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By Tambelli Renata & Trentini Cristina

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POSTER SESSION

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Session A

PRIMARY CARE PSYCHOLOGY IN VENETO REGION: PRELIMINARY RESULTS

Bianco Francesca (1), Benelli Enrico (1), Simonelli Alessandra (2), Santinello Massimo (2), Michieletto Nicola (3), Laugelli Emilia (4), Canale Natale (2), Santoro Paolo (2), Sambin Marco (1)
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Mental illness accounts for 14% of the total global burden of disease. The prevalence of psychological suffering is greater than the actual request for clinical consultation in Europe. Health care system has not yet adequately responded to the burden of mental disorders. To cope with mental disease, WHO proposed the European Mental Health Action Plan (EMHAP) 2013-2020, which recommends to improve access to safe, competent, effective and community-based mental health services. Primary Care Psychologist (PCP) can reduce the gap between the need of psychological treatment and its provision. To improve the access to psychological care, a new mental health service was created in two public health care districts of Veneto Region: ULSS 7 and ULSS 4. The service provided direct referral to a co-located PCP working together with the general practitioner (GP). This study presents the preliminary results of the first experimentation. Primary outcome was well being, measured pre-post PCP interventions with patient's self reported PGWBI. Secondary outcome was the treatment considered by the GP as the best alternative to the referral to the PCP and the satisfaction. Qualitative data were gathered through interviews and focus groups with GPs and PCPs. All data were compared with EMHAP guidelines. 170 people accessed the service. Primary outcome showed an improvement in PGWBI score after the PCP intervention. Secondary outcome showed that GP avoided drugs prescriptions (49%), referral to other services (32%) and laboratory tests (12%) through the referral to the PCP. Patients, psychologists and GP reported great interest and high satisfaction with the service. PCP interventions were effective in improving well-being and reducing drugs prescriptions and laboratory tests. The results stress the importance of the PCP implementation, to intercept unexpressed psychological needs.

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A PILOT OUTCOME STUDY ON PSYCHOLOGICAL TRAINING GROUPS IN THE ACADEMIC SETTING

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The group is largely adopted as a professional training context as it supports the shaping of specific competences via intersubjective exchanges (Pojaghi, 2000). Here we present a mixed method pilot study on two different academic group training programs proposed within the Master Degree in Clinical and Health Psychology at the University of Florence in 2015. The participants included 98 students (90% females, aged 25±3 years) who spontaneously decided to attend either a Phenomenological Group (PG) activity (N=46), focusing on discussing testimonies from health care professionals and parents in a Pediatric Neurosurgery Ward (Lauro Grotto, Tringali, Papini, 2014) or a Team-Working (TWG) activity, focusing on development of a Health Psychology intervention project (N=52). Both programs involved a collective presentation of the training programs, 6 sessions of small group activity and a feedback meeting in the large group. The quantitative assessment was designed as a pre-test post-test comparison including relational and interpersonal dimensions: the Attachment Style Questionnaire (ASQ, Feeney et al., 1994), the Inventory of Interpersonal Problems (IIP-32, Horowitz et al., 2000), the Rosenberg Self-esteem Scale (RSES, Rosenberg, 1965), the Relationship Questionnaire (RQ, Bartholomew & Horowitz, 1991) and the Group Questionnaire (GQ, Krogel, 2008). In the PG students, a variation in the dimension of the Self-with-respect-to-the-Other (IIP-32) reached statistical significance ($t=3.02$, $p<0.01$), while in the TW students we observed a significant reduction of the Dominance/Control subscale of the IIP-32 ($t=-2.27$, $p<0.05$) and of RES ($t=-2.79$, $p<0.01$). Only the PG students took part in the qualitative investigation which explored the perceived impact of the group activity on the participants with a written questionnaire. A consensual content analysis produced detailed phenomenological categories in the domain of personal Needs and Resources perceived by the participants.

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WRITE YOUR POST. PARENTS AS DIGITAL STORYTELLERS FACING WITH CHILDREN'S AUTISM: A QUALITATIVE ANALYSIS OF AN ITALIAN WEB FORUM

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Autism Spectrum Disorders (ASDs) have psychological outcomes on parents and their daily lives (Bromley et al., 2004; Chuang & Yang, 2010; Roffeei et al., 2015). Parental websites offer opportunities to develop new skills by offering and receiving social support and by sharing experiences (Shilling et al., 2013; Kirk et al., 2015). Moreover, online groups of parents in similar situations are a source of health-related and medical informations (Plantin&Daneback, 2009). We aim at exploring why and how parents of ASDs children use emergenzautismo.org forum and the content of its messages. Data are analyzed through the Latent Thematic Analysis (Braun&Clarke, 2006) which allows to identify and interpret main latent themes. A total number of 2469 messages including 42 threads and 2427 comments were gathered from 2012 to 2015. The analysis points out 44 codes organized in 11 sub-themes linked to 4 themes: Doing - Spectrum - A group and a movement - Perspective Know-how. These main latent themes primarily inform about deprived parents of disappointing children and their efforts to face with the "spectrum" i.e. the never-ending adjustments their life needs. Parents, as researchers and therapists, are involved in breathless daily planning, continuously occupied doing something, according to their hope and higher expectations, in order to fight against their guilt and against a parasite, the illness. The functioning of this specific group highlights internal cohesiveness vs the Others, like a political movement which reassures as it guides and censures.

THE IMPORTANCE OF AUTO-HYPNOSIS TO REDUCE STRESS

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Hypnosis has been demonstrated to reduce pain and stress having a significant impact on acute procedural pain and chronic condition (Patterson D. R., 2003). Chronic pain causes substantial suffering (Melzack, 1990) and causes also a big costs to society for example in areas such as health care (Turk & Okifuji, 1998). Numerous studies infact have demonstrated the efficacy of hypnotic

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analgesia for reducing pain in the laboratory setting and many case reports (E. R. Hilgard & Hilgard, 1975). The purpose of the study was to examine change in perceived stress in participants who completed a 4-week course in hypnosis stress reduction. Auto-hypnosis skills could lead to an important and deep change in stress level. Participants were 10 adults with problematic levels of stress related to chronic pain, in particular chronic headache. They participated in a 4 week hypnosis training. They completed weekly self-report assessments of auto-hypnosis skills and perceived stress. An important change about auto-hypnosis skills and perceived stress from pre and post treatment seems to be occurred. The benefits of hypnosis training about outcome of stress reduction seems to be very strong and also mediated by an higher level of auto-hypnosis capacity.

COUPLE INTERSUBJECTIVITY: A PREDICTOR FOR MARITAL SATISFACTION

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Intersubjectivity perspective is mainly focused on the relational matrix that occurs in the dyadic open system caregiver-child (Stern, 1995; Beebe, Lachmann, 2015). Intersubjectivity perspective suggests that the origin of mind is dialogic and dyadic with an ongoing emotional coordination of Self with a significant Other. This simultaneous and complementary mechanism promotes mutual adjustment. The continuous co-construction is feature of caregiver-child dyad but it could also be explored in the field of romantic relations (Carli et al., 2009). Our goal is to explore the influence of couple intersubjectivity on marital satisfaction, in terms of a predictor. This study is based on a sample of 152 heterosexual couples (MH=31,60 years; MW=28,89 years; relationship length M=45,67). We used a questionnaire composed by two different scales: Couple Intersubjectivity Scale (CIS; Chiarolanza, 2015) and Dyadic Adjustment Scale (DAS; Spanier, 1976). We verified bivariate correlation between the two scales and calculated the regression model in order to understand the possible role of couple intersubjectivity as a predictor. Analysis showed that husbands were more satisfied when they perceived more intersubjectivity in the couple. Wives scores did not influence marital satisfaction for husbands. Again, results showed that wife marital satisfaction is significantly influenced by own couple intersubjectivity; interestingly, we observed that there is a tendency of husband couple intersubjectivity to predict marital satisfaction in wives. According to these results, it is possible to confirm our principle hypothesis that couple intersubjectivity could be consider as a predictor of marital satisfaction. Besides, it is possible to argue that a satisfying relation is characterized by partners' ability to share positive mental and emotional states inside the couple.

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PROMOTING POST-TRAUMATIC GROWTH IN CANCER PATIENTS:
A STUDY PROTOCOL FOR A RANDOMIZED CONTROLLED TRIAL OF GUIDED
WRITTEN DISCLOSURE

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Cancer is a traumatic experience that violates the meaning system allowing people to perceive a coherent world. It triggers a search for meaning, namely the process through which individuals restore a new sense of themselves, integrating the illness into their life context. No previous studies have focused on meaning making interventions to promote Post-Traumatic Growth (PTG; i.e., the positive changes that may follow a trauma) after the cancer experience. This study investigates the hypothesis that a Guided Written Disclosure Protocol (GWDP), focused on facilitating emotional expression and cognitive elaboration of the traumatic event, promotes PTG through a process of meaning reconstruction. The study includes 250 breast and colon cancer patients randomized to GWDP or to an active control condition after adjuvant chemotherapy. Both conditions consist of three 20-minute writing sessions. GWDP participants are invited to: (1) recall chronologically facts concerning the illness; (2) label the emotions related to those facts, appraise changes in priorities, reflect on their actual feelings and coping mechanisms; (3) reflect on how the illness have changed their view about life and themselves, teaching them to cope with possible future difficulties. Control participants write about their daily routine concerning the past week. Patients complete questionnaires at three time points: pre-, post-intervention and 6-month follow-up. We expect that, after the intervention, participants in the GWDP group will have higher scores on the PTGI, as well as lower scores on both the Impact of Events Scale and the Anxiety and Depression Scale, as compared to the control group. If successful, the study will support the efficacy of GWDP in facilitating PTG and in reducing distress symptoms in cancer patients after adjuvant chemotherapy.

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WHY I GOT ILL? THEORIES OF ADDICTION AMONG PEOPLE IN TREATMENT FOR THEIR ALCOHOL OR DRUG ABUSE.

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According to a socio-constructivist perspective, broader contextual dimensions are merely as constitutive of people's ways of thinking and communicating about addiction and its identity, as the here and now of the systems of activities where people live their experience. Health services and self-help groups are among the major social arena wherein one gets acculturated to particular ways of describing, understanding, and evaluating experiences associated with addiction.

The study explores the way in which users of 3 different help services talk about their problem with alcohol or drug abuse, the help they have received and the (goal of) recovery process.

The study material consists of 26 semi-structured interviews: 4 to the users of a rehabilitative community, 10 to the users of a public health service for treatment of addiction, and 12 to the members of an Alcoholics Anonymous group. A Lexical Correspondence Analysis (LCA) and a Cluster Analysis (CA) were applied to the verbatim transcripts. LCA lead to 2 factorial dimensions. The first dimension refers to the main subject of the users' speeches and opposites a focus on the substance, which tends to characterize users of public health services, and a focus on the rehabilitation program, which tends to characterize the members of the A.A.. The second dimension concerns the aspects to which the interviewed mostly refer to in order to describe themselves: familiar identity versus addicted identity. The former tends to characterize the users of the community center; the latter refers to the users of the public health services. The cluster analysis allows to identify 5 main thematic nucleus: 1) I am addicted, why?; 2) environment and addiction; 3) relationships and addiction; 4) rehabilitation program; 5) background of my addiction.

In conclusion, there are some differences in the way people from different help contexts attribute meaning and sense to their experience. Nevertheless, there is a common core: addiction as a matter of individual health, with the social or cultural concern playing a marginal role.

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THE EXPERIENCE OF MEDICAL AND NURSING STAFF IN A NEONATAL INTENSIVE CARE UNIT (NICU)

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Preterm birth represents a potentially traumatic event that involves not only infants and their parents but also the NICU staff, that devote so much of themselves to very vulnerable infants (Campbell, 2000). The nurses and the doctors of the NICU daily face a painful reality and experience many difficulties caring so small children (Green et al., 2014): a source of high stress for them, that can adversely affect their skills and personal well-being. The aim of our study was to explore emotions, attitudes and experiences of health professionals within the NICU. The sample consisted of 128 subjects (82 nurses and 46 doctors, 113 females and 15 males) from four different hospitals. Mean age was 42,8 years (SD=10,1). They completed two questionnaires: a socio-demographic sheet and a questionnaire specifically built for research that explored four areas: staff-parent relationship, staff-infant relationship, staff-colleagues relationship and personal attitudes on work. More than half of the sample described a relationship with parents characterized by an absence of conflict (60,9%) and by a reciprocal communication, nevertheless a part of them (27,3%) often experiences difficulties to share deeper themes, like the possible death of the infant. We found that 56,3% of the sample was emotionally involved towards the child, but 51,6% considered necessary an emotional detachment. Only 46,9% reports a good communication and interaction with colleagues, while 72,6% feels not enough adequate to take care of infants. Findings underlined the difficulties connected with this working experience and highlighted a need for continuous professional training and, in some cases, for psychological support, in order to promote the well-being of infants, parents and staff.

Key words: prematurity, NICU nurses, NICU doctors

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RELATEDNESS ACROSS OVERSEAS BORDERS: CONCEIVING TRANSNATIONAL SURROGACY IN GAY FATHER FAMILIES

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Over the last decade, an increasing number of Italian gay men wishing to become parents have been forced by law to pursue surrogacy abroad. As a consequence, they experienced physical distance from the surrogate mother and their developing child for the entire pregnancy. To date, surrogacy in gay father families has mainly been studied in relation to changes associated with the transition to parenthood (Bergman et al., 2010), motivations for seeking extraterritorial surrogacy (Norton et al., 2013), kinship, gender and economic implications (Murphy, 2015; Riggs, Due, 2014). The present study aims to fill this gap in the literature by exploring how Italian gay couples deal with their transnational surrogacy process. Participants were recruited through snowball sampling within Rainbow Families. Couple and individual interviews were carried out with thirty Italian gay-partnered fathers who conceived their children through transnational surrogacy in America or in Canada. Fathers ($M_{age} = 44.75$; $SD_{age} = 5.79$) were well-educated professionals, with middle to high socioeconomic status. Children were aged between two and six years ($M_{age} = 3.56$; $SD_{age} = 1.15$). An Interpretative Phenomenological Analysis (Smith et al., 2009) was performed in order to identify the emergent themes in the narratives. Findings indicated that three inter-related themes may be helpful to understand the meaning-making of the surrogacy process through time: 1) the loss of the sense of control over the pregnancy; 2) the role played by the surrogate mother in facilitating fathers to feel connected with their developing child and in building their family; 3) the close relationship with the surrogate mother during the pregnancy and after the child's birth. The present study sheds light on the impact of restrictive legislation on daily family experiences and allows both clinic staff and mental health professionals to support more adequately prospective gay men who seek parenthood via transnational surrogacy.

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THE FOREIGN STUDENT STATUS: THE INTERVENTION OF PSYCHOLOGICAL COUNSELLING IN THE UNIVERSITY CONTEXT

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The foreign student status, the vulnerabilities inherent in post-adolescence and the precariousness of the current socio-economic environment may represent risk factors for the onset of emotional problems which could invalidate the learning ability and performance of university young adult population. The psychodynamic counseling is an opportunity for the university students with psychological difficulties, and it can also contribute to academic outcomes, increasing psychological resilience and promoting the awareness of personal resources. The interest in outcome studies of psychodynamic counselling is quite recently increased and there is evidence that this intervention is an opportunity for helping student to restart a previously blocked developmental process. Our main objective is to illustrate a case study of C., a foreign student, who asked for help at the "Psychological Counseling Center" of Sapienza University of Rome. The student's personality was measured using the Shedler-Westen Assessment Procedure (SWAP-200); the psychopathological risk was explored by the Adult Self Report (ASR); and both the mental health functioning and the final outcome were assessed with the Outcome Questionnaire-45 (OQ-45). The psychological-clinical evaluation of C. revealed an adjustment disorder, with mixed anxiety and depressed mood according to DSM-5 criteria. Personality assessment using the SWAP-200 has shown the presence of obsessive (T= 59.42) and narcissistic (T = 58.42) traits. It has been observed a complete remission of symptoms as well as a significant improvement on OQ-45 (first evaluation total score = 77; fourth evaluation total score = 58). The psychological counselling intervention appears effective in facilitating a resolution of symptomatology and provide support in overcoming difficulties including academic performance.

Key words: Psychological counselling, university students, foreign students

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IDENTIFYING THE INFORMATIVE FUNCTIONS OF EMOTIONS IN THE DOCTOR –
 PATIENT RELATIONSHIP. AN INQUIRY IN PEDIATRIC PRIMARY CARE

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This paper is born from a reflection on the role of the psychologist in primary care using parallel or joint assistential settings (Solano, 2011; Bertini, 2012; Freda et al. 2015). In particular, we try to understand his/her function of promotion and support of the dialogue in Doctor – Patient Relationship. In pediatric primary care, health providers dialogue with (at least) two users (parent and son/daughter) and conversations about child often elicit many anxieties. In other papers (Dicé et al., submitted; Freda et al., 2015; Dicé & Savarese, 2014) we already highlighted that little space is dedicated to these emotions during medical practices. In this study, we documented conversations in 265 visits (a sample size larger than that used in previous researches). To analyze conversations, we use the Verona Coding Definitions of Emotional Sequences (VR-CoDES) to identify cues (expressions in which emotions are not clearly verbalized) and concerns (clear verbal expressions of unpleasant emotional states) expressed by patients, as well as the responses of health care providers to these signals (Del Piccolo et al., 2010). To analyze the interdependence relationships between the matrix of cues/concerns and the matrix of responses, we use Sparse Canonical Correlation Analysis (Hastie et al., 2015), which computes pairs of components, one for each group of variables, by maximizing the Pearson correlation coefficient between them, while performing variable selection. We identify conversational interaction patterns with a focus on cues/concerns and responses. This patterns show, in the Doctor – Parent Relationship, many difficulties to explore the emotional field and dialogues quickly interrupted with reassurances. Instead, in the Doctor – Child Relationship, when explicitly expressed, emotions are recognized in their informative function. Generally, it appears a very prescriptive medical practice that is not sufficiently aimed at developing parenting skills, which are useful to the care of child.

MIRRORING FUNCTIONS IN GROUP COUNSELLING: HOW DO MEMBERS OF THE
 GROUP SUPPORT SELF CHANGE?

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GGroup counselling is one of the approaches that has been shown to be an effective form of treatment for underachieving students (Burlingame et al. 2004). Due to the mirroring functions

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(Foulkes, 1975; Pines, 1983) of members of a group, the subjects can learn from each other, normalize their experiences and produce change about themselves (Yalom & Leszcz, 2005). This is a pilot study that analyzes the mirroring functions of members of a group counselling in fostering self change, by adopting the perspective of the Innovative Moments Coding System (IMCS) (Gonçalves et al., 2011), a reliable method for studying change by tracking narrative innovations along the intervention. We analyzed the transcripts of seven sessions of one group counselling for 7 underachieving economics students (F=5; M=2; Mean Age=27.86; SD=7.06) who participated in "Imparare ad Imparare" group counselling of the SInAPSi Center (University of Naples Federico II). Three categories of Innovative Moments (IMs) were coded with different saliencies: a) Self-IMs (e.g. Subjects produce narrative innovations about themselves) (79%), b) Other-IMs (e.g. Subjects produce narrative innovations about another member of the group) (12%), c) Group-IMs (e.g. Subjects produce narrative innovations about the group conceived as a whole) (9%). Moreover, we analyzed the narrative sequences where Self, Other and Group IMs were inserted and if Other and Group IMs, by preceding or following Self IMs, allowed the subjects to produce narrative innovations about self change (Self-IMs). The findings suggested that Other and Group IMs were inserted in the 88% and 92% in sequences and contributed in promoting self change (Self IMs) by assuming three mirroring functions: a) reinforcing change, b) interpreting change, and c) connecting the Self and the Group in the change process. The implications of these results for studying mirroring functions and self change in group counselling in Higher Education are discussed.

Key words: Group counselling, mirroring, self change, innovative moments

THE ROLE OF SUPPORTIVE AND INTERPRETATIVE INTERVENTIONS IN FOSTERING REFLEXIVITY AND ACADEMIC ACHIEVEMENTS: A PROCESS RESEARCH USING THE PSYCHODYNAMIC INTERVENTION RATING SCALE IN COUNSELLING

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There is a lively debate in psychotherapy research on when and how clinical psychologists may use supportive and interpretive interventions and with which types of clients (Dimaggio, 2010; Wallerstein, 1986). Moreover, many scholars question on which tools have to be adopted to measure clinician interventions (Hersoug et al., 2004; Waldron, 2004) and if supportive or interpretative actions are better at producing good outcomes (Lingiardi, 2008). This work aims to explore this issue in counselling in Higher Education by analyzing how supportive and interpretive

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interventions emerge along two group counselling processes with different outcomes. The counselling paths were aimed at promoting reflexive competences with underachieving university students and at improving their academic performance. Counselling adopted a narrative multimodal methodology, the Narrative Mediation Path (Freda et al., 2016), which combines in a single method four narrative modes (Metaphoric, Iconographic, Writing, Bodily).

Previous outcome measures showed that the two groups, although starting from the same level of reflexive competence, showed different outcomes both in terms of reflexivity and academic performance. The PIRS (Psychodynamic Intervention Rating Scale) (Cooper & Bond, 2002) was adopted to analyze, along the four narrative modes, the interventions of the clinical psychologist who led both the counselling paths. The process analysis was performed by two independent coders (Cohen Kappa=0.89). The results showed that, consistent with the aim of the intervention, the supportive actions were the most used in both counselling. However, in the counselling a good outcome, interpretive interventions were used more (89.48% vs. 84.9%) and in the early modes (Iconographic vs. Writing).

The need to balance the type of interventions and to regulate their timing will be discussed with specific reference to the counselling area that is commonly known for its predominantly supportive function.

Key words: group counselling, supportive/interpretative interventions, reflexivity, process research

PERCEIVED PARTNER SUPPORT, BODY DISSATISFACTION AND MARITAL SATISFACTION IN PREGNANT WOMEN AND IN THEIR PARTNERS

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Body dissatisfaction during pregnancy is of particular importance because it can potentially lead to unhealthy eating and weight loss behaviors (Fairburn & Welch, 1990). The aim of the present study was to analyze the contribution of body dissatisfaction to marital satisfaction in pregnant women and in their partners. 50 pregnant women and their partner participated in the study (Women mean age: 32.15; SD:4.9; Men mean age 34.62; SD: 5.9). They answered a questionnaire including measures of marital satisfaction (Ward et al., 2009; $\alpha = .80$ (women); $\alpha = .82$ (men), of perceived partner support (Brassard et al., 2011): $\alpha = .85$ (women and men) and of body dissatisfaction during pregnancy (Kline, 1986; Skouteris et al., 2005). Two hierarchical regressions analyses were conducted considering as outcome, respectively marital satisfaction perceived by women, and

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marital satisfaction perceived by men. In both regressions, perceived partner support and women body dissatisfaction (in regard to bust, stomach and hips) were considered as predictors. In the first regression, perceived partner support ($\beta=.45$; $p<.01$) and hips body dissatisfaction ($\beta=-.24$ $p<.05$) predicted women marital satisfaction [$R^2=.35$]. In the second regression only perceived partner support ($\beta=-.52$ $p<.01$) predicted men marital satisfaction [$R^2=.31$]. Perceived partner support influences marital satisfaction in pregnant women and in their partners. Body dissatisfaction may contribute in explaining marital dissatisfaction in women. Longitudinal studies are need to better investigate this issue.

PREDICTORS OF THE INTENTION TO EXCLUSIVE BREASTFEED IN PREGNANT WOMEN

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Exclusive Breastfeeding (EB) has many health benefits in the short and long term, both for infants and mothers (American Academy of Pediatrics, 2012). The WHO recommends EB for at least the first 6 months of infant life (WHO, 2007). Aim of this study was to investigate the predictors of EB intention during the first 6 months of infant's life considering as a framework the Theory of Planned Behavior (TPB; Ajzen, 1991). 134 pregnant women (mean age=32.5; SD=5,3) completed a questionnaire during the second and third trimester. The questionnaire included the Iowa Infant Feeding Attitude Scale ($\alpha: .81$) (De la Mora et al. 1999) and measures of subjective norms ($\alpha: .92$), perceived behavioral control (PBC; $\alpha: .75$) and intention to breastfeed in the first 6 months after infant birth ($\alpha:.97$). The results of the Anovas reveal that attitudes toward EB were significantly more negative among primiparous [$F(1,132)=7.711$; $p<.01$] and that they perceived more social pressure to breastfeed [$F(1,132)=5.149$; $p<.05$] compared to multiparous. No other significant differences emerges between for the other variables considered (PBC, intention).

With the aim to evaluate which determinants predict the intention to EB for the first 6 months, hierarchical regression analyses were performed. Results show that attitudes ($\beta=.33$; $p<.05$), subjective norms ($\beta=.27$; $p<.005$) and PBC ($\beta=.29$; $p<.05$) predict exclusive EB intention in the primiparous group [$R^2=.48$] while age ($\beta=.22$; $p<.05$), attitudes ($\beta=.27$; $p<.05$) and subjective norms ($\beta=.42$; $p<.01$) predict the intention to EB in the multiparous groups [$R^2=.54$] The TPB provided a useful framework with which to examine the factors underlying breastfeeding intentions. Findings suggest that EB promotion intervention during pregnancy in primiparous and multiparous may differently target attitudes, subjective norms and perceived behavioral control, when attempting to increase breastfeeding uptake.

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VALIDATION AND PSYCHOMETRIC PROPERTIES OF THE ITALIAN MORAL DISTRESS SCALE-REVISED (MDS-R)

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The inner life of healthcare professionals has a profound impact on patient care, decision making and doctor-patient relationships. Moral distress has been defined as the painful feeling that occurs when professionals cannot carry out what they believe to be the right action in patient care because of internal or external constraints. Most of the quantitative studies on moral distress have been based on the Moral Distress Scale (MDS) and its revised version (MDS-R). However, these two scales have never been validated through a process of factor analysis. In this study we explored the factorial structure of the MDS-R and developed a valid and reliable scale through confirmatory factor analysis. The MDS-R was translated into Italian and administered to 184 Italian critical care physicians, nurses and residents along with a measure of depression (BDI-II) to establish convergent validity. Exploratory factor analysis (EFA) was conducted to explore MDS-R factorial structure. Items with low ($\leq .350$) or multiple saturations were removed. The resulting model was tested through confirmatory factor analysis (CFA). The Italian MDS-R is composed of 14 items referring to 4 factors: Futile care, Poor teamwork, Deceptive communication, and Misconduct. This model accounts for 59% of the total variance and presents a good fit with the data (RMSEA=.06; CFI=.95; TLI=.94; WRMR=.65). The Italian MDS-R presents good reliability ($\alpha=.81$) and moderately correlates with BDI-II ($r=.293$; $p=.000$). The Italian MDS-R is a valid, reliable and economic instrument to assess moral distress across critical care clinicians. Further research is needed to explore protective factors able to buffer the negative effects of moral distress. The scale could be a useful instrument to assess the efficacy of preventive interventions.

By Tambelli Renata & Trentini Cristina

SIBLING RELATIONSHIPS, PERSONALITY TRAITS, EMOTIONAL AND BEHAVIORAL DIFFICULTIES IN AUTISM SPECTRUM DISORDERS

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For many years, studies on disabilities inside family groups focused exclusively on the parents of children with disabilities. It was only in the 1980s that research started to look at siblings, investigating if, and how, the presence in the family of a child with disabilities might affect the development of the other siblings. Our goal was to investigate whether the presence of a sibling with an outstanding diagnosis of an ASD was associated with the development of emotional, behavioral and personality difficulties in the other siblings of the family. Our sample was made up of 86 participants, divided into two groups: parents and siblings of an individual with an Autism Spectrum Disorder. The parent group consisted of 43 participants (32.6% male, 97.4% female, aged between 33 and 53 years, average: 43.55; SD = 5.22). The sibling group consisted of 43 participants (51.2% male, 48.8% female, aged between 6 and 15 years, average: 10.19; SD = 2.88).

