Psychological distress can lead to a strong impairment of students' daily lives (Ivins et al., 2017), as well as to an academic failure (Ishii et al., 2018). It is of the utmost importance to improve University Psychological Services in order to address students' mental health problems (Ibrahim et al., 2013), as well as to avoid performance decline and drop-out (Lee et al., 2016; Sun et al., 2016).

NEUROTICISM AND DEPRESSIVE DISORDERS: ASSOCIATIONS, RISKS AND MANAGEMENT CHALLENGES

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Abstract

Introduction: Depressive disorders are some of the leading causes of years lived with disability in the world. The identification of risk factors and effective treatment strategies for depressive disorders has become an important issue in clinical and research contexts. Although the literature has revealed the relevance of neuroticism as a risk factor for the development of

depressive disorders, no study has specifically reviewed the relations between these constructs. Thus, the present study aimed at summarizing the current state of knowledge in this field.

Method: We performed a non-systematic review of published articles based on two Scopus search terms: (1) “neuroticism” and “depressive disorder*” or “depressive symptom*” or “depression”; and (2) “personality or neuroticism or neurotic” and “depression or depressive disorder” and “treatment or psychotherapy or therapy or management or intervention or pharmacotherapy”. Two reviewers screened all titles and abstracts to identify potentially relevant articles. They also conducted an additional manual search of the references in the manuscripts retrieved.

Results: The literature review shows that neuroticism (1) is related to depressive disorders; (2) has an important role in the onset of depressive disorders even after controlling for changes in all other personality traits and baseline symptom levels; (3) predicts the course and expression of depression; (4) predicts negative treatment outcome in depression; and (5) is changeable over the course of depression treatment so that patients who are low in neuroticism show greater reductions in this trait after treatment.

Conclusions: The reviewed literature indicates possible avenues to better understand the nature of neuroticism and the processes through which it is associated to depressive disorders in order to improve prevention and treatment programs that target the core of depression.

DISREGULATION OF NEGATIVE AND POSITIVE EMOTION IN GAMBLING DISORDER: A STRUCTURAL EQUATION MODEL

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Abstract

Introduction: Theoretical and empirical contributions attested the role played by dysregulation of negative emotions in Gambling Disorder (GD). Also, Disordered Gamblers (DGs) are characterized by abnormal hedonic responses and high levels of Positive Urgency. However, few is known about psychological impairments accounting for dysregulation of positive emotions among DGs. In addition, the relationship between dysregulation of negative and positive emotional states remains unexplored. Throughout a cross sectional study, we aimed

to extend the current knowledge towards the relationship between GD and dysregulation of both negative and positive emotions.

Method: We administered to a sample of DGs (n=100) and a sample of controls (n=100) the South Oaks Gambling Inventory, the Difficulties in Emotion Regulation Scale, the Impulsive Behavior Scale Short Form and the Ways of Savoring Checklist.

Results: Scores of DGs significantly differed from scores obtained by controls on all variables examined in this study. Difficulties in the regulation of negative emotions, Positive urgency and some Savoring strategies emerged as significant predictors of GD' severity. Finally, a structural equation model showed that dysregulation of negative emotions mediated the relationship between savoring abilities and GD's severity whereas Positive Urgency did not.

Conclusions: Our study supports previous data showing a role played by emotional dysregulation in GD and indicates that DGs may experience dysfunctions in the capacity to savor positive emotions. Moreover, results suggest that dysfunctions in the dysregulation of negative and positive emotions should not be considered as independent targets of clinical interventions for DGs.

ATTACHMENT AND SELF-ESTEEM ON ANXIETY AND DEPRESSION IN ADDICTED PATIENTS: A COMPARISON WITH A NON-CLINICAL SAMPLE

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Abstract

A great association among anxiety and depression has been demonstrated in patients with substance abuse who are often characterized by insecure attachment styles and low self-esteem. The latters are often considered risk factors for psychological well-being. The aim of the current study was to compare addicted patients to a non-clinical group on anxiety, depression, self-esteem and attachment style and to investigate the relation between those variables in both groups. The sample, balanced for age and gender, consists of 167 subjects (51.5% non-clinical, 48.5% clinical). The Personality Assessment Inventory (PAI), the Rosenberg Self-Esteem Scale (RSE) and the Attachment Scale Questionnaire (ASQ) were administered. MANOVA showed a main effect of the group (clinical vs non-clinical) on the

considered variables, *Wilks's λ*=.73, $F(12,151)=4.63$, $p<.001$, with a strong effect size $\eta^2=.269$. Addicted patients reported higher levels of anxiety, depression and insecure attachment, and lower levels of self-esteem and secure attachment than non-clinical. Regarding the correlations, self-esteem and secure attachment were negatively correlated with all depression and anxiety subscales ($p<.008$, medium/large effect size) in both groups. Focusing on insecure attachment, addicted participants who needed for approval had higher levels of anxiety and depression in all subscales, subjects who felt uncomfortable in intimacy had higher levels of affective anxiety, of cognitive and affective depression, and finally who was concerned about relationships had higher levels of affective and cognitive anxiety. In conclusion, this study adds data related to the correlation between attachment's dimensions and constructs of anxiety and depression in addicted patients. Moreover, it might inform clinicians and researcher about preventive and treatment perspective.

A WAY OF PERMANENTLY STOPPING THE INVOLUNTARY RECALL OF TRAUMATIC EVENTS: THE REWIND TECHNIQUE

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Abstract

The Rewind Technique (RT) was developed by David Muss as a therapy to reduce PTSD symptoms. With their eyes closed, the patient is asked by the therapist to imagine to be sitting at the movies, observing themselves on the screen, as if the event had been filmed at the time. This allows emotions to be dissociated. Subsequently, once the movie has come to an end, the patient is asked to step into it. The movie is then to be rewound at considerable speed. While experiencing the rewound movie, the patient is thus associated, meaning that they see and feel the event again as the movie begins from a safe starting point. The RT does not ask the patient to reveal any details of the traumatic event to the therapist.

The RT has been advocated as an effective treatment for PTSD that only takes one or a few sessions to work. Given the existing proof of concept evidence for the RT (Muss' personal communication) we developed a project that aims to determine its efficacy in the treatment of individuals with PTSD in order to reduce their symptoms in short- (2-4 weeks) and long- (3 months) period, and to improve their quality of life.

Patients are recruited at a local women's refuge. Three times (before, 2-4 weeks after the RT, and 3 months later) the participants' symptoms are assessed by means of: the PTSD Checklist for DSM-5, the Impact of Events Scale (IES: this instrument is specified in the RT treatment protocol) and the Clinical Outcomes in Routine Evaluation—Outcome Measure. So far, 11 women have been involved in the study. According to the clinical observations reported by Muss, the preliminary analyses showed that the RT contributed to reduce symptoms (differences of the IES scores before and after 2-4 weeks of the RT: $M = -17$; IES range = 0-75).

With reference to the traditional trauma focused psychological therapies, the RT may be an alternative, more cost-effective and clinically effective treatment for PTSD.

INCREASED INTEROCEPTIVE AWARENESS IN PREGNANCY AND ITS RELATIONSHIP WITH BODY IMAGE DISSATISFACTION AND DEPRESSIVE SYMPTOMS

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Abstract

Interoception is the sense of the physiological condition of the body originating from within its internal organs (Craig, 2003). It crucially contributes to the formation and maintenance of bodily self-consciousness, as highlighted by recent theoretical models (Craig, 2003; Damasio, 2010) and experimental evidence (Aspell et al., 2013; Suzuki, Garfinkel, Critchley, & Seth, 2013). Pregnancy is a period of profound physical and psychophysiological changes, which happen in a relative short time interval to the women's body.

In a two-testing session design, we measured: interoceptive accuracy (via the heartbeat counting task, Schandry, 1981, and the cardio-dynamic detection task, Azevedo et al., 2016); interoceptive sensibility (via the MAIA questionnaire, Mehling et al., 2012); body dissatisfaction (via the BASS, Cash, 2015 and the PFPS, Skouteris et al., 2005 questionnaires) and depressive symptoms (via the EDPS questionnaire, Cox, Holden, & Sagovsky, 1987), in

a sample composed by pregnant ($N=13$; Age: Mean 33.38 years, $SD \pm 4.84$) and age-matched non-pregnant women ($N=13$; Age: Mean 33.38 years, $SD \pm 4.84$).

Results show that interoceptive accuracy was higher in pregnant women compared to the non-pregnant ones. This was especially true in the late (third trimester) compared to the early stage (second trimester) of the pregnancy. Interestingly, we also found that the more pregnant women became accurate in detecting their heartbeat along the pregnancy, the more they became satisfied about their body. Finally, correlation analysis shows that the more women were accurate in detecting their bodily signals the less they reported depressive symptoms. This is the first study that investigates the relationship between interoception, body dissatisfaction and depressive symptoms in pregnancy. Our results could pave the way for future theoretical investigations and, could have important clinical applications not only for pregnant women's well-being but also for the newborns.

NONSUICIDAL SELF-INJURY (NSSI) IN ITALIAN ADOLESCENTS: EXPLORING THE ROLE OF PERSONALITY, SLEEP DISTURBANCE AND DYSFUNCTIONAL TECHNOLOGY USE AS A RISK FACTORS

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Abstract

Introduction: Non-suicidal self-injury (NSSI) is a major public health problem among adolescents and a risk factor for suicide. The purpose of this study was to examine the relation between NSSI, personality functioning, sleep disturbance and problematic technology use in 136 Italian adolescents (36.8% males) aged from 14 to 17 years (mean age = 14.78 ± 0.86).

Methods: Participants completed the following questionnaires: the Deliberate Self Harm Inventory (DSHI), the Personality Inventory for DMS-5 Brief Form (PID-5BF), the PROMIS Sleep Disturbance Short Form (SD), the Internet Addiction Test (IAT), the Mobile Phone Dependence Brief Form (TMD brief) and the Videogame Dependency Scale (CSAS). Hierarchical logistic regression analysis was used to identify which variables predict NSSI. The independent variable was personality functioning at Step 1, while sleep disturbance was added in Step 2. Finally, problematic technology was included in Step 3.

Results: Overall, 38.2% of participants (n=52) have engaged in at least one episode of NSSI in the last year, without gender and age differences. The 22.8% (n=31) injured themselves with only one method while, the other 15.4% (n=21) used two or more methods. 5.8% (n=8) of adolescents reported a problematic internet use and 0.7% (n=1) problematic vedeogame use.

The hierarchical logistic regression analysis showed that maladaptive personality functioning and problematic internet use were significantly related to an increased risk of NSSI (odds ratio= 5.43; 95% confidence interval: 1.54-19.18; odds ratio= 1.05; 95% confidence interval: 1.00-1.11, respectively).

Conclusions: Problematic internet use is associated with NSSI after taking into account the role of maladaptive personality functioning and sleep disturbance in adolescents. However, data of present study should be considered with caution and further studies are needed to confirm these findings.

PROBLEMATIC INTERNET USE: ASSOCIATIONS WITH HOARDING AND DEPRESSION SYMPTOMS

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Abstract

Several psychopathological symptoms have been found to be often associated with problematic Internet use (PIU). It has been reported that individuals with PIU are more likely to have symptoms associated with drug addictions, mood and anxiety disorders, and obsessive-compulsive disorder. No study to our knowledge has yet investigated the relationships between all these symptoms in a single model that may help characterize individuals with PIU.

The present study investigated whether and how, depression, stress, anxiety, impulsivity, obsessive-compulsive symptoms, cannabis and alcohol abuse are associated with PIU. One-hundred-and-four Italian students (78 women) were assessed using Internet Addiction Test, Alcohol Use Disorders Identification Test, Cannabis Abuse Screening Test, Depression Anxiety Stress Scales-21, Barratt Impulsiveness Scale, and Obsessive-Compulsive Inventory-Revised. Data analysis using a Bayesian model averaging approach showed that only higher levels of depression and hoarding predicted greater PIU severity. Of note, hoarding

symptoms were related more strongly than depression to PIU. The obtained results support the association of PIU with low mood and emotion dysregulation, and provide new insights into compulsive features in PIU.

PARENTAL BONDING, ANGER AND NON-SUICIDAL SELF-INJURY: A MEDIATION MODEL

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Abstract

Background: Non-suicidal self-injury (NSSI) refers to the intentional destruction of one's own body without the intent to die. Existing literature suggests the potential role of the parent-child relationship quality in increasing the vulnerability to NSSI. However, little is known about the potential mediators that might intervene in this relationship. Therefore, we hypothesized a path analysis model to investigate whether the expression of anger mediates the association between parental bonding and NSSI within adolescents sample.

Methods: We assessed NSSI, parental bonding, and the expression of anger using self-report questionnaires in 1073 high school students, aged 13-19 years ($M_{age} = 15.89$, $SD = 1.47$). Participants who had positively endorsed a screening item and those who did not respond to this item were interviewed in order to assess age of onset, frequency, duration and severity of the NSSI behavior.

Results: A parental bonding pattern characterized by careless and rejection was significantly associated with NSSI. Further, this relationship was partially mediated by anger turned inwardly. Anger expressed outwardly did not have a significant effect on the occurrence of NSSI.

Conclusion: Self-direct anger might work as a bridge connecting an invalidating environment in which offspring feels unloved and uncared for (i.e. rejected) and the development of NSSI. These findings point to the salient role of anger management in the development of preventions and interventions programs among adolescents.

SPECIFIC PHOBIA FOR VOMITING: A SYSTEMATIC REVIEW

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Abstract

Emetophobia or SPOV (specific phobia for vomiting) is an anxiety disorder still little explored. In the DSM-5 (APA, 2013) it appears in anxiety disorders within the specific phobias section, in the wording "other". Specific phobia is an irrational and exaggerated fear of a peculiar or specific situation or object, which generates a deep and excessive anxious state. The exposure or anticipation of the phobic stimulus induces a strong anxiety crisis in the subject, which is why and for this reason the phobic subjects try in every way to avoid exposure to the stimulus that generates fear.

Individuals are aware of their fear, they are able to describe it and they are also aware of its irrationality; but they failing to win it, they develop a series of strategies to deal with it.

This work proposes an international systematic review of the literature based on Emetophobic Disorder. Literature studies of the last 18 years (2000-2018) have been considered. From the 23 selected empirical studies, we tried to investigate the different variables interconnected with the emetophobic disorder and what treatment, to date, is the most effective.

The diagnosis of emetophobic disorder is very difficult to determine because the condition presents with symptoms that are also observed in obsessive-compulsive disorder, panic disorder, agoraphobia panic disorder and generalized anxiety disorder (Boschen, 2007; Veale, 2009; van Hout & Bouman, 2012). Therefore, the international literature review aims to highlight the importance of identifying the presence of other disorders in the emetophobic individual, not only for a diagnostic classification but also for an effective treatment.

THE MODERATING EFFECTS OF SOCIAL SUPPORT AND ROMANTIC RELATIONSHIP IN THE LINK BETWEEN CHILD MALTREATMENT AND SELF-HARM

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Abstract

Introduction: The term self-harm (SH) refers to the intentional and direct destruction or damage of one's own body, including behaviors such as cutting, scratching of skin, head-banging and biting, but without a conscious suicidal intent. Many studies have found that rates of self-harm are higher in those with a history of childhood maltreatment. In our study, we explore whether two protective factors, social support and romantic relationship, moderate the relationship between child maltreatment and self-harm.

Method: Descriptive and regression analyses were performed in order to evaluate the potential effect of social support and romantic in moderating the relationship between child maltreatment and self-harm. Preliminary analyses were also conducted to detect possible control variables.

Conclusion: We found that a positive and romantic relationship, as well as a solid social support, provide a buffer for youth with a history of childhood maltreatment.

EARLY SIGNS OF SCHIZOPHRENIA AND AUTONOMIC NERVOUS SYSTEM DYSREGULATION: A LITERATURE REVIEW

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Abstract

Objective: Recent research suggests that early signs of schizophrenia can be detected several years before its onset. Evidence suggests that the identification of at-risk individuals before the psychotic onset can significantly improve the course of the disorder. However,

instruments employed for the detection of prodromal symptoms are far from being accurate in the prediction of a future transition to psychosis. The aim of the present review is to summarize literature on the early signs of schizophrenia and to identify physiological markers that may aid the identification of the disorder before psychotic transition.

Method: This critical review includes studies published between 1979 and 2018 that were indexed in major databases with the following keywords: schizophrenia, prodromal phase, basic symptoms, autonomic nervous system, heart-rate variability.

Results: The examination of the relevant literature showed that, despite recent progress in the identification of at-risk states, the currently employed instruments do not allow an effective prediction of a future psychotic onset. Also, evidence suggests a significant association between alterations in the autonomic nervous system (ANS) functioning and psychotic disorders. However, literature on the association between ANS functioning and at-risk states for psychosis is still scarce. The addition of physiological risk indicators may represent a step forward in the detection of at-risk individuals.

Conclusions: Overall, the present literature review highlights that a future schizophrenic onset cannot be strongly predicted with current available measures. Given the established correlation between schizophrenia and autonomic dysregulation, an investigation of the ANS functioning in individuals who are at increased risk of developing schizophrenia may be particularly useful to improve the quality of the assessment, to identify at an early stage the dysregulated physiological patterns that have been linked with schizophrenia, and therefore to develop tailored interventions. Accordingly, it is crucial that future research investigates the presence of autonomic deficits in individuals at risk for psychosis.

A PLACE TO BE MAGNIFICENT. A STUDY ON GRANDIOSE NARCISSISM IN ONLINE GAMERS

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Abstract

Introduction: Literature findings suggest that narcissistic traits may add to other psychological risk factors and may foster problematic gaming. The purpose of this study is to examine

the role of grandiose narcissism, attachment styles, alexithymia and dissociation in the prediction of problematic gaming.

Method: The sample was recruited in online forums of gamers and consisted of 246 players (men: n=148, 60.2%) of World of Warcraft ranging in age ranged from 18 to 47 years ($M=29.61$; $SD=11.51$). Gamers completed a socio-demographic form and questionnaires on Internet gaming disorder (IGD), alexithymia, attachment style, dissociative experiences and grandiose narcissism. Correlation and regression analyses were undertaken to examine the associations between the investigated variables and to identify predictors of IGD scores, controlling for socio-demographic covariates.

Results: The examined constructs were positively associated. We found that increased narcissistic traits of superiority and entitlement, and decreased authority significantly predicted IGD scores in our sample, together with increased avoidant attachment attitudes, difficulties identifying feelings, and externally oriented thinking ($R^2=.33$).

Conclusions: In some problematic gamers, online gaming is used as a compensatory strategy for avoiding unpleasant emotional states and overcoming narcissistic vulnerabilities. Thus, the tendency to display a grandiose self in the online environment may compensate difficulties with emotion regulation and interpersonal relationships. This consideration has relevant implications for the treatment of individuals who display problematic gaming.

CLINICAL APPLICATION OF TDCS ON MOTOR SYMPTOMS IN PARKINSON'S DISEASE: A LITERATURE REVIEW

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Abstract

Parkinson's disease (PD) is a progressive, long-term neurodegenerative disorder and its clinical presentation is characterized by cognitive and motor symptoms. Particularly, PD is a common cause of gait and postural instability. Different treatments have been developed and applied (pharmacological and non-pharmacological therapy), nevertheless the effects of those interventions still remain inconclusive. The development of more effective therapeutic options on PD motor symptoms is a pivotal aim of the rehabilitative medicine. Therefore,

the aim of this review was to study the effects of transcranial direct current stimulation (tDCS) on motor symptoms. The second objective was to identify the best tDCS parameters and recommendations available demonstrated by the analyzed studies.

In order to identify suitable publications for inclusion, an online search on PubMed and Scopus databases was conducted using the following search terms: “tDCS and Parkinson”, “tDCS and motors symptoms”, “tDCS and tremor” and “tDCS and bradykinesia”. The year of publications hasn’t been limited.

To date, the vast majority of the studies differ on the sites of stimulation, parameters and type of stimulation. The main targeted areas were the primary motor cortex and the dorsolateral prefrontal cortex. Findings highlighted significant effects on the reduction of motor dysfunctions particularly related to: a) gait; b) balance; c) bradykinesia; d) freezing of gait and e) diskynesia.

In conclusion, tDCS represents one of the most promising tool available, in order to promote adaptive plasticity with significant rehabilitative motor effects in PD patients. Future studies with larger sample sizes and high-quality studies are needed to further corroborate the reported findings and to identify the optimal tDCS parameters and protocols.

ALTERATIONS IN BODY IMAGE AND SEXUAL QUALITY OF LIFE IN GENDER DYSPHORIC ADULTS BEFORE SEX REASSIGNMENT SURGERY

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Abstract

Gender dysphoria (GD) refers to the distress experienced by a person because of the perceived discrepancy between his gender identity and his birth-assigned sex. This condition is associated with an intense psychological and social suffering in people so that they aim to undergo a sex reassignment surgery (SRS). According to Italian laws, people with GD has to be evaluated by a psychological assessment. The aim of this study is to assess individuals with GD waiting for SRS, comparing them to a control group. The psychological assessment included: Millon Clinical Multiaxial Inventory – III Ed., Body Uneasiness Test, WHO Quality

of Life – BREF, Sexual Quality of Life F/M and Basic Self-Esteem Scale. A total of 17 gender dysphoric individuals ($M_{tf} = 11$, $F_{tm} = 6$, mean age = 32.64) and 32 healthy adults (mean age = 31.21) participated in this study. There were no significant differences in age, sex, psychiatric comorbidities and self-esteem. Significant differences in weight phobia $t(47) = 5.937$, $p < .001$, body image concern $t(47) = 7.264$, $p < .001$, avoidance $t(47) = 6.952$, $p < .001$, depersonalization $t(47) = 7.916$, $p < .001$, global severity index $t(47) = 8.236$, $p < .001$, positive symptom total $t(47) = 5.555$, $p < .001$ and positive symptom distress index $t(47) = 9.640$, $p < .001$ emerge. Furthermore, there were significant differences in sexual quality of life $t(42) = -5.693$, $p < .001$ and in physical health $t(42) = -2.175$, $p < .05$. According to these results, patients in the waiting list for SRS are affected by psychological distress related to an alteration of body image and impairment in sexual quality of life, and not by psychiatric disorders.

