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Friday, 15th September 2023

SYMPOSIUM SESSION



**THE USE OF DIGITAL TECHNOLOGIES IN THE ASSESSMENT AND TREATMENT
OF PSYCHOLOGICAL DISORDERS**

Proposers

*Valentina Cardi*¹, *Chiara Baglioni*²

¹ Department of General Psychology, University of Padua, Padua, Italy

² Department of Human Sciences, Guglielmo Marconi University, Rome, Italy

Discussant

*Gianluca Lo Coco*¹

¹ Department of Psychological and Educational Sciences, University of Palermo, Palermo, Italy

Abstract

The aim of this symposium is to discuss the use of digital technologies in the prevention, assessment and treatment of psychological disorders. In the first part of the symposium, a systematic evaluation of the evidence base for the use of digital interventions in clinical psychology will be described. Strengths, limitations and future directions will be highlighted. In particular, Professor Chiara Baglioni will focus on the use of digital technologies for the treatment of insomnia, in the context of a stepped-care approach. Professor Chiara Ruini will broaden the discussion to the use of virtual reality for the treatment of psychiatric disorders, with particular reference to the impact of virtual reality on measures of positive functioning and wellbeing. The second part of the symposium will discuss data from empirical studies testing the use of virtual reality for the prevention and treatment of eating disorders. Professor Elena Tomba will introduce the use of a novel transdiagnostic prevention tool consisting of virtual reality scenarios to target eating disorders symptoms, as well as transdiagnostic maintaining factors, such as cognitive inflexibility, emotion dysregulation and experiential avoidance in people at risk for developing the illness. Professor Valentina Cardi will describe the use of mobile technologies, including virtual reality, to target food anxiety and avoidance in anorexia nervosa. The proposed symposium will aim at providing the audience with a critical understanding of the most up-to-date evidence base for the use of digital



technologies in clinical psychology and will enrich the view on the current literature by providing examples from ongoing studies in at risk and clinical populations.



The use of digital technology in eating disorders

*Valentina Cardi*¹, *Valentina Meregalli*², *Ludovica Natali*¹

¹ Department of General Psychology, University of Padua, Padua, Italy

² Department of Neurosciences, University of Padua, Padua, Italy

Abstract

Eating disorders are psychiatric illnesses characterised by abnormal eating behaviours and attitudes. Access to treatment is suboptimal and evidence-based interventions work for approximately 50% of patients. The rapid development of online and mobile technologies represents both a challenge (e.g., with reference to the spread of pro-eating disorders communities and unhealthy eating practices) and an opportunity in the field. This talk will describe few examples of how mobile technology could be applied to eating disorders, with the goal of improving the mechanistic understanding of the illness and to increase reach, acceptability and efficacy of evidence-based psychological strategies. The focus will be on the assessment and treatment of anorexia nervosa in particular, one of the most hard-to-treat psychiatric illnesses. Anorexia Nervosa is marked by profound anxiety and avoidance associated to eating and food stimuli. This talk will describe the use of mobile technology to remediate food-related anxiety and avoidance in patients with anorexia nervosa. A brief overview of empirical studies will be given. This overview will include studies which have compared the effect of positive mood induction or social support vodcasts at mealtimes on food-related anxiety and eating behaviour compared to a neutral vodcast in patients with anorexia nervosa. It will also describe findings from a study using in vivo exposure to food in anorexia nervosa and the most recent results of the impact of a single session virtual reality exposure to food stimuli on self-reported food anxiety, food-directed gazes and touches. This study involved over 200 patients with anorexia nervosa attending outpatient treatment in the UK or Italy. Patients were randomised to a brief exposure to one of three conditions: 1) a virtual kitchen; 2) a virtual kitchen + positive mood induction; 3) a virtual kitchen + social support. The hypotheses are that conditions 2 and 3 would be superior to 1 in reducing food-related anxiety. Findings are currently being analysed. The talk will be concluded on a general reflection on the pros and cons of using digital technologies in the assessment and treatment of eating disorders.



The use of digital technology for the treatment of insomnia disorder

*Chiara Baglioni*¹

¹ Department of Human Sciences, Guglielmo Marconi University, Rome, Italy

Abstract

Cognitive Behavioural Therapy for Insomnia (CBT-I) has been recognized as first line intervention for the disorder from several international guidelines. Digital CBT-I (dCBT-I) is the intervention offered through the web using diverse digital options. This can be used as support in therapy, guided dCBT-I and fully automated dCBT-I. Self-guided and fully-automated dCBT-I has been proposed to overpass the known gap between scientific evidence and clinical practice. Indeed, the offer of CBT-I in Italy, Europe and all around the world is still scarce, and pharmacotherapy is still by far the most offered treatment. This is dependent on several issues, including the lack of clinicians of familiarity with the interventions and practical barriers from the patients to attend CBT interventions, which may be very dispendious from an economical and a time perspective. To contrast these limits, a stepped-care approach to the treatment of insomnia has been proposed. This model reflects a pyramid of therapeutics which may gradually increase time commitment. Stepped care therefore conserves these most expensive of human resources for those situations where they are most required, whilst optimizing the volume of patients who can be successfully and effectively treated. It is not necessary that each patient tries all steps, but rather the allocation to the best-fitting therapy would depend on insomnia severity or complexity, therapist/clinician judgement and/or patient preference. Through fully automated evidence base dCBT-I programs, the patient is guided into an interventional pathway and compilation of important instruments, as sleep diaries and questionnaires. These apps/programs have great potentials as they can reach a large number of individuals, who may take care of their problem following their own preferences of time. Several clinical randomized controlled trials supported automated CBT-I programs as effective treatments. Nevertheless, a recent meta-analysis pointed out that guided dCBT-I is associated with greater effects. Finally, dCBT-I can be used as support in therapy, as for example to help patients through sleep diaries compilation. In addition, recent studies have positively tested the use of Virtual Reality (VR) for reducing bedtime hyperarousal, which is a clinical characteristic commonly reported by patients with insomnia.



The use of Virtual Reality according to the Positive Clinical Psychology perspective

Chiara Ruini¹, Giorgio Li Pira²

¹ Department for Life Quality Studies, University of Bologna, Bologna, Italy

² Department of Psychology, University of Bologna, Bologna, Italy

Abstract

A large body of research documented the efficacy of psychological interventions integrated with virtual reality (VR therapies) in treating psychiatric disorders. However, according to the positive clinical psychology approach, modern interventions should address both symptoms reduction and the restoration/promotion of wellbeing and positive functioning. Following the latest research (10 years) we performed a literature review in order to summarize articles that applied VR-Therapies by embracing the positive clinical psychology perspective. To be included in this review, articles had to present at least one quantitative measure of positive functioning, and one quantitative measure of symptoms or distress and had to investigate adult populations, including populations with psychiatric disorders. From the initial 682 only 20 articles were included. They described various protocols of VR that were applied for the treatment of anxiety disorders (5 articles) depression (2 articles), PTSD (3 articles); psychosis (3 articles); and stress (7 articles). The majority of them showed the beneficial effect of VR therapies in improving stress and negative symptoms. However, 7 studies showed no or small effect on various dimensions of positivity, particularly in clinical samples. This review suggests that VR interventions might be cost/effective and largely scalable, but further research is needed to develop existing VR software/treatments, according to the modern positive clinical psychology approach, where the promotion of wellbeing is as important as symptom reduction in order to determine the full recovery of patients.



Testing the effects of the H.O.M.E. transdiagnostic virtual reality-based intervention for the prevention of eating disorders: results of a pilot study

Elena Tomba¹, Eliana Tossani¹, Valentina Gardini¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

Virtual reality (VR) proved to be a useful tool for the treatment and prevention of many psychiatric disorders, including eating disorders (EDs). While VR-based interventions were seen to reduce ED-related symptomatology, no VR software to date has been developed to also concurrently tackle cognitive-behavioural transdiagnostic factors linked to the onset and maintenance of EDs, such as psychological inflexibility, emotion dysregulation, and experiential avoidance. This study aims to test the ability of a new transdiagnostic VR prevention intervention (H.O.M.E. - How to Observe and Measure Emotions) to concurrently reduce ED-related symptomatology and the three aforementioned transdiagnostic factors in general population (GP) participants at risk for EDs, compared to a waiting-list condition (WL). 19 GP individuals at risk for EDs were randomized to the six-sessions VR prevention intervention H.O.M.E. (n=9) or to a six-week WL (n=10). Both groups completed the following questionnaires at baseline and at the end of the VR intervention/WL: the Eating Disorders Examination-Questionnaire (EDE-Q) to measure ED risk and ED-related symptomatology, the Difficulties in Emotion Regulation Scale-brief version (DERS-16) for emotion dysregulation, the Acceptance and Action Questionnaire-II (AAQ-II) for psychological inflexibility, and the Multidimensional Psychological Flexibility Inventory (MPFI) scale for experiential avoidance. At the end of the H.O.M.E. intervention, paired-samples t-tests showed significant improvements in the VR group in EDE-Q total, EDE-Q-Restriction, EDE-Q-Shape concern, DERS-16, and AAQ-II. When compared to the WL using mixed-model repeated measures ANOVAs, the VR group showed significantly greater improvements in EDE-Q total, EDE-Q-Shape concern, EDE-Q-Weight concern, DERS-16 total, DERS-16-Clarity, DERS-16-Strategies, and AAQ-II. Since the study is currently ongoing, results will be updated subsequently. By improving dysfunctional eating behaviors together with transdiagnostic factors, H.O.M.E. can represent a useful tool to prevent EDs before the onset of a full syndrome. Since people at risk for EDs rarely seek traditional psychological treatment due to its associated stigma, similarities between VR and everyday-life technologies may help engaging people in psychological treatment, especially young people which are at higher risk for EDs.



**CHALLENGES, ADVANCES, AND CURRENT APPROACHES IN ASSESSING AND
TREATING EATING DISORDERS AND EATING-RELATED SYMPTOMS**

Proposer

*Laura Muzi*¹

¹ Department of Philosophy, Social Sciences, Humanities and Education, University of Perugia, Perugia, Italy

Discussant

*Antonello Colli*¹

¹ Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

In both clinical practice and research settings, the complex and heterogeneous nature of eating disorders (EDs) and other related conditions (such as obesity) requires a comprehensive evaluation of patients' individual differences through reliable assessment measures and research methodologies. Further on, international practice guidelines recognize the increasing need to tailor treatments in order to improve their effectiveness across the span of eating symptoms and different clinical settings. Then, the main goal of this panel is to present findings from four studies that, through the investigation of relevant clinical features of EDs with different assessment tools and methodologies, may help to shed light on potential clinical challenges and the ways to overcome them. The first study by Aloï et al. identified, through a latent class analysis, five different clinical profiles of food addiction symptoms among obese and binge-eating patients, while also exploring their differences related to binge severity, depressive symptoms, emotional dysregulation, alexithymia, and schema domains. The second study by Salerno et al. investigated the psychometric properties of the Eating Expectancy Inventory in patients with EDs and obesity compared to a control group, while also exploring associations with dysfunctional eating behaviors. From a more clinical viewpoint, the third study by Panero et al. compared therapist- and patient-rated evaluations of ED patients' psychological and interpersonal functioning during early stages of psychotherapy. Finally, the fourth study by Muzi et al. explored, from a longitudinal perspective,



therapeutic changes in a broad spectrum of personality traits and their predictive role in symptom reduction in patients with anorexia nervosa and bulimia nervosa.



Early stages of psychotherapy in patients with eating disorders: potential biases in therapist evaluation of the psychological functioning

Matteo Panero ¹, Eleonora Innocenzi ², Giovanni Abbate Daga ¹

¹ Eating Disorders Center for Treatment and Research, Department of Neuroscience, University of Turin, Turin, Italy

² Department of History, Culture and Society, Tor Vergata University of Rome, Rome, Italy

Abstract

Introduction: Eating Disorders (ED) are serious diseases with significant morbidity and mortality. Treatment outcomes are only partial. The approach to treatment is multidisciplinary and psychotherapy is crucial. Nonetheless, there is still no consensus about which kind of psychotherapy offers better outcomes. The early stages of psychotherapy are very important to assess the severity of the disease, evaluate psychological functioning, identify a focus theme, and establish a working alliance. The aim is to study the early stages of psychotherapeutic treatment, confront therapists' comprehension of psychological functioning with patients' own self-evaluation, to identify early factors that may influence treatment efficacy. *Methods:* Our sample includes 25 ED individuals enrolled at the ED Center at the University Hospital "Città della Salute e della Scienza". During the treatment, subjects underwent 40 sessions of psychodynamic psychotherapy. After the third session, subjects completed the Inventory of Interpersonal Problems (IIP-32), and therapists completed the Psychodynamic Functioning Scale (PFS) for assessing the patient's psychological functioning. *Results:* The sample consists of 10 subjects with Anorexia Nervosa Restricting subtype (40%), 8 bingeing purging subtype (32%), 7 Bulimia Nervosa (28%). Individuals who display greater social inhibition or lack of assertiveness, as determined through the IIP-32, were identified by therapists as capable problem-solvers and adept at forming positive relationships. Those who self-reported as excessively accommodating were evaluated as possessing good insight qualities. Lastly, individuals who exhibit a tendency to sacrifice their own needs in relationships were evaluated as displaying a heightened capacity for tolerating emotional stressors. *Discussion:* The early stages of psychotherapy in ED represent a complex and crucial moment in the treatment process. Our study has brought attention to a potential partiality that therapists may encounter when assessing the psychological functioning of individuals with ED in the early stage of psychotherapeutic treatments. Due to the complexity and ego-syntonic nature of ED and the challenge of establishing a good therapeutic



alliance, the possibility of therapist bias is significant. Hence, the presence of expert therapists with specific training in ED is crucial.

Using latent class analysis to identify different clinical profiles according to food addiction symptoms

Matteo Aloï ¹, Marianna Rania ², Elvira Anna Carbone ³, Renato de Filippis ³, Marco Tullio Liuzza ³, Cristina Segura-Garcia ³

¹ Department of Experimental and Clinical Medicine, University of Messina, Messina, Italy

² Outpatient Unit for Clinical Research and Treatment of Eating Disorders, University Hospital “Mater Domini” of Catanzaro, Italy

³ Department of Medical and Surgical Sciences, Magna Græcia University of Catanzaro, Catanzaro, Italy

Abstract

Introduction: Existing research suggests that the construct of Food Addiction (FA) is associated with binge eating disorder (BED) and obesity (OBE). This study aims to investigate the different clinical profiles of FA symptoms among obese patients using latent class analysis (LCA). *Methods:* A total of 307 patients (N=152 BED, N=155 OBE) completed a battery of tests that investigated eating psychopathology, depression, emotional dysregulation, alexithymia, schema domains, and food addiction. LCA and group comparisons were conducted to identify profiles according to FA symptoms and examine differences among classes. *Results:* LCA identified five meaningful classes that were labelled: the “non-addicted” class (40.4%), the “attempters” class (20.2%), the “interpersonal problems” class (7.2%), the “addicted” class (12.7%) and the “physically addicted” class (19.5%). BED-obese are most frequent in the “addicted” and “physically addicted” classes, while non-BED-obese are most frequent in the “non-addicted” class. Finally, both groups are equally distributed in the classes “attempters” and “interpersonal problems”. Most significant differences are evident in “addicted” and “physically addicted” versus “non-addicted class”, in particular on binge severity, depressive symptoms, emotional dysregulation, alexithymia, and schema domains. *Conclusions:* These findings show that different clinical profiles among obese according to FA symptoms exist. In particular, the class “physically addicted” is of great interest because the members of this class were characterized by the full achievement of only physical FA symptoms such as “withdrawal”, “tolerance”, “craving”, and “consequences” symptoms. Identifying different profiles of BED patients in the light of FA symptoms may be helpful in the clinical practice to develop an individualized assessment and a tailor-made treatment among these patients.



Therapeutic changes in personality features in anorexia nervosa and bulimia nervosa: A longitudinal study in a psychodynamic-oriented residential setting

*Laura Muzi*¹, *Marta Mirabella*², *Anna Franco*³, *Alessia Urgese*³, *Milena Montaguti*³, *Micaela Riboldi*³, *Michele Rugo*³

¹ Department of Philosophy, Social Sciences, Humanities and Education, University of Perugia, Perugia, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

³ Eating Disorder Clinic “Residenza Gruber”, Bologna, Italy

Abstract

Introduction: Despite symptomatic remission is considered an essential index for a successful therapy in patients with anorexia nervosa (AN) and bulimia nervosa (BN), several authors pointed out the importance of evaluating changes in more “structural” dimensions of patients’ functioning, such as specific personality features, which might shape and give meaning to eating-related symptoms. However, to date, personality-based outcome research in this field is still limited. This study aimed at exploring, through a multi-informant and longitudinal perspective, therapeutic changes in a broad spectrum of personality traits and in overall personality functioning, while also evaluating if changes in personality would predict symptom reduction. *Methods:* A national sample of cisgender women with a DSM-5-TR diagnosis of AN and BN (N= 72) was evaluated at intake, at discharge, and at a 6-month follow-up with the clinician-rated Shedler-Westen Assessment Procedure (SWAP-200). In all these time points, patients fulfilled self-report questionnaires on eating symptoms (Eating Attitudes Test-40, EAT-40), depressive features (Beck Depression Inventory-II, BDI-II), and psychological well-being (Psychological Well-Being Scale, PWB). *Results:* Findings showed statistically significant changes in several SWAP-200 Scales and Q-factors at both discharge and at 6-month follow-up. There was a significant increase in the healthy personality functioning scale, dysphoric: depressive–high functioning, and obsessive Q-factors, along with a decrease in the schizoid, schizotypal, and borderline PD Scales, as well as in the dysphoric: emotionally dysregulated Q-factor. Changes in healthy personality functioning were associated with a decrease in overall eating symptomatology and depressive symptoms at a 6-month follow-up and an increase in self-acceptance and personal growth. *Discussion:* These results support the view that the goals



of psychodynamic-oriented approaches for AN and BN include, but can be extended beyond, the alleviation of eating-related symptoms. Then, considering multiple indices of therapeutic change enables a more clinically useful perspective of treatment outcomes in this clinical population.



Eating-related expectancies among obese individuals with and without Binge Eating Disorder: validation of the Italian version of the Eating Expectancy Inventory

Laura Salerno¹, Gaia Albano¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Background: In line with the expectancy learning theory, previous studies pointed out the role of eating-related expectancies in determining dysfunctional eating behaviours. Although the Eating Expectancy Inventory (EEI) is a broadly used measure of eating-related cognitive expectations among patients with eating disorders (EDs), its factorial structure has been evaluated only in non-clinical samples. The present study aims: (a) to evaluate the psychometric properties of the Italian version of the EEI among patients with EDs and (b) to evaluate if different eating-related expectancy patterns may be identified among obese patients with and without Binge Eating Disorder (BED), compared to non-clinical participants and patients with other EDs. *Methods:* Seven hundred fifty-seven participants (n = 393 clinical participants with EDs and obesity and n = 364 non-clinical participants) filled out the Eating Expectancy Inventory and measures of ED symptoms. The EEI factor structure was examined through Confirmatory Factor Analysis (CFA). *Results:* The previously derived five-factor model of the EEI provided a better fit with the data than alternative models. All items had significant loadings in their respective factors. The 5 EEI scales demonstrated questionable to excellent internal consistency. For obese patients (with or without BED), greater binge eating severity was associated with greater expectancies that eating may serve to manage negative affect/boredom and that eating leads to feeling out of control. Only for obese patients without BED, greater binge eating severity was associated with greater use of eating as a reward. Obese patients with BED more frequently believe that eating may serve to manage negative affect and boredom and that eating leads to feeling out of control compared to patients with other EDs and non-clinical participants. *Discussion:* The results of the current study support previous literature demonstrating the independent relevance of eating-related expectancies to the spectrum of disordered eating behaviors. Disordered eating prevention and intervention efforts would benefit from explicitly targeting eating-related expectancies in an ED-specific way in order to understand the maintenance of disordered eating and reduce specific ED symptoms.



**THE REPRODUCIBILITY OF PSYCHOLOGICAL INTERVENTIONS THAT WERE
DESCRIBED IN PUBLISHED RESEARCH ARTICLES**

Proposer

*Gian Mauro Manzoni*¹

¹ Faculty of Psychology, eCampus University, Novedrate, Como, Italy

Discussant

*Caterina Lombardo*¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Over the last decade, trust in psychology research findings has been severely undermined by a crisis that, initiated by the failure to replicate findings of several influential past studies, has been furtherly worsened by the large use of questionable research practices in all research fields. The main reaction to the crisis has been the Open Science Movement, whose main aim is the promotion of research transparency and openness, not only through data sharing, pre-registration, etc. but also through a better reporting of studies, whose methods should be totally reproducible. However, with respect to research articles describing studies that tested the efficacy of psychological interventions, there is past evidence that the descriptions of interventions were poor in most of articles that were reviewed. Given that no other review was published in recent years and no distinction was made between the different clinical approaches, four mini-reviews were planned in order to update the evidence and differentiate between four clinical approaches: 1) Cognitive-Behavioral Therapy; 2) Psychodynamic Therapy; 3) Brief and Strategic Therapy; 4) Integrative Therapy. Each mini-review is ongoing. Results will be presented, discussed and compared in the symposium.



The reproducibility of integrated psychotherapy interventions: a mini-review

Eleonora Volpato^{1,2}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

² IRCCS Fondazione Don Carlo Gnocchi, Milan, Italy

Abstract

Introduction: In contrast to some single-school approaches, integrative therapy is not restricted to a particular methodology or school of thought. Instead, therapists can use different techniques as needed. The aim is to improve the effectiveness and efficiency of the treatment and adapt it to the specific needs of the individual. Understanding the extent to which the description of these therapies allows them to be replicated could provide insights into reproducibility and guidance on how to improve it. A mini-review was thus planned to assess the descriptions of interventions based on the Integrative Therapy (IT) approach in research articles that were published in the last five years. *Methods:* Studies whose primary aim was to test the efficacy of IT interventions on any psychological disorder were searched on PsycInfo, Ovid MEDLINE, and Embase and were randomly selected. The descriptions of IT interventions are being assessed through the TIDieR (Template for Intervention Description and Replication) checklist. *Results:* The mini-review is still ongoing and results will be presented, discussed and compared in the symposium. *Discussion:* Even though the results of the mini-review cannot underpin any conclusions on the quality of the IT procedures described in the research articles, they will provide preliminary evidence for discussion and a future systematic review on the reproducibility of these interventions.



Assessing the Reproducibility of Psychodynamic Therapies: A Mini-Review of Ten Randomized Controlled Trials

*Emanuele Maria Giusti*¹

¹ EPIMED Research Centre - Epidemiology and Preventive Medicine, Department of Clinical and Experimental Medicine, University of Insubria, Varese, Italy

Abstract

Background: Reproducibility is a complex issue in psychodynamic therapies because of the nature of the therapy itself. Evaluating the extent to which the description of these therapies allows them to be replicated might provide insights into reproducibility and guidance on how to improve it. *Methods:* In this mini-review, we assessed the reproducibility of the therapies described in 10 published articles describing the results of randomized controlled trials evaluating the efficacy of psychodynamic therapies for psychological disorders. After conducting a search in PsycInfo, two articles per year were randomly selected from the last five years. The assessment was performed using the TIDieR (Template for Intervention Description and Replication) checklist. *Results:* The mini-review is still ongoing and its results will be presented at the symposium. Examining the reproducibility of psychodynamic therapies is an important step in determining the extent to which the results of studies on these therapies can be generalized.



Evaluating the Reproducibility of Brief Strategic Therapy: State of the Art

Giada Pietrabissa ¹

¹ Department of Psychology, Magna Græcia University of Catanzaro, Milan, Italy

Abstract

Background: Although several reporting guidelines have been developed and published for enhancing the quality and transparency of research studies, the description of clinical interventions is still scant – limiting their reproducibility. A review of studies was then planned to assess the descriptions of Brief Strategic Therapy (BST) interventions in research articles. *Methods:* Research articles whose primary aim was to test the efficacy of BST on any psychological outcomes were searched on PsycInfo and Google Scholar databases. Their reproducibility was assessed using the TIDieR (Template for Intervention Description and Replication) checklist. *Results:* The contribution is still ongoing and results will be presented, and discussed during the symposium. *Discussion:* Findings will provide preliminary evidence of the reproducibility of BST intervention.



A mini-review on the reproducibility of CBT interventions that were described in ten research articles from the past five years

Gian Mauro Manzoni¹

¹ Faculty of Psychology, eCampus University, Novedrate, Como, Italy

Abstract

Introduction: Although several reporting guidelines have been developed and published in the last years (www.equator-network.org), not only for equating the reporting of studies but also for enhancing their quality and transparency, there is past evidence that the descriptions of interventions in clinical research articles were poor in most of them, limiting the reproducibility of those interventions in replication studies as well as in clinical practice. A mini-review was thus planned in order to assess the descriptions of Cognitive-Behavioral Therapy (CBT) interventions in research articles that were published in the last five years. *Methods:* Ten articles reporting randomized clinical trials whose primary aim was to test the efficacy of CBT interventions on any psychological disorder were searched on PsycInfo and two articles for each year were randomly selected. The descriptions of CBT interventions are being assessed through the TIDieR (Template for Intervention Description and Replication) checklist. *Results:* The mini-review is still ongoing and results will be presented, discussed and compared in the symposium. *Discussion:* Even if findings of a mini-review cannot support any conclusion on how well CBT interventions were described in research articles, they will provide a preliminary evidence for discussion and for a future systematic review on the reproducibility of psychological interventions described in research articles from the past ten years.



PERINATAL TRAJECTORIES AND EMOTIONAL WELL-BEING

Proposer

*Anna Maria Della Vedova*¹

¹ Department of Clinical and Experimental Sciences, University of Brescia, Brescia, Italy

Discussant

*Renata Tambelli*¹

¹ Department of Dynamic, Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

This symposium will focus on the complexity of the different trajectories that characterize the transition to parenthood in their specific and multidimensional aspects from the perspective of promoting parental emotional well-being. The experiences parents have during this stage, as well as their relational backgrounds, can influence their personal psychosocial health, the quality of the couple relationship, and the type of caregiving provided to the child. It is recognized that the presence of emotional distress in parents affects the cognitive, emotional and social development of the child, therefore it is important to identify specific conditions of risk and offer adequate support interventions. In the first contribution Della Vedova and colleagues will focus on a screening project of perinatal emotional distress in new fathers, analyzing the different emotional needs of women and men in the early stages after childbirth. In the second contribution Vismara and colleagues will focus on perinatal grief symptoms and the quality of life in relation to the parental attachment dimensions of care and control, proposing attachment-based interventions to promote women's wellness in the context of perinatal loss. In the third contribution Rollè and colleagues will focus on the relationship between attachment, dyadic adjustment, and sexual satisfaction among men and women experiencing infertility. In the last contribution Della Vedova and colleagues will present a longitudinal study on the relationship between perinatal maternal emotional well-being and sensitivity in mother-infant interactions. The general objective of this symposium is to promote a reflection on the importance of supporting the different trajectories of parenting in the perinatal period



through interventions for the early identification of potential maternal and paternal emotional distress, as well as the importance of support for the complexities of becoming a parent.



Screening for perinatal distress in new fathers

Anna Maria Della Vedova¹, Laura Cabini², Fernanda Maturilli², Anastasia Parenza², Stephen Matthey¹

¹ Department of Clinical and Experimental Sciences, University of Brescia, Brescia, Italy

² ASST Spedali Civili Brescia, Brescia, Italy

Abstract

Maternal and paternal psychological well-being in the perinatal period is of fundamental importance to optimize the transformations and developmental tasks for the parents and the child. While screening for perinatal distress is now routinely performed for women, it is rarely done for men. This is despite the fact that the literature highlights that paternal distress can affect the psychological development and well-being of the child. In Lombardy, the Region has established routine screening for women at various stages of pregnancy and postpartum using the Whooley Questions and the General Anxiety Disorder-2 (GAD-2). Due to the importance of paternal mental health, the ASST Spedali Civili of Brescia, in collaboration with the University of Brescia, have initiated a screening project aimed at including the partners of pregnant women. The present study reports on the preliminary data of 62 couples who accessed routine postnatal visits and completed: a sociodemographic form, the Whooley Questions, the GAD-2 and the Matthey Generic Mood Questionnaire (MGMQ), within the first three months after delivery. Overall 17 (27%) couples tested positive at screening, in one or both partners, on at least one of the measures. Among the women 8 (13%) screened positive, while 11 (18%) men screened positive. Four (5%) of these men who screened positive said on the MGMQ that they would like to speak ('yes' or 'possibly') to a health professional and gave reasons why they were feeling distressed. The early results of this project show a slightly higher rate of perinatal distress in fathers compared to mothers in this sample. By addressing the screening only to mothers, 11 fathers (out of 62) would not have been identified, and 4 of them would not have had the opportunity to speak with a health professional. The results seem to indicate a beneficial effect of the screening of fathers to prevent the potential consequences of distress on childhood development and on the couple's well-being.



Perinatal emotional well-being, parental bonding and dyadic sensitivity in early mother-infant interactions

Anna Maria Della Vedova¹, Maria Noemi Paradiso², Fabrizio Santonicolo²

¹ Department of Clinical and Experimental Sciences, University of Brescia, Brescia, Italy

² Department of Psychology, University of Turin, Turin, Italy

Abstract

The quality of the early parent-child relationship is essential for the development of the child, and parental sensitivity plays a key role in early interactions. Several factors may affect the mother's ability to interact sensitively with the infant, including the mother's early relationship experiences with her caregivers and the presence of emotional distress in the perinatal period. The aim of the study was to evaluate the influence of parental bonding and different aspects of maternal perinatal psychological well-being on dyadic sensitivity at three months postpartum. At the third trimester of pregnancy (T1) and at three months postpartum (T2), 43 primiparous women filled in a series of questionnaires assessing symptoms of depression, anxiety and quality of the parental bond. At T2 mothers also completed a child temperament questionnaire and participated in the CARE-Index procedure. Results showed that maternal trait anxiety in pregnancy was predictive of lower dyadic sensitivity while maternal experience of a nurturing father in infancy was associated with less compulsiveness of the child. Conversely, childhood experience of an overprotective/controlling father predicted a reduced maternal responsiveness. These results underline the influence of the quality of the internalized early maternal relationships on her sensitivity in the current relationship with her child. The data also highlight the influence of maternal perinatal psychological well-being on the quality of the dyadic relationship. Overall the study results confirm the influence of intergenerational aspects on the quality of the mother-child relationship and underline the importance of early detection of maternal emotional distress in the perinatal period.



Attachment, Dyadic Adjustment, and Sexuality Satisfaction: A study on Infertile Men and Women

Luca Rollè¹, Maria Noemi Paradiso¹, Monica Ahmad², Chiara Fusco³, Giacomo Tognasso³

¹ Department of Psychology, University of Turin, Turin, Italy

² Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

³ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

During a couple's journey to parenthood, they may encounter a number of problems that are not normally expected, such as infertility of one of the partners. The issue of infertility is sometimes discovered after medical examinations because the long-desired pregnancy takes too long to occur. It is as if it suddenly stops the process of parenthood and begins, in many cases, to affect all areas of the couple's life. Infertility has many implications of a psycho-sexual nature and, furthermore, sexual health is directly associated with each individual's psychological well-being and quality of life. In this perspective, research suggests us that adult attachment, dyadic adjustment and sexual satisfaction are closely related. Our aim was to investigate the experiences of sexual satisfaction, internal control, and anxiety among infertile men and women, as well as the connection between attachment, dyadic adjustment, and sexuality. Our sample is composed by 129 Italian infertile people, 52.7% men and 47.3% women (age $m=26yo$, $M=57yo$). The sample has been recruited both in hospitals and in public/private centers for Medically Assisted Reproduction in Northern Italy. Participants completed a few questionnaires to collect socio-demographic data in addition to the Dyadic Adjustment Scale (DAS), the Multidimensional Sexuality Questionnaire (MSQ) and the Experiences in Close Relationship-Revised (ECR-R). Results showed, in both women and men group, that higher levels of dyadic adjustment predicted higher levels of sexual satisfaction and that in women's group the presence of anxious attachment decreased sexual internal control. Indeed, individuals with high levels of anxiety may be burdened by feelings of defeat, performance worries, and fear of losing their partner especially if the couple has been trying for a baby for a long time. One particular finding is that for infertile men, there was no correlation between attachment, dyadic adjustment, and sexual anxiety. According to the findings of our study, maintaining a satisfying sexual relationship requires a good dyadic adjustment. Infertile women who present anxious



attachment appear to have a negative effect on their sexual internal control, whereas men who present avoidant attachment appear to have higher sexual internal control than women and show a lower sexual anxiety.



Attachment and quality of life in women's grieving after perinatal loss

Laura Vismara¹, Monica Ahmad¹, Enrica Serra¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Abstract

Introduction: Perinatal grief is the loss of an infant that occurred during pregnancy or during the child's first year of life. Perinatal loss may be associated with intense distress as manifested by sadness, hopelessness, fear, guilt, and anger and longing for the lost child. Even though grief is a distinctive, nonpathological reaction, persistent grief disorder (PGD) may develop when symptoms are more distressing, pervasive, or persistent. The process of grief may be affected by various factors, among them, the individual's attachment style may be an influential variable. Attachment theory certainly offers a useful perspective to understand the response to loss. In particular, anxiously attached people seem to show more intense grief symptoms following the loss of a significant attachment figure, whereas avoidantly attached individuals display fewer externalized expressions of grief but higher levels of somatization. During pregnancy, the developing attachment to the unborn child goes together with by the formation of a parent-child bond. Therefore, it is critical to consider how attachment is linked to the prolonged grief response after perinatal loss and the woman's perceived quality of life. The objective of the present study was to study the perinatal grief symptoms and the quality of life in a sample of 137 Italian women (mean age 36.9 ± 6.88 years) in relation to the two dimensions of parental attachment: parental care and parental control. *Methods:* Recruited women filled online the Parental Bonding Instrument, the Perinatal Grief Scale, and the Psychosocial General Well-Being Index. *Results:* All subjects presented intense grief and severe grief reactions to loss. In addition, women who reported higher maternal care disclosed higher quality of life in comparison with women who experienced lower maternal care. Moreover, optimal maternal attachment was associated with a positive healing process and a higher quality of life than women with a loveless control profile. *Conclusions:* Perinatal loss has proved to be a frequent experience connected with an increased risk for impaired quality of life. In this context, an optimal maternal attachment showed to be a protective factor; hence, attachment-based tailored interventions for women who experience perinatal loss should be implemented to foster their general and psychological health.



**WHY WE DO NEED A PSYCHODYNAMIC SOUL: THE STUDY OF THE
PSYCHOANALYTIC PROCESSES FROM THE STANDPOINT OF NEUROSCIENCE**

Proposer

*Riccardo Williams*¹

¹ Department of Dynamic and Clinical Psychology, ad Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Arianna Palmieri*¹

¹ Department FISPPA, University of Studies of Padua, Padua, Italy

Abstract

Both psychoanalysts and neuroscientific researchers share some basic form of “ontological reductionism” (Umiltà, Legrenzi, 2016), which is, the idea that all mental processes rely on the activation of specific brain areas. However, many important disagreements arise when we come to the language of description and explanation as well as to the methods of study of those processes investigated by the psychodynamic tradition and neurosciences respectively. In order to productively propose a mutually informative perspective between neuroscience and psychoanalysis at least three requirements should be met: 1) the identification of an object of research that focuses on those aspects of psychic functioning concerning the integration of the components of affective and motivational experience with symbolic representations; 2) the adoption of a neuroscientific method of observation and description that does not reduce the psychological phenomenon to a neural (or worse, bio-molecular) level of analysis and explanation but that takes into account the functional complexity of the psychodynamic perspective; 3) an outcome of research that has an impact on psychodynamic theories and, possibly, on the understanding of specific clinical phenomena. In this panel, contributions that adopt such criteria of investigation are presented. Each contribution in the first place focuses on a single clinical manifestation, such as personality disorders, externalizing disorders, dissociation, lack of constancy of the object, and provides a relative explanation referring to classic or contemporary psychodynamic constructs. Finally, a possible reformulation of these constructs, namely, and therapist’s emotional resonance and response,



self-regulation, sense of self, and intersubjective sharing, is provided relying on models of functioning recently explored in some neuroscientific areas of research.



Self-regulation and its implications for externalizing psychopathology: Developmental trajectories and clinical phenomena from a neuroscience perspective

*Marco Cavicchioli*¹

¹ Vita-Salute San Raffaele University, Milan, Italy

Abstract

Psychodynamic and other clinical psychological approaches are consistent in operationalizing self-regulation as the constellation of implicit and explicit mechanisms that allow to modulate interactions between the subject and external world across different phases of development. Alterations of self-regulation processes have been widely considered a core feature of the externalizing psychopathological spectrum from childhood to adulthood (e.g., attention deficit and hyperactivity disorder [ADHD], oppositional defiant disorder [ODD], conduct disorder [CD], substance use disorders [SUDs]). However, it is not clear which domain (i.e., emotional, cognitive, behavioral) of self-regulation processes should be considered the most representative for characterizing externalizing psychopathological conditions, especially considering a development perspective. Accordingly, this presentation will be focused of the discussion of works conducted by the presenter that should clarify this topic, especially considering SUDs and related developmental trajectories (i.e., ADHD, ODD, CD). Specifically, the presentation will discuss neuropsychological, neuroimaging (i.e., fMRI, PET) and genetics findings that support how alterations of self-regulation and self-organization of motor programs should be considered the core features of adult SUDs and related externalizing developmental conditions. Ultimately, these findings will be discussed supporting the key role of motor behaviors and their regulation on the adaptive developmental of relationships between the subject and external world together with a complex organization of inner world.



**The sense of self and synchrony in-between psychoanalysis and neuroscience.
Neuropsychodynamic of integrative vs dissociative processing**

Andrea Scalabrini¹, Clara Mucci¹

¹ Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy

Abstract

The sense of self and subjectivity has always been a topic of high interest in both psychoanalysis and most recently in neuroscience. Nowadays, there is an agreement in psychoanalysis that the self emerges from the relationship with the other (e.g., the caregiver) in terms of his/her capacity to attune, regulate, and synchronize with the emergent self of the infant. In this relationship the role of touch and the so called “mentalization of the body” also represent a proof of the affective development of the body-brain-mind functioning. The outcome of this relational/intersubjective synchronization is the development of the sense of self and its regulatory processes both in dynamic psychology and neuroscience. In this work, we propose that synchrony-attunement-connectedness is a fundamental biobehavioral factor in these dialectical processes between self and others which shapes the brain–body–mind system of the individuals, including their sense of subjectivity and first-person perspective. The sense of self has an intrinsic integrative function that when is threatened by, for instance, traumatic experiences, is fragmented yielding dissociative processing that perturbate and disrupt the topography and dynamic of the brain based hierarchical structure of self and its degree of connectedness with the body, the others and the world.



Two modes of being together: The neurosciences of intersubjectivity and the psychoanalytic understanding of pathological human relatedness

Riccardo Williams¹, Francesca Casasoli¹, Marta Moselli¹

¹ Department of Dynamic and Clinical Psychology and Health studies, Sapienza University of Rome, Rome, Italy

Abstract

The notion of inter-subjectivity has achieved a primary status in psychoanalytic debate, stimulating new theoretical proposals that place altered modes of human relatedness at the core of diverse forms of clinical phenomena and personality pathology. This work presents an overview of the main contributions on inter-subjectivity in the field of neurosciences. In humans as well as—probably—in other species, the ability for emotional resonance is guaranteed early in development. Based on this capacity, a primary sense of connectedness is established that can be defined inter-subjective in that it entails sharing affective states and intentions with caregivers. We propose to define such a form of inter-subjectivity as contingent, since the infant's early abilities for resonance do not imply the more generalized capacity to permanently conceive of the relationship outside the realm of current interactions and the infant-caregiver's mutual correspondence of internal states. This form of connection, hence, results in a self-referential, bodily, and affectively codified, context- and time dependent, like-me experience of interactions. The gradual maturation of brain structures and processes as well as interactive experiences allow proper intersubjectivity exchanges, grounded on new intentional and representational capacities, to evolve. In this more mature form of intersubjectivity, the individual can conceive of her own psychic space both as distinct and as possibly connected with the other's contents and experience, even in the absence of current behavioral indicators of such correspondence. This multi-layered model of intersubjectivity, embraced by current neuroscientific research, seems to allow for new interpretations of psychoanalytic models of human relatedness based upon classic as well as contemporary clinical observations. The diverse modes of emotional processing and representations of early exchanges are definitely at tally with contemporary descriptions of the infant's early propensity for relatedness and self-other differentiation. At the same time, this framework also affords a new consideration on those developmental conditions through which the psychoanalytic classic tradition has interpreted the psychopathology of psychosis, severe personality disorders and other relevant phenomena.



Therapists' emotional and neural responses to patients with different personality disorders: A pilot study using three clinical vignettes from In Treatment series

Cristina Trentini¹, Alessandro Grecucci², Miguel David Sabogal-Rueda³, Carlo Lai¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

² Clinical and Affective Neuroscience Lab, Department of Psychology and Cognitive Sciences, University of Trento, Rovereto, Italy

³ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: Therapists' responses to patients are a critical component of the patient–therapist relationship, which, in turn, represents one of the most important mutative factors of successful treatment outcomes. The association between therapists' responses and patients' personality syndromes has been largely documented, particularly from the perspectives of clinicians and external observers. In contrast, no empirical research has ever examined therapists' response patterns to patients with different personality disorders from a neuroscience perspective. The purpose of this study was to fill this gap. *Methods:* Fourteen psychodynamic therapists were asked to complete the Shedler-Westen Assessment Procedure-200 (SWAP-200) and the Therapist Response Questionnaire (TRQ), after watching three videos showing clinical interactions between a therapist and three patients with narcissistic, histrionic/borderline, and depressive personality disorders, respectively. Then, participants' high-density electroencephalography (hdEEG) was recorded as they passively viewed pictures of the patients' faces, which were selected from the still images of the previously shown videos. Supervised machine learning (ML) was applied to evaluate whether: (1) therapists' responses predicted which patient they observed and whether specific clinician reactions contributed to distinguishing between patients with different personality disorders; (2) therapists' ERPs predicted which patient they observed and whether distinct ERP components allowed this forecast. *Results:* The ML models found that distinct patterns of criticized/devalued and sexualized therapist responses were associated with the facial stimuli of patients with particular personality disorders, in a coherent and predictable manner. The ML models also found that amplitudes of specific late positive potential (LPP) sub-components in the hippocampus were able to accurately determine which patient the therapists observed during the hdEEG task. *Discussion:* These



results suggest that meaningful memory recall processes (regarding memories of both the observed patients and previous clinical experiences) affected therapists' ability to distinguish between patients with different personality disorders during the hdEEG. This study, albeit preliminary, sheds light on the role played by therapists' memory processes in clinical practice.



**YOUNG ENTRAPPED IN DARKNESS BY STAYING AWAKE: EFFECTS OF THE
DIGITAL ERA ON SLEEP AND HEALTH**

Proposers

Christian Franceschini¹, Alessandro Musetti²

¹ Department of Medicine and Surgery, University of Parma, Parma, Italy

² Department of Humanities, Social Sciences and Cultural Industries, University of Parma, Parma, Italy

Discussant

Gianluca Castelnuovo¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

This symposium aims to present the phenomenon of sleep disorders (i.e., sleep deprivation, delayed sleep phase, and insomnia) in adolescence to contextualize these increasingly frequent problems as highlighted by some recent studies. The symposium will then aim to provide some in-depth proposals concerning adolescent sleep problems, focusing in particular on two phenomena associated with poor sleep, i.e., problematic online behaviors and the Hikikomori phenomenon (social withdrawal). These phenomena are increasing among Italian adolescents, also due to the long pandemic caused by COVID-19, forced social isolation, and related transformations of social ties, which have been increasingly mediated by online platforms. The first contribution (University of Parma) will offer an excursus on the evolution of physiological sleep across the lifespan, its dynamics, and changes resulting from social jet lag, showing a literature review focusing on adolescent sleep as distinct from that of children and adults. The paper also aims to discuss effective psychoeducational strategies for proper sleep hygiene. The second contribution (University of Naples, Federico II) focuses on the dynamics of problematic gaming, the result of the adolescent's ineffective emotional and anxiety management. In fact, problematic gaming behavior may be associated with social withdrawal, generating a vicious circle capable of negatively affecting sleep and having well-known consequences for the adolescent and the family. The third contribution (University of Parma) focuses on the phenomenon of Hikikomori, a social withdrawal phenomenon that is new but also rapidly spreading in Italy. It will provide a snapshot



of the phenomenon in Italian adolescents and its effects on sleep. The fourth contribution (University of Padova) focuses on the relationship between distress symptoms and hours of sleep, problematic use of social media (i.e., Instagram), and symptoms of eating disorders. The study will also discuss the moderating role of symptoms of eating disorders and possible gender differences in a sample of Italian young adults.