Compared to the normative population, the siblings were characterized by higher levels of emotional symptoms, empathy, teaching and avoidance and by lower levels of involvement, rivalry and aggressiveness. In line with the literature, higher levels of anxiety were found in our sample, as well as less self-expression, higher egocentrism, less tendency to be obedient and greater tolerance. Concerning the association between personality traits and sibling relationships, numerous significant correlations emerged. Our study found that: anxiety correlates positively with the avoidance ($r=.308$; $p<.05$) and rivalry subscales ($r= 0.365$; $p<.05$); confidence correlates inversely with the rivalry ($r=-.371$; $p<.05$) and aggressiveness subscales ($r=-.379$; $p<.05$), while energy correlates positively with involvement ($r=.488$; $p<.01$) and negatively with avoidance ($r=-.364$; $p<.05$). Given the considerable impact that having a sibling with an Autism Spectrum Disorder has on the family's relational dynamics and on the development of the other siblings, it is important to include siblings in future research and intervention protocols.

By Tambelli Renata & Trentini Cristina

EVALUATION OF THE IMPACT OF A CLINICAL SEMI-OPEN GROUP ON THE PSYCHOLOGICAL HEALTH OF PATIENTS WITH HEART ATTACK

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According to World Health Organization data (2014) diseases related to the circulatory system are confirmed leading causes of death in the world, including Italy. The scientific literature of the past fifty years has shown considerable interest in the role played by psychological and psychosocial factors in the etiopathogenesis, the maintenance and the progression of the heart disease. Psychological intervention is now recognized internationally as part of cardiac rehabilitation programs. The study aims to assess the impact of a psychodynamic intervention group on clinic and psychological health of heart attack patients, functional to the recognition and the development of representational dimension of identity and emotional related to the disease and to changes in life it entails. The patients attended 12 meetings conducted by a clinic psychologist. ANOVA analysis was applied to clinical and psychological data collected. At the end of the meetings there have been improvements to the physical aspects and lifestyles, the perceived quality of the care system worsened and there was a trend of emotional reactivity to shrink. The group seems to have a facilitating role with respect to the ability to process the experience of illness. A Lexical Correspondence Analysis (LCA) and a Cluster Analysis (CA) were applied to the verbatim transcripts. LCA lead to 2 factorial dimensions. The first dimension refers to the nature of changes and opposites a focus on the behavior on lifestyles and a focus on the social condition of cardiac pathology. The second dimension concerns disease management: practical versus emotional. The CA allows to identify 4 main thematic nucleus: disease management; dialogue with the health care system; myocardial infarction; habits and lifestyles. In conclusion, clinical groups gives the opportunity for patients to express their feelings on different aspects of disease management, from lifestyles changes to the awareness of a new social status.

By Tambelli Renata & Trentini Cristina

**PROMOTING INCLUSION AND WELL-BEING AT FEDERICO II UNIVERSITY:
A PRELIMINARY SURVEY**

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The inclusion in HE has a key role in the personal and social wellbeing, in the retention in studies, prevention of drop-out and low performance. Within an health promotion background, the study aims to construct a quali-quantitative questionnaire as a "thermometer" to measure the inclusion and active participation of students to university. In a preliminary way, 230 questionnaires were administered to students attending courses in Psychology at Federico II University, Naples. We discuss the results emerged from the analysis of open answers of students about the difficulties lived in relation to the whole university path (up) and to a specific exam (se) to highlight the different contexts of meanings. We performed, through the T-Lab software, a cluster analysis and the projection of clusters and variables on the factorial plane. Results highlight three contexts of meanings: the big absent: finding the study method (44%) (SM); the difficulty to find the equilibrium (28%) (DE); the difficulty to manage the overload (28%) (DO). From factorial analysis emerged two factors. Strategic Positioning (STP) that opposes a more complex plan (DE/DO) with a specific one (se/SM). This factor shows two distinct positioning part of the same continuum as they are founded on the need to have a strategy to deal with (up) and (se). Self Positioning (SP), as search, represents the trajectory to deal with the confusion (DE/SM), that gives a passive positioning, to acquire a subjective positioning within an agentive dialogue with university. SP highlights, as a continuum, the attempt to integrate the different self-roles: student/person. The results offer, not only the limits, but also the direction of development to calibrate the interventions of the SInAPSi in a targeted way, supporting health inclusive processes and active participation, in line with the peculiarity of the context.

By Tambelli Renata & Trentini Cristina

OBESITY AND SEXUAL HEALTH: RESULTS FROM A PRELIMINARY STUDY ON WOMEN ASKING FOR BARIATRIC SURGERY

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Obesity is an increasing epidemic which adversely affects physical, emotional and psychosocial problems. Moreover, it can also adversely affect sexual health, even if the effects on women have not been clearly defined. This study investigates psychological and sexual symptoms, alexithymia, sexual dysfunctional beliefs, body image and quality of life in a group of obese women, in order to improve general taking care, quality of life and sexual health. Data were collected on 143 heterosexual women asking for bariatric surgery at "Sapienza" University of Rome (Dept. of general surgery) from September 2015 to April 2016. A self-administered questionnaire was given during the psychological screening for surgery composed by sociodemographic questionnaire, SCL90-R, BDI-II, STAI-Y, TAS-20, FSFI, SDBQ-W, BUT and TSD-OC. Women asking for surgery reported high levels of BMI and low levels of education. More than half (n=79) did not use any contraceptive tool. Multiple regressions showed a relation between BMI and Hostility scale of SCL90-R ($r=-,184$). Results revealed a damaged sexuality due to a severe presence of sexual symptoms (FSFI score ≤ 23). Women who used a contraceptive method (e.g., condoms, pills, etc.), compared with the others, reported better scores in arousal, lubrication, orgasm, satisfaction, sexual pain scales and less suffering from physical obesity-related pain during everyday life. This preliminary study found out a complex scenery in which sexual symptoms were extremely represented in women recruited. Sexuality is often forgotten in obesity condition, even if a protective role of sexuality in chronic diseases is demonstrated in literature. For instance, the use of contraceptives seems to improve sexual health and quality of life. These results have important implications in both clinical and research field, showing the need for a deeper understanding and speaking about sexuality for a comprehensive taking care.

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ALPHA ASYMMETRY NEUROFEEDBACK FOR THE REDUCTION OF NEGATIVE AFFECT

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A large number of studies have established that the right hemisphere is associated with more negative emotion and memories, whereas the left hemisphere is more involved in positive affect. On this basis neurofeedback has been proposed as a possible intervention aiming at reducing right and increasing left frontal activity in order to improve emotional and mood dysfunctions. The present study examined whether a neurofeedback training designed to increase the activity of the right relative to the left alpha frontal band would modulate alpha asymmetry and, in turn, reduce negative affect in a non-clinical sample. 32 right-handed female students were randomly assigned to receive neurofeedback training designed to increase the right (F4) relative to the left (F3) frontal alpha (asymmetry group; N = 16) or to increase frontal (FZ) alpha activity (active control; N = 16). Both trainings consisted of five biweekly 40 min sessions. The outcome was assessed as changes in frontal alpha asymmetry ($\ln[F4] - \ln[F3]$) and frontal alpha (FZ) activity and in the Positive and Negative Affect Score (PANAS), Beck Depression Inventory (BDI), and Beck Anxiety Inventory (BAI) scores from pre- to post-training. Asymmetry group showed a specific increase in the right relative to the left frontal alpha activity from pre- to post-training, while active control group showed no changes in electroencephalography activity. A reduction in BDI scores emerged in both groups. PANAS negative scale and BAI scores were significantly reduced in the asymmetry group only from pre- to post-training. These preliminary findings confirm the effectiveness of frontal alpha asymmetry neurofeedback for modulating right alpha relative to left activity, as well as for reducing negative affect and anxiety symptoms.

SOCIAL - EMOTIONAL SKILLS IN MIGRANT TEENAGERS REUNITED

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According to OSCE 2014, in Italy the number of young immigrants who arrive at school age (6-15 years) or more late age (15-19 years) increased significantly. This situation, combined with a delay

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of family reunification, lays the Italian schools in front of challenges such as social exclusion, early school leaving and marginality. The national project Filomene was the first attempt to face the situation of young students newly reunited. This study aims to examine social - emotional skills in migrant teenagers before and after their participation to Filomene project. 16 teenagers (12-15), 8 for experimental group and 8 for comparison group arrived in Italy for less than 18 months. Participants were evaluated by three projective tests: "Family design", "The child in the Rain" and "The Tree." All were reassessed after 3 months. Data shown an improvement in experimental group regarding family relations and the perception of personal skills in dealing with difficulties, compared to the control group. In light of these results it was observed that giving space for listening to newly reunited teenagers has led to improve the perception of family relationships and to decrease the level of pessimism about their ability to cope with life's challenges.

PSYCHOLOGICAL IMPACT OF VIOLENCE, ADVERSITY AND SOCIAL MARGINALITY

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Discomfort, poverty and violence can take on different meanings, and may present using different facets, moving from the concrete to the symbolic. These conditions concern both the person's emotional aspects and identity. In particular, violence could manifest itself not only physically, but also through by the lack of economic, emotional, personal and social resources. The study takes place at Centro di Prima Accoglienza San Fedele in Milan and, according to the model of Lewin's action-research, the idea is to combine the research to the intervention. For evaluating the psychological impact of adversity and social marginality were used GHQ-12, CORE-OM. The sample is composed by 72 women (mean age: 42,80±12,81). Results show that 69,44% of them suffer the consequences of a violence form, more specifically the 47,22% concerns difficulty in economic independence, the 29,16% is "psychological violence" and the 25% is "physical violence". Data display significant levels of psychophysical impairment (17,79±5,29), personal well-being (18,76±8,32), global and social functioning (16,66±6,01), risk perception (3,88±5,81) and psychopathological symptoms (15,65±9,31). Moreover who have suffered psychological violence has higher levels of these variables ($t=-3,54$; $p=,001$), ($t=-2,47$; $p=,016$), ($t=-2,83$; $p=,006$), ($t=-2,76$; $p=,011$), ($t=-4,67$; $p=,000$). Whereas who suffer the consequences of a violence form, show more higher risk perception ($t=2,73$; $p=,008$) and more impairment in global and social functioning

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($t=-3,00$; $p=,004$) than who not. The results underline psychological consequences produced by a specific type of violence in women who evidence adversity and social marginality. According to different authors (Briere, 2004; Krantz&Garcia-Moreno, 2005; Krauss, 2006) work on these aspects could be relevant in order to identify the emergence of discomfort and provide preventive psychological interventions.

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PROMOTING WELL-BEING IN NURSING HOME OLDER ADULTS: A NARRATIVE INTERVENTION

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Well-being may protect the aging process and it could be associated with more physical and mental health. Depression and poor sleep are risk factors in older age. The study aimed at comparing levels of well-being and distress in older adults living in nursing homes with those living in community; and to test the efficacy of a positive narrative intervention for improving well-being versus a control art and craft intervention in a nursing home setting. Fifty older adults participated to the study (Mage mean age = 77.54; SD = 5.44, Male = 17, (34%). Thirty of them (mean Mage = 78.40; SD = 6.11; Male = 9, (33%) were living in nursing homes and were compared to the other twenty (Mage mean age = 76.25; SD = 4.05; Male = 8, (25%) community-dwelling older adults. Participants were assessed with Life Satisfaction Scale, Psychological well-being scale, Social Well-being Scale, Geriatric Depression Scale and four items measuring sleep quality. Those thirty older adults living in the nursing homes were then allocated to a positive narrative intervention group (N = 20) or to a control group (N = 10) and assessed at post-intervention. Older adults in nursing homes reported impaired well-being compared to community-dwelling older adults. At post-treatment, the individuals allocated to narrative intervention reported significantly increased well-being and sleep quality, compared to the control group. Results documented that older adults living in nursing homes are more vulnerable compared to community-dwelling older adults. Such vulnerabilities were amenable to improvement with a short group positive narrative intervention easily applicable in nursing homes.

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THE INFLUENCE OF EMOTION REGULATION ON EMPATHY AMONG NURSING PROFESSIONALS. AN ITALIAN STUDY

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Current investigation is an effort to examine the relationship between emotion regulation strategies in nurses working in several Italian hospitals and their empathy. Emotion regulation is a process by which an individual is able to modulate his or her emotional experiences. It encompasses the ability to filter emotions and engage in healthy emotion management strategies and provides additional information about how individuals adapt to stressors. Nursing professionals are prone to stress in their work. Among the main causes of stress, is the contact with suffering and death and lack of preparedness to deal with the emotional needs of patients and their families. Despite empathy is an essential characteristic required of people concerned with managing relationships, supporting social events, and improving the of nurse-patient relationships, nowadays there aren't studies evaluating the relationship between these two variables. A total of 116 nursing professionals participated in the study (96 female). The Difficulties in Emotion Regulation Scale (DERS) and the Interpersonal Reactivity Index (IRI) were applied to the sample. Beyond descriptive statistics, analyses of variance, mean differences and regression analyses were computed. Finding shows there is no significant difference in demographic variable such as sex and age on emotion regulation. Based on the results of regression analysis, findings show a differential effect of the DERS components in empathy dimensions. Emotion regulation has shown for nurses a facilitative factor for empathy. Our findings support the hypothesis that nurses with better emotion regulation strategies make easier the adoption of the psychological point of view of others and the experience of "other-oriented" feelings of sympathy and concern for unfortunate others. These comments could be especially important in training future nursing professionals in these abilities.

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THE LAUSANNE TRILOGUE PLAY IN THE EVALUATION OF ADOPTIVE PARENTS: A QUALITATIVE RESEARCH

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Since 2009 some psychologists, while working with adoptive families in difficulty with their adopted children, started to apply the Lausanne Trilogue Play (Fivaz Depeursinge Corboz Warnery, 2000) to analyze their parental coordination. Some recurrent disfunctions emerged and this discover oriented the hypothesis to prevent this risk before the child will get into his/her new family. To satisfy this goal we started a research finalized to verify the possible application of LTP during the evaluation of the future adoptive parents. The choice of this observational tool was related to the opportunity to introduce the study of the interactions within three members, one of them interpreted by a doll. The results of this first phase in our research put in evidence either the possibility to analyze in advance the parental coordination, also without pregnancy, either the necessity to assume a different perspective about the indicators more connected to a successful adoption.

Key words: evaluation, parental coordination, research

MOTHERS ACROSS THE BORDERS: A PHENOMENOLOGICAL APPROACH TO THE EXPERIENCE OF EAST EUROPEAN WOMEN IN TRANSNATIONAL MOTHERHOOD

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In Italy the increasing phenomenon of feminine migration mainly concerns East Europe (Istat, 2015). East European women, in order to support their families, emigrate searching for works opportunities which principally involve domestic or nursing duties. In a general redefinition of their own psychic and cultural identity (Grinberg & Grinberg, 1990), migrant mothers redefine also their motherhood adopting several strategies to negotiate their absence from home. In a social framework, commodification of love and technological management of family relations appear as dominant characteristics of transnational mothering (Orellana et al., 2011; Parreñas, 2001). Less investigated are emotional dimensions. The migration and transnational motherhood experiences were investigated through a semi-structured interview and analysed by the phenomenological-interpretative analysis (IPA) (Smith & Osborn, 2003; Smith et al., 2009). 5 women were selected on the basis of the following criteria: to be an immigrant woman who has lived in Italy at least from 10

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years with regular residency permit, to have abandoned their children in their country in a phase between the second childhood and the preadolescence. Met in an Onlus, all women have Ukrainian origins, 50 median age, are divorced and employed as domestic workers. Four superordinate themes emerged: It's up to woman, it's up to me; Suspended between two worlds; An empty which we can't narrate; The good mother must stay with her children. The motherhood experience is felt either as an heroic and feminine gesture which, through sacrifice, guarantees a better future, or a regret for the loss of essential steps of children life. The complex migration experience is represented as a suspension between two worlds, as well as a point of no return, in which the same Mother Earth, is perceived as a treacherous Mother.

THE CONTRIBUTION OF CLINICAL PSYCHOLOGY WITHIN INTEGRATED SCIENTIFIC PARADIGMS: "EL SALVADOR: MITIGAR PELIGROS VOLCÁNICOS" (SAPEVO) - TRAINING, MONITORING AND STUDY TO A PRELIMINARY ASSESSMENT OF THE DANGEROUSNESS OF SOME VOLCANIC AREAS OF EL SALVADOR. THE CONTRIBUTION OF PSYCHOLOGICAL SUPPORT TO THE POPULATION BEFORE AND AFTER A NATURAL EVENT

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Some of the most difficult social and political problems of the modern era were described as "wicked"; including the management of environmental, natural resources and risks. A critical frequently reported in the management of these problems is the exclusive use of technical approaches that neglect values and experiences, resources of the communities and the people involved. When the management of security and public health problems requires changes in knowledge, behaviours, and habits of the people concerned, integrated use of different scientific paradigms is a prime aim for achieving effective solutions. Building a collaborative partnership is a primary strategy for prevention science. In multidisciplinary contexts, clinical psychology plays a linking science role, facilitating the construction of shared professional representations and common

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languages among professionals who do not share a working epistemology. A similar process occurred in SaPeVo, a project strongly consistent with the theoretical and methodological framework described; it regards training activities, monitoring and study for the volcanic risk prevention in El Salvador. It comes as a proposal by the Institute of Geosciences and Earth Resources-CNR Pisa supported by Italian Agency for Cooperation and Development (MAECI-AICS). Training initiatives (volcanic monitoring and emergency psychology) were performed by Italian (UNIPA, UNIFI, UNIROMA1) and Salvadorian academic institutions at the El Salvador. The goal was to enable a department of the El Salvador University to build an integrated multi-disciplinary pilot system that responds to the risk with a first high scientific, psychological and operational competence group. The Dynamic and Clinical Psychology Department of Sapienza University, provided the training of psychological content, particularly relating the aspects of trauma and the development of the community resources. Will be presented goals, partners, beneficiaries and operating methods.

THE DOCTOR-COUPLE COMMUNICATION IN REPRODUCTIVE MEDICINE: A PILOT STUDY COMBINING THE ROTER ANALYSIS SYSTEM (RIAS) WITH THE ANALYSIS OF DIALOGICAL MOVES IN CONSULTATIONS (MEDA)

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Communicational and relational aspects in assisted reproductive technology (ART) context seem to be crucial for clinical decision making, retention in care and critical conversations with couples because of low treatment success rates and high rates of dropouts. However, no studies on ART communication have been realized. This pilot study aimed to explore communicational and relational characteristics in ART visits in order to produce a deeper understanding of the consultations and identify critical aspects to discuss with clinicians. 85 ART consultations were videotaped and a preliminary analysis of the communication content of 5 visits was conducted combining two methods of analysis: the RIAS, a validated and widely used coding system for categorizing verbal exchanges in the physician-patient interaction and the MEDA, which describes the dialogical structure of verbal interactions allowing the reconstruction of higher levels of dialogue organization. The MEDA analysis was conducted manually and then uploaded in the RIAS software. The analysis showed a high degree of conceptual coherence between the RIAS and MEDA categories. The highest number of RIAS utterances fell into three of the MEDA categories, which were also the most represented: Information sharing procedural (15%; 461 utterances); Information sharing clinical (24%; 951 utterances); Persuasion (15%; 243 utterances). The patient-

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centeredness mean score was 2,03 (s.d.=0,77). ART visits seemed highly patient-centered and the integration of RIAS and MEDA analysis revealed a distribution that is coherent with the communicative aims of ART consultations: sharing clinical and procedural information and discussing treatment options. Results allowed a deeper understanding of the complexity of doctor-patient communication during ART visits and will be used also to tailor the communicational training of the multi-professional team involved in ART.

UNIVERSITY OF BOLOGNA COUNSELING SERVICE: THE ASSESSMENT OF THE PSYCHOTHERAPY OUTCOME

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The aims of the study were to provide an initial sociodemographic and clinical description of university students' academic and psychological functioning and to investigate and compare the feasibility and clinical effectiveness of psychotherapies (cognitive behavioral versus psychodynamic) delivered at the University of Bologna's Counseling Service. One hundred forty-nine students (102 Women; MAge = 24.55, SD = 3.35) were consecutively interviewed and extensively assessed by independent clinicians of the Service before and after the intervention, using the Clinical Outcomes in Routine Evaluation and the Global Assessment Scale. After receiving an ICD10 diagnosis, patients were allocated to cognitive behavioral or psychodynamic therapies according to specific criteria. The treatment was administered by psychotherapists who were not involved in the assessment phase. The most frequent diagnoses were represented by anxiety (59.1%) and mood disorders (22.8%). The majority of students was female and the most severe conditions emerged among students enrolled in Philosophy, Arts and Communication (35, 23.5%) and Medical (23, 15.4%) schools. At the same time, these students were those who reported more anxious symptoms and a more hampered psychological functioning. At post-treatment, all students improved both in terms of well-being and distress, regardless of the type of psychotherapy received. This improvement was confirmed both by students' self-report and clinicians' evaluations. These findings point to the feasibility and clinical effectiveness of psychotherapy in promoting well-being and reducing young adults' distress. University counseling services may provide a valid approach to treat students' mental health, and to promote a positive transition to adulthood.

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SMART AGING PROJECT: PERVASIVE COMPUTING MODEL FOR DEPRESSION AND ANXIETY IN AGEING USING AN INTEGRATED CARE PARADIGM WITHIN ITALIAN HEALTHCARE CONTEXT

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Worldwide elderly population has increasing in recent years and it is expected to grow in the next future. Despite the increasing life expectancy due to advances in medical field, a large percentage of elders show a poor quality of life due to mental disorders or psychological difficulties (i.e. depression and anxiety). The synergistic use of Cognitive Behavioral Therapy (CBT) and Health Information Technology (HIT) seems to be promising in the treatment of mental disorders of aged subjects. In order to assess, monitor and treat depressive and anxious symptoms in elderly population, our research group has developed an innovative system called "PsiPack", constituted by the combined use of mobile applications and wearable sensors (i.e. for the evaluation of heart rate, heart rate variability and breathing rate and amplitude). PsiPack allows assessing the baseline and post-treatment psychological condition; to monitor the everyday arousal state, worry, and mood trend; to treat, through psychotherapeutic modules (i.e. CBT, MCT, ACT, etc.) depressive or anxious symptoms. The PsiPack will be customized according to the specific disorders of the elder, allowing him to become more aware of its negative conditions, to assimilate more effective techniques for manage them, and to improve its self-efficacy and sense of empowerment. PsiPack has been moreover connected with General Practitioners and Psychologists web platforms, in order to guarantee an integrated-care approach. Web platform allows them to monitor in real-time the patient's everyday trend, to act promptly in case of acute negative state (i.e. high levels of arousal), to manage its clinical information in a more functional way, and to start telepresence sessions. We expected that this integrated care paradigm will allow to reduce healthcare costs and to improve elderly quality of life.

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Session B

MENTALIZATION IN MALTREATED CHILDREN: A STUDY IN PROGRESS

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Although abuse and neglect resulted associated with impaired emotional understanding, scarce studies were carried out to explore the impact of maltreatment on children theory of mind and mentalisation, considered as distinct abilities. The aim of the current study is to investigate the mentalisation ability in maltreated children to explore the impact of maltreatment on: 1) implicit and explicit components of theory of mind, 2) mentalisation in autobiographic narrative. The Reading the Mind in the Eyes and the Strange Stories were administrated to assess respectively implicit and explicit components of theory of mind. Child Reflective Functioning Scale was applied to the Child Attachment Interview transcripts to evaluate mentalisation in a autobiographic context. Hitherto the measures were administered to 10 maltreated children referred for psychological assessment to a Centre for Maltreated Children (5 males), aged 7 to 13 years ($M=10.1$; $SD=2$). All of them were sexually (5 children) or physically (5 children) abused by a relative. 50 nonclinical children (25 males) aged 8 to 12 years ($M= 10.3$; $SD= 1.8$) formed the control group. The comparison between the abused group and the control group yielded no main effect of group neither for scores reported on the Reading the Mind in the Eyes ($d=.17$) nor for scores reported on the Strange Stories ($d=-.24$). Main effect of group was indeed found for scores reported on Child Reflective Functioning Scale ($d=-1.6$ for CRFS Total, $d=-.97$ for CRFS-Self, $d= -1.28$ for CRFS-Other). Preliminary results supported the hypothesis according to which maltreatment has a definite impact on the mentalisation regarding the self and the relationship with the maltreating parents.

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CORRELATES OF CYBERBULLYING AND CYBERVICTIMIZATION AMONG ITALIAN ADOLESCENTS

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Cyberbullying refers to a specific form of bullying that is conveyed by electronic means, such as the Internet or mobile phones. With respect to traditional bullying, it presents some features that may cause additional negative outcomes in the victims: cyberbullying can occur also when victims expect to feel safe (i.e., at home) and involve a larger audience; moreover, cyberbullies can preserve their anonymity (Vicentini et al., 2010). All these characteristics may raise feelings of frustration and powerlessness among victims. Since this phenomenon is becoming increasingly widespread, a better understanding of its features and associated factors is needed. The present study pursued this aim involving Italian adolescents. The sample comprised 464 adolescents (52.2% females; mean age = 15.9 years; s.d. = 1.6), who were administered the following self-report instruments: the maternal and the paternal forms of the Lum Emotional Availability of Parents (LEAP), the two scales (one for perpetration and one for victimization) of the Florence CyberBullying-CyberVictimization Scales (FCBVSs), the Rosenberg Self-Esteem Scales (RSES), the Strengths and Difficulties Questionnaire (SDQ), and the Inventory of Callous-Unemotional Traits (ICU). Findings highlighted that 22.4% and 21.8% of the sample were respectively classified as occasional or severe cybervictims; 16.5% and 9.0% were categorized as occasional or severe cyberbullies. Several linear regression analyses showed that the Total Difficulties Scale of the SDQ and the maternal relationship may be considered risk factors for cybervictimization (adjusted $R^2 = .11$). With regard to cyberbullying, only the callousness scale of the ICU resulted to be significantly associated with it (adjusted $R^2 = .14$). Results indicated that cyberbullying and cybervictimization represent complex issues that require deeper knowledge and wider investigations in order to help adolescents, parents and teachers to adequately deal with them.

Keywords: Cyberbullying, Cybervictimization, Adolescence

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AUTONOMIC NERVOUS SYSTEM ACTIVITY IN BORDERLINE PERSONALITY
DISORDER: NEW INSIGHT IN EMOTION REGULATION

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According to Polyvagal Theory (Porges, 1995), the emotional and interpersonal dysfunctions in Borderline Personality Disorder (BPD) could be related to an Autonomic Nervous System malfunctioning. An abnormal activation of the vagus nerve in BPD patients seems to affect emotion regulation and prosocial behavior, enduring in a physiological state evolved to support defensive strategies in dangerous situations, even when the situation is no longer dangerous (Austin et al., 2007). Our aim is to shed light on observed physiological differences, comparing BPD and healthy subjects' responses during dynamic emotional stimuli exposition. Vagal activity (Respiratory Sinus Arrhythmia, RSA) and sympathetic activity (Heart Period, HP; Heart Rate, HR) were assessed during the administration of six video eliciting different target emotions to BPD outpatients (n = 14) and healthy subjects (n = 14), age and gender matched. Although no significant differences in self-reported scores (i.e. the quality and the intensity of the emotions elicited by the video) were found, cardiac activation (i.e. the unaware response to the emotional stimuli) showed significant between-groups differences: BPD subjects showed higher HR and lower RSA and HP, both at the baseline and during videos' presentation. Furthermore, even if no significant in-group between videos differences were found, results showed a significant interaction between videos, emotion regulation and mindfulness. As a whole, our results support the hypothesis of a persisting defense system hyperactivation in BPD subjects, not concerning specific emotional categories, and affected by emotion dysregulation and mindfulness skills.