FOCUS ON EMOTIONS TO COPE STRESS IN ROMANTIC COUPLES

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Abstract

Romantic partners can experience stress that originates outside (external) or within (internal) their relationship in a form which could be acute (within the last 7 days) or chronic (within the last 12 months). External stressors are those that typically affect one partner (e.g., a bad day at work) and this stress could *spillover* into the relationship causing internal stress. In this direction, stress can be considered a dyadic phenomenon that affects both partners within a romantic relationship. Subjects completed the *Multidimensional Stress Scale for Couples* (MSF-P; Bodenmann, 2007) measuring the stressors connected to their partner, the *Dyadic Coping Inventory* (DCI; Bodenmann, 2008) assessing individual and partners' perceptions of the dyadic coping and the *Chronic and Acute Stress Index* (CASI), a 16-items measure (Isolani, *et al.*, 2018), designed to evaluate internal and external, acute and chronic stressors. Eligibility criteria for joining the study were: age over 18 years old, marriage or cohabitation with the current romantic partner for at least two years. Data has been collected from 827 individuals (390 = women, 437 = men). Mean age of participants was $M_{men} = 43.44$ ($SD = 11.85$), $M_{women} = 40.55$ ($SD = 11.65$) and mean relationship duration was $M_{men} = 17.21$ ($SD = 12.43$),

$M_{\text{women}} = 16.81$ ($SD = 12.16$). Correlational analysis showed a significant negative correlation between MSF-P and supportive dyadic coping both emotion-focused and problem-focused, both self-related and partner-related scales (r values between -.235 and -.563); significant negative correlation between crossover factor both chronic and acute and supportive dyadic coping (r values between -.169 and -.225). Partners who report to focus on emotion to cope with stress report a minor level of stress from everyday life situation. So, results suggest that utilize higher skills of supportive dyadic coping emotion-focused, could be a protective factor and help to cope with everyday stress, both chronic and acute.

IDENTIFICATION OF CLINICAL AND PERSONALITY RISK FACTORS ASSOCIATED WITH HEADACHE DIAGNOSIS

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Abstract

Background: Headache is a disabling neurological disorder with high prevalence which has been associated with negative quality of life indices. Studies have highlighted that headache aetiology is multi-factorial: personality characteristics may be associated with headache symptoms severity and duration. Moreover, a preoccupied attachment style is associated with higher self-perceived head pain. Within this framework, literature has also coherently identified a tight link between headache onset and depressive and anxious symptomatology. However, the directionality of this association, as well as potential interactions with personality and attachment-related variables, has not been fully understood. The aim of this study is to identify, starting from a wide variety of personality, attachment-related and clinical variables, the features that can predict headache diagnosis with the highest certainty, through the performance of a multimodal stepwise statistical model able to discriminate between healthy controls (HC) and patients with headache (PH).

Methods: 79 HC and 80 PH have been enrolled in the study, given the specificity of the tests used, we only enroll females. Stepwise logistic regression has been performed through 54 features extracted from several clinical, personality and attachment-related validated

instruments. The cut-off for each feature for being identified as a predictive feature was $p<0.05$.

Results: A stepwise model composed by the subscales Interpersonal Sensibility, Phobia and Somatization from the SCL90, the physical attention subscale of SF36, the global index of functionality (ISF), and the sexual confidence and sexual desire, satisfaction and function levels, could correctly classify between HC and PH with 83.6% certainty (correctly classified PH=65/80; correctly classified HC=68/79).

Conclusions: We were therefore able to build an accurate multimodal clinical and psychological tool that could classify HC from PH with high performance. Future studies are warranted to understand the interactions and correlations between different data domains.

La diagnosi

Discussant:

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ADDICTED TO DAYDREAMING: EXPLORING THE NOMOLOGICAL NETWORK OF DAYDREAMING DISORDER IN A SAMPLE OF MALADAPTIVE DAYDREAMERS

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Abstract

Introduction: Maladaptive daydreaming (MD) is a construct that describes an extensive fantasy activity that replaces human interaction and interferes with social, academic or working functioning. This study aimed to understand the psychological functioning of MDers, investigating some risk factors that might contribute to the development of MD.

Methods: A cross-sectional study was performed on 162 self-diagnosed maladaptive daydreamers (predominantly women, 83.3%) between 18 and 54 years old ($M=26.31$; $SD=7.62$), recruited through a private MD online forum. Each participant completed measures on MD levels, attachment styles, shame, dissociative experiences, alexithymia, traumatic experiences, maladaptive personality traits and psychiatric symptoms. Correlation and regression analyses were performed.

Results: Results showed positive relationships between MD features and experiences of emotional abuse, fearful attachment style, shame, alexithymia, dissociative experiences, maladaptive personality traits and psychiatric symptoms. Linear regression analyses showed that dissociation, shame and fearful attachment style predicted MD scores [$F_{(13,148)}=6.16$; $p<0.001$; Adj R-square=.29].

Conclusions: Our findings suggest that MD is related to problems in different domains of the individual's mental functioning, and that it reflects the characteristics of a behavioural addiction organized around phobic traits (shame and fearful attachment) counteracted by excessive absorption in fantasies (dissociation). Our findings suggest that a need exists to diagnose and treat MD, and they might be particularly meaningful for better understanding its origins and for developing effective intervention strategies.

VALIDITY OF THE MENTALIZED AFFECTIVITY SCALE (MAS) IN AN ITALIAN SAMPLE

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Abstract

Starting from the conceptualization of mentalization proposed by Fonagy and colleagues (2004), and the cognitive approach to it introduced by Goldman (2006), Jurist (2005) developed the construct of mentalized affectivity. The latter identifies the process that through identification, processing and expression of emotions enables emotion regulation, with the concurrent support of autobiographical memory. Greenberg and colleagues (2017) designed the Mentalized Affectivity Scale (MAS) in an effort to operationalize and assess mentalized affectivity. The aim of this study is to analyze the internal structure and validity of the Italian translation of the MAS.

The present study involved 250 participants who completed a test battery consisting of the MAS and three other self-report questionnaires: The Difficulties in Emotions Regulation Scale (DERS), the Reflective Functioning Questionnaire (RFQ), and the Empathy Quotient (EQ).

A Principal Components Analysis confirmed the structure with three components, with the items loading on the same factors representing the three processes theorized by Jurist (i.e. Identifying emotions, Processing emotions, and Expressing emotions). Subsequently, reliability of the MAS was assessed, and Cronbach's alpha resulted to be at least over .85. Finally, the convergent validity of the MAS was studied through correlational analyses with the measures of the Empathy Quotient, confirming the results yielded by previous studies (Greenberg et al., 2017), in which empathy was linked to the capacity of mentalized affectivity. Moreover, significant meaningful correlations with the DERS and the RFQ were found.

In conclusion, the Italian version of the test shows a strong structure and good statistical validity. Consequently, although some further research is needed to more extensively investigate the empirical validity of the instrument, the MAS has proven so far to be a useful and reliable instrument that can be applied in the clinical and research fields.

PREVALENCE OF ADHD IN ITALIAN INMATES: A PILOT STUDY

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Abstract

Several studies estimate a high prevalence of ADHD in prison inmates (among 25-45%), that leads an impairment in daily life.

We conducted a pilot study to investigate the prevalence of ADHD in Italian inmates. According to literature, we investigated the correlation between ADHD and substance abuse and between ADHD and depressive symptoms. We also hypothesised a significant association between ADHD and the type of crime.

Inmates were progressively recruited among those entering in Milano-Bollate prison.

ADHD assessment was based on ASRS and WURS scales, that evaluate symptoms respectively in adulthood and in childhood. Comorbid disorders/differential diagnosis were investigated through BDI-II and HCL-32.

At present, 59 subjects were screened: the overall prevalence of ADHD in childhood and/or adulthood was estimated at 23.7%. Of this percentage, 64.3% reported ADHD symptoms in adulthood.

Substance abuse was reported in 66% of the sample and a significant association was identified between abuse and ASRS ($M = 1.81$ $DS = 1.79$ $p < .001$). No significant association was found with WURS ($M = 26.97$ $DS = 19.11$ $p > .001$). BDI-II was significantly correlated with substances ($M = 6.14$ $SD = 4.69$ $p < .005$) and with ASRS ($r = .52$ $p < .001$). There wasn't found a significant correlation between the type of crime and ADHD ($r = .10$ $p > .001$). Our findings confirm the high rate of ADHD prevalence in inmate, according to the literature data. We founded high comorbidity rate of adult ADHD with substances abuse and depressive symptoms, whereas no association between the length of sentence and ADHD was confirmed.

These preliminary results highlight the necessity of appropriate treatment for ADHD in prison: a psycho-educational intervention may modify dysfunctional behaviours and it also may be protective against the use of substances and the risk of recidivism.

CHILDHOOD MENTALIZATION: A PILOT STUDY ON THE RELATIONSHIP BETWEEN ATTACHMENT AND EPISTEMIC TRUST

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Abstract

Mentalization refers to the human ability to interpret interpersonal behaviour by “seeing oneself from the outside and others from the inside” (Midgley et al., 2017). It is a developmental and relational capability strongly influenced by parent-infant intersubjective dynamics and attachment styles. Bateman and Fonagy (2004) underline that child mentalization is developed by parents’ interest on child’s subjective experience and parents’ empathic responses. Moreover, child mentalization is associated with secure attachment and epistemic trust related to social learning and to the exploration of own and other’s mind. In

this direction, storytelling is a useful instrument to explore this competence in children, interpreted as a narrative task on interpersonal interactions.

The present pilot research aims to explore mentalization related to autobiographic narratives and to interpersonal storytelling in a sample of non-clinical children.

The sample is composed by 53 children, 28 males (52.8%) and 25 females (47.2%), with average age of 9.89 ($DS=0.32$). Participants were assessed with the Child Attachment Interview (CAI) and Robert Apperception Test for Children-2.

Firstly, correlation analyses highlight that the child overall coherence of autobiographic narrative is associated with a high level of narrative abilities, both in secure ($p<.001$) and insecure ($p=.004$) attached children. Secondly, secure ($p=.013$), but not insecure ($p=.153$) attached child's coherence has shown to be significantly associated with narrative characterized by trustworthy environment. Furthermore, regression analyses show how CAI score predicts narratives characterized by supportive environment ($p=.013$).

In conclusion, children with a good mentalizing ability activate an explicit mentalizing mode, either in the context of personal experience or in general terms. Moreover, secure attachment influences mentalization, but it is also associated to positive expectations and trustfulness to other.

THE ROLE OF MIND-WANDERING IN PSYCHOPATHOLOGY OF PERSONALITY

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Abstract

Mind-Wandering (MW) refers to the human tendency to be engaged in thoughts independent from external task, to produce mental images disconnected from the surrounding reality. It's a heterogeneous phenomenon and it has been connected to the discovery of the Default Mode Network in the spontaneous activity of the brain. MW can be distinguished in Spontaneous (MW-S) and Deliberate (MW-D). In MW-S, the attention focus falls on thoughts that are not related to the activity that is taking place, moving unintentionally from the ongoing task to other thoughts. While in MW-D, attention is diverted from the task and intentionally directed towards other thoughts. MW plays an important role in relation to the

Self and personality and the present study aimed to investigate the links between the two types of MW, the different types of thought in relation with maladaptive personality domains. The study involved 126 adults aged between 18-67. Different self-reports were used to assess The MW-S and MW-D, absorption (DES subscale), reflexivity and rumination (RRQ) and maladaptive personality domains (PID-5-BF). Statistical analysis included descriptive, correlational and mediation analysis. We investigated how mental rumination and absorption can act as mediators between the MWS and the personality traits of negative affectivity and psychotism.

Statistically significant correlations were found between MW-D and the Reflexivity scale. Significant correlations were also found between MWS and total Rumination, Absorption, Negative Affectivity and Psychoticism. Significant effect of the MWS on the dimension of Negative Affectivity was found through the presence of the mediating action of Rumination. Significant effect of the MWS on the dimension of Psychoticism was found through the presence of the mediating action of Absorption.

The results showed how Rumination and Absorption play an important role in the relationship between MW-S and maladaptive personality domains.

ATTACHMENT AND EMOTION REGULATION: DIFFERENT PERSPECTIVE FOR ASSESSMENT

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Abstract

Insecurely-attached subjects show higher physiological reactivity to stress, therefore an impaired emotion regulation (ER). However, most neurophysiological studies on adult attachment referred to self-report measures (conscious self-evaluation of attachment style), although it is well-known that only narrative procedures activate attachment and allow an analysis of unconscious representation (attachment pattern). The main aim of the present study was to investigate the relation between attachment (styles and patterns) and ER (self-reported and physiologic). Participants were 74 emerging adults ($M=23.88$ yrs., $SD=2.51$, males=40%). The Adult Attachment Projective Picture System (AAP) was administered while each participant was connected to an ECG device. Mean Heart Rate (HR) and HR

Variability indexes were calculated before, during and right after the AAP. Participants were classified according to the AAP system. Moreover, in a second step, they filled in the Relationships Questionnaire (RQ) and the Difficulties in Emotion Regulation Scale. There were not association between attachment styles and patterns, either between self-reported and physiologic ER. ANOVA showed that participants classified as preoccupied at RQ referred significantly higher limited access to ER strategies than the other groups. Repeated measures ANOVA indicated that compared to others, participants classified as dismissing at RQ showed lower parasympathetic activity before and right after the AAP, as well as participants classified as dismissing at AAP showed higher sympathetic dominance. Results suggest that despite their self-reported or unconscious downplayed importance of close relationships and restricted emotionality, dismissing emerging adults show heightened physiological activation related to assessment procedure and attachment activation. Findings urge to distinguish levels of analysis, as well as to examine in depth that discrepancy both in research and clinical setting.

THE MOTIVATIONAL INTERVIEW FOR SUICIDALITY

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Abstract

Suicide is the outcome of a process starting with the experimentation of an unbearable pain or hopelessness, passing from suicidal ideation/planning, parasuicidal behaviors/effective attempts.

As far as psychopathological factors are concerned, literature indicates that specific suicidal motivations may shed light on the pathways leading from such variables to suicidal conducts. Most instruments investigating the suicidal motivation are self-report questionnaires possibly resulting in a lack of valid evaluations. Assessment involving clinician report interview could ensure a better understanding of the role of motivation in structuring the suicidal process and a better guide to the clinical intervention. The motivation can vary according to the type of suicidal behaviours and psychological functioning of the adolescent: to obtain a global perspective it's crucial to develop adequate evaluation methods.

The objectives of this study are to validate the Motivational Interview for Suicidality (MIS) and to investigate the association between the MIS areas and the different aspects of suicidal process. The sample is composed by 67 adolescents referred to the Mood Disorders Unit of

the Bambino Gesù Pediatric Hospital assessed as at risk for suicidal behavior using the Columbia-Suicide Severity Rating Scale.

The MIS is a semi-structured clinician-report interview. The interview is composed by 7 areas and 14 sub-areas, evaluated on Likert scale 0-4: illness motivated attempts area, chronic presence of internal pessimistic criticism area sense of defeat and entrapment area relational area external motivated crisis area extreme and unusual cases area discontrol area.

Preliminary exploratory analyses show that different areas of the MIS correlate with different stages of the suicidal process.

ON THE USE OF EYE TRACKING MEASURES IN SYMPTOM VALIDITY ASSESSMENT

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Abstract

Eye tracking technology is rapidly evolving, and some devices already allow for a relatively accurate measurement of gaze information. Nonetheless, to date only few studies have investigated what eye tracking information can add to Symptom Validity Assessment (SVA). Some authors have showed that schizophrenic patients behave differently from healthy controls on specific oculomotor tasks. However, it is currently unknown whether experimental feigners may reproduce those behaviors, when coached to do so. Furthermore, some authors have suggested that when compared to bona-fide patients, experimental feigners might show different eye gaze patterns when administered a SVA test, but the research in this field is still very scarce. The current study aimed at filling these gaps in the literature thereby deepening our understanding of what eye tracking technology could add to SVA. The Inventory of Problems (IOP-29) and few visual tasks were administered to a sample of adult volunteers. Half were instructed to respond honestly (G0), and half were instructed to feign schizophrenia (G1). Participants in G1 were coached on how to successfully fake schizophrenia without being detected as feigners. Statistical analyses showed that participants in G1 showed a longer dwell time and a greater number of fixations in the keyed response options (feigning key), regardless of whether they eventually did or did not endorse such options ($d > .80$). However, simulators were only partially able to reproduce the eye movement patterns typically shown by schizophrenic patients. Using eye tracker along

with the IOP-29 allowed to better understand the response process underlying the choice of one response option instead of another. Moreover, this study provides to enhance the foundation of the smooth pursuit task as behavioral marker of the schizophrenia, since it seems to be harder to feign compared to the anti-saccade task.

GRANDIOSE AND ASHAMED: TRAIT NARCISSISM AND ITS RELATION TO DAILY SHAME

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Abstract

From a clinical point of view, shame is considered a key affect in narcissistic personalities. Empirical evidence and clinical observations mostly suggest that grandiose narcissism inhibits feelings of shame, whereas vulnerable narcissism is associated with increased predisposition to shame. Our aim was to further explore this association with an intensive longitudinal study. Young adults ($N = 186$; $M_{age} = 22.3$) completed self-report measures of trait narcissism (grandiose and vulnerable), trait self-esteem, and trait negative affectivity. Then, for 28 days, they provided ratings of their state shame and the situations they encountered in each day. Multilevel models were used to test the association between trait narcissism and daily shame, controlling for trait negative affectivity, trait self-esteem, and day.

Contrary to what expected, trait vulnerable narcissism was not associated with daily shame when controlling for trait self-esteem; on the other hand, trait grandiose narcissism had a unique positive association with daily shame: additional analyses revealed that this was mostly due to traits of grandiose fantasies and exploitativeness. Also, models including situations showed that social isolation and positive events moderated the association between vulnerable narcissism and daily shame.

Differently from cross-sectional studies, our data show that traits of grandiose narcissism may be associated with increased experiences of shame. Situational variables may also have great impact on narcissists' emotional experiences.

PERSONALITY ASSESSMENT AND EMOTION REGULATION

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Abstract

Emotion regulation has been conceptualized as strategies through which individuals reduce, maintain or increase either positive or negative emotions in response to environmental demands. Two emotion regulation strategies that received particular attention are cognitive reappraisal (thinking about the situation so as to alter its meaning and emotional impact) and expressive suppression (attempts to inhibit or reduce ongoing emotion-expressive behaviour). Reappraisal and suppression have different implications for affective responding and well-being. In particular, reappraisal is related to greater experience of positive affect and well-being, while suppression is related to greater levels of negative affect and to internalizing disorders such as depression and anxiety. The current study examined whether the use of specific cognitive emotion regulation strategies (reappraisal and suppression) is related to depression, anxiety, somatization, and anger-hostility scores using the SQ. The sample comprised 114 Italian university students (79 female, M age = 23.4 years). Participants completed the Emotion Regulation Questionnaire (ERQ) and the Symptom Questionnaire (SQ). The ERQ subscale reappraisal correlated negatively with the Depression scale of the SQ ($r = -.18$, $p < .05$), and with the Anger-Hostility scale of the SQ ($r = -.21$, $p < .05$). The ERQ suppression correlated positively with the Anxiety scale ($r = .22$, $p < .05$), the Depression scale ($r = .21$, $p < .05$), and the Somatization scale of the SQ ($r = .19$, $p < .05$). Consistently with previous results, the use of suppression as emotion regulation strategy is linked with greater levels of anxiety, depression and somatization, while reappraisal is inversely related to depressive mood.

THE SIBLINGS' EXPERIENCE QUALITY SCALE (SEQS): DEVELOPMENT OF A MEASURE ASSESSING THE EXPERIENCE OF HAVING A DISABLED, PHYSICALLY, OR MENTALLY ILL BROTHER OR SISTER

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Abstract

The impact of brothers and sisters on siblings' lives takes on specific characteristics in the cases of intellectual/developmental disability (IDD), chronic physical illness (CPI), or mental illness (MI). The present study is aimed at developing and validating an instrument to specifically assess the quality of the emotional, behavioral, and cognitive experience of IDD/CPI/MI-Sibs. From the literature analysis four dimension emerged: Closeness, Conflict, Jealousy, and Self-Marginalization. To refine the construct definition, we carried out 25 in-depth clinical interviews with IDD/CPI/MI-Sibs, as well as a focus group with psychologists and psychotherapists ($N = 15$), and a focus group with nonacademic IDD/CPI/MI-Sibs ($N = 15$). The textual analyses suggested the need to add a fifth dimension: Worry. Starting with a pool of 47 items, and considering the preferences received from the experts, 35 items were selected (Kuder-Richardson = .86). We administered the 35-item scale to 175 Italian IDD/CPI/MI-Sibs (36% M, 64% F; ages 18-53 yr.). We identified a five-factor structure through an Exploratory Factor Analysis (with factor loadings of at least .55). The final SEQS comprised 23 items (KMO = .820; Variance Explained = 66.3%), and was administered to 213 IDD/CPI/MI-Sibs (28.2% males, 71.8% females; ages 18-69 yr.). The verification of the factorial structure was effected through Confirmatory Factor Analysis, which resulted in high scores of goodness of fit ($\chi^2/df = 1.98$; RMSEA = 0.047 [.033-.061]; CFI = 0.92; TLI = 0.91; SRMR = 0.063). The internal consistency was relatively high: Cronbach's α ranged from .74 to .88. The results indicate that the SEQS has good psychometric properties, suggesting its ability to assess siblings' quality of experience in having an IDD/CPI/MI brother or sister. This study indicates the necessity of improving additional support programs for IDD/CPI/MI-Sibs, such as support groups and school or community interventions.