The influence of sleep on physical and psychological well-being in adolescence

*Christian Franceschini*¹

¹ Department of Medicine and Surgery, University of Parma, Parma, Italy

Abstract

The positive impact of sleep on physical recovery, metabolic functioning, and immunological systems is widely recognized. Alongside the important role that sleep plays in 'physical' health, recent attention has also focused on the impact that sleep has on psychological well-being. If sleep is a basic function for adults, it is even more so for children and adolescents in a developmental and growth phase. It has been found that sleep duration exhibits a favorable link with cognitive performance, executive functioning, performance on tasks requiring several cognitive domains, and school performance but not with their intelligence level. In contrast, shorter sleep duration is related with increased internalizing and externalizing behavioral difficulties. This contribution offers a review of the research on sleep functions and the impact on physical and psychological factors in developmental age, especially in adolescence. The contribution will also aim to focus on the effects of sleep deprivation and daytime sleepiness in parents and its consequences with the idea that sleep is a dyadic, triadic, and systemic process that influences the nocturnal and diurnal balances of the entire family, as shown by the existing research on the subject. In fact, as the research reveals, the request for consultation on children's sleep difficulties frequently relies more on the impact of the kid's sleep problems on parents and relatives than on the effect of these on the child. Behavioral and psycho-educational strategies to be followed for healthy teenage sleep hygiene as well as resources and risk factors will also be highlighted.



The moderating role of eating disorders on relationships between psychological distress, problematic use of social media, and hours of sleep among Italian young adults

Tania Moretta¹, Giulia Buodo¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: In recent years, we are facing a worrying increase in psychological distress among youth, however, comorbid factors adversely affecting mental health of young people are not entirely understood. Problematic use of social media (PUSM), sleep problems, and their reciprocal relationships have been linked to several psychological problems in young individuals, including depression and anxiety disorders, however, the moderating effect of eating disorders has yet to be investigated among Italian young adults.

Methods: In the present study, we examined the relationships between psychological distress, PUSM (specifically, problematic use of Instagram), and hours of sleep, as well as the potential moderating effect of symptoms of eating disorders in a sample of Italian young adults. A survey including self-report measures of psychological distress, PUSM, hours of sleep, and eating disorders was administered to a sample of 68 participants. *Results:* Higher levels of psychological distress were associated with fewer hours of sleep and more symptoms of both PUSM and eating disorders. Of note, the link between psychological distress and symptoms of eating disorders was significant only in women. The results also supported a moderating effect of eating disorders on the link between psychological distress with hours of sleep and PUSM. Specifically, higher psychological distress was associated with fewer hours of sleep only in the absence of eating disorders. In contrast, more severe symptoms of psychological distress were associated with higher PUSM only in people with clinically significant symptoms of eating disorders. *Discussion:* These preliminary findings support the idea that the increase in psychological distress among youth might be part of a more general maladaptive stress response. The clinical implications of these findings will be discussed in the context of the Research Domain Criteria framework.



The world in a room: Hikikomori and the effects on sleep

*Giada Rapelli*¹

¹ Department of Medicine and Surgery, University of Parma, Parma, Italy

Abstract

The world's population in recent years, due to the pandemic, has had to cope with sudden changes in social interactions and lifestyle. Recent studies have found an increase in psychological disorders in the last two years, especially in adolescents. Forced confinement at home and distance learning may have favored the massive use of the Internet, social networks, and recourse to gaming, which increase the condition of self-isolation/social withdrawal recently described in the Japanese phenomenon of the Hikikomori teenagers who may spend more than 12 hours a day at the computer using games and social networks. The present contribution aims to photograph the phenomenon of Hikikomori in Italian adolescents on a sample of 1348 adolescents, 750 females and 598 males (age: M= 15.59 years; SD: 2.49; range: 11-18). Finally, it is proposed to study the effects on sleep by comparing adolescents presenting a low risk of social withdrawal (n=245; 20%) with those presenting a high risk of social withdrawal (n=215; 17.7%). The following scales were administered: Hikikomory Risk Inventory-24, Pittsburgh Sleep Quality Index (PSQI). The results show that females have a higher social withdrawal score than males. The gender difference also remains significant for the 4 subscales of social withdrawal (anthropophobia, lethargy, agoraphobia, and depression). This is in contrast to the literature, which sees males more at risk. Comparing adolescents with a low risk of social withdrawal with adolescents with a high risk, the latter present a worse quality of sleep, more disturbed sleep, less efficient sleep, more daytime sleepiness, greater latency to falling asleep, and short sleep duration. Deepening knowledge of the possible behaviors associated with the risk of social withdrawal and isolation could facilitate the design and implementation of psychological interventions aimed at promoting the socio-psycho-physical well-being of young people and limiting the social damage caused by this current problem, which has been growing in recent years in Italy as well.



How do the risk of social withdrawal and problematic gaming negatively affect adolescents' sleep quality? A serial mediation model

Valeria Rega¹, Valentina Boursier¹, Antonio Albano², Christian Franceschini²

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

² Department of Medicine and Surgery, University of Parma, Parma, Italy

Abstract

Playing video games has become one of the most common and rewarding activities for children and adolescents, in which they are involved for many hours a day. Consequently, problematic video game use (PGU) has grown especially among adolescents, leading to several negative consequences for their well-being. Moreover, the phenomenon of social withdrawal (also known by the term hikikomori), which has been associated with PGU, has recently gained increasing interest in the literature also due to the Covid-19 pandemic. Specifically, some studies highlighted significant associations between PGU, anxiety symptoms, social withdrawal, and sleep-related problems. However, studies aimed at exploring the relationship between these variables within a single model were lacking. Thus, the aim of the present study was to investigate the mediating effects of PGU and social withdrawal tendency within the relationship between anxiety and sleep quality. A self-report questionnaire was administered to a sample of 1348 Italian adolescents (55.64% females; $M=15.59$ years; $SD: 2.49$; range: 11-18 years). A serial mediation model and a moderated serial mediation model were tested. Results showed that anxiety symptoms were associated with increased PGU, which in turn was associated with increased risk of social withdrawal, which was associated to worse sleep quality. Moreover, gender and age did not moderate the serial mediation model. In line with the Compensatory Internet Use Theory, these findings highlighted that adolescents tried to manage anxiety symptoms by engaging in PGU. However, this dysfunctional coping strategy may impair adolescents' social life, leading to avoidance of social relationships by withdrawing into the virtual world. Consequently, the association between PGU and the risk of social withdrawal may generate a vicious circle which negatively impacts on adolescents' sleep quality. Since age and gender did not moderate any relationship between the variables involved, this probably means that the phenomenon is widespread in a large proportion of both male and female adolescents. Overall, these results pointed out the importance of designing psychological interventions aimed at promoting more



functional coping strategies in adolescence to prevent PGU and social withdrawal, as well as to avoid negative consequences on their sleep quality in the medium and long term.



Friday, 15th September 2023

MINI TALK SESSION “SAULO SIRIGATTI”

Discussant

Silvia Casale

University of Florence

Can children's and adolescents' psychological symptoms at the onset of Type 1 Diabetes predict glycemic control one year following the diagnosis?

Maria Cusinato¹, Arianna Negri¹, Livia Avagliano²

¹ Department of Women's and Children's Health, Pediatric Diabetes Unit, Azienda Ospedale University of Padua, Padua, Italy

² Department of Developmental Psychology and Socialisation, University of Padua, Padua, Italy

Abstract

Chronic illnesses such as type 1 diabetes (T1D) can exacerbate stress and psychological symptoms in affected children and adolescents. Diabetes onset affects daily routines and implies major changes in family life. Literature shows a higher incidence of psychological disorders in patients with T1D compared to peers without diabetes. The presence of psychological symptoms negatively affects self-care behaviors and adherence to therapy, increasing the risk of suboptimal glycometabolic control. Moreover, diabetes requires high functioning of cognitive skills, in particular of executive functions (EFs), in order to manage daily treatment regimens. The aim of the present study is to observe the correlation between psychological symptoms and cognitive function (EFs) with glycometabolic control in the first year after onset of T1D. Methods: 36 children and adolescents (M=25; F=11, age 9.57 ± 3.84) with T1DM were included in the study. At the onset of T1DM (T0), parents completed the CBCL 6-18 (Child Behavioral Check List) to assess internalizing and externalizing psychological symptoms and the BRIEF2 (Behavior Rating Inventory of Executive Function, Second Edition) to assess executive functions of their children. Medical data about glycometabolic control were assessed with glycemic metrics (HbA1c, Time In Range (80-180 mg/dL) %TIR, Time Above Range (>180 mg/dL) %TAR, Time Below Range (< 70 mg/dl) %TBR), collected at baseline and 1 year after diagnosis (T1). Results: Linear regressions showed negative association between internalizing symptoms at T0 and TIR at T1 ($r=-0.8623$, $p=0.00629$) and positive association with TAR at T1 ($r=0.8511$; $p=0.00874$). Similarly, worse psychological symptoms at T0 were associated to a lower TIR ($r= - 0.7582$; $p=0.0127$) and a higher TAR ($r= 0.7518$; $p= 0.0161$) after one year from T1D onset. Moreover, higher scores in Behaviour Regulation (BRIEF-BRI) and Emotion Regulation (BRIEF-ERI) at T0 were associated with higher HbA1c values ($p= 0.0062$; $p=0.012$). Conclusions: The results of the present study demonstrate that psychological symptoms, in particular anxiety and depression, and emotion regulation difficulties are predictors of worse glycometabolic control



in T1D patients during the first year after diagnosis. These findings suggest the need of early psychological screening and intervention in order to prevent long-term complications.



The role of time attitudes in predicting the outcome of a university counselling intervention

Gaetano Maria Sciabica¹, Costanza Franchini¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Time attitudes refer to positive and negative feelings towards past, present and future, and have been associated with both adaptive and maladaptive psychological functioning of adolescents and young adults. Recent studies have shown that university counselling services act as strategic resources in intercepting student's distress and promoting their health in a key development stage. However, the way in which time attitudes can influence the effectiveness of a counselling intervention is still unclear. *Aim:* The present work aims to investigate whether time attitudes predict the outcome of a psychodynamic counselling intervention in a sample of university students. We hypothesize that higher scores on positive time attitudes (Past Positive, Present Positive, Future Positive) predict a better intervention outcome in terms of well-being, symptoms, functioning and risk. *Methods:* The sample included 50 university students who underwent a psychodynamic counselling intervention at Sapienza University of Rome as of January 2023. They completed Adolescent and Adult Time Inventory -Time Attitudes Scale (AATI-TA) and Clinical Outcome in Routine Evaluation-Outcome Measure (CORE-OM) in four different times: two times before the counselling intervention (T0, T1) and two after the end of it (T2, T3). A regression model was conducted to assess whether positive AATI-TA scores predicted the intervention success in terms of decreasing CORE-OM scores (difference between the sum of scores at T0 and T1 and the sum of scores at T2 and T3). *Results:* Preliminary results shows that higher scores in positive time attitudes at the pre-test predicted a better intervention outcome. Promising results address the influence of time attitudes. Students who reported higher scores in Past Positive, Present Positive and Future Positive dimensions showed more significant improvement in well-being, symptoms, functioning and risk dimensions after the counselling intervention. *Discussion:* Our results support the hypothesis that positive feelings toward time can influence the outcome of a counselling intervention. These findings bring new knowledge on the variables that can impact the outcome of a counselling intervention and may have important implications for the development of focused interventions for university students.



A network analysis of pre-loss grief symptoms, mentalization, attachment styles, and preparedness for death in caregivers of terminally ill cancer patients

Giorgio Veneziani¹, Emanuele Giraldi¹, Virginia Campedelli¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

The onset of cancer radically impacts the patient and the caregiver, who deals with multiple losses during end-of-life caregiving. Previous research found that caregivers of terminally ill cancer patients could experience pre-loss grief symptoms. In this context, attachment styles, mentalization and preparedness for death seemed to influence the emotional and practical aspects of the grieving process. To highlight the psychological variables associated with pre-loss grief and preparedness for death, the present study aimed to investigate, through a network analysis approach, the relationships between pre-loss grief symptoms' severity and the dimensions of attachment style, mentalizing, and preparedness for death. 102 caregivers of terminally ill cancer patients in residential care completed the Attachment Style Questionnaire, the Multidimensional Mentalizing Questionnaire (MMQ), the Prolonged Grief Disorder questionnaire (PG-12), and 3 items assessing the preparedness for death. From the results of the correlation analysis, a network analysis was carried out to visually explore the interrelationships between the variables. The results showed positive correlations between PG-12 symptoms' severity and insecure dimensions of attachment styles and negative correlations with MMQ and preparedness for death. MMQ was positively correlated with preparedness for death. In the network structure, preoccupation with relationships and discomfort with closeness exhibited the strongest associations with PG-12. The dimensions of anxious and avoidant attachment were the most central variables, with the highest influence within the network structure, and most connected to the other network variables. Findings are consistent with past studies, which strongly emphasize that impairments in the grieving process arise primarily from attachment disorders and reflect intense separation distress. The results suggested that mentalization ability and preparedness for death could potentially act as protective factors on the pre-loss grief symptoms' severity. In conclusion, the present study provided insights into the grieving process for palliative care providers to implement the supportive efficacy of the interventions for caregivers.



Self-determined sense of hopelessness in COPD – a Grounded Theory study

*Valentina Poletti*¹

¹ Department of Psychology, Catholic University of the Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: Living with Chronic Obstructive Pulmonary Disease (COPD) is a struggling experience, with a negative impact both on the physical and psychological well-being of those affected. The main aim was to develop a theoretical account of the perception and expectation patterns of COPD patients, considering their severity levels. *Methods:* This Grounded Theory study, conducted at the U.O.C. Cardio Respiratory Rehabilitation Unit of the IRCCS Fondazione Don Carlo Gnocchi in Milan (Italy), involved 20 participants with COPD who underwent semi-structured face-to-face interviews about their experience and expectations of the disease. Interviews were audio-recorded, transcribed, and analyzed using a grounded theory approach. Moreover, a visual tool exploring their symptoms and the Pictorial Representation of Illness and Self-measure (PRISM) were administered. Clinical data have been also considered. Analysis was conducted through NVivo (version 12). *Results:* Theoretical saturation of substantive codes was achieved with 20 interviews [Males=13 (65%)]. The participants' mean age and the forced expiratory volume in 1 second were 68,18 (SD=7,17) years and 66 (SD=6,14) percent of predicted, respectively. The core category was "hopelessness". COPD was perceived as a serious threat to one's daily activities, and interests. The most described symptoms were shortness of breath, sleep disturbances, and fatigue, resulting in depressive symptoms often linked to avoidance and a reduction in the motivation to undertake more challenging activities. In general, patients demonstrated some difficulties to project themselves into the future; negative illness expectations, linked to the sense of responsibility due to cigarette smoking, emerged in most cases, especially in patients with severe COPD. Feeling supported and hopeful about the effectiveness of treatment seems to have a positive influence on patients' coping styles. *Discussion:* This study confirmed how COPD limits patients' quality of life, increasing their general rejection of life. Investigating perceptions of their condition and focusing on their expectations might be useful to introduce personalized therapeutic interventions, where patients are the real experts of their disease.



ADHD and cybercrimes: a case study

Antonia Sorge ¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: It is estimated that approximately 25% of adult prisoners meet the diagnostic criteria for Attention Deficit Hyperactivity Disorder (ADHD). Previous studies have discovered associations between ADHD symptoms and criminal behaviour. Hyperactivity, impulsiveness, limited self-control, intolerance of reward delay, and quick decision making due to lack of deliberation have all been linked to classic criminal behaviour and recidivism. The spread of technology in recent years has resulted in a new type of crime, cybercrime. Recently, psychological research has focused on human characteristics associated to this category of crime, and it was discovered a moderate correlation between cybercrime and overall ADHD symptoms, particularly hyperactivity, attentional and motor impulsivity. People with ADHD might have complex needs, and early intervention is crucial for preventing recidivism. To achieve this, it is recommended a comprehensive diagnostic process. *Methods:* based on these findings and indications, a case study of an Italian cybercrime perpetrator with ADHD symptoms was conducted. The aim was to explore the personality characteristics, cognitive and emotional aspects of the subject in order to outline his profile and compare it with the results of the international literature on the subject. For this purpose, a battery of self-report instruments was administered. *Results:* Results showed that the subject meets the criteria for the diagnosis of ADHD with an imbalance on symptoms linked to aspects of motor and verbal hyperactivity/impulsivity. In addition, high levels of worrying and angry rumination, emotional dysregulation, uncertainty intolerance and mild to moderate anxiety-depressive symptoms emerged. *Discussion:* An in-depth diagnosis process allows for symptom-focused preventive and rehabilitative treatments, which could therefore limit the development of criminal behaviour in people with ADHD and promote their social reintegration.



Effectiveness of a clinical psychological intervention on women's psychophysical well-being after breast reconstruction: a preliminary study

*Virginia Campedelli*¹, *Guido Firmani*²

¹ Department of Dynamic and Clinical Psychology, and Health studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

² Department of Plastic Surgery, Sant'Andrea Hospital, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Mastectomy with breast reconstruction seems to have relevant effects on psychophysical well-being and quality of life in women. These show symptoms such as distress, anxiety, depression, and hopelessness, especially between the preliminary diagnosis and the reconstruction surgery. The psychological and emotional impact concomitant to the treatment pathway can be influenced by the perception of one's body image and aspects related to sexuality. In cancer patients, this psychological distress can be associated with neurophysiological changes, where an acute state of stress can lead to increased cortisol levels and stimulation of the inflammatory response. This psychophysiological interaction appears to play a key role in breast cancer development and therapeutic outcome. The main of this study is to verify the effects of a psychological-clinical intervention supported by the expressive writing technique, on the post-operative course in terms of mental and physical health in patients undergoing post-oncological breast reconstruction. *Methods:* patients undergoing mastectomy surgery with post-oncological breast reconstruction were recruited and be randomly assigned to the following groups: experimental group A (with indications for reconstruction using autologous tissues) and experimental group C (with indications for direct to implant reconstruction) who will carry out the psychological-clinical intervention; control group B (with indications for reconstruction using autologous tissues) and control group D (with indications for direct to implant reconstruction) who will not perform psychological-clinical intervention. All patients completed a psychological assessment at baseline, after the psychological intervention and at 3-month follow-up. Cortisol was determined in a salivary matrix and assessed by POCT. *Results:* it is expected that the group of patients undergoing the psychological-clinical intervention will improve their psychophysical, emotional, and social well-being. *Discussion:* the findings will increase valorisation of the psychophysical well-being of women undergoing post-



oncological breast reconstruction surgery, prompting a model of good practice and inspiration for new proposals for multidisciplinary care from a perspective that takes due account of and integrates body and mind.



Friday, 15th September 2023

MINI TALK SESSIONS 1

Discussant

Francesco Di Maria

University of Palermo

Silvana Grandi

University of Bologna

Adriana Lis

University of Padua



Romantic relationship: the role of alexithymia and adult attachment in dyadic adjustment

Agata Benfante¹, Annunziata Romeo¹, Marialaura Di Tella¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Introduction: The present study aimed to investigate attachment style and alexithymia in a group of individuals who were in a romantic relationship compared to single individuals. Furthermore, it aimed to evaluate if romantic attachment and alexithymia could significantly predict the participants' relationship status and the predictive role of these factors in the dyadic adjustment of individuals in a romantic relationship. *Methods:* To achieve these goals, 596 participants were asked to complete an anonymous online survey, which included the following measures: the Toronto Alexithymia Scale, Experience in Close Relationship Scale and Dyadic Adjustment Scale. *Results:* Results revealed a higher prevalence of alexithymia, attachment avoidance and attachment anxiety in participants who were not in a relationship. Furthermore, age, education, insecure attachment styles, and alexithymia were found to be significant predictors in identifying an individual as being single. Finally, in participants who were in a relationship, having/not having children and avoidance attachment style were found to be significant predictors of dyadic adjustment. *Discussion:* Findings highlight the importance of paying attention to the planning of psychological treatments directed both at individuals who do not have a stable partner to increase their affective and socio-cognitive abilities, and at individuals who are in relationship to work on attachment style.



Parental cancer: emotional and practical concerns of parents facing a cancer diagnosis

Sonia Monique Bramanti¹, Valentina Marino¹, Tommasina Savio¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

About 24% of cancer patients are also parents of minor children, resulting in a unique set of challenges due to their diagnosis and its treatment and their duties as parents. A cancer diagnosis in parents may cause many concerns related to the practical and emotional impact of such diagnosis on their children, as cancer treatment could cause family daily routine disruption and make a parent less available both physically and emotionally (Semple & McCance, 2010). The aims of the present study were twofold: to explore parental emotional and practical concerns of cancer diagnosis among parents who were currently under oncological treatment and parents who were not under treatment; and to explore the role of parents’ socio-demographic characteristics (age, gender and relationship status) and psychological adjustment (anxiety and depression), children’s characteristics (age and gender), and medical characteristics (time since diagnosis and current oncological treatment) on parents’ emotional and practical concerns. The sample comprised 468 parents (mean age = 45.26; SD = 7.74) with a cancer diagnosis and minor children (mean age = 11.93; SD = 5.06). Parents completed questionnaires investigating parental concerns related to their cancer diagnosis, parental anxious and depressive symptoms, and parental stress. Parents who were currently under treatment reported greater emotional ($F = 4.269$; $p < .05$) and practical concerns ($F = 6.483$; $p < .05$) due to the impact of their diagnosis than parents who were not currently under treatment. Hierarchical regression analysis highlighted that child’s age and gender, parental anxiety and parent-child difficult interaction were related to the emotional impact of cancer diagnosis. Child gender, being under treatment, parental anxious and depressive symptoms, and parent-child difficult interaction were related to greater concerns of the practical impact of the diagnosis. Parent-centered interventions, targeting parents under treatment and with greater concerns related to the impact of their diagnosis could be beneficial for both parents and children.



Parental bonding and body image in adolescence: a systematic review

Alessia Cipriano¹, Melissa D'Ettore¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Adolescence is a critical period characterized by physical, emotional, and cognitive changes that may involve body image concerns. Body image is a multifaceted construct that refers to one’s body-related self-perceptions and self-attitudes, including thoughts, beliefs, feelings, and behaviors. Several studies highlighted that individual, social, and family factors influence body image perception, including body dissatisfaction. Parental bonding was associated with different adolescents’ perceptions and attitudes. We synthesized the literature on the association between parental relationship and body image in adolescence, following the 2020 PRISMA guidelines. We carried out a systematic search on Scopus, PubMed, PsycINFO, and Web of Science databases until 24th January 2023. The search produced 1953 records, and after removing duplicates, 20 studies met eligibility criteria and were included in the present systematic review. Of these, 13 were cross-sectional studies, 6 were longitudinal, and only 1 was a case-control study. Results showed significant associations between several dimensions of parental bonding (i.e., care, overprotection, indulgence, attachment, support, warmth, negativity, and rejection) and body image in samples of adolescents. Also, parents-adolescent relationships and some aspects of parental bonding (i.e., care, overprotection, communication, support, and attachment) were significantly associated with body dissatisfaction. Our findings contribute to improving the knowledge about the impact of parental bonding on body image perception in adolescence and related negative outcomes.



The Italian version of the Cooper - Norcross Inventory of Preferences (C-NIP): an easy-to-use, yet psychometrically sound, self-report instrument

*Antonino La Tona*¹

¹ Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy

Abstract

Introduction: There is increasing evidence that psychotherapy efficacy can be enhanced by accommodating clients' preferences regarding their role, the treatment, and the therapist. Several instruments are available to measure these concepts, although only the Cooper-Norcross Inventory of Preferences (C-NIP) appears particularly suitable for psychotherapy. This study aimed to validate the Italian version of the C-NIP and to norm it for both clinical and research use for Italian speaking individuals. *Materials and Methods:* We adopted a multi-step procedure to translate the C-NIP into Italian. Then, 1084 (70.3% females; Mage = 27.22 ± 11 years) Italian adults completed a package of questionnaires. Psychometric properties of the C-NIP were analysed through CFA, McDonald's omega coefficients, mean inter-item correlations, measurement invariance, and Pearson correlations. *Results:* The CFA evidenced adequate fit to the data, and the four C-NIP scales demonstrated fair to good internal consistency. Measurement invariance was confirmed across individuals who were and were not in psychotherapy. C-NIP scores were associated with several sociodemographic variables, although these effects were trivial to small. *Discussion and Conclusions:* Results showed that the C-NIP has satisfactory psychometric properties for its use with Italian adults. More research is needed to investigate how preferences vary over time and in relation to psychopathologies and client characteristics.



Psychology and Psychopathology of Involuntary Celibate: a study on Italian Incels

Giulia Cosi¹, Antonio Pio Facchino¹

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

The term Incel (Involuntary Celibates) refers to heterosexual men who build their identity around their inability to have sexual or romantic relationships. Recent literature on the incel phenomenon has increased and studies show that Incel have more mental health issues, such as feelings of depression and anxiety, than non-incel men. Incel ideologies also present a clear, purely misogynistic vision that can fuel misconceptions about women. Given this, sexism, associated with feelings of depression and anxiety, may be specific factors related to incel personality. This study aims to observe how psycho-sociological variables can be related with “being incel” and to assess the differences between incel and non-incel males in Italy. Was compared a sample of self-identified incels ($n=65$) with non-incels ($n=264$), Italian cisgender men between the ages of 18 and 50 ($M=29.93$, $ds=6.89$) who completed the survey on the online platform “Qualtrics”. Participants were recruited by a link of the survey forwarded on the main social networks. Subjects completed a socio-demographic questionnaire and a series of questionnaire to assess incel characteristics, ambivalent sexism, paranoia, anxiety, and depression. Means and standard deviations were calculated for each variables, then t-test was used to analyze the differences in each variable between the incel and non-incel sample. The results of these analyses revealed that, compared to non-incel, incel men reported more hostile sexism ($ds=18.52$, $p<.05$), while there is no significative difference in benevolent sexism. Incel show higher levels of anxious ($ds=1.62$, $p<.001$) and depression ($ds=1.75$, $p<.001$) symptomatology than non-incel males. The data show that Incels are more paranoid thinking ($ds=9.10$, $p<.001$), are more hypervigilant ($ds=3.45$, $p<.001$), have more persecution mania ($ds=3.9$, $p<.01$) and have more resentment ($ds=3.3$, $p<.001$) than non-incel personalities. The findings suggest that psychological variables as paranoid thinking, higher levels of anxiety and depression, combined with sexism may be partly responsible for the development of incel personality traits. The results also suggest important information about psychopathological aspects of Incel, which may be useful for the development appropriate programs in school to prevent that these vulnerable individuals seek comfort and support online through Incel community.



Neural mechanisms underlying coordination in self and other interaction: the role of borderline personality traits

*Camilla Gregorini*¹

¹ Department of Psychology, University of Milan - Bicocca, Milan, Italy

Abstract

Interpersonal coordination processes rely upon the ability to anticipate and adapt to one another during social interactions. Mutual adaptation strengthens interpersonal synchrony to emerge as a potentially beneficial relational phenomenon. Recent evidences show that the interpersonal impairments and disturbances in self-organization related to Borderline Personality Disorder (BPD) are associated with difficulties in interpersonal coordination. No study focused on the neural mechanisms underlying the association between pathological personality features and interpersonal synchrony. Here we aimed to fill this gap by testing how neural and behavioral mechanisms are modulated during an interaction with a variable adaptive partner and the associations with BPD traits. A synchronized finger-tapping task has been employed while measuring EEG from participants ($N = 50$) who will interact with a virtual partner (VP) in the “other” conditions varying a degree of adaptivity or with no interaction partner in the “self” conditions. Then the perception of synchrony and cooperation was rated after each interaction. After the task, BPD traits were assessed through self-reports. At the neural level, we found mu suppression (potentially suggesting mirror neurons activity), as reflected in the amplitude suppression of alpha-frequency bands (8–13 Hz) during the interaction over the sensorimotor area. The cluster-based permutation t-test for dependent samples revealed three significant positive clusters suggesting differences in the power between self and other conditions. In association with BPD traits, we found a main linear effect on the amplitude of the suppression of the mu rhythm mean of the power and a significant moderation in the self condition. Specifically, the decrease of alpha power seems to be more attenuated in individuals with more BPD traits. At the behavioral level, an overall reduced asynchrony was shown at increasing the level of the VP adaptivity and a lower variability when the VP was well adaptive. A lower perception of synchrony and cooperation was reported as VP adaptivity increased. These results suggest that during social interaction others’ action-integration and action-perception processes emerge and such neural activity might be less efficient in individuals with BPD traits. Furthermore, clinical implications will be outlined.



When the others are dangerous: Disentangling the role of paranoid presentations in personality pathology

*Erika Fanti*¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: According to recent theories, personality pathology is mainly mirrored by persistent distortion and dysregulation in interpersonal processes. Consistently, paranoia is a crucial transdiagnostic feature of several Personality Disorders (PDs), to the point that recent diagnostic developments have questioned its discriminant validity. However, there is a paucity of studies investigating paranoid presentations in personality pathology, with inconsistent findings. *Methods:* The present study involved a nonclinical sample of 270 individuals with a mean age of 36.1 years (SD = 14.5, range = 18 – 65). Participants completed measures of pathological personality traits, paranoid dimensions, and impairment in the Self- and Interpersonal functioning. *Results:* Findings showed that Paranoid and Schizotypal PD traits uniquely contributed to a wide range of paranoid presentations. Conversely, other PD traits showed little evidence of significant association with paranoid presentations. Furthermore, ideas of reference partially explained the relationship between Paranoid PD traits and Self-impairment. Similarly, paranoia's cognitive component partially explained the association between Paranoid PD traits and Interpersonal impairment and the link between Schizotypal PD traits and Interpersonal impairment. *Discussion:* The present contribution provides evidence that individuals high in Paranoid and Schizotypal PD traits manifest a broad range of paranoid presentations, and that ideas of reference and paranoia's cognitive component play a relevant role in the impairment of their Self- and Interpersonal functioning.



Multidisciplinary perspective in medical genetics: clinical case report of 20-year-old man with Brugata Syndrome

*Eleonora Cilli*¹

¹ Department of Life Health and Environmental Sciences; University of L'Aquila, L'Aquila, Italy

Abstract

Introduction: Brugata Syndrome (BrS) is characterized by cardiac conduction abnormalities (segment abnormalities on EKG and high risk for ventricular arrhythmias) that can result in sudden cardiac death (SCD). The mean age of SCD is approximately 40 years. The management of BrS involves the Implantable Cardioverter Defibrillator (ICD) in individual with a history of syncope or SCD. As a genetic counseling is necessary: a molecular diagnosis can be identified of a heterozygous pathogenic variant in SCN5A. Treatment of asymptomatic individuals is controversial. The aim of the study is to evaluate the impact of genetic diagnosis and the role of the clinical psychologist in the field of medical genetics. *Methods:* We conducted clinical case study: 20-year-old man with BrS and ICD implantation, was evaluated by psychological tests (anxiety, depression, stress, degree of dysphoria, personality traits and cognitive reserve) pre-genetic counseling (T0) and post genetic results disclosure (T1). *Results:* The results showed the importance of psychological screening of BrS patients to discuss concerns about the management of the disease and of increased risk, and to improve the Quality of Life of patients. *Discussion:* The implementations of clinical psychology assessment and treatments into an integrated and multidisciplinary therapeutic perspective could enhance the Well-being of patients undergoing genetic counselling and testing.



Psychological treatment of overweight and obese patients not eligible for bariatric surgery: identification of treatment's drop-out predictors using machine learning models

Eleonora Ricci¹, Serena Marchitelli²

¹ Department of Neuroscience, Imaging and Clinical Sciences, University "G. d'Annunzio" of Chieti-Pescara, Chieti-Pescara, Italy

² Complex Operative Unit of Endocrinology, Metabolic Diseases, Andrology - CASCO (Center for Highly Specialized Care of Obesity), Hospital Policlinico Umberto I, Sapienza University of Rome, Rome, Italy

Abstract

Bariatric surgery has proven to be an effective treatment for obesity. According to Italian Society of Surgery of Obesity and Metabolic Diseases and to the United States National Institute of Health guidelines, however, candidates with psychiatric diagnosis/psychological disorders couldn't be addressed to surgery; rather, they are recommended to follow a nutritional approach in combination with a psychological treatment. However, drop-out rates are quite high. The current longitudinal study aims at investigating the predictors of drop-out from the psychotherapeutic treatment of patients not eligible for bariatric surgery. Among 182 patients not eligible for surgery, ninety-four patients were enrolled at the University Hospital Policlinico Umberto I of Rome. They initially (T0) completed a battery of self-report measures comprised of: the Symptom Checklist-90—Revisited, the Barratt Impulsiveness Scale-11, the Binge-Eating Scale, the Obesity-Related Well-Being Questionnaire-97, and the Minnesota Multiphasic Personality Inventory-2. Then, twelve sessions of a brief psychodynamic psychotherapy were delivered, following which participants completed the follow-up evaluation (T1). Two groups of patients were identified: the first group (n=65) had fully completed the assessment in both T0 and T1; the second (n=29) had fulfilled the assessment at T0 but did not complete the follow-up assessment at T1. Machine learning (ML) models were implemented to investigate which demographic and psychological factors were most associated with treatment failure. The classification tree model made it possible to identify patients who were dropping out of treatment with an accuracy of about 80%, considering two variables: MMPI-2 Correction (K) scale, and SCL-90-R Phobic Anxiety (PHOB). Given the limited number of studies on this topic, the present results highlight the importance of considering the patient's level of



adaptation and the social context in which he or she is integrated in treatment planning. Cautionary notes, implications and future directions are discussed.



Psycho-cultural determinants of flight attitudes in a sample of aviation pilots

Federica Luciani¹, Giulia Rocchi¹, Giulia Fiorentino¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Aviation psychology is a field of study concerned with the investigation of psychological factors that could influence flight performance. Previous research has shown that risk propensity is linked to imprudent behavior during flight, and self-confidence is associated with safe flying behaviors. Nevertheless, the impact of cultural context on flight performance has yet to be thoroughly examined. The aim of this study was to explore the influence of symbolic universes (i.e., generalized worldviews) on pilots' attitudes towards flight within the framework of Semiotic Cultural Psychology Theory (SCPT). To this end, 135 pilots completed an online survey consisting of an ad hoc questionnaire for sociodemographic and work-related information, and self-report questionnaires mapping symbolic universes and detecting attitudes towards flight, coping style and emotional dysregulation. Findings are consistent with the hypothesis that symbolic universes play a crucial role in flight attitudes among pilots. Despite the specificity of the results, the study highlights the need to consider the influence of specific worldviews on pilots' attitudes in flight.



The Role of Empathy in the phenomenon of Victim-blaming towards female survivors of Intimate Partner Violence

Federica Taccini^{1,2}

¹ Centre for Intervention and Research on Family (CIRF) - Department of Philosophy, Sociology, Education, and Applied Psychology, Section of Applied Psychology, University of Padua, Padua, Italy

² Department of Developmental Psychology and Socialisation, University of Padua, Padua, Italy

Abstract

Intimate partner violence (IPV) refers to any behavior or conduct perpetrated by a person against a partner that causes physical, psychological, or sexual harm. Approximately 23–31% of women (15–49 years) worldwide experience physical or sexual violence by a partner at least once in their life. In addition to that, female IPV survivors can experience another kind of victimisation: public stigma – which refers to public reactions to a particular group based on its stigma and is intertwined with stereotypes, prejudices, and discrimination. One of the main components of stigma towards female survivors of IPV is victim-blame – which refers to the tendency to blame and held responsible survivors for their experiences of victimisation. Despite its relevance, this phenomenon is highly under-investigated in the Italian population. Consequently, the present work aims to reach a better understanding of victim-blaming attitudes towards IPV survivors. To this end, a cross-sectional study is conducted. Data are collected from 800 participants ($M_{age} = 43.17$; $SD = 13.26$) throughout Italy. A mediation analysis is performed. The results show a predictive role for the lack of empathy in victim-blaming attitudes. Moreover, the tendency to excuse the perpetrator for the violence he has exerted and the acceptability of violence in intimate relationships seem to mediate between lack of empathy and victim-blaming attitudes. These results show that considering violence acceptable in a romantic relationship influences how individuals interpret conflicts, thus increasing the likelihood of engaging in violent behaviours and the tendency to justify the use of violence. Taking into consideration these results, it is possible to conclude that anti-stigma interventions should target empathy and conflict management in intimate relationships.



The serial mediating effect of FoMO and ghosting in the relation between loneliness and problematic Social Media use

*Francesca Gioia*¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

In recent years, social media have become dramatically prevalent in modern society, especially among young adults, leading to increasing interest in psychosocial problems and social issues related to problematic social media use (PSMU). In this regard, previous findings largely confirmed the direct and indirect association among experiences of loneliness, Fear of Missing Out (FoMO), and PSMU. Only recently, social media research explored ghosting as an emerging online phenomenon. The aim of the current study was to specifically question the direct and indirect effects of perceived feelings of loneliness on PSMU, testing the serial mediating effect of FoMO and being a victim of ghosting. A total of 202 young adults (78% females; mean age=24.26; SD=3.66) have been involved. Participants' experiences of loneliness did not directly predict the PSMU, whereas the serial mediation effect of FoMO and being a victim of ghosting between loneliness and PSMU was significant (indirect effect = 0.02; 95% CI: [0.0010, 0.0498]). The total model accounted for a good amount of variance in participants' PSMU [$R^2 = 0.31$; $F(4, 196) = 21.99$, $p < 0.001$]. The current study highlights a possible pathway through FoMO and ghosting which enhances the negative effects of perceived loneliness on the PSMU among young adults.



Eyes never lie: detecting concealed sexual preferences using the eye-tracking technology

*Francesca Bosco*¹

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

Abstract

Research on sexual preferences, interests, and behaviours is exposed to systematic bias and distortions when evaluated through self-report measures. Indeed, individuals might respond, deliberately or not, in a way that conforms to social standards. This is particularly true in forensic contexts, where concealing deviant sexual preferences or interests might be convenient. For example, convicted pedophiles might try to conceal their real sexual interests, making it difficult to evaluate whether their paedophilic tendencies are still present; thus, developing a way to indirectly detect these interests might be helpful in preventing recidivism. For this purpose, measuring respondents' behavioural indicators (e.g., eye-movements, mouse kinematics) could be useful since they are harder to intentionally manipulate. Indeed, literature highlighted a connection between eye movements and sexual preferences, although the topic is still under-researched. The present study, using a simulation design, aimed to assess whether eye movement patterns and mouse kinematic indicators are effective in identifying sexual preferences, and whether they could be used as indicators to distinguish between honest individuals and those who try to conceal or distort their sexual preferences. Participants ($n = 120$), aged between 18-35 years, were recruited and randomly assigned to two experimental groups: in the first group, participants completed the experimental task first in an honest manner and then with the instruction to conceal their real sexual preference (faking condition); in the second group, participants completed the experimental task first in the faking condition and then honestly. The experimental task included looking at 12 stimuli, each representing 2 persons placed at the opposite sides of the screen, and then answering a question to indicate which person they found more attractive and sexually desirable. Their eye and mouse movements were recorded with a designated software. Findings in this exploratory study may provide new insights regarding the effectiveness of indirect indicators for assessing sexual preferences, especially useful in forensic contexts, guiding future research in the field.



The Unified Protocol for Transdiagnostic Treatment of Emotional Disorders in Psychiatric Acute Settings: A Pilot Study

Giulia Gialdi^{1,2}, *Linda Boscaro*^{1,2}

¹ School of Psychology, Vita-Salute San Raffaele University of Milan, Milan, Italy

² Clinical Psychology and Psychotherapy Unit, San Raffaele Turro Hospital, Milan, Italy

Abstract

Introduction: The Unified Protocol for Transdiagnostic Treatment of Emotional Disorders (UP) is a manualized, evidence-based, emotion-focused cognitive behavioral intervention developed to treat a range of psychiatric disorders with common underlying characteristics. Specifically, neuroticism and resulting emotion dysregulation represent the main treatment target. The standard UP consists in eight treatment modules to be completed in 16 weeks, and previous data showed its efficacy in reducing symptoms of emotional disorders in randomized controlled trials. However, there are some clinical settings (e.g., acute settings) in which it is unfeasible to consider a 4-month time period, whereas it could be useful to address the predisposition to experience psychological distress and negative mood states (i.e., underlying neuroticism). Against this background, an adaptation of the UP as a component of treatment in an acute care setting has been developed. The aim of this study is threefold: (a) present the modification of the UP for acute settings; (b) evaluate the acceptability of this brief intervention in a hospitalized context, and (c) providing initial data as to its efficacy in reducing symptoms of anxiety and depression as compared to the standard UP treatment. *Methods:* The sample included 15 consecutively admitted female inpatients, who were enrolled in the acute-setting UP. Before starting the UP sessions, participants were administered measures of neuroticism to assess their level of negative affectivity. Moreover, daily monitoring measures including the Italian translation of the Overall Anxiety Severity and Impairment Scale (OASIS), Overall Depression Severity and Impairment Scale (ODSIS), Positive Emotions Scale and Other Emotions Scale were completed by each participant. At discharge, participants were asked to rate the perceived usefulness of the UP sessions. *Results:* The results of the present study provided initial data supporting the usefulness of a brief version of the UP for inpatients, at least in managing anxiousness and depressive symptoms. Notably, subjective perception of the adequacy of the intervention was high (» 4 out of 5). *Discussion:* As a whole, this preliminary study seemed to suggest that a brief and daily version of the UP for inpatient psychiatric settings might be helpful in routine clinical management.



Assessment of alexithymia in patients with chronic illness: a comparison between the self-report 20-item Toronto Alexithymia Scale and the Informant Form

*Martina Camelio*¹, *Luigia Zito*²

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: The self-report Toronto Alexithymia Scale-20 (TAS-20) is considered the gold standard of the assessment of alexithymia. A recognized limitation of TAS-20 is the lack of ability of alexithymic individuals in identifying and describing their own feelings, a sort of assessment paradox. To address this issue the Informant Form of TAS-20 (TAS-20-IF) has been proposed. The aim of this pilot study is to compare the TAS-20 with TAS-20-IF in patients with chronic illness. *Methods:* Sixty-four patients (n=46 with obesity and n=18 with chronic pain) completed the TAS-20 and their informants (N=64) completed the TAS-20-IF. *Results:* Multiple significant correlations in the moderate-to-high range ($r > .30$) were found between the two versions, except for the EOT subscale. No statistically significant differences between the TAS-20 and the TAS-20-IF were found in total scores and their subscales. Only scores of items 13 ($t=2.23$, $p=.02$) and 19 ($t=1.98$, $p=.05$) were significantly greater in TAS-20 than TAS-20-IF whereas the opposite results were found for items 12 ($t=3.45$, $p=.001$) and 18 ($t=2.01$, $p=.04$). *Conclusions:* In this study, except for four items (two of which within the EOT factor), no significant differences were found between TAS-20 and TAS-20-IF. Further research with larger samples is needed.



Alexithymia and cognitive impairment

Giulia Marselli¹, Ilaria Corbo¹, Francesca Agostini¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

The term “alexithymia” describes a psychic condition characterized by difficulties in verbalizing affect and elaborating fantasies. Some studies have demonstrated that age is strongly associated with alexithymia. However, the degree to which alexithymia relates to cognitive deficits in patients with conditions such as mild cognitive impairment (MCI) is unknown. Therefore, our study examined the degree to which alexithymia is greater in MCI compared to healthy older adults (HC) and also the correlations between alexithymia and cognition. Two hundred thirty-eight adults (mean age: 60.5 years; SD: 7.5; age range: 50-88) participated in the study: 131 were HC, while 53 had amnesic MCI (aMCI) and 54 non-amnesic MCI (naMCI). A comprehensive neuropsychological assessment was used to assess cognition, while alexithymia was measured with the Toronto Alexithymia Scale (TAS-20). ANOVAs showed significant differences in the TAS-20 score ($F=6.96$, $p<.001$, $\eta^2p=0.06$), according to the Group. Indeed, aMCI had a significantly higher total score (mean: 46.7; SD: 13.6) than both naMCI (mean: 39.2; SD: 9.6) and HC (mean: 40.2; SD: 11.9). Moreover, TAS-20 score was negatively correlated with general cognition, attention, memory, language, visuospatial abilities, and executive functioning. The present study suggests that a cognitive decline may be linked to the inability to identify and describe feelings and, above all, fantasize in older adults suffering from amnesic mild cognitive impairment. This may be an important aspect to consider when planning treatments for patients with MCI. Indeed, targeting alexithymic facets may be a useful way to prevent or reduce the rate of cognitive decline.