RELATIONSHIP BETWEEN AFFECTIVE TOM AND ALEXITHYMIA

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Recently, some efforts have been made to determine whether deficits in emotional regulation (Alexithymia) are associated with an impairment of Theory of Mind (ToM). Alexithymia does not

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explicitly include deficits in the ToM; however, as it is assumed in this study, the lack of knowledge of their own emotional experiences might be associated with a deficit in the Affective ToM in alexithymics. Consistently, Alexithymic people show a poor performance in identifying the emotional meanings of facial expressions, but only a few studies have focused on the relationship between Alexithymia and skills in the affective ToM. This study was aimed to investigate this relationship. Two hundred eighty-nine adults (M/F=134/155) aged between 28 and 62 years participated in the study. The following tests were administered: Reading the Mind in the Eyes to evaluate the Affective ToM, the Twenty-item Toronto Alexithymia Scale to evaluate Alexithymia and Visual Analogue Scales to assess the mood. The results supported the hypothesis that the lack of knowledge of the emotional experiences in Alexithymia is associated with a deficit in the Affective ToM. The difficulty to describe feeling and the externally oriented thinking were the characteristics of the Alexithymia that more impaired the affective ToM. Further, both Affective ToM and Alexithymia had very similar effects on mood. These findings highlight a clear relationship between Alexithymia and affective ToM. It is worth noting that these results have been found by considering a group of non-clinical individuals numerically greater compared to other studies, which allows extending the observed results to the general population. Interesting theoretical implications may derive from these findings: Alexithymia and Affective ToM might be considered as two different aspects of a single function, operationally defined respectively in terms of "deficit" and "competence" of the same cognitive processing of affective information.

PRENATAL ATTACHMENT AND TRANSITION TO PARENTHOOD IN MEN: THE CONSTRUCTION OF THE FATHER-CHILD BOND FROM THE BEGINNING

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The terminology prenatal attachment indicates the complex of attitudes, behaviors and representations that parents develop towards the fetus during pregnancy (Cranley, 1981; Müller, 1993; Condon, 1993). Researches have focused more on the development of the maternal compared to the paternal prenatal attachment. This study aimed to understand the dynamics of the transitioning to parenthood in men. To this end, we recruited a sample of 94 expectant fathers (age 25-51 yr.) whose partners were pregnant at the 2nd or 3rd trimester. In the prenatal phase of the study, men completed measures of prenatal (PAI, Müller 1993; PAAS, Condon 1993) and romantic attachment (ECR-R, Fraley et al. 2000), dyadic adjustment (DAS, Spanier 1976), parental caregiving (PBI, Parker et al. 1979), social support (MSPSS, Zimet et al 1988). In the postnatal

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phase (3 months after childbirth), a subsample of 14 fathers completed the DAS and the MSPSS again, along with measures of postnatal attachment to the child (MPAS, Condon & Corkindale 1998), depression (CES-D, Radloff 1977), child's behavior (SVC-24, Laicardi 1998) and parent-child bond problems (PBQ, Brockington et al. 2001). The results showed positive significant correlations of prenatal attachment with dyadic adjustment and paternal care, and negative significant correlations of prenatal attachment with age and avoidance in close relationships. A regression analysis showed that age (-) and dyadic adjustment (+) were significant predictors of the paternal prenatal attachment. Correlation analyses, conducted on 14 men who participated both in prenatal and postnatal phase, allowed to identify some interesting "trends", such as a positive correlation between pre- and postnatal attachment. The quality of the couple relationship seems to be an important protective factor for the development of the paternal prenatal attachment. This should be taken into account in planning support services for the couple during the transition to parenthood.

USE OF DIGITAL TECHNOLOGIES IN ADOLESCENCE: A STUDY IN AN ITALIAN SAMPLE

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In recent years, the diffusion of both the Internet and the new digital technologies among adolescents has rapidly increased. According to a recent European study, 93% of teenagers uses internet at least once a week, and 60% of them uses it daily or almost (Livingstone et al., 2011). The objective of the study was to describe some of the habits, opinions, and attitudes towards the digital technologies in a sample of Italian adolescents. In addition we aimed to verify whether a correlation between use of the internet and specific personality traits exist. The sample consisted of 462 adolescents (66.9% females; 33.1% males) with a mean age of 15.3 years (sd = 2.8). Participants completed the following self-reports: the Questionnaire on New Digital Technologies (QNTD, Candelori et al., 2014), the Shorter Promis Questionnaire (SPQ, Baiocco et al., 2005) and the HEXACO Personality Inventory-Revised (HEXACO-PI-R, Lee & Ashton, 2009). Most of the sample use new digital technologies especially for communication (55.19%) and social networks (46.53%) and about a third of them (33,55%) spend more than three hours a day on the internet. Correlational analyses highlighted a significantly negative association between conscientiousness and use of the Internet ($r = -.259$; $p < .01$). In addition, our findings showed a positive correlation between the trait of emotionality and the internet addiction ($r = .236$; $p < .01$). Our research has

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provided a framework to increase the comprehension of use of digital technologies in adolescence. The present findings on the one hand suggested that adolescents appear to be particularly attracted by these activities because they are connected to some of their needs (i.e. the development of relationships with peers), on the other highlighted the importance to further explore the nature and the quality of Internet use among adolescents, since new technologies represent opportunities and risks for adolescents and their families (Livingstone & Bober, 2006).

Keywords: Internet, Digital technologies, personality traits, adolescence

WORKING MEMORY, THEORY OF MIND AND ATTACHMENT STYLE: A PILOT STUDY

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Between working memory ability and learning process there is a significant correlation (Alloway, Passolunghi, 2011; Alloway, 2012), that appears to be modulated by attachment style (Del Villano et al., 2014), as it happens for Theory of Mind and school performance (Zarrella et al., 2015). The aim of the study, in progress, is to explore the relationship between attachment style, school performance, mentalizing abilities and working memory in children aged between 8 and 11 years old. At present, the sample consisted of 49 children (21 females and 28 males; Mage=9,47, SD=.86), randomly selected from various schools in Campania District. Instruments: Stories (Gini, 2006); Peabody Picture Vocabulary Test-Revised (Stella et al., 2000); Strenght and Difficulties Questionnaire (Goodman et al., 1998); Separation Anxiety Test (Attili, 2001); Subtest WISC-IV-Working Memory (Wechsler, 2012); M.T. (Cornoldi, Colpo, 1998) and AC-MT 6-11 (Cornoldi et al., 2012). Correlational analysis and Multivariate analysis of covariance were performed using the SPSS software. The raw score in the language test was included as a covariate in the MANCOVA because it was correlated with ToM score ($r=.42$, $p<.01$), attachment style ($r=-.37.$, $p<.01$), school achievement ($r=.52$, $p<.01$) and scholastic performances ($r=.52$, $p<.05$). The MANCOVA performed on ToM score showed significant age differences - but not gender differences - and significant interactions between the variables. Further analysis will be carried out by expanding the sample. We expect that attachment style moderates learning abilities, working memory, mentalizing and social behaviors. Also, significant correlations between these variables are expected.

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MATERNAL CARE IN CHILDHOOD AND NEGATIVE SELF-CONCEPT AS PREDICTORS OF THEORY OF MIND: A MEDIATIONAL MODEL

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Theory suggests that the development of Theory of Mind (ToM) is linked to positive care experiences in the relationship between the child and his or her mother figure (Fonagy et al., 2002), which fosters the development of a positive view of self and other. The aim of the current study was to test this developmental model in a group of Italian adults. In this study, 779 participants (354 males, 45%) ranging in age from 18 to 60 years old ($M=35.58$, $SD=10.84$) completed questionnaires on ToM (Eyes Test), parental bonding (Parental Bonding Instrument), and attachment styles (Relationship Questionnaire). Among participants, theory of mind was positively associated with mother's care in childhood ($r=.12$, $p<.01$), and negatively associated with preoccupied ($r=-.14$, $p<.01$) and fearful ($r=-.13$, $p<.01$) attachment, which both involve a negative view of the self. Mediation analyses with gender, age, and years of education as covariates, showed that both preoccupied and fearful attachment partially mediated the positive association between mother's care and ToM. The findings of study support the developmental model proposed by Fonagy and colleagues (2002), who suggested that positive experiences in the child-caregiver relationship foster the internalization of a positive view of the self and the others, which contributes to increase mentalizing abilities. Conversely, it seems that an inadequate maternal care is linked to the development of a negative view of the self, which may decrease ToM abilities. These findings are also consistent with a life span approach to psychopathology (Bifulco et al., 2002), which suggests that the experiences of neglect and abuse in childhood damage the child's self-esteem and sense of self-worth, together with his or her ability to understand others' mental states. This damage is usually reflected in later interactions and often culminate in clinical disorders.

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IS THE DEFAULT MODE NETWORK A TARGET NEUROPHYSIOLOGICAL SUBSTRATE OF PSYCHODYNAMIC PSYCHOTHERAPY ?

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The concept of default mode network (DMN) was introduced in the first PET and then fMRI literature after the serendipitous observation of constant, coherent, low frequency activity in rest states when the brain was thought to be involved in producing unstructured background noise activity (Raichle et al, 2001; Raichle & Snyder, 2007; Raichle, 2015). It consists of bilateral and symmetrical cortical areas, located in the mediolateral parietal, medial prefrontal, and medio-lateral temporal cortices. As a functional network the DMN is activated while the person is engaged in undirected mental activities such as day-dreaming, mind-wandering, or is thinking about oneself, about his or her own future plans and past recollections, or when laying undisturbed in the scan. Furthermore the DMN consistently decreases its activity when the brain is engaged in goal directed and focused attention tasks, and it has therefore been interpreted as a neural system expressing a kind of 'give or take' dynamics with respect to the system responsible for goal directed, attentions demanding tasks. In an attempt to bound classical psychodynamic constructs to neurophysiology, DMN has been recently recognized as a possible neurobiological substrate of the psychoanalytical concepts of the Ego and its functioning (Carhart-Harris et al, 2008; Rizzolatti et al., 2013) and as a relevant structure to assess during psychotherapy (Bucheim et al., 2013). Here we would like to propose a systematic review of the evidences which could imply an activation of the DMN as the target structure that is activated by the classical psychoanalytical method, that is articulated in triad of fundamental activities: free associations from the part of the patient, hovering attention from the part of the analyst, and suspension of moral judgement for both of them (Semi, 2011). Results could prompt future more focused empirical approaches in the domain of process and outcome research in dynamic psychotherapies.

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CONVERGENCE BETWEEN PSYCHODYNAMIC AND NEUROBIOLOGICAL MODELS OF DEPRESSION

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Psychodynamic theories describe the development of infants' capacity to regulate their emotional states in the primary relationship with the caregiver, through the construction of the representations of the self, others, and relationships. In this poster, we link these psychodynamic theories with recent findings regarding the abnormal functioning of the default system in depression. Psychological functions associated with the default system include semantic processes, self-related processing, and spontaneous emotion regulation. The abnormal activation of the default system observed in depression may explain the dysfunctional aspects of emotion regulation typical of the condition, such as an exaggerated negative self-focus. We also discuss the clinical implications of these findings with reference to the therapeutic relationship as a key tool for revisiting impaired or distorted representations of the self and relational objects.

EMOTION REGULATION IN INFANTS AFTER A SOCIAL STRESSOR: THE ROLE OF TEMPERAMENT

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Infant temperament has long-term implications for child behavioral and social functioning (Kagan, Snidman, 1991). It has been argued that high reactive infants have fewer capacities to regulate their emotions and behaviors in stressful situations, but few studies have considered both social and non-social stressors. This study aimed to investigate whether infants' behavioral reactivity is associated with their capacities to regulate affect and behavior after a social stress in a mother-infant interaction. A sample of 189 mothers and their 4-month-old infants were recruited from a Boston, MA (USA) hospital. Infants were observed in two paradigms designed to be stressful for infants, a non-social stressor, the Multi Modal Paradigm (MMP: Kagan & Snidman, 1991) and a social stressor, the Still-Face Paradigm (SFP: Tronick et al., 1978). In the MMP, negative affect, motor activity, and difficulty to soothe were coded from video files, using rating scores 1-5. In the SFP,

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proportion of negative affect and gazes towards mother during the Reunion episode were considered. Based on high scores in MMP coded variables, 41 infants (21 males) were categorized into a behaviorally high reactive group (HRG). A comparative sample of 41 low reactive infants (LRG) was formed matched on gender, ethnicity, parental education and maternal scores on anxiety and depression scales. Comparing the two groups, results showed that HRG displayed significantly greater negative affect than LRG ($U=598$, $Z=-2.25$, $p=0.024$) during the Reunion episode, suggesting that this group was less successful in regulating to the social stress of the SFP. This study adds to the literature by examining high reactivity as a well-defined characteristic in both social and non-social situations, underlining its role in babies' capacities to cope with stress situations.

FROM SEXTING TO DATING VIOLENCE THROUGH AMBIVALENT SEXISM: THE PERPETRATOR'S PERSPECTIVE

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Most of literature on sexting underlined the relationship between sexting misuse and risk for dating violence victimization. On the contrary, this research aimed to shed light on the perpetrator's perspective. The study investigated how a risky sexting behavior (the sharing of someone else's sexually suggestive pictures without her/his permission) could lead to dating violence perpetration, taking into account the moderating role of ambivalent sexism. A survey that assessed sexting, dating violence and ambivalent sexism was administered to 715 adolescents and young adults from 13 to 30 years old ($M_{age} = 22.01$; $SD_{age} = 4.01$; 513 female participants, 71.7%). Two moderation regression analyses were run in order to test the moderating role of both benevolent and hostile sexism, in the relationship between sexting and dating violence perpetration, controlling for age, gender and sexual orientation. Then, in order to interpret the direction of the interactions, two full simple slope analyses were conducted. At low levels of benevolent sexism, there was a significant positive relationship between sexting and dating violence perpetration, $\beta = .30$, $t = 4.74$, $p < .001$, whereas at high levels of benevolent sexism, this relationship vanished to a non-significant effect, $\beta = .06$, $t = .05$, n.s. On the contrary, at high levels of hostile sexism, there was a significant positive relationship between sexting and dating violence perpetration, $\beta = .19$, $t = 4.25$, $p < .001$, whereas at low levels of hostile sexism, this relationship was reduced to a non-significant effect, $\beta = -.07$, $t = 1.56$, n.s. Results suggested that in the relationship between sexting and dating violence perpetration, hostile sexism could be a risk factor while benevolent sexism could be a protective factor. This findings can have relevant implications for prevention programs that should be focused

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on decreasing and deconstructing gender stereotypes, in order to promote more healthy and safer dating relationships since adolescence.

ATTITUDES TOWARDS HOMOSEXUALITY IN ADOLESCENCE

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Since negative attitudes about gay and lesbian people are quite common in our society (Horn & Heinze, 2011; Overby, 2014) and seeing as how negative attitudes can lead to stigmatization directed to this population (Fasoli, Paladino & Carnaghi, 2013) the relation between homophobia and attitudes toward homosexuality has been investigated extensively (Herek, 1994; Hooghe & Meeusen, 2012; Marsiglio, 1993). Especially, adolescence is a stage of the life cycle during which individuals' beliefs and attitudes toward (Horn & Heinze, 2011) gay and lesbian people may be formed. For this reason knowing the factors that modify and create these attitudes and beliefs is important because it helps us predict which groups will be characterized by high levels of homophobia later in life. At the present time few studies had focused on the attitudes toward gay and lesbian people in Italy. For this reason we decided to investigate the attitudes of Italian high school students toward gay men and lesbians and same-sex marriage, and their beliefs about the origins of homosexuality. The sample survey consisted of 449 subjects, 226 males and 223 females, aged between 14 and 21 years, belonging to 4 Italian high-schools in Lombardia. The instruments used are the Italian version of the Attitudes Toward Lesbian and Gay men (ATLG), the Modern Homonegativity Scale (MHS) and the Attitudes Toward Same-Sex Marriage (ATSM). Results suggest that male students showed a more negative attitude than female toward lesbians and gay men. Furthermore multivariate analyses revealed that respondents with more traditional male role attitudes and a lack of personal direct contact with gay people and those professing a religious faith had a less positive attitudes toward homosexual minorities and same-sex marriage. Conclusion: Our results will be discussed in the light of the social psychological framework that Herek et al. (2015) define as heterosexism.

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Session C

OBESITY AT THE MIRROR: CHANGES IN PSYCHOLOGICAL CHARACTERISTICS AFTER A PSYCHOEDUCATIONAL INTERVENTION FOR OBESE ADULTS

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Obesity is a pervasive condition, a risk factor for health issues including diabetes and heart disease. The present study investigates the effectiveness of a group psychoeducational intervention for obese patients in terms of both body weight loss and changes in relevant psychological variables such as binge eating, anxiety, depression, disturbed body image and sociocultural influences on body appearance. Gender differences will also be examined. The sample comprised 96 overweight and obese patients (32 males, $23 \leq \text{age} \leq 65$ years, $1K3 \text{ BMI} \leq 66$), who participated in psychoeducational group interventions at the Clinical Dietetics and Metabolic Diseases unit of the S. Orsola-Malpighi Hospital (Bologna). Each psychoeducational intervention consisted of 12 weekly group sessions run by a nutritionist, a psychologist and a physician. Independent assessments were performed pre-treatment and about two weeks after the end of the intervention. Medical and sociodemographic variables were collected, together with a set of self-report questionnaires including the Beck Depression Inventory, the State-Trait Anxiety Inventory, the Binge Eating Scale, the Sociocultural Attitudes Towards Appearance Questionnaire-3, and the Body Image Disturbance Questionnaire. At each time point body weight was also measured. Correlations and repeated measure ANOVAs were used as analytic strategy. The analyses showed significant positive associations between binge eating and negative affectivity, which were substantially higher for female than for male patients. At the follow up, positive changes in every psychological variable, as well as with regard to weight loss, were recorded, irrespectively of gender.

The present findings emphasize the crucial role of both psychological variables and psychoeducational multidisciplinary interventions in the effectiveness of treatments aimed at improving eating habits, physical and psychological wellbeing of obese patients.

FAMILY PROFILES IN EATING DISORDERS: FAMILY FUNCTIONING AND PSYCHOPATHOLOGICAL RISK

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AIP Clinical and Dynamic Section

Ballarotto Giulia (1), Bracaglia Fabrizia (1), Cerniglia Luca (2), Cimino Silvia (1), Mercurio Valentina (1), Tafà Mimma (1)

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EFFECTS OF PSYCHOSOCIAL INTERVENTIONS ON SOCIAL FUNCTIONING AND SYMPTOMS IN DEPRESSION

International literature underlined an association between family functioning and patients with eating disorders. Early adolescence is an important period that fosters a re-organization of family functioning and, as confirmed by literature, it's important for the onset of eating disorders. The aim of this study is to investigate the existence of a specific family functioning and psychopathological risk in families with adolescent daughters with eating disorders. On the basis of these premises, we conducted a cross-sectional study, recruiting N=181 families of adolescents (average age 14,09) affected by Anorexia Nervosa (Group A, N=61), Bulimia Nervosa (Group B, N=60) and Binge Eating Disorder (Group C, N=60). The families (mothers, fathers and daughters) were assessed in psychological interventions in psycho-social rehabilitation can improve the quality of life in patients with psychiatric disorders. This paper discusses the issue of psychiatric rehabilitation in Community Inpatients according to the methodology adopted in the Psychiatric Care Service of the Clinical Centre of the University of Cesariano. Specifically, we present a single case study of a female patient subjected to psycho-social rehabilitation. Psycho-social rehabilitation improves patient's quality of life and reduces psychiatric symptoms. Before accessing to the rehabilitation process, patient has been assessed through WAIS-IV, MMSE, SCL-90, BARS, Scale Kennedy, CAP, LP. A re-assessment has been performed in a second time of rehabilitation. A significant improvement can be observed in the quality of life and reduction of psychiatric symptoms.

Interestingly, perception of their family functioning predicts adolescents' psychopathological risk, differently in the three Groups.

This research confirms international literature data on eating disorders: the association between family functioning and psychopathological risk in family members.

FAMILY PROFILES IN EATING DISORDERS: FAMILY FUNCTIONING AND PSYCHOPATHOLOGICAL RISK

Ballarotto Giulia (1), Bracaglia Fabrizia (1), Cerniglia Luca (2), Cimino Silvia (1), Mercurio Valentina (1), Tafà Mimma (1)

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International literature has underlined an association between family functioning and patients with eating disorders. Early adolescence is an important period that fosters a re-organization of family functioning and, as confirmed by literature, it's important for the onset of eating disorders. The aim of this study is to investigate the existence of a specific family functioning and psychopathological risk in families with adolescent daughters with eating disorders. On the basis of these premises, we conducted a cross-sectional study, recruiting N=181 families of adolescents (average age 14,09) affected by Anorexia Nervosa (Group A, N=61), Bulimia Nervosa (Group B, N=60) and Binge Eating Disorder (Group C, N=60). The families (mothers, fathers and daughters) were assessed thought the Symptom-Check List- 90 items-Revised (SCL/90-R) and the Family Adaptability and Cohesion Evaluation Scale- IV (FACES-IV). Family functioning was evaluated with means score

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of perception family functioning of the three family members. We carried out ANOVA to verify differences between groups on psychopathological risk and on family functioning and linear regressions to evaluate the influence of family functioning on adolescents' psychopathological risk. Our results show that family functioning differs in the three Groups. Further, our results indicate that adolescents and parents in Group A, B and C show a peculiar psychopathological profile and, in particular, adolescents with anorexia presenting the most severe psychopathological risk. Interestingly, perception of their family functioning predicts adolescents' psychopathological risk, differently in the three Groups. This research confirms international literature data on eating disorders: the association between family functioning and psychopathological risk in family members.

MOTHER-CHILD AND FATHER-CHILD INTERACTION DURING FEEDING: AN EMPIRICAL STUDY ON THE PARENTAL PSYCHOPATHOLOGICAL RISK IN A NON REFERRED SAMPLE

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The role of fathers as risk factor or protection for possible outcomes in children's mental health has been considered increasingly, and several studies have focused on father-child interactions, as well as on mother-child interactions. The aim of this study is to explore the quality of interactions of mothers and fathers with their child at 18-24-month-olds during feeding, taking into account possible influences of parental psychopathological risk and child's temperament. Families were recruited in Italian preschool (N=60 families) and assessed through a video-recorded procedure observing mealtime (SVIA), a self-report questionnaire for parental psychopathological risk (SCL-90-R) and a report form questionnaire for child's temperament (QUIT). We carried out MANOVA to verify differences between parents' mean scores, considering child's sex and age, and linear regressions to evaluate the influence of parent's psychopathological risk and child's temperament on parents-child interaction and to evaluate whether mother-child and father-child interactions affect each other. Results show that the overall quality of mother-child interactions during feeding was similar than that of father-child interactions. Mothers' and fathers' psychopathological risks (paranoid ideation and anxiety, respectively) predicted the general quality of their interactions with their children during feeding in the direction of less contingent and less sensitive exchanges. Our results show also that the quality of mother-child and father-child interactions affect each other. In sum, this study shows that mothers and fathers, although with different interactional styles, have a similar relationship quality with their children during feeding, which is influenced by different difficulties originating from both individual psychological profiles of parents. In this sample,

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parents-child interactions influenced one another, stressing the importance to investigate the couple relationship between parents.

DO INFANTS REALLY HAVE AN IMPLICIT RELATIONAL KNOWING?

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Infants and their mothers use coherent communicative behaviors to co-regulate their interactions. Over time with repeated experiences of being together they create implicit relational procedures and knowing about the ways they engage with each other. Some of the ways are typical, such as an open handed wave, while others are unique to each mother-infant dyad, such as a particular finger game. The purpose of this study was to investigate infants' individualized procedural communicative behaviors as strategies for eliciting mothers' typical response during the Still-Face Paradigm (FFSF). In particular, we aimed to observe 1) the dyadic unique interactive behaviors exhibited by the infant in a normal playful interaction, and 2) whether the unique interactive behaviors are then utilized as eliciting behaviors (UEBs) in a perturbed interactive context, when the mother is acting in an unresponsive manner (Still Faced). 86 mother-infants dyads were observed in the FFSF at one of two different ages: 24 and 43 weeks of age. Results showed that only the 43-weeks old babies displayed UEBs (29.3%) whereas no UEBs were observed in the 24-weeks old infants, pointing to an important early developmental difference, $\chi^2(1, N=119) = 25.390, p < 0.001$. When comparing across age groups, older infants were more likely to show UEBs than younger infants. These findings suggest that infants acquire UEBs with repetitions of typical interactions with their caretaker and are able to make use of these behaviors with the development of different capacities (cognitive, motor, emotional), in an attempt to elicit a response from an unresponsive mother UEBs can be incorporated into a procedural relational knowledge, which can then be used for different purposes in a different context. This research contributes to the understanding of implicit relational knowing as a form of procedural knowledge that arises in the interactional processes between infants and caregivers.

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ANXIETY, DEPRESSION AND MINDFUL ATTITUDE: THE MORE YOU JUDGE, THE WORSE YOU FEEL

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Recent reviews showed that trait-mindfulness is significantly correlated to emotional wellbeing, and evidenced how mindfulness-based interventions (MBI) may improve mental health symptomatology both in children/adolescent (Kallapiran et al. 2015) and in adults (Gu et al., 2015). In the present study, we investigated the relations among mindful disposition, depression and anxiety. 276 participants completed the following questionnaires: FFMQ Five Facet Mindfulness Questionnaire (Baer et al., 2006); BDI Beck Depression Inventory (Beck, 1967); STAI Y-2 Trait Anxiety Scale (Spielberger, 1983); PANAS Positive Affect and Negative Affect Scales (Watson & Clark, 1988); RRS Ruminative Response Scale (Nolen-Hoeksema & Morrow, 1991). Data analyses show that trait-mindfulness is positively correlated to positive emotions and negatively correlated to negative emotions, except for the subscale observe, showing that the act of observing one's inner states is not in itself beneficial and, contrarily, is correlated to an increase of negative emotions. Interestingly, non-judge and act-with-awareness are the mindful dimensions more strongly negatively correlated to both anxiety and depression. Using a linear regression model, the variables depression and anxiety were regressed against the five mindfulness dimensions considered in the FFMQ. Both depression and anxiety were predicted through act-with-awareness, non-judgment and non-react, but not through observe and describe. Our results confirm literature data on the correlation between trait-mindfulness and wellbeing. Possible clinical implications might regard the role of judgment and act-with-awareness in anxiety and depression: it seems plausible that, in order to address effectively these dysfunctional states, one possible therapeutic strategy might imply modulating the patient's judgmental attitude, represented by strongly held cognitive beliefs, and thus amenable to change in psychotherapy.

By Tambelli Renata & Trentini Cristina

IS THERE ANY ASSOCIATION BETWEEN GASTROINTESTINAL PROBLEMS AND DIFFERENT COGNITIVE-BEHAVIORAL PHENOTYPES IN AUTISM SPECTRUM DISORDERS?