A CONSTRUCT VALIDITY STUDY OF THE HOLTZMAN INKBLOT TECHNIQUE: CORRELATION WITH THE MMPI-2 CONTENT SCALES

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Abstract

In the past few years, the research on the validity of the Holtzman Inkblot Technique has yielded to positive findings with more than a hundred of studies regarding the relationship between HIT variables and external criteria. In addition, HIT was commended for its capability to discriminate between normal and patients and across different psychopathologies. Although there are still doubts on the meaning of some of the variables, since they have been studied less. In the present study, we examined the construct validity of the Holtzman Inkblot Technique (HIT) through Pearson correlation between its 22 core HIT variables, plus nine subcategories of Pathognomonic Verbalization (V), with an objective measure of personality, the 15 content scales of the MMPI-2. Both tests were administrated to a sample of 595 subjects (300 male and 295 female) with an age range between 17 and 35 years. The results show several significant correlations between 16 HIT variables with multiple MMPI-2 variables. The correlations range from a minimum of .08 to a maximum of .24. Only correlation coefficients .10 or above were interpreted. Some of the results confirm previous interpretation of HIT variables and therefore support the validity of: Space, Anxiety, Hostility, Penetration, Incoherence, Autistic Logic, Contamination, and Self-Reference. Instead, some of the correlations are unexpected and don't support previous findings with the HIT for variables Color, Shading, Pathognomonic Verbalization, Human Content, Anatomy, Sex Content, Barrier, Fabulation, Fabulized Combination, Queer Response, Deterioration Color, and Absurd Response.

PSYCHOMETRIC PROPERTIES OF THE ADULT AUTISM SUBTHRESHOLD SPECTRUM (AdAS SPECTRUM): A STUDY WITH A NON-CLINICAL SAMPLE

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Abstract

Introduction: The Adult Autism Subthreshold Spectrum (AdAS Spectrum; Dell'Osso et al., 2017) has been developed to assess the wide spectrum of autistic-like clinical and non-clinical features in adults. Nevertheless, its psychometric properties have been analyzed with clinical individuals until now. This study was aimed at investigating the dimensionality, reliability, and validity of the instrument in a non-clinical sample.

Method: Participants were 395 Spanish undergraduate students (60% males; mean age of 21.1 years, SD = 2.6), who completed the AdAS Spectrum, the Autism-Spectrum Quotient (AQ), and the Empathy Quotient (EQ).

Results: A confirmatory factor analysis supported the seven-factor structure of the questionnaire. Internal consistency was excellent for the total score and acceptable for five factors. Test-retest reliability over a 4-week period was good. Higher AdAS Spectrum scores significantly correlated with higher AQ and lower EQ scores, supporting the validity of the scale.

Conclusion: Overall, findings support the psychometric properties of the AdAS in a non-clinical sample. Future research is warranted to further examine the psychometric properties of the scale in the general population.

THE COGNITIVE FUSION QUESTIONNAIRE-7: MEASUREMENT INVARIANCE OF THE ITALIAN VERSION ACROSS GENERAL AND CLINICAL SAMPLES

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Abstract

Introduction: According to the Acceptance and Commitment Therapy (ACT), cognitive fusion (CF) refers to the tendency to get caught up in the content of thoughts so that it dominates

over other sources of behavioral regulation such as contextual contingencies. Rigid forms of CF take a central role in the development and maintenance of psychopathology. The *Cognitive Fusion Questionnaire – 7 items* (CFQ-7; Gillanders et al., 2014) is the most widely used tool to assess CF. Several studies have attested its good psychometric properties in different cultures. The aim of this study was to test the psychometric properties of the Italian version of CFQ-7 by confirming its characteristics in terms of dimensionality, reliability, and invariance across general and clinical samples.

Method: The general sample was composed of 258 university students (70% females, mean age = 24.30, SD = 10.01), and the clinical sample consisted in 107 university students (61% females, mean age = 23.82, SD = 3.04) who were affected by clinical levels of psychological distress according to the *Hospital Anxiety and Depression Scale* (HADS). Both the samples attended the School of Psychology of the University of Pisa. *Results:* the unidimensional structure was confirmed ($CFI=.98$, $TLI=.97$, $RMSEA=.06$) in the general sample, and the internal consistency reliability estimate was .88 (95% CI [.85 - .90]). Invariance of the factor structure across the general and clinical group was obtained, by reaching the level of measurement residuals equivalence.

Conclusions: Findings showed that the CFQ-7 can be adequately used to measure CF in research and clinical settings in the Italian population.

THE INTERPERSONAL GUILT RATING SCALE-15 SELF-REPORT (IGRS-15S): AN OVERVIEW OF THE EMPIRICAL DATA

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Abstract

Our aim is to provide a complete review of the data collected so far with the Interpersonal Guilt Rating Scale-15 self-report (IGRS-15 s; Gazzillo et al., 2018), a 15-item clinician tool aimed at the assessment of interpersonal guilt according to Control-Mastery Theory (CMT; Gazzillo, 2016; Weiss, 1993).

A CFA conducted on a sample of 645 subject found a three-factor solution: Survivor guilt, Omnipotence guilt (comprising the items assessing Omnipotent responsibility guilt and Separation/disloyalty guilt) and Self-hate. The re-test reliability assessed on a random subsample of 54 subjects was good (r from .70 to .76).

To assess its concurrent and discriminant validity, we calculated the correlations between IGRS-15s and the Scale for the Measurement of the Impending Punishment (SMIP; Caprara et al., 1990) (r from .31 to .37), and the Interpersonal Guilt Questionnaire-67 (IGQ-67; O'Connor et al., 1997) (r from .34 to .88).

To test its construct validity, we assessed the relationships with the Affective Neuroscience Personality Scales (ANPS; Davis et al., 2003) (r from -.14 to .28, all consistent with our theoretical predictions), and the Psychological General Well-Being Index (PGWBI; Dupuy, 1984), (r from -.19 to -.29).

Finally, in a sample of 448 subjects, we found positive correlations between guilt and shame (r from .31 to .60) assessed with the Other As Shamer (OAS; Gross et al., 1994); no correlation between guilt and social desirability, assessed with the Marlow and Crow-Social Desirability Scale (MC-SDS; Italian brief form by Manganelli et al., 2000), negative correlations between guilt and self-esteem (r from -.29 to -.53), assessed with the Rosenberg Self-esteem Scale (RSE; Rosemberg, 1965); differences between people who report traumas in their early childhood and people who don't; and negative correlations between guilt and therapeutic alliance assessed with the Working Alliance Inventory (WAI; Horvath, 1991) (r from -.17 to -.30)

USE AND MISUSE OF EDINBURGH POSTNATAL DEPRESSION SCALE EPDS CUT-OFF IN ITALIAN PERINATAL STUDIES: A QUALITATIVE SYSTEMATIC REVIEW

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Abstract

The Edinburgh Postnatal Depression Scale EPDS is one of the major psychometric tools for the early detection of women suffering or at risk of postnatal depression. Initially built to be used in the weeks and months after delivery, the EPDS has been validated also for use in pregnancy. Currently, there are two Italian validations for the use of EPDS in postpartum period (Carpiniello et al., 1997; Benvenuti et al., 1999) that suggest the application of two different cut-offs. We conducted a systematic qualitative review to investigate the correct use

both of EPDS and cut-off in the most recent Italian perinatal studies. Published peer-reviewed articles of Italian researchers group were identified through searches of electronic databases PubMed, PsychoInfo, Cinahl, and Google Scholar from 1997 to April 2019 using keywords *EPDS, Edinburgh Postnatal Depression Scale, pregnancy, postpartum, postnatal, perinatal, depression, Italy*. A total of 46 publications were identified. Result indicated that Italian researchers use different EPDS cut-offs, mostly higher than those indicated in the instrument validations. In some studies, the EPDS is used simultaneously with other psychometric tools. Although an Italian validation for the compilation of EPDS during pregnancy is currently missing, some studies have used this tool in samples of Italian pregnant women. Currently, it is difficult to identify a reliable and generalizable profiles on the psychological aspects that characterize the postpartum depression symptomatology of Italian women due to the multiplicity of methodologies adopted by Italian researchers, but also for the use of different both cut-offs and times for the administration of the EPDS.

MINDFULNESS IN PREGNANCY. PSICOMETRIC PROPERTIES OF THE MINDFUL AWARENESS ATTENTION SCALE (MAAS)

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Abstract

Introduction: Pregnancy in women is characterized by several changes, physical and psychological, that increase the risk of experiencing anxiety and depression (Lagadec et al., 2018). Despite a relatively high number of studies investigating the efficacy of mindfulness-based intervention programs for pregnant women (Dhillon, Sparkes & Duarte, 2017), the research still lags behind in evaluating the psychometric properties of measures for assessing mindfulness in this specific population. The aim of the present study is to investigate, for the first time in an Italian sample of pregnant women, the psychometric properties of the *Mindful Awareness Attention Scale – MAAS* (Brown & Ryan, 2003), a widely used measure of mindfulness, and its association with trait anxiety and depression.

Methods: A sample of 343 Italian pregnant women (mean age = 32.62 years; SD = 5.15 years; range = 19-45 years), 66.4% primiparous, took part in the study. STAI-Y was used to assess

trait anxiety and EPDS for investigating depression. A Confirmatory Factor Analysis-CFA with robust ML estimator was performed to test the one-factor solution originally proposed in the literature (Brown & Ryan, 2003; Veneziani & Voci, 2015).

Results: The CFA showed that the Italian version of MAAS presents satisfying psychometric proprieties: CFI = .943; NNFI = .933; RMSEA = .045, [95% CI = .033 - .066]; SRMR = .042. Data supported the proposed single factor solution, with fit indices comparable with those reported in the original validation study. As expected, controlling for gestational age, a moderate and negative correlation was found between mindfulness and general anxiety ($r = -.38$, $p < .001$) and depression ($r = -.43$, $p < .001$).

Conclusion: MAAS is a reliable measure for the assessment of mindfulness also in pregnant women. Further longitudinal studies could use MASS to assess variability in dispositional mindfulness during pregnancy.

MEASURING ILLNESS AVOIDANCE IN PATIENTS AND CAREGIVERS: DEVELOPMENT OF A BRIEF TOOL THROUGH AN IRT METHODOLOGY

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Abstract

Background: Chronic health issues (e.g.: illness, disability) represent threatening conditions implying persisting distress both for patients and their carers. According to Freud, defence mechanisms protect the conscious mind by suppressing unbearable feelings and thoughts, such as anxiety and depression. The illness avoidance mechanism allows not to face an overwhelming reality, but it leads to maladaptive and unhealthy behaviors: low medical compliance, poor therapies adherence, and procrastinating or skipping medical checks. Illness avoidance is a severe issue and should be promptly recognized by clinicians. However, given the apparent absence of mental issues, may be complicated to evaluate avoidance and its severity. Starting from the Illness Denial Questionnaire (IDQ), the aim was to develop a specific assessment tool for avoidance.

Methods: 152 patients and carers were administered the IDQ avoidance dimension, and the Anxiety and Depression Questionnaire–Reduced Form (AD-R) to evaluate divergent validity. The item properties were studied by applying the 2 Parameter Logistic model of Item Response Theory. The items' fit indices, severity, and discrimination parameters were evaluated.

Results: Avoidance items showed a good fit to the 2PL model, the 5 items with the best psychometrical properties were selected for the brief tool. The new Illness Avoidance Questionnaire–Short Form (IAQ-SF) showed good reliability ($KR20 > .70$) and satisfying divergent validity. According to literature, avoidance showed a low correlation with anxiety and depression.

Conclusion: The IAQ-SF allows to easily evaluate illness avoidance in patients and carers. This brief tool is integrable in longer batteries and suitable for monitoring progresses over time. It will allow clinicians to identify illness avoidance and its severity. Thus, the illness elaboration process will be promoted to reach illness acceptance. Hence, psychological and physical health outcomes will be improved.

EXPLORING FOOD ADDICTION THROUGH THE VALIDATION OF THE ITALIAN VERSION OF THE YFAS2.0 IN INPATIENTS WITH SEVERE OBESITY

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Abstract

Background: Problems related to excessive food consumption, such as obesity, continue to be a major public health concern. Parallels in the biological, psychological, and behavioral factors implicated in addiction and problematic eating have led to the hypothesis that an addictive process may contribute to excessive food consumption. To date, the Yale Food Addiction Scale 2.0 (YFAS2.0) is currently the most important measure to operationalize addictive-like eating behavior according to the DSM-5. Thus, this work aimed to examine food addiction (FA) through the validation of the Italian version of the YFAS2.0 (I-YFAS2.0) in individuals with severe obesity (SO; BMI ≥ 35).

Methods: 345 inpatients with SO [150 males (43.5%) and 195 females (56.5%); aged from 18y.o. to 78y.o. ($mean = 58.01$, $SD = 12.404$; BMI from 35.06 to 80.11 ($mean = 41.27$, $SD = 5.94$)] were recruited at the Istituto Auxologico Italiano, Verbania (Italy), during a hospital-based program for weight reduction. A first confirmatory factor analyses (CFA) specified a hierarchical structure: items loaded onto one of twelve latent criteria which loaded onto a general dimension. The second CFA specified a first-order structure: symptoms of FA loaded onto a latent dimension. Reliability, convergent validity, and prevalence analyses were also performed.

Results: CFAs confirmed the structure for the I-YFAS2.0 for both the hierarchical structure [$\chi^2(548) = 660.225$; $p = 0.001$; RMSEA = 0.024; CFI = 0.995; WRMR = 1.024] and the first-order structure [$\chi^2(44) = 42.413$; $p = 0.540$; RMSEA = 0.000; CFI = 1.00; WRMR = 0.802]. Kuder-Richardson (KR20) coefficients showed good internal consistency across structures. Prevalence of FA was 22.89%.

Conclusions: The I-YFAS2.0 could be considered a valid and reliable tool for the assessment of FA in Italian adult inpatients with SO. Its use is suggested both for clinical and research aims.

THERAPISTS' CLINICAL WORK BETWEEN SESSIONS: THE POST SESSION THERAPIST QUESTIONNAIRE

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Abstract

In this research, we present the development of a new self-report questionnaire to assess a specific characteristic of clinical work: the mental (affective and rational) work that therapists do between clinical sessions. The resulting instrument is the Post Session Therapist Questionnaire. In the pre-research phase, we generated 40 items. We had 16 experts carefully examine the questionnaire's content validity at various stages and thus obtained 38 pertinent, clear, and unambiguous items. We then carried out a pilot study with 27 clinicians, who filled out the questionnaire twice, referring to 100 patients in each case. To assess the structural validity of the new instrument, we conducted an exploratory factor analysis using the session ($N= 200$) as the unit of analysis. Three factors supported the theoretical dimensions

conceptualized in the pre-research: we called the factors Positive Regard, Comprehension, and Diagnostic Effort. These dimensions have good internal consistency. The study's results suggest that these clinical dimensions are meaningful in the development of clinical processes, which encourages further study of the psychometric properties of the questionnaire, with larger samples, so as to consider these results in relationship to the outcomes of the following sessions.

THE REGULATION OF EMOTION SYSTEM SURVEY (RESS) TO ASSESS NURSES' EMOTIONAL REACTIONS TO SUFFERING PATIENTS

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Abstract

Most nurses have to interact with suffering patients and the distress elicited by these interactions may ultimately lead to burnout unless they efficiently regulate their emotional arousal.

The aim of this study was to assess how a group of 86 nurses deal with this emotional distress, using the Regulation of Emotion System Survey (RESS: De France & Hollenstein, 2017). The RESS is a 24-item, self-report questionnaire that aims to assess on a common scale the individual's propensity to use six emotion regulation strategies (Distraction, Rumination, Reappraisal, Suppression, Engagement, Arousal Control). In the Italian version it has been demonstrated to be a valid tool to measure multiple regulation strategies to down-regulate personal experiences of negative emotions. The Maslach Burnout Inventory (MBI) was used to assess participants' levels of burnout.

The results revealed that the most frequent strategies that the participants used during their job are Rumination, Reappraisal and Distraction. Rumination was significantly and positively correlated to Suppression and Engagement, whereas Reappraisal is associated with Distraction and Arousal Control. A SEM was run to test which strategies predict the three dimensions of the MBI: Rumination showed an effect on Emotional Exhaustion ($B = .27, p$

= .01), whereas Distraction ($B = -.30, p = .01$), Suppression ($B = .26, p = .02$) and Arousal Control ($B = .24, p = .04$) were related to Depersonalisation. Interestingly, the relationships between Depersonalisation and both Distraction and Suppression was moderated by participant's level of satisfaction with life.

The results suggest that the RESS is a useful tool to assess nurses' reactions to some aspects of their work experience because, in full, it is able to detect how some regulation strategies tend to be used together. Secondly, the data suggest that nurses' life satisfaction moderated the effect of their emotion regulation strategies on burnout.

PSYCHOLOGICAL ASSESSMENT OF A WOMAN SAMPLE WITH ADPKD: QUALITY OF LIFE, BODY IMAGE, ANXIETY AND DEPRESSION

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Abstract

The Autosomal Dominant Polycystic Kidney Disease (ADPKD) is chronic renal disease that has not yet been the subject of specific attention from the psychological research. The studies related to the consequences and complications that the pathology causes specifically in female patients are few, although it is possible to highlight various problems in women affected by this disease.

The purpose of this study is to perform a psychological assessment (Quality of Life, Anxiety, Depression, Body Image) of a sample of 37 women with ADPKD.

The assessment is composed by: *ad hoc* socio-anographic schedule, KDQOL-SF (to evaluate Health Related Quality of Life), HADS (for Anxiety and Depression), BUT (for perceived Body Image). This assessment is administrated in a specific outpatient clinic.

Results show that concerns about body image correlate to anxious and depressive symptomatology. Specifically, statistically significant and positive correlations are observed between the GSI indices ($r=.519; p<.01$), WP ($r=.458; p<.01$), BIC ($r=.538; p<.01$), A ($r=.474; p<.01$), D ($r=.498; p<.01$) of the BUT-A questionnaire and the Anxiety subscale

(HADS) and between the GSI indices ($r=,501$; $p<,01$), BIC ($r=,529$; $p<,01$), A ($r=,440$; $p<,01$), D ($r=,577$; $p<,01$) and the Depression subscale (HADS). The t-test analyses show that patients who report not to perceive social support (S2) have higher levels of anxious symptomatology (HADS-Anxiety) ($M=7,73$; $DS=3,56$) compared to patients who report to perceive social support (S1) ($M=4,81$; $DS=3,47$), T ($35)=2,48$; $p<,05$) and higher levels of depressive symptomatology (HADS-Depression) ($M=6,00$; $DS=4,05$) compared to S1 ($M=2,41$; $DS=2,13$), $t (19.3)=3.15$; $p<,05$).

Psychological evaluation of ADPKD patients can be used in clinical practice as a supplement model in multidisciplinary Nephrology team.

DO MOTHERS KNOW BEST? A COMPARISON BETWEEN MOTHERS AND FATHERS PERCEPTION OF THEIR CHILD'S PERSONALITY

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Abstract

Current literature highlights that fathers and mothers may have different perceptions about their child's personality traits. However, discrepancies between parental and child reports may affect their present and future relationships and have implications for both emotional closeness and mutual influence. This study investigates maternal and paternal knowledge of child personality and whether it corresponds to the child's perception. Eighty-two Italian children (42 female, aged between 7 and 9, $M = 8.11$, $SD = .35$) and their parents were recruited in a primary school. Both mothers and fathers were asked to assess their child's personality through the Big Five Questionnaire for Children (BFQ-C) which measures the basic personality dimensions of energy/extraversion, agreeableness, conscientiousness, emotional instability, and intellect/openness. Each child completed the same questionnaire as well. Additionally, children completed the Trait Emotional Intelligence Questionnaire (TEIQue-CF) as a measure of emotional self-efficacy. Results from Regression analyses show that mother's perception of the child emotional instability ($F = 5.4$, $p < .01$; $B = .37$, $p < .01$) and intellect/openness ($F = 7.3$, $p < .001$; $B = .31$, $p < .05$), and father's perception of the child conscientiousness ($F = 7.3$, $p < .001$; $B = .43$, $p < .01$) significantly predict the child's

self-reported assessment of the same personality traits. Results pertaining the dimensions of energy/extraversion and agreeableness did not reach significance ($p > .05$). Additional results will be presented at the conference. Mothers seem to have a better knowledge of some personality dimensions of their child compared to fathers. This evidence suggests the possibility of a lack of agreement on the child's view, and supports the hypothesis that parents may have access to different knowledge domains, with mothers being particularly attuned with the emotional and communicative areas of their child.