Preliminary psychometric properties of the Italian Hogg Eco-Anxiety Scale

Giulia Rocchi¹, Jessica Pileri¹, Federica Luciani¹

¹ Department of Dynamic, Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Eco-anxiety known as: “the chronic fear of environmental doom” is one of the global challenges to sustain the physical and psychological health of people increasingly exposed to the effects of climate change. Italy has been identified by the Intergovernmental Panel on Climate Change as one of the most responsive countries to climate change effects so research on eco-anxiety is increasingly needed. The current study aimed to assess the preliminary psychometric properties of the Italian version of the Hogg Eco-Anxiety Scale (HEAS) a self-report questionnaire that ask the subject to reflect on how often they have experienced eco-anxiety symptoms (Affective symptoms, rumination, behavioural symptoms and anxiety about one's negative impact on the planet) in the past two weeks. We collected the responses from 335 Italians through an online survey containing the Climate Change Anxiety Scale (CCAS), the New Ecological Paradigm Scale-Revised (NEP-R) and self-reported pro-environmental behaviour (PEBs). Different internal structures of the HEAS were compared by means of confirmatory factor analysis, and the four-factor model met the best criteria for goodness of fit. Preliminary analyses highlight good internal consistency for all four subscales of the HEAS making it an adequate instrument for the assessment of eco-anxiety in the Italian population and for enriching research on the topic. Dimensions of the Italian version of HEAS showed significant positive and large correlations with CCAS dimensions, proving a good convergent validity and significant and positive correlations between other relevant constructs (NEP-R and PEBs) were theoretically coherent and prove that eco-anxiety dimensions shape attitudes and beliefs about the environment and vice versa. People with greater levels of eco-anxiety, especially behavioural symptoms and anxiety about their personal impact showed positive correlations with pro-environmental behaviors that are often seen as a coping strategy for eco-anxiety. Our findings contribute to the identification of eco-anxiety manifestations in the Italian context suggesting as directions for further investigation on the topic.



The Predictive Role of Cognitive Reserve in Executive Functioning: An Overview from Adulthood to Aging

Ilaria Corbo¹, Giovanna Troisi¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Cognitive reserve (CR) is the ability to compensate the age-related decline. Different studies have examined the role of CR in aging, from the perspective of protection against pathological aging. The purpose of this study is to examine how CR (schooling, working and leisure time) differs by age and how this could predict good executive functioning. A total of 245 participants (60.4 ± 7.5 years) were selected and divided by age. After anamnestic data collection, participants were interviewed to assess CR (Cognitive Reserve Index, CRI); then working memory (WM), phonemic fluency (PF) and inhibitory control were assessed. Regression analyses revealed that TMT B ($R^2 = 0.19$; $p = <0.001$) was predicted by age, schooling, working and leisure time; TMT B-A ($R^2 = 0.21$; $p = <0.001$) was predicted by age, schooling and working; PF ($R^2 = 0.20$; $p = <0.001$) was predicted by age, schooling and leisure time; and WM ($R^2 = 0.09$; $p = <0.001$) by age, schooling and working. In addition, ANCOVA analyses highlighted that WM is the function most influenced by CRI. Different predictive patterns may be observed in adulthood and aging. These findings could be useful for interventions to improve CR across the lifespan to strengthen executive functions crucial for daily independence.



Technological addictions and dissociation: A Systematic Review

*Alessia Musicò*¹

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

Abstract

Introduction: Over the past few years, a growing number of psychodynamic-oriented studies have emphasised the importance of considering dissociative phenomena when discussing technological addiction. According to this perspective, modern technology fosters the possibility to distance oneself from one's own embodied awareness, allowing the alteration of embodied states and helping the self to feel timeless and bodiless. In other words, technology allows people to enter an alternative world to physical reality, where it is possible to temporarily abandon the constraints of one's physical body, and this body-mind dissociation protects the self from being overwhelmed by emotions and feelings. Despite this evidence, the association between dissociative phenomena and technological addiction has not yet been systematised in literature. Therefore, the aim of the present study is to fill this gap by providing a systematic literature review aimed at summarising the empirical evidence on the association between dissociation and technological addiction such as Internet Gaming Disorder (IGD), Problematic Social Networking Sites Use (PSNSU), Problematic Smartphone Use (PSU), and Problematic Internet Use (PIU). *Methods:* Following the updated 2020 PRISMA guidelines, a systematic search in three electronic scientific databases (PubMed, PsycInfo, and Scopus) was conducted. After removing duplicates, 1553 records were double-screened, with 21 articles meeting the inclusion criteria. Additionally, by means of a backward search a further 3 articles were identified. Altogether, 24 articles were selected for the present systematic review. *Results:* The results underline the significant association between dissociative phenomena and technological addiction, both generic (PIU) and specific (IGD, PSU, and PSNSU). However, it should be emphasised that most studies have focused on PIU and IGD, while less attention has been paid to PSU and PSNSU. *Discussion:* Overall, the results are in line with recent psychodynamic theories suggesting that dissociative modes may be a maladaptive attempt to manage feelings and emotions that are difficult to integrate, and that technology favors this process. However, longitudinal studies are needed to better understand the link between technological addiction and dissociative phenomena.



Dissociative experiences and self concept clarity in students with and without behavioural addictions

Alessia Musicò¹, Simon Gbinassi¹

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

Abstract

Introduction: In recent years, there has been an increase in behavioral addictions – especially those related to the use of technology – among high school and university students. This topic deserves attention because addictive behaviors are known to be associated with increased stress and decreased academic performance. A considerable amount of evidence associates behavioral addictions with health problems such as stress, anxiety, depression, and other psychiatric symptoms, suggesting the importance of investigating comorbidity with other clinical disorder. Among them, a strand of psychodynamic research has raised the possibility that interaction with technologies can lead to clinical manifestations of the dissociative type. For this reason, this study aims to investigate whether high school and university students with at least a behavioral addiction (i.e., Problematic Social Network Use, Internet Gaming Disorder, and Gambling) report greater Body Dissociation (BD), Maladaptive Daydreaming (MD), and less Self-Clarity (SC) compared to students without behavioral addictions. *Methods:* A convenience sample of 571 high school and university students (28.9% Males; Mage = 19.1 ± 3.06 years) was recruited for the present study. For the aims of the study a series of univariate analyses of variance (ANOVAs) were conducted. *Results:* The results showed that 130 participants (22.77%) exceeded the cut-off for at least one behavioral addiction. Moreover, the results of the ANOVAs revealed significant differences in most of the variables investigated. Specifically, students with at least one behavioral addiction reported higher scores on the MD ($F(1,571) = 40.9, p < 0.001, \eta^2 = 0.07$) and BD ($F(1,571) = 20.6; \eta^2 = 0.04$), and lower scores on SC ($F(1,571) = 29.5, p < 0.001, \eta^2 = 0.05$). *Discussion:* Overall, these findings point in the direction of psychodynamic hypotheses that propose that high engagement in certain behaviors involving the use of technology may be a dissociative modality and that dysregulated use may be due to the fact that interaction with certain tools fosters detachment from the self. Furthermore, the results highlight the high prevalence of risk behaviors related to dysregulated use of technology among adolescents and young adults and underline the importance of implementing prevention interventions targeted at this at-risk age group.



Pretend play in children: comparison between clinical and community-based samples

Maria Mirandi¹, Luciana Pagano Salmi¹

¹ Department of Philosophy, Social, Human and Education Sciences, University of Perugia, Perugia, Italy

Abstract

Pretend play is a meaningful activity that promotes children's affective and cognitive development and improves their psychological adjustment. This study aimed to compare through the Affect in Play Scale Preschool Version (APS-P) children's cognitive and affective abilities between children with anxiety disorder (AD), oppositional defiant disorder (ODD), and from a community-based sample (CB). Cognitive abilities were investigated through four categories: organization, processing, imagination, and comfort, while affective abilities were divided in total, positive, and negative categories. Negative affects include aggression, oral aggression, anxiety, frustration, and sadness, whereas positive ones include affection, competition, happiness, orality, and sexuality. The APS-P was administered to 50 children, 10 with AD (20%), 10 with ODD (20%), and 30 CB children (60%) ($M=8.06\pm 1.45$; 54% female). Findings from the Kruskal-Wallis test showed differences among the three groups in the cognitive category of the organization ($\chi^2=7.25$, $p<.05$), imagination ($\chi^2=7.04$, $p<.05$), and positive ($\chi^2=17.17$, $p<.001$) and negative ($\chi^2=7.25$, $p<.05$) affective, specifically regarding oral aggression ($\chi^2=10.48$, $p<.01$), sadness ($\chi^2=8.50$, $p<.05$), affection ($\chi^2=8.19$, $p<.05$), happiness ($\chi^2=17.17$, $p<.001$), and orality ($\chi^2=17.17$, $p<.001$). The comparison between the clinical groups and CB group showed differences compared to children with ODD in organization ($U=13.63$; $p<.05$), imagination ($U=12.27$; $p<.05$) and in total positive affectivity ($U=21.03$; $p<.001$), specifically in the categories of affection ($U=14.57$; $p<.05$), happiness ($U=18.56$; $p<.001$) and orality ($U=15.78$; $p<.001$), they were higher than in the ODD group. In contrast, negative affective category ($U=18.83$; $p<.001$) and specifically oral aggression ($U=14.83$; $p<.01$) were higher in the ODD group than in the control group. Mann-Whitney tests showed the children with AD report a total higher positive affect ($U=22.15$; $p<.01$), specifically in the orality category ($U=14.25$; $p<.001$) than the CB group. These results show that APS-P allows the clinician to have more accurate information on affectivity and cognitive abilities, not only for assessments but above all for intervention planning.



The MMPI-A and the MMPI-A-RF in legal setting: a systematic review

*Silvia Biondi*¹

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

Abstract

The Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A) is the most common structured personality inventory for adolescents, widely used in cases of foster care and adoption, in criminal matters, in ascertaining the requirements for testimony, in assessing damage, and in the formulation of rehabilitation projects. A valuable alternative to the MMPI-A is provided by its Restructured Form (MMPI-A-RF), which represents one of the most up-to-date, empirically based personality assessment for adolescents, and it is pertinent for the assessment in both clinical and forensic contexts. Following PRISMA guidelines, a systematic review on the use of MMPI-A and MMPI-A-RF in legal and forensic settings was performed, seeking to assist professionals in their work and guide judges on their admissibility as a source of evidence when the quality standards to be met by psychological tests are not clearly defined. We identified 839 potentially eligible studies from 1786 records obtained from four database searches (i.e., Web of Science, SCOPUS, PubMed, Ebsco). After the screening, 31 articles were included for the qualitative synthesis. Of these, 30 contributions were on the MMPI-A and, in particular, about (a) the general and psychometric characteristics of the test, (b) empirical data from specific populations and the comparison between forensic and non-forensic samples, along with (c) between perpetrators of different types of offenses, (d) its use in trauma evaluation, (e) the assessment of the risk of reoffending, and (f) comparison with other tests. Only one study has emerged concerning the use of the MMPI-A-RF in the forensic context, with the aim of creating and validating scales assessing the triarchic model of psychopathy. These results appear to be of great importance and clinical significance, both from a prevention – being able to provide information on which personality characteristics emerge as risk factors for specific types of offenses – and a treatment point of view – making explicit the different characteristics among offenders of different types of offenses, thus facilitating the choice of a more suitable treatment.



Somatic symptoms and distress in women with thyroid disease: The role of alexithymia

Sonia Di Benedetto¹, Maria Di Nardo¹

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: Research have supported evidence that thyroid dysfunction is associated with psychosomatic disorders and mental illness in adult population. The present study aims to identify associations between the mental health outcomes of subjects with thyroid disease and their psychosomatic correlates. *Methods:* A cross-sectional study was conducted on 583 women aged 18-70 years ($M = 44.05$, $SD = 10.35$), with acute and chronic thyroid diseases. Participants were recruited through social platforms (mainly the Facebook platform) in social support groups for patients with thyroid disease. Alexithymia, health anxiety, somatic concerns, symptoms of anxiety and depression, and stress perception were evaluated through standardized questionnaires (TAS-20, WI-7, PHQ-15, HADS, and PSS). *Results:* According to the alexithymia threshold, 304 patients (52.1%) were classified as having no alexithymia and 279 (47.9%) as having alexithymia. T-test reveal significant differences in psychological variables between participants with high levels of alexithymia and those with low levels of alexithymia. Comparisons with the three cut-off points of TAS-20 (non-alexithymia, possible alexithymia, and alexithymia) confirmed the same trend of results. *Conclusion:* Alexithymia in patients suffering from thyroid diseases may constitute a risk factor for the development of health anxiety, somatic concerns, experiences of anxiety and depression and greater perceived stress.



Friday, 15th September 2023

MINI TALK SESSION 2

Discussant

Lorys Castelli

University of Turin

Nino Dazzi

Catholic University of Sacred Heart of Milan

Rosapia Lauro Grotto

University of Florence

Paolo Valerio

University of Naples Federico II



Impact of a psychoeducation and DBT skills training group intervention on correctional officers

*Antonia Sorge*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: It is widely recognised that correctional officers are exposed to violence (which can be either between inmates or directed at them), injury, and critical incidents in addition to daily work stressors. The high prevalence of PTSD, depression, and anxiety as compared to other occupational groups and the general population emphasises the severity of the repercussions. Recognising the importance and extent of workplace adversity has led to greater research into the mental health of COs in prison settings, with a number of stressors identified. Besides individual-level factors, low levels of perceived organisational support, low job satisfaction, low societal valuing of the jobs these officers undertake, and interfacing with a complex population all add up to the negative physical prison environment conditions. The literature clearly indicates the need for interventions that can increase psychological well-being.

Methods: The current study will assess the efficacy of a group training intervention in reducing psychological distress in correctional officers in an Italian prison. Starting from two focus groups, the main psychological needs of a group of COs (n = 20) were identified. Then, a group intervention of ten meetings was proposed to them, wherein participation was voluntary. Each meeting included psychoeducation and DBT skills training. To evaluate the outcome and process of the intervention, a multi-method analysis was performed.

Results: A qualitative study of the content of the focus groups and meetings resulted in the identification of recurring themes and an assessment of the group's dynamic evolution. Self-report questionnaires were distributed at the start and end of the intervention to assess the result and identify changes in perceived stress. The findings will be thoroughly discussed at the conference.

Discussion: Investigating the effectiveness of interventions that mitigate the psychological distress of correctional officers is required in order to improve the proposal of a treatment strategy in which the organisation can invest resources.



**Beauty therapy as an emotional labor to support psychosocial recovery from oncological care:
The lived experience of breast cancer patients undergoing chemotherapy**

*Denise Vagnini*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: Breast cancer (BC) patients are faced with hair loss, weakening and color change of nails, skin dryness, and scars during their oncological care trajectory. Despite advances in therapies and the many implications of chemotherapy, appearance-related side effects remain difficult to resolve and are among the main reasons for psychosocial impairment. Treatment-induced changes have been linked to a decrease in overall quality of life and relational and sexual difficulties that negatively affect adherence to therapies, pointing toward the need for dedicated attention and adequate interventions. In the framework of clinical management of BC disease, beauty therapy represents a low-cost and easy-to-implement intervention. Recent studies have highlighted its beneficial effect on the reduction of cancer-related fatigue and a range of other psychological outcomes, including body dissatisfaction. However, the literature is lacking and further research is needed. The aim of the present study is to understand the lived experience and emotional feelings of BC patients in chemotherapy at the end of a brief beauty therapy intervention of two sessions with certified beauticians. *Methods:* This qualitative study was conducted following the principles of Interpretative Phenomenological Analysis, an inductive idiographic approach characterized by an in-depth analysis of how people experience life events. Ten BC women in chemotherapy were purposefully recruited at a public hospital in northern Italy, where the beauty therapy was implemented. Data were collected through a semi-structured interview with open-ended questions administered individually at the end of the second session of beauty therapy in a quiet room at the hospital. The topic areas were: experience with BC; emotions related to beauty therapy; challenges, obstacles, and resources. A thematic analysis was performed on verbatim transcriptions. The Ethics Commission of the involved institution approved the study. *Results:* Findings support the proposal of beauty therapy for BC patients undergoing chemotherapy and will be discussed in the congress context. *Discussion:* Adopting a relational perspective, beauty therapy as an emotional labor may be useful to improve patients' psychosocial health and the way they feel with others, even if they do not declare a specific interest in their outward appearance.



Exploring the role of symbolic universes in shaping wildfire risk perception and prevention behaviors. A preliminary study

Matteo Rebo¹, Chiara Ciacchella¹, Skaiste Kerušauskaitė¹

¹ Department of Dynamic, Clinical and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Wildfires pose a significant threat to ecosystems, economies, and public health, and the problem is worsening due to the effects of climate change. In turn, wildfires contribute to climate change by emitting CO₂, creating a dangerous and self-perpetuating cycle. To address this issue, a paradigm shift is necessary from a reactive suppression approach to a proactive prevention strategy. Community engagement is a key component of effective prevention, and understanding how people perceive wildfire risk is essential to promote prevention activities. Despite the importance of risk perception, little research has explored how people's cultural worldviews shape their perceptions of wildfire risk and related prevention behaviors. Adopting the perspective of Semiotic-Cultural Psychology theory (SCPT), this preliminary study investigates the relationship between symbolic universes (i.e., cultural worldviews) and the link between risk perception and firewise activities. Using a questionnaire-based survey, responses were collected from 107 Italian participants on their perception of wildfire risk, prevention actions, and symbolic universes. The results show that two out of three symbolic universes moderated the relationship between risk perception and firewise activities, indicating that people's meaning-making is an important factor to consider when promoting preventive practices. The findings also highlight the importance of adopting a holistic approach to wildfire prevention that accounts for the cultural factors that influence risk perception and prevention behaviors. Moreover, it contributes to the literature on risk perception and wildfire prevention, as well as to the literature on the role of symbolic universes in shaping people's behavior. By taking into account people's meaning-making processes, policymakers and practitioners can develop targeted interventions that are more effective in promoting prevention activities.



The mediating role of personality characteristics on music listening and well-being: a systematic review

Chiara Rossi¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: When researchers and clinicians try to identify appropriate and effective ways to improve well-being among different populations, music is often included in interventions or research projects. The existing literature has consistently reported interactions between the effects of personality traits and music listening. However, the interrelations between individual traits and well-being after music listening are still partially unclear. *Methods:* This systematic review, registered on PROSPERO, investigates the relationship between everyday music listening, individual characteristics - operationalized as stable and transient personality traits - and well-being. Specifically, the main research concept is to explore which personality characteristics could be considered key factors that influence music's effects on well-being. Articles were searched on PubMed, Scopus, PsycINFO, and Google Scholar, with a final result of 115 records. After eligibility screening, eight studies were included in the review. *Results:* The results showed that both stable and transient personality traits influence music's effect on well-being. In particular, when focusing on the transient personality dimension, the emotion regulation principle has been found to be prevalent in all the studies analyzed: it means that music may modulate mood regulation during daily routines. Regarding stable personality traits, openness to experience and the absorption trait (linked to openness's dimension), and neuroticism emerged as the most involved in the enjoyment of music listening on well-being. The findings enabled the development of a theoretical framework that integrates the emotional component, the concept of emotional congruence, the dimensions of musical immersion, and well-being while listening to music. People who thus are influenced by these personality characteristics choose to listen to certain types of music according to the emotions in which they would like to feel immersed. *Discussion:* Music immersion may allow people to disconnect from their surroundings and engage in internal thoughts, processes, and mental imagery. Based on this knowledge, music listening could be systematically introduced into the daily routines of the non-clinical population to improve everyday well-being and prevent or reduce stressful states.



Problematic social network use and depressive symptoms in adolescence: the role of self-esteem and self-concept clarity as mediators

Giulia Gizzi¹, Giorgio Ghizzoni¹, Irene Severi¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

The association between problematic social network use (PSNU) and adolescents' depressive symptoms has been widely shown. Several studies suggested that PSNU is a risk factor for depressive symptoms, such as low self-esteem and low self-concept clarity. The present study was aimed to explore how PSNU was associated with adolescents' depressive symptoms and whether self-esteem and self-concept clarity could mediate the association. Participants were 200 Italian adolescents aged 14-17 years ($M=15.5$, $SD=1.04$), who filled in the PROMIS Emotional Distress-Depression-Pediatric Item Bank, the Bergen Social Media Addiction Scale, the Rosenberg Self-Esteem Scale and the Self-Concept Clarity Scale. Hayes PROCESS Macro was used to test the mediation analyses. The results showed that in the total effect model, PSNU was positively associated with depressive symptoms. In the indirect effect model, the association between PSNU and depressive symptoms became insignificant. PSNU was negatively associated with self-esteem and self-concept clarity. Moreover, the association between self-esteem and depressive symptoms and between self-concept clarity and depressive symptoms were both significant. Additionally, the results showed that the association between PSNU and depressive symptoms was significantly mediated by self-esteem and self-concept clarity. In conclusion, this study highlights the complexity of the relationship between PSNU and depressive symptoms. Increasing self-esteem and self-concept clarity might be useful to decrease adolescents' depressive symptoms and reduce the negative impact of problematic social network use on depressive symptoms.



Adaptation of a web-based Acceptance and Commitment Therapy (ACT) program to promote mental health in young adult carers: An Italian pilot study

*Giulia Landi*¹

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy.

Abstract

Introduction: Young adults who take on responsibilities related to caring for a family member with disability, serious physical or mental illness, or alcohol/substance use problems, or who provide assistance to elderly relatives who have lost their autonomy due to age are broadly referred to as young adult carers (YACS). Evidence indicates that, compared to their non-caring peers, YACS are at elevated risk for poorer mental health as well as other adverse psychosocial outcomes such as poorer education, economic hardship, and worse health, especially when they care for an ill parent. For all of these reasons, mental health promotion interventions for YACS are needed. Acceptance and Commitment Therapy (ACT) is one promising transdiagnostic approach that fosters mental health through the development of psychological flexibility. This study evaluated the effectiveness of a 4-week web-based ACT mental health promotion intervention for YACS. *Methods:* 182 YACS (56.8% female, Mage=22.5, offspring of parents with: 48.9% type 1 diabetes, 33.5% cancer disease, and 17.6 solid organ transplant) were randomized to the intervention (n = 94) or control group (n = 88). Outcome variables (depression, anxiety, stress, well-being, psychological flexibility) were measured at pre- and post-intervention and at 12-week follow-up. Changes in outcome variables between pre- and post-intervention were assessed using 2 (group: intervention vs. control) × 2 (time: pre vs. post-intervention) repeated measures ANOVA. *Results:* Compared with the control group, the intervention group reported significant post-intervention improvements in levels of depression, $F(1,178)=12.47$, $p<0.01$, anxiety, $F(1,178)=14.63$, $p<0.01$, stress, $F(1,178)=13.43$, $p<0.01$, well-being, $F(1,178)=15.58$, $p<0.01$, and psychological flexibility, $F(1,178)=13.39$, $p<0.01$ which were maintained at follow-up. Longitudinal mediation analyses in the intervention group indicated that improvements in psychological flexibility between pre- and post-intervention mediated improvements between post-intervention and follow-up in levels of depression, anxiety, stress, and well-being. *Conclusions:* Findings provide support for the mental health benefits of a web-based ACT mental health promotion intervention for YACS that might be implemented in large-scale telepsychology programs aimed at promoting mental health in this at-risk population.



Observing how interaction changes in music therapy: a single-case study

Lorenzo Antichi¹, Gianni Cipriani²

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

² SHIR: Tuscan Professional Association of Psychodynamic Music Therapy, Arezzo, Italy

Abstract

Introduction: Infant cerebral palsy causes several cognitive, sensory, and motor development problems, affecting communication and interaction. Recently, music therapy has been adopted to favor patients' motor skills. However, to the best of our knowledge, there were no studies regarding the influence of music therapy on infant preverbal communication and how the relationship between the infant and the musical instruments changes over time. *Methods:* Therefore, this single-case study (N = 1) aimed to explore the changes in the interaction between the music therapist and a female 9-years-child affected by infantile cerebral palsy. In addition, we wanted to investigate if music therapy could enhance a more active style of child communication, promoting a greater sense of agency. Active improvisational music therapy was performed for 70 sessions over two years. The first and the last session were video-recorded with a camera that framed the whole room, including the music therapist and the child. The music therapist and the child played together, producing sounds or melodies. This intervention also comprised the improvisation technique, syntonizing with the child's emotions and actions, like a sort of sound feedback to internal and external states. We used KAMUTHE to analyze videos and to codify music therapists' (i.e., musical, verbal, and non-verbal behaviors) and child's behaviors (i.e., gaze, play/musical activities, vocalizations, and gestures). We analyzed the 10th and 30th minutes of the pre-test and post-test sessions using the open-sourced Boris software, setting KAMUTHE categories as the coding sheet. *Results:* As sequence event plots showed, the music therapist was more active and inviting in the pre-test, while the child was passive, observing the room or the instruments. Conversely, she was much more involved in the post-test, playing instruments, vocalizing, and watching the therapist. Moreover, the music therapist made only a few verbal comments in the post-test, ceasing to try to stimulate the child. *Discussion:* Music therapy could have favored a greater agency level of the child and a greater propensity for interaction. However, given the nature of the single-case design, the results cannot be generalized. Future studies should investigate with larger samples how music therapy affects the agency levels of children with cerebral palsy.



Caregivers of women undergoing genetic testing for cancer susceptibility genes: positive attitude as a protective factor against perceived stress

Lucia Lombardi¹, Tommasina Savio², Valentina Marino²

¹ Department of Neurosciences, Imaging and Clinical Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: Women who undergo genetic test for cancer susceptibility genes are usually accompanied by the partner or a family member or a friend to genetic counselling. Caregivers may feel stressed due to the risk situation experienced by those who support. Caregivers have to deal with the psychological consequences such as stress, anxiety and depression. This study aimed to analyze (1) perceived stress levels of caregivers, (2) if there are differences in perceived stress, anxiety and depression levels according to the caregivers’ gender, (2) if coping strategies could predict perceived stress. *Methods:* Sixty-four caregivers of females who undergo genetic test were enrolled in this study (mean age=47,22 years; s.d.=12,43; 64% females) and completed questionnaires about psychological adjustment and coping strategies. *Results:* We found moderate stress scores in the total sample (mean levels=18,30; s.d.=7,74). No differences were found between female and male caregivers in perceived stress, anxiety and depression. Regarding coping strategies, we found that positive attitude was the main protective factor against high levels of perceived stress. *Discussion:* This study highlighted the importance of considering coping strategies, in specific the positive attitude as protective factor of perceived stress in a sample of caregivers of women undergoing genetic test.



The effect of a mock crime experiment and mentalization on the neural interpersonal attunement: an EEG hyperscanning study

Giorgio Veneziani¹, Chiara Ciacchella¹, Mohamed Ali¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Research in social neuroscience highlighted the neural activity of systems involved in attributing beliefs and emotions to others. In this context, previous studies found that deception involved brain areas related to functions of higher cognition, such as mentalization. However, past experiments typically measured the brain activity of an isolated individual although, during social interactions, individuals seemed to model their emotional states through resonance mechanisms. According to the social brain perspective, the present study aimed to examine the levels of intra- and inter-brain connectivity in a mock crime experiment, using an electroencephalographic hyperscanning approach. A second aim was to assess the effects of mentalization on intra- and inter-brain connectivity. Twenty participants (10 “guilty” group and 10 “not guilty” group) and 1 interviewer (“examiner”) took part in the study and completed a sociodemographic questionnaire and a questionnaire which assessed mentalization abilities. The guilty participant filled a backpack with objects she/he was told were illegal, while the not guilty participant filled the backpack with objects she/he was told were legal. Successively, the examiner interviewed the participant. Before and after the interview, the dyad completed a total of 4 minutes of eye-to-eye direct gaze. Electroencephalographic (delta, theta, alpha, beta and gamma bands) and autonomic (heart rate) data were collected in dyad before, during and after an interview with yes/no questions about their belongings. For intra- and inter-brain connectivity, preliminary analyses consisted of five ANOVAs, considering group (2: guilty, not guilty) as a between factor, time (2: pre-interview, post-interview) and region of interest (5: frontal, central, temporal, parietal and occipital) as within factors. Results showed a higher inter-brain connectivity index in the not-guilty group, during the post-interview, in the frontal beta bands. Moreover, results highlighted a lower inter-brain connectivity index in the not guilty group, during the post-interview, in the right temporal gamma bands. Findings could indicate higher active thinking and focus processes in the not-guilty group and higher attention in the guilty group. The present study confirmed the potential use of hyperscanning to explore interpersonal attunement dynamics.



Motherhood loneliness - loneliness as a potential mediator between Covid-19-related post-traumatic symptoms and psychological distress

*Alessia Caffieri*¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

Introduction: Motherhood loneliness represents a key factor for maternal mental health and family/children's well-being. Nevertheless, scientific literature suggests that loneliness remains an underestimated aspect for the psychological health of pregnant and postpartum women, typically studied in relation to depression, unlike general psychological distress, anxiety, and stress. To the best of our knowledge, no study has explored the post-traumatic effect of the COVID-19 pandemic on perinatal women's health, considering the role of loneliness. Hence the current study examined the mediating role of loneliness between COVID-19-related post-traumatic symptoms and psychological distress in women in the perinatal period. Considering that loneliness is recognized as a symptom of depression we also hypothesized that loneliness could have a wider impact on maternal psychological health, hence could represent a mediator between COVID-19-related post-traumatic symptoms and anxiety and stress in pregnant and postpartum women. *Methods:* A total of 200 women in the perinatal period, of which 125 were pregnant and 75 were postpartum, participated in an online survey at the end of the COVID-19 public health emergency in Italy (March 2022-July 2022). Women completed the UCLA Loneliness Scale, the Impact of Event Scale-Revised (IES-R) adapted to COVID-19-related post-traumatic stress, and the Depression Anxiety Stress Scale – 21 items (DASS-21). To test the hypothesis, simple mediation analyses were performed. *Results:* The results showed that increased levels of COVID-19-related post-traumatic stress were associated with an increase in psychological distress both directly and indirectly through the mediation of loneliness in women in the perinatal period. Similar results were found considering outcomes of depression, anxiety, and stress independently. *Discussion:* Considering the long-term effects of the COVID-19 pandemic, loneliness represented an important emotional construct that should be greatly considered in targeting prevention and treatment interventions for women in the perinatal period. Findings support the usefulness of psychological counseling services and stress the importance of dealing with the emotional distress expressed by women through targeted interventions.



Autonomic regulation and prodromal symptoms of schizophrenia: a pilot case-control study

Marta Mascanzoni¹, Riccardo Pecora¹, Lucrezia Trani¹

¹ Department of Human Sciences, LUMSA University of Rome, Rome, Italy.

Abstract

Introduction: According to the Polyvagal Theory, the Autonomic Nervous System (ANS) is involved in emotion dysregulation processes, affecting people with severe mental disorders, including those with psychotic disorders. Heart Rate Variability, a measure for the ANS activity and an indicator of cardiac activity, is considered the main physiological marker of emotion dysregulation. The aim of this study was to investigate autonomic activity among adolescents with and without prodromal symptoms of schizophrenia. *Methods:* This was a case control study involving 17 adolescents with prodromal symptoms of schizophrenia (prodromal group (PG), female = 53%; M (SD) = 16.3 (1.12)) and 17 matched clinical controls affected by common mental disorders (clinical control group, CCG) at their first access to the Rome 1 Department of Mental Health. Participants underwent semi-structured clinical interviews to assess prodromal symptoms of schizophrenia and personality functioning. Autonomic cardiac activity was recorded during resting (Baseline and Recovery) and experimental conditions (interviews). *Results:* Findings suggested significant differences in sympathetic activity during several conditions between groups (Heart Rate, HR: $F = 4.7$; $p = 0.038$) and across resting and experimental conditions (HR: $F = 18.3$; $p < 0.001$). Furthermore, a time x group interaction was observed (HR: $F = 6.7$; $p < 0.001$). Specifically, PG showed increased sympathetic activity at Baseline and decreased during the interviews, in contrast the CCG showed a decreased sympathetic activity during the resting conditions and increased during the interviews. *Discussion:* The findings suggest that the PG showed a pattern of ANS response at emotionally activating stimuli, different from that of the CCG. This highlighted the relevance of autonomic and emotion dysregulation in multidisciplinary treatment of adolescents with prodromal symptoms of psychosis.



Shame change in psychotherapy: A scoping review and meta-analysis

*Marco Di Sarno*¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: Shame appears in several psychopathological conditions, including but not limited to post-traumatic stress disorders, eating disorders, depression, and personality disorders. Given its relevance, this trans-diagnostic and trans-theoretical contribution investigates whether individual psychotherapy can promote shame-reduction. *Methods:* PRISMA-ScR guidelines (Preferred Reporting Items for Systematic Reviews and Meta-Analyses, Extension for Scoping Reviews) are applied to conduct a scoping review of empirical findings. A combination of the terms shame and psychotherapy is searched in PubMed and PsycInfo, identifying 2,520 unique records. Among them, we select (1) original quantitative studies; (2) published as journal articles; and (3) focused on the impact of individual psychotherapy on patients' shame. All treatment approaches are eligible for the review, provided that they include individual psychotherapy, alone or in combination with other treatment modules. A random-effect meta-analysis is also performed on a subset of studies to quantify shame change, using within-group effect sizes for each study or study branch (i.e., separate within-group effect sizes are computed in studies comparing two or more treatments, one for each treatment group). *Results:* Twenty-two quantitative studies are in line with our criteria. Treatment types are heterogenous, with a prevalence of cognitive-behavioral approaches. Nineteen studies (86.36%) report significant shame reductions from pre- to post-treatment. The meta-analysis indicates a significant and moderate reduction (i.e., medium effect-size) in shame across treatments (Standardized Mean Change = .61). Multi-module treatments are associated with slightly higher effect-sizes compared to purely individual ones, while trial duration and assessment of shame do not affect Standardized Mean Change. *Discussion:* Psychotherapy is effective at producing shame-change. Individual modules and additional interventions may have additive effects in reducing negative emotionality, and shame in particular.



Altered affective disposition in familial risk for depression: insights from affective potentiation of the startle reflex

Alessandra Ruggerone¹, Carola Dell'Acqua¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: Given the significant burden of depression, identifying early indicators of the disorder has been highlighted as a core priority. While a blunted emotional reactivity to pleasant stimuli has been identified as a potential mechanism of depression vulnerability, findings about the processing of unpleasant ones are mixed and less consistent. A specific measure of affective disposition to aversive stimuli is the startle reflex potentiation. Hence, the present study aimed at examining the affective modulation of the startle reflex in familial risk for depression, a high-risk condition for the development of Major Depressive Disorder (MDD). *Methods:* The startle reflex was measured during a passive viewing task of pleasant, neutral, and unpleasant pictures in a sample of 18 (14 F) healthy young adults with a familial risk for MDD and 29 (20 F) controls without a familial risk for MDD. Auditory startle probes were presented at 300, 1500, and 3500 ms following picture onset while electromyography of the orbicularis oculi muscle was registered. *Results:* While controls displayed the typical pattern of startle reflex potentiation during the late processing (1500, 3500 ms) of unpleasant relative to neutral pictures, individuals with a familial risk for depression showed blunted startle potentiation during the viewing of unpleasant stimuli, as compared to neutral ones. *Discussion:* These findings suggest that depression vulnerability might be characterized by a hypoactivation of the defensive motivational system. The assessment of affective startle modulation might be a valuable paradigm to explore early alterations of affective disposition to unpleasant stimuli in depression risk and has important implications for the early identification and the development of prevention protocols.



Identification of the devastating biological and psychological consequences of child maltreatment

Chiara Pesca¹, Luisa Lo Iacono², Valeria Carola¹

¹ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy

² IRCCS Santa Lucia Foundation, Rome, Italy

Abstract

Child maltreatment (CM) affects child development in behavioral, emotional, social, physical, and cognitive areas. Mechanisms elicited by exposure to different types of CM and their impact on neurodevelopmental trajectories are not fully elucidated. Our aim is to investigate the impact of different types of CM on physiological, neurobiological, and psychological factors. Young adults were classified according to the type of CM and parental style experienced. In these groups, salivary telomere length (TL) was first assessed. Furthermore, a genome-wide RNA sequencing analysis was performed in blood cells. Analyses showed shorter TL in individuals experiencing low parental care and high parental control compared to individuals experiencing adequate parental care and control. RNA expression differences were observed between CM groups and control individuals. Overall, our findings identified several alterations in different biological systems involved in the “translation” of early-life traumatic experiences into psychological and medical diseases. Future studies are needed to test the modulatory role of the changes in the emergence of pathology.



Adult attachment in novel behavior: how attachment style is involved in Social Network use and binge-watching behavior

*Francesca Favieri*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

In the cultural profile of modern society, adolescents (Generation Z) and young adults (Generation X) are largely involved in Social Networks use (SN) and viewing of TV series (i.e., binge-watching; BW). Current interest concerns the purpose of defining them as possible behavioral addictions. Evidence suggests a continuum from leisure activity to pathological one for both phenomena, affecting psychological, social, and relational dimensions. Due to the large prevalence of these behaviors, early predictors of risk for the negative side of the continuum are of high interest. This study investigates the relationship between SN and BW and adult attachment style originating from and influenced by early attachment experience. The hypothesis is that this dimension bidirectionally affects social withdrawal and the enactment of behaviors related to the virtual and non-real world. Five hundred and forty-four late adolescents (18-25 years of age) participated in the study. Standardized tools allowed the assessment of the risk of addiction associated with SN and BW. The Attachment Style Questionnaire (ASQ) was adopted to assess the dimensions of attachment style in adults (i.e., Confidence, Discomfort with Closeness, Need for Approval, Preoccupation with Relationships, and Relationships as Secondary). Positive linear correlations were reported between the negative dimension of ASQ and both SN (all $r > 0.15$; all $p < 0.01$) and BW (all $r > 0.15$, all $p > 0.02$). Linear regressions indicated that although SN is significantly predicted by the ASQ subscales ($R^2_{\text{adjusted}} = 0.21$), with a higher role of Preoccupation and Relationships as Secondary ($p < 0.001$), BW is only partially explained by ASQ subscales ($R^2_{\text{adjusted}} = 0.07$) with Relationships as Secondary as main predictor. This study highlights the importance of analyzing attachment style in novel behavior as a possible risk factor for addiction. However, differences between BW and SN emerged. While SN involves high relational dimensions (e.g., socializing, carry-on relationships), lower interactive dimensions characterize BW that may be less affected by attachment style. SN addiction may represent a maladaptive attempt to overcome the problematic attachment style, but it could also cause worse relational problems due to the higher engagement in virtual than real relationships.



Parental Bonding and Eating Disorders Symptoms: The mediating roles of Alexithymia and Socially Prescribed Perfectionism

Massimiliano Padovani¹, Giulia Rezzano²

¹ Department of Health Science, University of Florence, Florence, Italy

² School of Psychology, University of Florence, Florence, Italy

Abstract

Introduction: In the last decade, an increasing interest in parental bonding and its essential role to promote healthy psychological outcomes emerged. Extensive research has also highlighted a link between non-optimal parental bonding and depressive, anxiety, and eating disorder symptoms. In detail, women with eating disorders typically report lower parental care and higher parental protection compared to non-clinical controls. The present study aimed to investigate: a) the contribution of parental overprotection in explaining eating disorders symptoms; b) the mediating role of alexithymia and Socially Prescribed Perfectionism in the relationship between parental overprotection and eating disorders symptoms. *Methods:* A convenience sample of 424 young women was recruited from general population (mean age = 23.66 ± 4.75 ; BMI = 21.82 ± 3.35). The participants were administered the Italian versions of Parental Bonding Instrument (PBI), Toronto Alexithymia Scale (TAS-20), Multidimensional Perfectionism Scale (MPS), Eating Questionnaire (EDE-Q) in order to assess parental overprotection, alexithymia, Socially Prescribed Perfectionism and weight concern, respectively. The hypotheses were tested through Hayes Process Macro – Model n. 6. *Results:* The results showed that maternal overprotection had both a direct effect on weight concern ($\beta = 0.02$; 95% CI: [0.0018, 0.0365]) and an indirect effect (serially) mediated by alexithymia and Socially Prescribed Perfectionism ($\beta = 0.03$; 95% CI: [0.0014, 0.0055]). Paternal overprotection showed just an indirect effect on weight concern ($\beta = 0.003$; 95% CI: [0.0011, 0.0054]). *Discussion:* In conclusion, the findings suggest that parental overprotection style might have a role in eating disorders symptoms, specifically on weight concern, both directly and indirectly. This study provides evidence of a potential implications for clinical practice and interventions. Future research should extend these results by investigating the relationship between parental bonding and other eating disorders symptoms (e.g., drive for thinness) as well as identifying which other factors mediate the relationship between abnormal parental bonding and eating disorders.



Moving beyond sex as predictor: an EEG investigation of gender roles on non-parents' response to infant faces

*Micol Gemignani*¹

¹ Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Abstract

Females have been found to be more responsive to infants' signals within the dynamic and temporally-sensitive parent-child exchanges. Whilst this hypothesis has been tested using EEG tasks, the concepts of sex and gender imply several layers that can be illustrated and operationalized in different ways, so there are still aspects to consider. The aim of the present study is to investigate the effect of gender roles on non-parents' Event-Related Potentials (ERPs) in response to infant cues. EEG is used to measure non-parents' (N=62; N=30 males and N=32 females) cortical responses to standardized infant and adult faces displaying three different facial expressions (happy, neutral, sad) during an Emotion Recognition task. An Italian version of the Bem's Sex Role Inventory (BSRI) is used to measure norm-related behaviors and personality expectations attributed to each sex. According to BSRI, femininity and masculinity are measured as two independent dimensions rather than constituting two mutually exclusive categories. Beyond the rigid operationalization of sex as a binary category, our results revealed that sex does not predict the N170 and LPP amplitudes to infant over adult faces. On the other hand, higher scores in femininity are associated with a heightened N170 cortical response to infant faces ($p < 0.05$). In addition, higher scores in masculinity are linked to a reduced LPP amplitude in response to all the types of faces ($p < 0.05$). Overall, females might have been found to be more sensitive to infants, and to social cues in general, as they are imbued with societal ideals of femininity, which assist them in carrying out the tasks they are expected to, such as child-raising. Our findings shed light on the plausible effects and importance of gender roles on the electrophysiological substrates of infant cues processing in nulliparous individuals.



Investigating the Role of Rumination, Worry, Desire Thinking, and Craving in Problematic Social Network Sites Use

*Sara Bocci Benucci*¹

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

Abstract

Introduction: According to the Self-Regulatory Executive Function– S-REF model, a particular dysfunctional thinking style named Cognitive Attentional Syndrome (CAS) has a central role in determining and maintaining psychological disorders. The CAS consists of a variety of coping styles comprising extended thinking (e.g. desire thinking, rumination, and worry), monitoring for threats, thought suppression, and avoidance, which have paradoxical effects on self-regulation causing negative emotions to persist. Recently, the S-REF model has been applied to addictive behaviors. In this formulation, the CAS and metacognitive beliefs are conceptualized across three temporal phases of the addictive behavior episode: pre-engagement, engagement, and post-engagement. More specifically, in the pre-engagement phase, desire thinking, rumination, and worry are activated as a way to cope with unpleasant internal states. However, extended thinking, by focusing on negative thoughts and emotions rather than downregulating them, could lead to the escalation of craving and engagement in addictive behavior. The present study aims to test if the CAS configurations of the S-REF model are present in Problematic Social Network Sites Use (PSNSU). Specifically, we hypothesized that individuals who experience psychological distress could engage in dysfunctional cognitive strategies (i.e. worry, rumination, and desire thinking) and that these strategies could be associated with PSNSU both directly and indirectly through the escalation of craving. *Methods:* A community sample of 272 individuals (F = 68%, Mage: 28.11 ± 11.44) took part in the study and completed a battery of self-reports. The hypothesized model was tested with Structural Equation Modeling with bootstrap method. *Results:* The assessed structural model produced a good fit to the data. Psychological distress predicted PSNSU through (i) the serial mediation of worry and craving (ii) the serial mediation of desire thinking and craving. Rumination did not predict craving and PSNSU. *Discussion:* Results suggest the role of worry and desire thinking as dysfunctional cognitive strategies to regulate psychological distress that could predict PSNSU through the activation of craving.