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To date, the estimated incidence of gastrointestinal problems in children with Autism Spectrum Disorders (ASD) ranges from 9% to 90%. One of the possible reasons for this discrepancy is their diagnosis difficulty in ASD children because of the deficits in verbal and nonverbal communication. Nevertheless, a further explanation could be the tendency of many studies to wrongly consider ASD as a unique pathology, while it is characterized by considerably different cognitive-behavioral phenotypes. Therefore, a different comorbidity rate for different subgroups among ASD could be hypothesized. In our study, we developed an interview to parents to collect information about gastrointestinal disorders, also comprising questions about apparently unexplained behaviors that can actually express gastrointestinal discomfort. In addition, we developed a group of questions to assess food selectivity, which is not uncommon among ASD children and is an important aspect to consider as possible cause for gastrointestinal problems. Thus, we interviewed 25 mothers of ASD children and, using logistic regression, we studied a possible association between gastrointestinal disorders and food selectivity, Intelligence Quotient (assessed through WISC, Leiter-R or GMDS) and autism severity (according to ADOS-score). Only in regard to the association between gastrointestinal disorders and autism severity we found an almost significant difference from the null model (p -value = 0.057). Therefore, it could be interesting for the future to extend our analysis to a larger sample of ASD children. In conclusion, our approach might help not only to get a more precise picture of the child difficulties, but also to better understand the cause of the association between gastrointestinal disorders and ASD and to improve the characterization of different subgroups in this pathology.

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BODY TALK: PERSONALITY ORGANIZATION AND SOMATIC SYMPTOMS IN ADOLESCENCEBenzi Ilaria Maria Antonietta (1), Madeddu Fabio (1)
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Adolescence is a crucial developmental stage in which the need to upgrade and integrate personality aspects such as identity integration, interpersonal relations and affect regulation emerges. Within this context, research, in order to understand the steps that lead to the development of personality disorders (PDs), highlights the significance of personality traits for psychological development as well as how impairment in identity integration resulted predictive of PDs in adults. In particular, given that during adolescence it is crucial to integrate changes of self-image related both to mental and bodily experiences, few studies have explored the relationship between identity integration in adolescence and the presence of somatic symptoms. Up to now, in a sample of 80 adolescents we measured personality traits (Personality Inventory for DSM-5, PID-5), personality functioning (Severity Indices of Personality Problems-118, SIPP-118), psychological distress and somatic symptoms (Symptom Checklist 90-R, SCL-90-R). Results suggest that personality traits are related to somatic symptoms. Furthermore, identity functioning seems to play a crucial role in this association. This study emphasizes the importance to strengthen our understanding of the complex relationship between the severity of personality functioning and somatic symptoms manifestations during adolescence.

EMOTION DYSREGULATION AND PSYCHOPATHY IN AN INMATES SAMPLE

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Current research has shown the emotion regulation's role in normotypical development and how possible deviant trajectories could lead to psychopathology outcomes. Psychopathy has been investigated for several decades, much is still unknown about its relationship with emotion dysregulation. Past research has highlights a positive correlation of alexithymia with secondary psychopathy, but not primary psychopathy. Notably, it has been proved how poor competence in understanding and in modulating affective states was an Antisocial Personality Disorder and Psychopathy's peculiar dimension. The purpose of the present study was to examine the association

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between emotion dysregulation facets and psychopathy in a sample of 94 inmates (Males N=70 and Females N=24) from 22 to 79 years old, who have completed two self-report questionnaires: Difficult in Emotion Regulation Scale (DERS) e Self-Report Psychopathy (SRP). Data revealed a significant positive correlation between psychopathy and the some subscales of the DERS. Other supplemental research is needed to better examine the association between psychopathy and different aspects of emotion dysregulation, as impulsivity.

HYPNOSIS AND DISSOCIATION IN NDE

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The purpose of this study is to confirm that people who have had Near Death Experiences have a higher level of dissociation. Subsequently, in order to underline the key role of the dissociation, we conducted an hypnosis to investigate if these people could obtain hypnotic allucination. 40 individuals who had self-report NDE and 40 who had not, completed a series of questionnaires that included NDE scale (Near-Death Experience scale; Greyson, 1983), DES - II (Dissociative Experience Scale; Carlson Putnam, 2000; Italian translation, Schimmenti A., 2015), Hypnotic Induction Profile (Spiegel, 1974). Secondly, all participants have been hypnotized. Results: Preliminary analysis seems to confirm the hypothesis: people who reported NDEs also reported more dissociative symptoms than did the comparison group. Concerning hypnosis, the analysis are in progress. The score's level reported by NDEs shows a not psychiatric disorder and non pathological dissociative response to stress.

DIRECT AND INDIRECT FACTORS OF INFLUENCE ON ADJUSTMENT OF PARENTS OF CHILDREN WITH SOLID TUMOR IN ACTIVE TREATMENT

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Our cross-sectional study intended firstly to investigate whether childhood cancer impact on parents' adult attachment, perceived social support, marital adjustment, anxiety and depressive symptoms. Second aim was to extend our understanding of the adjustment of parents whose

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children have cancer, by developing an integrative model linking attachment orientations (i.e., attachment anxiety and attachment avoidance) to parents' adjustment (i.e., anxiety and depression), taking into account the mediating role of dyadic adjustment with the partner, perceived social support, and coping style. 30 parents (20 mothers, 10 fathers; age: 30 – 54 years) of children in active treatment for solid tumor and 30 matched control parents of healthy children participated in the study. Participants completed: Experiences in Close Relationships–Revised questionnaire (ECR-R), Dyadic Adjustment Scale 4-item version (DAS-4), Multidimensional Scale of Perceived Social Support (MSPSS), State-Trait Anxiety Inventory form Y (STAI-Y) and Beck Depression Inventory (BDI), and – only parents of the experimental group – Mini Mental Adjustment to Cancer Scale (Mini-MAC). The study group had significant higher scores of attachment avoidance ($t = 3.33, p = .002$), state anxiety ($t = 3.44, p = .001$), and depression ($t = 3.26, p = .002$) and lower levels of dyadic adjustment ($t = -2.72, p = .009$) than the matched controls. Path analyses showed that attachment orientations, dyadic adjustment, social support have significant indirect influences on two coping styles of adjustment to cancer (i.e., helplessness/hopelessness, anxious preoccupation) which, in turns, affect parents' psychological adjustment. Results suggest the importance to consider, during pediatric treatment for cancer, parents' well-being and adjustment including not only biomedical but also psychosocial and relational factors, to improved family-based intervention in pediatric care.

THE EFFICACY OF A MINDFULNESS BASED INTERVENTION FOR DEPRESSIVE SYMPTOMS IN PATIENTS WITH MULTIPLE SCLEROSIS AND THEIR CAREGIVERS: A RANDOMIZED CONTROLLED CLINICAL TRIAL

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Multiple Sclerosis has a great impact on psychological functioning of patients and can be associated with various mental health disorders and symptoms. The most prevalent one is depression, which ranges from 15 to 47%. Mindfulness Based Interventions are a relatively brief and cost-effective program that has been studied in patients with several chronic diseases and recently also in patients with Multiple Sclerosis. Mindfulness Based Interventions are based on the assumption that a non-

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judgmental awareness and acceptance of one's moment-to-moment experience can have a positive effect on the adaptation to the disease, reducing the psychological burden and improving patients' quality of life. Several studies concluded that Mindfulness Based Interventions can be beneficial in terms of improving both psychological and psychical aspects of Multiple Sclerosis, but none of them compared the intervention with an active control group. The primary objective of the study is to evaluate the efficacy of a group-based Mindfulness Based Intervention on depressive symptoms in patients with Multiple Sclerosis, as compared with an active control group. The study design is a randomized controlled clinical trial. Eighty-eight patients with Multiple Sclerosis and depressive symptoms will be recruited and randomized to either Mindfulness Based Intervention or an active control group. The latter is designed to control for non-specific elements of the intervention and it comprises psycho-education and relaxation techniques. Participants were recruited with a two-step screening: first we administered the BDI self-report, then patients with BDI scores > 13 were assessed with the SCID to confirm depressive symptoms and then we propose them to participate in the research protocol. If they agree, we ask them to complete the other psychological measures. Then they sign the informed consent and they will be randomized to the Mindfulness Based Intervention (MBI) or Active Control group (AC). To date we administered the BDI self-report scale to 596 patients with a diagnosis of MS: we found 216 patients with a positive BDI score (i.e. BDI score > 13; 36.24%). Of these patients, 67 patients (31%) accepted to participate and were randomized for the treatment. Also 14 caregivers confirmed their participation and were involved in the research. To date we have organized six groups: 2 groups in November 2014 (1 MBI and 1 AC), 2 groups in March 2015 (1 MBI and 1 AC), 2 groups in November 2015 (1 MBI and 1 AC). Two other groups are currently ongoing and they will end in June 2016. Preliminary results will be presented about the efficacy of Mindfulness Based Intervention compared to an Active Control group.

ATTACHMENT NETWORK STRUCTURE IN COMMITTED COUPLES

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Attachment network, or the set of figures relied on four attachment functions (proximity seeking, separation protest, safe haven, secure base), changes across lifespan according to critical events, where pair bond takes a great role. However, little research have given adequate attention to committed couples after the dating phase. Our work aims to explore attachment network in different couple and family paths, precisely. Participants were 198 married (72.2%) or cohabiting (27.8%) couples (N=396), either expecting the first child (52.5%) or childless-by-choice (47.5%). We

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assessed attachment network with an adaptation of WHOTO used by Doherty & Feeney (2004). We used mixed models with couple as cluster to examine links between relationship status or parenting choice and attachment network structure (reliance on targets for attachment functions, attachment strength to each figure, presence of a primary figure and full-blown attachment). Results show that the partner is the most relevant attachment figure for committed couples: compared to other figures, the partner is relied on more for all functions and represents both a full-blown attachment and the primary figure with higher percentages. Other figures are less relevant than the partner and with differences across functions: parents are secondary figures for secure base, friends are secondary figures for proximity seeking and safe haven, siblings occupy third or fourth position on such functions. Little differences in attachment network occur in relation to parenting choice and relationship status. Expectant women report lower proximity seeking to mother and stronger attachment to her than expectant men and childless people. Instead, expectant men rely on father for safe haven more than expectant women and childless people. Married people report lower proximity seeking to partner than cohabiting couples, and married women report lower reliance on partner for safe haven than married men and cohabiting women.

PAINFUL SOMATIC SYMPTOMS AND NONSUICIDAL SELF-INJURY BEHAVIOR (NSSI) IN ADOLESCENCE: A POSSIBLE LINK?

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Children and adolescents presenting painful and nonpainful somatic symptoms without a clear medical cause are common in paediatric practice and in non-clinical settings. Recurrent somatic symptoms and complaints can lead to considerable impairment in a child's life, influencing development, school attendance and achievement as well as social adjustment. Since it can be supposed that painful somatic symptoms are likely to be associated with psychopathological symptomatology and maladaptive outcomes, the present study aims to investigate prevalence of somatic symptoms as well as to examine the relationship between somatization, nonsuicidal self-injurious behavior (NSSI) and depressive symptoms among Italian early adolescents. 145 early adolescents (59 males, 40.7% and 86 females, 59.3%) aged 10 to 13 years (mean age =12.09; SD = 0.81) were recruited from two Italian secondary public schools and involved in this study. Data were collected using the Children Somatization Inventory-24 item (CSI-24), the Deliberated Self-Harm Inventory (DSHI) and the Children's Depression Inventory-2 (CDI 2). Descriptive statistics on CSI-24 showed that females reported higher scores about somatic symptoms than males, but this difference was not statistically significant. Correlational analyses were conducted for the variables of interest: somatization; NSSI; depression. Significant correlation between somatic

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symptoms and nonsuicidal self-injurious behaviors was found ($r = .558$, $p < .01$). Furthermore, a significant association between CSI-24 and CDI 2 was observed ($r = .548$, $p < .01$), supporting our hypothesis that children and adolescents with physical symptoms without a clear medical cause are more likely to experience psychopathological symptoms (e.g., depression). Findings of this study highlight a link between painful somatic symptoms, non-suicidal self-injurious behaviors and depressive symptomatology. Further research with larger sample sizes is needed to confirm our data.

Key words: Somatic Symptoms, nonsuicidal self-injury, depression, adolescents

BODY, EMOTION DISREGULATION, AND QUALITY OF LIFE IN PSYCHOSOMATIC DISEASES

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The aim of present study was to investigate the relationship between emotion dysregulation, body and quality of life in individuals with psychosomatic chronic diseases and to highlighted the differences with health individuals. Were considered two mechanisms of emotion regulation: emotional suppression and cognitive reappraisal (J. Gross). The difficulties in emotion regulation were studied according to a conceptualization of Gratz and Roemer (2004). The sample was composed by 110 individuals, divided in two groups: chronic diseases group (hypertension, diabetes, dermatologic diseases) formed by 26 subjects, mean age 48 (SD 11.50) and healthy group, 60 subjects, mean age 41.25 (SD 11.42). Data were collected through a partnership between the Laboratory of Clinical and Wellbeing Psychology, D'Annunzio University and a Clinic of General Medicine of Abruzzo, Italy. Regarding the measurements for body disorders were used the Body Uneasiness Test – BUT, (Cuzzolaro et al.,1999) for evaluating the presence of body dysmorphism and Body Mass Index- BMI. The emotions dysregulation was investigated by Emotion Regulation Questionnaire - ERQ (Gross & John, 2003) and Difficulties in Emotion Regulation Scale – DERS (Roemer & Gratz, 2004). The Quality of Life was measured by Positive and Negative Affect Schedule – PANAS (Terracciano et al., 2003) and Satisfaction with Life Scale – SWLS (Diener, 1985). The results suggest that in individuals with chronic diseases there is a significant correlation ($p < .05$) between BMI and emotion regulation mechanisms: expressive suppression ($r = .47$) and cognitive reappraisal ($r = .51$). There is not correlation between these variables and BMI

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in health individuals. Regarding the relation between suppression, reappraisal and body dysmorphism, the results suggest that there are not correlations. The variance differences between the two groups regarding emotion regulation mechanisms, body dysmorphism and quality of life, were analyzed using the t- test. There are significant differences in: Avoidance ($f=10.62$, $p=.002$), General Symptom Index of body dysmorphism ($f=5.18$, $p=.02$), Body Image Concern ($f=3.18$, $p=.05$), Negative Affects ($f=5.12$, $p=.05$). The results suggest that subjects with chronic psychosomatic diseases like hypertension, diabetes and dermatological diseases could have more issues related to the perception and the relation with the own body. This aspect deserves to be widely investigated, especially that these variables may represent elements of care and psychological intervention in the treatment of chronic diseases.

PSYCHOPATHY AND AGGRESSIVENESS IN AN INMATES SAMPLE

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As the literature suggests, aggressiveness is one of the most peculiar characteristic in Antisocial Personality Disorder. Recent research has also shown a link between violent behaviours and psychopathic-related traits in adult offenders. Psychopathy, as measured by the PCL-R, has been documented as a strong predictor of future violent recidivism. To deepen the knowledge of this connection, we evaluated the degree of the association between aggressiveness and psychopathy in incarcerated population. A sample of 93 inmates (Males $N=70$ and Female $N=23$), aged between 22 and 79, completed two types of self-report questionnaire: Self-report Psychopathy (SRP-4) and Aggression Questionnaire (AQ). In this preliminary investigation, results showed that high levels of aggression were correlate to psychopathy traits. Limitations include a lack of gender balance (the sample was predominantly male) and the use of self-report measures.

THE IMPACT OF POST PARTUM DEPRESSION IN AN ITALIAN SAMPLE: RISK AND PROTECTION FACTORS

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This work is based on Engel's bio-psycho-social model (1980), according to which an individual vulnerability and triggering factors (biological-hormonal, experiential, social and cultural) favor the onset of postpartum depression. The research aims to assess the impact of the Depression in prepartum and postpartum women, analyzing its different levels: "Maternity Blues", "Postpartum Depression" and "Puerperal Psychosis" . Currently, the sample consisted of 30 subjects (10 prepartum and 20 postpartum), of the hospital "Sacro Cuore di Gesù"-Fatebenefratelli of Beneventum. After the informed consent to use personal data, the Edinburgh Postnatal Depression Scale-EPDS and the Symptom Checklist-90 were administered to the women of the sample. The comparison between the means, performed with independent-measures t-test, shows that problems related to quality/quantity of sleep in the postpartum group increase, compared to prepartum group, while in the prenatal group we observed a greater tendency to somatization and more feelings of inadequacy-inferiority than in the postpartum group. Moreover, the EPDS highlights that both groups show scores associated with specific symptoms of "Maternity Blues". It would be appropriate to increase the awareness of health structures and its workers to the recognition and diagnosis of "Maternity Blues" and Depressive Disorder associated with pregnancy. In order to investigate the influence of socio-demographic variables and to increase the effectiveness of a potential intervention program, the research goes on using new assessment tools (PAR-Q - DAS), additional statistical surveys, and broadening the sample.

MEASURING NONSUICIDAL SELF-INJURIOUS THOUGHTS AND BEHAVIORS: AN ADAPTED VERSION OF THE SELF-INJURIOUS THOUGHTS AND BEHAVIORS INTERVIEW (SITBI) FOR THE ITALIAN CLINICAL CONTEXT

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Although relevant advances have been made in the study of self-injurious thoughts and behaviors (SITB) over the past years, the prevalence of SITB in Italy remains dramatically high. This is probably due to a difficulty of measuring the whole self-injurious spectrum (i.e., from ideation to act). The objective of this study was to perform the cross-cultural validation of Self-Injurious Thoughts and Behaviors Interview (SITBI). SITBI (Nock et al., 2007) is a 169-item structured interview assessing both suicidal and nonsuicidal self-injurious thoughts and behaviors. The study followed the recommendations for the cross-cultural adaptation process of health-related measures proposed by Beaton et al. (2002), which include several steps: translation; synthesis; back translation; expert committee review; pretesting; submission of documentation for appraisal of the adaptation process to the authors of the instrument; further testing of the adapted version.

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After the forward-back translation process, the Italian SITBI was tested on 30 healthy subjects (mean age=19.18 years; range=15-21 years) and then finally approved by the authors of the instrument. No problems were encountered during these phases. Instead, considerable difficulties emerged in the further testing, particularly when asking heads of public mental health services for permission to administer the test to a sample of patients. Taking into account their concerns regarding SITBI, the Italian version was additionally modified and a brief questionnaire focused only on nonsuicidal self-injurious thoughts and behaviors (SITBQ-NS) was developed by it. SITBI is a useful and understandable tool for the assessment of self-injurious spectrum. However, in order to use it in the Italian clinical context a major revision of the instrument was needed and an adapted version was created. Our group of research is still testing the psychometric properties of SITBQ-NS.

PSYCHOLOGICAL, COGNITIVE ISSUES AND QUALITY OF LIFE IN PATIENTS WITH CHRONIC PAIN

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Chronic pain represents a stressful event in patient's life that causes significant changes, affecting on all aspects of individual's life. Following holistic approach, the psychological and cognitive aspects as well as the quality of life have been taken into exams, to allow to these patients to receive an appropriate psychological support, associated with pharmacotherapy. The objective of this research is the study of chronic pain's effects on quality of life. The sample consists of 30 patients affected by chronic pain, recruited from the Pain Therapy Clinic of Policlinico di Bari and tested by neuropsychological and psychodiagnostic trials, and a questionnaire of Quality of Life. The assessment shows that high levels of anxiety (50%) and depression (63,3%) interfere with the physical, mental, emotional and social functioning of patients. Education seems to be a protective factor, because patients with more years of schooling are able to manage better painful situations ($p<0,005$). The anxious individuals and those which perceived greater pain interference in daily activities, have significantly poorer performance in cognitive tasks ($p<0,001$). The perception of the pervasiveness of pain, therefore, leads a state of anxiety that causes a decrease in the patient's cognitive performance. These results underline the importance of evaluation and psychological therapies and highlight the need for further research on the treatment of chronic pain and psychological complications connected to it.

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AN OBSERVATIONAL STUDY OF THE ATTITUDE TOWARD PROFESSIONAL PSYCHOLOGICAL HELP IN PRIMARY CARE PATIENTS.

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European Brain Council and European College of Neuro-psychopharmacology has estimated that a third of Europeans suffer from psychopathological disorders. Furthermore, 50% of medical advice, behind a somatic symptom, seems to mask psychological disorders. The aim of this study was to evaluate the attitude toward professional psychological help, the presence of psychological problems and the correlation between the constructs evaluated. 379 patients of primary care (129 males, 250 females) undertook a battery of psych diagnostic tests which assess symptoms of anxiety and depression (HADS), attitude toward psychological help (ATSPPHS), alexithymia (TAS-20), psychosocial wellbeing (SF12), illness perception (BRIEF-IPQ), coping (BRIEF COPE). Patients were recruited in the surgeries of primary care (Puglia, Italy). It has been found a significant presence of psychological disorders: clinically significant levels of anxiety (43.5%), depression (45.6%) and alexithymia (33.5%). 17.3% of the patients declared that they needed psychological help; 70,9% showed confidence in psychologist profession. 16,7% had a psychological problem and 19,9% had experience of psychological counseling. A significant correlation between anxiety and depression ($r=0.604$) was observed. The results show a significant presence of psychological disorders and a confidence in the professional role of psychologist. We conclude that professional psychologist in primary care could have a key role for care and prevention.

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ATTENTIONAL STYLES CAN HELP THE DETECTION OF SUBTLE SIGNS CONVERGING WITHIN AUTISM SPECTRUM DISORDERS

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Numerous tools are available to evaluate the proneness to social interaction, especially for Autism Spectrum Disorders. Even though the impairment is broad, specific deficiency could help tracing an individual trajectory, including strengths and weaknesses of patients within the same diagnostic group. The study of the distribution of visual attention, objectively measured by eye-tracking systems, has recently draw a connection between routes of development and impairment: attentional control, joint attention skills and compensative strategies. In our study, we attempted to investigate the individual factors that are correlated to the distribution of visual attention when a person is watching a social interaction in a 3rd person perspective. 42 young adults participated. They watched on a screen 3 persons interacting with each other, while their eye-movements were recorded. Before each video, 1 of 3 different questions was displayed, eliciting mental inference (social condition), visual search (non-social) or passive viewing. We considered fixation duration on 3 Areas Of Interest (AOIs): faces, eyes and bodies. The participants completed 4 questionnaires: Autistic Quotient, Interpersonal Reactivity Index, Symptom Checklist-90, Socio-Economical Score. We found a significant difference in the watching tendencies across the three pairs of AOIs in the different conditions. Fixation on faces and eyes appeared correlated with the subscale of the Interpersonal Reactivity Index, Personal Distress. Though, the most unexpected correlation was found in total fixation duration on the body in the non-social condition, which resulted connected to the Autistic Quotient. In our view, differences in the attentional style, in correlation with autistic traits, could explain this trend: a tendency to sustain attention have been reported in ASD and a tendency to focus after the accomplishment of a task could explain this result.

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**SELF-IMAGE DEVELOPMENT AND PSYCHOSOCIAL FUNCTIONING IN ADOLESCENCE:
A PRELIMINARY STUDY**Di Blasi Maria (1), Muccioli Patrizia (2), Alagna Massimo (2), Torres Davide (1), Duca Ilda (1),
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Self-image is a multidimensional construct involving individual perceptions about oneself, one's body, mental functioning, social attitudes and adjustment in different aspects of life that plays a key role in adolescence. The manner in which the developmental dimensions of self-image and global adolescent mental distress are associated has not been adequately studied. The purpose of this study was to investigate the relationship between self-image dimensions and psychosocial functioning in a clinical sample of adolescents. The study was cross-sectional; 100 adolescents (61% females) ranging in age from 13 to 18 ($M = 15.60$, $SD = 1.18$) were enrolled among those who sought psychotherapeutic treatment in a public outpatient mental health service. Participants completed self-report measures of self-image (OSIQ) and mental health (Y-OQ 30.2). A multiple hierarchical regression analysis was performed to evaluate the associations between self-image dimensions and overall psychological functioning scores, while controlling for age and gender. Analysis were performed using the Statistical Package for the Social Sciences (SPSS). The Ethical Values subscale was omitted due to low internal consistency. Results shown that the final model accounted for 76.0% of the Y-OQ 30.2 total scores variability (Adjusted $R^2 = .72$, $F(13, 86) = 20.906$, $p < .001$). Poorer global psychological functioning was associated with worse Impulse Control ($\beta = -.30$, $p < .001$), Emotional Tone ($\beta = -.35$, $p < .01$), and Family Functioning ($\beta = -.28$, $p < .001$). Gender was also a significant predictor of Y-OQ total scores, with being female predicting poorer psychological functioning ($\beta = -.14$, $p < .05$). Our findings highlight the predictive value of specific self-image dimensions in the development of psychosocial distress during adolescence. Further longitudinal research is needed to confirm these findings and to evaluate the crucial role of other self-image dimensions in adolescence.

By Tambelli Renata & Trentini Cristina

BODY IMAGE PERCEPTION IN WOMEN CANCER PATIENTS: FROM ASSESSMENT TO INTERVENTION WITH “SALUTE ALLO SPECCHIO” PROGRAM

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The concept of body image, previously considered almost exclusively in other sectors, has acquired relevance in the oncological sphere, both in terms of research and also as the specific focus of intervention. The experience of cancer causes significant changes to body image. The body is the first aspect to be struck by the disease and the treatments associated with it bring to the forefront the image of a changed, suffering body that is often no longer recognised or felt as one's own. In turn, these changes can generate difficulties in daily life and interfere with social life, lifestyle, and moods. The changes relating to how a person sees themselves and how others see them threaten the identity, the sense of oneself and integrity. “Salute allo Specchio” is a psychological supportive program for female cancer patients. It was born in June 2013 with the aim to improve patients' body image perception, self esteem and adaptation to illness through techniques aimed at managing the side effects of cancer and its treatments. Up to now 61 female cancer patients were assessed at three separate time points (before the program, at the end of it, and after three months) by the use of the following questionnaires: the Body Image Scale (BIS), the Self Esteem Scale (SE) the EORTC QLQ-30 (Quality of Life). A significant improvement ($p=0.0002$) in body image perception was found both between t_0 and t_1 , and between t_1 and t_2 ($p=0.015$), while self esteem only improves between t_1 and t_2 ($p=0.006$). QoL level significantly increased between t_0 and t_1 ($p=1.86 \cdot 10^{-7}$) and between t_1 and t_2 ($p=0.03$). The present study seems to confirm that taking part to “Salute allo Specchio” leads to a stable improvement in body image perception and self esteem, that leads to an improvement in general quality of life.

By Tambelli Renata & Trentini Cristina

AN EXPERIENCE OF PSYCHOLOGICAL SCAFFOLDING IN PEDIATRICS: FUNCTIONS OF JOINT LISTENING SETTINGS

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Psychological Scaffolding to the Doctor – Patient Relationship (Freda, Dicé & De Luca Picione, 2015; Freda & Dicé, 2015; Freda et al., 2013) is an intervention of clinical psychology aimed to promote dialogic and relational skills in all participants. In our experience, it appeared useful to integrate some psychological dimensions within medical practice, in order to expand new dialogic possibilities helpful to recognize the informative function of emotions, essential to the care. We already presented an intervention in pediatric endocrinology with children with Disorders of Sex Development and their families (Freda, Dicé & De Luca Picione, 2015; Dicé & Auricchio, 2012); pediatrics is a complex contest that we represented as a triangle (Freda & Dicé, 2015) because, during each visit, there are (at least) three participants (a pediatrician, a mother, a child) each one with his/her positions, needs, questions, concerns. Here, we discuss a specific part of our intervention, rather criteria we used for structuring specific setting called "Joint Listening Setting" (doctor, psychologist, users), useful to facilitate dialogue between all participants. So, we describe their specific functions and some of them are: recognition of the plurality of points of view, strengthening dialogic resources, focus on feelings, transformation of informations in resources of meaning, monitoring of the identity of the Doctor – Patient relationship. We believe that these settings, with their transformative value, can facilitate an opening of dialogic exchanges, a better understanding of the diagnosis, expressions of concerns and a decision-making process shared during the treatment. So, an intervention of Psychological Scaffolding can contribute to a gradual construction of competence in participants, facilitating the dialogue between codes of medicine, psychology and daily life, helping the Doctor – Patient Relationship to share meanings and decisions about the child's condition.