I modelli evolutivi e psicopatologici

Discussant:

Chiara Pazzaglì¹, Cecilia Serena Pace²

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ATTACHMENT BEHAVIOURS AT 18 MONTHS IN A SAMPLE OF PREMATURE BABIES: A PILOT STUDY

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Abstract

Prematurity represents a recognised risk factor for the development of insecure infant attachment (Wolke et al., 2013). Anyway, literature tends to categorize the attachment pattern, neglecting single attachment behaviours (Simonelli, 2014) and the studies of prematurity and attachment usually make no distinction between Extremely Low Birth Weight (ELBW) and Very Low Birth Weight (VLBW) (Udry-Jorgensen et al., 2011; Korja et al., 2012), and gender. Indeed, premature children have always been studied as a homogeneous sample without considering differences in developmental trajectories; it may be more reliable to evaluate single attachment behaviours rather than pattern categorization. The aims of the study were: 1) to investigate the characteristics of attachment behaviours in ELBW and VLBW premature

babies, considering the possible influence of gender; 2) to evaluate how early interactive behaviours contribute to attachment behaviours. Thirty-eight premature infants (19 females, 19 males; 13 ELBW, 25 VLBW) and their mothers were assessed at 3 months (corrected age) through the CARE- Index (Crittenden, 1979) and at 18 months (corrected age) through the Strange Situation Procedure (Ainsworth et al., 1978), evaluating the single attachment behaviours. Correlations and MANOVA analyses were conducted. Working in progress analyses have shown that (aim 1) VLBW show a greater number of resistant behaviours towards the mother compared to ELBW ($p= 0.006$). Considering the gender, females tend to be less resistant ($p= 0.004$) and more prone to positive interactions with the mother ($p=0.008$). Regarding aim 2, a difficult interactive pattern at 3 months is related to: poor seeking proximity with the mother in ELBW children ($p=0.042$); more resistant behaviours in VLBW children, both towards the mother ($p=0.01$) and the stranger ($p=0.001$). The attachment development is influenced by the degree of prematurity and gender and this have relevant implications for early interventions.

GENE-ENVIRONMENT INTERPLAY ON CHILD'S EMOTIONAL-BEHAVIORAL FUNCTIONING. THE ROLE OF DAT GENE AND PARENTS' PSYCHOPATOLOGICAL RISK

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Abstract

International research has underlined interactive relationships between genetic factors, epigenetic pattern and environment provided by parents (i.e., parental psychological profiles and the quality of marital adjustment) in shaping children's emotional-behavioral functioning. Only few studies have focused on the general population of school-age children, examining the role played by child's dopamine transporter (DAT) gene, that is suggested to play a significant role in affective and behavioral regulation. In a community sample of 70 families with children aged 6-11 years, this study evaluated parental psychological profiles, couple dyadic adjustment, children's emotional behavioral-functioning, children's DAT1 genotype and their own DAT1 methylation status. Hierarchical regression analyses were conducted to verify the influence of parents' psychological profiles and their marital adjustment on children's adaptive functioning and DAT1 methylation, considering possible moderation role

of children's DAT1 genotype. Results showed significant moderator effects of child's DAT1 genotype on the relationship between parental emotional-behavioral functioning, couple adjustment and children's DAT methylation. DAT1 genotype also moderated the link between children's emotional-behavioral problems and their methylation status. Finally, children's DAT1 genotype significantly interacted with parents' emotional-behavioral functioning in predicting children's internalizing and externalizing problems. This study supports the importance of increasing focus on DAT1 genotype and methylation status and their interplay with family-related environment, with important implication for children's prevention and intervention programs.

NEURAL PATHWAYS OF VISUAL FACE RECOGNITION IMMEDIATELY AFTER BIRTH

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Abstract

Individual's face recognition ability is particularly important as social cue in human beings, that are designate to live in ample and complex relational networks. Considering the importance of face perception and recognition for surviving in large and multiple group members, several aspects of face processing are in common between humans and nonhuman primates throughout ontogeny and phylogeny. As suggested from behavioural and neuroimaging studies, the humans have specific structural and functional brain areas involved in face processing and recognition.

Aim of the present study was to investigate the electrophysiological correlates of face-identity recognition in newborn infants, immediately after the birth.

Electroencephalographic acquisition was continuously recorded in 23 newborn infants (age 5h 16' \pm 3h 51') during the following visual task: presentation of a women face for 60s ("known face"); random presentation of 50 known face, 50 novel women face and 50 chessboard (for 2s each).

A lower amplitude of the N290, P400 and LC2 was found in response to the known face compared to the novel one in left hemisphere. Known face presented a shorter N290 latency compared to the novel one, and the novel face showed a longer latency of the same

component compared to the chessboard. A lower Beta1 frequency band intensity at 500-600ms was found in response to the known face and chessboard compared to the novel face. Moreover, a greater connectivity intensity in response to the known face compared to the novel face and chessboard was found between temporal areas and fronto-parietal areas. Findings support the ability to discriminate a known face, previously viewed for one minute, highlighting the main role of the perirhinal cortices and the fusiform gyrus since the birth.

IMPACT OF PREMORBID IQ AND COGNITIVE RESERVE ON CLINICAL AND FUNCTIONAL OUTCOMES IN ELDERLY OUTPATIENTS

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Abstract

Background: Aging is the product of interaction between multiple bio-psycho-social factors. The progressive decline of cognitive functions and the reduction of motor and functional performance represent outcomes commonly associated with aging.

The aim of this cross-sectional study is to investigate the association of cognitive reserve with cognitive, functional and motoric outcomes in a sample of elderly outpatients.

Methods: Currently, eighty outpatients aged ≥ 65 were consecutively evaluated.

Patients unable to undergo the execution of required tasks due to severe cognitive-functional impairment or severe sensory deficits were excluded.

MMSE, Brief Intelligence Test and Cognitive Reserve Index Questionnaire were administered. Handgrip and gait speed were measured; a Frailty Index was also calculated for each patient.

Results: Cognitive reserve was significantly correlated with MMSE ($r = 0.529$, $p < 0.05$), handgrip ($r = 0.471$, $p < 0.05$) and gait speed ($r = 0.278$, $p < 0.05$). Furthermore, cognitive reserve was inversely correlated with the FI ($r = -0.554$, $p < 0.05$). Significant correlations were found between TIB and MMSE ($r = 0.310$, $p < 0.05$) and between TIB and CRIq ($r = 0.531$, $p < 0.05$). The TIB was inversely correlated with the FI ($r = -0.269$, $p < 0.05$).

Conclusions: The study is currently ongoing. Assessed patients ($n=80$) with higher pre-morbid IQ and higher cognitive reserve presented better overall cognitive functioning, better

functional performances and lower degree of frailty. The evaluation of pre-morbid IQ and cognitive reserve in the elderly could offer the opportunity to describe possible aging trajectories, intercepting not only cognitive status but also functional performances and frailty status.

NEUROPSYCHOLOGICAL FUNCTIONING AND QUALITY OF PARENT-CHILD INTERACTIONS IN MOTHERS WITH SUBSTANCE USE DISORDER: PRELIMINARY RESULTS OF A LONGITUDINAL STUDY

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Abstract

Introduction: Parental Substance Use Disorder (SUD) represents a risk factor for child development, parenting behaviors and quality of adult-child relationships. Several studies report high rates of neuropsychological impairments, specifically concerning Executive Functioning, in individuals with SUD, which could affect parenting behaviors and quality of mother-child interactions. This research aimed to investigate longitudinally the association between maternal neuropsychological functioning and quality of mother-child interactions in mothers with SUD.

Methods: The study involved 45 mothers with SUD aged between 19 to 48 years old ($M = 29.78$, $SD = 7.53$) and their children, aged between 1 and 87 months ($M = 18.42$, $SD = 24.66$). The assessment took place at three stages: at the admission of the dyads into a residential Therapeutic Community (T1), and after 3 (T2) and 6 months (T3) of treatment. Maternal neuropsychological functioning was investigated at (T1) administering a neuropsychological battery to the mothers, the Brief Neuropsychological Examination (ENB-2); mother-child interactions were observed and rated with the Emotional Availability Scales (EAS) at each stage of data collection.

Results: The results showed high rates of maternal neuropsychological impairments and generally low levels of EA, with the mothers presenting low sensitivity, structuring and high intrusiveness. Correlational analysis showed that the level of maternal neuropsychological

functioning was significantly associated with the quality of mother–child interactions at each stage of the assessment.

Conclusions: These preliminary results highlight the role of neuropsychological functioning in determining the quality of parenting behavior. Clinical implications of the findings in terms of assessment and treatment will be discussed.

PARENTING STRESS AND PERCEIVED INFANT'S CHARACTERISTICS: THE ROLE OF MOTHER'S ATTACHMENT STYLE

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Abstract

Introduction: The literature on parenting stress has shown that it is associated with negative parenting practices and children's behavioral problems. Furthermore, some studies found that less positive parenting practices are associated with greater concerns with respect to child development. Starting from the assumption that a secure attachment parent's style is more frequently associated with a more functional caregiving and a lower risk in the child's development, the present study aims to verify if mother's attachment style can change the way in which the parenting stress affects her perception of her child's abilities.

Method: For this purpose, 357 mothers of as many 12-month-old infants were recruited in several pediatrician's offices in Rome. We used three questionnaires: Parenting Stress Index – Short Form, Attachment Style Questionnaire and First Year Inventory.

Results: Through a hierarchical regression, we observed that parenting stress is the most important predictor of the mother's perception of the child's social communication and sensory regulatory function, followed by anxious and avoidant mother's attachment styles. Nevertheless, through moderation analyses, we observed that mothers with high levels of avoidance and mothers with high levels of anxiety, when particularly stressed in their parental role, tend to see their children as less able in the social communication area. Moreover, when anxiety levels decrease, the mother's perception of her child's social communication skills is more positive, despite high levels of stress.

Conclusions: The results of this study show us that attachment style can not only be an important protective factor in cases of high parental stress, but can also increase a stressed

parent's perception of the child as less competent when characterized by anxiety and avoidance.

ATTACHMENT, EMOTION REGULATION AND SUICIDE: HOW EARLY ADVERSE EXPERIENCES AFFECT WILLINGNESS TO DIE

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Abstract

Attachment theory holds that internal representations of relationships that influence most areas of an individual's life stem from early experiences with caregivers (Bowlby 1969, 1980). According to some authors (Adam, 1994), suicide can be read as an extreme attachment behavior in response to a situation of danger in which the attachment figure is not responsive or is not (or is not considered) available. In this perspective, the first attachment experiences, structured in internal operating models, are the basis of the propensity to develop suicidal ideation and to implement self-injurious and suicidal behaviors.

However, the connection between suicide and attachment experience still remains unclear. For this reason, it is important to take into consideration some skills that develop within the same attachment relationship, such as emotional regulation.

The purpose of our study is to examine the connection between suicide ideation, attachment and difficulties in emotion regulation. We hypothesized that individuals that report higher scores on the attachment dimensions of avoidance and anxiety would be more likely to present suicidal ideation and that the relationship between the two constructs may be mediated by emotion dysregulation.

Participants included a clinical sample of 52 individuals that came to the clinical attention for suicide attempt or for serious suicidal ideation. Participants completed a questionnaire that included demographic information, including clinical history, and measures of suicidal ideation, attachment and emotion dysregulation.

Our results show a correlation between suicide ideation severity and attachment dimensions of anxiety and avoidance. Moreover, results showed that emotion dysregulation partially moderated the relationship between suicide ideation and attachment dimensions.

EXPLORING THE INNER WORLD OF CHILDREN WITH AUTISM SPECTRUM DISORDER: AN INVESTIGATION OF ATTACHMENT ORGANIZATION AND MENTAL REPRESENTATIONS DURING SCHOOL-AGE

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Abstract

Studies focused on attachment security in school-age showed no significant differences between children with High Functioning Autism Spectrum Disorder (HFASD) and their neurotypical counterpart. However, these studies only used self-reported questionnaires, overlooking child attachment mental representations. The aim of this study are: a) to examine individual differences in security of attachment between HFASD children and controls assessing attachment mental representations; b) to determine whether the presence of unresolved trauma is higher in HFASD compared to control group. Twenty children with HFASD and 24 matched typically developing children (TD) (7-12 years-old) were assessed using the School-age Assessment of Attachment, a semi-structured interview, and a self-report questionnaire. Measures of family socioeconomic status, child intelligence and socio-communicational difficulties were collected.

Higher rates of insecure attachment pattern were found in ASD children compared to TD, despite no differences emerged from the questionnaire. Only three of 20 children with HFASD were classified as securely attached. Within the ASD group, 50% of children showed unresolved trauma, often related to parental issues, hospitalization or illness and bullying. Attachment security of ASD children were not associated with child measures of intelligence and socio-communicational symptoms.

To our knowledge, this is the first study to assess attachment mental representations in school-age children with ASD. Our findings highlight that ASD children are more likely to develop an insecure attachment status at representational level. Unresolved trauma is more common in ASD group representing a potential additional risk for this clinical population. These data suggest that attachment mental representations may constitute a valuable source of information for clinicians to understand self-protective strategies and child's state of mind regarding close relationship in ASD.

BIOPSYCHOSOCIAL PREDICTORS OF PAIN TRAJECTORIES AFTER KNEE ARTHROPLASTY: A LONGITUDINAL STUDY

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Abstract

Introduction: Post-surgical pain, rather than a static phenomenon, is a process developing over time, and pre-surgical and post-surgical biopsychosocial factors are intertwined with its course. The objective of this study was to identify the significant predictors of pain trajectories in the early post-surgical period.

Methods: A longitudinal study was conducted on patients listed for total or partial knee arthroplasty at the Hospital Humanitas San Pio X. One week before surgery, participants were asked to complete a pre-surgical evaluation assessing emotional distress, catastrophizing, central sensitization, state anxiety and depression, self-efficacy and executive functions. Subsequently, during the first seven days after surgery, patients filled a daily diary including measures of pain intensity and daily catastrophizing. Missing data was handled with multiple imputation. Multilevel growth curve modeling was used to identify the significant pre-surgical and post-surgical predictors of the intercepts (i.e. the mean level) and of the slopes (i.e. the steepness) of individual pain intensity trajectories. Estimates were controlled for sex and pre-surgical pain intensity.

Results: 113 patients were enrolled. Central sensitization was a strong predictor of the intercepts of pain trajectories ($\beta = .616$, $p < .001$), emotional distress predicted their slopes ($\beta = .149$, $p < .05$), and the course of post-surgical daily catastrophizing was associated with pain intensity trajectories ($\beta = .872$, $p < .001$). Collectively, these predictors explained 31% of the variation of pain intensity trajectories.

Conclusions: This study showed that central sensitization, emotional distress and post-surgical catastrophizing explained a significant portion of the individual variability in pain trajectories after knee arthroplasty. Assessment of these factors can be useful for an early identification of patients at risk for unfavorable pain courses and to suggest potential treatment aims.

ADOLESCENTS AT HIGH-RISK FOR PSYCHOSIS: EXPLORING THE ROLE OF ATTACHMENT PATTERNS, MENTALIZATION AND CHILDHOOD TRAUMATIC EXPERIENCES

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Abstract

Introduction: Identifying young people at clinical high-risk (CHR) for psychosis provides an important contribution to clinical practice, facilitating the development of intervention strategies aimed to prevent the onset of a full-blown psychotic disorder. Therefore, it is essential to investigate which variables are involved in the development and maintenance of CHR conditions in order to improve the diagnostic understanding and the effectiveness of treatments. Several studies showed high rates of childhood traumatic experiences in CHR individuals. Furthermore, there are pieces of evidence linking attachment adversity to the risk for developing psychosis – involving enduring alterations of specific neurobiological pathways. Previous researches also highlighted the role of mentalization in moderating the risk of transition to psychotic disorders. To date, attachment and mentalization have not been evaluated in CHR patients using interview-based measures. The aim of this study was to explore attachment patterns, mentalization and childhood traumatic experiences among CHR adolescences.

Methods: 51 CHR outpatients were compared with 54 other outpatients who did not meet the high-risk criteria. A multi-method diagnostic assessment was implemented, including the Structured Interview for Prodromal Syndromes (SIPS). Adult Attachment Interview was also administered, and the transcripts were further assessed using both the Reflective Functioning (RF) Scale and the Complex Trauma Questionnaire.

Results: Although no differences between groups with respect to childhood traumatic experiences have been found, CHR patients showed a higher degree of insecure and disorganized attachment patterns. Moreover, the RF scores were significantly lower in the HR sample and significant correlations between RF and SIPS subscales were found.

Conclusions: Our results suggest that attachment-informed and mentalization-based psychotherapies may be effective preventive treatments for CHR patients.

EXAMINING THE IMPACT OF PARENTAL CANCER ON CHILDREN'S AND ADOLESCENTS' ADJUSTMENT: RISK AND PROTECTIVE FACTORS

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Abstract

Aims: A diagnosis of cancer carries out emotional repercussions not only in the parent who receives it, but also in the offspring (Walczak et al., 2017). This study investigated the psychosocial adjustment of children and adolescents who had a parent with cancer ($n = 61$, aged 11-23 years) compared to children and adolescents with healthy parents ($n = 61$, aged 11-23 years) and examined the unmet needs of the offspring relating to parental cancer.

Method: All participants filled out a series of self-report questionnaires regarding socio-demographic information, emotional and behavioral problems (Youth Self-Report; Achenbach, 2001), chronic stress (Chronic Stress Questionnaire for Children and Adolescents; de Bruin et. al, 2017), health-related quality of life (Kidscreen-27; Ravens-Sieberer et al., 2007) and parental illness variables – including offspring perception of severity of parental cancer, communication about parental cancer in the family and unmet needs of offspring related to parental cancer (Offspring Cancer Needs Instrument; Patterson et al., 2013).

Results: Compared to children and adolescents of healthy parents, offspring who had a parent with cancer had significantly higher levels of internalizing problems ($F = 8.40$; $p < .01$) and chronic stress ($F = 4.82$; $p < .05$) and significantly lower levels of health-related quality of life ($F = 4.60$; $p < .05$). Psychosocial unmet needs of offspring who had a parent with cancer increased if the ill parent was the father ($\beta = .28$; $p < .05$), at the decreasing of the communication about parental cancer in the family ($\beta = -.43$; $p < .01$) and at the increasing of offspring perception of severity of parental cancer ($\beta = .28$; $p < .05$).

Conclusion: This study originally increased knowledge about risk and protective factors in offspring who had a parent with cancer in order to develop specific screening tools for this at-risk population and ultimately improve the care of families experiencing parental cancer.

MENTALIZING FAILURES, COGNITIVE DISTORTIONS, AND EMOTIONAL DYSREGULATION IN ADOLESCENT PROBLEM GAMBLING

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Abstract

Over the last decade, several studies have investigated the relationship between cognitive distortions and emotion regulation in adolescent gambling, demonstrating the aggravating role of alcohol consumption when co-occurring with gambling problems. An important construct, that so far has been largely neglected, is mentalizing, i.e. the ability to reflect on one's and others' mental states. The aim of the current study is to investigate, for the first time, the relative contribution of cognitive distortions, mentalization, emotional dysregulation, and alcohol consumption in adolescent gambling. A total of 396 students (69,2% females) aged 14-19 years (Mean age = 17.22; SD = 1.03) were recruited from secondary schools in the Southern Italy. Assessment measures included the South Oaks Gambling Screen Revised for Adolescents (SOGS-RA), the Gambling Related Cognitions Scale (GRCS), the Reflective Functioning Questionnaire (RFQ-8), the Alcohol Use Disorders Identification Test (AUDIT), and the Difficulties in Emotion Regulation Scale (DERS). Regression analysis showed that, along with male gender and age, the best predictors of adolescent gambling were scores on the GRCS subscales Inability to Stop gambling and Interpretative Bias, the RFQ-8 Uncertainty about mental states dimension, and the DERS Impulse control difficulties factor, with the overall model explaining more than one-third of the total variance ($R^2_{adj} = 0.34$; $F_{6,389} = 35.12$; $p < .001$). These results clearly indicated that, along with gambling-related cognitive distortions, uncertainty about mental states and difficulties remaining in control of one's behavior when experiencing negative emotions contribute significantly to problematic gambling among adolescents. Although the present study is correlational in nature, it shed new light not only on the interrelationships among cognitive distortions, poor mentalization, and emotion regulation, but also on the key role that both deficit in mentalization and impulse control difficulties play in adolescent gambling behavior.

INTERNALIZING AND EXTERNALIZING PROBLEMS AMONG ADOLESCENT PROBLEMATIC GAMBLERS

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Abstract

During adolescence, gambling problems have resulted to be associated with many psychological diseases (Lorains et al., 2011). However, few studies have explored the specific aspects of internalizing and externalizing problems linked to problematic gambling behaviors during adolescence. The main focus of this study was therefore to fill this gap.