Intolerance of uncertainty, separation anxiety, and negative affectivity in Italian emerging adults: A latent profile analysis

*Silvia Spaggiari*¹, *Sara Iannattone*²

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: Literature showed that the trans-diagnostic construct of intolerance of uncertainty may be linked to anxiety and negative affectivity. However, very few studies are available regarding the relation between these three features, and even fewer explored it during the delicate phase of emerging adulthood, which is characterized by new developmental challenges. The present study aimed to identify meaningful psychological profiles based on intolerance of uncertainty, separation anxiety symptoms, and negative affectivity in a group of Italian non-clinical emerging adults. Moreover, the profiles were compared in some psychosocial and demographic characteristics. *Methods:* 868 young adults (73% women), between 18 and 26 years of age ($M = 22 \pm 1.87$), were recruited and completed an online Google form. They filled in a socio-demographic survey and standardized self-report questionnaires assessing intolerance of uncertainty, separation anxiety symptoms, and personality traits. *Results:* Using latent profile analysis, three specific profiles were identified, respectively with high, low, and moderate levels of the variables considered. Moreover, differences emerged between the three profiles as to sex and having spent infancy with both parents: the “high-level” profile had the greatest proportion of women and of people who had not spent infancy with both parents. *Discussion:* The results suggest that intolerance of uncertainty, separation anxiety symptoms, and negative affectivity can co-occur. Emerging adults with elevated levels of these variables may be at higher risk of developing internalizing problems, which may negatively impact their struggle for building their own identity and life. Clinically speaking, specific attention to these aspects needs to be paid especially in emerging adulthood.



Measuring climate change worry among adolescents: Psychometric properties of the Climate Change Worry Scale

Sofia Santisi¹, Costanza Gori¹, Francesco Sanson¹

¹ Department of NEUROFARBA, University of Florence, Florence, Italy

Abstract

Climate change worry can be defined as a specific worry about climate change, involving mainly verbal-linguistic thoughts about changes that might occur in the climate system and the possible effects of such changes. Nowadays, worry about climate change seems to be growing especially among adolescents. However, there is a lack of measurement tools with adequate psychometric properties to assess worry about climate change in this age group. Therefore, the aim of this study is to investigate the psychometric properties of the Climate Change Worry Scale (CCWS; Stewart, 2021) in Italian adolescents ($n = 1852$; 58% males; mean age = 16.38; SD = 1.27; range: 13.17 – 24.42 years). Regarding dimensionality, Confirmative Factor Analysis supported the expected unidimensional structure. Additionally, since females seem to be more worried than males and climate change worry varies across adolescence, the measurement invariance of the scale across gender and age groups (between early-adolescents and late-adolescents) was demonstrated. As a result of these findings gender and age differences were analyzed, showing that female adolescents were more worried about climate change than male adolescents and that late-adolescents were more worried about climate change than early-adolescents. Concerning reliability, analyses showed that the CCWS had a high internal consistency (McDonald's Omega = .906). Overall, the present study makes a contribution in determining that the Climate Change Worry Scale is a suitable instrument for measuring the unidimensional construct of climate change worry in adolescents.



Chaos and confusion in Hikikomori research. Is Hikikomori a severe variant of social anxiety disorder? A review of the literature

*Simone Amendola*¹

¹ Department of Applied Psychology, Zurich University of Applied Sciences, Zurich, Switzerland

Abstract

Hikikomori is a severe form of social isolation and withdrawal that has attracted scientific attention worldwide. The most recent definition of hikikomori posits that marked social isolation at home, withdrawal duration of at least six months, and significant impairment or distress associated with social isolation are core criteria of the condition. However, there have been several attempts over time to better define hikikomori. Specifically, avoidance, disinterest, or unwillingness to attend school/work and to participate in social relationships/interactions, as well as the absence of other primary mental disorders have been considered core criteria of hikikomori. Therefore, what hikikomori refers to must be clarified, also to distinguish hikikomori from social isolation due to other conditions (e.g., chronic physical illness, physical-medical condition) and avoid over-pathologizing some individuals. The first aim of the presentation consists of a discussion of the different criteria and definitions of hikikomori to provide a more complete picture of what hikikomori refers to (first review question: “What does Hikikomori refer to?”). A systematic review of the literature that has recently been published is used to inform the discussion. The second aim of the presentation concerns a review of scientific articles discussing and/or analyzing associations between hikikomori and social anxiety/phobia, and avoidant personality. Differences and similarities between these conditions have been rarely investigated (second review question: “Is Hikikomori a severe variant of social anxiety disorder?”). The following search strategy was used for retrieving useful articles informing the review: hikikomori AND ("social anxiety" OR "social phobia" OR "avoidant personality"). The electronic databases of PubMed, MEDLINE, PsycInfo, PsycArticles, Web of Science, and Scopus were searched on April 5, 2023. A total of 148 articles were found. The study protocol will be published online on the Open Science Framework (at <https://osf.io/karxi/>). The findings of the present review of the scientific literature will inform the debate on the hikikomori condition clarifying the definition and criteria of hikikomori. The analysis of similarities and/or differences between hikikomori, social anxiety and avoidant personality will advance scientific knowledge on hikikomori.



Clinical skills on the play: a novel interactive procedure for learning psychological interview

Andrea Scalone¹, Alessandra Melita¹

¹ Faculty of Human and Social Sciences, UKE - Kore University of Enna, Enna, Italy

Abstract

Introduction: Gamification is an important tool for enhancing learning processes in educational contexts. Surprisingly, it has received scant attention in clinical training. In this study, we used an open-source software to develop a video-simulated, interactive graphical novel that students can use to learn the main principles of psychological interview. *Methods:* The study involved several phases: (1) identification of a clinical situation that may require psychological treatment; (2) scripting the interactions between the virtual therapist/student and the virtual patient, according to the relevant literature and the quality of each response; (3) testing the interrater reliability of scripted virtual therapist's interventions, via questionnaire to five actual and expert psychotherapists with different clinical training; (4) revisions of virtual therapist' interventions that did not reach interrater agreement among actual clinicians; (5) programming a stand-alone, playable interactive visual novel for psychology students, with different stories and endings according to the quality of the therapist/student's responses. *Results:* The intraclass correlation coefficient of the virtual therapists' interventions among clinicians was .86. Two out of eight steps of the first clinical interview (i.e., the phases of exploration and etiopathogenetic hypotheses) required fine tuning and revisions of the responses, because of relevant disagreement among expert clinicians. Preliminary analysis of students' involvement with this interactive novel shows that gaming experience is associated with high levels of appreciation and involvement, reduced errors in selecting appropriate clinical interventions, and increased ability in recognizing key clinical issues. *Discussion:* This study might be relevant for clinical training of psychology students, as they may test their capacity to approach psychological interviews via a simulated, yet reliable, clinical case. This novel method could facilitate a better understanding of the difficulties related to clinical interviews, and might enhance the students' capacity for learning, case formulation, and conceptualization of clinical dynamics.



A study on the Italian validation of the Digital Stress Scale among adolescents and young adults

*Arianna Muscolino*¹, *Rubinia Celeste Bonfanti*², *Alessandro Di Caro*¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy.

² Faculty of Human and Social Sciences, Kore University of Enna, Enna, Italy

Abstract

Introduction: Although a body of evidence suggested that digital stress can be an intervening factor between digital media use and psychological outcomes, there is a call for providing valid measures to assess digital stress in clinical research. Recently, an empirically based model of digital stress (Steele et al., 2020) suggested some related components of the construct, i.e., availability stress, approval anxiety, FoMO, and communication overload. The aim of the present study is to examine the psychometric properties of an Italian adaptation of the digital stress measure (DSC) by Hall et al. (2021), and to test its measurement invariance (i.e., between male/female and adolescents/young adults). *Methods:* Two samples of non-clinical participants were recruited for the present study. A sample of adolescents was collected from different high schools in North and South of Italy (N=500, age range: 14-17 years), whereas a sample of young adults (N=500, age range: 19-35 years) was recruited both online, through social media advertisements, and at the Universities of Palermo and Bergamo. A series of Exploratory and Confirmatory Factor Analyses was performed to test the dimensionality of the Digital Stress Scale, comprising 24 items measuring the five components of digital stress. Other self-reported measures of psychological functioning, psychological distress and social media use were used to examine convergent and divergent validity of the scale. *Results:* The results of EFA and CFA supported the robustness of the scale, by replicating the original factorial structure, with a good fit to the data. Results of measurement invariance testing suggest that the measurement structure of the scale is consistent across samples. *Discussion:* This preliminary study provided some support of the good psychometric properties of the Italian version of the DSC. Our results suggest that digital stress comprises different components, which are differently associated with psychosocial outcomes both in adolescents and young adults.



Adaptive behavior in youths who receive residential treatments: how it is related with cognitive profile and externalizing/internalizing symptoms

Chiara Adduci¹, Alice Buri¹, Marina Cariello¹

¹ Tiarè Association, Turin, Italy

Abstract

Children and adolescents with a history of adverse childhood experiences (ACE) are at higher risk of suffering from a variety of deficits in many domains. Many studies have focused on behavioral problems such as externalizing/internalizing symptoms and on cognitive impairments. A history of ACE may also be associated with a developmental delay in some daily living skills, which may affect the success of residential treatment. Therefore, the purpose of this study is to examine the association between behavioral/cognitive outcomes and adaptive skills, in order to provide useful perspectives on prevention and intervention. The sample consists of 40 adolescents living in residential context and who were administered with WISC/WAIS for cognitive functioning, CBCL for behavioral problems, and VINELAND for adaptive behavior. This study, which is part of a larger research project, aims to evaluate the relationship between different aspects of functioning, including the use of projective tests. Results of the current study presented suggest significant correlations between externalizing symptoms, low cognitive profile and less adaptive behavior. These data make it possible to work simultaneously on the psychopathological aspects and on the specific impaired life skills in order to formulate a more specific diagnostic framework aimed at more effective treatment.



Association between executive functions and core symptoms in children with autism

Francesca Anderle¹, Eleonora Paolizzi¹

¹ Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Abstract

Introduction: The Executive Functions (EF) concern the processes that allow individuals to control and change their behaviors and thoughts, facilitating the adaptation to new stimuli. People with Autism Spectrum Disorders (ASD) seem to present difficulties related to these abilities which appear to be associated with the overall symptom severity and the restricted and repetitive behaviors. This research aims to study the relation between the core symptoms of ASD and neuropsychological tests' scores used to assess EFs. *Methods:* N=30 male children (Mean age=9.5 years, SD=2.4) with a diagnosis of ASD and without an associated language impairment participated in our study. Neuropsychological tests and the Autism Diagnostic Observation Schedule-2 (ADOS-2) were administered by registered psychologists. Correlations between EFs (Tower of London-TOL and Modified Card Sorting Test-MCST) and non-verbal IQ (Matrix Reasoning in WISC-IV) scores, and the ADOS-2 scores (Social-affect, Restricted and Repetitive Behaviors and Symptoms Severity scores) have been measured using Spearman correlation coefficient. *Results:* Preliminary analysis showed the presence of low or moderate correlations, tendency non-significant, between Social-affect, Restricted and Repetitive Behaviors and Symptoms Severity scores and the non-verbal IQ and EFs scores. Moderate correlations have been shown between Restricted and Repetitive Behaviors score and Matrix Reasoning (MR) score ($r=-0.51$, $p=0.004$), violation of rules ($r=0.48$, $p=0.01$) and total score ($r=0.48$, $p=0.007$) of TOL. A moderate correlation was found between MR and Symptom Severity scores ($r=-0.38$, $p=0.04$). *Discussion:* In line with literature, our preliminary findings showed the association between core symptoms of ASD and the non-verbal IQ and EFs, in particular planning and problem-solving abilities; nevertheless, most of the correlations analyzed are non-significant. Considering that the instruments used have not been standardized on a sample with ASD, they might not fully grasp children's difficulties. Therefore, our results also suggest the need of developing specific clinical instruments to assess the EFs in people with ASD. This might have relevant implications on the diagnostic assessment allowing the acquisition of a more accurate psychodiagnostic profile and consequently reaching a greater personalization of treatment.



Let us give voice to Rorschach: speech analysis during the Rorschach test (R- PAS) in nonclinical, subclinically-depressed, and feigner subjects

Angelica Ferraris¹, Giacomo Aimini¹, Enrico Vitolo¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Introduction: Speech analysis techniques are capable of classifying mood disorders, and the voice features showed an encouraging level of specificity and sensitivity. The aim of this study is twofold: i) to test the credibility of reported symptoms also in a performance task, i.e., the Rorschach test (R- PAS), which is less susceptible to be altered from voluntary distortions (differently from self-reports) but can be affected by examinee manipulation attempts; ii) to investigate a possible relationship between vocal and psychological variables in the performance of the R- PAS. *Methods:* Currently recruited participants (N = 80) were asked to either (a) respond honestly or (b) pretend to suffer from depression using a vignette describing a person with depression symptoms. The honest group consisted of nonclinical subjects and subclinical-depressed individuals. To determine simulation and membership in the subclinical group, we used the IOP-29 and CES-D tools, and speech was analyzed for all subjects using the PRAAT software during R-PAS. *Results:* The preliminary analyses report that the R-PAS shows statistically significant differences among the three groups; in particular, feigners report more content/themes that are easily manipulated and associated with depressive symptoms such as dysphoria and suffering (MOR, Mean Difference (MD) = 14.90, $p = .04$; CritCont%, MD = 10.05, $p = .04$), uncertainty, and threat (AGC, MD = 13.7, $p = .05$; AGM, MD = 23, $p \leq .01$) compared to the subclinical subjects. In addition, compared to the honest and feigner group, and consistent with the literature, the subclinical group shows a tendency toward less variability in intonation (pitch variability), slower speech (speaking rate), several verbal interruptions (voice breaks), and low speech intensity (intensity). Also, the subclinical group reports several significant (Spearman) correlations of speech variables to R- PAS variables indicative of feelings of helplessness and despair, e.g., SC Comp ($\rho = .750$, $p \leq .01$) and PPD ($\rho = .844$, $p \leq .01$) with the voice breaks. *Discussion:* The study examines symptom credibility and specificity at multiple levels, aspects that may contribute to appropriate allocation of economic resources and adequate clinical treatments. The main limitation concerns the external validity of the study.



Predictive factors of temperament in adolescents smartphone addiction

Federico Toniolo¹, Giorgia Baccini¹, Eleonora Centonze¹

¹ Associazione Tiaré, Turin, Italy

Abstract

In recent years, with the mass adoption of smartphones, more and more addictive behaviours and problems have emerged. Therefore, the SPAI (Smartphone Addiction Inventory) was developed to assess related addiction. Since addiction is a multifactorial construct, it depends on many different variables. However, for most addictions, quantity and early adoption of substances or behaviours seem to predict the worst outcomes. The purpose of this study is to investigate temperament and character factors that predict increased risk for developing smartphone addiction in adolescence. The sample consisted of 1000 high school students in Turin, Italy, who were administered the SPAI and the TCI (Temperament and Character Inventory), a self-report questionnaire that examines four temperament traits and three behavioural traits. Results show a predictive relationship between the HA (Harm-Avoidance) scale, particularly the HA1 (Anticipatory Worry) subscale, and SPAI scores. These data suggest that higher severity of smartphone addiction may be associated with a tendency to use avoidance strategies in response to negative stimuli and anticipation of negative concerns.



Friday, 15th September 2023

SYMPOSIUM SESSION



**PROBLEMATIC ONLINE BEHAVIORS: NEW TRENDS IN RESEARCH AND
CLINICAL ASSESSMENT**

Proposer

*Valentina Boursier*¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Discussant

*Adriano Schimmenti*¹

¹ Faculty of Human and Social Sciences, UKE, Kore University of Enna, Enna, Italy

Abstract

The growth of computer-mediated communication in contemporary society has changed our experiences with other people significantly. Moreover, the relevance of web-related digital activities in the general population has been met with increasing interest in examining specific dysfunctional and/or psychopathological online behaviors, including problematic social media/social networking sites (SNSs) use. The general consensus acknowledges a need for careful assessment of the various psychological needs and psychopathological functioning associated with a maladaptive use of Internet applications, to avoid the risk of confusing the quantity of use with the quality of use. Accordingly, research findings claim for an updated understanding of the potential risks, protective factors, clinical features, psychodynamic and psychosocial mechanisms underlying the development of specific Internet-related patterns of use, as well as maladaptive functioning and experiences specifically associated with a problematic engagement in social media. Indeed, conceptual and methodological issues still remain debated. Moreover, several heterogeneities and inconsistencies within the findings have been associated to the positive/negative effects of social media use on mental health and additional phenomena have recently appeared in social media use claiming scientific attention. Furthermore, new trends in prevention programs and psychological treatment addressing problematic online behaviors need to be explored. This topic will be discussed in four presentations, based on recent research and experiences from different Italian contexts: Bonucci et al. (University of Florence), Pezzi et al. (University of Parma), Gioia et al. (University of Naples Federico II), Di Caro et al. (University of Palermo).



What specific solitary experiences are associated with problematic social media use in young adults?

Mattia Pezzè¹, Paola Corsano¹, Manuel Gámez Guadix², Alessio Gori³, Alessandro Musetti¹

¹ Department of Humanities, Social Sciences and Cultural Industries, University of Parma, Parma, Italy

² Autonomous University of Madrid, Department of Biological and Health Psychology, Madrid, Spain

³ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

This study aimed to outline the literature that considered different dimensions of solitary experience in relation to problematic social media use (PSMU) in young adults. Following the PRISMA guidelines, a systematic review of studies published between 2004 and 2022 was conducted, finding 1841 eligible articles. Of these, 9 studies were included, reporting a total of 2,939 participants aged between 18 and 30 years. The findings show that in young adults there was a clear positive association between PSMU and general loneliness, and a negative association between PSMU related to WhatsApp use and contextual loneliness (i.e., romantic/sexual, friends and family relationship contexts). Furthermore, a negative correlation emerged between PSMU and early maladaptive schema of social isolation/alienation. Among young adults, no mediating variable was found between PSMU and solitary experience. Our study shows a consistent lack of literature on PSMU, as no other aspect of solitary experience has been investigated. For this reason, future research needs to consider other solitary experiences (e.g., solitude) to broaden understanding on the topic and design new interventions on PSMU.



Can the Use of Likes on Social Networks be Maladaptive? Investigating the Contribution of Maladaptive Likes-Engagement to Problematic Social Network Sites Use

Sara Bocci Benucci¹, Selene Piselli², Francesco Nigro², Giulia Fioravanti³

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

² School of Psychology, University of Florence, Florence, Italy

³ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

Introduction: Social Network Sites (SNSs) are nowadays used for a high number of reasons, including the satisfaction of specific needs. An important feature of SNSs that can lead to the satisfaction of individuals' needs is the possibility of interacting with others through the activity of putting and receiving Likes. Even if the use of Likes can be considered a common activity that helps the exchanges in online relations, some individuals may develop a maladaptive Likes-engagement, intended as the preference for interaction through Likes rather than face-to-face, the use of Likes to modify mood states, and the inability to control the use of Likes. Maladaptive Likes-engagement in turn can contribute to developing Problematic Social Network Sites Use (PSNSU). The current study aimed to (i) develop two self-report questionnaires measuring the satisfaction of needs through Likes and maladaptive Likes-engagement; (ii) investigate the contribution of needs satisfaction through Likes and maladaptive Likes-engagement to PSNSU. *Methods:* A 12 and 13 items self-report questionnaires, named the Needs Satisfaction Through Likes scale (NSTL) and the Maladaptive Likes-Engagement scale (MLES) were developed and administered to a community sample of 476 individuals ($F = 68.5\%$, $Mage = 28.96 \pm 10.35$). *Results:* Factor analysis revealed a 3-factor solution for both the NSTL (factors: Gratification, Social Connection, and Self-Presentation Need; variance explained 68.87%) and the MLES (factors: Preference for Interactions through Likes, Negative Mood Modification, Unsuccessful Attempts to Control Time spent using Likes; variance explained 69.57%). Subsequently, a model evaluating if factors of MLES could mediate the association between factors of NSTL and PSNSU was tested. The assessed structural model produced adequate fit to the data [$\chi^2 = 3791.844$, $df = 91$, $p < .001$; $RMSEA = 0.07$ (90 % C.I. = 0.066–0.087), $CFI = 0.95$, $SRMR = 0.06$]. Both gratification and self-presentation needs predicted PSNSU through the preference for interactions through Likes and negative mood modification. *Discussion:* Results suggest that satisfying



gratification and self-presentation needs through Likes and a maladaptive engagement in Likes behavior could be one of the possible pathways to PSNSU.



A theoretical framework for the assessment of Problematic Smartphones Use. A case-study report

Alessandro Di Caro¹, Maria Di Blasi¹, Maria Teresa Graffeo¹, Anna Ponente², Cecilia Giordano¹

¹ Department of Psychology, Educational Sciences and Human Movement, University of Palermo, Palermo, Italy

² Diaconal Center “La Noce”, Waldensian Institute, In-Dipendenze Project

Abstract

Introduction: The smartphone use is increasing such as an integral part of human life, with benefits for daily tasks (e.g., communication, access to entertainment and work's activities). However, some concerns are arising regarding potentially maladaptive pattern of use and/or negative consequences for individuals' mental health, including anxiety and depression. In Italy, clinical attention to Problematic Smartphone Use (PSU) is growing and some psychotherapy services for adolescents with PSU are emerging. However, to avoid overpathologizing daily life activities on the smartphone it is necessary to carry out a multidimensional assessment able to combine different approaches and to highlight the severity of functional impairment as well as the underlying psychological (e.g., cognitive, affective, motivational) processes. In this perspective, this study aims to present a method for the multidimensional assessment designed for a PSU psychotherapy service according to I-PACE model. *Methods:* This single-case study involved four patients (2 males and 2 females) referred to a psychotherapy service in Palermo, specifically designed for PSU in adolescents and pre-adolescents (aged 11- 18) and funded by “CON IL SUD” Foundation. The following PSU indicators were considered: Time spent on the device, Smartphone Addiction, and Social Media Addiction. More specifically, patients with the same score on each indicator are compared to highlight individual differences on their functional impairment (i.e., boredom, difficulties in emotion regulation, impulsive behaviour, and adolescents' psychopathology). *Results:* Paired comparisons among patients shows that the four patients, despite their similarity in one of the three PSU or SMU indicators, show very different profiles in their functional impairment especially regarding psychopathology, boredom and motivation for social media use. *Discussion:* Preliminary results suggest that problematic behaviors could not be defined based on a single criterion. The idiographic examination of patients referred to specialized services for the treatment of PSU contributes to enhance a theoretical



framework that takes into consideration the interplay of various components. We highlight the need for a multi-dimensional assessment approach, designed to explore the various facets of PSU.



Do I Matter to You? Vaguebookers and Problematic Social Networking Site Use

Francesca Gioia¹, Valeria Rega¹, Valentina Boursier¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

The use of social media has dramatically changed the experiences to be connected to other people enhancing new ways of relatedness to others. Nevertheless, dysfunctional social media use has become increasingly prevalent among young adults. Accordingly, recent phenomena have just appeared in social media use claiming scientific attention. Vaguebooking consists of sharing posts on social media that are intentionally vague to solicit attention and concern from readers. It has been related to negative consequences on mental health and is potentially associated with problematic social networking site use (PSNSU). A general consensus in the scientific literature addresses a careful assessment of the antecedents of PSNSU, such as individuals' psychological needs and psychopathological functioning. In this regard, very recently the role that feelings of shame and fears of not mattering to others may have in leading PSNSU have been pointed out. In our hypothesis, shame proneness may lead individuals to feel insignificant to others thus enhancing feelings of not mattering that, in their turn, prompt vaguebooking as an Internet-related behavior specifically oriented to seek attention via a maladaptive use of social media. Therefore, the present study aimed at exploring the effect of individuals' shame proneness on PSNSU, testing the serial mediating role of anti-mattering and vaguebooking. A total of 202 young adults (78% females; mean age=24.26; SD=3.66) have been involved. Participants' shame proneness, directly and indirectly, predicts PSNSU, via the serial mediation effect of anti-mattering to others and vaguebooking (indirect effect = 0.076; 95% CI: [0.033, 0.131]). The total model accounted for a good amount of variance in participants' PSNSU [$R^2 = 0.33$; $F(4, 196) = 24.26$, $p < 0.001$]. The current study highlights the negative effects of shame proneness, anti-mattering, and vaguebooking on the PSNSU among young adults, thus confirming that a dysfunctional use of social media and risky related behaviors may meet individuals' vulnerability such as a personal feeling of shame, and compensate basic needs and deficiencies, such as the unsatisfied requirement to be visible and significant to others.



**THE EFFECTIVENESS OF PSYCHOLOGICAL SERVICES FOR STUDENTS DEALING
WITH MENTAL DISTRESS**

Proposer

*Alexandro Fortunato*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome ,
Rome, Italy

Discussant

*Maria Francesca Freda*¹

¹ Department of Humanistic Studies, Federico II University, Naples, Italy

Abstract

Interest in university students' mental health is on the rise, given its relationship to serious social and psychological problems. Empirical research has shown high rates of psychological distress among university students, particularly with regard to anxiety, depression, interpersonal difficulties, and suicidal ideation. A possible origin of this distress may be the difficulties associated with the specific developmental stage of emerging adulthood, such as separation from family, establishing new social relationships, setting long-term goals, and financial management. For all these reasons, the demand for psychological support is increasing worldwide, especially after the COVID-19 pandemic. Psychological services for university students attempt to respond to students' increasing mental health needs representing important resources for personal development. Several studies have highlighted the efficacy of these services in reducing psychological distress and improving overall mental well-being. Despite this evidence, there remains a paucity of research on the variables that might predict the effectiveness of these services. This panel collected four studies that support the effectiveness of psychological services for students and introduce new perspectives on the variables involved in the intervention process and in improving psychological well-being. The first contribution of Gizzi et al. showed the effectiveness of a counseling intervention and the importance of baseline personality traits, while also outlining the importance of comprehensive indices of psychological change that include relevant areas of mental health. The second contribution of Fortunato et al. provided further evidence of the effectiveness of



counseling services in reducing psychological distress and increasing well-being, in addition to an innovative contribution to the process variables involved in counseling intervention. The third contribution of Franchini et al. shed light on how expectations and therapeutic alliance contribute to determine the outcome of a university counseling intervention. The fourth contribution of Colli et al. highlights the need of evidence-based therapies and their effectiveness for students who had clinically relevant mental health problematics. The empirical results will be discussed and their implications for clinical practice will be addressed.



Effectiveness of psychodynamic university counseling service and psychological variables underlying improved well-being

Alessandro Fortunato¹, Mara Morelli¹, Silvia Andreassi¹, Anna Maria Speranza¹

¹ Department of Dynamic, and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: The mental health of university students is a topic of growing interest, especially following the COVID-19 pandemic. Psychological counselling interventions are widely used in different contexts with the aim to offer developmental support and guidance in the resolution of educational and academic challenges. A variety of theoretical models can guide these interventions and Sapienza University Counselling Service chose the psychodynamic modality that involves four weekly sessions, and a follow-up session after three months. Several studies have demonstrated the effectiveness of university counseling in improving mental well-being. Despite this evidence, the literature on the process variables involved in counseling interventions is still scarce. Two studies are presented with the following aims: (1) to evaluate the efficacy of the university counseling intervention measuring psychological symptomatology between pre-post intervention and detecting which psychological variables predicted the treatment outcome; (2) to explore possible differences in the linguistic measures applied to first/last session clinical reports; (3) to verify if patients' symptoms and personality traits were associated with the linguistic characteristics of the clinical reports. *Methods:* A total of 210 students (122 for the first study, 88 for the second) who attended university counseling services were administered the PID-5-BF to assess personality traits, the BDI-II and the BAI, to assess state variables and the OQ-45 as outcome measures. The Discourse Attributes Analysis Program (DAAP) was used to evaluate the referential process applied to clinical reports. *Results:* All psychological dimensions investigated showed significant reduction after the intervention. Significant correlations were also highlighted between students' personality traits and linguistic measures of clinical accounts, and between pre/post intervention test scores and linguistic characteristics of the first/last clinical account respectively. *Discussion:* Our studies provided further evidence of the effectiveness of university counseling services in reducing students' psychological distress and increasing well-being. In addition, the analysis of the referential process in clinical reports provides an innovative contribution to the process variables involved in counseling intervention.



Process variables in university counseling: the role of expectations and therapeutic alliance on intervention outcome

Costanza Franchini¹, Gaetano Maria Sciabica¹, Silvia Andreassi¹, Mara Morelli¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Several studies have proven the pivotal role of university counseling interventions in enhancing students' psychological wellbeing and in reducing pre-treatment distress. However, the mechanisms underlying successful counseling interventions are still unclear. Pre-treatment expectations as well as clients' perceived therapeutic alliance represent two variables that are able to explain part of the effectiveness of psychotherapies regardless of their duration. *Aim:* The present study aims to investigate whether more positive expectations about the counseling process predict better outcomes and whether this relationship is mediated by students' perceptions of a better therapeutic alliance with clinicians. *Methods:* The sample included 50 students who underwent counseling intervention at Sapienza University of Rome as of January 2023. They were asked to complete the following self-report questionnaires: Expectations About Counseling-Brief Form (EAC-B) at pre-test, Working Alliance Inventory-Short Form Revised (WAI-SF) at post-test (after the fourth interview) and Clinical Outcome in Routine Evaluation-Outcome Measure (CORE-OM), Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI) at both pre and post-test. A linear regression model was used to investigate the predictive role of expectations at pretreatment (EAC-B) on intervention outcome (CORE-OM, BDI-II, BAI) while mediation analyses were used to test whether therapeutic alliance, as evaluated by the students (WAI-SF), mediated this relationship. *Results:* Preliminary results suggests that expectations at the pre-test significantly predicted counseling outcome. This relationship was only partly mediated by the therapeutic alliance. Promising findings concern the influence of expectations on the counseling process. Students who showed greater trust in the therapist's ability to provide valuable support for their difficulties showed more significant improvement after the intervention. *Discussion:* Our results shed light on how expectations and therapeutic alliance contribute to determine the outcome of a university counseling intervention. A deeper understanding of process variables, such as expectations and therapeutic alliance, constitutes a crucial prerequisite for developing more focused treatments in university counseling.



Being able to help: evaluating the effectiveness of a university counseling service in improving students' mental health

Laura Muzi¹, Antonio Cosenza¹, Maria Mirandi¹, Giorgio Ghizzoni¹, Veronica Raspa¹, Elisa Delvecchio¹

¹ Department of Philosophy, Social Sciences, Humanities and Education, University of Perugia, Perugia, Italy

Abstract

Introduction: There is a growing recognition that university students may be vulnerable to a wide range of psychological difficulties and adverse mental health outcomes, equivalent to, or in some countries higher than those of the general population, especially after the Covid-19 pandemic. This study aimed at exploring the effectiveness of a university-based counseling service considering multiple indices of psychological and psychopathological functioning, while also exploring the predictive role of personality features in determining psychological pre-post change. *Methods:* A national sample of cisgender university students (N = 178, 76% assigned female at birth; mean age = 22,9 years, SD = 2.93) who attended the Focus-PSI Counseling Service of the University of Perugia were asked to complete the Personality Assessment Inventory (PAI) during the intake session, as well as the Symptom Checklist-90-R (SCL-90-R) and the Rosenberg Self-Esteem Scale (RSES) at both intake and the end of the intervention. *Results:* Findings showed a significant pre-post reduction in all SCL-90-R subscales, with a moderate to large effect sizes, with no significant effects of assigned sex at birth. The highest effects sizes were found for the Global Symptomatic Index (GSI), Somatization, Depression, Anxiety, Interpersonal Sensitivity, and Hostility subscales. Furthermore, over and above the assigned sex at birth, a significant increase in the RSES overall self-esteem emerged, with a large effect size, along with changes in self-competence and self-worth. Of note, baseline PAI Borderline Features (i.e., affective instability and identity) emerged as predictors of higher levels of psychopathology at the end of the intervention. *Discussion:* These results support the effectiveness of a university-based counseling intervention, in terms of both symptomatic remission and improvement in personal self-worth, and the importance of considering personality features as a significant “context” for these clinical features. Then, a combination of measures of both mental health and psychopathology in university counseling services could provide a comprehensive perspective of psychological change with maximal clinical utility.



When clinical needs meet research aims: A reflection on the work of the Psychotherapy and Clinical Research Service

Antonello Colli¹, Alessandra D'Agostino¹, Guia Pandolfi¹, Mario Rossi Monti¹

¹ Psychotherapy and Clinical Research Service, Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Introduction: In recent years the mental health of university students has been endangered by the social and cultural changes that this population had to face. Several mental health workers call for a more compelling presence of mental health services in Universities and Schools. Moreover, clinical work needs to be focused also on the advances of the research on the process and outcome of evidence-based therapies. In this study, we will present data on the patients treated at the Psychotherapy and Clinical Research Service of the Department of Humanities (Carlo Bo University of Urbino, Italy), which was opened at the end of 2018 to provide evidence-based therapies at accessible prices to university students, workers and to the general population. *Aims:* The aims of this work were to: 1) present the clinical protocol used at the psychotherapy service; 2) present descriptive data on the patients who are treated at the service; 3) present data on the effectiveness of the therapies conducted. The following measures were used at the beginning and at the end of treatment (one year): 1) Structured Clinical Interview for Personality Disorders (SCID-5-PD); 2) Symptoms Checklist-90-Revised. The following measures were used at the beginning and at the of therapy, and after four and eight months: 1) Difficulties in Emotion Regulation Strategies; 2) Reflective Functioning Questionnaire; 3) Inventory of Interpersonal Problems-47; 4) Adult Attachment Questionnaire; 5) Mentalization Imbalances Scale; 6) Modes of Mentalization Scale; 7) Countertransference Questionnaire; 8) Psychotherapy Relationship Questionnaire. Moreover, the Working Alliance Inventory-Patient was applied every two months. After providing informed consent, patients are asked whether they are willing to record their sessions for research purposes: Most of the sessions conducted at the service are audio-recorded and rated with different measures in order to obtain information on the psychotherapy process and outcome of treatments. *Results:* Results showed that the patients who asked for psychological help had different clinically relevant mental health problematics, i.e., mostly personality disorders, mood disorders, anxiety disorders and eating disorders. Results showed that symptoms decreased over time over the course of the one-year therapies administered in the service by different clinicians.



LGBTQIA+ STUDIES: ANOTHER STEP FORWARD

Proposer

*Filippo Maria Nimbi*¹

¹ Department of Dynamic and Clinical and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Lilybeth Fontanesi*¹

¹ Department of Psychological, Health and Territory Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

LGBTQIA+ studies focus on understanding the experiences and challenges LGBTQIA+ people face in society. These studies include research on mental health, discrimination, human rights, public policy and more. This symposium offers the opportunity to address some new research that falls within this field, with the possibility to explore both social and clinical aspects. The first contribution will deal with the topic of parenting desire in lesbian, gay, and transgender people. this study will also examine the role of minority stress, i.e. The level of stress related to belonging to a sexual minority that may be more likely to be the victim of discrimination and isolation. The second contribution will deal with the experience of people who define their sexual attraction within the asexual spectrum (ACE). Specifically, the results of a large study on sexual desire and fantasies in ACE subgroups will be discussed and some clinically relevant aspects will be discussed. The third contribution will deal with the sexual experience of Women who Have Sex with Women. Specifically, the speaker will present the results of an exploratory study on sexual practices and preferences as well as kink, BDSM, or unconventional sexual practices. The last contribution will discuss a pilot study investigating the presence of psychopathological aspects in adolescents with gender incongruence through the experience of a clinical service. The symposium will also include an open discussion on the topics covered in anticipation of future research lines and clinical applications.



Sexual desire and erotic fantasies in the asexual (ACE) spectrum: findings and clinical implications

*Filippo Maria Nimbi*¹

¹ Department of Dynamic and Clinical and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Over the past 30 years, an increasing number of people have identified themselves as “asexual” recognizing an absence of sexual attraction to individuals of any gender. Asexual (ACE) people may have sexual desire and engage in sexual behaviors, and the current study aims to deepen the knowledge of sexual desire, erotic fantasies, and related emotions within the ACE spectrum. *Methods:* A total of 1072 Italian volunteers were recruited to take part to the present study via social media. Data were collected from October 2021 to January 2022 using self-report measures such as SDEF1, SDEF2, SDEF3, and SDI2. Participants were then divided in four groups according to their declared sexual orientation: asexual, demisexual, gray-asexual and questioning. Some multivariate analyses of covariance (MANCOVA) were conducted to test differences between sexual orientations under the ACE spectrum. *Results:* Focusing on sexual desire, asexual people have significantly lower scores than the other groups in all the dimensions except for “negative feelings to sexual desire”, while demisexual participants showed the higher scores in all the domains (except for “negative feelings to sexual desire”). Questioning group reported the highest scores in the “negative feelings towards sexual desire” compared to asexual and demisexual ones. Asexual group totalized significantly lower scores than the other groups in fantasies frequency, fantasies importance, negative emotions, and sharing and experiencing. Demisexual group showed higher frequency of romantic fantasies than asexual and grey-asexual ones. *Discussion:* This study showed some specific patterns of desire and fantasies among the asexual, gray-asexual, demisexual and questioning groups. Results may provide relevant data to clinicians working with asexual patients. Many asexual people report having negative experience with mental health providers because of their bias and lack of knowledge towards asexuality. While guidelines for clinicians who have asexual patients mainly focus on the necessity to deconstruct their own assumptions about sexuality being a necessary part of human life, a point that should be considered and that is rarely discussed in literature is that clinicians also need to be aware of the diversity and heterogeneity within the ACE spectrum.



Parenting desire in lesbian, gay, and transgender people: a comparative study on the role of minority stress

Marina Miscioscia¹, Selene Mezzalana¹, Vincenzo Bochicchio², Cristiano Scandurra³

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Department of Humanities, University of Calabria, Calabria, Italy

³ Department of Neuroscience, Reproductive Sciences, and Dentistry, University of Naples Federico II, Naples, Italy

Abstract

Introduction: Parenting desire is one of the main psychological factors influencing the decision to become parents. Among lesbian, gay, and transgender (LGT) people, there is a rapid increase in the rate of couples who desire to become parents, but this population experiences many psycho-social barriers compared to heterosexual and cisgender counterparts due to the minority stress processes. Therefore, this study examined the direct effect of prejudice and the indirect effect of internalized stigma on parenting desire in a group of LGT people. *Methods:* Two datasets generated by different online cross-sectional studies were matched to analyze the associations between parenting desire and two minority stressors (i.e., enacted and internalized stigma) in 380 Italian LGT people (170 gay men, 120 lesbian women, and 90 transgender people). Three mediational analyses were performed using the SPSS PROCESS Macro with bias-corrected bootstrapping (5,000 samples). The analyses were controlled for age, educational level, partnership (yes vs. no), and for gender identity (only in transgender participants). *Results:* 73.5% of gay men, 77.5% of lesbian women, and 58.9% of transgender participants desire to have children ($\chi^2 = .009$). Results indicated that internalized stigma mediated the relationship between prejudice and parenting desire only in lesbian women [$b = 0.06$, $SE = 0.14$, $95\%CI (0.01, 0.13)$, $p = 0.01$]. Additionally, only in transgender participants, internalized stigma increased the likelihood of reporting higher levels of parenting desire ($b = 0.81$, $p = 0.01$). *Conclusions:* Our results highlighted that a consistent number of LGT Italian individuals feel a parenthood desire. Internalizing stigma seems to play an important role in lesbian women and transgender people, probably because of strong social pressure, present in our socio-cultural context, to become a mother and make family.



Sexuality of Women who Have Sex with Women: An Exploration of Sexual Practices and Preferences

*Sofia Pavanello Decaro*¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Background: Sexual research concerning WSW is on the rise after the field had been predominantly focused on men who have sex with men (MSM), who have long been known to be a population at high risk for STDs. Several studies have been conducted addressing the sexuality of WSW from a risk behavior perspective. Most studies only focused on penetrative practices. *Aim:* The goal of the present study is to gather data on sexual practices for clinical and educational purposes and for the promotion of a sex-positive approach by researchers and clinicians towards. *Methods:* Via an online questionnaire, WSW respondents were presented with a socio-demographic assessment, psychometrics scales on sexuality-related variables, and a set of questions created ad hoc. Finally respondents were asked to indicate whether they had experienced with the following sexual practices: 1) Insertive genital sex (performed or received), 2) Oral sex (performed or received), 3) Masturbation / autoeroticism, 3) Partner masturbation, 4) Anal sex (performed or received), 5) Heavy petting (as a standalone practice or as foreplay), 5) Intercrural sex (sexual contact between genitals and thighs), and 6) Kink, BDSM, or unconventional sexual practices. *Analysis:* We grouped the participants on the basis of their sexual orientation (lesbian, bisexual, or heterosexual) and we estimated the incidence of each practice in the target populations. We compare the groups and examine co-occurrence across populations. *Results:* We present the prevalence and pairwise comparisons of the sexual practices among the groups of women. *Discussions:* The description of the prevalence of sexual practices provides clinicians with up-to-date information on prevalence of practice and sexual habits, which is in turn relevant for correctly assessing WSW sexual health.



Psychopathological data and mental functioning in a sample of patients with gender dysphoria

Chiara Commone¹, Letizia Terenzi², Lavinia Marcucci², Maria Pia Casini²

¹ Department of Developmental and Social Psychology, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

² Child Neurology and Infantile Psychiatry Unit, Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

Abstract

Aim: Many studies have shown that adolescents with gender incongruence have an increased risk of psychopathological conditions compared to their cisgender peers. These conditions include internalizing and eating disorders, self-harm, and suicidal ideation. Some authors have emphasized the role of personality and mentalization in the well-being of these individuals, suggesting that good personality functioning and strong mentalization skills can act as protective factors against psychopathology. *Methods:* The aim of this study is to describe the psychological functioning and psychopathological comorbidities in a sample of 40 transgender adolescents accessing psychiatric services and compare them with a sample of cisgender inpatient adolescents. We examined depression, anxiety, and personality disorders in both samples. In the clinical sample, we used the SWAP-200 to further investigate aspects of personality and assessed eating disorders, body image, self-harm behaviors, mentalization, and epistemic trust. *Results:* Our findings indicate that a) transgender adolescents are more frequently subjected to bullying compared to cisgender peers, b) there are no statistically significant differences between transgender and cisgender samples in the evaluated psychopathological dimensions and c) the transgender sample shows a high prevalence of symptoms related to eating disorders, body dissatisfaction, and self-cutting. Multivariate regressions revealed a statistically significant correlation between: being bullied and internalizing symptoms; body dissatisfaction, mentalization ability, and depressive symptoms; and epistemic trust and general psychological maladjustment. In terms of personality assessment, the PID-5 results show that the most represented domains are negative affect, detachment, and disinhibition. The SWAP-200 PD scores indicate that the most represented personality disorders are Schizoid, Schizotypal, and Avoidant, while the Q score suggests that the most represented disorders are Avoidant, Narcissistic, and Schizoid. *Discussion:* Our results demonstrate no statistically significant difference in the psychopathological profiles of both samples. Bullying experiences, high levels of bodily dissatisfaction, poor mentalization skills and



lower levels of epistemic trust correlate negatively with the psychopathological aspects observed in transgender adolescents.



EMOTIONS, RELATIONSHIPS, AND ENVIRONMENT

Proposer

*Giulia Ballarotto*¹

¹ Department of Dynamic Clinical and Health Psychology, Sapienza University of Rome, Rome, Italy

Discussant

*Maria Cristina Verrocchio*¹

¹ Department of Psychological, Health and Territorial Sciences, University of Chieti, Chieti, Italy

Abstract

Recent studies have highlighted the link between pro-environment behaviors and emotional factors, such as emotional regulation, empathy or emotional awareness. At the same time, accelerating climate change has highlighted the emergence of various forms of climate psychopathologies, in which climate change had direct and/or indirect impact on mental health. The focus on eco-psychopathologies and the growing interest in emotional, individual and relational aspects in association with pro-environmental behaviors have allowed the emergence of several studies in the field of clinical psychology aimed at investigating this link. Several studies representing recent efforts in this regard will be presented in this symposium. Specifically, a) a cross-sectional study that highlights the link between symbolic universes and pro-environmental attitudes and behaviors, b) a qualitative study with a semi-structured interview on eco-psychopathologies, which goes on to investigate the relationship between humans and the environment and human concerns about climate change, c) a study on the association between emotional intelligence, nature relatedness and pro-environmental outcomes, and d) an intervention research aimed at implementing pro-environmental behaviors, will be presented. The studies were conducted in different settings: general population, population of managers of different companies operating in national and international settings, and corporate employees. The variety of contexts considered, and the different measures used will allow a discussion of the current state of the art and future prospective for clinical psychology in this field.