By Tambelli Renata & Trentini Cristina

PARENTAL PSYCHOPATHOLOGICAL RISK AND CHILDREN'S EMOTIONAL-ADAPTIVE FUNCTIONING: A LONGITUDINAL STUDY ON NON REFERRED SAMPLE

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It has been widely demonstrated that maternal psychopathological risk has an impact on offspring emotional/behavioral functioning. Yet, relatively limited attention in this field has been dedicated to paternal psychological profiles. Over a period of six years a non/referred sample of N 400 children and their parents has been recruited in schools of central Italy. The study was organized over three waves, each every 2 years (T1 children were 2 years old). Parents filled out SCL90R and CBCL 1,5 5. The aims of the studies were: a) assess stability or change in trends of maternal and paternal psychopathological risk scores, verifying whether they share similar or different curves, b) assess the influence of parental psychopathological risk on their children's emotional and behavioral functioning over time, in a statistical model that considers both maternal and paternal contribution. Results showed that a change occurs both in parental and offspring trends from T1 to T2 and from T2 to T3. Noteworthy, mothers, fathers and their offspring share the direction and shape of the trend in their scores, with lowest values at T3. Involved dimensions were in the mothers and fathers Somatization, Depression and Interpersonal Sensitivity, in the children Internalizing and Externalizing problems. Latent growth curve methodology was used to test, the predictive effect of parental psychopathological risk on the emotional behavioral functioning of children. Parameter estimates for this model indicate that the level of symptomatology of mother and father significantly influence children's emotional/behavioral functioning and their linear development. Moreover, this influence increases over time. This study adds to previous literature in that it longitudinally considers both maternal and paternal psychopathological risk as a predictor of offspring psychological well-being and shows how parental and children's psychological profiles follow similar paths over time.

By Tambelli Renata & Trentini Cristina

EATING DISORDERS IN FEMALE ADOLESCENTS: PSYCHOLOGICAL PROFILES AND FAMILY FUNCTIONING

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Besides the importance of family functioning and of the characteristics and quality of the relationships among family members, several studies demonstrated an association between female adolescents' eating disorders, maternal psychopathology/psychopathological risk and an impaired family functioning. Conversely, there is a shortage of research on the role of paternal psychopathological risk in fostering ED in daughters. In agreement with a transactional theoretical framework, stressing the roles of adolescents' family members' characteristics in predicting the onset of EDs and of psychopathological risk, the study aims to assess female adolescents' psychological profiles, their parents' psychopathological risk, and specific representations of family functioning. A cross-sectional study was conducted recruiting $N_{tot}=120$ families of adolescents, diagnosed with Anorexia Nervosa (Group A), Bulimia Nervosa (Group B) and Binge Eating Disorder (Group C) (average age 14-17; s.d. .769). All selected participants completed self-report questionnaires, assessing psychological symptoms and perceived family functioning (SCL-90-R; Faces IV). The results show that adolescents and parents in the groups present a specific psychopathological profile, in particular with adolescents with anorexia presenting most severe psychopathological risk. Further, adolescents and parents differ in their perception of family functioning and the study highlights some associations between family functioning and psychopathological risk. Our data confirm previous literature, recognizing that family functioning characteristics may constitute a protection or risk factor for adolescents' EDs. In future studies, with control sample or as a longitudinal research, we hope to continue evaluating the effect of adolescents' psychological profiles and parents' psychopathological risk on family functioning, considering specific adolescents' EDs and addressing paternal symptomatic characteristics.

By Tambelli Renata & Trentini Cristina

SHAME EXPERIENCES AND SOCIAL NETWORKING ADDICTION: AN UNEXPLORED ASSOCIATION

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As communicative services are the Internet applications most used by both adolescents and university students (Kuss & Griffiths, 2011), recent research has focused on that form of Internet problematic use specifically associated with the use of social networking sites (SNS), named SNS addiction. Concerning the etiological framework, it has been claimed that problematic use of SNS might derive from the perceived deficiency of social skills in face-to-face relationships and preliminary findings indicated an association with social interaction anxiety (Casale & Fioravanti, 2015). The current study investigates the main and indirect effects of shame experiences and perceived benefits of computer-mediated communication (CMC) compared with face-to-face communication, on SNS addiction. In particular, a model in which perceived benefits of CMC (i.e. escapism, control over self-presentation, and approval/acceptance) mediate the association between shame and SNS problematic use was tested. 590 undergraduate students (mean age = 22.29 + 2.079; F = 53.2%) were recruited. The assessed structural model produced adequate fit to the data ($\chi^2 = 352.99$; $df = 92$; $p < .001$; RMSEA [90% CI] = .07 [.06-.08]; CFI = .97; SRMR = .06). Variables accounted for 50% of the variance in SNS addiction. A partial mediation model in which shame predicted SNS addiction levels through the perceived benefits of CMC was found. A direct relationship between shame and problematic SNS use was also detected. The current study highlights how feelings of shame can contribute to problematic use of SNS and emphasizes the necessity of taking into account the perceived benefits of CMC when exploring psychological risk factors for SNS addiction. CMC allowed people who struggle with feelings of shame to escape from negative emotions, to hide their supposedly negative attributes and to reduce the possibility to be rejected. For this reason, shame might be a specific risk factor in developing addiction to SNS.

By Tambelli Renata & Trentini Cristina

QUALITY OF LIFE IN BARIATRIC SURGERY: A TEN-YEAR FOLLOW-UP STUDY

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Bilio-intestinal bypass (BIB) is a malabsorption intervention in bariatric surgery. After the intervention, the patients show a massive and rapid weight reduction due to malabsorptive state. In front of an important reduction of obesity-related cardiovascular risk factors, patients continue to show several adverse events after the intervention (e.g. diarrhoea). Aim of the present study was evaluating the quality of life and general satisfaction after ten years from the intervention. Forty-five patients with BIB have been contacted for a phone interview (age-range 31-65; m.a.41; SD+10.6). An ad hoc questionnaire was structured to detect current Body Mass Index (BMI), general satisfaction for the intervention, adverse events, need for psychological support after BIB and self-reported symptoms of anxiety/depression. SF-36 has been administered to detect the current quality of life. Data has been analysed with SPSS (V.22) and compared with the normative sample for SF-36. Thirty-one (70%) would repeat BIB. Mean BMI pre-intervention was 44.6, post 32.8 ($p < .001$). All patients showed at least one chronic adverse event. However, patients showed a statistical significant deficiency in all the areas of functioning (general health, physical functioning, role limitations due to physical health, energy/fatigue, pain, emotional well-being, role limitations due to emotional problems, social functioning) as measured by SF-36, without distinction between the group who would repeat BIP and the group who would not. No patients asked for psychological support after BIP, even though 51.1% reported symptoms of anxiety and/or depression. Patients who underwent BIP show a bad quality of life after ten years, both in the case that they would repeat the intervention or not. Half of patients reported symptoms of anxiety and depression, but they never asked for a psychological support. Ad hoc psychological intervention should be implemented to ameliorate the quality of life of these patients.

By Tambelli Renata & Trentini Cristina

PREDICTING COUPLE DYADIC ADJUSTMENT FROM ADULT ATTACHMENT STYLE AND INTERPERSONAL COMPETENCE: A PILOT STUDY

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Literature has largely showed that the quality of couple adjustment is related to the adult attachment style (Li & Chan, 2012). Research also showed the association between the adult attachment styles and interpersonal competence with respect to the individual differences both in handling conflict (Castellano et al., 2014) and to provide emotional support for the partner (Epstein et al., 2015). To the best of our knowledge the impact of interpersonal competences on the quality of romantic relationship has not been investigated. The current pilot study aimed to evaluate whether the dyadic adjustment can be predicted on the basis of attachment and interpersonal competence perspective, such as the conflict resolution and emotional support skills. A cross sectional research design has been set up. The Experience in Close Relationship, the Dyadic Adjustment Scale, and the Interpersonal Competence Questionnaire were administered to 70 cohabitant/married participants. A two-steps hierarchical multiple regression was conducted using the dyadic adjustment (DA) as dependent variable. Anxiety and Avoidance (ECR) subscales were entered in step one; Conflict Management and Emotional Support (ICQ) subscales were entered in step two. Results show that Avoidance accounted for 28.2% of variance of DA, and significantly contributing to the regression model ($F(2, 67) = 14.53, p < .001$). When the interpersonal competence subscales were entered, an additional 6,7% of variance of DA was explained ($F(2, 65) = 4.483, p < .05$). Anxiety subscale did not show a significant correlation to the DA. Attachment style - as well as interpersonal competence such as conflict management and emotional support - represents a valid perspective from which look at the quality of couple relationship. Further research is needed to deepen investigate the exchange between individual and dyadic features.

By Tambelli Renata & Trentini Cristina

**PSYCHOLOGICAL WELL-BEING AND POSTNATAL DEPRESSION SYMPTOMATOLOGY
IN PREGNANCY INTENDEDNESS: A PILOT STUDY OF PRIMIPAROUS WOMEN**

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Maternal psychological well-being is a predictor of postnatal maternal adjustment. The present retrospective descriptive pilot study assesses impact of pregnancy intention on women's psychological well-being and on maternal postnatal depression symptomatology. The sample consists of 1032 Italian primiparous women aged 19-45 who have attended antenatal classes. Women completed the PDPI-Revised and PWB within the eighth to ninth month of pregnancy, and EPDS, GHQ-12 item, PWB and a brief questionnaire asking information about the delivery itself, within six to eight weeks after the birth of the child. Unplanned pregnancy group of women - in majority women under 24, unemployed or student, with lower social status – are less involved in stably sentimental relationship with partner compared to women of planned pregnancy group or slightly mistimed group. Also women of greatly mistimed group presents more unemployed/student and are less involved in stably sentimental relationship with partner compared to planned pregnancy group; and high levels of unhappiness and depression feelings in postnatal period than other women. Women of slightly mistimed group report that pregnancy came sooner than they would like, but at about the right time. This group is made up of mostly women under 24, and experienced major levels of fear and panic in postnatal period than women of planned pregnancy group. Compared to others group of women, planned pregnancy group count statistically more women over 35, and shows a better ability to manipulate and control complex environments, felling that their life is meaningful. In particular, the Italian primiparous women who planned pregnancy show greater psychological well-being than other groups. Even in literature it's clear the importance of pregnancy intention and to offer appropriate services to support women. Future research is needed.

By Tambelli Renata & Trentini Cristina

A PILOT STUDY OF MATERNAL AGE, PSYCHOLOGICAL WELL-BEING AND POSTNATAL DEPRESSION SYMPTOMATOLOGY IN PRIMIPAROUS WOMEN.

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In the last few decades a growing subset of women delayed pregnancy and in Italy the average age of women giving birth is approximately 32 years. Our country has the highest percentage of this phenomenon compared to other European states, passed only by Swiss. The psychological consequences of raising of women's childbearing age are still poorly studied and in literature there is no consensus on these aspects. Our purpose was to evaluate the impact of maternal age on psychological well-being and postnatal depression symptomatology. We performed a retrospective descriptive study of 1032 primiparous women who attended antenatal classes. Three groups by age were identified: subjects younger than 32 years, between 33 and 39 years old and above 40 years old. The participants completed the PDPI-Revised and PWB within the eighth to ninth month of pregnancy, and EPDS, GHQ-12 item, PWB and a brief questionnaire asking information about the delivery itself, within six to eight weeks after the birth of the child. Women above 40 years old have planned pregnancy more than the youngest group. However, they are less involved in stably sentimental relationship with partner than other women. They also reported to be, more than others group of women, unemployed and highest percentage of cesarean section. Women younger than 32 years old reported that pregnancy arrived earlier than they would like - but they planned it in the near future - in greater numbers than other group. They are unemployed and/or student more than intermediated group and they reported a high percentage of spontaneous delivery. Subjects between 33 and 39 years old compared to younger women claimed to have planned pregnancy and reported to have lack of concentration and feeling of being worthless in postpartum more than younger group. This women, therefore, shows fewer psychological well-being than other study participants. Future research is needed.

By Tambelli Renata & Trentini Cristina

THE RELATIONSHIP OF MINDFULNESS WITH WELL-BEING AND NEUROTICISM

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Research has largely investigated the association of mindfulness with stress reduction and its benefits for mental and physical health. In this study, we examined whether differences in the habitual use of mindfulness skills were associated with specific well-being constructs and neuroticism. 211 volunteers aged 21-84 years completed the Five Facets Mindfulness Questionnaire (i.e., observing, describing, acting with awareness, nonjudging and nonreactivity), neuroticism, psychological well-being (PWB), and subjective well-being (SWB) measures, such as life satisfaction and subjective happiness. Preliminary analyses showed that a single second-order factor loaded by the “what” skills of mindfulness (i.e., describing and observing) was the best fitting model of the FFMQ-SF Italian version. Distinct mindfulness skills were differentially associated with specific components of well-being. In particular, the “what” skills of mindfulness were positively correlated with the “core” eudaimonic components of PWB (i.e., personal growth, purpose in life, and autonomy). The “how” skills of mindfulness (i.e., nonreactivity, nonjudging) were negatively associated with neuroticism aspects, such as withdrawal and volatility. Describing and nonreactivity were the only mindfulness skills significantly correlated with the SWB measures. Men had higher nonreactivity scores than women. Instead, women had higher observing scores than men, especially at older ages. Last, men with a college degree had higher acting with awareness scores than men with lower education level. These findings suggest that specific mindfulness skills may be differentially effective in promoting PWB and preventing internal negative experiences.

By Tambelli Renata & Trentini Cristina

ALEXITHYMIA, BURDEN AND EMOTIONAL STATE IN ALS' CAREGIVERS

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Living with a progressively disease such as Amyotrophic lateral sclerosis (ALS) has a strong impact on the people affected and on their relatives, who have to tackle the demanding duties of caring for and assisting them (Tramonti et al., 2014). Although an extensive literature documents the levels of distress among caregivers of patients with progressive illness, less attention has been directed to determinants of caregiver mood and emotional regulation (Rabkin et al., 2009). In particular, there are not studies that assess the role of alexithymia in ALS. We evaluated the relationship between alexithymia and burden, and psychopathological symptoms in ALS' caregivers. 17 ALS' caregivers were tested with the following instruments: Toronto Alexithymia Scale-20 (TAS20); Hospital Anxiety and Depression Scale (HADS); Caregiver Burden Inventory (CBI). 9 (53%) caregivers suffered from alexithymia (M=58; SD=6.2), while 8 individuals (47%) were not alexithymic (M=41.25; SD=8.31). We showed a positive correlation between total alexithymia score (TAS20-Tot) and depression (HADS-D; $\rho = 0.575$, $p < 0.01$) and emotional burden (CBI-E; $\rho = 0.581$, $p < 0.01$). We found positive associations between TAS20 Difficulty Identifying Feelings subscale (TAS20-DIF) and anxiety (HADS-A; $\rho = 0.505$, $p < 0.05$), and HADS-D ($\rho = 0.679$, $p < 0.05$), and CBI-E ($\rho = 0.672$, $p < 0.01$). TAS20 Difficulty Describing Feelings subscale (TAS20-DDF) correlated with HADS-D ($\rho = 0.508$, $p < 0.05$) and CBI-E ($\rho = 0.747$, $p < 0.01$). TAS20 Externally-Oriented Thinking subscale (TAS20-EOT) did not show any significant correlation. Our results in ALS' caregivers confirm previous evidence of a relationship between alexithymia and depression symptoms in other severe disabling diseases. Difficulty in identifying and describing own and others feelings could increase caregivers' emotional negative state and burden. It could lead to ineffective emotional responding and it could be a risk factor for care-related stress.

By Tambelli Renata & Trentini Cristina

DIFFICULT REPRESENTATIONS IN THE WOMENS' NARRATIVES ON BREAST AND CERVICAL CANCER SCREENING

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In a psychodynamic framework, focusing the attention on the breast and cervical cancer screening it's important to consider fantasies and emotions that can promote or obstruct a preventive activity. The oncological risk, strictly linked to the main areas of the female sexuality, femininity and procreation (Ferraro & Nunziante Cesàro, 1985; Parat, 2000), refers to conflictual aspects and psychic polarities such as life and death (Freud, 1920; Green, 1983), health and illness (Duberstein & Masling, 2000; Sontag, 2002), healthy and deadly body (Reich, 2009). The narration is the meaning device (Margherita, 2009) that allows to focus the protoemotional aspects (Ferro, 2006) and it can represent events and thoughts (Freda, 2008), by constructing new meanings (Bruner, 1990) and by transforming the meaningless into an imaginable form (Barbieri, 2007). The aim of the research is analyze how the oncological prevention is structured through the narrations of 58 young women between the 25 and 35 years old. The variables considered are the familiarity, as cause of risk and the choise to write narration about the breast cancer screening and/or cervical cancer screening. It has been done a thematic analysis of multiple correspondences (Lancia, 2004, 2008; Reinert, 1995) and the results underline five thematic clusters that, after an interpretation using factorial mapping, fall into 3 sense vectors: from the manifest to latent content; from the symbolic to the concrete thought; from the culpability to the illness. The research allows to highlight how the oncological prevention could pass from the possibility of representation to confusion areas where it' s difficult to access to each meaning and the transformation of the emotions in thought.

By Tambelli Renata & Trentini Cristina

THE RELATIONSHIP BETWEEN METACOGNITIONS, COPING STRATEGIES AND BURNOUT IN PALLIATIVE HOME CARE WORKERS.

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Every day, home care workers have to confront with the human vulnerability, dying and death of their patients and families. This frequent confrontation to suffering may also cause high levels of stress for the workers themselves to the point that they develop a burnout syndrome. Burnout is described by Maslach (1996) as “a psychological syndrome of emotional exhaustion, depersonalization and reduced personal accomplishment that can occur among individuals who work with other people in some capacity”. So, it is a psychological state of exhaustion, related to stress at work. At present, few studies explore the risk of burnout on home care workers and there aren't studies that identify which factors could prevent the onset of burnout syndrome. The goal of this study is to explore the correlations between the variables investigated. The study examined a group of sixty-two operators (M=24;F=38) working in a team of Integrated Home Palliative Care in Sicily. The study was based on a self-report protocol including: a questionnaire to determine demographic features of the participants; the Italian Version of Maslach Burnout Inventory (MBI) to measure presence of burnout; the Coping Inventory for Stressful Situations (CISS) to investigate coping strategies; the Italian version of MCQ-30, used to assess a range of metacognitive beliefs and processes relevant to vulnerability and maintenance of emotional disorders. Analysis Statistic was conducted by using SPSS. The results did not show a problematic level of burnout and metacognitive elements. Instead, this study showed highly and specific correlations between the metacognitive factors and components of burnout. In conclusion, the results highlight the role to tailored specific interventions of prevention and promotion for health care workers.

Keywords: metacognition; burnout; coping; palliative care.

By Tambelli Renata & Trentini Cristina

THE ROLE OF GENDER IN METACOGNITION. A PILOT STUDY

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There are many gender differences relating to problems of mental health. They affect all aspects including diagnosis, treatment, and incidence. The consideration of gender differences in mental illness offers the opportunity to examine the impact of biological and psychosocial factors on both the cause and development of mental disease and the therapeutic approach. Until now there has been no research conducted on the role of metacognition based on gender and its relationship to other psychological constructs, such as anxiety and depression. This study had two primary goals. The first was to compare metacognitions by gender. The second goal was to explore the relationships among the constructs of metacognitions, anxiety, depression, pathological worry, and obsessive-compulsive symptoms in two groups. Sixty-four participants (32 males and 32 females) took part in this study and they were assessed with the MCQ-30, STAI, PSWQ, and PADUA. The results did not show significant differences by gender between the two groups of subjects (T-test for two independent samples for MCQ-30). However, results of correlational analysis have shown specific and different correlations between dysfunctional metacognitive beliefs and the other constructs on the basis of gender. In conclusion, results of this study point out that gender differences can play an important role in the clinical efficacy of treatment. However, there is a growing need to better understand the role of metacognition in gender in order to improve diagnosis and treatment.

Keywords: Depression; Anxiety; Metacognition; Gender Differences.

By Tambelli Renata & Trentini Cristina

MIGRATION AND CLINICAL METHOD. A QUALITATIVE STUDY WITH ITALIAN MENTAL HEALTH PROFESSIONALS.

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Increased migratory processes and growing cultural diversity require to rethink usual patient approaches and raise important questions: how can a health professional make a diagnosis and treat properly a patient only relying on its own meaning of health and illness, without knowing other attitudes towards medical practices? The question becomes even more complex when the Other is encountered to understand and deal with psychological and existential suffering. This difficulty can be recognized in the confusion of both mental health professional and patient as they attempt to answer questions not always shared or translatable. Migrants' presence in care services not only give us information about ourselves and our ways of taking care but imposes a challenge, both epistemological and practical. It forces us to think back our models of well-being, etiology and treatment of suffering, because always incomplete and partial. The study aims to investigate psychological assessment encounter between clinical mental health professional and migrant patient, focusing on lived experienced, perceived difficulties, use of assessment instruments and diagnosis. In this presentation a theoretical reflection on this issue will be proposed, integrating ethnopsychiatric and phenomenological perspective. In addition, this poster will discuss first data collected from 30 in-depth interviews with clinical psychologists and psychiatrists working in Veneto region's health and social services (21 Local Health Authorities). At last, it will be advanced a proposal on how to meet cultural otherness in the daily care practices.

By Tambelli Renata & Trentini Cristina

THE IMPACT OF INFERTILITY ON THE QUALITY OF RELATIONSHIP AND ON THE SEXUALITY IN INFELITY. AN EXPLORATION RESEARCH ON AN ITALIAN SAMPLE

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Several studies have evaluated the impact of infertility on the sexuality and on the quality of couple's relationship perception in infertile subjects, comparing infertile males and females (Ramazanzadeh et al., 2006), without reaching an unique result (Ohl et al., 2008). The aim of this study is to evaluate the change or not of the quality of couple's relationship and of the sexuality in infertile subjects, depending on the infertility type and factor, analyzing an Italian sample. Also, we want to evaluate the protective role of the adult attachment and of the representations of the relationship with parents during infancy compared to these two variables, comparing infertile males and females. The sample consisted in 114 infertile subjects. Instruments used: Personal Information Card, Dyadic Adjustment Scale (DAS), Multidimensional Sexuality Questionnaire (MSQ), Experiences in Close Relationships Questionnaire Revised (ECR-R), Parental Bonding Instrument (PBI), Symptom Checklist 90 Revised (SCL-90R). Only for females there is a correlation between the infertility factor and the "Emotional expression" scale of DAS ($B=,778$; $p=,006$), "Sex depression" scale ($B=-1,076$; $p=,037$) and "External sex control" scale of MSQ, ($B=-1,392$; $p=,033$). The scales of PBI and ECR-R results to be significantly correlated with DAS and MSQ for both males and females. These results provide an empirical contribution to the literature on the theme of infertility and of its impact on infertile individuals and of the factors that can help them to go through this problem.

Key words: infertility, attachment, sexuality, relationship quality

By Tambelli Renata & Trentini Cristina

THE FAMILY'S ROLE IN YOUNG GAMBLERS

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To our knowledge, very little is known in literature about the family relationships in regular and pathological young gamblers. The study aimed to investigate differences among gamblers and non-gamblers on personality traits, parental attachment and family functioning. 468 high school students were recruited. A battery of tests was administered: The South Oaks Gambling Screen-Revised for Adolescents (SOGS-Ra) (Winters & Co. 1993), The Inventory of Parent and Peer Attachment (IPPA) to assess perceived quality of attachment to mothers and fathers (Armsden e Greenberg, 1987), and the Family Adaptability and Cohesion Evaluation Scale (FACES IV) to evaluate the adaptability and cohesion dimensions in family interactions (Olson, 2011). 67.8% of our sample gambled over the prior year, this percentage included 9.8% of problematic gamblers (6.6% at risk and 3.2% pathological) and 58% of social gamblers. A series of MANCOVAs were computed in order to evaluate differences between gamblers and non-gamblers on parental perceived attachment, family functioning. A significant effect of the parental attachment was found, Wilk's $\lambda = .967$, $F(6, 460) = 2.601$, $p = .017$; specifically, non-gamblers showed more trust in their mothers and fathers and less alienation toward their mothers. A significant difference also was found in family functioning Wilk's $\lambda = .949$, $F(6, 460) = 4.029$, $p = .001$: gamblers reported less family flexibility and cohesion and were more disengaged and unmeshed to the family. In conclusion data are uninterrupted with the literature, that suggest adolescent addictions increase in families characterized by weak emotional bonds and the incapacity to change the relationship rules in response to situational and developmental stress (Baiocco, Tafà 2009). These findings give an added value to the already known results on gambling, as the personality traits, and make the framework more articulated in order to build prevention strategies.

By Tambelli Renata & Trentini Cristina

ILLNESS NARRATIVES AND MODAL ARTICULATION: AN INNOVATIVE METHODOLOGICAL AND CLINICAL PROPOSAL

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We propose modal articulation as a sensemaking device that a person adoperates in subjective way to construct a relational positioning by defining possibilities, opportunities, needs, constraints, wishes, intentions to act, and interactions with others in an experiential context (De Luca Picione & Freda, 2016; Freda & Martino, 2015; De Luca Picione, Martino & Freda, in press). This proposal fill a gap relative to a poverty of studies, in a psychological framework, about the use of modal categories. According to us, the main modal use functions and their articulation from a semiotic and psychodynamic psychological perspective, is relevant along three issues: The connection function Modals have a connective function between affective primary matrix of the subject and its first discretization in a symbolic form (Greimas, 1983; Salvatore, 2016; Valsiner, 2014).The mediation function Modals make complex the relationships between social partners. They allow for the construction of a dialectics between subjectivity and alterity, the construction of a subject-in-relationship. Modal articulation gives shape and direction to interpersonal positioning (Harrè, 2011).The vectorial function Modal operators contribute to the action orientation (enabling and/or blocking) in space and time. They are inherently temporal and contextual. Modal operators contribute to construct sense of agency for the subject (Caston, 2010). We constructed a method of analysis used with six illness narratives to deepen the modal articulation construct within each narrative. In order to analyze the use and function of modal verbs (Can, Must, Will, to Know) we used T-lab quali-quantitative linguistic software to perform statistical analysis: relative index of single and general modality frequencies and Markovian analysis. Results are discussed in clinical terms inasmuch we found specific subjective narrative configurations of modal articulation: modal dispersion, plasticity, focusing, rigidity and poverty.