A total of 393 adolescents (361 males and 32 females; $M_{age} = 16.34$; $SD = 1.39$) were recruited for the present study. All participants filled out the *South Oaks Gambling Screen – Revised for Adolescents* (SOGS-RA; Winters et al., 1993; Chiesi et al., 2012) and the two scales of internalizing and externalizing problems of the *Youth Self Report Questionnaire* (YSR; Achenbach 1991), which assess two main syndrome subscales of externalizing problems (Delinquent behavior and Aggressive behavior) and three syndrome subscales of internalizing problems (Withdrawn, Somatic complaints, and Anxious/Depressed). Based on their SOGS-RA scores, participants were divided in three groups: 1) non-problem gamblers ($n = 321$), SOGS-Ra scores < 1 ; 2) at-risk gamblers ($n = 44$), SOGS-RA scores between 2 and 3; and 3) problematic gamblers ($n = 28$), SOGS-RA scores > 4 .

In order to explore whether the three groups differ on the five syndrome subscales of the YRS, a multivariate analysis of variance (MANOVA) was carried out.

Results showed significant differences among the three groups both for externalizing and internalizing problems. In particular, problem gamblers reported higher levels of delinquent and aggressive behaviors, somatic complaints, and anxious and depressed feelings than other participants. No significant differences emerged in reference to social withdrawal.

Overall, these results confirm the existence of both externalizing and internalizing problems among adolescent problematic gamblers.

VIDEOGAME ADDICTION, EMOTIONAL INTELLIGENCE AND EMPATHY IN ITALIAN ADOLESCENCES

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Abstract

Literature about the use of videogames in adolescence is controversial. Recent studies show that playing videogames is connected to a better emotional regulation and higher levels of empathy (Greitemeyer, 2013; Villani et al, 2018), others didn't find any differences between players and non-players (Collins e Freeman, 2013), while a large part of the literature have found a negative relationship between these variables (Seo et al., 2013; Bastian et al. 2012; Shin et al., 2013). The present study aims to analyze the relationship between the abuse of videogame, emotional intelligence and empathy in Italian adolescents. The Trait emotional Intelligence Questionnaire (Teique) composed by 4 subscales and a total score, the Game Addiction Scale for Adolescence (GASA), l'Interpersonal Reactivity Index (IRI) assessing empathy on 4 subscales, and the prosocial behavior subscale of the Strength and Difficults Questionnaire (PRO) were administered to a sample of 1721 students in Italian high-schools (33% female; aged 12-21, M=15.95). Results show that videogame players score lower in the Teique subscales and in the total score ($F=14.03 p<.001$), in the IRI empathy concern scale ($F=15.19 p<.001$), and in the PRO scale ($F=21.54 p<.001$), and also score higher in the social distress scale ($F=19.95 p<.001$) than peers who do not play videogame. These differences persist in the comparison between players at high risk of videogame addiction ($N=196$) and players at low risk of developing the addiction, according to GASA scores. Our data suggest that playing videogame is connected to lower levels of emotional intelligence and empathy and highlight the problem of videogame addiction in adolescence.

VIOLENCE IN ADOLESCENCE: ROLE OF FATHERS AND FAMILY CONFIGURATIONS

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Abstract

The research has the goal to provide a comprehensive understanding of the theme of intergenerational violence in families. In particular, the study examines two different forms of violence: parent abuse (PA) that is violence against parents (Cottrell, 2001) and bullying that is violence against peers (Olweus, 1994; Merrel et al., 2008). Both forms of violence display in different ways such as physical or verbal violence. Violence in adolescence represents a risk behavior that is dysfunctional to identity development. The aim of this study was to identify the violent behaviors mainly used by adolescents that adopted this pattern and the target of their assaults. The study involved 100 family in which there was an adolescent aged between 12 and 17 years old. Parents and adolescents have completed Child to Parent Aggressive Questionnaire (CPAQ) (Calvete, 2013) to measure the frequency of PA in the family and Family Adaptability and Cohesion Evaluation Scale (FACES IV) (Olson, 2011 adapted by Baiocco et al., 2010) to assess the degree of cohesion and flexibility. In addition, adolescents have completed Forms of Bullying Scale (FBS) (Shaw et al, 2013) in two forms: FBS-P for bullies and FBS-V for victims. The first step has been to run a factorial analysis on CPAQ to identify significant factors in the Italian population. The two factors have named ‘rebellion’ – natural in adolescence development ($\alpha = .919$) and ‘deviance’ – dysfunctional ($\alpha = .662$). Four dimensions above five of FBS-P correlate with deviance toward fathers (r between .21 and .41). Finally, we run a regression analysis and it has shown that family dimensions are predictors of the violent behaviors by adolescence. Family communication, the level of cohesion and satisfaction influence violent behaviors. For scholars and clinicians, it could be useful to understand the role of family dimensions for adolescents behaviors characterized by deviant forms of PA to prevent risk conducts and improve family dynamics.

ATTACHMENT, EMOTIONAL PROCESSING AND LIFE EVENTS APPRAISAL OF ADOLESCENTS

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Abstract

Introduction: In the Emotional Processing Model, not only the appraisal of meaningful events is upstream of emotional experience and expression, but also emotion schemas, especially

internal-working-models of attachment, influence the way in which events are appraised. We aim to explore how internal-working-models and emotional processing are related, and how both influence the appraisal of life events.

Method: Two-hundred-seventy-seven teenagers (74% females, age range 16-19) completed the Emotional Processing Scale (Suppression of emotions, Signs of Unprocessed emotions, Unregulated emotions, Avoidance of emotional triggers, and Impoverished Emotional Experience) and the State-Adult Attachment measure (Secure, Anxious and Avoidant attachment), reporting also positive and negative life events occurred during the past three months. Correlations analyses assessed the bivariate associations between study's variables. Hierarchical regression analyses of attachment and emotional processing scores (entered at step 1 and 2, respectively) on the number of positive and negative life events assessed the unique contribution each class of variables.

Results: All emotional processing and attachment scales were associated with negative events. Unprocessed and unregulated emotions were the largest correlations ($r=.39$ and $r=.35$, respectively). Secure attachment was inversely related to the number of negative events ($r=-.25$); avoidant attachment was related to them, positively ($r=-.25$). No meaningful relationships were found with positive events. The regression model accounted for 11% and 19% of the variance in negative events after step 1 and 2, respectively. Secure, anxious, and avoidant attachment scores were associated with the dependent variable.

Conclusions: If confirmed with clinical samples, our findings suggest that emotional processing therapy might be useful to promote mental health in adulthood addressing the appraisal of negative events occurred during adolescence.

SEVERE PSYCHOLOGICAL CONSEQUENCES IN WOMEN WITH MEDICALLY HIGH-RISK PREGNANCIES: A SYSTEMATIC QUALITATIVE REVIEW

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Abstract

Medically high-risk pregnancies are associated with hospitalization and negative physical, psychological and social consequences for mother, fetus, child and family. We conducted a systematic qualitative review to summarize the evidence concerning the perinatal health psychology in women with medically high-risk pregnancies. Published peer-reviewed articles were identified through searches of electronic databases Ebscohot and Google Scholar from 2000 to April 2019 using keywords *high risk, pregnancy, hospitalization, stress, depression, and anxiety*. A total of 42 publications were identified. Result indicated that medically high-risk pregnancies can be significantly associated to dysphoric symptoms, thoughts of self-harm, anxiety, depressive symptomatology or severe depression, comorbidities between anxiety and depression, and post-traumatic stress disorder. In addition, women who have experienced more than two perinatal medical complications are a high-risk of developing postpartum depression. Only 5% medically high-risk pregnancies women with psychiatric disorders receive a diagnosis and/or treatment. Globally, the women with a medically high-risk pregnancies – such us hyperemesis gravidarum, epilepsy, diabetes and preeclampsia - and their partners present a greater need for care, especially psychological support. In literature, researchers and health professionals recommend to implement procedures for early detection of this vulnerable women to safeguard their emotional status, but also to prevent the transition from psychological suffering to psychopathology.

CHARACTERISTICS OF PERSONALITY WHICH FAVOR THE DEPENDENCE RISK ON SMARTPHONES IN CHILDREN?

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Abstract

In recent years an increase in the use of the Smartphone in school-age children has been observed. His interference in the management of emotions and relationships is causing a distortion of social and psychological functions (Sapacz, M., 2016; Scott, D., 2016). The aim of the research was to verify the relationship between smartphone dependency risk and personality aspects in primary school children. A self-assessment questionnaire (16 item) SARCQ (Conte, Ghiani 2018) was administered for measuring the Smartphone Dependence

risk of a sample ($N = 257$) of children (age: Mean = 108 months, StDev = ± 9 months). The test measures smartphone dependence risk in two aspects: smartphone as emotion handle (“I’m Not Afraid With You”: INAWY) and the smartphone as a transactional object (“Linus Blanket”: LB).

These dependence risk factors have been related to aspects of personality. For the measurement of personality aspects in children Big Five Children Test (BFC) (Barbaranelli, et al., 2003) was administered. Results showed that the percentage of the sample of defined children emotional dependent from Smartphone is 16% and that of children using the Smartphone as a transitional object is 15%. The correlations between the factors of SDRCQ and the BFC showed: a significant negative correlation ($r = -0.41$) between INAWY and the Friendliness, with the Conscientiousness ($r = -0.35$) and with Openness ($r = -0.41$) have been observed. In contrast, a positive correlation ($r = 0.31$) with the Emotional Instability factor have been observed. For the LB a significant negative correlation with the Friendliness ($r = -0.31$) and with the Conscientiousness factor ($r = -0.29$) was observed.

In the light of these results, the use of the Smartphone as “mean to handle emotions” or as a “transitional object” concerns children with low Friendliness, low Conscientiousness and with socialization problems. They may prefer a relationship mediated through the smartphone to the “face-to-face relationship”.

THE RELATIONSHIP BETWEEN PRENATAL AND POSTNATAL ATTACHMENT: WHAT ROLE IS PLAYED BY A TRAUMATIC CHILDBIRTH EXPERIENCE?

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Abstract

The quality of prenatal attachment favors the transition to motherhood and is linked to the quality of postnatal attachment (Maas et al., 2016; Tani et al., 2018). However, literature has shown heterogeneous results, sometimes highlighting only a modest correlation between prenatal and postnatal attachment (Müller, 1996). Therefore, it is possible that other variables can affect this relationship, such as the way in which women experience childbirth. The aim

of the present study was to explore the mediating role of a traumatic childbirth experience on the relationship between prenatal and postnatal attachment.

105 pregnant women aged 26 to 44 years ($M = 34.97$; $SD = 4.43$) were recruited for the present study. Data were collected at two different points: at week 31-32 of gestation (T1) women filled out the *Prenatal Attachment Inventory*. At three months after childbirth (T2) mothers completed the *Perinatal PTSD Questionnaire* to assess whether the childbirth experience was traumatic, and the *Maternal Postnatal Attachment Scale*. A mediational analysis was performed to verify the hypothesized model.

Results showed that the quality of prenatal attachment is significantly and positively linked to the quality of postnatal attachment, both directly and indirectly. In fact, higher levels of prenatal attachment foster higher levels of postnatal attachment and represent a protective factor for traumatic childbirth experiences. In addition, lower levels of postpartum distress symptoms favor a better mother-child attachment bond after birth.

These results provide evidence for the need to support women throughout the perinatal period, from pregnancy to after childbirth.

MOTHERS WHO LOST A CHILD DURING PREGNANCY AND THEIR ADULT SUBSEQUENT CHILDREN: AN ANALYSIS OF THEIR REFERENTIAL ACTIVITY

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Abstract

The loss of a child during pregnancy (i.e., perinatal loss) is a traumatic event that may have serious psychological consequences on both mothers and their subsequent live-born children. Such next-born children may be involved in the “replacement child syndrome/ vulnerable child-syndrome” (Lamb, 2002) with their mothers, but it is unclear whether they may be considered clinically at risk (Turton et al., 2009) and little is known about their psychological characteristics in adulthood.

The aim of this pilot study was therefore to analyze the referential activity features (Bucci, 1997) of the linguistic production of mothers with a history of perinatal loss and their adult

subsequent children. We expected to find differences in their ability to link emotion and affects with words, as measured by referential activity values.

Fifteen mothers, who experienced a child-loss during pregnancy, and their 17 adult subsequent children had a structured interview on (A) the experience of loss and (B) the influence of the loss on their relationship and personality. Interviews were audio-recorded, transcribed, and analyzed with IDAAP software (Mariani et al., 2013) to obtain the referential activity measures. Data were analyzed with t-test comparisons and repeated measure analyses. Results showed several meaningful differences in referential activity values between mothers and their adult subsequent children and between the two parts of the interview (part A and B). Mothers displayed higher referential activity values, in particular during the general description of the experience of loss, and greater levels of positive affects, in both parts of the interview.

This study highlights the deep impact that a perinatal loss may have on the ability to express and link emotions and words, in both mothers and their adult subsequent children. From a clinical standpoint, this methodology may become a useful tool to detect risk clinical situations in traumatic events.

ANOREXIA NERVOSA AND QUALITY OF PARENT-CHILD RELATIONSHIP

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Abstract

In the onset and maintenance of Anorexia Nervosa, parental bonds have a significant role (Cerniglia et al., 2017). The parent-child relationships of anorexic patients are characterized by lower levels of care and support than control groups, and by more insecure attachment bonds. However, literature does not seem to be completely concordant. The aim of the present study was to explore the parent-child relationship of a group of anorexic females, deepening the attachment bond and the quality of parenting style both for mother and father. A total of 83 participants were recruited for the present study. The sample consists of two groups: 1) a clinical group of 40 females with a diagnosis of Anorexia Nervosa ($M = 21.95$; $DS = 5.40$), and 2) a control group of 43 healthy females ($M = 22.79$; $DS = 4.55$). All participants filled out two parallel versions for mother and father of the *Inventory of Parent and*

Peer Attachment (IPPA: Guarnieri et al., 2010) and the *Parental Bonding Instrument* (PBI: Bonaiuto et al., 1997).

In order to explore whether the two groups differ on the quality of parent-child relationship, a series of multivariate analyses of variance were employed.

Results showed significant differences between the two groups only for the relationships with fathers. Specifically, anorexic participants reported lower levels of attachment towards their fathers and a worse parenting style, as characterized by lower level of care and encouragement to autonomy than the control group. On the contrary, our results have not found significant differences between the two groups in relation to the attachment bond with the mother and her parenting style.

Overall, our results highlighted, in anorexic participants, a worse quality of father –child relationship compared with the control group. The non-significant difference in maternal-child relationship could be explained by the tendency of anorexics to idealize their close relationships, especially with their mothers (Martinetti, 2007).

DEVELOPING EMOTIONAL COMPETENCE: A PSYCHO-EDUCATIONAL INTERVENTION BASED ON STORYTELLING AND DRAMA WITHIN A KINDERGARTEN

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Abstract

A number of studies shows the role of emotions in psycho-educational processes during childhood, as well as the importance of emotional variables in social interactions in school context.

One of the major contributions to emotional domains in childhood is the model of Emotional Competence (EC) developed by Saarni. EC, which includes one's self, one's moral disposition, and one's developmental history, is crucial to children's ability to interact and form relationships with others, and develops from 3 to 6 years of age. In Italy, there is a growing interest towards affective education in schools. However, it is rather difficult to

identify common operationalization and intervention protocols. The aim of this study is to test a psycho-educational intervention fostering the development of EC (expression, understanding and regulation of emotions) in pre-scholars. The Test of Emotion Comprehension (TEC), a nonverbal and cross-cultural tool, provides a global index of emotion comprehension in children aged from 3 to 11, assessing nine domains of emotional understanding (e.g., the recognition of emotions, possibility of emotional regulation; having mixed emotions). This instrument was administered individually to 55 children (32 female) aged between 4 and 6 years ($M = 4.4$, $SD = .71$), recruited in three different public schools involved in a three-months psycho-educational intervention based on storytelling and drama. The TEC was administrated before the intervention started and after its conclusion. Results of repeated measure ANOVA show an improvement of TEC scores from baseline to 3 months ($F = 48.43$, $p < .000$; $M_{t1} = 3.61$ and $M_{t2} = 4.49$), with no differences between boys and girls (interaction time x sex: $F = .32$, $p = \text{n.s.}$). As for practical implications, the present study points out that early psycho-educational programs, based on storytelling and drama, may have the potential to exert a positive influence on kindergarten children's Emotional Competence.

THE EMOTIONAL AVAILABILITY IN MOTHER-CHILD AND FATHER-CHILD INTERACTIONS IN FAMILIES WITH CHILDREN WITH AUTISM SPECTRUM DISORDER

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Abstract

Background: Emotional availability (EA) is a relationship construct that can be considered an index of emotional quality in parent-child interaction. Using this construct, some researches show that both parent and child components of EA relate to key aspects of the parent-child relationship, but there are few studies that investigated this aspect in family with children with ASD. The present study addresses several specific questions about the emotional availability of parents of children diagnosed with Autism Spectrum Disorder (ASD).

Method: We observed free-play interactions of 40 children with ASD (chronological age = 41.6 months, $SD = 12$; M mental age = 30.9 months, $SD = 13.3$) and their parents, who play

one by one with their children. We coded separately each parent using the Emotional Availability Scales (EAS, Biringen et al. 2008).

Results: Findings showed that mothers and fathers were equally emotionally available to their children. There were no differences in parent scales in association with child level of functioning and severity of the symptoms. In addition, children showed similarities in the mean level of Responsiveness and Involvement in mother-child and father-child interactions, but considering the cognitive functioning and the symptoms severity, there were differences in the child scales.

Conclusions: Dyadic emotional availability is equally in mother-child interaction and father-child interaction in children with ASD. We discuss the clinical utility of EA Scales for assessing relationship between parents and their children and the involvement of the fathers during specific intervention.

SHARING DECISION MAKING WITH CHILDREN. A SURVEY IN PEDIATRIC PRIMARY CARE

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Abstract

This paper presents an exploratory survey about shared decision-making processes in pediatric primary care, with particular attention to the involvement of both the users (mother and child) in medical practice (Freda et al., 2015). 265 pediatric visits to children of the main age of 9.5 y/o (± 2.47) were observed and recorded; shared decision-making was analyzed through the OPTION tool (Elwyn et al., 2005), an observational grid composed of 12 items, aimed to evaluate the physician's ability to involve patients in decisions about their therapeutic plan. The observation was carried out in the pediatrician's dialog with the parent and in the one with the child. In both dialogues, low levels of shared decision-making were detected. This allows the fast and efficient conduct of the visit, but not the active involvement of the patients, with obvious risks of a health exodus. Further explorations of the shared decision-making process would be useful, also in order to strengthen the engagement processes (Graffigna et al., 2017) for both users of pediatric primary care.

EARLY CHILDHOOD TRAUMA, DNA METHYLATION AND PSYCHOPATHOLOGICAL OUTCOMES

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Abstract

Exposure to childhood maltreatment (CM) is a risk factor for developing psychopathology. However, the mechanisms that mediate this susceptibility have not been fully elucidated. Accumulating evidences suggest that DNA methylation alterations could mediate the susceptibility to psychopathologies observed after the exposure to a traumatic childhood. We decided to investigate if DNA methylation changes can be detected in two different classes of psychiatric disorders, major depression (MD) and substance use disorder (SUD), and if this molecular change is also modulated by the exposure to CM.

Two clinical samples that received a DSM-5 diagnosis either for MD or SUD were enrolled for this study. The severity of the depressive symptoms was measured by Beck Depression Inventory and Hamilton Depression Rating Scale. In SUD group, cocaine craving was evaluated. The exposure to CM and to low parental care was measured in these two samples using respectively the Childhood Trauma Questionnaire and the Parental Bonding Inventory. Blood was drawn from clinical patients and healthy controls at the end of the psychometric assessment. To measure Global levels of DNA methylation (GDM), lymphocyte DNA was extracted and processed by MethylFlash Methylated DNA Quantification Kit.

Interestingly, we observed a significant difference of the GDM levels in MD patients compared to SUD and healthy controls, with MD group showing a strong reduction of this parameter. We did not detect any effect of the CM exposure on GDM, or interaction between CM exposure and psychopathology.

This result prompts us towards further investigation that will aim to understand the clinical relevance of the GDM as a possible biomarker of MD. It would be interesting to understand if GDM alteration is present a priori or if this is a consequence of MD, and if the GDM levels fluctuate, returning to control levels, during the psychotherapeutic treatment, suggesting GDM as a marker of therapeutic success.

CLINICAL APPLICATION OF MINDFULNESS-ORIENTED MEDITATION IN CHILDREN WITH ADHD: A PILOT STUDY

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Abstract

Aim: Attention-Deficit/Hyperactivity Disorder (ADHD) has a prevalence of 5% and severely affects the lives of children. Mindfulness-Oriented Meditation (MOM) is a self-regulatory training for attentional and behavioral problems.

The aim of the present pilot study was to test the efficacy of the MOM training in children with ADHD by comparing them with an active randomized control group with ADHD who underwent an emotion awareness program not involving MOM.

Methods: Twenty-five children with ADHD in a narrow age range (7-11 years) were blinded assigned to two programs: the MOM training and the Active Control Condition based on an emotion education program (ACC). Children with ADHD of both programs participated to the trainings three times a week, for eight weeks. Psychopathological, neuropsychological, academic measures were collected before and after programs. None of the children had received pharmacological or psychotherapeutic treatment in the past or during the training.

Results: We found specific positive effects only in the MOM group with respect to neuropsychological measures of sustained attention and in relation to behavioral measures of attention and hyperactivity (as measured by parental questionnaires).

Conclusions: Although in a small group of participants, preliminary results documented the efficacy of the MOM training for ADHD, targeting it as a promising option for the intervention in ADHD children.