The influence of the new ecological paradigm and cultural worldviews on pro-environmental behavior

Sergio Salvatore¹, Matteo Rebo²

¹ Department of Human and Social Sciences, University of Salento, Lecce, Italy

² Department of Dynamic, Clinical and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

To achieve a sustainable future there is a need to gain a better understanding of what drives pro-environmental behavior. This study analyzes the role played by the New Ecological Paradigm (NEP) and cultural worldviews on pro-environmental behavior. For this purpose, a national sample of 1726 Italian respondents completed a survey designed to measure the NEP, cultural worldviews (declined in terms of symbolic universes) and pro-environmental behavior. These variables were used in a model with pro-environmental behaviors as an outcome variable, the NEP as a direct predictor, and symbolic universes - grouped by polarization (moderate-extremist) and valence (optimistic-pessimistic) - as indirect predictors. The analyses revealed that the NEP has a direct influence on pro-environmental behaviors and polarized symbolic universes indirectly influence pro-environmental behaviors through the NEP. In addition, the valence of symbolic universes moderates the relationship between polarized symbolic universes and the NEP. The results are interpreted within the framework of Semiotic-Cultural Psychology Theory (SCPT) and highlight that taking people's meaning-making into account can guide policy makers to understand what fosters or hinders adaptive responses to climate emergence.



Exploratory research on ecopsychopathologies: an analysis of the narratives of the Italian population

Raffaella Abate ¹, Camilla Tacchino ¹, Roberta Gabriella Cavalli ¹

¹ Department of Dynamic, Clinical and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: In recent years, a number of clinical syndromes called eco-psychopathologies have emerged, such as eco-anxiety, eco-guilt, eco-depression and solastalgia. After a careful review of the literature, it emerged that there is no definition and operationalization of the diagnosis of eco-psychopathology and no data on the incidence in the population are available. The aim of the present study is to explore the issues of psychological distress related to the relationship between man and nature by means of a specific interview that has been called the “Eco-psychopathologies interview” and to measure metacognitive skills. *Methods:* The qualitative and exploratory research involved administering the structured interview to a sample of 25 subjects collected by random sampling technique from the population. The interview was audio-recorded and then transcribed and an elementary context analysis was carried out using T-Lab software and coding using the MAS scale. Eco-psychopathologies interview was developed on the basis of the Indiana Psychiatric Illness Interview (IPII; Lysaker et al., 2002), a semi-structured interview divided into four sections that allow people to tell their story and how they relate to the environment. *Results:* The analysis resulted in the selection of three clusters that are organized within a two-factor factorial space, the list of keywords was reduced to n=426. The interpretation led to the hypothesis that the first factor would represent the 'narration' of the personal story, while the second factor would represent the “evolution” of the story. The interpretation of the clusters led to defining the first cluster as “planning”, the second would represent “the starting point/process”, the third would represent “experimentation”. An important finding that emerged was that many subjects claimed not to have a psychological discomfort related to the environment as they did not recognize the feeling of 'environmental concern' as a real psychological discomfort. *Discussion:* This supports the idea that those who present a greater concern for the environment are those who are more future-oriented present the sense of stillness and concern for the future.



Connecting with own emotions to connect with the environment: an intervention for promoting pro-environmental behaviors in organizational settings

Giulia Ballarotto¹, Raffaella Abate¹, Patrizia Velotti¹

¹ Department of Dynamic Clinical and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Numerous studies have highlighted the difficulties found in interventions aimed at promoting greater pro-environmental behaviors in the long term. While cross-sectional literature has emphasized the essential role of certain emotional factors in promoting pro-environmental behaviors (such as empathy, connection to nature, emotional regulation), interventions in the literature focus on contextual factors, informational or feedback interventions. The present study aimed to test the effectiveness of interventions designed instead to increase emotional connection to the natural environment in order to promote greater pro-environment behaviors. *Methods:* N = 90 firm managers were involved in 6 different intervention groups. The interventions were carried out on the managers of the firms, but change was measured not only on the managers but also on the team members working in direct contact with them (N = 500 firm employees), hypothesizing that a change at the emotional/relational level would produce a stable change in behavior that can trigger cascading changes even in team members in close contact with the leader. Pro-environmental behaviors, pro-environmental attitudes, connection to nature, empathy, emotional regulation, and self-compassion were measured before and after the interventions. *Results:* Results showed the greater effectiveness of change in interventions aimed at greater emotional connection with nature, compared with informational interventions and the control group. The change was found not only on firm managers, but also on their team members. *Discussion:* The results highlight the cost-effectiveness of an intervention that enables behavioral change in a large sample (team members), direct involving a small sample of firm managers.



Emotional intelligence and climate change perception: exploring the mediating role of connectedness with nature

*Luciano Romano*¹, *Vanessa Marchetti*², *Giacomo Angelini*², *Davide Clemente*¹, *Massimiliano Scopelliti*², *Caterina Fiorilli*², *Angelo Panno*¹

¹ Department of Human Sciences, European University of Rome, Rome, Italy

² Department of Human Studies, LUMSA University of Rome, Rome, Italy

Abstract

Introduction: Climate change strongly threatens human survival on the planet and is a phenomenon that can no longer be ignored. Despite this, many are still reticent and tend to perceive the effects of climate change as chronologically and logistically distant. Recent studies reveal how emotions strongly influence pro-environmental perceptions, judgments and actions and are among the main predictors of concern about global warming, which is considered one of the main causes of climate change. Further evidence reveals that positive and negative perceptions towards climate change are influenced by both affective and cognitive components that collectively guide our pro-environmental actions. Recent studies have shown that connectedness with nature represents a cognitive and affective construct referring to the individual-nature relationship and it is closely linked to perceptions towards climate change. In light of recent evidence in the literature, the present study aimed to explore the relationship between trait emotional intelligence, connectedness with nature, and perceptions of climate change. In detail, it was hypothesized that trait emotional intelligence increases connectedness with nature, which in turn fosters a higher perception of ongoing climate change. *Methods:* 342 participants (F= 60.7%) aged between 19 and 40 years (Mage= 22.99, SD= 2.66) were involved, and the following scales were administered: Trait Emotional Intelligence Questionnaire ($\alpha = .83$), Connectedness with Nature Scale ($\alpha = .88$) and three items of the Climate Change Perception Scale ($\alpha = .79$). The hypothesized mediation model was tested using model 4 of the PROCESS macro for SPSS. *Results:* The results confirm the research hypothesis and reveal an indirect relationship between trait emotional intelligence and perception of climate change through connectedness with nature. *Discussion:* Practical implications will be discussed in light of the significant contribution of emotional intelligence and connection to nature in counteracting climate change.



**PROMOTION OF MENTAL HEALTH IN CHRONIC ILLNESS SETTINGS: STUDIES
PRESENTED BY E-CARE RESEARCHERS OF THE AIP, CLINICAL AND DYNAMIC
PSYCHOLOGY SECTION**

Proposer

*Giulia Landi*¹

¹ Department of Psychology, University of Bologna “Renzo Canestrari”, Bologna, Italy

Discussant

*Piero Porcelli*¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

The present symposium provides an overview of the latest research on the promotion of mental health in chronic illness settings conducted by researchers belonging to the early career researcher network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section. In the first contribution, Donisi et al. report qualitative data from a small-scale pilot program for young adults with multiple sclerosis (MS) conducted in an immersive 5-day sailing experience and based on Acceptance and Commitment Therapy (ACT) approach. In the second contribution, Busch et al. describe the results of a systematic review aimed at synthesizing the different types of workplace violence in the radiology healthcare settings, its psychological impact, and the underlying risk and protective factors. In the third contribution, Landi et al. reported data on a pilot study exploring the effectiveness and feasibility of an online version of an ACT training resilience intervention for people with MS called “e-READY for MS”. Finally, in the fourth contribution Pistorio et al. examined emotional intelligence and other psychosocial aspects as related to therapeutic adherence in kidney transplantation during the COVID-19 pandemic.



The psychological burden of workplace violence on radiological staff, underlying risks, and protection measures

Isolde Martina Busch^{1,2}, *Susan D. Scott*³, *Francesca Moretti*¹, *Diego Cecchin*⁴, *Albert W. Wu*⁵, *Chiara Giraudo*⁴

¹ Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

³ University of Missouri Health Care, Columbia, Missouri, United States

⁴ Department of Medicine, University of Padua, Padua, Italy

⁵ Department of Health Policy and Management, Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, United States

Abstract

Objective: Workplace violence (WPV) is a growing problem in healthcare with far-reaching consequences for health workers' physical and psychological wellbeing. This systematic review aimed to comprehensively synthesize the different types of WPV in radiology, its psychological impact, and the underlying risk and protective factors. *Methods:* We searched five electronic databases (PubMed, Web of Science Core Collection, Scopus, PsycINFO, CINAHL) and additional literature, including grey literature, and established weekly search alerts. Two reviewers independently conducted all methodological steps, involving a third reviewer in case of disagreement. *Results:* Of the 12,205 retrieved records, 103 full-text articles were evaluated, and 15 studies were included. Across studies, verbal aggression, sexual harassment (mostly against women), and physical violence were experienced by up to 100%, 84.6%, and 46.2% of health workers, respectively. Perpetrators were predominantly patients and patients' caregivers, followed by coworkers. Victims suffered from various psychological symptoms, such as anxiety (21.9% - 53.8%), fear (5.9% - 38.5%), depression (32%), and repeated disturbing memories (21.3%). Risk factors included female gender, understaffing, worker inexperience, poor communication, and lengthy waiting times. Social support and security personnel presence were among the identified protective factors. *Conclusions:* Health workers are at high risk of experiencing WPV in the radiological setting, with strong psychological impact. Radiological departments should create a safe healthcare environment that actively manages the identified risk factors and offer psychological support to affected workers.



The protective role of psychological flexibility in multiple sclerosis: A pilot web-based acceptance and commitment therapy study

Giulia Landi¹, Roberto Cattivelli¹, Kenneth Ian Pakenham²

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy

² School of Psychology, University of Queensland, Brisbane, Australia

Abstract

Introduction: Multiple sclerosis (MS) is one of the most common acquired neurological diseases and is associated with lower quality of life (QoL) and clinically significant psychological distress. This pilot study explored the effectiveness and feasibility of an online version of a group acceptance and commitment therapy (ACT) training resilience intervention for people with MS called “e-READY for MS”. *Methods:* 52 MS patients (85% female, Mage=49.28 years, Mtime since diagnosis=68.12 months) were randomized to the intervention (n=27) or waitlist control (WLC) (n=25). The primary outcome, resilience, and secondary outcomes (physical and mental QoL, distress, psychological flexibility) were assessed at pre- and post-intervention and 12-week follow-up. A significance level of $p < 0.10$ was used in the statistical analyses due to the low power of the sample. Changes in outcome variables between pre- and post-intervention were assessed using a 2 (group: intervention vs. WLC) \times 2 (time: pre vs. post-intervention) repeated measures ANOVA. *Results:* Intervention participants reported greater pre- to post-intervention improvements in anxiety ($d=0.54$) and stress ($d=0.63$) than WLC. Gains were maintained at follow-up. The 90% confidence intervals for the standardized mean difference between the intervention and the WLC on post-intervention revealed a trend for the intervention group to report greater improvements than WLC across all outcomes. Reliable Change Index data showed that compared to WLC, there were trends for more intervention participants to evidence clinically significant improvements in physical health QoL. Intervention retention was good, adherence to program progression guidelines was satisfactory, and program usability satisfaction was high, but study protocol attrition at post-intervention was low. Most participants viewed the intervention as enjoyable, helpful, and resilience building, and would recommend it to other people with MS. *Discussion:* The results of this pilot study provide preliminary evidence of the benefits of an online version of group ACT training for people with MS. Web-based intervention enable rehabilitation care that could reach more patients, improve disease



awareness, and offer continuity of care. Finally, higher levels of psychological flexibility and resilience could favor adherence to multidisciplinary care plans in people with MS.



“Facing down the demons on the boat”: Insights from Acceptance and Commitment Therapy (ACT) strategies in the outdoor to promote psychological flexibility in young adults with multiple sclerosis

Valeria Donisi^{1,2}, *Angela Campo*³, *Francesca Gobbin*⁴, *Marco Gagliani*³, *Giorgia Giusto*^{1,2}, *Russ Harris*⁵, *Giovambattista Presti*⁶, *Michela Rimondini*¹

¹ Department of Neuroscience, Biomedicine and Movement Science, University of Verona, Verona, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

³ Tender to Nave Italia Foundation, Geova, Italy

⁴ Unit of Neurology, Azienda ULSS 8 Berica, Arzignano, Vicenza, Italy

⁵ *private practice, Psychological Flexibility Pty Ltd*

⁶ Kore University of Enna, Enna, Italy

Abstract

Introduction: Multiple sclerosis (MS) is the most common neurological disease that causes disability in young adults. Different bio-psycho-social strategies have been introduced to help patients cope with the potential MS challenges, which might negatively impact on personal, relational, and professional development in a crucial phase of life. Promoting adaptive emotion regulation strategies and interpersonal experiences might contribute to wellbeing of young adults with MS (YawMS); enhancing the sense of mastery, psychological flexibility, acceptance of vulnerability and uncertainty linked to SM, and commitment to actions focused on personal values is of utmost importance to promote the process of adaptation to chronicity and disability. The aim of the current contribution is to describe and to provide insights on a small-scale piloting program based on Acceptance and Commitment Therapy (ACT) approach proposed in an immersive experience in a natural environment. *Methods:* Eleven young adults (age 18-45 years) with a diagnosis of MS have been recruited at the University Hospital of Verona to participate in a 5-days sailing experience on a brigantine (in collaboration with the Italian Navy). The experiential program has been defined in collaboration with Tender to Nave Italia Foundation. During the navigation YawMS will fill out a diary (with open questions) aimed to capture the key elements underling the process of personal growth and the benefits achieved. *Results:* The program is based on the Nave Italia method including pleasant, socializing, and challenging activities, practice of new behaviors,



facing fears, overcoming obstacles and personal challenges, in natural environment. Activities include sailing-related activities and psychosocial group activities. The “demons on the boat” ACT metaphor represents the underlying theme facilitating the YawMS in the process of learning from the experience. Qualitative data collected from participants will be reported and discussed. *Discussion:* Although the limited sample size, the results provide insights on the opportunity of applying ACT strategies in an outdoor setting to promote the complex process of adaptation of YawMS. The material collected will be used to create a video-documentary of the experience to encourage YawMS in the adaptation to MS and reduce stigma on SM in the general population.



Emotional intelligence and therapeutic adherence in kidney transplantation during COVID-19

*Maria Luisa Pistorio*¹, *Concetta De Pasquale*², *Silvia Platania*², *Massimiliano Veroux*³, *Noemi Barbagallo*¹, *Alessia Giaquinta*¹, *Pierfrancesco Veroux*¹

¹ Department of General Surgery and Medical-Surgical Specialties, University of Catania, Catania, Italy

² Department of Educational Sciences, University of Catania, Catania, Italy

³ Department of Surgical and Medical Sciences and Advanced Technologies, University of Catania, Italy

Abstract

Introduction: Non-adherence to therapy in transplant patients represents one of the main problems related to the loss of the transplanted organ. Psychological aspects and a low level of intrapersonal and interpersonal emotional intelligence with difficulty in managing "change" are associated with an increased risk of non-adherence to medical prescriptions. This study aimed to explore these aspects during a particularly stressful period: the COVID-19 pandemic. *Methods:* We evaluated 80 kidney transplanted subjects with the Emotional Intelligence Scale (EIS) to evaluate emotional capacity in dealing with stressful situations, the Multidimensional Assessment of COVID-19 Related Fears Scale (MAC-RF) to evaluate the fears of COVID-19 and the Basel Assessment of Adherence to Immunosuppressive Medications Scale (BAASIS) to evaluate therapeutic adherence. *Results:* Individuals with a higher level of education and with more years of transplantation showed greater mental stability ($r = 0.59$; $p < 0.05$; $r = 0.61$; $p < 0.05$). Regarding gender difference, women seemed to be less adherent to therapy ($r = 0.56$; $p < 0.05$), while years after transplantation negatively affected correct pharmacological intake ($r = 0.44$; $p < 0.05$). Regarding emotional skills, poor management of emotions negatively affected adherent behavior ($r = 0.54$; $p < 0.05$). *Discussion:* Our study was carried out during COVID-19 and highlights difficulties in management of self-perceived emotions and psychological aspects that negatively influence individual adaptation processes and therapeutic adherence in post-transplantation. Psychosocial rehabilitation interventions are desirable to plan strategies to strengthen the patient's resources, especially during a particularly stressful period in order to positively influence final transplant outcomes.



**THERAPEUTIC RELATIONSHIP AND OUTCOME IN PSYCHOTHERAPY: THE
IMPACT OF PATIENTS' AND THERAPISTS' FEATURES**

Proposer

*Annalisa Tanzilli*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Osmano Oasi*¹

¹ Department of Psychology, Catholic University of the Sacred Heart of Milan, Milan, Italy

Abstract

What accounts for the success (or failure) of psychotherapy? What are the active ingredients of psychological treatments that can promote patient change (understood not only in terms of symptomatic remission, but also in terms of promoting individual health and well-being)? Research in psychotherapy has made great strides in attempting to address these huge questions. Today, it is well established that relational factors, particularly the therapeutic alliance, are predictive of successful treatment outcomes. Equally empirically grounded are models that emphasize the impact of therapist variables (e.g., personality, defenses, attachment, empathy, responsiveness, etc.) and patient variables (e.g., symptom severity, personality, interpersonal functioning, etc.). The four contributions presented in this symposium fall electively into this line of research. Using multi-method and multi-informant approaches, these studies seek to highlight the effect of specific therapist, patient, and relational variables on treatment process and outcome. In the first presentation, Di Giuseppe, Aafjes-van Doorn, and Békés will investigate the relationship between the stability and maturity of therapists' defenses and the improvement of patients' defensive functioning, highlighting how the therapist can represent a "secure base" for the patient. In the second presentation, Fiorentino, Gualco, and Tanzilli will focus on therapist responsiveness and its association with other therapist, patient, and clinical relationship variables in order to shed light on the intra- and interpersonal processes of the patient-therapist dyad that guide the therapeutic process toward good outcomes. In the third presentation, Mirabella, Franco, Urgese, Riboldi,



Rugo, and Lingiardi will explore the influence of depressive symptomatology and eating disorder severity on the therapeutic alliance in relation to the outcome of individualized “multidisciplinary” therapeutic interventions. In the fourth presentation, Manzi and Innocenzi will examine the impact of negative countertransference patterns in the treatment of sexual minority parents, highlighting the importance of adequate knowledge of LGBTQ+ issues in avoiding microaggressive interventions associated with drop out and promoting affirmative treatment models. Clinical implications of the main findings will be addressed and discussed.



Therapists' defense mechanisms and their relationship with patient's outcome

*Mariagrazia Di Giuseppe*¹, *Katie Aafjes-van Doorn*², *Vera Békés*²

¹ Department of History, Culture and Society, Tor Vergata University of Rome, Rome, Italy

² Ferkauf Graduate School of Psychology, Yeshiva University, New York, United States

Abstract

Introduction: Research on defense mechanisms has largely demonstrated the impact of ego defenses on mental functioning. In psychotherapy, the increase in mature defenses and the decrease in immature defenses mean improvement in patient's implicit emotion regulation, a relevant aspect of therapeutic outcome. In the present study we have tested the relationship between therapist's defenses and patient's improvement in defensive functioning. *Methods:* A sample of 27 patients in psychoanalysis were tested. Transcripts of two initial sessions and two final sessions for each treatment were coded with the Defense Mechanisms Rating Scales (DMRS), assessing both therapist and patient defenses. Changes in the Overall Defensive Functioning (ODF) were analyzed to test therapeutic outcome, while changes in defense levels scores were analyzed to verify peculiar modification of defensive functioning after treatment. All data were extracted from the data source of the Psychoanalytic Research Consortium, to which we would like to express our acknowledge and gratitude. *Results:* At the early stage of psychoanalyses, therapists exhibited highly adaptive defensive functioning on average, while patients showed highly maladaptive defensive functioning, assessing them around a depressive and personality disorders range. Significant changes emerged in patients' defenses at the end of treatment, while therapists' defenses remained stable. Higher degree of association between patients and therapists' defenses were found at the end of treatment. *Discussion:* The stability and maturity of the therapist's defenses foster improvements in patient's defenses, which therefore lead to good outcome. These results suggest an adaptational process happening in the therapeutic relationship. Feeling the therapist as a "secure base", the patient gradually learns inside the dyadic partnership more adaptive ways of managing negative emotions, internal conflicts, and stressful situations, thus confirming the attachment-individuation hypothesis.



Countertransference and drop-out in clinical work with sexual minority parents

*Demetria Manzi*¹, *Eleonora Innocenzi*²

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

² Department of History, Culture and Society, Tor Vergata University of Rome, Rome, Italy

Abstract

Introduction: Clinical settings have become increasingly accepting of sexual minority parents, with overt forms of discriminatory practices being declined. Yet, overt forms of heterosexism could have been replaced with more subtle and covert forms, defined microaggressions. Because clinicians themselves may be subjected to the heteronormative culture in which they live, and premature termination is associated with negative outcomes for patients, this study examined the mediating role of therapists' emotional reactions on the influence of their beliefs about sexual minority parenting on drop-out by sexual minority parents and the moderating role of training on LGBTQ+ issues. *Methods:* The sample comprised 71 white cisgender therapists (Mage = 39.50; SD = 7.84; 67.6% women; 66.2% heterosexual) of different theoretical orientations who had treated a sexual minority parent in the last year for at least three sessions and whose consultation/therapy ended (spontaneously vs. dropped out). Each therapist completed the Beliefs About Families & Conception questionnaire, the Therapist Response Questionnaire, and ad-hoc questions to identify drop-out. *Results:* Several moderated mediation models indicated that therapists who were not trained in LGBTQ+ issues had more traditional beliefs about families and conception and, consequently, lower positive countertransferential responses and greater helplessness/inadequate, parental/protective, overwhelmed/disorganized, and hostile/angry countertransferential responses, which contributed to patients' drop-out. No significant direct effects emerged. *Discussion:* It is fundamental that therapists detect and monitor their countertransferential responses in their work with sexual minority parents to reduce the risk of affecting the working alliance and prevent drop-out. It is also important to provide therapists with adequate knowledge on LGBTQ+ issues and develop skills for working with sexual minority parents to shift from a microaggressive to an affirmative model of therapeutic treatment.



Exploring the impact of depressive symptoms on therapeutic alliance in patients with eating disorders

Marta Mirabella¹, Anna Franco², Alessia Urgese², Micaela Riboldi², Michele Angelo Rugo², Vittorio Lingiardi¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

² Eating Disorder Clinic “Residenza Gruber”, Bologna, Italy

Abstract

Introduction: Previous findings have shown that therapeutic alliance (TA) is commonly related to better therapeutic outcomes in the treatment of eating disorders (EDs). However, it is still unclear which factors may influence TA in the treatment of EDs. In this field of research, it has been suggested that depressive symptomatology along with the severity of eating symptoms can have significant effects on TA from both therapist and patient perspectives. *Methods:* A sample of fifty ED patients (AN=26; BN=24) aged 18-39 years and treated in a residential treatment setting, completed the Eating Disorder Inventory-3 (EDI-3) to evaluate eating symptoms and the Beck Depression Inventory (BDI) to assess depressive symptomatology at both treatment intake and discharge. In addition, the Working Alliance Inventory was fulfilled both by the patients (WAI-P) and therapists (WAI-T) after the first month of treatment and at treatment termination. *Results:* Differences emerged with respect to therapist-rated early TA between AN and BN patients, with lower levels of TA among BN patients, consistent with their higher severity of eating symptoms and depressive features. In addition, it was found that depressive symptoms and ED symptoms severity, influence patient-rated early TA particularly regarding the TA dimensions of goals and tasks, as well as depressive symptoms and ED symptoms severity negatively correlate with both patient- and therapist-rated TA at treatment discharge, particularly influencing patients' perceptions of therapy goals and tasks and therapists' perceived ability to set goals, tasks and bond. *Conclusions:* Exploring the influence of depressive symptoms and eating disorders' severity in the therapeutic alliance in this clinical population could be a key aspect in promoting more accurate and clinically useful treatment and “tailored” multidisciplinary therapeutic interventions focused on the specific characteristics of ED individuals.



Therapist responsiveness and clinical relationship in the treatment of patients with personality disorders: An empirical investigation

*Flavia Fiorentino*¹, *Ivan Gualco*², *Annalisa Tanzilli*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Center for Individual and Couple Therapy, Genoa, Italy

Abstract

Introduction: Therapist responsiveness refers to a crucial component of the clinician-patient relationship, defining how the therapist is with the patient and manifests flexibility, sensitivity, empathy, and availability. Being a responsive therapist means getting emotionally attuned to the patient, being able to read the interpersonal dynamics developing in the hic et nunc of the clinical interaction, and providing the most appropriate interventions consistent with the emerging relational context. Recent studies have emphasized the impact of this dimension in the treatment of patients with personality disorders (PD), but knowledge in this field of investigation is very limited. This research aimed to investigate the association between therapist responsiveness and some characteristics of the therapist, patient, and clinical relationship in the early stages of the psychotherapy. *Methods:* 82 pairs of therapists and patients (with PD) completed two instrument batteries consisting of the patient and therapist versions of the Patient's Experience of Attunement and Responsiveness Scale, the Working Alliance Inventory-SF, the Depth Scale of the SEQ, respectively. The therapists' battery also included the Therapist Response Questionnaire and the Comparative Psychotherapy Process Scale, while the patients' battery included the Defense Mechanisms Rating Scale-SF-30. *Results:* Overall, therapist responsiveness was related to the quality of the therapeutic alliance and the depth of content processing that emerged during the psychotherapy sessions. Good therapist responsiveness was strongly associated with the use of psychodynamic techniques. A negative correlation was found between therapist responsiveness, helpless/inadequate and disengaged countertransference patterns, and patients' worse defensive functioning. Finally, a statistically significant patient-therapist divergence was found in the assessment of therapist responsiveness. Patients tended to evaluate therapists' responsiveness more positively than the clinicians themselves. *Discussion:* This study seeks to shed light on the interpersonal processes in the patient-therapist dyads that help guide the therapeutic process toward better outcomes. The findings have



clinically significant implications and promote the development of best practices for planning effective individualized treatments for patients with PD.



**UNDER- AND OVEREATING DURING INFANCY, MIDDLE CHILDHOOD AND
ADOLESCENCE: A DISCUSSION ON HOMOTYPIC AND HETEROTYPIC
CONTINUITY**

Proposers

Loredana Lucarelli¹, Vismara Laura¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Discussant

Francesca Agostini¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

This symposium will focus on the neurobiological, relational, and psychological protective and risk factors that may lead to the development of feeding and eating disorders from infancy to middle childhood and adolescence. Research findings suggest that children with under- and over-eating are at risk for persisting eating problems, emotional dysregulation, and behavioral adjustment problems; furthermore, the tendency to eat more or less in response to emotions is strongly influenced by the relationship context. Assuming that psychopathology is a process that develops over time, this symposium will highlight the challenge for clinicians and researchers to identify the dysfunctional developmental trajectories of the process and to demonstrate the interconnectedness and influence of variables on the process at different phases of development. Neurobiological and genetic dispositions, the quality of current and early relationships with caregivers and peers, and the affective regulation patterns are all variables that may influence the individual's psychological functioning. Therefore, it is pivotal to consider a complex interweave of factors to fully understand each form of psychopathology and its evolution over time. Specifically, Loredana Lucarelli's research team will talk about the associations between maternal and paternal depressive symptomatology, their infant's temperamental negative affectivity and the development of impaired mother-child feeding interactions. Laura Vismara's research team will address the relevance of fathers in the development of their children's health, in particular on their feeding and eating behaviors, pointing out the importance to evaluate father-child



interactions by means of validated, standardized procedures. Claudia Mazzeschi's research team will analyze parents' attachment in relation to feeding practices and their six old years children with or without obesity. Caterina Lombardo's research team will provide data on the prevalence of weight stigma and body shaming, identifying risk and protective factors for associated dysfunctional eating behaviors. Research and clinical considerations of the above conditions will allow identification of variables that should be considered when planning effective prevention strategies and interventions.



Child negative affectivity and mother–child feeding interactions in the context of maternal and paternal depression

Loredana Lucarelli¹, Roberta Fadda¹, Cristina Sechi¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Abstract

Introduction: Although the impact of maternal depression on child development has received considerable research attention, there has been a relative lack of investigation into the effects of paternal depression on the mother-infant caregiving system and child affectivity. Notably, paternal perinatal depression is estimated to occur in a range from 1% to 25% of fathers, with a greater incidence observed when mothers also experience depression. This study aims to investigate perinatal depression in both mothers and fathers and examine the relationship between parental perinatal depression, negative affectivity in offspring, and the quality of mother-child feeding interactions at three and six months postpartum, adopting a transactional perspective. *Methods:* The study involved the participation of 136 first-time parents (68 couples) and their full-term infants when they were 3 and 6 months old. Edinburgh Postpartum Depression Scale was administered to the parents at three time points, namely T1 (28th week of pregnancy), T2 (when the infants were 3 months old), and T3 (when the infants were 6 months old). The Infant Behavior Questionnaire was completed by the parents at T2 and T3, and the quality of mother-infant interactions was assessed by videotaping and coding the interactions using the Feeding Scale. *Results:* The statistical tests demonstrated the persistent nature of both maternal and paternal depression. The results showed significant associations between maternal depression scores and negative affect during mother-infant interactions at 3 months postpartum, as well as infant food refusal and mother-infant interactional conflict at 6 months postpartum. Higher parental depression scores were linked to greater negative emotionality in infants. Additionally, the study found that paternal depression scores were associated with mother-child interactional conflict. *Conclusions:* Overall, the present study highlights the complex relationship between parental depression and early caregiver-child interactions, emphasizing the importance of a comprehensive and integrated approach to promoting child development that accounts for both maternal and paternal mental health.



Fathers and their children feeding and eating behaviors: a possible standardized observational/interactional tool

Laura Vismara¹, Cristina Secchi¹, Loredana Lucarelli¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Abstract

Introduction: Evidence is mounting that paternal involvement may have a short, medium, and long-term impact on their child's functioning. Feeding interactions through mutual exchanges forge attachment bonds at the core of healthy development. So far, most studies analyze mother–infant/toddler interactions. However, over half of the fathers share responsibilities in family meals and child feeding with mothers and a minority of them are primarily in charge of feeding. Indeed, paternal highly controlling parenting styles and feeding practices seem to be associated with overweight in their children. Instead, pressure to eat has been related with lower child body weight, the child's slowness in eating and emotional under-eating. Definitely, fathers' praise and modeling of healthy eating behaviors is linked with lower nutritional risk. In addition, fathers seem to lack in monitoring their child's eating in comparison with mothers and they are not as much capable to acknowledge their child's distress signals. Still, other studies found no significant differences in the feeding practices between mothers and fathers. *Methods:* These contradictory findings may depend from the lack of specific and validated measures for fathers; indeed, most of the applied observational instruments were originally designed to assess mother-child interactions. In a sample of 142 children ranging in age from 1 month to three years and their fathers (age range from 22 to 51 years; $M_{age} = 36.9$ years, $SD = 5.8$ years), the current study tested the reliability of the Feeding Scale. *Results:* Analyses showed satisfactory internal consistency, confirming that the Feeding Scales is reliable in the evaluation of father-infant/toddler feeding interactions. In additions, findings showed significant effects of the child's age and significant gender differences. *Conclusions:* The Feeding Scale is a promising observational procedure to study the role of fathers in the development of feeding behaviors of their infants and toddlers.



Parental feeding practices in childhood obesity. Which connection to mother attachment style?

Livia Buratta¹, Chiara Pazzagli², Luciana Pagano Salmi¹, Irene Severi¹, Claudia Mazzeschi¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Literature suggests as family plays a crucial role in the development of child' food-related behaviors and weight problems. The parental feeding practices are considered one of the most important determinants of obesity due to their role on child' self-regulation of eating. Previous study showed significant differences in specific feeding practices across children's BMI categories, from underweight to obesity. More recently literature began to be interested in studying of the parental feeding practices' determinates. The link between parents' attachment and child obesity is known, but few studies focused on parents' attachment and feeding practices. This case-control study aims (1) to evaluate in a large community sample (N=692) of Italian mothers of 6 years old children (54,5% males) which kind of feeding practice was the best predictor of obesity, and subsequently, (2) to explore the correlations between mothers' attachment style and their feeding practices, separately in normal weight and obesity group. Children were classified as normal weight (n=385), and with obesity (n=307), according to WHO' BMI categories. Logistic regression model highlighted that higher levels of mothers' restrictive feeding practices (OR = 1.43; 95% CI = 1.16–1.77; b = 0.36; p < .001), lower levels of pressure (OR = .34; 95% CI = .273 – .423; b = -1.08; p < .001) and monitoring (OR = .70; 95% CI = .55 – .88; b = -.34; p < .01) contributed to increase the risk for children of belonging to the group with obesity. The Pearson's correlation analysis did not show any relationships between attachment and specific feeding practices in children with normal weight, while in children with obesity, even if with a small size, monitoring feeding practice was positively correlated with secure attachment (r = .172**), and negatively with insecure attachment characterized by avoidant strategy (-.135*). Furthermore, in children with obesity, mothers' reward practice was positive related with higher levels of insecure attachment, characterized by anxious strategies (.129*). Data suggest that attachment, considered as a way of regulating affects, has a weak connection to parental feeding practice, at least in 6 yrs.-old children.



**Weight-based stigma, body shaming and disordered eating among high school students:
preliminary results of an intervention research**

Mariacarolina Vacca¹, Silvia Cerolini¹, Anna Zegretti¹, Andrea Zagaria¹, Caterina Lombardo¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Weight-based stigma is mostly defined as negative attitudes toward overweight (OW) and obesity (OB). It can be expressed as negative stereotyping resulting in social denigration (public stigma) or in the form of self-stigma (interiorized weight stigma) possibly leading to a vicious cycle associated with dysfunctional eating behaviors and marked weight gain. Results from the Italian context indicate alarming percentages of OW/OB in youth, especially among children (30%) and adolescents (14,6%). BS victims in childhood have a higher body mass index (BMI) than non-bullied peers and have a higher risk of developing obesity. Body Shaming (BS) - the act of bullying or insulting people by expressing negative opinions about their physical/body image - is reinforced by weight stigma and is particularly prevalent in the school contexts. The aims of the present study are: 1) providing data about the prevalence of weight stigma and BS in a sample of Italian secondary school students, 2) identifying risk and protective factors for weight stigma and BS and 3) assessing feasibility of a prevention program targeting the reduction of weight stigma and BS. *Methods:* A preliminary sample (N=451, age M=16.60, 38% F) completed a psychological testing before and after an intervention aimed at reducing interiorized weight stigma. *Results:* 31.93% of the students perceived themselves as overweight (N=144, age M=16.79, 41% F). Among the total sample, 35% reported peer-inflicted BS and 32% family-inflicted BS. A mediation model was conducted to verify the association between these variables. Results show that peer-inflicted BS predicts both directly ($B = 5,763, p = .044$), and through the mediation of internalized weight stigma ($B = 9,991, p < .001$), elevated levels of disordered eating, controlling for the effect of gender, age and the BMI. Additional analyses will be performed to assess the effectiveness and feasibility of the prevention program at the end of the program (June, 2023). *Conclusions:* Preliminary results indicate that WS and BS are widespread among secondary school children. Programs to prevent and contrast those phenomena are warrant among the school context in order to reduce psychological distress and prevent the development or maintenance of obesity and eating disorders.



Friday, 15th September 2023

THEMATIC SESSION

NEW FRONTIERS IN PSYCHOPATHOLOGY

Chair:

Rabih Chattat

University of Bologna

Andrea Fossati

Vita-Salute San Raffaele University



Online brief psychodynamic psychotherapy for anxious and depressed patients in an Italian Public Health Service: a longitudinal investigation

Arianna Teti¹, Simonetta Della Scala², Anna Pisterzi³, Salvatore Gullo¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² ASL Roma 6, Rome, Italy

³ Department of Psychology, University of Turin, Turin, Italy

Abstract

Although psychotherapy via videoconferencing could be a valid strategy to reduce some of the main problems related to the management of Italian public mental health services (such as waiting lists, patients' admission and treatment procedures), there is still scarce evidence regarding effectiveness of online brief psychodynamic psychotherapy conducted in this area. This study aims to compare the effectiveness of the Dynamic Interpersonal Therapy (DIT) for anxiety and depression conducted online with the same treatment (DIT) provided in presence. Fifty patients (87.1% females, $M_{age}=26.7\pm 7.6$) were enrolled and divided into the two study conditions: online and face-to-face treatment. Each patient attended 16 sessions of DIT in an Italian Public Health Service, provided by 14 therapists (92.9% female, age range 32-58) trained as DIT Practitioner who, in the online condition, used an ad hoc video conferencing room which also contained tools to assess outcome (pre-post change) and treatment monitoring (session-by-session changes). Outcome was assessed through patient's self-report: Clinical Outcomes in Routine Evaluation-Outcome Measures (CORE-OM), Inventory of Interpersonal Problems (IIP-32), and through clinician's assessment: Hamilton Depression and Anxiety Rating Scales (HAM-D, HAM-A). Session-by-session changes were monitoring through General Anxiety Disorder-7 (GAD-7) and Patient Health Questionnaire (PHQ-9). Preliminary results on online group show a significant reduction of symptoms at the end of therapy, as reported by patients (CORE-OM $t=2.68$, $p=.012$), and clinicians (HAM-D $t=5.51$, $p<.01$; HAM-A $t=5.34$, $p<.01$). Outcome monitoring shows a significant decreasing trend of anxiety (GAD-7, $\beta=-.20$, $p<.01$) and depressive symptoms (PHQ-9, $\beta=-.18$, $p<.01$). Further results regarding the longitudinal comparison between the two study conditions will be presented. The study provides evidence of effectiveness of DIT and the sheds light on the pattern of symptom change in brief psychodynamic therapies. Clinical implications of this study are related to the



possibility to prove equivalence in outcome and effectiveness between online and in presence conditions. This in turn could result in increasing the potential target population that can be treated by the service, reducing waiting lists and delivering an innovative, effective and empirically validated intervention.



Personality traits of adult patients with Hoarding Disorder

Virginia Alfei¹, Marco Menchetti²

¹ Department of Mental Health and Pathological Addictions, Local Health Unit Bologna, Bologna, Italy

² Department of Biomedical and Neuromotor Sciences, University of Bologna, Bologna, Italy

Abstract

Introduction: Hoarding Disorder (HD) is a mental disorder defined as the difficulty and discomfort in discarding objects, regardless of their real value, with large accumulation of domestic spaces to the point of compromising their default use. Since the publication of the DSM-5, HD has officially been a stand-alone diagnosis within the category “Obsessive Compulsive Disorder and Related Disorders”. However, little is known about the personality features of these patients. Prior research is conducted mainly on patients with obsessive-compulsive disorder or on pathological hoarding, prior the publication of DSM 5, showing the greater presence of dependent, avoidant, and schizotypal traits. However, only one recent study examined patients with HD, according to DSM 5 criteria, highlighting a higher prevalence of avoidant, dependent, depressive, and schizoid personality traits in this clinical sample. The aim of the present study was to assess personality traits of HD patients, focusing on the DSM 5 Alternative Model for Personality Disorders (AMPD). *Methods:* thirteen HD patients, 10 females (76.9%) with a mean age of 62.7 ± 9.7 years and an average education level of 12.1 ± 3.6 years, were recruited from Community Mental Health Centers to attend a specific treatment for HD. At baseline, patients completed a battery of test to assess HD with specific tests, such as the Structured Interview for Hoarding Disorder (SIHD), the Saving Inventory-Revised (SI-R) ($M = 57.7$, $SD = 14.7$) and the Clutter Image Rating (CIR) ($M = 4.38$, $SD = 1.5$). Personality characteristics were investigated through the Structured Clinical Interview for the DSM-5 Alternative Model for Personality Disorders (SCID-5-AMPD). *Results:* three patients (23.1%) presented a diagnosis of personality disorder: 1 patient reported avoidant personality disorder and 2 patients had schizotypal personality disorder. In general, avoidant and schizotypal traits appeared to be the ones most reported by our sample. Negative affectivity, detachment, and psychoticism were the personality domains with the highest mean scores. *Discussion:* knowing the personality features of patients with HD makes it possible to implement more targeted interventions as well as to track patients at risk of developing hoarding behavior in order to prevent the worsening of symptoms.



Prevalence and correlates of Alexithymia in the general population

Laura Sirri¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

Introduction: Alexithymia, the inability to recognize and describe one's emotions, has been significantly associated with an increased risk of different medical and psychiatric disorders and reduced quality of life. The aim of this cross-sectional study was to assess the prevalence and correlates of alexithymia in a community-based sample. *Methods:* Four hundred subjects (50% males, mean age 41.2 ± 15.3 years, range 20-70 years, 49.8% married or living as married) completed the Toronto Alexithymia Scale-20 (TAS-20), the Symptom Questionnaire (SQ), the Perceived Stress Scale (PSS), the 15-item version of the Interpersonal Support Evaluation List (ISEL-15), and the Brief Coping Orientation to Problems Experienced (Brief-COPE). *Results:* According to the TAS-20 cut-off values, 47 subjects (12%) were classified as "alexithymic", 60 (15%) as "borderline", and 293 (73%) as "non-alexithymic". In multiple regression analyses, the TAS-20 "difficulty identifying feelings" subscale was significantly predicted by perceived stress, lower social support, and use of denial and self-blame coping strategies, the "difficulty describing feelings" subscale by lower social support and lower use of the planning coping strategy, and the "externally oriented thinking" subscale by decreased social support, the use of the behavioral disengagement coping strategy, and a lower engagement in the emotional support and self-blame coping strategies. *Discussion:* These findings highlight a negative impact of alexithymia on the perception and management of stressful situations, with a low likelihood of adopting adaptive coping strategies and a tendency to engage in avoidant coping strategies. These difficulties in coping with stress may mediate the relationship between alexithymia and vulnerability to medical and psychiatric disorders. The low satisfaction with social support in subjects with higher alexithymia may be explained by the difficulties in expressing their feelings and needs to others, resulting in a decreased likelihood of receiving empathy and prosocial behaviors. Psychological interventions for alexithymia should include stress management techniques to enhance adaptive coping strategies and the ability to communicate the need for support. Further studies with a prospective design and an interviewer-based assessment of alexithymia are needed to confirm these findings.



IOP-29 and IOP-M failure rates in patients with schizophrenia with and without criminal convictions

Veronica Tatti ¹, Sara Pasqualini ², Salvatore Zizolfi ¹, Laszlo Erdodi ³, Donald J. Viglione ⁴, Claudia Pignolo ²

¹ Private Practice, Turin, Italy

² Department of Psychology, University of Turin, Turin, Italy

³ Department of Psychology, University of Windsor, Windsor, Canada

⁴ California School of Professional Psychology, Alliant International University, San Diego, CA, USA

Abstract

It is now well known that subjects in both clinical and forensic settings sometimes fail to provide credible test results. Therefore, the American Academy of Clinical Neuropsychology recently concluded in a consensus statement that the credibility of clinical and forensic presentations should be assessed with sound ad hoc instruments. These include symptom validity tests (SVTs) and performance validity tests (PVTs). The Inventory of Problems-29 (IOP-29) and the Inventory of Problems-Memory (IOP-M) are an SVT and a PVT, respectively, whose use has increased dramatically in recent years and for which there is a growing body of scientific evidence. Understanding the factors that contribute to SVT and PVT failure has important clinical implications. Accordingly, the present study examined the failure rates of IOP-29 and IOP-M in 109 patients with schizophrenia spectrum psychopathology with and without criminal convictions. This study also examined several potentially important variables, such as age, the presence of comorbidities, and the type of facility in which they were treated. As expected, very few individuals (< 5%) failed both the IOP-29 and the IOP-M, and those who failed both tests generally had a criminal record.