By Tambelli Renata & Trentini Cristina

DEFICIT IN EMOTION RECOGNITION IN HIGH FUNCTIONING AUTISM SPECTRUM DISORDER (ASD): A COMPARISON BETWEEN FACIAL AND BODILY EXPRESSIONS

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Social information can be communicated by various channels, among which facial expression and body movement are pivotal. Difficulties in understanding other people in everyday interaction are widely reported in people with ASD. However, scientific findings on recognition of emotions in ASD - both with facial and bodily expression - are mixed. In our study, we aimed to investigate the ability of individuals with HF ASD in recognizing emotions across a range of different social signals, and to compare differences between body stimuli with implicit or explicit movement. Moreover, we investigate the relation between age and IQ level and the performance. 18 subjects with HF ASD and 18 controls (matched for non-verbal IQ, age and gender) were asked to categorize images of faces, images of whole body, and video clips of full-light and point-light body movements depicting emotion of fear, happiness or neutral expression. Responses were collected by keyboard. Accuracy and reaction times (RT) were recorded. We found that HF ASD were less accurate and slower than TD in recognizing emotion, in every stimulus categories, independently of emotional content. Accuracy was highest for body images, RT were fastest for faces. Specifically for bodily expression, accuracy was lower for dynamic than for static stimuli, and for point-light than full-light respectively. In ASD, the IQ level predict accuracy, and the interaction between age and IQ predict the reaction times. No significant relation was found with age or IQ in TD group. Our findings show that ASD impairment in recognizing emotions is not limited to facial expression, but it is extended to all social cues. Deficit are independent from emotional valence and related to the quantity of motion, suggesting that the ASD impairment is due to a more general deficit in motion – rather than emotion – processing. Finally, a high IQ level seems to subtend the acquisition of compensatory mechanisms, which becomes more efficient with age.

By Tambelli Renata & Trentini Cristina

TYPE D PERSONALITY AND DIABETES: A STUDY CENTRED ON QUALITY OF LIFE

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Diabetes is a serious chronic disease that lead a physical and psychological complications that imposes a significant economic burden on the national health care system worldwide. Recent studies have shown that specific aspects in the personality of patients with diabetes may be associated with increased risk of adverse outcomes. Type D personality (TDP) in diabetes was found to be associated with poor glycemic control, more difficulties to realize self-health-management behaviors, a higher number of vascular complications and an increased psychopatological risk. This study aimed to investigate the relation between TDP and quality of life in patients with Type 1 and 2 Diabetes Mellitus. 160 ambulatorial patients was recruited from the "S.S. Annunziata" hospital of Chieti, using the sistematic random sampling. DS14 and WHOQOL-BREF were used to measure TDP and Quality of Life, respectively. HbA1c was obtained to assess glycemic control. Data were analyzed through descriptive methods, independent t test and correlation, using SPSS16. In our sample the prevalence of TDP was 35%. The mean overall quality of life score in Type D patients was $57,0938 \pm 11,597$ which was significantly lower than non-Type D patients with $64,94 \pm 12,078$ (p value $<0,001$). The perception degree of the QoL related with diabetes was associated with the presence of Type D personality but not with HbA1c levels. In our sample of diabetic patients the prevalence of Type D personality has a considerable impact on the quality of life. It has become even more essential to further increase our understanding of the associations between diabetes and TDP and their effects on the health outcomes to improve the clinical management.

By Tambelli Renata & Trentini Cristina

MANIPULATION AND CONTROL IN COUPLE RELATIONSHIPS. A STUDY OF YOUNG WOMEN

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The term gaslighting refers to a typology of psychological abuse that is expressed through acts of manipulation, which tend to control a partner's mental and affective state. The aim of the present study was to assess the presence of gaslighting behaviour as sustained by a group of young women in their relational experiences as a couple. Moreover, the associations between frequency of gaslighting behaviour and specific maladaptive personality traits, were evaluated. One hundred women, aged from 19 to 30 years ($M=22,5$; $ds=3,14$) participated in this research study. Manipulation and/or control behaviour were evaluated by administering 25 descriptions of three typologies of gaslighter (glamour, good-guy and intimidator) and 20 descriptions of victim's reactions to manipulation and/or control attempts (Stern, 2007). In order to measure personality traits the Personality Inventory for DSM-5 (PID-5; Fossati, Borroni, 2015) was administered, in brief form for participants and informant form for their partners. Results show that the three forms of gaslighting and the reactions to the controlling behaviour sustained are connected to dysfunctional domains of personality. In particular, it was possible to highlight the presence of an association between glamour gaslighting and the domains of negative affect, antagonism, disinhibition and psychoticism, whereas it seems there is no association between glamour gaslighting and the domain of detachment. Furthermore, it is possible to highlight an association between the victim's reaction to control and dysfunctional domains of personality. Preventive interventions of Intimate Partner Violence should, therefore, take into consideration the variable in personality traits both in abuser and victim.

By Tambelli Renata & Trentini Cristina

STABILITY AND CHANGE OF ATTACHMENT STYLES FOLLOWING IDIOSYNCRATIC LIFE EVENTS: PRELIMINARY EVIDENCE BASED ON THE STATE ADULT ATTACHMENT MEASURE (SAAM)

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Attachment security, anxiety, and avoidance styles are acquired in infancy to remain stable across the life-span. Nonetheless, major life events influence attachment styles. We examined the extent to which attachment ratings had stable trait and fluctuating state characteristics. To this purpose 46 participants took the State Adult Attachment Measure (SAAM) on two different occasions (T1 and T2) spaced one month apart. On T2 participants were asked if a major life change occurred between T1 and T2. 25 participants reported no change, 21 reported a life change, in most cases with a positive valence. Data were modeled in a PLS-SEM framework. For each of the three styles, an exogenous and an endogenous latent variable loaded on T1 and T2 items, respectively. A regression path was set to represent test-retest stability. According to PLS-SEM, the state account for a set of measures is supported if the square root of the Average Extracted Variance (sqrAVE) is larger than a test-retest coefficient. Multiple group analyses compared model's parameters for participants who experienced a life change and no change. The sqrAVE was larger than the test-retest coefficient for security and anxiety scores, suggesting fluctuations in attachment states. Avoidance ratings exhibited more stable trait-like characteristics. Multi-group analyses revealed that T2 scores were less predictable for participants who experienced a life change, attaining statistical significance for attachment security, only. Participants reporting positive life changes tended to score higher on security on T2. Our data show that SAAM scores were affected by trait- and state-like components. Security exhibited state-like characteristics for participants who reported a major life change. SAAM is indeed sensitive to life events that influence attachment styles. Future studies, on larger samples, involving clinical populations, and multiple measurement occasions are needed to cross-validate study's results.

Keywords: adult attachment; state-trait analysis; change; PLS-SEM;

By Tambelli Renata & Trentini Cristina

COMPLIANCE TO TREATMENT: ANXIETY, DEPRESSION AND OPTIMISM IN A WOMEN SAMPLE WITH AND WITHOUT BREAST CANCER DIAGNOSIS

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The aim of the work is to describe the levels of anxiety, depression and optimism in women who were previously (but no longer are) diagnosed with breast cancer and undergo the usual mammographic medical control, and compare them with a second group of women, who has not received a diagnosis but undergoes the screening mammogram. The relation between pessimism/optimism and depression/anxiety states in the two groups is investigated. The sample is composed of 32 women with previous breast cancer diagnosis and 33 women that undergo the precautionary screening. Every patient was administered the Hospital Anxiety and Depression Scale (HADS) to measure anxiety and depression levels and the Life Orientation Test - Revised (Lot-R) to assess optimism. Correlational analysis and Multivariate analysis of covariance were performed using the SPSS software. Women with previous diagnosis of breast cancer show higher levels of anxiety and depression compared to women who take the precautionary screening mammogram. No significant differences were highlighted, however, with regard to the levels of optimism. The experience of a breast cancer is, in line with the literature, one of the most burdensome events from a bio-psycho-social point of view. These results once more underline the importance of a psychological support in oncologic contexts, since high levels of anxiety and depression interfere with the cure, diminishing the patients' compliance to medical treatments.

By Tambelli Renata & Trentini Cristina

PHYSIOLOGICAL AND SELF-REPORTED EMOTIONAL RESPONSES OF PARENTS OF CHILDREN WITH AUTISM SPECTRUM DISORDER TO INFANT CRY

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Cry is a communication way children use to express their needs or wants. Numerous studies have indicated that adults perceive cry of infants with atypical development differently compare to cry of typically developing (TD) infants, such as unexpected and more negative. Our aim was to evaluate the physiological and emotional responses of parents of children with ASD and compare with parents of typically developing children during the listening of crying of children with two different developmental conditions: autism and typical development. The participants comprised total 49 parents (parents of TD children and parents of ASD children). The experiment was structured into two parts; the first part stands for the physiological data acquisition (heart rate), whereas the second one stands for the behavioral data acquisition (stress, arousal and valence) during the listening of crying of children with ASD and TD. Parents of children with ASD and parents of TD children are not differentiated in terms of how they perceive infant cry, they reported same levels of stress, arousal and valence. Interestingly, physiological results showed that parents of children with ASD have higher heart rate than parents of TD children during both ASD cry and TD cry. Moreover, both family types reported ASD cry as more stressful, aroused and less pleasant compare to TD cry. These findings highlight how parents of children with ASD perceive a signal from a child with ASD. Regarding to the clinical implications, an intervention program for parents of children with ASD might be helpful to attend atypical crying episodes so parents can correctly interpret the signal from their children.

By Tambelli Renata & Trentini Cristina

CORONARY HEART DISEASE AND RORSCHACH REPRESENTATION OF THE SELF

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The authors point out that some content of psychosomatic disorders in subject affected by coronary heart disease can be translated into symbols that enter in the form of image consciousness in a broader representation of the self. Therefore, taking a cue from the psychodynamic tradition, the authors wish to analyze: the amount of inanimate movement response, considering that in the psychoanalytic tradition of Rorschach the same can be traced back to conflicting archaic nuclei; the amount of anatomy contents, as an expression of devitalized body elements projected on the representation of the self. Moreover, the authors wish to clarify whether is possible to interpret the contents arising from specific cards in the framework of the psychoanalytic teaching of Freud and Jung. Finally, the authors wish to verify whether the occurrence of identical responses from different subjects to the same tables of the Rorschach's test can be considered as phenomenological evidence of a psychopathological state. In this study, the observation group is represented by 40 subjects of the second and third adulthood. The study, based on a non-psychometric approach, aims to describe the representation of the self, according to the "Grill of self representation" of Rausch de Traubenberg, which is divided into the Human, Animal and Objects categories. These categories are configured in terms of relationship and sexual identification. The authors underline the significance of these observations in order to define a connection between psyche and body mediated by image.

By Tambelli Renata & Trentini Cristina

DEPRESSION, BUT NOT ANXIETY, IS ASSOCIATED WITH POOR QUALITY OF LIFE IN PATIENTS WITH CONGESTIVE HEART FAILURE

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There is consistent evidence showing that congestive heart failure (CHF) contributes to clinically significant impairment in patients' functional status and quality of life. Accordingly, the New York Heart Association (NYHA) functional class is commonly used to assess CHF severity, and the Minnesota Living with Heart Failure Questionnaire (LHFQ) has been developed as a specific instrument to evaluate quality of life in CHF patients. It is well-known that a substantial number of patients with CHF report anxiety and depressive symptoms, which, separately, have been found to contribute to poor quality of life. However, it is still unknown whether anxiety and depressive symptoms are differently associated with poor quality of life in CHF patients. To this end, 55 patients completed a psychological evaluation, including the Beck Depression Inventory II (BDI-II) scale, the Beck Anxiety Inventory (BAI) scale, the Instrumental Activities of Daily Living (IADLs) questionnaire, and the LHFQ. Hierarchical regression models were conducted to predict IADLs and LHFQ scores from BDI-II and BAI scores, controlling for the NYHA functional class. Regression models showed that BDI-II scores significantly predicted the IADLs and LHFQ scores. By contrast, BAI scores were unrelated to both IADLs and LHFQ scores. The current findings showed that depressive, but not anxiety, symptoms contribute to poor behavioral functional capacity and quality of life in patients with CHF above and beyond functional impairment as evaluated with the NYHA functional class. The present study also suggests that the inclusion of psychological assessment of depressive symptoms is essential to anticipate which patients suffering from CHF are more likely to show poor quality of life.

By Tambelli Renata & Trentini Cristina

MINDFULNESS AND INFERTILITY-RELATED STRESS DIFFERENCES IN WOMEN AND MEN

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International literature shows infertile people react differently to diagnosis of infertility and ART, manifesting dysfunctional emotional responses, e.g.: stress, anxiety and depression. Moreover, previous research shows men and women with infertility significantly differ in grade of infertility-related stress; specifically, women highlight higher levels of stress. In addition, some studies have shown the effectiveness of psychological interventions based on acceptance and awareness. In order to contribute to develop a tailor made psychological intervent, the main objective of this research is to analyze mindfulness and coping strategies and their influence on stress in a sample of infertile people. The sample consists in 101 infertile people (49 men and 52 women). Participants completed self-report: 1. Five Facet Mindfulness Questionnaire; 2. Fertility Problem Inventory; 3. Coping Orientation Problems Experienced. The procedures have been approved by the Department of Dynamic and Clinical Psychology of Sapienza. The statistical analysis show that women exhibit more stress than men ($p=.002$) compared to all domains. Considering coping strategies women show a significant difference among the men in social support ($p=.000$) and transcendence orientation ($p=.007$). Regression analysis show coping strategies and mindfulness are related to stress. In particular, non judge scales is negative related to social concern, specially in women ($\beta=-.539$) explaining 27% of total variance; in men non judge is negative related to need for parenthood ($\beta=-.336$) explaining 29% of variance. Social support ($\beta=.204$), avoidance ($\beta=.420$) and transcendence ($\beta=.245$) related to stress explaining 28% of variance. Results represents one of the first contributions to study mindfulness and coping skills during ART, showing that mindfulness skills can minimize infertility-related stress.

By Tambelli Renata & Trentini Cristina

THE ITALIAN VERSION OF WISC-IV: RELATIONSHIP BETWEEN PARENTS' EDUCATION AND INTELLECTUAL PROFILE

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Several authors (e.g., Craig, 2006) highlighting the important of parents' education as best predictor of intellectual achievement than other demographic variables. Therefore, the present study focuses on relation between of parental education on the WISC-IV intellectual profile (subtest scores, four indexes, FSIQ, GAI) of the Italian standardization sample (Orsini et al, 2012). The WISC-IV was administered to a sample of 2200 children and adolescents between 6 and 16 years, divided into 11 groups according to their age (groups-age) and in 4 groups according to the level of parental education (groups-edu). To compare the performance achieved in the subtests, indexes, FSIQ and GAI by parental education groups, the data were analyzed through a series of MANOVA and ANOVA. The MANOVA showed significant differences between subtests and indexes, only with respect to parental education reporting the presence of significant differences between groups-edu compared to performance obtained in the subtests and indexes. Univariate comparisons showed that children whose parents have university degrees, they get significantly higher performance of other groups and in all subtests and indexes of the WISC-IV, followed by the children of parents have high school degrees. To compare FSIQ and GAI obtained to groups-edu, one-way ANOVA conducted that show similar results to those already discussed. The results seem to support the hypothesis that having a more educated parent improved the probability of a child living in a home environment rich in stimulus (e.g., Laucht et al, 1997), suggesting the existence of a connection between parental education, stimulating experiences, and children's cognitive functioning (e.g., Bradley et al, 2002).

By Tambelli Renata & Trentini Cristina

SEXISM AND ATTITUDES TOWARDS SAME-SEX PARENTHOOD: THE MEDIATION EFFECT OF SEXUAL STIGMA

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Several empirical contributions have focused on negative attitudes towards same-sex marriage, parenting and family legalization given that these issues continue to generate controversy especially in Italy, where the recognition of civil rights proceeds more slowly than in other countries. The present study intended to investigate negative attitudes towards same-sex parenting examining the impact of sexism and sexual stigma in heterosexual people and in lesbians and gay men. The aims of the research were to study the relationship between sexism and attitudes toward same-sex parenting exploring the possible mediated effect of sexual stigma, taking into account gender and sexual orientation. Data were collected on 79 gay, 87 lesbian and 330 heterosexual, with ages ranged from 17 to 63 (heterosexuals $M = 27.86$, $SD = 7.95$; sexual minorities $M = 27.95$, $SD = 7.39$). Heterosexual people showed stronger sexist tendencies (hostile sexism: $F_{1,492} = 21.83$; $p < .001$; benevolent sexism; $F_{1,492} = 8.44$; $p < .01$), and more negative attitudes towards same-sex parenting (gay parenting: $F_{1,492} = 49.40$; $p < .001$; lesbian parenting: $F_{1,492} = 51.92$; $p < .001$) than sexual minority people; likewise, men reported a higher degree of sexism (hostile sexism: $F_{1,492} = 11.62$; $p < .001$; benevolent sexism; $F_{1,492} = 0.70$; n.s.) than women. Moreover, the relationship between sexism and attitudes toward same-sex parenting was mediated both by sexual prejudice in heterosexual people (complete mediation; $\beta = -.08$, $t = -1.61$, $p \geq .05$), and internalized sexual stigma in lesbians and gay men (partial mediation; $\beta = -.24$, $t = -3.22$, $p \leq .01$). Data seems to suggest that negative attitudes towards same-sex parenting can reflect the socio-cultural inequalities and discriminatory behaviors based on the traditional gender belief system and the ideology embodied in institutional practices that work to the disadvantage of sexual minority groups.

By Tambelli Renata & Trentini Cristina

EVALUATION OF THREE PARENTING STYLES ON A LARGE SAMPLE OF MOTHERS AND FATHERS OF PRE-SCHOOL AND ELEMENTARY SCHOOL AGE CHILDREN USING PSDQ

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Parenting is a construct that involves complex variables (Bornstein, 2002), including parenting style. Literature focusing on Baumrind's tripartite parenting styles model (1978; authoritarian, authoritative and permissive) shows that the authoritative is linked to more favorable developmental outcomes of the child (Querido et al., 2002). Previous studies, conducted with different samples of different ages, have also shown that parents tend to practice more positive parenting with females than males and to have better communication and to be more supportive towards their daughters (Lloyd et al., 2006). The only Italian study on parenting style measured the authoritative and authoritarian, excluding the permissive style (Confalonieri et al., 2009). The aim of the present study was to evaluate the three parenting styles in a large sample of 385 mothers and fathers of children (3-10 years old) and to investigate the existence of differences with respect of age and child's gender. Moreover, the link between parenting style and the child's psychological outcomes was assessed. The hypotheses are that the authoritative style is positively correlated to positive outcomes of the child and that it is more used girls than on boys. The Parenting Styles Dimensions Questionnaire (Robinson et al., 2001) and the Strengths Difficulties Questionnaire (Goodman, 1997) were administered to both parents (N=385 couples). The results showed that fathers had higher scores for the authoritarian and authoritative style than the mothers. In addition, parents used a more authoritative style towards boys. No differences were found regarding child's age. Significant correlations (ranging from low to medium) with the externalizing and internalizing scale of SDQ were found. These findings add important information to the study of parenting style in the Italian context and shed light on the association between parenting style and the psychological and social well-being of children.

Keywords: parenting style, PSDQ, SDQ

By Tambelli Renata & Trentini Cristina

ASSESSING SUICIDALITY AND SELF-HARM IN A CLINICAL SAMPLE: DIFFERENCES AND OVERLAPS BETWEEN METHODS OF SELF-REPORT AND STRUCTURED INTERVIEW

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Suicidality and self-harm behaviors are relevant problems for patients with a great deal of suffering and core targets in the treatment for patients with severe personality disorders (PDs). They can be assessed with many instruments: nowadays the debate among self-report procedures and structured interviews is still open. In the present study two reliable and widely use instruments were examined and compared: a questionnaire, the Self-Harm Inventory (SHI; Sansone, Wiederman & Sansone, 1998), and a structured interview, the Suicide Attempt Self-Injury Interview (SASII; Linehan et al., 2006).SHI and SASII was administered to 35 patients consecutively admitted to structured day-hospital treatments for severe PDs. Both for SHI and SASII, the last year before treatment beginning were examined; for SHI, an additional lifetime evaluation was conducted. For SASII, the mood before and after the interview was monitored and assessed. SHI psychometric properties and SASII inter-rater reliability coefficients were adequate. For SASII, patients' stress level during the interview showed negligible changes. Only small relations between SHI and SASII sections' scores were found. Moreover, regression analysis showed that SHI and SASII predicted different facets in personality traits, emotion regulation and coping skills in the sample.Both SHI and SASII confirmed to be valid instruments for assessing intentional self-injury, but not replaceable each other. The results offered insights on relations between suicidality and personality pathology, and supported the clinical usefulness of structured interview in assessing life-threatening behaviors and in planning treatment programs.

By Tambelli Renata & Trentini Cristina

EFFECTS OF TREATMENT MODEL AND PATIENTS' ATTENDANCE ON OUTCOME INDICATORS IN TWO STRUCTURED THERAPEUTIC PROGRAMS FOR BORDERLINE PERSONALITY DISORDER

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Dialectical Behavior Therapy (DBT) and Group Experience Therapy (GET) are structured therapeutic programs developed for patients with severe Borderline Personality Disorder (BPD) features (i.e., pervasive emotional and behavior dysregulation), but different for types of intervention, modalities of group management, and treatment frequency. The aim of the study is to evaluate their effectiveness considering the contribution of treatment model and patients' attendance. The study is a randomized and interventional trial with a longitudinal design. Forty subjects with severe BPD features were randomly consecutively admitted to DBT or GET at San Raffaele Turro Hospital (Milan, Italy). Dimensions of emotional and behavioral (i.e., self-harm, impulsivity and aggressiveness) dysregulation were assessed at the admission and regularly during the first treatments' phase. Statistical analyses were conducted with multilevel analysis (i.e., generalized linear model). No differences were found between groups for socio-anagraphic and clinical variables at the baseline (all ps = n.s.). In the first three months, significant changes were found for both treatments in emotion dysregulation, self-harm, and aggressiveness (all ps < .005). At the end of the first phase of treatments, DBT and GET showed differences in outcomes for variables and marginally on effect sizes. Data suggested a relevant, but not totally explanatory, role of treatment frequency on outcome results; the contribution of patients' symptoms severity and relational styles on change curves and treatment attendance were examined. Both DBT and GET seemed to be effective on behavioral and emotional BPD difficulties; moreover, the impact of patients' relational problems was confirmed as a critical point. Implications for clinical practice regarding to common and specific factors in BPD therapies are discussed.

By Tambelli Renata & Trentini Cristina

TRAUMATIC EVENTS AND DISSOCIATIVE EXPERIENCES IN FIBROMYALGIA SYNDROME

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The main objective of this study was to investigate the frequency of traumatic and dissociative experiences, and parental style in women with fibromyalgia syndrome (FMS) compared to healthy controls. The participants are 57 women with a diagnosis of FMS, mean (sd) age 50.2 (10.5), and 55 healthy women, mean (sd) age 43.6 (12.3). The participants were administered the Dissociative Experiences Scale (DES-II), the Traumatic Experience Checklist (TEC) and the Parental Bonding Instrument (PBI). Patients with FMS reported significantly higher level of traumatic events than healthy women in particular in the area of emotive neglect and abuse ($p < .001$). The prevalence of dissociative experiences was significantly higher in FMS patients compared to controls ($p < .001$) and a possible dissociative disorder seemed to be present in 19.3% of the patients with FMS and 1.8% of healthy women. In patients with FMS, but not in healthy women, there was a significant correlation between the amount of traumatic events and dissociative symptoms ($r = .351$; $p = .008$). As well as parental style is concerned, FMS patients showed the following parental pattern: both mother and father showed lower care and higher protection scores than healthy women. These data highlight the presence of an “affectionless control” style in FMS patients’ parents compared to healthy control (55.3% vs. 18.5% father; 66.7% vs. 27.8% mother, respectively). On the contrary, results showed the limited presence of “optimal parenting” style, characterized by high care and low protection, in FMS patients’ parents compared to healthy controls (16% vs. 39% father; 14% vs. 41% mother, respectively). The results suggest that women with FMS tend to present more traumatic events and more dissociative experiences than healthy women. Moreover, FMS patients seem to have mostly experienced a parental style defined as “affectionless control”.

By Tambelli Renata & Trentini Cristina

THE INTERPERSONAL EXPRESSION OF PERFECTIONISM AMONG OVERT AND COVERT NARCISSISTS: PERFECTIONISTIC SELF-PRESENTATION, EFFORTLESS PERFECTION, AND THE ABILITY TO SEEM PERFECT.

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Previous research suggest that overt and covert narcissists are motivated to give others an image of perfection. Perfectionistic self-presentation (PSP) includes self-promotion, non-disclosure of imperfection and non-display of imperfection. Recently, this model has been expanded by adding the self-confidence in the ability to present a perfect image and the need to appear perfect with apparent ease. The present research aims to investigate the link between the two forms of narcissism and PSP by including these two dimensions. A sample of 305 undergraduates (54.2% F; mean age: 22.62 + 3.081) was recruited. The following self-report were administered: Narcissistic Personality Inventory (NPI), Hypersensitive Narcissism Scale (HSNS), Perfectionistic Self-Presentation Scale (PSPS), Perfectionistic Self- Presentational Capability Scale (PSPCS) and the Effortless Perfectionism Scale (EPS). Two hierarchical regression analyses were conducted. The inclusion of the PSPS and the EPS accounted for an additional statistically significant amount of variance of overt narcissism scores (respectively 2.3% and 2.8%) beyond the 5.3% of variance explained by PSP subscales. The higher the overt narcissism, the higher the tendency to promote a perfect image, the perception to have the ability to appear perfect and the feeling of pressure to be perfect without visible effort. On the other hand, the final model explained 29% of the variance of covert narcissism. The inclusion of PSPCS added a significant amount of variance to the model (2.7%). The higher the covert narcissism, the higher the tendency to proactively promoting a perfect image, the concerns over behavioral displays of imperfection and the lower the self-confidence in the ability to appear perfect. The overall pattern of results highlighted the importance of distinguishing overt and covert narcissism and the usefulness of an extended conceptualization of the perfectionism construct.

By Tambelli Renata & Trentini Cristina

**MOTHER-TODDLER FEEDING INTERACTIONS IN PRETERM AND FULL-TERM DYADS:
THE INFLUENCE OF MATERNAL AND INFANT FACTORS**Salvatori Paola (1), Minelli Marianna (1), Neri Erica (1)
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The literature has highlighted that feeding disorders of infancy and early childhood are associated with the mother-child relationship. Premature children seem exceptionally vulnerable for the development of feeding difficulties, however literature lacks of studies on preterm mother-child feeding interactions, especially during toddlerhood. Aim of the study was to explore, through a transactional multi-risk model, the quality of mother-child feeding interactions between 18 and 30 months comparing preterm and full-term dyads. The contribution of maternal (depression, anxiety) and infant (development, breastfeeding, weaning, reflux) factors was also considered. A total of 69 mother-child dyads (44 preterm and 25 full-term) were assessed at 18, 24 and 30 months at the Psychodynamic Laboratory (Cesena). During each assessment 20 minutes of mother-child feeding interactions were video recorded and later coded through the SVIA (Ammaniti et al., 2006), the child's development was assessed through the Griffiths scales (Griffith, 1996) and mothers were administered the BDI-II (Beck & Steer, 1996) and the STAI (Spielberger, 1983). Data on child's breastfeeding, weaning, and reflux were gathered through an ad hoc questionnaire. Preterm dyads showed greater negative maternal affective state, greater interactional conflict and less dyadic reciprocity than full-term dyads from 18 to 30 months. Moreover, interactional conflict and maternal affective state during meals were negatively influenced by maternal depression, while low dyadic reciprocity was associated with low child's development. Last, greater child's food refusal was related to low child's development, lack of breastfeeding, and presence of reflux. These findings indicate that attention should be paid to support mother-child feeding interactions during toddlerhood in preterm populations so to foster the mother-child relationship and promote the child's healthy eating behaviour.