SECURITY OF PARENT AND PEER ATTACHMENT DURING SCHOOL-AGE: A COMPARISON BETWEEN CHILDREN WITH HIGH FUNCTIONING AUTISM, LEARNING DISABILITIES AND TYPICAL DEVELOPMENT

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Abstract

Research on security of attachment has revealed no differences between children with High Functioning Autism (HFASD) and matched control group. However, the vast majority of these studies focused on early childhood and little attention has been paid to school-age, particularly on the association between perceived parent and peer attachment. The aims of this study are: a) to determine whether there are differences in the perception of attachment security with parents and peer between HFASD and control groups; b) to examine potential associations between the security of attachment between parents and peers in ASD and control groups. Twenty-one children with HFASD, 20 with Learning Disabilities (LD) and 24 with typical development (TD) aged from 7 to 13 completed the Inventory of Parents and Peer attachment. The three groups were matched for sex, age, perceptual reasoning, verbal intelligence and family socioeconomic status. The results highlighted no differences between ASD and TD group for both parents and peer attachment variables. By contrast, LD children reported higher levels of alienation and less trust toward their parents compared to ASD and TD group. Significant correlations were found between parents and peer scales, whereas this result was not confirmed for the ASD group. The lack of this association in the ASD group raises questions about the potential link between perceived parent and peer attachment in this clinical population. Nonetheless, these preliminary findings confirm the hypothesis of no differences in the reported level of attachment security to parents and peer between HFASD and controls. Literature on attachment and ASD during school-age needs to be extended exploring the mechanism through which the influence of caregiver attachment may impact peer relationships. Limitations of the study and clinical implications are discussed.

AFFECTIVE SYMBOLIZATION OF THE PARENT-CHILD RELATIONSHIP IN ITALIAN FAMILIES: THE POTENTIAL ROLE OF GRATITUDE

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Abstract

Scientific literature reveals the central role of gratitude in the relationship between children and their parents. Li (2016) suggests that chores may play a key role in gratitude development among children, which leads to a closer parent-child bond. Following on from this suggestion, this study explores the affective symbolization of Italian families about parent-child relationship and the potential role of chores in the experience of gratitude. Fifty-eight adolescents (aged 12 to 19) and ninety-seven parents were administered a semi-structured interview, investigating the following areas: expression of love; moral reasoning; discipline; chores; expression of gratitude. The interviews were audio-recorded, transcribed and analysed through Emotional Text Analysis. The analysis detected six clusters of words (CL). CL1 (17.8%) refers to a relation based on an unspoken agreement: behaving well is traded for family cohesion. In CL2 (25%) parent-child relationship is symmetric; problems are solved by peaceful negotiation. In CL3 (13.3%) parent-child relationship is asymmetric, based on a strong discipline; CL4 (12.4%) refers to self and family care through chores as repetitive and obsessive rituals. In CL5 (18.2%) the support function embodied by adolescents in the family is a way to face the world outside, experienced as hostile and overwhelming. CL6 (13.3%) refers to parents' feeling of gratitude towards the adolescents, and the transmission of moral values from one generation to the next as a way for living forever. The results highlighted that chores respond to the family's need to take care of the relationship between parents and children, protecting it from the anguish projected on the world outside. The transmission of moral values responds to the unconscious phantasy of living beyond death. Gratitude seems to be the feeling of relief deriving from the satisfaction of those phantasies.

PARENTING STRESS AND PROBLEMATIC BEHAVIORS IN CHILDREN: THE MODERATING ROLE OF FATHERS

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Abstract

Parenting stress is a psychological burden derived from the degree of discrepancy perceived between child's demands and parents' ability to cope adequately (Abidin, 1986).

International literature showed that high levels of parenting stress are associated with the development of child's behavioral problems (Crnic et al., 2005).

Compared with research on effects of maternal stress on the children with disabilities, fewer studies have explored parental stress in a non-clinic sample of children.

In addition, ratings of child behaviour depend on whether the informant is a parent or a teacher (Duhig et al., 2000).

This study aimed to explore the relationship between parenting stress and child's difficulties assessed by parents and teachers of 99 children from 8 to 11 years of age ($M = 9.45$; $SD = 0.6$).

Parents completed the *Parenting Stress Index* (Abidin, 1997) and teachers completed the *Strengths and Difficulties Questionnaire* (Goodman, 1997) to assess children's problematic behaviors.

Correlation analysis showed that parenting stress was related positively with child's difficulties: high levels of parenting stress were associated with more child's psychological distress ($rM = .26$; $rF = .31$). A hierachic regression analysis showed a conditioning effect of fathers' stress on child's problematic behaviors. More specifically, high levels of paternal stress were associated with a significant relationship between mothers' stress and problematic behaviors of the child ($B = .33$, $SE = .13$, $p = .01$). When fathers' levels of stress were low, the relationship between mothers' stress and child's problematic behaviors was not significant ($B = -.11$, $SE = .16$, $p = .49$).

Thus, results suggested that fathers' levels of parenting stress moderate the relationship between mothers' parenting stress and child's problematic behaviors, suggesting that low levels of fathers' stress could be a "protective factor" in the relationship between maternal stress and behavioral problems of the child.

I contesti dell'intervento

Discussant:

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THE EFFICACY OF A BRIEF PSYCHODYNAMIC THERAPY IN FIBROMYALGIA SYNDROME

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Abstract

Fibromyalgia (FM) is a chronic syndrome characterized by widespread musculoskeletal pain, fatigue, sleep disorder and psychological distress. Although the efficacy of non-pharmacological interventions is well-known, there are few studies investigating the efficacy of brief psychodynamic therapy (BPT) in FM. Therefore, we conducted a randomized controlled trial comparing an individual BPT versus an individual cognitive therapy (CT).

Thirty FM patients attending the “Città della Salute e della Scienza” Hospital, University of Turin, were enrolled and were randomized to receive either BPT (16 sessions, 1 session/week) or CT (16 sessions, 1 session/week).

The participants were administered, before (T0) and after the psychotherapy treatment (T1), the Fibromyalgia Impact Questionnaire-Revised (FIQ-R), the Hospital Anxiety and Depression Scale (HADS), the Metacognitive Functions Screening Scale (MFSS), the Toronto Alexithymia Scale (TAS-20), the Relationships Questionnaire (RQ) and the health-related quality of life (SF-36).

In order to verify the efficacy of the brief psychotherapy in FM patients, a mixed-design analysis of variance was run.

Results showed that both treatments were equally effective in reducing the FIQ-R ($p=0.018$) and the HADS total score ($p=0.015$) and in improving the health-related quality of life, both

in the mental ($p=0.001$) and the physical ($p=0.004$) component of the SF-36. No significant changes emerged, instead, in the MFSS, RQ and TAS-20 questionnaires after the treatments. In conclusion, our data suggested that the brief psychodynamic therapy showed to be equally effective as the individual cognitive therapy in lowering the psychological distress level and improving fibromyalgia-related symptoms and the patients' health-related quality of life.

PERSONALITY IN CHRONIC PAIN: A CASE-CONTROL STUDY

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Abstract

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

In this cross-sectional study, 64 consecutive female with FM and 78 with RA were assessed by: Structured Interview of Personality Organization (STIPO), Structured Clinical Interview of Personality Disorder (SCID-5-PD), Beck Depression Inventory (BDI-II), Toronto Alexithymia Scale (TAS-20), Symptom Checklist (SCL-90R), Visual Analogue Scale for pain (VAS), and the SF-36 questionnaire for the Health related Quality of Life.

FM patients reported significantly higher levels of psychopathology compared to RA patients: higher level of overall psychological distress ($p<.001$), higher symptom breadth ($p=.008$), higher symptom intensity ($p<.001$), and lower scores for quality of life in both the physical and mental components of the SF-36 ($p<.001$).

Regarding the Personality Organization profile, 48.4% of FM patients vs 19.2% of RA patients reported a Borderline Personality Organization (BPO) ($p<.001$). FM patients had a statistically significant higher impairment in coping strategies, primitive defenses and identity subscales of the STIPO ($p<.001$), compared to RA patients. The SCID-PD showed that FM patients had a higher prevalence of Personality Disorders compared to RA patients ($p=.004$), with 25% of FM vs. 6.4% of RA patients showing a personality disorder.

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 a higher general symptom severity and a lower quality of life

than RA patients. Further studies are necessary to evaluate the impact of the dimensional profile of Personality Organization on psychological and clinical outcomes in chronic pain patients.

ATTACHMENT, JEALOUSY AND EMOTIONAL ABUSE IN HOMOSEXUAL AND HETEROSEXUAL COUPLES

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Abstract

Several studies have shown the influence of anxious attachment and jealousy in heterosexual couples, but it's inadequate on data on homosexual couples (Wells et al., 2003; Knobloch et al., 2001). Also, literature is in contrast for what concern gender and sexual orientation differences in jealousy and emotional abuse (Sheets e Wolfe, 2001; Tani e Ponti, 2016). The present study aims to investigate the relationship between romantic attachment, jealousy and emotional abuse, highlighting gender and sexual orientation differences, in a sample of homosexual and heterosexual couples. 454 males (56% gay; $M_{age}=26.96$) and 414 females (39% lesbian; $M_{age}=26.35$) completed an online form, assessing socio-biographical data (a.e. sexual orientation, partner information); jealousy was assessed using the Multidimensional Jealousy Scale, composed by 3 subscales (Cognitive-JCOG, Emotional-JEMO and Behavioral JCOM); perpetrated and suffered emotional abuse was investigating through the Multidimensional Measurement of Emotional Abuse; and the ECR-R (Experiences in Close Relationship Revised) measuring 2 types of romantic attachment: anxious and avoidant. Heterosexual females score higher in the JEMO ($F=29.09 \ p<.001$) and JCOM ($F=11.10 \ p<.001$) subscales, while lesbians show higher levels of anxious attachment ($F=3.56 \ p<.05$) and gay men in the avoidant ($F=5.68 \ p<.01$). Insecure attachments correlate with MJS subscales and emotional abuse, both detected and perpetrated. Regression analysis shows that attachment, cognitive and emotional jealousy account for the 30% of variance of the emotional abuse: gender, sexual orientation and the interaction of these two variables were not significant. Our results confirm that there are gender and sexual orientation differences in the development and display of jealousy, but having an insecure attachment, in relation with jealousy could lead to the development of emotional abuse in couples, despite gender differences.

BIASED APPRAISAL OF TRUST IN BORDERLINE PERSONALITY DISORDER: THE ROLE OF SENSITIVITY TO JUSTICE

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Abstract

Background: Previous research found BPD features to be related to a generalized mistrust of others resulting in a greater appraisal of, and sensitivity to, others' untrustworthiness, namely the untrustworthiness bias. Although a general readiness to perceive injustice, *i.e.* Justice Sensitivity (JS), may well fit BPD symptomatology, only few studies investigated the link between JS and BPD. With the present contribution, we aim at testing whether the positive association between a biased perception of neutral faces as untrustworthy and BPD features may be mediated by JS.

Methods: To this end, 181 undergraduates ($M = 38$, $F = 143$) were asked to fill the Personality Assessment Inventory-Borderline (PAI-BOR; Morey, 1991), the Rejection Sensitivity Questionnaire (ARSQ, Downey & Feldman, 1996) and the Justice Sensitivity Inventory (Schmitt et al. 2010). In the same laboratory session the participants were asked to complete a Trust Appraisal task of neutral faces on a 7-point scale.

Results: Our hypothesis was partially confirmed: Only JS from the beneficiary point of view (not from the victim, the observer, nor the perpetrator) partially mediated the association between BPD traits and trust appraisal of neutral faces.

Conclusion: The mediation result provides insight about the role of beneficiary sensitivity in high BPD features individuals. Our results inform that BPD patients may benefit from a clinical work on justice sensitivity issues in terms of better interpersonal quality of life.

SEXUAL BELIEFS, AUTOMATIC THOUGHTS, AND COGNITIVE SCHEMAS AS PSYCHO-SOCIAL RISK FACTORS FOR SEXUAL DYSFUNCTIONS IN MEN AND WOMEN

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Abstract

The literature highlights a significant role of sexual beliefs, automatic thoughts, and cognitive schemas as risk factors triggering and maintaining sexual dysfunctions. The aim of this study was to summarize the evidences highlighted in the validation studies of the Italian versions of the “Sexual Modes Questionnaire (SMQ)”, the “Sexual Dysfunctional Beliefs Questionnaire (SDBQ)”, and the “Questionnaire of Cognitive Schema Activation in Sexual Context (QCSASC)” for the clinical practice. The questionnaires were assessed in 1051 participants (425 men and 626 women) exploring different classes of cognitions related to sexuality, such as failure and erection concerns, age and body thoughts, erotic fantasies, attitudes towards sexuality, conservatism, occidental gender stereotypic roles and control over sexuality. The Italian versions of SMQ, SBDQ and QCSASC demonstrated good psychometric properties. Results showed that these questionnaires can differentiate between sexually clinical and healthy people and that many cognitions evaluated are clearly gender specific: “Erection Concerns”, “Worries about Partner’s evaluation and Failure Anticipation thoughts” and “Macho Beliefs” for men; “Failure and Disengagement Thoughts” and “Age related Beliefs” for women. “Control over sexuality”, feeling “Helpless” and “Unlovable” were highlighted as important risk factors, without any gender difference. A strong association between cognitions, emotions and sexual functioning was also reported. Our findings confirmed that cognitive aspects have a primary role on sexual health. The strong association with sexual functioning and emotions confirmed the need to operate under an integrated approach, considering cognitive, emotional and sexual aspect all together to elicit an effective improvement during the therapeutic process. These questionnaires are suggested for assessment and therapy evaluation. In research, they are useful to study psychosocial aspects of sexuality and can be implemented in multicultural studies.

GAME OF THOUGHTS: THE ROLE PLAYED BY MENTALIZATION SKILLS IN MALINGERING PROCESS

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Abstract

Malingering, i.e., exaggerating or feigning illness in order to escape duty or work, likely involves some empathic skills. A healthy person trying to look mentally ill, indeed, first has

to put him/her-self in someone else's shoes, i.e., in the shoes of a person who suffers from psychopathology. Notwithstanding, to date no studies have yet investigated whether people with higher empathic skills are more able to pretend suffering from a given psychopathology without being detected as feigner by ad hoc measures. We tried to test this hypothesis empirically. This study aims to investigate whether the ability to put oneself in the shoes of others - both cognitively and emotionally - can be an advantage for simulators. Three samples of 100 participants each ($N = 300$) were asked to simulate three psychopathologies: schizophrenia, depression and post-traumatic stress disorder. All subjects were instructed about the symptoms of the disorders in agreement with the DSM-V. Each participant was asked to identify him/herself with the protagonists of a story who would have had an economic advantage from obtaining a diagnosis of schizophrenia, depression or post-traumatic stress disorder. The tests administered were: the iOP-29 for the evaluation of malingering, the QCAE and the Faux-Pas test for the empathic and mentalization skills, and respectively the Eppendorf Schizophrenia Inventory (ESI) for schizophrenia, the Center for Epidemiological Studies Depression Scale (CES-D) for depression and Impact of Event Scale-Revised for post-traumatic stress disorder. The results show that empathy skills seem to be not connected with the ability to simulate mental illness, as demonstrated by a JZS Bayes Factor = 5.36. Results also highlight the difference between empathizing with others - i.e., cognitively and affectively understanding their emotions, thoughts, and behaviors - and behaving like them.

THE POSSIBILITY TO DREAM IN ANTI VIOLENCE CENTERS (CAV). SLEEP AND DREAM IN PSYCHOLOGICAL CONSULTS WITH WOMEN SURVIVORS OF INTIMATE PARTNER VIOLENCE

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Abstract

Intimate partner violence (IPV) is the most widespread form of violence against women, with an estimated global prevalence of 30% (WHO, 2013). In psychological consults with survivors of IPV, it is primary to work on trauma processing in its peculiarity of *complex trauma* (Herman- Lewis, 1992) inserted in a relational context (Mucci, 2014). The role of dreams in

the psychic elaboration (Bion, 1962), explored in particular moments of development (Margherita et al, 2015), is important following a trauma, intended as an event that compromises the symbolic activity of the individual. The literature on the PTSD of IPV survivors highlights the importance of investigating sleep disorders and post traumatic dreaming in psychological counseling (Pigeon et al 2011; Rasmussen, 2007; Campbell, 2002). The objectives of the current study are: investigate the presence, the clinical role, the characteristics of sleep and post traumatic dreams in women survivors of IPV, through CAV Psychologists' narratives, exploring the meanings they attributed to dreams and sleep in the psychological consult.

Through the IPA methodology (Smith, 2005) 15 female psychologists were interviewed.

From the analysis of the interviews 3 superordinate themes emerged: *the siege of the real on the territory of the night* where the night is described as a fragile space, susceptible to eruptions by the partner's external violence or by flashbacks and nightmares; *neither awake nor asleep: the interrupted time* that highlights a condition of semi-vigil that characterizes women; *dreams not dreamed* where the dream does not seem to find space in clinical work in CAV, but it is common for the psychologists to "dream" the women.

The study highlights the need to place attention in the clinical work on the characteristics of sleep and on the dreamlike world of both women and psychologists. The presence of dreams made available in the clinical relation could attest the restoring of processing ability in women.

FROM PAST TO FUTURE: AN INTERPRETATIVE PHENOMENOLOGICAL ANALYSIS OF REFUGEES' EXPERIENCES IN ITALY

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Abstract

Introduction: The increasing number of displaced people worldwide makes the “forced migratory issue” an utmost priority for researchers and clinicians who are even more required to address and take care of refugees’ well-being and mental health as well as to re-think models and approaches of research and clinical practices in the relationship with the Cultural Otherness. Within a wider project of research (Tessitore & Margherita, submitted; Margherita & Tessitore, 2019; Tessitore & Margherita, 2018; Margherita & Tessitore, 2017; Tessitore &

Margherita, 2017), the present exploratory study was aimed to explore in-depth meanings and representations that 6 refugees hosted in Italy attributed to their pre-migratory, migratory and post-migratory experiences. In particular, through a qualitative approach, we aimed to shed light on risk and protective factors along different temporal phases, taking into account the specific needs and requirements of refugees who, by virtue of a different social-juridical status and of different experiences, need to be differentiate from asylum seekers.

Method: We developed and administered semi-structured interviews that were analysed accordingly to the principles of the Interpretative Phenomenological Analysis (Smith, 2011; Smith & Osborn, 2008; Smith, 1995).

Results: A total of four superordinate themes emerged: The past, the case is over; The Committee as witness of my truth; Italy, Never Land; The future between agency and delegation.

Discussion: On the background of an avoidance in speaking about the past, the Territorial Committee embodied a fundamental witness function able to recognise and validate the participants' experiences. Positive post-migratory experiences configured a resilience field able to strengthen and empower refugees' resources as well as to restore the social and community links normally destroyed by sever traumatisation.

THE MORE SEVERE THE PATIENT'S CLINICAL CONDITION, THE LOWER THE QUALITY OF LIFE OF CAREGIVERS: THE CASE OF PARKINSONISMS

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Abstract

Background: An increased awareness of the psychological aspects of Parkinsonisms has recently arisen. Critically, higher insight has been achieved on patients' difficulties in daily life activities, which negatively impacts on their quality of life (QoL). As medications have little impact on symptoms, clinical and psychological interventions are becoming more and more important. Caregivers' education and support should thus have a central role in these

interventions. This study aims to understand whether QoL differs between caregivers of patients with Parkinson (PD) and Parkinsonism (PKD) and to evaluate the impact of patients' disability on caregivers' QoL.

Materials and methods: N=22 PD and n=33 PKD and their Caregivers were recruited in 2019. Caregivers were administered self-report questionnaires to investigate their own mood (State-Trait Anxiety Inventory STAI Y1,2; Beck Depression Inventory II- BDI-II; Caregiver Burden Inventory ,CBI) and their perception of patients daily life autonomies (Basic activities of Daily living -BADL-) T-test or Mann-Whitney were used ($p < 0.05$) to assess statistical significance depending on whether the data were or not normally distributed. Similarly, Pearson's or Spearman's correlations were applied to test correlations between variables ($p < 0.05$).

Results: The daily life autonomies (BADL) resulted to be lower for PKD (3.82 ± 1.93) rather than PD (5.36 ± 1.33 , $p = <.001$). PKD caregivers, compared with PD ones, resulted to have a higher burden (CBI: 29.6 ± 20.8 and 12.6 ± 14.8 for PKD and PD caregivers, $p = <.001$) and a higher level of anxiety (STAI Y1: 43.2 ± 11.6 and 35.5 ± 8.40 for PKD and PD caregivers, $p = 0.009$). A negative correlation ($r = -0.579$, $p = <.001$) emerged between BADL and CBI, so that the lower the patients' daily life autonomies, the higher the caregiver's burden.

Conclusion: This study revealed that the QoL of PD and PKD caregivers is different. The results suggest that this difference may be related to symptoms severity.

THE EFFICIENCY OF EMOTION REGULATION BASED THERAPY IN THE CARE FOR THE MANAGEMENT OF ATOPIC DERMATITIS (A SINGLE CASE STUDY)

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Abstract

Aim: The aim of the present work is to investigate the effects of emotion regulation based therapy in the care for the management of atopic dermatitis. Emotion Regulation Therapy (ERT) is a theoretically derived, evidence based, treatment that integrates principles from traditional and contemporary therapies with findings from basic and translational affective science to offer a framework for improving intervention by focusing on the motivational

responses and corresponding regulatory characteristics of individuals with high levels of chronic distress.