Neuroticism and ruminative thinking modulate the association between adverse life events and psychotic symptoms

Leonardo Fazio¹, Alessandra Raio², Giulio Pergola^{2,3} & IMAGEN Consortium⁴

¹ Department of Medicine and Surgery, LUM University, Casamassima (BA), Italy

² Department of Translational Biomedicine and Neuroscience, University of Bari Aldo Moro, Bari, Italy

³ Lieber Institute for Brain Development, Johns Hopkins Medical Campus, Baltimore, MD (USA)

⁴ Imagen Consortium

Abstract

A growing literature has shown how exposure to adverse life events (ALE) during childhood or adolescence increases the risk of psychotic outcomes. Maladaptive personality characteristics, as well as dysfunctional coping strategies, may influence the perceived burden and the ability to cope with ALE. However, it is unclear whether these variables may act as modulators of the risk of psychotic outcomes associated with ALE, and whether they may interact in that modulation. The purpose of this study is to evaluate the association between ALE and psychotic symptoms in young adults and to investigate whether this relationship is modulated by personality factors and dysfunctional coping strategies, such as ruminative thinking. We employed a nonclinical sample of 931 volunteers, 22 years of age, selected from the IMAGEN consortium dataset. The lifetime occurrence of events perceived as strongly adverse was recorded using the Life Events Questionnaire and psychotic symptoms were investigated through the Community Assessment of Psychic Experience (CAPE-42). Personality and ruminative thinking were investigated through the NEO Personality Inventory and the Ruminative Response Scale, respectively. Results showed that more ALE were associated with greater presence of psychotic symptoms measured with CAPE-42 (Spearman's r : 0.23, $p < 0.001$), higher neuroticism scores and higher score in ruminative thinking (Spearman's r : 0.24 and 0.20 respectively, all $p < 0.001$). Mediation analyses show a partial mediating effect of neuroticism and ruminative thinking on the relationship between ALE and total CAPE-42 when considered individually, while full mediation emerged when neuroticism and ruminative thinking entered the model together (direct effect Z : 1.1, $p = 0.3$; indirect effect - rumination Z : 3.2, $p = 0.002$ – 40% of the total effect explained; indirect effect - neuroticism Z : 3.6, $p = 0.001$ - 49% of the total effect explained; total effect Z : 3.3, $p < 0.001$). Similar results are found for the subscales of CAPE-42. Our data confirm that the presence of ALE may increase the risk of experiencing psychotic symptoms



in healthy subjects. They suggest that this risk may be due to the joint effect of intrapersonal variables, such as the tendency for emotional instability and upset, represented by neuroticism, and the use of dysfunctional coping strategies, such as ruminative thinking.



Exploring psychological inflexibility as a transdiagnostic factor in a clinical sample of psychiatric outpatients

Giovanni Tumminaro¹, Lisa Compare¹, Olivia Bernini², Alessia Grifoni¹, Carmen Berrocal²

¹ Department of Surgical, Medical and Molecular Pathology, and Critical Care Medicine, University of Pisa, Pisa, Italy

² University Counseling Services, University of Pisa, Pisa, Italy

Abstract

Psychological Inflexibility (PI) occurs when behavior is rigidly guided by internal events (e.g., thoughts, emotions, sensations) rather than personal values or external contingencies. PI has been hypothesized to be a transdiagnostic process that may account for a range of mental disorders. Few studies explored the relationship of PI with a broad range of mental disorders, and no study examined such a relationship in clinical samples. The present study examined PI as a transdiagnostic process across different mental disorders in a sample of psychiatric patients. Participants were 225 outpatients (60% female, M age = 35.7 yrs; SD = 15.7) recruited at the Psychiatric Units of the Santa Chiara Hospital of Pisa (Italy) and 100 adults without mental disorders (control group) (66% Female; M age = 35.9 yrs; SD = 15.7). Patients met DSM-5 criteria for at least one of the following disorders: Attention Deficit and Hyperactivity Disorder (ADHD; n = 36; 16%), Eating Disorder (ED; n = 11; 4.9%), Bipolar Disorder (BD; n = 65; 28.9%), Generalized Anxiety Disorder (GAD; n = 34; 15.1%), Major Depression (MD; n = 62; 27.6%), Obsessive-Compulsive Disorder (OCD; n = 15; 6.7%), Panic Disorder (PD; n = 28; 12.4%). Results from ANCOVA analyses, controlling for socio-demographic variables, showed that PI was significantly higher across the different diagnoses when comparing to the control group. The only exception was for the ADHD group, which showed similar levels of PI than the control group. PI was also significantly higher in patients meeting DSM criteria for multiple diagnoses than in patients having only one disorder. Furthermore, except for the ADHD group, the differences in PI across the different diagnoses were not statistically significant. This research extends previous findings by demonstrating in a clinical sample that PI is associated with a variety of mental disorders as well as to comorbidity. Identifying transdiagnostic processes for psychopathology is of great relevance for the development of psychological treatments that may be useful across multiple disorders, and hence more efficient.



Justice Sensitivity and psychopathology: systematic review of the literature and future perspectives

Anna Contardi¹, Francesca Russo¹, Emanuela Antonucci¹, Cecilia Blandizzi¹

¹ Department of Human Science, European University of Rome, Rome, Italy

Abstract

In recent years the investigation of personality traits has been a topic of increasing interest, especially for the diagnosis and tailored made treatment of some forms of psychopathology. Among the personality traits worthy of interest, Justice Sensitivity (JS) stands out, defined as a personality disposition indicative of the degree of involvement of the subject with respect to justice issues. JS has been shown to be a relatively stable and consistent personality variable over time, capable of predicting how people react to experienced or witnessed injustice in social contexts. In this paper we summarize and analyze the main results reported by the recent scientific literature. Our aim is to examine the relationship between sensitivity to justice and psychopathology. Studies that have investigated the possible manifestations of JS in specific psychopathological conditions have therefore been taken into consideration, as well as studies that have analyzed the relationship between changes associated with JS and pathological symptoms. A systematic search was conducted on the principal electronic scientific databases, and in compliance with inclusion and exclusion criteria, 7 articles were included. The research taken into consideration are both longitudinal and cross-sectional studies. Overall, an association emerged between JS and various psychopathological frameworks: eating disorders, borderline personality disorder, ADHD, anxiety disorders and social phobia, depressive symptoms, but also self-harm behaviors, use of drugs and peer victimization. Specifically, in some conditions JS can be considered a predictive and/or risk factor that favors the maintenance and worsening of the disease. The findings highlight that sensitivity to justice is a promising tool of investigation, both in the diagnostic phase and in the intervention phase. Indeed, understanding the nature of the relationship between JS and psychopathology could improve treatment and develop prevention strategies. Further studies are needed to strengthen the importance of this construct in clinical practice.



Friday, 15th September 2023

THEMATIC SESSION

**NEW FRONTIERS IN CLINICAL PSYCHOLOGY RESEARCH
AND TREATMENT**

Chair:

Francesco Gazzillo

Sapienza University of Rome

Gianluca Lo Coco

University of Palermo



The use of gamification to improve reading and writing abilities in children with typical development and children with Specific Learning Disorders

Francesca Anderle¹, Sara Monaro¹, Veronica Tranquillini¹, Liliana Carrieri¹

¹ Laboratory of Observation, Diagnosis, and Education - Department of Psychology and Cognitive Science - University of Trento, Rovereto, Italy

Abstract

Introduction: One of how children learn skills, such as reading and writing, is through play. Researchers are thus exploring gamification, namely using typical game elements in different and non-gaming contexts, including educational ones. Gamification is a methodology that originates from computer and serious games, and aims at redesigning activities to be more engaging, thus also developing intrinsic motivation. Furthermore, gamification has proven effective with typically developing children and children with Special Educational Needs (SEN). The research aims to investigate whether gamification can improve children's motivation, reading and writing skills. *Methods:* The design compares the effects of gamified Applications to that of equivalent, traditional pen-and-paper activities in mixed and non-specific school groups using neuropsychological tests. Furthermore, the effects are compared to those of individualized clinical treatment for children with Specific Learning Disorders (SLD) using the same gamified Applications. The gameful experience of the participants in each group was also investigated through a questionnaire. The training has a duration of 12 hours in schools or clinical contexts. The sample comprises one hundred forty-six (146) typical children (Mage=9.16, SD=0.92), divided into experimental and control groups and a clinical group of fifteen (15) children with SLD. *Results:* The results showed significant improvements in linguistic fluency and correctness for each group, with a non-significantly greater effect of the experimental gamified training. Students belonging to the experimental groups also reported greater appreciation of the activities, although motivation did not mediate performance improvements in any of the groups considered. Results in responses to the gameful experience, related to improvements in learning performance, were not significant but they were positively associated with learning. *Discussion:* Overall findings highlighted promising effects of the training programs on children's linguistic skills and grade of engagement, both in the schools and clinical contexts, but for children with SEN is better an individualized and personalized approach. These findings emphasize the importance of integrated training and are open to future studies investigating the effects of gamified Applications on other skills and motivational aspects.



Placebo vs Open-Label Placebo to Improve Visual Perception: A Pilot Study

Francesca Grosso ¹

¹ Department of Psychology, University of the Sacred Heart, Milan, Italy

Abstract

Introduction: The aim of this study is to manipulate mental schemas by comparing a classical placebo condition (without deception), an open-label condition (with deception), and a control condition, and to investigate whether individual characteristics can determine an improvement in visual performance. *Methods:* A pilot study was conducted on 63 participants (21 per group, following randomization). At baseline, self-report questionnaires were used to collect data related to stress, optimism, cognitive flexibility, and interoceptive awareness. The main outcome measure was the evaluation of visual performance, measured before and after the manipulation. *Results:* The preliminary results showed that the average number of errors in the post-assessment was lower than in the pre-assessment, and the repeated measures ANOVA indicated a significant interaction between interventions among the three groups, favoring the placebo group. The Wilcoxon Signed Ranks Test also revealed a statistically significant improvement in visual performance in the placebo group. The overall regression was also significant, and the manipulation significantly predicted an improvement in visual performance in the placebo group. *Discussion:* Placebo effects and the new open-label placebo paradigm suggest promising results in terms of better performance in the general population and the clinical one. Open-label placebos (without deception) emphasize the active role of the subject, engaged in promoting the effect. The results of this study are intended to shift the expectation of treatment, promoting greater adherence with wide-ranging effects, not only on the clinical population but also on the general population, in terms of increased quality of life and reduced perceived distress, as well as increased perception of control over one's life.



Adolescents online: opportunities, risks and awareness

Franco Bin¹, Rosa Disnan², Viviana Langher³

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

² Comprehensive Institute of Secondary School, Codroipo (UD), Italy

³ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

This research, composed by three studies, has investigated, with the first one, the relationship between adolescents and the new technologies and their awareness of the opportunities and risks associated with the use of New Media. The research, carried out in the Comprehensive Institute of Codroipo (UD) in the Friuli Venezia-Giulia Region, involved 100 students of the first grades of the "G. Bianchi " with an age between 10 and 12 during the school year 2021/22. The second study has measured the effectiveness of school educational interventions carried out in some first classes during the school year 2021/2022 and held by the teachers. These activities promoted the social and civic abilities and the responsible use of these new means of communication. A third study has verified the hypothesis of a significant relationship between the acquisition of ethical, social and digital skills and the increase of the personal children's well-being. 60 pupils were selected from the previous group, 30 of whom were a study group that followed the "Smartphone License Project" and others 30 who formed a control group that did not participate in the project. For this purpose, specific tests and questionnaires regarding Mood, Self-Esteem, Social relationships and the risk of Internet Addiction have been administered, before and after the attended project, at the two groups selected for the second study. The data analysis has permitted not only to collect useful information about the relationship among adolescents and the new technology but also has confirmed the effectiveness of the activities proposed in the classroom with a positive effect of the mood, self-esteem and social relationships and an increase of the awareness of the risks associated with surfing the Net.



The impact of professionals' questions within the clinical setting: can AI be a skilled assistant for therapists?

Christian Moro¹, Marco Cuccarini², Gian Piero Turchi¹

¹ Department of Philosophy, Sociology, Education and Applied Psychology, University of Padua, Padua, Italy

² Department of Mathematics, University of Padua, Padua, Italy

Abstract

Psychotherapeutic interventions aimed at promoting health for individuals and the overall community can have both beneficial and, in some cases, negative outcomes. These may be related to factors including the role of therapists and the interactive modes they use in their questions to patients. To start any intervention, in fact, it is necessary to gather text from patients. Therefore, the question becomes a fundamental strategy that allows both the generation of text and to use it to change patients' narrative. Being question formulation so crucial, on what can therapists rely on to be even more effective? Machine Learning and NLP techniques have seen preliminary work aimed at classifying intervention models and identifying behavioral descriptors for monitoring specific clinical situations. We explored the role and relevance of questions in relation to the analysis of clinical texts using MADIT methodology. In particular, we investigated if MADIT's ML algorithm renders the analysis more accurate by using precisely the question' objective - of description or evaluation - and language modalities to denominate the Discursive Repertoires (DRs). With a dataset of 13061 questions and answers we evaluated the accuracy of the model in two experimental situations, providing (a) answers only and (b) both the clinical questions and answers. We took two steps: passing the entire question string, and passing the additional information about the question objective and modalities. Results showed that the presence of the question slightly improves the performance of the overall ML analysis (from 0.39 to 0.43) and substantially for some individual DRs. In providing the additional information, the distributions for the two groups of questions had a set of DRs that remained identical, while not having proportional values. Thus, our results further highlight the relevance of therapists' questions and related interactive modes in the clinical setting, while confirming the different valence of their objectives in generating particular answer profiles. Also, preliminary MADIT's ML outputs tell us that ML algorithms are able to use the same information on questions as human experts. This allows us to anticipate that, with more training, they can be a valuable



support for therapists in their intervention for health promotion, e.g. by acting as recommender systems for effective question's formulation.



Social robots: therapeutic tools for children with neurodevelopmental disorders

Maria Valentina Cavarretta^{1,2,3}, *Sonia Ingoglia*¹, *Isis Truck*², *David Cohen*³, *Salvatore Maria Anzalone*²

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Department of Cognition, Language and Interaction, University of Paris 8, Paris, France

³ Department of Child and Adolescent Psychiatry, APHP, Hôpital de la Pitié-Salpêtrière, Paris, France

Abstract

Introduction: Artificial intelligence represents a new tool for the treatment of children with neurodevelopmental disorders (NDDs). Social artificial agents can produce verbal and non-verbal signals that are easy to understand. The introduction of such tools into therapy can present a possible choice of particular interest for children who are more unresponsive to a human therapist. Preliminary scientific studies have been oriented toward the use of technology in hospital and school settings and are mainly aimed at the treatment of Autism. Recently, some research has also concerned home intervention, focused on facilitating family involvement in children's therapy. The aim of this research is to explore this kind of scenario, focusing on the use of socially assistive robots for intensive care at home for children with NDDs. *Methods:* The research proposes the use of social robots to provide reliable and long-term intervention for children with NDDs. We will propose an intervention protocol inspired by the usual remediation procedures implemented at the hospital. The aim is to transfer such practices at home with the help of a social robot in a preliminary and feasibility study. The child will be emotionally involved with the robot, which will be perceived as a "transitional object", capable of thoughts and reactions. The persistence of the interaction of parents' and child's interaction with the robot will be logged by specifically designed devices to measure their involvement in the activities. *Results:* This preliminary study merges different disciplines: child psychiatry, clinical psychology, and computer science. We expect to use the system with one family as a case of study, formalizing metrics to evaluate and validate the system in further studies, and highlighting the possible challenges and pitfalls of the use of such complex systems in unstructured scenarios. *Discussion:* The current scientific studies show the difficulties and challenges of getting out of the laboratory to move towards the ecological environment of the home. The protocol will be custom-made with the help of the pedo psychiatry team of the Pitié-Salpêtrière Medical Hospital based on the difficulties and resources of children with NDDs. The



objective of the research is to check to which extent artificial intelligence can be a complementary tool, without replacing human intervention.



Attachment dimensions and internet gaming disorder: The mediating role of mentalization

Barbara Pizzini¹, Maria Giulia Sacco², Giovanna Nigro², Maria Ciccarelli², Marina Cosenza²

¹ Telematic University “Giustino Fortunato”, Benevento, Italy

² Department of Psychology, University of Campania - Luigi Vanvitelli, Caserta, Italy

Abstract

Internet gaming, one of the most frequent entertainment options among adolescents and adults worldwide, can result sometimes in pathological gaming behavior. Although, Internet Gaming Disorder has temporarily been included in DSM-5 as a psychiatric disorder, research on the psychological risk factors in determining internet gaming addiction is still in its infancy. Some studies suggested that insecure attachment style may predispose to develop problematic gaming. However, although the recent literature strongly argues that attachment could be better described as a dimensional, rather than categorial, construct, no studies so far investigated the role of specific attachment dimensions in gaming disorder. Moreover, very few studies investigated the role of mentalization deficit in gaming addiction and no studies have so far analyzed how reflective functioning impairments and insecure attachment dimensions interact in predicting internet problematic gaming. The main aim of the present study was to clarify the role of specific attachment dimensions in predicting internet gaming behavior, jointly investigating the putative mediating role of mentalization impairments in this relationship. A total of 548 adults (134 M) aged 18-58 years (mean age = 23,25) were administered an online survey including the Internet Gaming Disorder Scale-Short Form (IGDS-SF), the Reflective Functioning Questionnaire (RFQ-8) and the Attachment Style Questionnaire (ASQ). The results of the hierarchical linear regression analysis showed that male gender, high scores on Uncertainty about mental states (RFQ-8), and higher scores on ASQ's subscales Relationships as secondary and Need for approval, were significant predictors of more problematic internet gaming behavior. Furthermore, mediational analysis revealed that the effects of both ASQ's subscales on internet gaming behavior were mediated by Uncertainty about mental states. The present study supports the hypothesis that avoidant (Relationships as secondary) and anxious (Need for approval) attachment dimensions could lead to seek refuge in gaming behavior. Additionally, the present results showed that this relationship could be worsened by mentalization failures.



Friday, 15th September 2023

ROUND TABLES



**CLINICAL PSYCHOLOGY OF AGING, HUMAN RIGHTS AND POLICIES FOR
DEPENDENCY**

Proposer

*Rabib Chattat*¹

¹ University of Bologna

Chair

*Maria Catena Ausilia Quattropani*¹

¹ University of Catania

Participants

Davide Maria Cammisuli, Catholic University of Sacred Heart of Milan

Maria Casagrande, Sapienza University of Rome

Rabib Chattat, University of Bologna

Anna Maria Della Vedova, University of Brescia

Donatella Petretto, University of Cagliari

Alberto Sardella, University of Messina

Abstract

Nowadays, there are 14 million older adults (over 65 years) who are expected to live a long life. Living longer is definitely a great social achievement, though a question is “We are living longer lives, but are we healthier?”. Our Manifesto entitled “Clinical Psychology of Aging” (Chirico et al., 2023) aimed to highlight the crucial role that the Clinical Psychology plays in enabling older adults to cope with multiple challenges associated with the aging process and disease-related issues. Older adults may experience psychological suffering due to retirement shock, death-mourning-widowhood, social isolation, cognitive and physical fatigue, low self-esteem, loss of motivation, inability to plan, identity crisis. Although there is evidence that psychological interventions are equally effective for older and working-age adults, older



adults are widely under-represented in public health services. On the other hand, older adults' common mental disorders such as depression or anxiety are associated with negative outcomes such as increased risk of cognitive impairment, dementia and earlier mortality. In this scenario, the Clinical Psychology of Aging offers theories, methods and tools suitable for: a) mental health promotion and prevention initiatives; b) person-centred interventions (psychological, psychosocial, psychotherapy); c) the development of psycho-diagnostic tools, including information technology or robotic support. All these aspects will be described in our Round Table in view of existing policies and implementing acts concerning Enabling Law 33/2023 on non-self-sufficient elderly population. The issue of inequalities in the access to care and cultural aspects related to self-determination and human rights will be discussed as well.



HEALTHY AND PATHOLOGICAL NARCISSISM: WHERE IS THE BORDER?

Proposer

*Vittorio Lingiardi*¹

¹ Sapienza University of Rome

Chair

*Maria Francesca Freda*¹

¹ University of Naples Federico II

Participants

Benedetto Farina, European University of Rome

Vittorio Lingiardi, Sapienza University of Rome

Fabio Madeddu, University of Milano-Bicocca

Maria Ponsi, Italian Psychoanalytical Society

Abstract

The theme of narcissism, traditionally one of the most complex areas in clinical and dynamic psychology, has received increasing attention in recent years. After the initial systematizations in the 1980s that led to controversial definitions of Narcissistic Personality Disorder in the DSM and a wide-ranging debate on treatment and types of presentations, the literature has provided new insights on various fronts. Empirical research, attachment, different models of the mind, a focus on the relational aspects of the treatments have all led to renewed attempts at definitions of narcissism, both in the healthy and pathological forms. In the last decade, some key themes in particular seem to be emerging, prompting clinicians and researchers. Among these are the role of grandiosity and avoidance, the centrality of emotions such as anger and shame, the theme of more or less adaptive subtypes, and the boundaries between 'healthy' narcissism and pathological narcissism. Accompanying these themes is the widespread sensation, echoed at various levels, that many of these questions not only challenge our field but the entire social context, redefining needs, desires, and relationships. The roundtable takes up and engages with these themes,



seeking to provide an updated framework for understanding the state of the art in the reflection on narcissism.



**CLINICAL PSYCHOSOMATIC: THE MANAGEMENT OF CHRONIC DISEASES IN
DIFFERENT HEALTHCARE SETTINGS – IN MEMORY OF MARIO FULCHERI**

Proposer

*Silvana Grandi*¹

¹ University of Bologna

Chair

*Maria Cristina Verrocchio*¹

¹ University “G. d’Annunzio” of Chieti-Pescara

Participants

Gianluca Castelnuovo, Catholic University of Sacred Heart of Milan

Lidia Del Piccolo, University of Verona

Piero Porcelli, University “G. d’Annunzio” of Chieti-Pescara

Maria Grazia Strepparava, University of Milano-Bicocca

Abstract

The roundtable discussion titled: “Clinical psychosomatic: the management of chronic diseases in different healthcare settings” is dedicated to the memory of Professor Mario Fulcheri, a distinguished scholar and a prominent figure in the field of psychosomatics. It is interpreted as a discipline of integration into clinical practice, according to the biopsychosocial model, which has led the conceptualization of health-related problems in an integrated way, improving dialogue and encouraging the collaboration of professional figures in the healthcare area.



Friday, 15th September 2023

SYMPOSIUM SESSION



**SOCIAL COGNITIVE PROCESSES IN PERSONALITY DISORDERS: NEW INSIGHTS IN
INTRAPERSONAL DYNAMICS AND INTERPERSONAL FUNCTIONING**

Proposer

*Emanuele Preti*¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Discussant

*Gianluca Lo Coco*¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Disturbances in processing interpersonal cues are central to personality disorders, but the underlying mechanisms are still to be fully elucidated. Furthermore, fluctuations of intrapersonal manifestations of personality pathology influence the way maladaptive personality traits impact interpersonal functioning. In the present symposium, we will describe potential mechanisms accounting for interpersonal dysfunction in PD using novel experiments across different levels and methods of analysis (i.e., self-reported, laboratory-based, longitudinal daily ambulatory assessment), thereby highlighting potential foci of intervention. The first presentation (Di Pierro et al.) will focus on detecting profiles of narcissistic functioning by examining expressions of narcissistic states in daily life. The second presentation (Somma et al.) will explore relationships among psychopathy, attachment problems, and emotion activation. The third presentation (Tanzilli et al.) will investigate the relationship between narcissistic admiration and rivalry and different aspects of individual mental functioning, such as defense mechanisms, mentalization, and social mentality. The fourth presentation (Preti et al.) will present data on trustworthiness sensitivity and borderline personality disorder traits.



Daily diary ratings of grandiose and vulnerable narcissism: A cluster analysis

Rossella Di Pierro ¹, Fabio Madeddu ¹, Marco Di Sarno ¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: Pathological narcissism (PN) entails both grandiose (GN) and vulnerable narcissism (VN). These can be studied both at the variable-level – focusing on the constructs, such as on their covariation – and at the person-level, focusing on subjects and grouping individuals on the basis of their similarities and differences in grandiose and vulnerable manifestations. While there is emerging agreement on the defining features of GN and VN at the variable-level, controversies still exist when looking at the person level. For instance, there is no definitive understanding of the nature of grandiose and vulnerable narcissism as subtypes or rather as fluctuating/coexisting dimensions. *Methods:* In this work, we perform a cluster analysis on the joint trajectory of daily ratings of grandiose (GN) and vulnerable narcissism (GN), collected during a 28-day experience sampling study (N = 196 participants). *Results:* We use multiple criteria to find the best partition, which identifies three discrete clusters of individuals: a “low PN” cluster with below-average levels of both grandiose and vulnerable daily manifestations; a “high VN” cluster, displaying average daily GN and above-average levels of daily VN; a “high GN” cluster, with above-average levels of daily GN but below-average levels of daily VN. The three clusters differ on several trait measures of maladaptive narcissism, as well as on measures of trait self-esteem and shame. Non-significant or less sharp inter-group differences emerge regarding impairment in personality organization and stability/variability of daily narcissism. *Discussion:* We conclude that the constructs of daily GN and VN define corresponding groups of individuals with either high GN or VN, the latter group being more emotionally distressed. Yet, this group also shows at least some levels of trait and state GN. To the best of our knowledge, this is the first study that applies person-centered analyses to longitudinally assessed manifestations of narcissism.



Emotion Activation and Attachment in Psychopathy: A Study in Adolescence

*Antonella Somma*¹, *Carlo Garofalo*²

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

² Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

Introduction: Although different conceptions of psychopathy exist, psychopathy usually refers to a form of personality pathology characterized by prominent behavioral deviancy in the presence of distinctive interpersonal and emotional features. Previous studies open the possibility that rather than being completely unresponsive to emotional materials, individuals scoring high on psychopathy may be not just hypo-reactive to emotional stimuli, but they could process emotional information in a substantially different way. Thus, studying emotion processing may be important to understand possible developmental correlates of psychopathy; indeed, an increasing amount of data documented significant associations between disturbances in attachment and psychopathic traits. Against this background, the present study aims at evaluating the relationships between psychopathy and emotion regulation processes in adolescence, while considering the role of adult attachment. *Methods:* The sample was composed of 364 Italian adolescents who were administered the Italian translation of the Triarchic Psychopathy Measure (TriPM), the Youth Psychopathic Traits Inventory (YPI), the Attachment Style Questionnaire (ASQ), and a set of four video-clips that were expected to elicit positive emotion ($k = 2$) and negative emotions ($k = 2$). *Results:* The TriPM and YPI total scores, as well as the ASQ Relationship as Secondary scale, were associated with higher subjective levels of positive emotion activation to video-clips that were expected to elicit negative emotions, as well as with higher subjective levels of negative emotion activation to video-clips that were expected to elicit positive emotions. When ASQ Relationship as Secondary scores were held constant, the strength of the relationship between emotion activation and psychopathy decreased in size; similarly, when the effect of psychopathy was controlled for in partial correlation analysis, the relationship between dismissive attachment and emotion regulation markedly decreased. *Discussion:* The results of the present study may be useful in clarifying the associations among psychopathy, emotion regulation and attachment using an experimental paradigm for emotion activation in adolescence.



The Trustworthiness Sensitivity Questionnaire (TSQ): Development of a new tool for the assessment of Sensitivity to trust in Borderline Personality Disorder

Emanuele Preti¹, Juliette Richetin¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: Many symptoms of Borderline Personality Disorder (BPD) occur within interpersonal contexts. A typical BPD feature that may compromise the quality of their interpersonal exchanges is the untrustworthiness bias: the exaggerated appraisal of whether others will reject, be dishonest with, negatively judge, or otherwise emotionally hurt oneself. Several studies suggested that BPD patients have a generalized mistrust of others resulting in appraisal of greater untrustworthiness in neutral faces and a greater sensitivity to others' untrustworthiness. We thus aimed at developing a measure of trustworthiness sensitivity (the Trustworthiness Sensitivity Questionnaire) to assess a cognitive-affective disposition to anxiously and angrily expect, readily perceive, and overreact to situations involving trust, specifically designed to measure difficulties related to BPD traits. *Methods:* We created a set of trustworthiness-related scenarios, elaborated from interviews with clinicians. We tested these situations in a sample of therapists and selected the situations that best represent trust issues and that are more specific to BPD patients. We then administered the selected situations to a community sample (N = 233) to explore the factor structure of the questionnaire, its convergent validity with other measures of trustworthiness, and its associations with BPD traits and Rejection Sensitivity. Finally, we administered the final set of situations to another community sample to confirm its factorial structure and test its convergence with trust-related tasks (i.e., a trust game and a trust appraisal task). *Results:* The initial set of 55 scenarios was reduced to 28 based on clinicians' judgments. These situations were then factor-analyzed in the second study and this yielded a final set of 10 situations that compose the Trustworthiness Sensitivity Questionnaire (TSQ). The TSQ showed good psychometric properties including correlations with measures of propensity to trust and suspiciousness and BPD traits. *Discussion:* The TSQ can be used to assess a specific social sensitivity (i.e., sensitivity to trust) in personality disorders. Research and clinical implications will be discussed.



Two shades of narcissism and their associations with defense mechanisms, mentalization, and social mentalities

Annalisa Tanzilli¹, Marianna Liotti¹, Flavia Fiorentino¹, Elisa Allegrini¹, Francesco Dentale¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome , Rome, Italy

Abstract

Introduction: To date, the understanding of narcissism, its variants and the underlying cognitive, emotional, motivational and behavioral processes is still limited. Recently, a model that distinguishes two dimensions of grandiose narcissism - admiration and rivalry - has been proposed. Admiration is characterized by self-enhancement strategies, such as the pursuit of uniqueness, grandiose fantasies, and fascination, while rivalry is characterized by self-defensive processes, such as the pursuit of supremacy, devaluation of others, and aggression. This study aimed to investigate, in a nonclinical sample, the relationship between these dimensions and different aspects of individual mental functioning, such as defense mechanisms, mentalization and social mentality, to shed light on the intra- and interpersonal dynamics of narcissism. *Methods:* 478 participants (309 M, 169 F; ages 18 to 30) completed an online survey including the Narcissistic Admiration and Rivalry Questionnaire, the Defense Mechanism Rating Scales Self-Report-30, the Reflective Functioning Questionnaire, the Social Mentalities Scale. Pearson correlations and stepwise multiple regression analyses were performed to investigate the relationships between the dimensions of narcissism and the other variables. *Results:* Overall, higher levels of narcissistic traits were strongly associated with lower overall defensive functioning, poor levels of mentalization, and high agonism. Notably, lower minor image-distorting defenses showed strong correlations with both dimensions of narcissism, but rivalry was also predicted by acting defenses. Admiration and rivalry traits were associated with lower certainty of one's own and others' mental states; in particular, rivalry traits were closely associated with hypomentalization. Finally, both rivalry and admiration showed significant correlations with agonism, and rivalry traits were predicted by lower degree of prosociality. *Discussion:* The narcissistic traits of rivalry and admiration appear to be related to distinct features of mental functioning. The need for a deeper understanding of the intra- and interpersonal processes underlying the different dimensions of narcissism is critical. Clinical implications on the relational dynamics that develop with individuals with elevated narcissistic traits are addressed and discussed in light of these findings.



**RESEARCH ON “FRONTIERS”. INTERCULTURAL CHALLENGES, FORCED
MIGRATION AND WAR EXPERIENCE FROM CLINICAL AND DYNAMIC
PSYCHOLOGY PERSPECTIVE**

Proposer

*Giorgia Margherita*¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Discussant

*Cinzia Novara*¹

¹ Department of Psychological, Educational Sciences and Human Movement, University of Palermo, Palermo, Italy

Abstract

Current social and cultural scenarios related to forced migration and war-related displacement have recently been the focus of international political and humanitarian concerns and undoubtedly pose a challenge to psychology. This symposium will provide an opportunity to discuss the role of research in dynamic-clinical psychology in this field. The mental health assessment of vulnerable foreign citizens, refugees, asylum seekers, as well as aspects of workers' mental health will be considered. Particular attention is given to clinical interventions and the practices of reception and care services. Lagetto contribution offers a systematic review of interventions in the field of migration, while Ali, Aquilanti and Lai analyse the role of attachment styles between the impact of war and psychological symptoms and posttraumatic growth in the Libyan citizens. The perspective of operators working in the field of forced migration will be considered in Tessitore, Caffieri, Cozzolino and Margherita's work on the role of emotion regulation in relation to secondary traumatic stress, burnout and job satisfaction and in Troisi and De Luca Picione's work on intervention models useful for the reception and treatment of refugee women victims of violence. The intertwining of psychic and social determinants of psychological distress and health promotion will be discussed, as will the clinical implications of these research findings.



The emotional challenges of working with forced migrants: The mediation role of emotion regulation between secondary traumatic stress, burnout, and compassion satisfaction

Francesca Tessitore¹, Alessia Caffieri², Mauro Cozzolino¹, Giorgia Margherita²

¹ Department of Humanities, Philosophy and Education, University of Salerno, Salerno, Italy

² Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

Introduction: Due to vicarious exposure to severe traumatic experiences, professionals working in the field of forced migration present an elevated risk of developing high levels of secondary traumatic stress and burnout as well as low levels of job satisfaction. In the field of forced migration, the relationship between these variables is currently poorly explored, as well as the role played by emotional regulation in contributing to the professional quality of life. The present study explores the levels of emotion regulation and the quality of professional life, intended in terms of secondary traumatic stress, burnout, and compassion satisfaction, of professionals working in the field of forced migration in Italy. Furthermore, it aims to test the potential mediation effect performed by emotion regulation in relation to the different levels of the professional quality of life. *Methods:* A survey developed ad hoc comprehensive of a socio-demographic profile and the Italian versions of the Professional Quality of Life Scale, Secondary Stress Traumatic Scale, Difficulties in Emotion Regulation Scale was administered online. The levels of psychosocial health and the relationships between the investigated variables were analyzed through descriptive statistics and correlation analyses. Mediation hypotheses were tested through a structural equation model (SEM). *Results:* 264 professionals working in the field of forced migration answered the survey. The results show good average levels of psychosocial health in participants. Increased levels of secondary traumatic stress were associated with an increase of burnout both directly and indirectly through the mediation of emotion regulation. Emotion regulation also totally mediated the relationship between secondary traumatic stress and compassion satisfaction. *Discussion:* The results have several practical implications from a preventive and clinical intervention perspective. Findings suggest that working on improving emotion regulation skills and processes of operators exposed to the refugee trauma could reduce the risk of developing burnout. Furthermore, the results suggested that implementing supervision interventions that focus on the professionals' emotion regulation will assist in improving the professional satisfaction of operators as well as their well-being.



Psychological intervention in the field of migration: A systematic review

*Gloria Lagetto*¹

¹ Department of Human and Social Sciences, University of Salento, Lecce, Italy

Abstract

Background: What aspects of the migration phenomenon characterize the interests of researchers in the field of psychological intervention with migrants? To answer this question, and also considering the efforts of the reception services to integrate the figure of the psychologist into their teams, we conducted a systematic review of the scientific literature with a focus on (1) the types of publications on this topic, (2) the object of the intervention, (3) the type of psychological intervention and (4) the population target of the intervention. *Methods:* A search was conducted in the electronic databases MEDLINE, APA PsycInfo, and APA PsycArticles to identify the literature that dealt with psychological intervention in the field of migration between 2012 and 2022. A total of 371 articles were included in this review. *Results:* Most of the articles were empirical (64%) – of them, a large majority adopted a quantitative approach (48%) followed by mixed-methods studies (20%), qualitative studies (16%), and meta-analyses and systematic reviews (16%). The rest of the publications were theoretical (16%). Regarding the object of psychological intervention, 36.6% focused on PTSD and other related disorders, followed by 15% of studies focusing on depressive aspects. A minority of studies (1-5%) focused on anxiety, intimate partner violence, substance abuse and suicide. Considerable heterogeneity emerged regarding the types of psychological intervention, with group therapy (8,9%) and individual behavioural interventions (7%) standing out slightly. Other psychotherapeutic approaches (e.g., psychodynamic) seem not to have received attention. Finally, interventions focusing on trauma are conducted predominantly on refugees and asylum-seekers (59,3%), while psychosocial and supportive interventions concern mostly economic migrants and their problems related to prejudice and adjustment difficulties (40,7%). *Discussions:* We found a plurality of researchers' interests in the field of psychological intervention with migrants and a predominance of quantitative studies in addressing the issue. Interestingly, the distinction between the political refugee and economic migrant status is associated with different psychological interventions. Implications and future research are discussed.



Overcoming the Civil Wars: The Role of Attachment styles between the Impact of War and Psychological Symptoms and Posttraumatic Growth in the Libyan population

Mobamed Ali¹, Ilaria Aquilanti¹, Carlo Lai¹

¹ Department of Dynamic and Clinical Psychology, and Health studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: The several civil wars in Libya between 2011 and 2020 resulted in a high number of deaths, injuries, refugees, rising insecurity, and financial crises. The general population suffered from the consequences of these significant wars, including violence against innocent civilians, kidnappings, property damage and loss, and resettlement. The present study aimed to explore the associations between the impact of war and psychological symptoms and posttraumatic growth (PTG) and to evaluate the role of the two insecure attachment dimensions (avoidant and anxious styles) as mediators in these relations in the Libyan population. *Methods:* Participants were 147 females and 153 (M = 31.0, SD = 8.37; Range = 18–63) from Libya. The participants completed the Impact of event scale Revised, Experiences in Close Relationships, The patient health questionnaire, Posttraumatic Growth Inventory-Short Form, and a sociodemographic questionnaire. After completing the data collection on the Google form platform, Spearman correlations between the IES- R total, the ECR subscales, and the PHQ and PTGI-SF subscales were performed. A Structural Equation Model (SEM) was built to investigate the effect of war trauma on mental health and PTG both directly, and indirectly through attachment dimensions (avoidant and anxious attachments). *Results:* Structural equation model revealed that insecure attachment dimensions mediated the association between the posttraumatic stress symptoms (PTSS) and psychological symptoms and posttraumatic growth. The PTSS was positively related to psychological symptoms, PTG, and both insecure attachment dimensions. Insecure attachment dimensions were positively associated with psychological symptoms and negatively with PTG. *Conclusion:* The finding of the present suggested that psychological interventions should consider insecure attachment dimensions, when evaluating the consequences of prolonged and repeated wars. Moreover, screening interventions could be implemented to identify the individuals who could benefit from interventions that promote greater emotional sharing or which improve emotional regulation skills. Lastly, clinical interventions that involve collective sharing of the traumatic event might be useful, considering the positive effects that sharing the traumatic event has positive effect on PTG and mental health.



African women refugees victims of violence: the 2 experience of MIA project's operators

Gina Troisi¹, Raffaele De Luca Picione¹

¹ Department of Law, Giustino Fortunato University, Benevento, Italy

Abstract

Although the phenomenon of forced migration is on the rise, to date the policies for the integration of refugees in host countries have been mostly 'gender-neutral'. The number of women who have sought refuge from poverty, persecution and conflict has increased significantly both in the European Union and in Italy. Migrant women suffer numerous forms of violence such as rape, forced prostitution, female genital mutilation, forced marriages, which are the triggers that push women to leave their country, but they are also the main risks to which they are exposed during the migration journey. The "MIA project" was born with the aim of experimenting an integrated model of complex assistance to African women refugees who are victims of violence, through the comparison between the experience of a multidisciplinary group of operators belonging to the migration sector and that of gender-based violence. The aim of the study was to explore the experience of the operators of the MIA project in order to identify complex intervention models useful for the reception, treatment and empowerment of refugee women who are victims of violence. This study presents a qualitative research methodology, integrating the use of focus groups with interpretive phenomenological analysis (IPA). The use of the multidisciplinary team makes it possible to grasp the complexity of the phenomenon under study through a multi-perspective vision. 14 operators of the MIA project (7 experts in the field of gender violence, 7 experts in the field of forced migration) participated in 16 focus groups on a monthly basis. The analysis led to the development of 3 superordinate themes: 1. The crossing of operators; 2. The violence of interpretation; 3. Feminine plural. The study confirms the need to build new tools to cope with the load of vulnerability brought by forced migrant African women and how this is possible through comparison and dialogue between cultural and professional differences, offering some useful reflections in terms of clinical implications.



**INNOVATIVE APPROACHES IN PSYCHOPATHOLOGY: EVOLUTIONARY,
NEUROBIOLOGICAL, AND BEHAVIORAL ASPECTS UNDERLYING
PSYCHOPATHOLOGICAL PHENOMENA**

Proposer

*Alessandro Zennaro*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Discussant

*Laura Ferro*¹

¹ Department of Psychology, University of Valle d'Aosta, Aosta, Italy

Abstract

This symposium includes studies that have adopted innovative approaches to understanding psychopathological phenomena. These approaches deviate from the primacy of diagnostic categories (e.g., DSM or ICD) to determine what is pathological and what is not. Rather, they seek a) to capture the complexity of psychological functioning in individuals by examining the original, adaptive mechanisms whose functions may have changed over the course of an individual's development b) and in conjunction with the environment, contributing to the psychopathological phenomenon. Oliva and colleagues present a study that examined the association between GAS infections, autoimmunity to neuronal structures underlying ADHD (basal ganglia), and a genetic predisposition to altered innate immune response and persistent ADHD. In their study, Palmieri et al. validated a new questionnaire to measure state empathy - i.e., a context-specific empathic response to a given stimulus during an interpersonal exchange with another person - according to the conceptualizations of tripartite empathy, i.e., with the affective, cognitive, and prosocial subcomponents. Zagaria et al. focus on the evolutionary approach based on the concepts of motivation and life history theory and present a related preliminary case study. Andò & Brienza conducted a study aimed at understanding the motivations underlying hoarding disorder according to the evolutionary and the dimensional psychopathological approaches.



From nest to organized chaos: Dispositional and motivational structure in hoarding disorder

Agata Andò¹, Lorenzo Brienza¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Hoarding disorder (HD) has been recognized as an independent diagnostic disorder by the DSM, although clinical attention has long been given to this phenomenon. From an ethological and evolutionary perspective, hoarding could be understood as a motivational system triggered by an affective cue of insecurity and interrupted by an affect of comfort and security to stop hoarding; individuals with strong hoarding could be characterized by a motivational system triggered by an affective state of chronic insecurity, which precludes the ability to stop this mechanism. The study aims to understand the motivations underlying hoarding disorder based on the evolutionary and dimensional psychopathological approach. Currently recruited participants (N=317) were classified into hoarding and non-hoarding groups using the Hoarding Severity Scale (UHSS). An online form included interactive games and the following tools: the Affective Neuroscience Personality Scale short (ANPS-S) to assess primary (affective) emotions that may be associated with a positive rewarding experience or a punishing negative experience; the Reinforcement Sensitivity Theory Personality Questionnaire (RST-PQ) because it evaluates the activation of two neurobehavioral systems regulating avoidance of negative stimuli (Behavioral inhibition system; BIS) and approaching to stimuli (Behavioral Approach System; BAS); the Big-5 II questionnaire to assess thought processes underlying certain behaviors that characterize the personality traits and originating from the interplay of emotions, cognition, and relationship to the environment. From the preliminary analyses, it emerges that hoarders are more characterized by primary emotions with negative affective valence (e.g., ANPS Fear, $t(308) = -3.84, p \leq .01$; ANPS Sadness, $t = -5.01, p \leq .01$), decreases of behavioral responses to avoid adverse consequences (BIS, $t = -5.65, p \leq .01$) underlying to and interplaying with the presence of the Neuroticism trait ($t = -4.72, p \leq .01$). The tendency that also emerges from the gaming is a temporal delay in discarding objects and a certain suddenness in taking them. This study conceptualizes an altered mechanism of an adaptive original mechanism (i.e., nesting), which then leads to the psychopathological phenomenon of accumulation (hoarding disorder); the main limitation is that the assessment was exclusively in the remote condition.