ILLNESS PERCEPTION IN MIGRAINE PATIENTS

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By Tambelli Renata & Trentini Cristina

Illness perception (IP) (the emotional and cognitive representations of illness) was found to be significantly related to several outcome measures in chronic illnesses. This study examined the relationship between IP, psychological distress, treatment adherence and demographic and clinical features in migraine patients. A sample of 152 migraine patients (85% females, mean age 43.9 ± 12.1 years, range 18-69 years) completed Broadbent and colleagues' Brief Illness Perception Questionnaire (consequences, timeline, personal control, treatment control, identity, concern, illness comprehensibility, emotions) and Kellner's Symptom Questionnaire (anxiety, depression, somatization, hostility). Patients with more depressive symptoms were significantly more concerned about their illness, emotionally impaired by headache and likely to perceive symptoms as severe and long-lasting. A higher somatization score was significantly associated with the perception of more functional and emotional impairments due to illness. Consequences of illness were rated as more severe in females and confidence in treatment was lower in older patients. Patients with a chronic course, higher symptom frequency and medication overuse perceived headache symptoms as more severe and with more consequences on their life. A reduced treatment adherence was significantly associated with concerns about illness and negative emotional consequences of headache. It could be speculated that depressive symptoms foster a pessimistic IP of migraine. It may also be that such an IP leads to depressive manifestations in response to illness. A more severe course, female gender and older age seem to increase the risk of a dysfunctional IP. Illness representations characterized by concerns and negative feelings may decrease the motivation to adhere to treatments. Further studies should examine whether the amelioration of IP through specific psychological interventions may promote a better adaptation to migraine.

CORRELATES OF SOMATIZATION SYMPTOMS IN ADOLESCENTS

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Preliminary studies suggested that somatization-related symptoms may occur in teens. However, little is known about their psychological and demographic correlates. This study examined the relationship between somatization symptoms, as assessed by Kellner's Symptom Questionnaire (SQ), psychological distress and well-being, demographic features and health-related lifestyles in teens. A sample of 948 students (53.4% males), aged 14-19 years (mean 15.8 ± 1.3 years), completed the SQ (depression, anxiety, somatization, hostility) and Ryff's Psychological Well-Being (PWB) scales (autonomy, environmental mastery, personal growth, purpose in life, positive relations, self-acceptance). Demographic features and health-related lifestyles were also collected.

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An increased somatization score was significantly associated with more depressive, anxiety and hostility symptoms, lower scores on all the PWB scales, female gender, and unhealthy behaviors (smoking, alcohol consumption and illicit substance use). It may be speculated that psychological distress leads to heightened attention for one's bodily sensations which increases the perception of physical symptoms, as suggested by Kellner's selective perception model. Somatic distress seems to negatively affect adolescents' psychological well-being. A higher somatization score in teens who adopt unhealthy behaviors may reflect a worse physical condition due to substance use. Our findings confirm previous studies suggesting a higher number of somatic symptoms in females than males since puberty. Females may be more likely to experience bothering physical symptoms because of menstruation. They also may have more anxiety and depressive symptoms leading to distressing somatic manifestations. Our study suggests the possibility of identifying groups of adolescents at increased risk of experiencing bothering somatic symptoms. Such symptoms, if they persist over time, could pave the way to more structured forms of abnormal illness behavior.

IMPULSIVITY IN PATHOLOGICAL GAMBLERS

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In the Diagnostic and Statistical Manual of Mental Disorders (DSM-5; APA, 2013) Gambling Disorders (GD) is classified under the category of Non Substance Related Disorders. However, although GD has been moved from the Disorders of Impulse Control category (DSM-IV-TR; APA, 2000), consistent clinical evidences support the importance of impulsivity in the onset and maintenance of this disorder (Blanco et al., 2009; Lai et al., 2011; Kräplin et al., 2014). Despite these results, other authors found heterogeneous results (Bonnaire et al., 2013; Grant & Kim, 2003). Such difference might be related to the type of gaming played (Kofoed et al., 1997) or to the use of different instrument for measuring impulsivity (Dannon et al., 2010). The aim of this study is to analyze the relationship between pathological gambling and impulsivity, comparing two groups of gamblers. A total of 291 gamblers (122 males and 169 females), of average age of 26.00 (SD = 10.43) were recruited in some gambling rooms and at the University of Florence. All participants completed the South Oaks Gambling Screen (SOGS; Lesieur & Blume, 1987; Capitanucci & Carlevaro, 2004) and the Barratt Impulsivity Scale (BIS-11; Patton et al., 1995; Fossati et al., 2001), which assesses three dimensions of impulsivity: attentional, motor and non-planning impulsiveness. Based on their score on the SOGS, participants were divided in two groups: I) pathological gambler (n = 62), whose SOGS scores was greater than 5; and social gamblers (n = 229), whose SOGS scores was less than 3. Our findings support the results of previous investigations showing significant differences between pathological and social gamblers on impulsivity dimensions. Specifically, pathological gamblers showed higher levels of attentional, motor and non-planning

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impulsivity, than social gamblers did. Overall, these results support the existence of a significant association between impulsivity and pathological gambling.

STRESSFUL LIFE EVENTS AND PSYCHOSOMATIC SYMPTOMS IN FIBROMYALGIA: A CASE-CONTROL STUDY

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Fibromyalgia Syndrome (FM) is a chronic musculoskeletal pain disorder characterized by widespread pain and muscle tenderness associated with psychological disorders. The purpose of the study is to evaluate the prevalence of psychological distress, psychosomatic symptoms and stressful life events in a group of patients with FM, compared to a sample of patients with Rheumatoid Arthritis (RA). Since RA is a chronic pain condition with low psychosomatic symptoms, we hypothesized that the psychological components could be more elevated in FM. Sixty-one consecutive female with FM and 75 consecutive female with RA were enrolled in the study and assessed by: Hospital Anxiety and Depression Scale (HADS) for psychological distress, Toronto Alexithymia Scale (TAS-20), Diagnostic Criteria for Psychosomatic Research (DCPR) for psychosomatic symptoms and Traumatic Experiences Checklist (TEC) for trauma. FM patients reported significantly higher levels of psychological distress and difficulty in identifying emotions (TAS-20 subscale), compared to RA patients. On DCPR, FM patients showed a significantly higher prevalence ($p < .001$) of persistence somatization, demoralization, conversion symptoms and anniversary reaction. What is more, TEC results highlighted that FM patients reported significantly more traumatic events than RA patients on total score ($p < .001$). Particularly, FM patients reported significantly higher scores on the composite subscales of emotional neglect and emotional abuse ($p < .001$). The present study revealed not only a higher presence of psychological distress, but also a higher prevalence of psychosomatic symptoms and a greater number of lifetime trauma in patients with FM, compared to RA patients. These results highlight the importance of a multidisciplinary approach, which takes into account also the psychological aspects in the treatment of FM.

By Tambelli Renata & Trentini Cristina

PAIN COPING STRATEGIES IN CHILDREN WITH LEUKEMIA COMPARED WITH A GROUP OF HEALTHY PEERS

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Children's reactions to painful events vary widely with older children using more cognitively oriented coping methods, i.e problem solving (Tyc et al., 1995). Aims of this study are to assess leukemic children's coping strategies, to identify significant related factors and to compare them with those of matched healthy peers. Eighty-three leukemic children and their parents recruited at the Oncohematology Clinic of Padua participated in this study, previous consent form completion. Children's mean age was 6.69 years (SD = 3.85), 46 males and mostly had Acute Lymphoblastic Leukemia (ALL) (N =70). Parental perceptions on child's coping with pain (PPCI questionnaire, Varni et al., 1996; Italian version by Bonichini & Axia, 2000) were assessed in the second month after the diagnosis. Paralleling 46 healthy peers were involved with an average age of 15.07 (SD = 3.66), which were matched by age and gender with the patients group. Inferential comparisons were made between clinic group and control sample using a paired-sample t-test with a Bonferroni correction, and variance analyses assessed the predictive factors for child's coping strategies.

Seek for social support was the preferred strategy (Mean=1.24; DS=0.33) and more used (F2=7.41; p=0.001; mean difference=0.34, p=0.001) by children aged 4-9 years than those aged ≥ 9 . Problem solving (F2=3.73, p=0.02; Mean difference=0.42, p=0.02) and Cognitive self-instructions (F2=3.46, p=0.03; Mean difference=0.45, p=0.03) were significantly more used by children aged ≥ 9 years than those aged ≤ 3 . Distraction strategies were significantly less used in the clinic group (Mean=0.59; SD=0.34) than the control group (Mean=0.81; SD=0.34) (t45=-3.41; p=0.001). These data give relevant information on coping with pain used by children with leukemia at their first hospitalization. Specific interventions can be applied to children taking into consideration their age and their preferred coping strategy.

By Tambelli Renata & Trentini Cristina

PSYCHOLOGICAL WELLBEING, COGNITIVE FUNCTIONING AND QUALITY OF LIFE IN 205 ADOLESCENTS AND YOUNG ADULT CHILDHOOD CANCER SURVIVORS COMPARED WITH HEALTHY PEERS

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Larger part of studies (Zeltzer et al., 2012; Teall et al. 2013) underlined how childhood cancer survivors had no significant differences in their well-being and quality of life (QoL) compared with a control group of healthy peers, even if a recent review (French et al., 2013) found in ex-patients more cognitive problems and less years of education. This study was aimed at comparing adolescent and young adult (AYA) pediatric cancer survivors and a control group of peers who had no history of serious illness in terms of well-being, cognitive functioning and QoL. The participants in this study included AYA cancer survivors (n=205), 126 males, with a mean age of 18.96 (SD=3.08) and recruited during follow-up visits and AYA peers (n=205), recruited from the secondary schools, in the young groups and in the universities. They all filled out self-report questionnaires regarding QoL (Ladder of Life), psychological (BSI-18) and cognitive (Problem Scale) functioning. Descriptive analyses and paired-samples t test were run to answer our research questions. There were no statistically significant differences between survivors and controls in terms of psychological functioning, while significant differences were found in past QoL perceptions ($t(204) = -3.39$; $p = 0.001$) with a lower level for childhood cancer survivors. Healed AYA reported more positive cognitive functioning ($t(204) = -3.41$; $p = 0.001$) than did controls, especially in memory ($t(204) = -4.52$; $p = 0.0001$), in concentration ($t(204) = -4.66$; $p = 0.0001$) and in mental organization skills ($t(204) = -2.56$; $p = 0.01$), even if they attended school for fewer years ($X^2(9) = 131.28$; $p = 0.0001$). AYA cancer survivors showed satisfaction for their psychological well-being and for their lives like the healthy peers, except for past life perceptions associated with the cancer period. They also reported less cognitive problems, even if they obtained less higher qualifications.

By Tambelli Renata & Trentini Cristina

A PILOT RANDOMIZED CONTROLLED TRIAL OF RELAXATION TRAINING FOR PATIENTS WITH STABLE SYMPTOMATIC MODERATE/SEVERE COPD

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People with Chronic Obstructive Pulmonary Disease (COPD) suffer from dyspnoea, which may be increased by anxiety, depression and low-grade quality of life. Previous studies suggest that relaxation techniques may have beneficial effects. The main aim of this pilot Randomized Controlled Trial (RCT), single-blind, is to explore the effects of a quick, one-session, relaxation training for stable symptomatic moderate/severe COPD patients. Thirty-eight patients (Age: M = 72,66 SD= 8,68) with stable moderate/severe (average FEV1 54%) symptomatic (mMRC score ≥ 2 and CAT score ≥ 10) COPD were recruited at HD Respiratory Rehabilitation Unit of Fondazione Don Carlo Gnocchi, in Milan (Italy). They were randomly assigned 1:1 to listen a relaxing audio or to watch a neutral stimulus, during their routine exams. They were assessed before and after the intervention, for both psychological and physiological variables. The psychological assessment was concerned mainly with State Trait Anxiety Inventory-Y1 (STAI-Y1), Visual Analogue Scale (VAS), Positive and Negative Affective Schedule (PANAS). Physiological assessment consisted in lung function tests, oxymetry and heart rate variability. Given the relatively small sample and the expectation of a non-normal distribution, we used the non-parametric analyses (Mann-Whitney U Test and Wilcoxon Test). The relaxation training significantly increases the oximetry values and reduced the heart rate from the baseline in the intervention group as well as in assessments of state anxiety and positive affect in comparison with the control group. The promising results obtained with one session of relaxation training in stable symptomatic moderate/severe COPD patients are the basis for a larger controlled clinical trial.

Keywords: Chronic Obstructive Pulmonary Disease (COPD); relaxation techniques; quality of life (QoL); Health Psychology

By Tambelli Renata & Trentini Cristina

**METHODS AND TOOLS FOR ASSESSMENT OF PARENTING SKILLS:
AN EMPIRICAL RESEARCH IN THE ITALIAN COURT**

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In legal separation or divorce, children's custody is governed by the law 54/2006 concerning joint custody, that underlines the minor's right to receive care, upbringing and education by both parents, to maintain an impartial and continuative relationship with each of them and also with grandparents and relatives of both parental lines. In case of high conflicting separation, the Judge may have recourse to the Expert Witness (EW) to evaluate parenting skills and the most appropriate method of custody. The present exploratory study has the goal to examine the method used by the EWs and to investigate the criteria adopted by the Judge in the final verdict. The sample consists of 114 files brought to the Italian Courts (Velletri and Viterbo) between 2006-2014 according to the following requirements: legal proceedings of judicial separation concern minor's custody, and an EW was required to evaluate parenting skills. The survey was carried out using a list of content analysis divided into specific macro areas: Personal Data, Legal Proceedings, Method adopted by the EW, Final decision of the Judge. The main results highlight that the assessment was supported by audio/video recording only in a few cases (28%) and the instruments used by the EW are focused on the forensic field only in 10% of cases. The scientific criteria most used to evaluate parenting skills are: focus on child's needs (31%) and encourage the relationship with the other parent (29%), with a significant χ^2 both in Velletri's [χ^2 79,392 (gdl=1) p <.001] and Viterbo's [χ^2 = 68,689 (gdl=5) p <.001]. In 72% of cases the EW considers the joint custody the best solution to apply and in 90% of cases, the Judge verdict completely match with the conclusions drawn by the Ew. The EW's opinion plays a great role in the formulation of the final decision, so shared standards and good procedures need to be defined to consider it valid and reliable and to guarantee the best interest of the child.

By Tambelli Renata & Trentini Cristina

EFFECTS OF INDIVIDUAL AND SITUATIONAL FACTORS ON PERCEIVED DYADIC ADJUSTMENT, QUALITY OF LIFE AND PSYCHOLOGICAL DISEASE OF INFERTILE COUPLES

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The present study aims to evaluate main and combined effects of individual and personality characteristics (age, gender, coping strategies) and situational factors (type of diagnosis, length of infertility) on perceived levels of dyadic adjustment, quality of life, anxiety and depression in infertile couples. Questionnaire composed by socio-demographic characteristics, STAI-Y (Spielberger C.,1989), Dyadic Adjustment Scale (Spanier G.,1976), COPE-NVI (Carver et al.,1989), Edinburgh Depression Scale (Cox J. et al.,1987) and four items exploring quality of life and perceived ability to deal with infertility, were submitted to 150 infertile couples. (Female age mean 33.8, Male age mean 34.2; Female diagnosis 32%, Male diagnosis 28.7%, Combined 26% Unknown 13.3%; infertility length ≤ 2 years 11,3%, < 2 years 88.7%). Descriptive statistics and Logistic Regression Analysis were tested. Logistic Regression Analysis was used to evaluate main and combined effects of individual characteristics, coping strategies and situational factors on perceived levels of dyadic adjustment, quality of life and psychological health conditions. Data confirmed both in male and in female significant effects of age and length of infertility on perceived levels of anxiety and dyadic adjustment. Types of diagnosis influenced quality of life and psychological health conditions. Coping strategy of positive attitude is associated with increased perception to be able to deal with infertility. Avoidance coping strategy combined with low infertility' length reduced anxiety and depression in men, while combined with high length increased perceived levels of anxiety in both members of couples. The study confirmed the influence of individual and situational characteristics on infertile couples' health conditions, dyadic adjustment and quality of life, giving a contribution in promoting interventions to support infertile couples' psychophysical health.

Key words: infertility; couples; coping strategies; dyadic adjustment; anxiety; depression.

By Tambelli Renata & Trentini Cristina

PSYCHOLOGICAL AND INTERPERSONAL HEALTH CONDITIONS IN NURSES: THE SPIRAL EFFECT OF VIOLENCE AND CONFLICT

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The present study aims to evaluate effects of different stressors in nursing profession (Conflict with physicians, Problems with peers, supervisors, Patients and their families, Discrimination) on nurses' psychological health conditions with particular reference to Anxiety, Depression, Somatization, Hostility, Interpersonal-Sensitivity. A Questionnaire composed by five subscales of the Expanded Nursing Stress Scale (French et al., 2000; Conflict with physicians, Problems with Peers, Supervisors, Patients and their Families, Discrimination) and five subscales of Symptom Check-list-90-R (Derogatis, 1994; Anxiety, Depression, Somatization, Hostility and Interpersonal-Sensitivity) were submitted to 200 Italian nurses. Descriptive Statistics and Logistic Regression Analysis were tested. Data showed perceived high levels of Conflict with Physicians (56.9%), Patients and their families (53.8%), as well as Somatization (64.9%), Interpersonal-Sensitivity (58.8%), Hostility (58%), Depression (55.6%) and Anxiety (46%). Logistic Regression Analysis revealed that Conflict with Physicians, Problems with Supervisors, Patients and their Families were significantly associated with high levels of all Psychological diseases. Conflict with physicians and Problems with supervisors were related to high levels of Depression; Problems with patients and their families predicted high levels of Somatization and the highest Hostility odds ratio. Perceived Discrimination was associated with high levels of Depression and Interpersonal-Sensitivity. No findings supported the association of Problems with peers with outcomes. Conflict and violence significantly influence nurses perceived psychological health conditions in terms of individual health (Anxiety, Depression, Somatization) and in terms of psychological dimensions, as Hostility and Interpersonal-Sensitivity, that may deeply influence quality of care relations exacerbating conflicts.

Key words: Stress in nursing; Anxiety; Depression; Hostility; Interpersonal-Sensitivity; Somatization

By Tambelli Renata & Trentini Cristina

Session D

DEVELOPING AGE AND GENDER ADJUSTED NORMATIVE REFERENCE VALUES FOR DIFFICULTIES IN EMOTION REGULATION SCALE (DERS)

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The construct of emotion regulation (ER) may be described as the ability to respond to the continuous demands of experience with a wide range of emotions and in a manner that is socially acceptable and sufficiently flexible to allow spontaneous reactions, as well as the ability to delay spontaneous reactions as needed. Because difficulties in ER are typically associated with clinical conditions such as depression, anxiety, alcoholism, drug abuse, eating disorders and many other conditions, assessment of ER is important for both clinical and diagnostic practice. Currently, one of the most widely adopted and investigated instruments to measure difficulties in ER is the Difficulties in Emotion Regulation Scale (DERS; Gratz & Roemer, 2004), a 36-item, self-report instrument measuring six dimensions of emotional dysregulation. Albeit an Italian version of the DERS has been made available recently, practitioners still lack clear guidelines on how to interpret raw DERS scores. Accordingly, the current study inspected large, Italian, archival samples and developed age and gender adjusted DERS normative reference values. A total of 1,228 nonclinical adults were included in the study. First, we used a sub-sample ($n = 1000$) of this dataset to calculate multiple regression equations using age and gender as predictors and each DERS scale as dependent variable. The prediction equations derived from the raw b values of each analysis were then used to calculate gender and age adjusted scores. The resulting gender and age adjusted scores were then transformed in T scores to provide possible interpretative benchmarks. Lastly, the remaining sub-sample of the initial dataset ($n = 228$) was used to test the accuracy of these age and gender adjusted DERS norms. In line with the hypothesis that our normative reference values are accurate, Bayesian analyses demonstrated that this second sample adequately fit our age and gender adjusted Italian norms.

By Tambelli Renata & Trentini Cristina

IDENTITY IN HOMOSEXUAL AND STRAIGHT ADOLESCENTS AND EMERGING ADULTS: A PILOT STUDY TO ASSESS INTERSECTIONALITY

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Though the term “identity” has been given various meanings across literatures, we believe that it is best understood as a process of integration among numerous domains, where social contexts and interpersonal relationships have pivotal importance in its development. Indeed, the recognition of the various aspect of self by important others may foster harmonious identity integration, whereas non-recognition may function as obstacle to such process and might have negative health outcomes. This contribution represents a pilot study using a novel methodology, and is particularly aimed to compare identity development between straight and homosexual (LGB) adolescents and young adults, through the administration of a newly created measure, the Identity Labels and Life Contexts Questionnaire (ILLCQ). This is based on a revised approach to intersectionality paradigm, and allows to assess the salience of identity dimensions across life contexts, the perceived self-recognition by important others, and the influence of social contexts on identity. On the basis of previous empirical evidences, it was expected that LGB participants presented greater shifts in identity dimensions salience, and thus weaker identity integration, because of difficult social acceptance and self-stigmatization; thus, it was expected that they perceived smaller level of self-recognition by others, and greater environmental obstacles in self-definition. 67 Italian and US participants were included: 33 self-identified as lesbians, gay or bisexual and 34 self-identified as straight. The two subgroups were comparable for age, gender, nationality, and ethnicity. Results, presented through Means Plots, showed that identity dimensions in LGB participants have more constant salience across contexts. Yet, they perceive more obstacles in being socially recognized for what they are and in expressing their identity. The greater consistence in identity salience across contexts could, thus, be seen as an attempt of LGB participants of strengthen their inner identity feeling against environmental threats. Results could represent starting points for further research aimed at the prevention of LGB youths discomfort.

By Tambelli Renata & Trentini Cristina

COPING STYLES IN INDIVIDUALS WITH DIFFERENT SEVERITY OF HYPERTENSION

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The strategies that usually people adopt to cope with stressful events, namely coping (C) style, may affect blood pressure. Generally, hypertension (H) is positively related to emotion-oriented maladaptive C strategies and negatively related to task-oriented C styles. However, no author investigated the relationship between C strategies and H severity. This study was aimed to assess whether the severity of the cardiovascular health status of the participants is associated with specific C strategies. Participants were recruited at the Center for the Treatment of Hypertension (H) of the Policlinico Umberto I in Rome. Seven hundred sixty-one individuals (M/F: 330/431; mean age: 60.83 ± 11.63 years) agreed to participate in the study (65% of the contacted people). The study took place over the period 2014-15. Participants were split into five groups: 1) healthy people (N=158); 2) individuals with untreated H (N=160); 3) individuals under antihypertensive drug treatment (N=157); 4) individuals with H resistant to drug therapy (N=159); individuals suffering from both H and heart diseases (N=127). To assess the C strategies, the Coping Inventory for Stressful Situation was used. One-way ANOVAs considering the Group as the independent variable was carried out on each of the C strategies (emotion-oriented C, task-oriented C, avoidance-oriented C). The results showed a significant effect for the task-oriented C ($F_{4,745}=4.03$; $p<.003$), indicating that individuals affected by both H and heart diseases make less use of task-oriented C strategies compared to the healthy group ($p<.01$), the individuals under antihypertensive drug treatment ($p<.01$), and the group with H resistant to drug therapy ($p<.03$). These findings confirm the relationship between C and H, underlining how patients with a greater severity of H make less use of appropriate C strategies. These results suggest the importance of implementing interventions aimed at promoting appropriate C strategies in patients with H.

By Tambelli Renata & Trentini Cristina

THE ALTERNATIVE MODEL FOR DSM-5: BPD TRAITS IN NON-CLINICAL ADOLESCENTS

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The alternative model for personality disorders presented in DSM-5 emphasizes the relevance of a trait assessment in distinguish personality disorders (Criteria B). This study aims at investigating if DSM-5 dysfunctional traits discriminate participants with different risk level for Borderline Personality Disorder (BPD) in community dwelling adolescents. A two phases sampling approach was used with the purpose to select participants with high, low and moderate risk for BPD according to the number of SCID-II BPD criteria. In the final sample, composed by 115 community dwelling adolescents (females=73,9%, mean age=16.31, SD=1.67), the Personality Inventory for DSM-5 was administered. Independent sample multivariate ANOVA was used to assess if PID-5 traits were able to capture different risk levels for BPD, testing three different models: 1) DSM-5 BPD model; 2) model with DSM-5 traits other than BPD ones; 3) final model with the significant traits of the previous models. Our data showed that DSM-5 BPD model was able to explain a substantial amount of the variance (Pillai's Trace=.30, $F=2.66$, $p<.001$, $\eta^2=.15$). Although most of the proposed traits showed a significant contribution in differentiating the three groups (effects sizes from moderate to high and $p<.05$), Separation insecurity did not results significant. The second model did not results significant. However, some traits (Irresponsibility, Eccentricity, Perceptual Dysregulation and Unusual Beliefs) showed significant between groups differences. The final model explained the higher portion of the variance (Pillai's Trace=.34, $F=2.12$, $p<.005$, $\eta^2=.17$) and all the traits showed high effect sizes and a significant ability in differentiating the three groups. These results suggest that PID-5 traits are able to discriminate adolescents with different risk for BPD. However, the BPD model proposed in DSM-5 Section III does not seem to capture all the pathological aspects that characterize the disorder.

By Tambelli Renata & Trentini Cristina

THE INTERPERSONAL GUILT RATING SCALE-15: THE FIRST VALIDATION DATA ABOUT A NEW CLINICIAN REPORT TOOL FOR THE ASSESSMENT OF INTERPERSONAL GUILT

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According to Control-Mastery Theory (CMT) guilt's origin is interpersonal, its aim is prosocial and its function is adaptive. However, guilt can be also unconscious, irrational and pathogenic, especially when generalized and repeatedly linked to shame and when it derives from pathogenic beliefs (O'Connor et al. 1997; Locke et al., 2013). Our aim is to introduce a brief clinician-report tool for the assessment of interpersonal guilt, the Interpersonal Guilt Rating Scale-15 (IGRS-15 Gazzillo, Bush, Faccini, De Luca, Mellone, 2015), and its psychometric proprieties. The item set derived from literature and from our clinical experience. We asked to 28 clinicians to assess 154 patients with: the IGRS-15; the Interpersonal Guilt Questionnaire-67 (IGQ-67; O'Connor et al. 1997); the Clinical Data Form (CDF; Westen, Shedler, 1999). An EFA on a random half of our sample (N=70) and a CFA on the other half (N=84) were performed. The extracted factors on the basis of both the scree plot procedure (point of inflexion of the curve) and factors with eigenvalue > 1 criterion are survivor guilt, separation/disloyalty guilt, omnipotent responsibility guilt and self-hate guilt. All the subscales have good internal consistency, with Alpha's values from .80 to .87. The ICC calculated on an item-per-item basis was .67, while the ICC of the scores of the four different IGRS-15 factors was .86. The test-retest reliability was acceptable with Pearson's r from .52 to .69. The assessment of guilt with the IGRS-15 show a good concordant validity with guilt assessed with IGQ-67 and we collected first data about the construct validity of our tool. This scale represent a first step in the direction of supporting the clinical judgement about interpersonal guilt with an empirically sound, easy to use, tool.