Method: A single-case design was used to examine the benefits of ERT in the treatment of two patients with atopic dermatitis. Emotion regulation based strategies were employed (e.g., identifying and describing emotions, identifying diseases related emotions, awareness of emotional impairment, emotional awareness, emotional clarity, cognitive reappraisal, emotional expression) to allow patients to modify maladaptive emotion regulation strategies, gain insight and practice more adaptive emotional strategies in private, and social situations. The intervention consisted of fourteen, weekly, 60-min sessions. Specific measurements were applied before, and to the end of the therapeutic intervention: Emotion Regulation Questionnaire, Emotion Dysregulation Scale, Alexithymia Toronto Scale, Subjective Well Being, The Severity of the Disease.

Results: Improvements were indicated for both cases in global outcome measures, with reductions of the maladaptive emotional mechanisms, and improvement of the adaptive emotional mechanisms. An important result was the reduction of the dermatitis symptomatology (pruritus).

Conclusions: For both cases, treatment gains were particularly evident in terms of reducing avoidance behaviours, anxiety, and depression, and to improve the life quality of the patient.

PSYCHOLOGICAL FEATURES AFFECTING OFFICE HYSTEROSCOPY EXPERIENCE

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Abstract

Office hysteroscopy (OH) can be regarded the gold standard for evaluation of the intrauterine pathologies. OH is a well-tolerated procedure without pain medication, but need for anaesthesia or analgesia is still matter of debate. Many factors, such as patients's psychological features would affect the intensity of pain perception. Anxiety levels may enhance symptom detection and intensify the experience of pain increasing the request of anesthesia or

analgesia. The aim of this study was to investigate the role of psychological factors relating to OH experience.

105 patients undergoing OH were enrolled at the University Gynecology Department from November 2018. The women were asked to score pain perception on a Visual Analogue Scale (VAS), and anxiety was assessed with the State-Trait Anxiety Inventory (STAI). Patients with higher VAS scores showed higher scores on STAI-S ($r = 0.233$ $p < 0.05$). Women who requested sedative and analgesic practice reported significantly higher STAI-S scores than those who did not request it (49.40 ± 11.06 vs. 44.80 ± 9.27 , respectively; $t=2.250$, $p < 0.05$). Moreover, women in menopausal age showed higher levels of anxiety trait than those in reproductive age (42.52 ± 10.12 vs. 37.93 ± 8.17).

Our study may have implications for clinical practice. OH is associated with preoperative anxiety that can affect tolerability of the procedure. This can have repercussions on pain perception and on the pain medication requests. Our results pointed out the importance of the assessment of psychological characteristics of patients to make hysteroscopy easier and increasing its diagnostic potential.

ALEXITHYMYIA, NEGATIVE AFFECTIVE STATES AND PAIN IN PATIENTS WITH FIBROMYALGIA: AN EXPERIMENTAL STUDY

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Abstract

Fibromyalgia (FM) is a pathological condition characterized by widespread and chronic musculoskeletal pain associated with other psychopathological manifestations which have a negative impact on patients' quality of life. FM is frequently associated with alexithymia, a multidimensional construct constituted by a lack of emotional awareness, an externally oriented cognitive thinking style, difficulty in identifying feelings and verbally communicate them. The aim of the present study was to investigate the relationship between alexithymia, negative affective states and pain in a sample of subjects with FM compared to a group with other rheumatic diseases (RD) and a healthy control group (HC). The sample consisted of 127 subjects ($M= 25$, $F=102$; mean age: 51.97; SD: 11.14), of which 48 with FM, 41 with RD and 38 HC. FM and RD groups were recruited at the rheumatology department of S. Chiara

Hospital in Pisa. All groups underwent to a test battery investigating: anxiety and depressive symptoms (HADS), pain (VAS; QUID-S /-A) and alexithymia (TAS-20). Data analysis has been performed using SPSS and nonparametric group comparisons (Kruskal-Wallis) and Spearman's rank correlation coefficient were computed. Subjects with FM reported significant higher scores than HC on anxiety ($p <.001$), depression ($p <.001$), TAS ($p <.01$), QUID-S ($p <.001$), QUID-A ($p <.001$) and VAS ($p <.001$). Furthermore, subjects with FM showed higher scores than RD subjects on QUID-A ($p <.01$) and VAS ($p <.05$). The correlations between the examined variables were stronger within the HC and RD groups when compared to FM. In conclusion, while in the FM group the examined scores were higher than the RD and HC group, the correlations between the dimensions themselves were weaker compared to the other groups, suggesting that alexithymia doesn't play a primary role in the symptom manifestation of the FM patients.

CANCER RUMINATION AND HISTORY OF BREAST CANCER AFFECT QUALITY OF LIFE OF WOMEN WHO UNDERWENT PROPHYLACTIC OOPHORECTOMY

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Abstract

Introduction: In the last few decades, the increased availability of genetic testing has allowed the identification of women at high risk of developing epithelial ovarian cancer. This group includes BRCA1/2 pathogenic mutation carriers and women with familiarity for ovarian cancer. In these women, prophylactic oophorectomy has been demonstrated to be effective in reducing ovarian cancer risk. However, few studies have focused on the psychological, relational and social implications of this choice.

Methods: Fifty-one women who underwent prophylactic oophorectomy participated to the study. Sociodemographic/clinical information and cancer rumination were assessed by means of structured ad hoc questions, while quality of life and body image were evaluated by means of the WHOQoL and the Body Image Scale (BIS).

Results: Independent sample *t* tests found significant differences between women with history of breast cancer (N=36) and women who have never been diagnosed with cancer (N= 15) regarding physical, psychological and social quality of life, and body image. Indeed, women with history of breast cancer showed lower levels of quality of life and higher levels of impaired body image than the other group. Furthermore, findings obtained by hierarchical linear regression showed that cancer rumination plays a key role in influencing psychological quality of life, over and above history of breast cancer ($p < .001$). Indeed, independently from the cancer history, higher cancer rumination seems to be associated with impaired psychological quality of life.

Conclusions: The study suggests that following prophylactic oophorectomy, women with a history of breast cancer have a reduced quality of life and impaired body image than women who have never been diagnosed with cancer. Furthermore, cancer rumination negatively affects psychological quality of life independently of history of breast cancer. These results have several implications for multidisciplinary genetic and cancer teams.

DOCTOR-PATIENT RELATIONSHIP: THE WORK OF MARCELLO CESÀ-BIANCHI (1926-2018)

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Abstract

Introduction: Since ancient times, doctor-patient relationship has been linked to models of knowledge transmission. It also deals with the development of medical skills. In modern times, psychological training has become a key step, necessary for doctors. This training also concerns the relationship and communication, the global conception of illness and of ill, the different expression of trouble and painful among patients, the family and socio-cultural environment.

Methods: Psychology contributes to re-evaluate a global vision of medicine, so that the links with history seem clear. From this point of view, the historical one, the life and work of Marcello Cesà-Bianchi (1926-2018) result. We have examined his works, especially about relationship between doctor and patient.

Results: From pioneering studies in the early 1960s on the relationship between medical education, medicine and psychology, he emphasized his focus on the role of technological progress in the doctor-patient relationship, from a psychological point of view. He highlighted that relationship between doctor and patient was the heart and the art of medicine. Although patients are becoming more and more expert regarding all health-care issues, they are still looking for shared perceptions and feelings regarding the nature of health issues, the supposed goals of treatment, and psychosocial support. What the patient is looking for is no longer a qualified “technician” but a passionate “supporter”. As the works of Cesa-Bianchi demonstrated, the doctor must have an in-depth knowledge of the main communicative and relational mechanisms (both verbal and non-verbal, cognitive and emotional), a holistic vision and an understanding of the expressions of human discomfort.

Conclusions: Marcello Cesa-Bianchi was not only a pioneer of psychogerontology, but also a methodologist: psychology had to redefine its formulation and definition, in the light of more and more old patients, their rights, their creativity.

ASSOCIATION AMONG ROMANTIC ATTACHMENT, COUPLE RELATIONAL CHARACTERISTICS AND POSITIVE OUTCOME IN ASSISTED REPRODUCTIVE TREATMENT

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Abstract

Infertility represents a major life crisis that can negatively affect a couple's psychosocial health. A supportive relationship and a secure romantic attachment appear to represent protective factors that may reduce the stress arising from the experience and also play an important role in the success of Assisted Reproductive Treatment (ART). The general aim of the study is to investigate the association among romantic attachment, couple characteristics and ART outcome.

76 infertile women (mean age=38.52; sd= 5.58) enrolled in a clinic in Rome completed the Experience in Close Relationship-Revised (ECR-R), the Couple Relationship Inventory (CRI) and a socio-demographic questionnaire.

Data analyses showed a significant positive association between ECR-R Anxiety and CRI Idealization/Persecution ($r=.246$; $p<.05$) and Mistrust ($r=.319$; $p<.01$), and between ECR-R

Avoidance and CRI Mistrust ($r=.270$; $p<.05$), whereas a significant negative association between ECR-R Avoidance and CRI Attunement ($r= .280$; $p<.05$) was found. ART positive outcome was negatively related to ECR-R Avoidance ($r=-.247$; $p<.05$) and positively related to CRI Dependence ($r=.255$; $p<.05$). A multi-variable logistic regression showed that ECR-R Avoidance decreased the probability of pregnancy ($B= -.055$; $Exp(B)= .95$; $CI= .900- .996$; $p<.04$).

ART success appears to be related to lower levels of fear of dependence and interpersonal intimacy, and to higher abilities in self-disclosure within the romantic relationship and to higher aspects of tenderness and care in the couple. Further investigations are needed also with the aim of developing specific therapeutic interventions in order to promote the quality of couple relationships thereby increasing the rate of successful ART outcomes.

THE ROLE OF REGULATORY FLEXIBILITY AND CONTEXT SENSITIVITY IN A SAMPLE OF PALLIATIVE HOME CARE PRACTITIONERS AT RISK OF BURNOUT

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Abstract

Introduction: This study aimed to examine the symptoms of burnout and the differential contribution of the professional role in a sample of palliative home care practitioners. In addition this study aimed to explore the role of the sensitivity to context and the emotional flexibility for the three factors of burnout.

Methods: A convenience sample ($n = 65$) of specialist palliative care practitioners participated at this study. Participants were recruited in two palliative home care services characterized by a prevalence of patients with cancer at the end-of-life.

Participants were asked to complete a demographic questionnaire, and provide data about their work and experience. The Italian version of the Maslach Burnout Inventory (MBI), the Flexible Regulation of Emotional Expression (FREE) Scale (a measure of emotional

flexibility), and the Context Sensitivity Index (CSI) (a measure of sensitivity to context) where after administered.

Results: The results showed a low burnout risk for all the three factors of MBI. Results of ANOVA showed that there was a significant effect of profession (physiotherapists scoring significantly higher than the other specialist palliative care practitioners) and age on the emotional exhaustion factor of the MBI. Results of ANCOVA indicated that these effects persisted and there was also a significant effect of FREE on the emotional exhaustion. In addition, results did not show any significant effect of profession, age, FREE and CSI on the depersonalization and personal achievement.

Conclusion: These findings can help to explain the differential contributions of profession and age to the all burnout symptoms investigated. In addition, the emotional flexibility component as component of resilience represent a significant and specific factor for emotional exhaustion. Interventions to prevent burnout must consider these relationships.

LGB MICROAGGRESSIONS, UNIVERSITY CLIMATE AND ACADEMIC AND INTELLECTUAL DEVELOPMENT: PRELIMINARY DATA FROM AN ITALIAN HIGHER EDUCATION CONTEXT

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Abstract

Background: Higher education contexts (HEIs) are generally hostile environments for homosexual students due to homophobia and heterosexism. Discriminations against lesbian, gay and bisexual (LGB) people within US universities have received considerable attention in the literature of the last two decades (Rankin, 2010). Still scarce is research at European level. The aim of this study was to investigate the associations between environmental microaggressions (i.e., subtle forms of discriminations) targeting LGB students, the perception of university climate and academic development in a sample of Italian heterosexual and homosexual students.

Methods: Participants were 471 students from a large university of Southern Italy (65% Females, $M_{age} = 22.95$, $SD = 4.57$). Students completed a web-based survey in 2018. Students

who identified as LGB were 42 (9%). The frequency of homonegative microaggressions within the university was collected through the LGB Environmental Microaggression Scale (Woodford et al., 2015); academic and intellectual development was measured through the Institutional Integration Scale (Pascarella & Terenzini, 1980). Also, participants were asked to rate their overall comfort with university climate ranging from 1 to 5, with higher values indicating high comfort.

Results. The moderated mediation analysis showed that microaggressions were negatively associated with students' academic and intellectual development through the decreasing of comfort with university climate in both samples of LGB and heterosexual students, with a stronger impact in LGB students, index of moderated mediation = -.20, 95% CI [-.69, -.02].

Conclusions: A homonegativity climate affects students' perceptions of comfort within the university, regardless of their sexual orientation. HEIs should prioritise inclusive policies and practices, based on respect and valorisation of differences and promoting social cohesion, educational inclusion and active citizenship.

REVERSE PRO-ANA, SITES FOR MUSCLES ONLY. AN EXPLORATIVE STUDY ON MUSCULAR DISMORPHISM

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Abstract

Background: Muscular Dysmorphism is a condition characterized by the concern that your own body is not sufficiently muscular and dry (Pope, Phillips and Olivardia, 2000). It mainly affects men aged between fifteen and twenty-three, who practice sports whose only goal is muscle growth and physical strength increase.

Methods: This study's aim is to analyze in depth issues discussed in Facebook groups about bodybuilding, in order to identify the possible presence of messages that may be harmful to individuals predisposed to the development of Muscular Dysmorphism. Four Facebook pages were selected, "Malati per la ghisa", followed by 18,405 people, "Malati di palestra", followed by 175,767 people, "Odio i secchi", followed by 139,850 people and "No Tren No Gain", followed by 11,775 people.

Results: The iconographic material published from the pages since their creation has been analyzed through the Interpretative Phenomenological Analysis, a methodology that aims to

carry out a phenomenological interpretative analysis of implicit and explicit communication. From the general analysis, the messages spread by the pages and their images correspond to most of the diagnostic criteria of Muscular Dysmorphism, as defined by Ferrari and Ruberto (2012).

Conclusions: The type of emerging communication seems to create a similar dynamic to that of sects and pro-anorexia and pro-mia sites, which suggests the importance of creating virtual spaces of intervention for psychologists as an alternative to the aforementioned sites, in order to stem the phenomenon and encourage the spread of correct information.

AN INVESTIGATION ON THE PSYCHOLOGICAL VULNERABILITY OF MIGRANTS

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Abstract

Background: The emigration is a global phenomenon and been so, it has a significant impact also in the host countries. At this time, in Italy, the host system that is occupied with the hosting of the immigrants offer competent cures to the migrants prevent from different cultures.

Aim: This study proposes to investigate the travelling experience and the post-travelling living (integration) of the migrants, to understand if the different cultural provenience could be associated to a different emotional vulnerability and to a different traumatic impact. Additionally, it proposes to verify the efficacy of the expressive writing over the elaborative processes of the migratory journey.

Methods: For each participant will be gathered information on gender, age, nationality, schooling, quality of life, levels of hopelessness, attachment, the impact of travelling toward Europe, levels of alexithymia, and psychopathological symptoms. This information will be gathered through self-administered paper and pencil questionnaires. Three groups of migrants: the expressive writing group, a group with a neutral writing task, and a control group.

Results: The expressive writing group showed a lower score of somatization after the expressive treatment.

Discussion: The findings from this research sustain the use of an expressive writing intervention in order to attenuate the psychological disease due to the traveling of the migrants in Italy.

GENDER-BASED VIOLENCE AND MIGRATION: THE EXPERIENCE OF OPERATORS

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Abstract

Gender violence is the most important factor that led women refugees and asylum seekers to leave their country and is also one of the main risks to which the migration journey exposes them (OIM, 2017). The arrival in Italy, destination and transit country for women victims of human trafficking (OSAR, 2016) is the last stage of a path violence. The main type of human trafficking in Europe is sexual exploitation (Eurostat, 2015).

To the multidimensional trauma of migration (Margherita, Tessitore, 2019) is added the complex trauma of gender violence and the linked affects (Herman-Lewis, 1992; Margherita, Troisi, 2014; Troisi, 2018) making the condition of migrant women of greater vulnerability. Considering that in Italy the attention to the phenomenon of violence against forced migrant women is still inadequate (OIM, 2017; Tessitore, Margherita, 2017), the project "MIA-Modeling of Integration and Reception paths for women refugees victims of violence" funded by the DPO, in which this study has place, has the aim to make dialogue between the competences in the field of contrasting the gender violence of CAV Le Kassandre and the competences in the field of migration of Cidis Onlus with the aim of modeling specific pathways.

This study, exploratory phase of the project, aimed to investigate the experience of the operators who deal with migrant women in the Naples and Caserta area.

A qualitative analysis was carried out through 3 focus groups with operators. 3 themes have emerged: the girls disappear, in which the emergency dimension determined by the phenomenon of human trafficking lead the operators to focus on the here and now, neglecting the past violence; the lack of tools in the face of such a violence, which underlines the need for adequate preparation; meetings between women, which highlights the anthropological-cultural aspects of female relationships.

The study confirms the need to structure specific pathways for forced migrant women victims of violence.

TREATMENT NON-ADHERENCE AND PSYCHOSOCIAL FACTORS IN PATIENTS WITH CHRONIC PAIN

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Abstract

Background: Chronic pain (CP) is a major healthcare problem. European Federation of International Association for the Study of Pain (IASP) defines CP as a daily pain that persists for 3 months, affecting different aspects of the patients' life.

CP is a subjective experience where both physical and psychological factors are involved. Non-adherence to prescribed pain medication is very common and may result in sub-optimal treatment outcome. This study aimed at investigating the association between treatment non-adherence and psychosocial factors.

Methods: 118 consecutive outpatients (63.6 % female; mean age 57.1) with chronic pain, treated with analgesic medication, were recruited from the Pain Therapy Clinic - University of Bari General Hospital. We assessed treatment adherence (BMQ), levels of pain (Brief Pain Inventory - BPI), anxiety and depression (HADS), quality of life (SF-36), and cognitive functioning (Coloured Progressive Matrices - CPM).

Results: Using the Necessity Concern Framework, we calculated a Non-Adherence Index (difference between BMQ Necessity Scale and BMQ Concern Scale). Non-adherent patients (lower quartile of Non-Adherence Index distribution) were significantly younger (53.95 ± 10.03 , $p < 0.05$), and showed beliefs about medicines as something harmful (BMQ Harm Scale, 14.21 ± 2.7 , $p < 0.01$). The mean of Non-Adherence Index correlated -0.24 ($p < 0.05$) with Anxiety, -0.21 ($p < 0.05$) with Depression, -0.21 ($p < 0.05$) with Pain Severity, -0.35 ($p < 0.001$) with BMQ Harm, -0.33 ($p < 0.001$) with BMQ Overuse (beliefs about overprescription of medication by doctors who place too much trust in them).

Conclusions: In this sample, non-adherence to prescribed pain medication was characterized by demographic factors (younger age), anxiety, depression, pain intensity and perceived medicine harmfulness.

The choice for pharmacological therapy should not only be based upon pain diagnosis but should also take the risks of non-adherence into account.

EXPLORING CUCKOLDING: A PRELIMINARY SURVEY

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Abstract

Cuckolding is a paraphilia in which a man gets aroused by the sight of his romantic partner engaging in sexual activities with another man (Ley, 2009; Lehmiller, Ley & Savage, 2018). It can be defined a *postmodern* sexual practice because of its consensual-non monogamy form of relationship and its quick website diffusion and the consequent creation of apposite communities to talk about it and meet each other. Cuckolding, moreover, represents one of the most searched sexual practices on pornographic websites (Pornhub, 2016).

In cuckolding each person is identified through a specific label: cuckold and sweet -or hotwife- are, respectively, the male and female romantic partners of the couple, whereas bull is the third man involved (Block, 2015). Although systematic scientific literature on theme is lacking, clinical observations in Northwest Italy (Liccione, 2012) suggest that several patients seek help for different aspect of their cuckolding experience.

Our preliminary study aims to further characterize cuckolding in heterosexual relationships. We adopted an online survey created ad hoc. We collected data from 36 couples.

We have also conducted, for a more in-depth study, a telephonic semi-structured interview with the two members of a couple and three cuckolds. Preliminary descriptive analysis of survey show that, from both cuckolds and sweets, cuckolding is an enrichment of their romantic relationship, resulting more satisfying than intimacy with partner (33,3% of cuckold, 77,7% of sweet). When compared to women, however, men reported a higher percentage of negative emotions experienced during cuckolding, like guilt and shame (88,9% of cuckold, 22,2% of sweet).

Moreover, nearly 50% of men turned to a mental health professional because of difficulties concerning their sexual habits. Preliminary results of survey and telephonic interviews are in line with existing literature (Ley, 2009). Our study support clinical data concerning psychological distress of men (cuckolds) (Liccione, 2012) and provide a first description upon which to delineate further research.

LAUGHTER AND IMPLICIT COMMUNICATION IN DOCTOR-COUPLE INTERACTIONS IN ASSISTED REPRODUCTIVE MEDICINE VISITS

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Abstract

Implicit communication is known to be highly ambiguous due to the margins for alternative interpretations offered by vague language, emotive words, and unclear intentions. Ambiguity increases when implicit meanings are associated to laughter.