The relationship between genetic predisposition to altered innate immune response, Group-A Streptococcal infections, and autoimmunity against basal ganglia in adult ADHD patients

Francesca Malandrone ¹, Giulia Di Girolamo ², Francesco Oliva ¹

¹ Department of Clinical and Biological Sciences, University of Turin, Turin, Italy

² North Area Psychiatry Complex Structure, TO3 ASL, Rivoli, Italy

Abstract

Introduction: Some studies have suggested a strong association between ADHD and Group-A Streptococcal (GAS) infections in children proposing an autoimmune/vulnerability mechanism. The present study evaluated the association between GAS infections, autoimmunity against neuronal structures underpinning ADHD (basal ganglia), and genetic predisposition to altered innate immune response and persistent ADHD. *Methods:* The present cross-sectional study compared adults with ADHD (ADHD) to those without ADHD (non-ADHD) for childhood GAS infection history, titers of specific GAS antibodies (anti-streptolysin O [ASO], and anti-deoxyribonuclease B [Anti-DNAse B]), anti-basal ganglia antibodies [ABGA] titers, and Toll-like Receptor [TLR] 2, 4, and 9 polymorphisms. Titers were measured by ELISA test kits whereas polymorphisms were determined by DNA amplification from circulating cells. The predictive value of childhood infections history and TLR polymorphism for ADHD diagnosis was evaluated by logistic regression and mediation analyses, adjusting for titers levels. *Results:* Sixty-four ADHD and 36 non-ADHD were recruited. Recurrent infections in childhood were more common in ADHD than in non-ADHD (51.6% vs 27.8%; $p=.033$). All three antibodies titers were more commonly positive among ADHD (ASO, 17.2% vs 0.0%, $p=.014$; Anti-DNAse B, 76.6% vs 2.8%, $p<.001$; ABGA, 73.4% vs 27.8%, $p<.001$) and their levels were higher in ADHD patients than non-ADHD (ASO, 108.8 ± 117.6 vs 40.4 ± 29.9 , $p=.005$; Anti-DNAse B, 121.1 ± 54.0 vs. 62.2 ± 19.9 , $p<.001$; ABGA, 3.7 ± 2.3 vs 2.1 ± 2.5 , $p<.001$). Anti-DNAse B (AOR=1.05, $p<.001$), ABGA (AOR=1.30, $p=.034$), and TLR9 -1237T>C SNP (AOR= 4.61, $p=.037$) showed to be significant predictors of ADHD diagnosis. The mediation effect of TLR9 -1237T>C SNP on the association between ADHD diagnosis and both ABGA ($B<.001$, 95%CI [-.015;.007], $p=.504$) and Anti-DNAse B ($B=.001$, 95%CI [$<.001$;.001], $p=.272$) was almost null and not significant. *Discussion:* The present study confirmed the strong association between persistent ADHD diagnosis and positive GAS infections history in childhood, acquired immunity against GAS (especially Anti-DNAse B positivity) and autoimmunity against basal



ganglia. TLR9 -1237T<C SNP, commonly involved in autoimmunity, appeared to be linked to ADHD diagnosis. Our finding might open new research perspectives into neurodevelopmental disorders pathogenesis.



Development of the Tripartite Empathy Scale-State Version (TES-S): psychometric and embodied validation

Emanuele Pick¹, Johann Roland Kleinbub¹, Valentina Cimmino Picone¹, Arianna Palmieri¹

¹ Department of Philosophy, Sociology, Education and Applied Psychology (FISPPA) University of Padua, Padua, Italy

Abstract

Introduction: The study of state empathy, defined as a context-specific empathic response during interpersonal relational exchanges (Zaki et al., 2008), is limited by the paucity of self-report assessments, especially when state empathy is considered as an interpersonal phenomenon. The aim of this study is to validate a new questionnaire that can measure state empathy as an interpersonal phenomenon, based on the well-established tripartite conceptualization of empathy, with affective, cognitive, and prosocial sub-components (Zaki and Ochsner, 2012) and using an embodied approach. *Methods:* Each item of the Tripartite Empathy Scale-State Version (TES-S) has two specular versions to take into account the two people in interaction: self-perception of one's own empathy (own empathy [TES-OE]) and perceived partner's empathy (perceived empathy [TES-PE]). One hundred sixty-eight participants completed the TES-OE after a video-recorded verbal interaction with another participant, who completed the TES-PE. In a subgroup of 37 dyads, physiological measurements such as skin conductance were also collected. Initially, 45 specular items between OE and PE forms were created ex-novo. For each item, the degree of discrepancy between the responses in the two forms was calculated, and the items with the highest discrepancy were eliminated until a final form consisting of 15 items was reached. Each form, OE and PE, was subjected to confirmatory factor analysis. Subsequently, the correlation between physiological synchronization (PS) and questionnaire scales was investigated. *Results:* Factor analysis confirmed the tripartite structure of TES-S and a good fit to the data for TES-OE (RMSEA=0.059, CFI=0.991, SRMR=0.077) and TES-PE (RMSEA=0.045, CFI=0.994, SRMR=0.079). PS showed positive correlations with the components of TES-OE (r ranged between .18 and .39) while no association was found between PS and TES-PE (r ranged between -.15 and .11). *Conclusions:* The TES-S can be considered a valid and reliable instrument for the assessment of interpersonal state empathy for dyadic interactions and represents a psychometrically valid measure for clinical and research purposes. The use of PS in the investigation of psychological constructs can be valuable in such constructs that have a somatic perspective.



Explaining mental disorders. Evolutionary psychopathology is needed

Andrea Zagaria¹, Lorenzo Rodella²

¹ Department of Psychology and Cognitive Science, University of Trento, Rovereto, Italy

² Hospital Unit of Beata Vergine della Consolata, Fatebenefratelli, San Maurizio Canavese, Turin, Italy

Abstract

The advent of the so-called “neo-Kraepelinianism” which preceded the edition of DSM III had many consequences, the main of which is the so-called “a-theoreticity” of the Diagnostic and Statistical Manual of Mental Disorders (DSM). Even though undoubtedly useful for the clinical practice and the research, DSM exhibits many well-known limitations, the most important likely being the precarious construct-
validity of its diagnoses (i.e. Are DSM diagnoses real? Do they correspond to something that actually exists in nature?). We will argue that DSM’s epistemology is lacking not only because it medicalizes mental disorders, but especially because it lacks a theoretical framework on the psychobiological mechanisms involved in psychopathology. We think that the evolutionary approach, drawing on the concepts of motivation and life-history-theory, could fill this gap. A preliminary case study is conducted.



**PATHOLOGICAL NARCISSISM AND THE ANTAGONISTIC SPECTRUM: THE DARK
SIDE OF THE VULNERABILITY**

Proposer

*Serena Borroni*¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Discussant

*Adriano Schimmenti*¹

¹ School of Human and Social Sciences, University of Univeristy of Enna “Kore”, Enna, Italy

Abstract

Existing literature suggests broad variation in the phenotypic expression of narcissism. Indeed, both clinical models and social/personality psychology studies have consistently highlighted the existence of grandiose and vulnerable features in the phenotypic description of narcissism. Antagonistic features, the tendency to behave in ways that put the individual at odds with other people, constitute the common core of different manifestation of pathological narcissism, as evidenced also by tripartite models of narcissism. Despite these similarities, grandiose and vulnerable expressions of narcissism differ significantly, and examining these characteristics represent a relevant research topic for informing the assessment and treatment of narcissistic features. Against this background, the symposium will present clinically-relevant features of pathological narcissism, ranging from the relationship between empathy and grandiose and vulnerable narcissism, the impact of varying levels of grandiose narcissism and peer inclusion or exclusion on adolescents' mentalizing abilities, to the associations between suicidal motivations and narcissistic and borderline features in adolescence, and the characterization of narcissistic features according to the DSM-5 Alternative Model of Personality Disorder in clinical adults.



Two-way mirror: Cognitive and Affective Empathy in Vulnerable and Grandiose narcissism traits

*Marzia Di Girolamo*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

The relationship between empathy and narcissism is one of the most discussed in the literature. This is mainly because the lack of empathy has always been considered the main characteristic of this condition. However, over the years, both the concept of empathy and the concept of narcissism have undergone changes and deepening. Thus, today it is difficult to talk about narcissism without specifying what kind of narcissism it is (grandiose or vulnerable) and about empathy without specifying what kind of empathy it is (cognitive or affective). This study examined the relationship between the two types of narcissism and the two types of empathy. Sample: 300 nonclinical subjects (60% women and 40% men) recruited through a snowballing procedure. Instruments: The Questionnaire of Cognitive and Affective Empathy (QCAE) was used to assess the two types of empathy. The Five Factor Inventory of Narcissism (FFNI Short Form) was used to assess the two types of narcissism. The Balanced Inventory of Desirable Responding (BIDR 6) was used to assess the positive response style. Instruments were administered via online (Google Form) and the order was randomized. Results: The vulnerable aspect of narcissism is positively correlated with affective empathy, whereas grandiose narcissism is negatively correlated; in both cases, the effect size was medium. Cognitive empathy did not show significant effects. Interestingly, adjustment for response style scores also indicates that the vulnerable aspects of narcissism might lead to an “overestimation”; of one's empathic traits in self-reported measures, whereas the grandiose ones seem to lead to hiding them.



Exploring the Role of Mentalization in Pathological Narcissism and Adolescent Peer Relationships: A Study Using the Social Media Ostracism Paradigm

Andrea Fontana¹, Beatrice Cianfanelli¹, Lucia Sideli¹

¹ Department of Human Science, LUMSA University of Rome, Rome, Italy

Abstract

Introduction: Pathological narcissism, marked by grandiosity, attention-seeking behavior, and lack of empathy, influences adolescent socio-affective development. Mentalization serves as a protective factor, while peer rejection acts as a risk factor during this critical developmental stage. This study investigates the impact of varying levels of narcissism and peer inclusion or exclusion on adolescents' mentalizing abilities, utilizing the Social Media Ostracism Paradigm (SMOP). The SMOP task simulates social media interactions in which participants engage in an online group task (Wolf et al., 2015). Adolescents create avatars with brief descriptions and then participate in an experimental phase where group members can view each other's avatars and exchange "Likes" as positive feedback. Unbeknownst to participants, group members are fictitious characters programmed by the researcher to manipulate the level of ostracism through the number of "Likes" received, leading to exclusion or inclusion conditions. *Methods:* 240 adolescents were recruited from a more extensive community study on narcissism and screened using the Pathological Narcissism Inventory (PNI; Pincus et al., 2009; Somma et al., 2019). Participants were randomized into SMOP overinclusion, exclusion, or neutral conditions according to their pathological narcissism levels (high or typical following a 2 (narcissism: high/typical) x 3 (peer: overinclusion, neutral, exclusion) factorial design. Following the SMOP, participants' mentalization capacities were assessed through interviews and coded by experts. *Results:* Adolescents exhibited impaired mentalizing abilities when perceiving peer exclusion compared to overinclusion. A significant interaction between condition and narcissism indicated that adolescents with high pathological narcissism displayed more compromised mentalization when excluded than over-included. *Conclusions:* These findings highlight the importance of mentalization in the context of pathological narcissism and peer rejection. Interventions focusing on enhancing mentalization skills may mitigate the adverse effects of peer exclusion for adolescents with high pathological narcissism. Future research should explore additional moderating factors, such as attachment and emotion regulation, in the relationship between narcissism, peer relationships, and mentalization.



Understanding narcissistic personalities in the clinical setting: A head to head comparison of DSM-5 Section II and Section III models

*Andrea Fossati*¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

Introduction: Diagnostic criteria for DSM-5/DSM-5-TR Section II narcissistic personality disorder (NPD) were identical to those used in the DSM-IV-TR and almost exclusively focused on grandiose features as indicators of pathological narcissism. Rather, an Alternative Model of Personality Disorder (AMPD) was provided in DSM-5/DSM-5-TR Section III. Different from DSM-5 Section II criteria, the AMPD characterizes personality disorders through core impairments in personality functioning and dimensional pathological personality traits. Interestingly, one notable development in the AMPD model of NPD is the inclusion of both grandiose and vulnerable characteristics, at least among Criterion A diagnostic features. Against this background, the present study aimed at comparing DSM-5 Section II and Section III models of NPD in predicting narcissistic features in a clinical sample of psychotherapy participants. *Methods:* The sample was composed of 386 participants who were consecutively admitted to the Clinical Psychology and Psychotherapy Unit of the San Raffaele Turro Hospital of Milan. Participants were administered the Italian translations of the Schedule for Nonadaptive and Adaptive Personality-2 (SNAP-2), Five Factor Narcissism Inventory-Short Form (FFNI-SF), the Pathological Narcissism Inventory (PNI), the Structured Clinical Interview for the DSM-5 Alternative Model for Personality Disorders (SCID-5-AMPD) Module I, the Level of Personality Functioning Scale – Self Report, Level of Personality Functioning Scale–Brief Form, the and the Personality Inventory for DSM-5 (PID-5). *Results:* The four Criterion A dimensions and the five Criterion B domains explained 64% and 46% of variance in the FFNI-SF and PNI total scores, respectively. The same set of predictors explained more than 30% ($R^2 = .35$) in the number of DSM-5 Section II NPD criteria, at least as they were assessed in the SNAP-2 NPD scale. Rather, the nine DSM-5 Section II NPD criteria explained 43% and 32% of variance in the FFNI-SF and PNI total scores respectively. *Discussion:* These data showed that the DSM-5 AMPD model may provide a better description of narcissistic phenomena than traditional NPD criteria, at least in a sample of psychotherapy participants.



**Suicidal motivations in the narcissistic and borderline emerging patterns in adolescence: the
analytic submissive and introjective dismissive dynamics**

Riccardo Williams¹, Marta Moselli¹, Francesca Casasoli¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Background: Recent research has evidenced that studying suicidal motivations may be a relevant perspective for understanding and managing the suicidal risk in adolescence. Empirical and clinical literature has also stressed the role of specific features borderline pathology and more recently of narcissistic pathological functioning in orienting the course of the suicidal process in this phase of life. As proposed by Blatt, a clinically meaningful way to look at the difference between these two personality prototypes is to take into account the introjective and anaclitic identity and relational organization. In this work we propose to analyse the role that the identity definition, defenses, strategies for emotion regulation and relational models have for shaping suicidal motivations and through them suicidal ideation and conducts. *Objectives:* this study aims at analyzing the clinical congruence between Introjective and Anaclitic modes of elaborating depressive states and the suicidal motivations in two clinical case of a narcissistic and borderline adolescence. *Methods:* Two 17-year-old suicidal adolescents' personality functioning was evaluated using the SWAP-200-A and the derived scores of the Analytic Introjective Depression-Assessment (AIDA, Rost, Luyten, Fonagy, 2016) and SCID-5. Independent clinicians rated their answers' at the Motivational Interview for Suicidality in Adolescence (MIS-A). *Results:* Ferdinand's introjective dismissive and Jasmine's anaclitic submissive personality functioning seemed to be at tally and interwoven with suicidal motivations that were respectively oriented toward feelings of interpersonal entrapment and interpersonal manipulation, and closeness seeking and feelings of personal isolation. *Conclusions:* the difficulty in tolerating threat to self-esteem in the context of interpersonal and affective dependence typical of narcissistic adolescents patients may have an important role in engendering specific suicidal motivations and increase behavioural risk.



**AT RISK MENTAL STATES AND PSYCHOSIS ONSET: PREVENTION, PRODROMAL,
INTERVENTION**

Proposer

*Giacomo Ciocca*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Laura Muzi*¹

¹ Department of Philosophy, Social Sciences, Humanities and Education, University of Perugia, Perugia, Italy

Abstract

Psychotic onset is often preceded by several behavioral indicators before the onset of clear psychiatric symptoms. The trajectory to developing first-episode psychosis was systematized in the last years by the concept of ultra-high risk (UHR), a sub-clinical period characterized by one of the following conditions and criteria: the attenuated psychotic symptom (APS) criterion, the brief limited intermittent psychotic symptom (BLIPS) criterion, and the genetic risk and functional decline (GRFD) criterion. In some cases this pre-clinical phase is also characterized by dysregulation in eating behavior or sexual behavior. However, evidence about the presence of eating disorders (EDs) or sexual problems in population with psychotic risk is limited. Therefore, we here intend to increase knowledge on the topic and inform preventive interventions aimed at addressing clinical challenges of UHR patients with eating disorders or problematic sexuality. For these reasons a focus on the diagnostic and terminological approach was implemented. In particular, through our study with focus groups, it was found that the terms ARP (impairment of personal reality) and ARMS were perceived as least stigmatizing and most informative, while the term UHR was considered the most stigmatizing. Hence, caregivers believe their presence is necessary when the diagnosis is communicated, while most patients believe the opposite and the term ARP, alongside with ARMS should be considered to be used in the context of early intervention. Moreover, in the last three decades, we have been witnessing the systematic development of cognitive



approaches to psychosis in general or its different specific symptoms like delusions, hallucinations, and negative symptoms. With regard to the appropriate treatment of cognitive biases in psychotic users and in individuals meeting ARMS, more recent meta-analyses have confirmed the efficacy of Metacognitive training (MCT) on positive symptoms, insight, and cognitive biases, which has led to the inclusion of MCT in some treatment guidelines for schizophrenia. Therefore, the proposal of our symposium is to highlight the eventual prodromal symptoms of psychosis in other apparent different conditions of psychological or behavioral suffering. Finally, from a therapeutic point of view, an insight on metacognitive training is also discussed.



Sexuality in ultra-high risk for psychosis and first-episode psychosis. A systematic review of literature

*Giacomo Ciocca*¹, *Tommaso B. Jannini*², *Giorgio Di Lorenzo*²

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Systems Medicine, Tor Vergata University of Rome, Rome, Italy

Abstract

Introduction: A considerable body of literature reports that individuals with psychotic disorders often suffer from sexual dysfunctions (SDs), with these representing a major unmet need. Long-term antipsychotic drug treatment may be the main cause for SDs in psychotic patients, through a plethora of different mechanisms, including prolactin dyscrasia, histamine-mediated sedation, and serotonin-induced sexual demotivation. However, a few pieces of evidence treat sexuality in patients at risk or the onset of psychosis. *Methods:* For this purpose, we systematically reviewed literature of the last 10 years in order to investigate sexuality in ultra-high risk (UHR) for psychosis and first-episode psychosis (FEP). We included in our review 34 articles fitting our research criteria on SDs in UHR and FEP. *Results:* Evidence of SDs in the transition from UHR to FEP emerges through the selected studies. In FEP, sexuality is affected by the severity of the psychotic symptoms and, in some cases, by the iatrogenic effects of psychopharmacological treatment. Further experimental and clinical studies should systematically investigate the role of sexual functioning in the transition from UHR to FEP and, consequently, clarify whether or not SDs could be considered a possible marker for the onset of psychosis in at-risk populations. *Discussion:* Moreover, psychiatrists and clinical psychologists should take into consideration the role of sexual life in young people with prodromal mental symptoms or at the onset of psychosis. Focusing on a thorough sexual evaluation might be a major challenge that could break down barriers of mental health promotion among young people with schizophrenia-spectrum disorders and therefore achieve better clinical outcomes.



Cognitive biases and early stages of psychosis: overview of promising interventions

Laura Giusti¹, Silvia Mammarella¹, Sasha Del Vecchio¹

¹ Department of Life, Health and Environmental Sciences, University of L'Aquila, L'Aquila, Italy

Abstract

Introduction: In the last three decades, we have witnessed the systematic development of cognitive approaches to psychosis and its specific symptoms, like delusions, hallucinations, and negative symptoms. Core features of psychotic disorders seem represented by Jumping to Conclusions, JTC, bias or inaccuracy in emotion recognition and theory of mind abilities, underlying the formation and maintenance of delusions and hallucinations, with a negative impact on the person's social functioning. In line with existing knowledge, cognitive biases are observed along the continuum of psychosis, from psychotic-like experiences to full-blown psychosis. *Methods:* A literature search of published literature since 2010 was conducted to investigate the efficacy of Metacognitive Training (MCT) (Moritz et al., 2010) on different stages of psychosis. *Results:* Concerning the appropriate treatment of cognitive biases in psychotic users and individuals with recent onset of psychosis, several studies and meta-analyses confirmed the efficacy of MCT on positive symptoms, neurocognition, cognitive insight, cognitive biases, and social functioning. Also, MCT showed promising outcomes in young at-risk mental states, ARMS, population, and in young subjects in the early stages of psychosis independently by their Duration of Untreated Psychosis over two years. *Discussion:* MCT could be a good treatment choice in clinical practice taking into account the positive results in cognitive insight improvement that may act to prevent further psychotic episodes and to improve treatment adherence.



Do sociodemographic and study variables impact eating disorder diagnosis in clinical high-risk for psychosis youth? A study protocol for a Systematic Review and Meta-analysis

Gabriele Lo Buglio¹, Erika Cerasti¹, Jone Bjornestad²

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Social Studies, Faculty of Social Sciences, University of Stavanger, Stavanger, Norway

Abstract

Introduction: Many studies have shown that youth at clinical high risk for psychosis (CHR-P) suffer from multiple psychopathological syndromes. Currently, evidence about eating disorders (EDs) in this clinical population is limited. Here we present a research protocol for a systematic review and meta-analysis aiming at estimating the impact of sociodemographic and study variables on the ED diagnosis in CHR-P youth and of summarizing the available knowledge on clinical characteristics of CHR-P patients with EDs. *Methods:* PubMed, EBSCO/APA PsycINFO, and Web of Science will be searched for studies published from 1 January 2018 to 31 December 2022. Original research evaluating EDs in CHR-P samples with reliable instruments will be considered. Two independent reviewers will screen the studies and assess their quality with a modified version of the Newcastle-Ottawa Scale. Disagreements will be solved by contacting a third judge. A narrative synthesis will be conducted. Whenever applicable, random-effect models (proportions) and meta-regressions will be run to extracted data. This research will comply with the PRISMA guidelines. *Results:* We expect to retrieve more cross-sectional than longitudinal studies. Meta-regression will examine the role of potential moderators. The narrative synthesis will focus on clinical characteristics of EDs in CHR-P youth, especially regarding functioning, symptoms, and bodily sensations. *Discussion:* Since the empirical literature regarding EDs in CHR-P samples is limited, this study aims to add knowledge on the field and inform preventive interventions aimed at addressing EDs in CHR-P patients.



Should diagnostic terms describing increased risk for psychosis be renamed? The answer from Italian patients, caregivers, and clinicians

Tommaso Boldrini¹, Elena Cordova¹, Maria Pontillo², Lara Malvini³, Andrea Polari⁴

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Bambino Gesù Children's Hospital, IRCCS, Rome, Italy

³ Niguarda Hospital, Milan, Italy

⁴ Orygen Specialist Programs, Melbourne, Australia

Abstract

Introduction: At-risk mental state (ARMS), ultra high risk (UHR), and attenuated psychotic syndrome (APS) are competing terms used to identify young people at elevated risk for developing a psychotic disorder. However, there is currently no agreement on a definitive terminology, and it is unclear whether existing diagnostic terms are sufficiently informative and potentially stigmatizing. The current study is aimed at: 1) generating new diagnostic terms to describe the “at risk” concept by former patients with lived experience of mental illness; 2) testing literacy, informativeness, and potential stigma related to both existing and newly generated terms; 3) investigating preferences related to the best timing to introduce the at-risk concept in clinical practice and the extent and context of the information presented. *Methods:* A focus group involving youth with a previous experience of mental illness has been conducted (aim 1). An ad-hoc questionnaire has been administered to 61 clinicians, 47 patients and 60 caregivers to collect their attitudes and preferences (aims 2, 3). *Results:* Newly generated terms were: tendenza alla psicosi (TAP; psychosis proneness), alterazione della realtà personale (ARP; impairment of personal reality), and disregolazione della soggettività (DS; subjectivity dysregulation). Literacy on “at risk” terms was low among patients and caregivers (around 50% were not familiar with them). The terms ARP and ARMS were perceived as least stigmatizing and most informative, while the term UHR was considered the most stigmatizing. Participants agreed on the full disclosure of the diagnosis, when a trusting relationship with the clinician has been established. Caregivers believe their presence is necessary when the diagnosis is communicated, while most patients believe the opposite. *Discussion:* Patients generated term ARP, alongside with ARMS should be considered to be used in the context of early intervention. Previous (i.e., Polari et al., 2021) and ongoing replications of the current study in other geographical areas may inform culture-sensitive psychiatric labels.



**MENTALIZING IN THE THERAPEUTIC PROCESS: THERAPIST'S STANCE AND
CLIENT'S CHANGE IN INDIVIDUAL AND GROUP PSYCHOTHERAPY**

Proposer

*Giovanna Esposito*¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Discussant

*Osmano Oasi*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Mentalizing refers to the human ability to interpret one's own and others' behaviour on the basis of intentional mental states (Bateman & Fonagy, 2016). Impairments in this capacity and in epistemic trust, that is the ability to consider knowledge conveyed by others as significant, relevant to the self, and generalizable to other contexts (Wilson & Sperber, 2012), are defining features of the p factor (Fonagy et al., 2021; Fonagy & Campbell, 2021). In this perspective, working in the therapeutic process on mentalizing is critical not only for those that may be defined as "disorders of mentalizing" (e.g. cluster B personality disorders), but also for other disorders with secondary mentalizing impairments (Johnson et al., 2022). Mentalizing may be, therefore, conceptualized as the common factor across different forms of effective individual and group psychotherapy (Fonagy & Allison, 2014). However, mentalizing may be both the outcome of an effective therapy and the device through which achieve therapeutic change. Therapist's reflective functioning also has been found predictive of good outcome therapy (Reading et al., 2019) and it is enlisted among the therapist's characteristics that are mostly associated with effective treatment. Moreover, the implementation of specific mentalizing techniques and interventions (e.g. exploration of mental states) has been found particularly associated to patient's in-session mentalizing and narrative change (Moller et al., 2016) both in the individual and group psychotherapy. Considering the theoretical premises presented above, this panel aims at deepening the landscape on mentalizing by focusing on the relevance, the pivotal role, and the implication of mentalizing in the clinical practice, both in the individual and group psychotherapy. Furthermore, the panel aims at zooming on both the



therapist's and the clients' side, in an outcome-process research approach, that allows to grasp and analyse mentalizing in the therapeutic process.



Therapist mentalization and epistemic trust: failure and opportunities in relation to countertransference and patient's psychopathology

Francesca Locati¹, Daniela Di Riso², Gioia Bottesi³, Laura Parolin⁴

¹ Department of Humanities, University of Pavia, Pavia, Italy

² Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

³ Department of General Psychology, University of Padua, Padua Italy

⁴ Department of Psychology, University of Milano-Bicocca, Italy

Abstract

Therapists often experience psychotherapeutic work as conceptually and emotionally demanding. The relationship between therapist and client can encounter moments of conflict, hostility, tension, and ambivalence that can bring out moments of doubt about the therapists' competence over them and distress that, depending on how they are managed, can compromise therapeutic outcomes (Muran & Hungr, 2013). In this context, therapist-related variables such as the level of mentalization (RF), i.e., the ability to interpret actions as caused by intentional mental states and the epistemic trust (ET), i.e., the capacity to evaluate social information as accurate, reliable, and relevant, may intervene adaptively or maladaptively in mediating the therapist's emotional responses and experiences. This study aimed to examine the relationship between therapists' mentalization, epistemic trust and emotional responses and patients' personality disorders and level of psychological functioning. A sample of 83 Italian psychotherapist completed Reflective Functioning Questionnaire, the Epistemic Trust Mistrust Credulity Questionnaire, the Therapist Response Questionnaire and the Level of Personality Functioning Scale to assess the level of psychological functioning in a randomly selected patient currently in their care and with whom they had worked weekly for a minimum of eight sessions and a maximum of 6 months. A network analysis explored the associations between RF, ET, therapist response and patients' severity of psychopathology. Results reveal a positive relationship between mentalization and epistemic trust and a negative relation between mentalization and epistemic mistrust and credulity. Therapists' responses were characterized by stronger negative feelings when working with lower-functioning patients positively mediated by mentalization and epistemic trust. Overall, findings suggest that therapist mentalization and ET might be a factor playing different roles associated with patients' severity psychopathology. Indeed,



links between mentalization and ET might help to explore the different reactions in therapeutic relationships. Clinical implications on the therapeutic relationship will be discussed.



The role of therapists' mentalizing interventions in facilitating narrative change in group psychotherapy

Giovanna Esposito¹, Raffaella Passeggia¹, Anna Sara Cutolo², Silvia Formentin³, Ivan Ambrosiano⁴, Miguel Mario Gonçalves⁵

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

² SInAPSi Center, University of Naples Federico II, Naples, Italy

³ Addiction Department, Azienda ULSS 6 Euganea, Padua, Italy

⁴ ASVEGRA Association, COIRAG, Padua, Italy

⁵ School of Psychology, University of Minho, Braga, Portugal

Abstract

Introduction: Research suggested that the implementation in the therapeutic process of mentalization-based interventions, such as exploration of mental states, is associated with patients' in-session improvement of mentalizing. Moreover, adherence, but preeminently competence in performing interventions according to the mentalization-based manual, has been found associated with narrative change of patients, both in the individual and group psychotherapy. *Aim:* This study aims at analyzing the association between adherent and competent mentalization-based interventions and group members' narrative change as measured by the newly developed Innovative Moments Coding System for Groups (IMCS-G), which allows to track, among group members, meaningful interactions (i.e., Innovative Moments, IMs), that represent narrative exceptions to their dominant problematic narratives. *Methods:* Three different group treatments, counselling for university students (N = 6), short-term psychotherapy for addicted patients (N = 8) and short-term psychotherapy for patients with chronic illness (N = 10) are considered for this study. A total of 22 group sessions were transcribed verbatim and analyzed. To code therapist's mentalizing interventions, the Mentalization-Based Treatment for Group Adherence and Competence Scale was used, that allows to obtain an index for adherence (i.e., the percentage of mentalizing interventions on the total of the therapist's interventions) and for competence (on a Likert scale from 1 – low – to 7 – excellent). To track group members' narrative change, it was used the IMCS-G, that allows to identify IMs on 3 levels of increasing complexity in terms of meaning elaboration, and 7 IM categories (Self-directed, Other-directed, Explicit Mirroring, Prompting Change, Reinforcing Change, Collective and Voice of Group IMs) that are organized into 2 macro-categories, Individual and



Group IMs. *Results:* Results showed that the MBT-G adherent and competent therapist' interventions are crucial for the emergence of both Individual and Group IMs at level 3, namely the ones with the higher reflective complexity. *Conclusion:* A mentalizing stance of the group therapist could facilitate a complex and reflective narrative change for the group members.



Mentalizing interventions in a psychotherapy group for adolescents with internalizing symptoms: an exploratory single-case study

Lucia Fortunato¹, Giacinta Della Gatta², Cecilia Cocchiaro², Salvatore Gullo¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Neuropsychiatric Unit District 24, ASL Napoli 1, Naples, Italy

Abstract

The aims of this single-case study were: to explore what type of mentalizing interventions are mostly used in a group therapy for adolescents with internalising disorders and high difficulties in mentalization; and how these interventions changed over time (during the first five months of therapy). Methods: Participants were recruited from patients in charge of the Child Neuropsychiatry service in Naples (DS 24). The group consisted of eight participants (5 female, 3 male; Mage = 15.90±1.07) with a developmental diagnosis of internalising disorder (anxiety, depression, social withdrawal), who completed scales on Emotion Regulation (DERS), DSM-5 Cross-Cutting Symptom (CCSM) Self-Esteem (RSES) at treatment intake (T0) and termination (T1). Clinicians filled out for each patient Modes of Mentalization Scale (MMS) and Mentalization Imbalances Scale (MIS) at intake and three and six months later. The group psychotherapy lasted five months and was led by a therapist with a psychodynamic approach. All group sessions were audio-recorded and transcribed verbatim. Therapist's interventions were rated in 5 sessions according to Mentalization Based Group Therapy Adherence and Quality Scale (MBT-G-AQS).

Results: Comparison between T0 and T1 shows interesting clinical changes although differences does not reach significance in patient's self-report ($z=-1.604$; $z=1.604$; $z=1.289$, all $ps>.05$ for DERS, CCSM and RSES, respectively); clinician's report showed no significant differences in mentalization imbalances ($z=0.405$; $z=0.406$; $z=-0.170$; $z=0.736$; $z=0.106$, all $ps>.05$ for cognitive, affective, self, other and automatic subscales, respectively), while a significant increase in good mentalization subscale of MMS was found ($z=2.023$, $p=.043$). Regarding therapist's interventions, 40% of the therapist interventions were rated as compliant with the MBT-G-AQS; analysis showed that the therapist's most frequent mentalization-oriented interventions are: Engaging group members in mentalizing external events (18%); Managing group boundaries (15%); Exploration, curiosity and not-knowing stance (13%) and Focus on emotions (13%). Further results will illustrate and discuss associations between initial patients'



mentalizing capacities, the type and the quality of therapeutic interventions in group and the changes occurred in patient's during and at the end of the treatment.



The effect of patients' in-session activation of interpersonal motivation systems on mentalization: Mentalizing the therapeutic process

*Giulia Gagliardini*¹

¹ Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Introduction: Mentalization, i.e., the capacity to understand behaviors in terms of intentional mental states, is a capacity related to the process and outcome of psychological treatments. Mentalization unfolds within the first relationships with those who care about us and is strictly related to the activation of the interpersonal motivation system of attachment. The influence of the activation of attachment system on mentalization has been theoretically hypothesized, however no study has, up to date, empirically investigated the relationship between different interpersonal motivation systems and mentalization. *Aims:* The aim of this study is to investigate the relationship between the activation of interpersonal motivation systems and mentalization in a sample of 80 psychotherapy session transcripts related to patients with and without personality disorders, rated both at a macro- and micro-analytic level. *Methods:* From a sample of psychotherapy session transcripts related to different phases of treatment, 20 patients were selected (10 with personality disorders; 10 with mood and anxiety disorders); For each patient 4 sessions were randomly picked and rated with the following measures: 1) Reflective Functioning Scale; 2) Mentalizing Prototypes Scale; 3) Assessing Interpersonal Motivations in Transcripts. *Results:* Results showed that the activation of attachment system in patients with personality disorders (PDs) predicted significant decreases in mentalization. The activation cooperation system was associated with significant higher levels of mentalization (compared to other interpersonal motivation systems) in both PD and non-PD patients, however the frequency of the activation of cooperative system was significantly higher in non-PD patients. Clinical implications will be discussed.



**PSYCHOLOGICAL KNOWLEDGE FOR SOCIAL DEVELOPMENT: THIRD MISSION
EXPERIENCES**

Proposer

*Giulia Lamiani*¹

¹ Department of Health Sciences, University of Milan, Milan, Italy

Discussant

*Maria Catena Ausilia Quattropani*¹

¹ Department of Educational Sciences, University of Catania, Catania, Italy

Abstract

Over the last years, there has been an increased pressure on universities to promote “third mission” activities. Third mission has been recognized as an institutional mission of universities, alongside teaching and research and, as such, is subject to ANVUR evaluation. The aim of third mission is to disseminate knowledge and transfer research results outside the academic context, thus contributing to the social growth and cultural orientation of the society. In the psychological field, third mission is an important activity for promoting awareness and preventing mental health issues in different contexts. Through the presentation of four different projects, this symposium aims to illustrate the development processes of third mission activities and their efficacy in different contexts such as schools, hospitals, and society. A first contribution by Busch et al. describes a public engagement intervention to foster critical thinking in Italian youth. The intervention seeks to reduce the stigma surrounding mental health and seeking psychological help and to combat fake news concerning mental health issues. The contribution by Delvecchio et al. focuses on the prevention of emotional problems in Italian children through the implementation of a CBT-based program - Super Skills for Life - in schools. The program, translated and adapted for the Italian language, was delivered to 70 Italian children enrolled in a primary school in Perugia with the aim to enhancing self-confidence, improving socio-emotional skills, and coping with stressful situations. The contribution by Bonazza et al., will describe the development and the efficacy of two illustrated psychoeducational books in preparing the visit of children to their family members hospitalized in Intensive Care Units and in decreasing their post-traumatic stress disorder and separation



anxiety. Finally, the contribution of Pozza et al., will present the development of a digital tool (the STOP STRESS app) inspired to the CBT model to be used as an early intervention to manage psychosocial stress during the post-pandemic period. The project targets vulnerable groups in Tuscany, including healthcare workers, undergraduates, older adults, and entrepreneurs.



Project Debunker: A public engagement intervention for Italian high school students to promote critical thinking and reduce stigma surrounding mental health perpetuated by digital media

Isolde Martina Busch¹, Silvia Savazzi¹, Giuseppe Bertini¹, Paola Cesari¹, Olivia Guaraldo², Michela Nosè¹, Loretta Berti¹, Corrado Barbui¹, Michela Rimondini¹

¹ Department of Neurosciences, Biomedicine, and Movement Sciences, University of Verona, Verona, Italy

² Department of Human Sciences, University of Verona, Verona, Italy

Abstract

Introduction: Academic institutions have been increasingly invested in third mission activities to proactively engage with society. Public engagement programs ensure knowledge exchange, help to inspire public discourse, and encourage interaction between researchers and the public. Given the constant exposure of young people to digital content and the fact that there is still a huge stigma surrounding mental health perpetuated by digital media, it is particularly important to provide young people with appropriate instruments to better face the complexity of digital content and to reduce mental health stigma. Our aim was to design a public engagement intervention to foster critical thinking in Italian youth. The intervention seeks to reduce the stigma surrounding mental health and seeking psychological help and to combat fake news concerning mental health issues. Further, we aim to assess the psychosocial impact of this intervention. *Methods:* Our intervention Debunker was informed by a systematic framework composed of several phases (Planning/Design Phase, Implementation Phase, Immediate Impact Assessment Phase, Medium- and Long-term Impact Assessment Phase). It will include different meetings between high school students and researchers and the dissemination of videos discussing the interconnections between critical thinking, scientific literacy, and mental health stigma. We will administer an ad hoc post-survey to assess the immediate psychosocial impact of the intervention by collecting data on different impact indicators (participants' satisfaction, psychological well-being). *Expected results:* We expect that students will show an improved knowledge regarding the discussed themes, in particular the stigma regarding mental health and an increased awareness of the mechanisms underlying scientific methodology and the problems linked to fake news and online news cycles. Medium-to-long term intervention effects will not be measurable immediately after the intervention but only in successive phases. Examples of this impact include the public dissemination of the findings, adoption of the



intervention by other universities, and the launch of new projects inspired by Debunker. *Discussion:* Our intervention will improve students' scientific literacy and will help them to better deal with digital content and to show greater open-mindedness towards mental health issues.



Development and Evaluation of Psychoeducational Booklets for Children Visiting the Intensive Care Unit

Federica Bonazza^{1,2}, *Michela Maxia*³, *Massimo Walter Rivolta*⁴, *Giovanni Mistraretti*^{5,6}, *Elena Vegni*^{2,3}, *Giulia Lamiani*^{2,3}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

² Department of Health Sciences, University of Milan, Milan, Italy

³ Unit of Clinical Psychology, ASST Santi Paolo e Carlo, Milan, Italy

⁴ Department of Computer Science, University of Milan, Milan, Italy

⁵ Department of Pathophysiology and Transplantation, University of Milan, Milan, Italy

⁶ Unit of Anesthesia and Intensive Care, Legnano Hospital, Legnano, Italy

Abstract

Introduction: The visit of children in Intensive Care Units (ICUs) has become more frequent thanks to the introduction of open visiting policies and family-centered care. Studies found that allowing children to visit their relatives admitted to the ICUs provides several benefits. However, they should be prepared and accompanied to minimize the possible traumatic aspects of the visit. To facilitate children's visit to the ICU, we developed 2 booklets. This contribution aims 1) to describe the implementation of the 2 booklets; 2) to evaluate the impact of the prepared visit on children's psychological well-being. *Methods:* An interdisciplinary group coordinated by a clinical psychologist designed the booklets and their structure. The work resulted in the publication of "The Cave in the Forest" for children aged 6 to 10 and "The Journey" for children aged 11 to 13. Both booklets consist of a narrative story and a psychoeducational section. The booklets were used in 4 ICUs (Northern Italy) with children willing to visit their family members, who were hospitalized in ICU with a mechanical ventilation length ≥ 48 hours. Before the visit and upon parental consensus, children completed two online questionnaires to measure post-traumatic stress disorder (PTSD) and separation anxiety. Parents received the age-appropriate booklet for their children to read at home. The ICU staff facilitated the visit of children. With 5 days from the visit, children completed the same questionnaires. *Results:* To date, 13 children (8 boys; mean age=11.3; SD=2.4) completed pre and post questionnaires. Of them, 4 had a parent hospitalized, 5 the grandfather/grandmother, and 1 a sibling. Wilcoxon signed-rank test showed a reduction in PTSD after



the visit (Mean-pre=23.3; Mean-post=16.9; $X^2=5.5$, $p=.018$) and a reduction in separation anxiety (Mean-pre=8.4; Mean-post=5.6; $X^2=4.5$, $p=.009$). Furthermore, 92% of the children found the booklets useful and age-appropriate. All children reported that they were glad that they had visited. *Discussion:* Findings suggest that a prepared visit together with the booklets can decrease post-traumatic stress disorder and separation anxiety. Implementing practices to maintain the attachment bond with hospitalized family members can play a protective role on children's mental health.



Transdiagnostic programs at schools: Super Skills for Life

Elisa Delvecchio¹, Giulia Moretti¹, Giulia Gizzi¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

Introduction: Many emotional and behavioral problems appear in primary school and are the forerunners of psychological maladjustment occurring in adolescence or later. For this reason, prevention programs at schools are key factors. Super Skills for Life (SSL) is a transdiagnostic, CBT-based program for 6 to 10 years old which helps children at improving socio-emotional skills, and coping with stressful situations through 8 sessions delivered once a week. Sessions include alone and in group activities. SSL has shown immediate and long-term efficacy in reducing anxiety symptoms as well peer and conduct difficulties among children. The study aimed at delivering SSL in the Italian context and showing early evidence about its applicability using a single case design. *Methods:* The program once translated and adapted was delivered to 8 years-old Italian children. They were asked to complete the Strengths and Difficulties Questionnaire (SDQ) and the Emotion Awareness Questionnaire (EAQ) at pre- and post-intervention. Alex, an Italian boy, living with both parents and a younger brother was enrolled in 3rd grade. Alex's academic performance was quite good although teachers reported that he easily showed inattentive behavior. He had few friends but hoped to become popular soon. He liked basketball. He was not referred for any psychological difficulties although most of his scores at SDQ belonged to the borderline/clinical range. *Results:* Findings showed that Alex was more able to differentiate and share his emotions. At the same time, he showed improvements in attending to others' emotions and analyzing his own ones. Furthermore, a pre-post reduction in SDQ internalizing and externalizing subscales emerged. More specifically, Alex reported less peer relationships problems, hyperactivity/inattention, conduct problems, and higher scores in prosocial behavior. To note, emotional problems showed a small increase. *Discussion:* Most of Alex's difficulties decreased to the non-clinic range (<80 %ile). Referring to emotional problems, findings suggest that SSL activities may have increased Alex's emotion awareness and in turn his understanding of his anxiety and worries. To conclude, these preliminary results support SSL as a school program for reducing internalizing and externalizing disorders. Moreover, it looks relevant to boost prosocial behavior and peer relationships.



Results from the MOST Project: Developing an App for Stress Management during the post-pandemic period

Andrea Pozza^{1,2}, Ilaria Di Iorio³, Francesco Iocca¹, David Baldo⁴, Andrea Failli⁴, Giovanna Millozzi², Nicole Loren Angelo¹, Massimiliano Padovani³, Daniele Pugi¹

¹ Department of Medical Sciences, Surgery and Neuroscience, University of Siena, Siena, Italy

² Santa Maria Alle Scotte University Hospital of Siena, Siena, Italy

³ Department of Health Sciences, University of Florence, Florence, Italy

⁴ Department of Information Engineering and Mathematics, University of Siena, Siena, Italy

Abstract

Introduction: The COVID-19 pandemic has led to a change in lifestyle that has resulted in long-term psychosocial stress levels. Due to the lack of Italian smartphone apps for the early intervention on psychological distress, the MOST project aims to develop a digital tool to be used as an early intervention to manage psychosocial stress during the post-pandemic period. The project targets vulnerable groups in Tuscany, including healthcare workers, undergraduates, older adults, and entrepreneurs. *Methods:* The MOST project's first phase involved conducting focus groups with representatives from each target group to explore attitudes, beliefs, and needs that emerged during the pandemic. During the second phase, the STOP STRESS app has been developed by a multidisciplinary team with psychologists, psychotherapists, and computer scientists to provide support, increase stress management levels and target anxious-depressive symptoms in these groups. *Results:* The results of the focus groups suggested that young adults, healthcare workers, and entrepreneurs reported a high perception of psychological distress. Older adults were more concerned about the physical consequences of the virus, while undergraduates and entrepreneurs were more concerned about socio-economic repercussions. All groups, except young adults, reported a sense of destabilization associated with conflicting information about COVID-19. All groups expressed a strong need to detach from the flood of information about COVID-19, while social distancing was noted as the highest cost. However, all groups also reported using the internet to cope with the situation. STOP STRESS contains written and audiovisual contents, such as psychoeducation readings about emotions and cognitive distortions, also inspired by Cognitive Behavioral Therapy, such as ABC diaries. Its effectiveness is being investigated through a single-group



longitudinal research design. *Conclusions:* The pandemic has shown the function of new technologies as a tool for prevention and early intervention which can be integrated with existing care pathways. STOP STRESS can be considered one of the first responses to the post-pandemic period inspired by the CBT model, which aims to provide support and increase psychosocial stress management levels in vulnerable groups.