By Tambelli Renata & Trentini Cristina

AN ATTEMPT TO MEASURE EMPATHY FEATURES WITH THE RORSCHACH PERFORMANCE ASSESSMENT SYSTEM

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Empathy is a complex construct that has been defined in many ways during the past two decades. Nevertheless, many authors agree that empathy plays a key role to psychopathological conditions such as Narcissistic Personality Disorder or Antisocial Personality Disorder. In addition, it is commonly accepted that assessment of empathy is fundamental to both plan treatment and case conceptualization. Unfortunately, though, measuring empathy is not an easy task. While the majority of the empathy tests use self-report format (e.g., Interpersonal Reactivity Index, Empathy Quotient), self-reports are not optimal to this purpose, as they reflect what the respondent knows and wants the examiner know about him or herself. Conversely, performance-based tools could possibly contribute to assessing empathy, in that they provide a different point of view, based on 'what the examinee does.' However, only few performance-based empathy measures are currently available, and their utility in personality assessment is still doubtful. To fill this gap in the literature, the current study used the Rorschach test, Rorschach Performance Assessment System (R-PAS), to identify a number of performance-based, empathy features. A sample of 100 nonclinical adults were administered the Rorschach along with a series of self-report and performance-based measures of empathy features (e.g., emotional perception, perspective taking). Data analyses focused on two clusters of Rorschach variables. First, R-PAS variables in the Self and Other Representation were inspected, and their correlations to the other empathy measures included in the study tested. Next, some additional items, i.e., Rorschach behaviors that are not currently coded in R-PAS, were developed and operationalized, and their associations with empathy tested via correlational analyses. Results showed small to medium associations between the Rorschach variables and the empathy features taken under consideration.

By Tambelli Renata & Trentini Cristina

RELATIONAL ASPECTS AND SYMPTOM PATTERNS IN CLINICAL AND NON-CLINICAL CHILDREN

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The issue regarding the mutual influence between early relationships and development of psychopathology in infancy is hard to investigate. The aim of this study was the assessment of symptomatic aspects in clinical children, relationship's qualities with the caregiver and the evaluation of correlations between these aspects. The clinical group was compared with the non-clinical children. The clinical group is composed of 196 children with different clinical diagnosis, while the non-clinical group consisted of 80 children, matched by age. General and clinical information was collected with the Clinical Data Form. Symptom aspects were measured through the Child Behavior Checklist (CBCL), compiled by the parents, and Caregiver-Teacher Report Form (C-TRF), compiled by the clinician. The relationship with both caregivers was evaluated by the clinician with the Scala di Valutazione della Relazione (SVR). Significant differences were found between the diagnosis of children and relationship issues (SVR), as well as with the syndromic scales (CBCL and C-TRF). Additionally significant correlations emerge between the SVR scales, CBCL scales and C-TRF scales. Finally, it was interesting to note that the growth of children's ages is related with relationship problems but not with symptomatic pattern. Differences with the non-clinical group are expected. The study highlights how clinical children are characterised by a wide range of symptoms, internalizing aspects and externalising behaviours, as well as by difficulties in the relationship with the caregiver. These evidences show the importance of the parent-child relationship's assessment from the early stages of development.

By Tambelli Renata & Trentini Cristina

DIFFICULTIES IN EMOTION REGULATION SCALE-16 (DERS-16): AN EXPLORATORY STUDY

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Several studies empathize the relationship between emotion regulation (ER) and different symptom presentation (de Campora et al., 2014). These data highlight the importance of sound measurement instruments of ER. The Difficulties in Emotion Regulation Scale (DERS), given its excellent psychometric characteristics, its strong bond with theoretical paradigm and its large applicability in term of psychological difficulties, seems to lie among the most used self-report measures of ER. However, in some situations or settings the structure of DERS, composed of 36-items may appear a weakness of this tool. Consequently we found very useful the recent proposal of a brief version of DERS, the Difficulties Emotion Regulation Scale-16 (DERS-16), a 16-item version which seems to overcome these limitations. The aim of this preliminary study was to evaluate the psychometric properties of an Italian version of DERS-16. Specifically we explored the various aspects of the reliability, test-retest, convergent and discriminating validity of the DERS-16. This preliminary study was conducted on a non-clinical sample, and the preliminary analysis compared the data obtained from both the version of DERS (DERS and DERS-16) with other measures of ER and related constructs to explore the strength of the associations among these different measures.

Overall, preliminary data analysis seems to confirm that the DERS-16 is an economic and reliable method to assess the ER construct. Specifically, preliminary results show that the DERS-16, compared to the original version DERS, has good validity and reliability and maintain all strengths of the original version (DERS) while reducing the weakness, underlined in some situations or settings, connected to the length of its original protocol.

By Tambelli Renata & Trentini Cristina

INHIBITORY CONTROL OVER COMPETING MEMORIES IN SUBSTANCE-RELATED AND ADDICTIVE DISORDERS

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Inhibitory control can be defined as the ability to override habitual or inappropriate responses when circumstances require a change in the course of action in order to succeed with the task at hand. This type of control is critical for maintaining an adaptive and flexible behaviour and, given its importance in everyday life, it is not surprising that such an ability has been found to be hampered in a broad range of pathological conditions. In particular, inhibitory deficits are widely assumed as a hallmark for substance-related and addictive disorders, acting as development/maintenance factor, and potentially emerging as a consequence of it. So far, research on this clinical field focused almost exclusively on inhibitory control of overt actions. However, inhibitory control does not solely concern overt behaviour, but exerts its covert influence also on the content of our thoughts, the unfolding of emotions, and the process of memory retrieval. Our aim was to fill this gap by addressing the presence of a memory inhibition phenomenon, known as Retrieval-Induced Forgetting (RIF), whose presence testifies the correct functioning of inhibitory processes aimed at reducing interference from competitive items while attempting to remember a target item. 84 participants took part in the study: 28 patients primarily diagnosed with alcohol addiction (AA group), 28 patients with various drug addiction diagnoses (DA group, prevalence of opioids), and 28 healthy individuals. Participants took part in a classic retrieval practice paradigm apt to elicit RIF. The results showed that, unlike healthy participants, neither the AA, nor the DA group exhibited evidence of RIF. This pattern is interpreted as evidence that inhibitory mechanisms of memory control are damaged in these patients. In contrast, all groups showed comparable beneficial effects of retrieval practice, which indicated that the deficit in the clinical groups cannot be ascribed to a general deficit in memory processes.

By Tambelli Renata & Trentini Cristina

CLINICIANS' EMOTIONAL RESPONSES AND PDM P AXIS PERSONALITY DISORDERS

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During the last 20 years, many research studies showed the existence of specific relationships between personality disorders, assessed with DSM or SWAP, and emotions experienced by clinicians. These studies showed how clinicians' emotions may help to inform the diagnostic and treatment process. So far, only one study used the Psychodynamic Diagnostic Manual's (PDM Task Force, 2006) personality disorder diagnoses. The aim of this study was to explore the relationship between patients' personality organization (PO) and personality disorders (PD), assessed with the categories of the PDM P Axis, and the emotional responses of treating clinicians. We asked to 100 clinicians to assess one of their adult patients with the revised version of Psychodynamic Diagnostic Prototypes (PDP-2; Gazzillo, Genova, Lingiardi, 2015), a version enriched with the descriptions of the different personality disorder subtypes, as well as to complete the Therapist Response Questionnaire (TRQ; Betan, Heim, Zittel-Conklin, & Westen, 2005). For identifying which emotional responses (TRQ) were most related to PO and to PDP patterns, we performed a series of multiple linear regression models, entering the PO and the PDP patterns as the dependent variables and the different TRQ factors as predictors. Our data showed that patients with high level of PO tended to elicit positive emotions, and that patients with the same personality diagnosis, but with different subtypes of this disorder, tended to evoke different kinds of emotional responses. For example, the histrionic disorder was predicted by an overwhelmed, sexualized and positive (in reverse) response, but the sexualized reaction was predicted just by demonstrative subtype, not by its inhibited version. In general, our data seem to support the idea that clinicians can use their emotional reactions as an aid for understanding the personality styles of their patients.

KEYWORDS: personality assessment, PDM, PDP, therapists' emotional responses, countertransference

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BODY DYSMORPHIC DISORDER IN PATIENTS WITH ANOREXIA NERVOSA

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Body Dysmorphic Disorder (BDD) and Anorexia Nervosa (AN) are body image disorders that frequently co-occur (Digenmans et al., 2012). Patients with AN and comorbid BDD frequently report greater body image dissatisfaction and clinical symptomatology than those without comorbid BDD (Grent et al., 2002). The first aim of the present study was to assess nonweight-related body image concerns and prevalence of BDD in patients with AN. Second, we compared patients with weight-related body image concerns only, patients with nonweight-related body image concerns, and a control group as regards body image, ED symptoms, self-esteem, and distress. 61 patients with AN were divided in two groups: patients with weight-related body image concerns only (AN-only; 22) and patients with nonweight-related body image concerns (AN+NWRC; 39). 61 healthy control (HC) were also recruited. Groups completed questionnaires including self-report measures investigating BDD (Body Dysmorphic Disorder Questionnaire, BDDQ; Questionario sul Dismorfismo Corporeo, QDC), self-esteem (RSE), eating disorders features related to body image dissatisfaction (EDI-2) and general distress (DASS-21). The most frequent nonweight-related body image concerns were hair (41.02%), nose (30.77%), and skin (30.77%). 26.23% patients had comorbid BDD. Patients with AN+NWRC showed more dysmorphic concerns than the AN-only group ($p = .02$) and the HC group ($p < .001$), as well as lower self-esteem ($p = .02$; $p < .001$, respectively). Moreover, the AN+NWRC group reported higher ineffectiveness than the other groups ($p < .001$). Finally, the AN+NWRC group reported higher distress than the HC group ($p < .001$). To conclude, patients with AN and BDD reported greater body image dissatisfaction. Since intense body dissatisfaction can persist after a successful treatment for AN, failures in diagnosing BDD in these patients may have important treatment implications.

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GENDER DYSPHORIA IN CHILDHOOD AND ADOLESCENCE IN ITALY. PRELIMINARY DATA OF A MAPPING STUDY.

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Gender dysphoria (GD) in childhood and adolescence is a complex phenomenon characterized by clinically significant distress due to the incongruence between assigned gender at birth and experienced gender. Gender identity issues among children and adolescents can be highly variable and, in recent years, consensus about the best clinical practice is currently under debate. In several countries (e.g. the Netherlands, Canada, UK, USA) the number of children and adolescents who are referred to gender identity clinics is high and increasing. In Italy, so far, young referrals are scarce. The aim of this research is to understand the reasons of this discrepancy. Carrying out the first mapping of GD in childhood (2-11 years) and adolescence (12-19 years) in Italy, the research group developed an online questionnaire for psychologists, psychotherapists, paediatricians and child psychiatrists. The questionnaire explores clinicians' knowledge and interest on gender dysphoria, the number of encountered cases and, for each case, the display of GD behaviours. Preliminary findings (from the first three months, answers collected only among psychologists and psychotherapists) showed a numerous rate of answers that made possible the collection of diverse profiles for Italian GD children and adolescents. Moreover, little knowledge about gender dysphoria (along with a clinical interest and need for more information on that topic) was found among psychologists and psychotherapists. Lastly, the questionnaire explored how clinicians have dealt with each case in terms of taking the patient in care or referring him or her to other health professionals or to gender clinics. As expected, referrals to gender clinics resulted very low.

PERSONALITY FUNCTIONING IN A SAMPLE OF ITALIAN GIFTED ADULTS

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In our society above-average intellectual abilities is considered a "winning card" that leads people to have a more prestigious job position, a better overall health and increased longevity (Batty et al., 2008). Actually giftedness, according to a psychometric test (i.e. IQ equal to or greater than 130), does not always mean to having an optimal quality of life: in fact, high capable individuals tend to have heterogeneous skills and they can be characterized by deep discrepancies. Many gifted have

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high cognitive abilities in some specific domains and other skills are lower (Lang et al., 2015). Moreover, giftedness can be an element of difficulty in interpersonal and social relations (at school or at work) because gifted individuals often experience high levels of boredom and lack of motivation that can lead them to feel misunderstood and to be lonely. This research, conducted on a sample of 80 high capable adults identified with the WAIS-IV (Wechsler, 2008), aims to illustrate characteristics of gifted's personality. We administered the DAPP-BQ (Livesley & Jackson, 2009), a self-report questionnaire that evaluates 18 psychopathological constructs on dimensional continuum. The sample of gifted individuals were compared with a control group, matched for age, gender and education. An independent sample t-test was conducted. The gifted group showed high values significantly in the scales of Callousness, Identity Problems, Rejection, Stimulus Seeking, Restricted Expression, Compulsivity and Suspiciousness. We believe that these data are particularly significant for the assessment because clinical psychologists have to take into account the effect of distortion that giftedness may have on emotional and interpersonal functioning. These factors can increase the risk of misdiagnosis as well as decrease the likelihood that gifted adults receive an inadequate treatment.

STUDYHOLISM INVENTORY (SI): A TEST FOR A POSSIBLE NEW CLINICAL CONDITION

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Studyholism is a new potential clinical condition characterized by high levels of obsessive-compulsive symptoms and low levels of study engagement. Since it is imperative not to overpathologize a common behavior such as studying, the aim of this study was to develop an instrument (i.e. the Studyholism Inventory), which allows distinguishing among three kinds of people heavily invested in studying: engaged students, engaged studyholics, disengaged studyholics. First, a pool of 68 items was created with reference to the workaholism literature, covering three hypothetical factors: addiction symptoms, obsessive-compulsive symptoms, and study engagement. Then, 340 Italian University students filled out the test and data were analyzed to reduce the total number of items, using the results of both Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA). The data analysis showed that the best factor solution for the Studyholism Inventory is a two-factor one: (1) obsessive-compulsive symptoms (or studyholism) and (2) study engagement. Hence, the final version of the Studyholism Inventory is composed of 10 items, five for each factor. This study provides some insights into the new construct of Studyholism. It showed that the symptoms and perhaps underlying processes of this

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potential clinical disorder may be more similar to a study-related obsession than to a study-related addiction. In addition, studyholism seems not to be a combination of both externalizing (i.e. addiction) and internalizing (i.e. obsessive-compulsive) symptoms, as hypothesized, but rather seems to be characterized only by internalizing symptoms. Given that studyholism is a new emerging construct, the Studyholism Inventory could be a useful instrument in further research aiming to address the features and correlates of this construct.

AFFECTIVE REGULATION AND BRAIN DYNAMICS IN A SAMPLE OF SUBJECTS WITH A HISTORY OF CHILD MALTREATMENT.

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The neurosciences have investigated the functional correlates of the "Complex Trauma" (Van der Kolk), resulting from a history of child maltreatment, by mean of EEG signals, recorded during experimental stimuli. In the EEG, the low frequency activity sustains the phase synchronization between different areas (Cross Frequency Modulation: CfM). In individuals with a history of childhood maltreatment may be present a different brain dynamic, detectable by a modified CfM and by neurophysiologic signs of functional overload. In this study it was found the EEG signal during a Go/noGo modified task, in which subjects have to select appetitive or aversive images among a neutral set, when preceded by a cue image. The study was performed on 26 subject (13 with a history of child maltreatment [MCh] and 13 controls [Cnt]). Psychopathology was assessed by questionnaires (SCL-90, DERS, TAS, TSQ, SASS, WHO-QOL Brief). The CfM and the main Event Related Potentials were computed. MCh had similar performance in the task as Cnt, but more hits on neutral images when not preceded by a cue. Response time in Go condition was not statistical different between the two groups, while later responses occurred in MCh in noGo conditions. A different brain dynamic was found in the two groups, with higher levels of CfM in the MCh group in the Medial Frontal Cortex (MFC) and in the Anterior Cingulate (ACC) in the Cnt group. The overall electrical activity was higher in the MFC in the MCh group and in the Parahippocampus (PHC) in the Cnt group. The CfM in the ACC and in MFC is correlated with the Quality of external world Life; in MFC the CfM was correlated also to Emotional Discontrol, Alexitimia and a low Quality of internal world Life. The CfM in the PHC was related to an higher attention to inner world, to dissociation, to low quality in Affective Relationships and to lower Quality of Life in general. These data confirm the presence of a different brain dynamics and CfM in MCh.

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**THE STRUCTURED INTERVIEW FOR HOARDING DISORDER (SIHD):
 ITALIAN VALIDATION IN CLINICAL SAMPLES.**

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The SIHD is a semi structured interview designed to assist clinicians in diagnosing hoarding disorder (HD). The aim of this study was to validate the SIHD, to be used in Italy. For this purpose, the inter-rater reliability of the SIHD in the Italian sample has been analyzed, as well as its ability to discriminate a HD from other disorders, often comorbid, such as obsessive compulsive spectrum disorders (OCD), depressive disorders (MDD), schizophrenia spectrum disorders, and cognitive impairment. An additional aim was to establish its validity with self-report questionnaires. The sample was composed of 193 subjects: 88 recruited from the community, and the others, among in-patients, who had been diagnosed within their clinical environment (10 HD, 11 OCD and HD, 23 OCD, 24 MDD, 24 cognitive impairment and 13 schizophrenia spectrum). Two members of the research team administered the SIHD independently, and were unaware of the patients' diagnoses. Moreover, the Mini Mental State Examination (MMSE), the Brief Psychiatric Rating Scale (BPRS), the Clutter Image Rating (CIR), the Beck Anxiety Inventory (BAI), the Beck Depression Inventory-II (BDI-II), the Obsessive Compulsive Inventory-Revised (OCI-R) and the Saving Inventory-Revised (SI-R) were administered. The results obtained indicated „substantial“ or „perfect“ inter-rater reliability for all the core HD criteria, HD diagnosis and specifiers (Cohen's K ranging from 0.6 to 1; p ranging from <.001 to 0.05). The SIHD discriminates subjects suffering from a HD from subjects without a HD. The results also indicated „good“ convergent validity with positive and „moderate“ or „strong“ correlations between the SIHD and the SI-R (rpb 0.675; p<.001), the SIHD and the CIR (rpb 0.732; p<.001), the SIHD and the OCI-R hoarding subscale (rpb 0.739; p<.001). The results acquired from this study indicated that the SIHD offers a highly reliable and valid tool for the assessment of HD.

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PERSONALITY TRAITS AND DISORDERS AMONG ADULT ADHD PATIENTS

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Patients with Attention Deficit/ Hyperactivity Disorder (ADHD) have shown a high risk to develop a DSM cluster B (i.e., Borderline, OR=13.16; Antisocial, OR=3.03; Narcissistic, OR=8.69) and DSM Avoidant personality disorder (OR=9.77; Miller et al., 2008). Similarly, higher rates of DSM cluster B personality disorder were found among adult ADHD patients (6-25%) than general population (Kooij et al., 2013). Although some authors investigated the prevalence of personality traits and disorders among adult ADHD patients (Gomez and Corr, 2014), no studies have been yet reported about the assessment of Millon's Evolution-Based Personality profiles in adult ADHD patients (Millon, 2011). Millon's personality traits and disorders were assessed in a consecutive sample of Adult ADHD outpatients accessing the Service for Adult ADHD of the AOU San Luigi Gonzaga (Orbassano, TO) using the Millon Clinical Multiaxial Inventory –III (MCMI-III; Zennaro et al., 2008). According to MCMI-III manual, ADHD patients showed more frequently both Cluster C and Cluster A than Cluster B traits and disorders, with high prevalence of Avoidant, Negativistic, and Self-defeating traits or disorders. Unexpectedly the dimensional assessment of adult ADHD personality reveals high prevalence of other than cluster B personality traits and disorders.

SIMULATION OF PSYCHOLOGICAL SYMPTOMS OR “NOT GUILTY BY REASON OF INSANITY”? A MALINGERING STUDY IN ITALIAN PRISON INMATES

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Malingering consists of “the intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives” (APA, 2013, p.726). Malingering is a significant concern in forensic/correctional settings and the identification of this phenomenon has important consequences in terms of clinical management of this population. Although malingering is widely examined in the U.S., only few studies have been published in Italy. Thus, we aimed to provide new data on this underinvestigated topic by evaluating how prison inmates simulate diffuse mental health symptoms. Eighty-seven male inmates were recruited from three Italian prisons: The mean age was 41.1 years (SD = 12.9), ranging from 19 to 78 years. We administered two self-

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reports for detecting malingering: the Structured Inventory of Malingered Symptomatology (SIMS; Widows & Smith, 2005) and the Inventory of Problems-29 (IOP-29; Viglione, Landis, & Giromini, 2013-2015). The sample was randomly divided into two groups: (1) the control group (n = 41) was asked to complete honestly the self-reports and (2) the simulator group (n = 46) was requested to feign a psychopathological disorders at the tests. Moreover, simulator group subjects were provided with a vignette describing a real-life scenario of mild traumatic brain injury. All simulators were detected as malingerers by the SIMS, however only 78.3% of the simulators were correctly identified by the IOP-29. The in-depth analysis of the items revealed that the simulators endorsed items related to affective disorders and neurologic impairments, but also items related to thought disorders. The results may suggest that the simulators reported symptoms that are typical of subjects found “Not Guilty by Reason of Insanity”. The assessment of malingering in a forensic setting should be comprehensive and should rely solely on valid instruments in order to avoid the potential consequences associated with misclassification.

NEW ULTRA-MODERN FATHERS: A RESEARCH ABOUT THE TRANSITION TO FATHERHOOD AND PERINATAL DEPRESSIVE SYMPTOMS

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The current diagnostic relevance of the Paternal Perinatal Depression phenomenon motivates the need to study its possible causes during the transition to parenthood. Our study, therefore, has the overall objective of detecting any depressive symptoms in a sample of 50 new fathers in Palermo and check whether it could depend on the type of attachment. It is also considered whether the level of depression is related to the presence of symptoms in the areas of somatization, obsession-compulsion, and sleep disorders and whether certain differences are attributable to the age, level of education and the employment status. The research has been conducted at the Bucchieri La Ferla Hospital in Palermo; participants were contacted 30 days after the birth of their first child, in order to complete 3 self-assessment questionnaires: the Relationship questionnaire, the Beck Depression Inventory II, the Symptom Checklist 90. The simple linear regression analysis of the BDI and SCL-90 scores and those of the variance test to verify the influence of the predictors of BDI and SCL-90 were performed by using SPSS. It was found that, even with depressive levels below the average, the new fathers describe somatic symptoms, obsessive-compulsive behaviors and strong level of anxiety and discomfort. Significant differences in the symptoms of the participants appear due to the variable level of education: in the comparison between groups with respect to the total score of the BDI-II using ANOVA, results show a good level of significance. The Bonferroni post hoc

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analysis of the same variable showed that subjects with a low level of education are more likely to develop depressive symptoms, compared to subjects with high educational level.

CHILD RUMINATION INTERVIEW VALIDATION: A CHILD-FRIENDLY TOOL TO ASSESS RUMINATION IN KIDS

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Rumination is a cognitive process characterized by an abstract, repetitive, and negative thinking style. In spite of its crucial role for the prevention of distress and the promotion of well being in children, the construct of rumination in childhood has received little attention in the scientific literature. One of the possible causes of such neglect may rely in the absence of appropriate tools to assess rumination in this age group. To overcome this limitation, the present study first aimed at validating a child-friendly tool (Children Rumination Interview; CRI) to be used in a sample of aged 6-12 years. The sample was composed of 49 males and 51 females, aged between 7 and 12 years ($N = 100$; average age $= 9.35 \pm 13.1$ years) in medium-high socioeconomic status, attended school in Italy's central regions. Children/preadolescent's rumination was assessed through a semi-structured interview developed ad hoc for this study. An explorative factor analysis was conducted on the initial set of 13 items, using the PAF. Factor analysis yielded two main factors: personal life-related rumination (31.1% of the total variance) and school-related rumination (12.9% of the total variance). Cronbach's α was .80 for the first and .74 for the second dimension. A 2 x 2 factorial MANOVA was performed to test for the effect of gender and age (7-9 years vs. 10-12 years) on the two CRI factors and the total score. Significant gender (Wilks' $\lambda = 0.88$; $F(3,94) = 4.14$, $p < .01$, $\eta^2 = 0.12$) and age (Wilks' $\lambda = 0.82$; $F(3,94) = 6.87$, $p < .01$, $\eta^2 = 0.18$) effects emerged. The analysis did not yield any gender X age interaction effect. Older (10-12 years) and female participants showed higher tendencies to ruminate about school issues compared to their younger (7-9 years) and male counterparts. The CRI appears as a promising tool to assess rumination in children/preadolescents and suggests partially different pathways to specific forms of ruminative thoughts.

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ITALIAN VALIDATED VERSION OF THE SHORT-FORM MULTIDIMENSIONAL JEALOUSY SCALE (SF-MJS)

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Romantic jealousy is an adaptive and complex emotional state, widely diffused feeling in romantic relationships. Despite this, very few validated scales allow to measure different dimension of romantic jealousy, overall within the Italian context. Starting from this considerations, the main purpose of this study was adapt and validate the version of the Multidimensional Jealousy Scale-Short Form (SF-MJS), edited by Elphinstons and colleagues (2011) in the Italian context. In particular, our aims were to verify: the factorial structure of the scale, via explorative and confirmatory factor analysis, the reliability of the scale, and, finally, her predictive validity by analyzing the relationships with romantic attachment style. To this aim, 361 participants (168M, 193F), aged from 18-55 (mean= 26,94, SD= 6,17) were recruited for this study. The Experiences in Close Relationships-Revised (ECR-R: Fraley, Waller & Brennan, 2000; Picardi et al., 2002), that measure attachment stile with romantic partner was employed to verify the predictive validity of SF-MJS. Results confirmed the three-factor structure of the SF-MJS, supporting the presence of these distinct latent constructs assessing several aspects of romantic jealousy: cognitive, emotional and behavioral. The internal consistency values were good for the three dimensions, with α ranging from .80 to .85. Moreover, The significant correlations between the three constructs of jealousy and the insecure romantic attachment underlined the predictive validity of the SF-MJS. Therefore, the SF-MJS appears to be a good multidimensional measure to assess romantic jealousy within the Italian context.

Key words: romantic jealousy; assessment measure; jealousy multidimensional scale; reliability; predictive validity

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PATIENT PERSONALITY AND THERAPIST EMOTIONAL RESPONSES IN THE PSYCHOTHERAPY WITH ADOLESCENTS: AN EMPIRICAL INVESTIGATION

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Therapist's emotional responses to the patient (or countertransference) can be considered as a source of valuable diagnostic and therapeutic information, as well as play a crucial role in the psychotherapy process and outcome, especially with the adolescent patient. However, empirical literature has paid little attention, to date, to the therapist-patient relationship in the treatment of adolescents and only a few studies has sought to explore countertransference reactions elicited by this patient population. The aim of this study was to examine the relationship between therapist's emotional responses and personality pathology and psychological functioning of the adolescent patient. A random national sample of clinical psychologists (N=70) completed the Therapist Response Questionnaire for Adolescents (TRQ-A) to identify patterns of countertransference, and the Shedler-Westen Assessment Procedure-200 for Adolescents (SWAP-200-A) to assess personality disorders and styles in a randomly selected patient currently in their care and with whom they had worked for a minimum of eight sessions and a maximum of ten months. Results showed that there were significant relationships between therapists' responses and patients' personality pathology and psychological functioning. Antisocial-psychopathic and narcissistic personality disorder were associated with angry/frustrated countertransference. Emotionally dysregulated personality disorder was associated with overinvested/worried therapist response. Bored/angry at parents therapist response was associated with avoidant-constricted personality disorder. Healthy and inhibited-self critical personality styles were associated with warm/competent countertransference. Overall, personality pathology of the adolescent patient are mostly related to consistent therapists' emotional responses, which suggests that clinicians can make diagnostic and therapeutic use of their responses in the psychotherapy with adolescents.

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