This is a qualitative study in which a corpus of 10 Assisted Reproductive Technology (ART) visits were analyzed with the aim to identify all cases of laughter in order to understand: 1) if they can be related to specific topics; 2) if laughter is shared or not and what this means. The 10 ART visits were collected in Italy and were transcribed using the Jeffersonian Transcription Notation. Laugh-particles were analyzed as illocutionary force indicators, i.e. as elements that may signal the kind of speech act speakers are performing through their utterances.

The results showed that the main topics associated to laughter are: infertility; embarrassment for medical condition/exam; age; bad news. Sometimes laughter was generated by jokes and in these cases, it was shared. In many cases, it was used to mitigate or reinforce illocutionary forces related to implicit meanings. In these cases, laughter was not shared, and it seemed a 'device' used by individuals to cope with situations of psychological distress.

Laughter can thus be interpreted as indicator of distress, which, if not properly interpreted, can cause misalignment and misunderstanding with the clinician.

RECONCEPTUALIZING THE ACADEMIC EXPERIENCE: THE USE OF THE INNOVATIVE MOMENTS CODING SYSTEM TO STUDY THE PROCESS OF CHANGE IN GROUP COUNSELLING

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Abstract

In psychotherapy research, many studies used reliable coding system to identify narrative markers of change as predictor of therapeutic effectiveness (Stiles, 2001; Angus et al., 2017). In the field of group psychotherapy research, only few studies have analyzed the process of change as the variables involved in group processes are complex (Lo Coco, Giannone & Lo Verso, 2006). Previous studies (Esposito et al., 2017a; 2017b) have used a reliable coding system (the Innovative Moments Coding System; IMCS; Gonçalves et al., 2011) to detect innovative narrative markers of change in a group counselling, the Narrative Mediation Path (NMP; Freda, Gonzalèz- Monteagudo & Esposito, 2016), which adopts narrative inputs to promote reflective functions with underachieving university students at risk of drop-out.

The purpose of this study is to analyze the narrative markers of change in four NMPs with university students.

In order to assess the effectiveness of NMP, the Academic Performance Inventory (API; Esposito et al., 2016) was administered in the pre and post-test phase. In order to analyze change in the therapeutic process, IMCS was used on the sessions' transcripts to identify seven types of innovative narratives (e.g. Action, Reflection, Protest, etc.), with a specific focus on Reconceptualization, the most complex innovative narrative which tracks the process of change and the contrast between past and present.

The API results showed that two groups improved their performance. IMs analysis showed that the good outcome groups presented a higher total proportion of IMs (>16%) and, specifically, a higher proportion of Reconceptualization (>3%), which appeared earlier and in a more balanced way among the group members.

This study showed the key role of Reconceptualization in the therapeutic process. Specifically, it suggests that the timing of emergence and the balanced production among the group members of Reconceptualization are associated with a good outcome.

SELF-CONCEPT, SELF-OBJECTIFICATION AND SEXUALIZATION IN ADOLESCENT FEMALES EXPOSED TO VIOLENT VIDEOGAMES

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Abstract

Videogaming is one of the most common hobby in adolescence, with very few gender differences in the typology of platforms, contents and category of videogame. But what has raised psychologist and sociologist attention is that most of the time female characters in violent videogame are victimized, sexualized, abused and usually are dressed in an erotic and revealing way. Recent literature has shown that these aspects have an influence on the conservation of gender stereotype on the objectification and sexualization of female figure (Ratan et al. 2015; Bell, 2017). In the present work we want to assess the relation between playing violent videogame, self- concept, self- objectification and sexualization in a sample of 293 videogamer female adolescents (aged 11-20, M=15.08) from high schools in South and Centre Italy. Participants were administrated with a set of questionnaires investigating multidimensional aspects of self-concept (*Piers Harris Self Concept for Children Scale*, Piers et al., 2002 BEH- behavioral adjustment; INT- intelligence; FANX- freedom from anxiety; POP- friendship and popularity; PHY- physical appearance and HAP-happiness), female objectification using the *Gender Attitudes and Beliefs* (GAB-Behm-Morowitz & Mastro, 2009), and the sexualization with the *Self-Sexualization Behavior Questionnaire-Women* (SSBQW-Smolak et al., 2014). Girls who play violent videogames score lower in the BEH ($F=12.06; p<.01$), INT ($F=43.18, p<.05$), POP ($F=7.06, p<.01$), HAP ($F=11.36, p<.01$) and in the SSBQW scale ($F=3.05, p<.05$). Moreover, higher levels of SSBQW negatively correlates with behavioral adjustment ($r=-.101, p<.05$) and physical appearance ($r=.354 p<.01$). According to our data violent videogame where female characters are victimized or dressed in an erotic way, may lead to self-sexualization and lower levels of self-concept in female adolescents. Moreover, sexualization is connected to lower levels of self-concept, and this may have an impact on self-esteem and the general wellbeing of young girls.

QUALITY OF LIFE IN PATIENTS WITH PRIMARY INTRA AND EXTRAHEPATIC CARCINOMA UNDERGOING SURGERY: A LONGITUDINAL STUDY

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Abstract

Liver cancer represents the fourth cause of death in men (AIRTUM, 2017) and - when specific medical criteria are met - the removal of the mass through surgery is the best option (AIOM, 2016).

Several authors state that the Quality of Life (QOL) should be considered as an outcome of the cancer patient care like others fundamental variables such as long-term survival and operating mortality (Martini et al., 2007). The aim of this study is to investigate the psychological aspects and the QOL of patients affected by primary intra and extrahepatic carcinoma who underwent surgery.

The research sample consisted of 38 inpatients (M=20; W=18) (mean age=65.32; s.d.=10.80) affected by this kind of cancer and the assessment of the psychological variables took place the day before surgery (t0) and one week after (t1).

Patients were administered an ad hoc battery consisting of the following tests: a registry paper including a specific liver cancer module, HADS, PDI, SF-36 and the EORTC QLQ C-30. Finally, were performed descriptive and exploratory statistical analysis of correlation and independent samples t-test.

Patients in t0 reported significantly higher levels of Physical Functioning ($t=2.588$; $p<.05$), Role Functioning ($t=2.867$; $p<.05$), and Social Functioning ($t=2.499$; $p<.05$) than patients in t1. Moreover, patients in t0 reported significantly higher levels of Physical Health than patients in t1 ($t=2.194$; $p<.05$).

No statistically significant differences ($p>.05$) were found between t0 and t1 regarding anxiety, depression and psychological distress.

In conclusion, this study shows that - even if surgery in a large number of cases is the best option for patients with liver cancer - at the same time it can have a negative impact on patients QOL.

Results suggest the importance of a global reimbursement of oncological patients and of a greater support in the post-operative period from a multidisciplinary healthcare team.

ADULTS' SENSE OF GRIP ON CHRONIC DISEASE (SOGOD): THE EXPERIENCE OF HEREDITARY ANGIOEDEMA

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Abstract

Due to the vast diffusion of chronic diseases worldwide, Clinical Psychology is manifesting a growing interest in developing interventions addressed to the improvement of the quality of life of people affected.

The aim of this study is to expand our understanding of the everyday experience of chronicity in a group of adults affected from a rare chronic condition, Hereditary Angioedema (HAE), by the evaluation of the Sense of Grip on the Disease (SoGoD - Freda et al. In press; Savarese et al., 2018).

SoGoD is a conceptual framework developed to detect the narrative dynamics of the sensemaking of the disease, between normative, regulative and agentive processes. Relying on a previous study on parents' SoGoD of their children's chronic conditions (Savarese et al., 2018; Freda et al., in press), our specific objective is to adapt an *ad hoc* interview for adults' SoGoD and its coding grid.

A preliminary sample of n. 19 people with HAE from Italian referral centers were administered a pilot version of an *ad hoc* semi-structured Interview on SoGoD, which explores three main domains of the disease experience: *a.* Interpretation of the variability of the disease; *b.* Dialogical exchanges; *c.* Management of the disease.

We formulated the coding grid starting from a narrative-semiotic analysis of the interviews (Freda et al. In press; Salvatore, 2016; Valsiner, 2013). Five macro-categories have been identified, which in turn resume a number of mutual excludents categories: 1. Temporal articulation; 2. Interpretation; 3. Emotion naming; 4. Disease Management; 5. Social support.

The sensemaking processes detected by these categories are consistent with a series of psychological competences for the Grip on the disease, namely the competence to: a. Distinction, b. Syntonization, c. Integration and d. Flexibility.

PSYCHOSOCIAL AND FUNCTIONAL OUTCOMES OF AN INTEGRATED MODEL OF CARE IN LOW VISION

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Abstract

Low Vision is an irreversible condition that leads to visual impairment and interferes with people daily living activities. Low vision can also affect mental health with important implications on social interaction, marking the individual with his self-confidence and psychological balance. For these reasons, low vision rehabilitation requires psychological support, in order to improve patients' quality of life. In particular, according to our previous research, the Self-Help Group (SHG), seems to be a valid approach in order to improve self-awareness, enhance living with disability and reduce depressive and anxiety symptoms. The aim of this study is to evaluate the impact of SHG on both psychological and visual-functional factors in patients with central visual loss caused by Stargardt disease (STDG), the leading cause of juvenile macular dystrophy. 11 STDG subjects (55 ± 8.8 years) were enrolled in the study. SHG sessions were performed for 2 years, twice a month, facilitated by a psychologist. Ophthalmic evaluation included: visual acuity (VA), Contrast sensitivity function (CSF), Critical print size (CPS), Fixation stability (BCEA 68,2%), Reading speed (RS). Psychological evaluation included: Patient Health Questionnaire-9, Self-Rating-Anxiety State, Coping Orientation to the Problems Experienced, General Self-Efficacy scale. Both evaluations were performed before and after low vision intervention. Depression, anxiety resulted reduced and Self-Efficacy improved ($p < 0.001$) after the rehabilitation integrated with SHG. Multivariable linear regression showed that the enhancement of depression and anxiety levels were not related to the improvement of visual functions. BCEA, CFS and CPS were significantly

correlated with self-efficacy ($P=0.0002$). Our vision rehabilitation approach integrated with SHG seems improve visual functions with an effect on self-efficacy, mental health and well-being.

RISK AND PROTECTIVE FACTORS INFLUENCING PSYCHOLOGICAL AND PHYSICAL HEALTH CONDITIONS IN ITALIAN MALE NURSES

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Abstract

Work-Family Conflict (WFC) is considered as a key risk factor influencing nurses' psychophysical health conditions. Nevertheless, both in occupational health research and in WFC literature, male nurses population is still overall underresearched, so reducing the possibility to understand the generalizability of research results about risk and protective factors influencing their health conditions. Therefore, the study aims at exploring the associations between WFC and psychophysical health conditions (Anxiety, Depression, Somatization) among male nurses, testing the potential moderating role of Job Control (Skill Discretion, Decision Authority), Social Support, and Job Satisfaction. A questionnaire consisting of Socio-demographic and Employment characteristics; Work-Family Conflict Scale; Skill Discretion, Decision Authority, and Social Support subscales from the Job Content Questionnaire; Job Satisfaction subscale from the Copenhagen Psychosocial Questionnaire; Anxiety, Depression, and Somatization subscales from the Symptom Checklist-90-Revised, was administered to 206 male nurses from five public hospitals of the Italian Healthcare Service. Data revealed that WFC was significantly associated with Anxiety ($\beta = .24, p > .001$), Depression ($\beta = .22, p > .01$) and Somatization ($\beta = .30, p > .001$) among male nurses. Decision Authority and Job Satisfaction emerged as significant moderators of the associations between WFC and male nurses' psychological health conditions. Findings provided information for defining evidence-based and more tailored individual and organizational interventions to promote male nurses' health, accounting for their needs, risks and resources.

SIDECAR-SKILLS IN DEMENTIA CARE: LINKING THE EVIDENCE ABOUT HIGHER EDUCATION AND PSYCHOSOCIAL CARE IN DEMENTIA ACROSS EUROPE

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Abstract

Introduction: Dementia is a health priority worldwide. Research shows that psychosocial interventions can improve the quality of life of people with dementia and their caregivers. However, an actual gap concerns the implementation of empirical evidence into clinical practice. In this regard, knowledge base driven curricula in psychosocial care can improve skills and competences of the Higher Education (HE) students interested in this field.

Skills In DEmentia Care (SiDECare) is an Erasmus+ project funded under the KA2 Strategic Partnerships for HE (2018-2021) aimed at promoting psychosocial knowledge in dementia care through the introduction of a transnational HE curriculum focused on it. Partners are: the University of Bologna (Italy), Maastricht University (the Netherlands), the University of Salamanca (Spain) and the Institute for Postgraduate Medical Education (Czech Republic).

Method: A survey was implemented to identify courses on psychosocial care delivered across Europe. Furthermore, European guidelines/recommendations along with national dementia plans were analyzed to investigate the actual state of psychosocial care. These actions will lead to identify core topics for the development of academic courses and/or curricula.

Results: Preliminary results showed that 19% of delivered teachings belong to the first level, 80% to the second level, and 1% to the third one (Bologna Process, 1999). 38% are courses, 23% are modules, and 39% are topics dealt within courses or modules not strictly related to dementia care themes. They have a theoretical focus in the 18% of cases while they relate to practice in the 53% and to mixed issues in the 29%. Most of them are distributed in central/western institutes/universities (89%).

Conclusions: Results will be discussed linking the evidence about the actual situation of HE in psychosocial care across Europe and the marginal role of psychosocial care in national, regional and European plans, guidelines and recommendations.

PSYCHOLOGICAL DIMENSIONS UNDERLYING NON-PARTICIPATION IN CANCER SCREENING PROGRAMS

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Abstract

Nowadays many women do not participate in breast and cervical cancer screening despite the early diagnosis and preventive measures can increase treatment success rates and reduce mortality. The literature shows that the screening behavior is influenced by a multiplicity of cognitive, emotional and psychosocial variables. A qualitative exploration of the refusing experience to participate in breast and cervical cancer screening programs is lacking. Through a qualitative approach of interpretative phenomenological analysis (IPA) the aim of the study is to explore the meaning-making processes of women who, although are defined at risk of developing breast and cervical cancer for the age factor, not adhere to exams of preventive screening. An ad-hoc semi-structured interview was conducted with homogeneous and intentional sample of 8 women. Eligibility criteria were: age (from 40 to 69 years); not to have undergone preventive examinations for more than three years; an homogeneous socio-cultural level; a good knowledge of the subject area; lack of familiarity as a risk factor. Three super-ordinate themes emerged through analysis of the data conducted in line with IPA method: *Taking care oneself would be to love oneself; Difficult contact with a sexual body; At the end the fate decides*. The results allow us to highlight a tridimensional interpretative model based on three dimensional levels that underlie the behavior of not doing prevention: *body->affects->thought* (BAT). BAT shows that the barriers linked to cancer prevention are stratified from a sensorial level of the *body*, crossing the area of ambivalent *affectivity* connected to taking care of oneself, to screening tests and to the risk of illness, to a defensive *thought* linked to the anguish of death. The study allows to think of personalized intervention practices aimed at supporting taking care of themselves, creating spaces in which they can give voice to barriers levels of oncological screening.

BODY IMAGE AND EMOTION REGULATION STRATEGIES AMONG CANCER PATIENTS

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Abstract

A cancer diagnosis is a life challenging experience that may produce significant outcomes on the individuals' psychological well-being and body image (Sekse et al., 2009; Fingeret et al., 2014). The aim of the present study was to explore the impact of a cancer diagnosis, emotion regulation strategies (namely cognitive reappraisal and expressive suppression), anxious and depressive symptoms on the body image, by means of linear regression analyses.

Participants were 144 women (mean age = 43.16 years; s.d. = 6.97), divided into two groups: a clinical group ($N = 64$) including females with a cancer diagnosis in their lifetime and a control group ($N = 80$) of healthy women.

The following self-report instruments were administered: Body Image Scale (BIS; Hopwood, Lee, Ghazal, 2001), Emotion Regulation Strategies (ERQ; Gross & John, 2003), Zung Depression Self-Rating Scale (SDS; Zung, 1965) and Zung Anxiety Self-Rating Scale (SAS; Zung, 1971).

Findings highlighted that having had a cancer diagnosis represented the most significant predictor of body dissatisfaction ($p < .001$). In addition, higher cognitive reappraisal significantly predicted fewer body dissatisfaction ($p < .05$), exclusively in the group of women with cancer (adjusted $R^2 = .12$).

Overall our results indicated the importance to consider cognitive reappraisal strategies among women with cancer, as their empowerment may be useful to promote a better body image. However, deeper knowledge and wider investigations are required to help women to deal with such a traumatic diagnosis.

MANAGING EMOTIONS AND THERAPEUTIC ALLIANCE IN ADVANCED FERTILITY CARE: A QUALITATIVE STUDY

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Abstract

It is scientifically recognized that fertility treatment is a source of stress and suffering for infertile patients, but less is known about the effects of the couples' emotional experiences on the well-being of fertility staff. An interest regarding stress, job satisfaction and emotional health of fertility staff has only recently developed. An in-depth explorative research study was conducted on the health professionals of an Italian fertility hospital clinic (n=12). The interviewed group consisted of 3 gynecologists, 4 resident gynecologists, 2 embryologists, 2 nurses, and 1 midwife. A structured interview - created ad hoc for this study - was administered to the staff in order to explore the operators' deepest feelings about their professional role and relationship with patients. Emotional text analysis, through aid of the T-Lab software, was conducted to analyze the corpus of their interviews, allowing the identification of five domains (clusters). They refer to the following emotional dimensions: the reference to the treatment's technical aspects as a strategy aimed at perceiving control and reducing anxiety (cluster 1), great emotional investment on the treatment's result (cluster 2), being completely in charge of patients (cluster 3), reference to the public identity of the fertility center (cluster 4), and self-definition as a symbolic incubator in which the couple and their desire are contained (cluster 5). Overall, the discursive factors seem to refer to adaptive strategies used by the specialists to face and contain the intense emotional involvement that derives from being the ones in charge of the couples' procreative goals. In conclusion, the study suggests the importance of an integrative approach in fertility clinics, providing a space for the staff to express themselves and also obtain support in positively handling the complex relationship with their patients.

PSYCHOLOGICAL HEALTH OF LVAD INPATIENTS AND CAREGIVERS: A SEMI-BAYESIAN APPROACH

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Abstract

Background: The Left Ventricular Assisted Device (LVAD) is an electromechanical device replacing a patients' failing heart. After implant, the LVAD requires daily care and maintenance, the electric battery is connected to the heart-pump with a cable requiring scrupulous hygiene to prevent life-threatening infections. Life is readjusted according to new necessities and habits with considerable psychological impact for patients and caregivers. Common psychological reactions include resistance to change, and family strain. The aim of this preliminary study is to highlight critical areas of LVAD patients and carers and to focus the targets of psychological interventions.

Methods: Following implant, inpatients and caregivers ($n = 23$) were tested at the beginning and at the end of a psycho-physical rehabilitation support program (4 weeks). Resistance to change, and family strain were assessed. A semi-Bayesian approach was used to compare the psychological experience of LVAD patients and carers before and after rehabilitation. Statistical analyses were performed using JASP.

Results: From hospitalization to discharge, Bayes-factor suggested higher resistance to change in patients at discharge ($BF_{1-0} = 3.267$), and improvements in carers' family strain at discharge ($BF_{1-0} = 4.126$).

Conclusion: Psychological support plays a key role in cardiac rehabilitation. On one hand, given that LVAD patients face practical life changes leading to resistance to change, they should be helped coping with their new medical issues. Indeed, in these delicate patients, it is even more important to prevent illness denial, which consequences may be fatal in patients requiring strict health-care daily practices. On the other hand, psychological support in rehabilitation improves caregivers' outcomes by reducing family strain, as well known, healthier caregivers represent a valuable resource for their loved ones. Further studies are needed to deepen the psychological sphere of LVAD patients and carers.

THE EBERSTADT STUDY. ANALYSIS OF AFFECTIVE SYMBOLIZATION IN A GERMAN NEIGHBORHOOD

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Abstract

This paper illustrates a case study about Eberstadt Süd, a suburb of the city of Darmstadt known for a large presence of immigrants and social problems related to unemployment and alcohol abuse. The present study had the aim to explore the affective symbolizations shared among people within the neighbourhood because, as literature declares, the possibility to find out new local developmental strategies is related to the understanding of the collusive dynamic which organize the relationship of people sharing the same context. Twelve stakeholders were administered a semi-structured interview about the quality of life in the neighbourhood, the relationship with the near city, and future developing strategies. The interviews were audio-recorded, transcribed and analysed through Emotional Text Analysis. The analysis detected four clusters of words (CL). CL1 evokes a physical place still under construction; people living there represent themselves like elders needy for help. CL2 describes a feeling of judgement and devaluation from the main city, emotionally perceived as far and separate; people living in Eberstadt are represented as weak and defective. CL3 refers to the difficulties to develop a sense of citizenship in people living in Eberstadt, seen as being an active and productive part of the whole community. The projects made by social services are felt as incapable of bringing substantial changes in the neighbourhood. CL4 seems to refer to the reassuring, comfortable dual relationship between a child and his/her fundamental caregiver. Institutions are emotionally perceived as good mothers supporting their children. The results highlight that the relationship between Eberstadt and the near city of Darmstadt is experienced as asymmetrical. The neighbourhood is symbolized as little and needy, whereas the city is big, adult and powerful. These results were discussed with the stakeholders, giving them the opportunity to imagine possible future development.



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