Friday, 15th September 2023

THEMATIC SESSION

**MENTAL CARE NEEDS DURING AND AFTER THE COVID-19
PANDEMIC**

Chair:

Daniela Marchetti

University "G. d'Annunzio" of Chieti-Pescara

Emanuela Saita

Catholic University of Sacred Heart of Milan



Is Epistemic Trust relevant for Vaccine Hesitancy? A study during the COVID-19 pandemic on an Italian sample

Alice Fiorini Bincoletto¹, Filippo Maria Nimbi¹, Ginevra Protopapa¹

¹ Department of Dynamic, Clinical psychology, and Health studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Vaccine hesitancy and conspiracy beliefs are social issues of growing concern which have arisen particularly during the COVID-19 pandemic. The aim of this study was to investigate the multifaceted relationship between a hesitant attitude towards vaccination, conspiracy thinking, fear of infection, and the dimensions of epistemic trust, mistrust, and credulity. *Methods:* 297 Italian adult participants completed an online survey during the pandemic time frame which included self-report questionnaires that measured the variables of interest. *Results:* age group differences pertaining to prior vaccination behavior (having vaccinated in the last 5 years and having vaccinated their own children) in scores of conspiracy beliefs about vaccines and vaccine hesitancy were explored. A negative association was found between years of education and both vaccine hesitancy and conspiracy beliefs about vaccines, and a positive one with epistemic trust; higher education may protect the individual from misinformation and help in discerning between real knowledge and fake or imprecise news. A mediation model was developed between epistemic stance, vaccine conspiracy belief, vaccine hesitancy, and COVID-19-specific variables: the affective dimension (fear of contagion) and the behavioral one (number of vaccine doses). *Discussion:* The model demonstrates how certain structural characteristics, such as epistemic credulity and skepticism towards vaccine benefits, may indirectly affect the number of COVID-19 vaccine doses taken through fear of contracting the virus. The results support the value of exploring vaccine hesitancy and conspiracy beliefs in relation to epistemic trust dimensions, specifically in the post-pandemic era.



From person to on-line meeting; the viewpoint of mothers with children with neurodevelopmental disorders

Liliana Carrieri¹, Aurora Cescon¹, Giulia Turrina², Diletta Mauri²

¹ Laboratory of Observation, Diagnosis, and Education (ODFLab) - Department of Psychology and Cognitive Science - University of Trento, Rovereto (TN), Italy

² Department of Sociology and Social Research - University of Trento, Trento (TN), Italy

Abstract

Introduction: The rapid spread of Covid19 rapidly accelerated the use of new technologies within psycho-social services under uncertain conditions. The possibility of in-person interaction was suspended, replaced by virtual contact. Different studies investigated the impact of this transition, for both professionals and individuals. These works highlighted the challenges faced by professionals, regarding communication and relationship difficulties, as well as new ethical and practical issues. *Aim:* The present study aimed at evaluating the experience of “care at distance”, compared with in-person care in mothers of children with neurodevelopmental conditions undergoing parent training sessions that were forcefully re-arranged in an online setting. *Methods:* N=15 mothers of children with neurodevelopmental conditions. Semistructured interviews about their experience of telehealth were recorded and subsequently transcribed Verbatim. The transcripts were analysed according to the methodology of thematic analysis by three independent qualified researchers using the NVivo software, to isolate a body of major themes. *Results:* Our results showed that although mothers experienced telehealth in diverse ways, cross-cutting attitudes emerged. Families consistently highlighted how the virtual environment differs in some significant aspects with respect to the physical setting. However, the need not to feel abandoned and to receive continuative emotional and practical support during lockdowns made these differences marginal. A significant ambivalence regarding the “care at distance” emerged: on the one hand, video calling is identified as an important and flexible resource to keep in touch with the therapist, allowing communication to remain apparently intact; on the other hand, the difficulty of sharing emotional states and empathetically connecting with the therapist prevails. Moreover, mothers generally pointed out further experiences related to the transition to the online setting, such as an enhanced personal involvement in the therapeutic process and a greater engagement of fathers. *Conclusion:* Overall, mothers of children with neurodevelopmental conditions undergoing parent training that transitioned to a remote



setting during Covid19 pandemic evaluated “care at distance” as a crucial resource to complement, but not to replace, in-person care.



Association between child behavioral problems and trajectories of posttraumatic stress disorder in perinatal women

Chiara Sacchi¹, Sara Vallini¹, Paolo Girardi²

¹ Department of Developmental and Social Psychology, University of Padova, Padova, Italy

² Department of Environmental Sciences, Informatics and Statistics, Ca' Foscari University of Venice, Venice, Italy

Abstract

Maternal mental health is an extremely crucial aspect of perinatal care. Compared with depression and anxiety, less is known about the trajectories of posttraumatic stress disorder (PTSD) symptoms experienced by perinatal women, nor has their association with the children's developmental outcomes been sufficiently investigated. We collected PTSD scores from pregnancy to 12 months post-partum in a sample of Italian women exposed during pregnancy to the early phases of COVID-19 pandemic. This study is aimed at evaluating the influence of PTSD symptoms' trajectories in the children's behavioral problems at 12 months of life. Participants are 327 mother-child dyads drawn from a pregnancy cohort recruited in May 2020 for a longitudinal study on COVID-19 related stress, maternal health, and child development. Mothers reported on the impact of the pandemic and post-traumatic stress disorder during pregnancy (t0), 6 months (t1) and 12 months postpartum (t2). At 12 months post-partum mothers reported on the child's externalizing and internalizing behaviors by means of the Child Behavior Check List (CBCL) questionnaire. We employed an ad-hoc Expectation Maximization clustering to cluster maternal PTSD trajectory. Negative binomial regressions were performed to evaluate associations between cluster membership and 12-months' child behavioral outcomes controlling for potential confounders. Responders exceeding the cut-off score for PTSD symptoms were 53 (16%) at t0, 70 (21%) at t1, and 48 (15%) at t2. Clustering analysis revealed five PTSD trajectory clusters, labelled according to PTSD score at t0 and trajectory slopes. Indeed, we identified one low-and-stable (L) group, 2 groups decreasing in PTSD symptoms over time (one high-and-decreasing (H-), one low-and-decreasing (L-)), and 2 groups with positive PTSD trajectories (one high-and-increasing (H+), one low-and-increasing (L+)). When looking at the association with the child's behavioral problems, significant higher child's total and externalizing scores were reported by women in the H+ and in the H- groups. Although many women presented PTSD scores below the cut-off during the perinatal period, we envisioned a significant



risk for the children of mothers who had elevated symptoms during pregnancy. Both the screening and the monitoring over time for PTSD symptoms appear critical for mother-infant perinatal health.



Psychological and occupational impact of the COVID-19 pandemic on mental healthcare workers

Maria Valentina Cavarretta^{1,2}, *Salvatore Maria Anzalone*², *Isis Truck*², *David Coben*³, *Sonia Ingoglia*¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Department of Cognition, Language and Interaction, University of Paris 8, Paris, France

³ Department of Child and Adolescent Psychiatry, APHP, Hôpital de la Pitié-Salpêtrière, Sorbonne University, Paris, France

Abstract

Introduction: The Coronavirus (COVID-19) pandemic has originated significant societal changes with stress-evoking consequences for the global population. Some population groups have been particularly affected by the pandemic. Precisely, healthcare workers, being on the frontline, have experienced emotional overload and a greater likelihood of developing depression, anxiety and burn-out. Regarding mental health, professionals faced an increased demand for psychological treatment interventions. All therapies were transferred to the home, including those for patients requiring hospitalization. Thus, different technological tools were employed in psychological treatment, like online psychotherapy for adults and artificial agents at home for children and adolescents. The aim of this research is two-fold: it attempts to explore the impact of the pandemic on mental health professionals' psychological and occupational distress; it attempts to examine the changes in the clinical method because of the digitization of care. *Methods:* The study will involve psychiatrists, psychotherapists and psychologists who have devised technological therapies during and after the pandemic. A qualitative method will be used through semi-structured interviews. *Results:* Analysis of the interview texts revealed recurring themes. Participants in the research manifested social withdrawal and isolation, changes in sleep/wake rhythms, feelings of uncertainty and powerlessness. They evoked a "psychological long COVID" and reported an aggravation of symptom configurations (suicide attempts in children with neurodevelopmental disorders; anxiety disorder and depression in adults). About the use of online psychotherapy, its usefulness is recognized but the in-person modality with patients is preferred. Professionals have maintained online interviews in cases of patients with debilitating physical illnesses or in cases of "medical deserts" in peripheral or rural areas of cities. *Discussion:* In order to protect individual mental health, it is fundamental to envisage



interventions for psychological support and to provide attention and care at an early stage for those individuals who are most vulnerable. This enables us to conceptualize and design the resources for rapid and personalized access to mental health services and ensure continuous and long-term mental care while also facing disrupted circumstances.



Relational wellbeing in post-pandemic scenarios: the STEPS study

Claudia Chiarolanza¹, Stefano Isolani¹, Irene Gagliardo¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: COVID-19 has left significant sequelae in many people from the physical and psychological points of view. The impact of the well-being and health of couples in close relationships led to uncertainty about the future (Lebow, 2020; Stanley & Markman, 2020), also reporting growth rates for domestic abuse. Deepening the relational health, scholars suggested that the usual temporal patterns and routines were interrupted during the pandemic and it could be difficult to recover the psychological need for rhythm, organization and coherence, necessary for the wellbeing (Masturzi et al., 2022). Therefore, we designed the present study – Analysis of marital and family STrEss in post-Pandemic Scenario (STEPS)- for analyzing relational wellbeing in romantic relationships, with particular attention to stress management. Central in this study will be the evaluation of stress, its impact on personal and relational well-being and the use of individual and dyadic coping in facing stressors which include but are not limited to financial and job issues. STEPS is an intensive longitudinal study, composed by four waves. In the present study, we analyzed the preliminary results of STEP1. *Methods:* Forty-seven individuals involved in romantic relationships participated in the STEP1, filling a multidimensional questionnaire with the following measure: a) Reflective Functioning Questionnaire (RFQ; Bizzi et al., 2022), 2) an adapted version of the Social Readjustment Rating Scale (SRRS; Holmes & Rahe, 1967); 3) a short version of the The Sound Relationship House Questionnaires (SRH; Gottman, 2017). *Results:* Results showed that the mentalization process positively correlated with the capacity to face recent and significant changes in job areas in the last two years, while it is negatively correlated with facing a serious illness. Positive correlations emerged between high levels of stress and some indicators of poor relationship quality (loneliness, defensiveness, etc). *Discussion:* Results showed that high levels of perceived stress in multiple areas of the life domains impacted the low quality of the relationship quality. We evaluated the cumulative effect and the unique prediction of different sources of stress on relationship satisfaction and mental health, taking into account the role of mentalization. Limits and implications for relational programs will be discussed.



Today's young adults: Who are they? An analysis of the Psychological Counselling Service requests at the University of Trento from 2019 to 2022

Anna Peripoli¹, Carolina Coco¹, Paola Venuti¹

¹ Department of Psychology and Cognitive Sciences, University of Trento, Trento, Italy

Abstract

The Covid-19 pandemic has raised concerns about the effects of isolation, restrictions, and fears on university students' well-being. Focusing on the University of Trento, there has been a notable increase in requests to the Psychological Counselling Service (PCS) over the years, peaking at 386 in 2022. This study aims to present PCS data from 2019 to 2022, compare the emerging issues and identify the most common challenges faced by the student community. The sample consists of 1,191 PCS requests received between 2019 and 2022. The study will consider students' initial motivations and the SCL90-R questionnaire they completed before counselling. Furthermore, the study will examine student difficulties identified by professionals working with the PCS during counselling. Additionally, data from students who participated in anxiety management groups organized by the PCS between 2019 and 2022 will be included. The preliminary investigation of the 2020-2021 PCS reports and the comparison of the SCL 90-R questionnaire results reveal anxious and depressive symptoms. There has been an improvement in the interpersonal sensitivity scale during the pandemic. Analyzing the 2022 data and comparing it to previous years will help identify any changes in students' motivations for accessing the service, symptoms presented before counselling, and overall needs. Evaluating the issues identified by professionals during counselling sessions will enable the assessment of any perceived shifts in students' approach to university life, future expectations, and emotional and relational resources. By analyzing the previously mentioned data, we can gain a deeper understanding of the pandemic's actual impact on the student community's social interactions and resources, as well as their current needs and how these may have changed during the years under consideration. In conclusion, this study could offer a comprehensive overview of the needs and challenges faced by the University of Trento students, which is essential for providing a service more relevant to their real needs.



Changes in sexual life after lockdown: when fear, defense mechanisms, and perceived stress wreak havoc on sexual well-being

*Dario Cafagna*¹

¹ Faculty of Psychology, eCampus University, Novedrate (Co), Italy

Abstract

Introduction: The pandemic has significantly altered life rhythms. Perceptions of virus-related risks have generated strong feelings of fear and anxiety, which have activated defense mechanisms to manage high levels of perceived stress, affected levels of well-being. One of the areas involved in relation to well-being was sexuality. Some studies have focused on monitoring well-being with respect to sexual distress; however, few studies have provided an explanatory model of the psychological and contextual dynamics that influence both sexual conduct and sexual satisfaction during this period. We aim to provide a model that sheds light on the dynamics related to sexual satisfaction and sexual behavior during the pandemic, considering the role of risk perception, fear of covid.19, levels of defense mechanisms, and perceived stress. *Methods:* From the end of May to the end of September 2020, we administered a battery of questionnaires and self-reports (Semantic differential, MAC-RF, DSQ-40, PPS, SSS-W/M, BISF-item7) through various social networks to a sample of 636 subjects (461 F; 171M) with a mean age of 26.7 years (SD 8.1). Data analysis was conducted using SPSS. This study aimed to test a multiple sequential mediation model in which different perceptions of risk influence people's sexual activity and satisfaction through the mediation of fear, defense mechanisms, and perceived stress. *Results:* The results of multiple sequential mediations showed the absence of a direct influence of different risk perceptions related to covid.19 (exposure, knowledge, and death) on sexual satisfaction. However, this influence was conditioned by the mediation of fear of covid.19 (M1), defense mechanisms (mature, neurotic, and immature) (M2), and perceived stress (M3). Regarding sexual activity, similar to previous results, only perceptions related to exposure to risk and death have an indirect influence on the frequency of different sexual practices. *Discussion:* The data show that perceptions related to risk exposure fuel various fears interconnected with the virus, which activates defense mechanisms that increase perceptions of stress in relation to the current living situation, affecting both the degree of sexual satisfaction and the frequency of sexual activity of cohabiting and non-cohabiting couples. The implications of these findings are both clinical and research.



Friday, 15th September 2023

THEMATIC SESSION

COPING WITH LIFE'S CHALLENGES

Chair:

Claudio Gentili

University of Padua

Maria Cristina Verrocchio

University "G. d'Annunzio" of Chieti-Pescara



The psychological response of patients in the transition from active to palliative care: preliminary results

*Letizia Lafuenti*¹, *Livia Sani*¹, *Maria Adelaide Ricciotti*², *Graziano Onder*^{2,3}, *Giovanni Scambia*^{3,4}, *Giampaolo Tortora*^{3,5}

¹ Clinical Psychology Unit, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

² Palliative Care Unit, Fondazione Policlinico Universitario Agostino Gemelli, IRCCS, Rome, Italy

³ Medicine and Surgery Faculty, Catholic University of the Sacred Heart of Rome, Rome, Italy

⁴ Gynecologic Oncology Unit, Women Wealth Area, Department of Woman and Child Health and Public Health, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

⁵ Medical Oncology Unit, Comprehensive Cancer Center, Department of Abdominal and Endocrine-Metabolic Medical and Surgical Sciences, Fondazione Policlinico Universitario Agostino Gemelli, IRCCS, Rome, Italy

Abstract

Introduction: An observational study on patients at the End-of-Treatment (EOT) is ongoing at the Policlinico A. Gemelli Foundation, Rome. This study aims to evaluate psychological dimensions in patients in the delicate transition from active to palliative care. *Methods:* 77 patients (80.5% women and 19.5% men), with an average age of 61 years old, completed the following four questionnaires: the General Self-Efficacy Scale (GSE), Resilience Scale (RS -14), Toronto Alexithymia Scale (TAS-20) and Integrated Palliative Care Outcome Scale (IPOS). Most patients have a diagnosis of gynecological cancer (53.2%), live with their family (43%), and have children (79%). Partners (40%) and children (30%) correspond to the primary caregivers. *Results:* The results showed that the male gender and age are directly correlated to the capacity to identify and express feelings (TAS-20, $p < .01$). On the other hand, unlike men, the female gender shows a greater ability to communicate emotions (TAS-20, $p < .01$). Furthermore, the perception of own Self-Efficacy ($p < .01$) and assistance needs (IPOS, $p < .01$) are lower for patients who have children and for those who live with their families (IPOS, $p < .01$). Finally, the results showed that, in general, resilience (RS-14) correlates positively with self-efficacy ($p < .01$) and both values increase significantly and in proportion to the patient's emotional care and needs (IPOS, $p < .05$). *Discussion:* In the difficult and delicate transition from active to palliative care, patients show a significant ability to activate their resilience and self-efficacy (despite and due to the increase in care needs). Furthermore, the patient's



ability to recognize their own frailty, ask for help and rely on the support of their children and family is fundamental. Preliminary data also highlight the importance of focusing attention on the gender differences that emerge, in this phase, in the processes of acceptance and communication of one's emotions. Future studies are recommended.



Reflective functioning and symptoms of Prolonged Grief Disorder among bereaved adults

*Pasquale Caponnetto*¹, *Martina Gazzò*¹, *Serena Giunta*², *Vittorio Lenzo*¹

¹ Department of Educational Sciences, University of Catania, Catania, Italy

² LUMSA University of Palermo, Palermo, Italy

Abstract

Introduction: Empirical research indicated that 9.8 percent of the bereaved show maladaptive reactions named Prolonged Grief Disorder (PGD). Admittedly, understanding the role of the psychological factors related to the onset of psychopathology is paramount. In this perspective, several studies have pointed out the transdiagnostic role of mentalizing, operationalized as reflective functioning. This study sought to investigate the relationships between the perceived support at the time of assistance, reflective functioning (i.e., uncertainty and certainty about the mental states of self and others), and the severity of prolonged grief symptoms in bereaved adults. *Methods:* A sample of 645 participants (79.8% females, mean age = 31.33 ± 11.95 years) completed the Prolonged Grief Scale (PG-13; Prigerson et al., 2009) and the Reflective Functioning Questionnaire (RFQ; Fonagy et al., 2016). Demographic, loss, and social support data were also collected. *Results:* Correlational analysis indicated that prolonged grief symptoms were associated with both types of impairment in reflective functioning. Specifically, symptoms were positively correlated with uncertainty about mental states. Also, they were negatively correlated with certainty about mental states. Prolonged grief symptoms were inversely related to perceived social support. *Conclusion:* Our findings suggest that reflective functioning may play a central role in the intensity of grief symptoms and thereby increasing the risk of developing a mental disorder. Specialists and researchers within the field may find useful our findings when assessing and preventing prolonged grief disorders among bereaved adults.



Emotional components and academic burnout: the mediating effects of personality traits and psychological distress

Cristina Semeraro¹, David Giofrè², Veronica Verri¹, Carla Elmi¹, Rosalinda Cassibba¹, Alessandro Taurino¹

¹ Department of Education, Psychology, Communication University of Bari Aldo Moro, Bari, Italy

² Department of Educational Sciences, University of Genova, Genoa, Italy

Abstract

The transition to university or college frequently occurs during the developmental changes described as emergent adulthood. It's a brand-new stage of life marked by pervasive sensations of instability, unpredictability, and a sense of being caught between two transitional phases: late adolescence and adulthood. This age is more vulnerable to the psychopathology and burnout syndrome. Individual differences could be crucial: personality traits, emotional functioning and psychological distress are linked to academic burnout. Although some previous evidence underlines the relevance of these factors, there are no empirical findings that have explored the joint effects of these factors on academic burnout. The present study was aimed at exploring the relationship between emotional components, personality traits and psychological distress on academic burnout. A total of 405 university students (female=323), 18 to 50 years of age ($M=23.2$, $DS=3.67$) were invited to answer an online battery of self-reported questionnaires. The study had the prior approval of the Local Ethics Committee. PID-5, DASS-2, DERS, AMOS Test (anxiety and resilience subscales) and School Burnout Inventory (SBI) were administered to participants. We tested the association between maladaptive personality (psychoticism, detachment and negative affect), psychological distress and emotional components (anxiety, resilience and emotional dysregulation) on academic burnout. A path analysis model showed that anxiety, resilience and emotional dysregulation are related to academic burnout. Maladaptive personality and psychological distress partially explained this association. This model explained 48% of the variance on academic burnout. There was a significant direct effect to academic burnout from anxiety ($\beta = .33$, $p < .001$), resilience ($\beta = -.28$, $p < .001$) psychological distress ($\beta = .25$, $p < .001$). Indirect effects of maladaptive personality ($\beta = .05$, $p < .001$) and emotional dysregulation ($\beta = .05$, $p < .001$) were statistically significant and mediated by anxiety and resilience ($\beta = .07$, $p < .001$; $\beta = .06$, $p < .001$). In accordance with a body of evidence, our results confirmed a strong association between emotional components and academic burnout. The novelty of



our research was to highlight a specific role of maladaptive personality traits and psychological distress in academic burnout.



Psychological well-being in cancer patients: preliminary findings on comparison between Adolescents and Young Adults vs older patients

Letizia Lafuenti^{1,2}, Daniela Belella^{1,3}, Angelica Marfoli¹, Inge Theodora Anne Peters², Vincenzo Valentini⁴, Giampaolo Tortora^{5,6}, Giovanni Scambia^{2,6}

¹ Clinical Psychology Unit, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

² Gynecologic Oncology Unit, Women Wealth Area, Department of Woman and Child Health and Public Health, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

³ Medical Oncology Unit, Comprehensive Cancer Center, Department of Abdominal and Endocrine-Metabolic Medical and Surgical Sciences, Fondazione Policlinico Universitario Agostino Gemelli, IRCCS, Rome, Italy

⁴ Radiation Oncology Unit, Department of Diagnostic Imaging, Radiation Oncology and Hematology, Fondazione Policlinico Universitario A. Gemelli IRCCS, Rome, Italy; Medicine and Surgery Faculty, Catholic University of the Sacred Heart of Rome, Rome, Italy

⁵ Medical Oncology Unit, Comprehensive Cancer Center, Department of Abdominal and Endocrine-Metabolic Medical and Surgical Sciences, Fondazione Policlinico Universitario Agostino Gemelli, IRCCS, Rome, Italy

⁶ Medicine and Surgery Faculty, Catholic University of the Sacred Heart of Rome, Rome, Italy

Abstract

Introduction: The cancer diagnosis in Adolescents and Young Adults AYA (18-39 years) in 2022 is about 87.000 new cases/year in the United States, 66.000 in Europe (of these, 15.000 registered in Italy). In this AYA population, survival and life expectancy have also increased (85,5% after 5 five years), compared to older people. This aspect highlights possible criticalities related to chronicity and long-term sequelae of the disease and the therapies. Indeed, these consequences can greatly impact on the quality of life of patients and their caregivers and increase psychopathological risk. The literature emphasizes that early screening of the level of perceived distress after cancer diagnosis and possible psychopathological symptoms may be crucial. Different characteristics and needs may emerge in the AYA population than in adult A (over 40 years). Our retrospective observational study has the primary objective of making a comparison between AYA and A in the perception of distress, anxiety and depression. *Methods:* We



involved oncological patients, aged 18 to 80, treated at the Oncological Units of the Fondazione Policlinico Universitario A. Gemelli IRCCS. We analyzed questionnaires score, Distress Thermometer (DT) and Hospital Anxiety and Depression Scale (HADS), administered at diagnosis, according to daily clinical practice to oncological patients. *Results:* Data analysis focused on the outcomes of 608 patients, 134 patients AYA (mean age 32.1 ± 5.34) and 472 A (mean age 55 ± 10.3). All the tests show a high positive correlation; also the age data correlated positively with depressive symptoms (HADS-D). Comparison between the groups showed no significant differences in distress score (AYA: 6.52 ± 2.16 ; A: 6.37 ± 2.57). As anticipated by the correlation matrix, older patients had higher depression levels, but the difference wasn't significant. Anxiety, on the other hand, was higher in AYA, but this difference also did not reach levels of significance. *Conclusions:* In conclusion, cancer patients (AYA/A) show a high level of distress. In addition, these preliminary results seem to highlight the increase in anxiety disorders in AYA. It seems important to focus the attention on the psychological well-being of AYA patients, carrying out an early screening on risk factors.



Emotion regulation strategies and personality traits in a national sample of community older adults: preliminary associations with age-related clinical outcomes

*Alberto Sardella*¹, *Vittorio Lenzo*², *Giorgio Basile*³

¹ Department of Clinical and Experimental Medicine, University of Messina, Messina, Italy

² Department of Educational Sciences, University of Catania, Catania, Italy

³ Department of Biomedical and Dental Sciences and Morphofunctional Imaging, University of Messina, Messina, Italy

Abstract

Introduction: Emotion regulation (ER) strategies and personality traits denote clinical psychological features involved in aging adaptation processes. The study's aim was to investigate novel associations of ER strategies and personality traits with age-related outcomes. *Methods:* Community older adults aged ≥ 65 years were recruited on a voluntary basis. Subjects with reported psychiatric conditions, with reported severe neurocognitive disorders, with severe functional limitations and/or with sensory deficits were excluded. The use of reappraisal and suppression was explored through the Emotion Regulation Questionnaire (ERQ); the Ten Item Personality Inventory (TIPI) was also used. Frailty (Tilburg Frailty Indicator), screening of sarcopenia risk (SARC-F), and loneliness (UCLA Loneliness Scale) were the outcome of interest. *Results:* Preliminary data on a sample of 400 older adults (recruited between Messina, Catania, Brescia and Turin) were analyzed (mean age 73.53 ± 6.8 years; female prevalence of 65.8%). Frail subjects reported significantly lower levels of reappraisal (mean ERQ_reappraisal 28.43; $p= 0.011$) compared to non-frail (mean ERQ_reappraisal 31.1); frail subjects also reported significantly greater neuroticism (mean TIPI_nevroticism 7.48; $p<0.001$) and lower openness (mean TIPI_openess 7.58; $p<0.001$) compared to non-frail (mean 5.99 and mean 9.09, respectively). Subjects at risk of sarcopenia showed significantly lower reappraisal (mean 26.50; $p= 0.04$) compared to subjects not at- risk (mean 30.36); moreover, at risk subjects reported lower consciousness (mean TIPI_consciousness 10.29; $p= 0.013$) and lower openness (mean 6.24; $p<0.001$) compared to those not at risk (mean 11.42, and mean 8.69, respectively). Lonely older adults reported significantly greater suppression (mean ERQ_suppression 16.13; $p= 0.002$) compared to those not lonely (mean 14.03). Lonely subjects also reported greater neuroticism (mean 7.63; $p<0.001$) and lower openness (mean 7.96; $p= 0.037$) compared to those not lonely (mean 6.18, and mean 8.65, respectively). *Conclusions:* The use of reappraisal and the



presence of adaptive personality traits can be associated with physical and functional age-related outcomes and with loneliness in older adults; they might denote novel factors, on which developing tailored interventions for older adults at risk of adverse age-related outcomes.



Psycho-oncology triage code in breast cancer patients waiting for surgery

Daniela Belella¹, Stefano Magno², Francesca Veccia¹, Riccardo Masetti^{2,3}

¹ Clinical Psychology Unit, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy ² Breast Unit, Department of Woman and Child Health and Public Health, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

³ Medicine and Surgery Faculty, Catholic University of the Sacred Heart of Rome, Rome, Italy

Abstract

Purpose: Assessment of psychological needs in a patient diagnosed with breast cancer is considered a fundamental part of standard care, yet it is not routinely performed in all cancer patients, even in high-quality centers. In addition, psycho-oncological assessment is often limited to distress related to the cancer diagnosis and does not include individual resources that could contribute to effective disease management, better adherence to treatment protocols, and ultimately post-traumatic growth. The present study demonstrates a new model of psycho-oncology triage by screening for psychological distress risk and coping resources in an entire population of patients with nonmetastatic breast cancer awaiting surgery. Assessment occurs in the hospital, a few days after diagnosis, through psychological counseling and a psychodiagnostic assessment (T0), which will inform subsequent interventions and follow-up along the continuum of care. The model includes a reassessment (T1) during hospitalization for surgery.

Methods: each breast cancer patient treated at our Gemelli Polyclinic Foundation Center completes the following questionnaires: Distress Thermometer (DT), Hospital Anxiety and Depression Scale (HADS), Mini-Mental of Adjustment for Cancer Scale (MINI-Mac), and Clinical Outcomes in Routine Evaluation (CORE-OM). *Results:* from December 2022 to April 2023, we enrolled 279 patients at T0 with 127 patients re-evaluated at admission (T1). Preliminary analysis on the data at T0 shows that HADS-A has a significant positive correlation with HADS-D ($p < .01$), MINI-Mac-Anxious Concern ($p < .01$) and DT ($p < .01$). Positive correlations were found between HADS-D and MINI-Mac-Anxious Concern ($p < .01$) and DT ($p < .01$). The MINI-Mac-Helpless/Hopeless subscale variable ($p < .01$) obtained positive correlations with the MINI-Mac-Anxious preoccupation subscale ($p < .01$). *Conclusions and clinical implications:* these preliminary results appear encouraging and relevant in order not only to implement actions to alleviate distress, but also to promote patients' resources, thus increasing the focus on the psychological adjustment process alongside cancer treatments.



Female cancer risk: narratives and metaphors of young women

Daniela Lemmo¹, Maria Luisa Martino¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

Participation for breast and cervical cancer screening is relatively low in women aged 40 or less, despite these women being a potential risk group. In cancer discourse, the metaphor of war is prevalent and reflects an imperative demand to win the war against disease. The risk of cancer forecasts an emotionally critical experience for which it is important to study mental representations concerning illness and health care. The creation of an invented story has a specific function in the natural life of the individual and offers new dimensions and frameworks for imagination and fantasy. Considering the lack of research on the metaphorical expression of women themselves in the field of prevention, the aim of this work is to understand what the relationship with preventive activity in oncology means for young women and how this relationship is revealed by their metaphors. 58 young women voluntarily participated in the present research, answering a narrative prompt. The stories written by the participants were analyzed using qualitative methodology to identify construct, themes and metaphors. Our findings identify four constructs and a number of associated themes and metaphors. The construction of a defense: youth as protection; The attribution of blame about cancer risk; Learning from experience as a prevention activator; and from inaccessibility to access to preventive practices: the creation of engagement. The construction of an invented story allows us to promote a process of prefiguration on the bodily, affective and thought planes invested in preventive practice and brings out the use of metaphors to represent cancer risk and self-care. The results allow us to think about the construction of interventions to promote engagement processes in prevention from an early age.



Saturday, 16th September 2023

SYMPOSIUM SESSION



NEW PERSPECTIVES ABOUT THE MIND-BODY CONNECTION

Proposer

*Francesco Pagnini*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Discussant

*Silvana Grandi*¹

¹ Department of Psychology, University of Bologna “Renzo Canestrari”, Cesena, Italy

Abstract

The symposium features a series of presentations that explore the complex relationship between the mind and body, as well as current research perspectives. Each presentation offers a unique perspective on this connection, but together they provide a comprehensive understanding of how mental and physical states are currently approached in the scientific literature. The use of predictive models and Bayesian brain-guided approaches represent some of the most updated ideas on this topic. Specifically, the symposium will discuss the role of Predictive Perceptual Models in somatization, as well as the complex interplay between priors (e.g., expectations), perception, and physical health. Once introduced and fully described, recent studies that applied this perspective in the context of eating and energy intake will be presented. Additionally, the symposium will introduce some of the latest knowledge on mind-body interactions in eating disorders, including the pioneer study of the Brain-Heart Interplay and recent developments on the role of body image in individuals with anorexia.



Self-in-context: Predictive Perceptual Model and somatization

*Piero Porcelli*¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Self-in-context is a recently developed model based on the Predictive Processing Model (PPM). According to PPM, people use their previous experience 1) to construct predictive models (generation stage based on priors, or set of neural networks that captures the statistical regularities of brain activity), 2) to predict incoming stimuli (perception stage based on posteriors, or actual sensory stimulus that are matched against prior distributions), and 3) to prearrange action plans to efficiently deal with the expected situation (implementation stage based on minimization of prediction errors). The specific sensory cues in a given environment are less important to the construction of situation representations than are the conceptions of the latent causes – intentions, motives and hidden processes – behind actions and events. Thus, situation representations are essentially compressive, reducing complex sets of sensory cues to low-dimensional characterizations. Theoretical models of the somatization process are largely based on reduced emotional awareness (e.g., alexithymia), impaired emotional regulation (e.g., poor referential activity), and dysfunctional beliefs about somatic states (e.g., catastrophizing). Furthermore, the psychological features meeting the B criterion of DSM-5 Somatic Symptom Disorder can be conceived as failures in the top-down and bottom-up neural streaming of minimization of prediction errors. The self-in-context model can be helpful in explaining complex clinical cases of patients with overlapping organic, functional, and psychopathological syndromes.



Bayesian brain, expectations, and energy intake in clinical and non-clinical populations

*Francesco Pagnini*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

The Bayesian brain theory posits that the brain uses probabilistic models to make predictions and infer the causes of sensory input. This process involves the integration of prior knowledge and current sensory information to generate expectations about the environment. Recent research has shown that expectations can directly influence physiological processes, including energy intake and glucose metabolism, in both clinical and non-clinical populations. In the presentation, we will review the available evidence suggesting that energy intake is influenced by the mind through Bayesian-like processes. Empirical support will be provided by studies conducted by the presenter or colleagues, with samples from the general population or people with diabetes. For example, data from a 2010 study show that the mindset in which one approaches food consumption affects physiological satiation, as measured by the gut peptide ghrelin, with participants' satiety being consistent with what they believed they were consuming, rather than the actual nutritional value. Two other studies explored similar dynamics in people with type II diabetes, whose blood glucose levels are influenced by time perception and expectations about sugar consumption. Overall, recent findings suggest that psychological processes, such as the brain's Bayesian inference system, can directly impact glucose metabolism and physiological satiation. The presentation will discuss these findings and explore their implications.



Estimation of the Brain-Heart Interplay in Anorexia Nervosa in response to Mindful Self Contact

Luca Ostacoli¹, Giovanni Abbate Daga²

¹ Department of Clinical and Biological Sciences, University of Turin, Turin, Italy

² Department of Neuroscience, University of Turin, Turin, Italy

Abstract

Anorexia Nervosa (AN) represents a persistent disorder of food intake that alters health and psychosocial aspects, leading to high burden of disease. Also, an alteration of body image and a hypercritical attitude are central in AN psychopathology. In response to this, the Mindfulness-Based Interventions (MBI's) have been proposed as therapeutical tools for AN, able to regulate interoceptive awareness and endorsing a compassionate attitude toward the Self. Recent studies showed that resting state vagally mediated Heart Rate Variability (HRV) is elevated in ED patients, even if the potential of HRV as autonomic stress biomarker is uncertain. Moreover, it has been reported the concurrent reduction of alpha and increase of beta, and theta Electroencephalography (EEG) bands in AN patients. The emotional aspects can be investigated considering the role of the functional brain-heart interplay (BHI) that provides information on the functional dialogue between EEG and sympathovagal dynamics. This composite index, reflecting autonomic and central nervous system activity, has been proposed as sensitive biomarkers of depressive and post-traumatic symptoms. Studies investigating BHI in individuals with depressive symptoms both in resting conditions and in response to emotional tasks support the hypothesis of an altered communication between cardiac and cortical activity. This study aims at estimating BHI index after two audiorecorded MBI's (i.e., Self-Contact and Loving Kindness) in twenty AN patients, as compared to controls. The neurobiological evaluation included the recording of EEG and ECG before, during, and after the audio listening. The clinical assessment entailed self-administered psychological measures for emotional style, depression, anxiety, dissociation, and exposure traumatic events. A brief experience assessment has been implemented at the end of the intervention. This is the first study to investigate changes in functional directional BHI following MBI's techniques within AN patients. Our results are expected to show how different MBI practices may elicit different neurobiological responses in individuals with AN, thus furthering our understanding of its psychopathology and potential therapeutical options.



Body perception/representation distortions in subjects with Anorexia Nervosa. A scoping review on the validity of the Allocentric Lock Theory

*Gian Mauro Manzoni*¹

¹ School of Psychology, eCampus University, Novedrate (Como), Italy

Abstract

Introduction: Even if the distorted perception/representation of body weight and shape is an important symptom of Anorexia Nervosa (AN), it is usually viewed as body uneasiness or dissatisfaction, and is rarely and directly addressed in clinical interventions. However, there is evidence that the overestimation of body weight and shape in AN is something more than simply being dissatisfied with one's own body. Indeed, new findings from studies on the Allocentric Lock Theory (ALT) suggest that it could be a multisensory integration deficit, which can be modeled and investigated in Bayesian terms. A scoping review was thus planned in order to assess the state-of-the art of such investigations and provide first suggestions for clinical applications. *Methods:* All studies that investigated alterations of body perception/representation in subjects with AN in the framework of the ALT were searched on PsycInfo, Pubmed and Google Scholar. Five studies were found and are being reviewed. *Results:* The scoping review is still ongoing and results will be presented in the symposium. *Discussion:* Research on the validity of the ALT and its Bayesian definition in the study and interpretation of body perception/representation distortions in AN is still in its infancy but results are promising and could already inform the development of a new therapeutic method.



**EMOTIONAL AND BEHAVIORAL DYSREGULATION AS A KEY FACTOR IN
CHILDREN'S SYMPTOMS**

Proposer

*Silvia Cimino*¹

¹ Department of Clinical, Dynamic and Health Psychology, Sapienza University of Rome, Rome, Italy

Discussant

*Luca Cerniglia*¹

¹ School of Psychology, International Telematic University Uninettuno, Rome, Italy

Abstract

Emotional dysregulation (ED) is described as a lack of ability to control and organize emotions in order to create consequent emotional responses and subsequent return to baseline. ED is a substantial health risk, and it is linked to a variety of pediatric mental problems and symptoms. Children with ED may experience difficulty in managing their emotions, leading to behavioral problems, academic difficulties, and social challenges. Early identification and intervention can help prevent long-term negative consequences. The first contribution will tap dysregulation symptoms in children of mothers with peri-partum depression, considering the role of fathers in the treatment. It can provide a better understanding of the impact of peri-partum depression on children's development and how involving fathers in the treatment can improve outcomes. This research could have significant implications for early intervention strategies and family-based interventions. The second contribution will consider emotion dysregulation in children as a factor associated with substance abuse in later life. Understanding the link between emotion dysregulation and substance abuse can help develop targeted prevention programs for youths at risk, and improve treatment outcomes for individuals struggling with addiction. Additionally, this research can inform the development of family-based interventions that address both emotional regulation and substance abuse in a comprehensive manner. The third contribution will tap the influence of emotion regulation in parents with oncological diseases in predicting offspring psychological adjustment. Previous research has shown that parents' emotional well-being can have a significant impact on their children's psychological adjustment. This study aims to further explore this relationship in the



context of parents with oncological diseases. The fourth contribution will focus on emotion dysregulation in youths involved in fights with peers. This contribution will provide insights into the role of emotion regulation in aggressive behavior among adolescents. It will also discuss potential interventions to help youths manage their emotions and reduce their involvement in peer fights.



Psychological profiles of male adolescents involved in fights among peers. A study on their emotion regulation characteristics, defense strategies and capacity of mentalizing

Alessandra Ragona¹, Silvia Cimino¹

¹ Department of Clinical, Dynamic and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Adolescence is a critical phase in the development of adult identity and the stabilization of personality, and it is accompanied by significant changes and change processes on the physiological, cognitive, and affective levels. An effective emotional/behavioral regulation mechanism is thought to be critical in preventing maladaptive behaviors as well as mature defense and good mentalizing skills. This article focuses on psychodynamic variables with the specific aim of examining probable changes in emotional/behavioral in male adolescents who have fights with peers, compared to adolescents who do not. *Methods:* the sample size for this study was N = 483 male adolescents. Group 1 consists of adolescents who declared less than four fights in the previous year and those who reported four or more fights in the previous year (Group 2). The Self-Concept and Identity Measure was used to assess identity consolidation; the Response Evaluation Measure for Youth was used to assess defense strategies; the Difficulties in Emotion Regulation Scale was used to assess emotion regulation; and the Reflective Functioning Questionnaire was used to assess mentalizing capacity. In the two groups a series of multivariate analyses of variance were conducted to assess the features of teenagers' identity, the type of defensive tactics (mature vs. immature), emotional/behavioral regulating capability, and mentalizing ability. *Results:* The results revealed that adolescents who had four or more fights in the previous year had lower Identity Consolidation, used more immature defense strategies, had poorer emotion regulation processes, and had a lower capacity for mentalizing than peers who had none or less than four fights. *Conclusions:* The current study demonstrates the efficacy of identifying at-risk children at school for maladaptive psychosocial functioning related with aggressive and violent conduct. Interventions could focus on improving adolescents' mentalizing, emotion regulation, and use of mature defense strategies, particularly in situations of distress and conflict, with the goal of reducing the likelihood of physical aggressions and violence as a maladaptive response to poor regulation.



Parent-infant interactions in families with mothers with postpartum depression: a longitudinal study on the effects of a psychodynamic treatment

Silvia Cimino¹, Silvia Giambrone¹, Virginia Caiello¹

¹ Department of Clinical, Dynamic and Health Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Postpartum depression (PPD) affects 10% to 15% of women in western countries. Although the quality of mother-child interaction in women with PPD has long been investigated, the role of the father in PPD and his contribution in the dysfunctional relationship with the child, and the consequent development of the infant, remains unexplored. Only few studies investigated the father role on PPD. The main aim of this work is to assess the quality of mother-infant and father-infant interactions in families in which the mother with PPD and has followed a psychodynamic treatment during the child's first year of life considering the severity of parents' psychopathological symptoms and children's temperament. *Methods:* Participants were divided into three groups: (1) families with maternal PPD where both the parents followed the treatment (TxMF); (2) families with maternal PPD where only the mother followed the treatment (TxM); and control families (no maternal PPD, no treatment) (Con). The three groups were evaluated through Symptom Check-List-90-Revised (SCL-90-R), Questionari Italiani Temperamento (QUIT) and mother-infant and father-infant nutrition interactions were video-recorded and evaluated with Scala di Valutazione Interazioni Alimentari (SVIA) at two time points: (T1) when the children were 3 months old (preceding the start of intervention in TxMF and TxM) and the second time point and (T2) when they were 12 months old (immediately after treatment conclusion). *Results:* Mothers in the TxMF group had significantly lower scores (i.e., less maladaptive) at T2 versus T1 for all four subscales; on the contrary, treatment of the mother alone in the TxM group did not yield significant changes in scores. Moreover, the SCL-90-R score for the TxMF became significantly lower than for the TxM group at Time 2. Similarly to mothers, only fathers in the TxMF group showed a decrease (i.e., less maladaptive). *Discussion:* Involvement of fathers in the treatment is important to improve the psychopathological symptoms of both parents and the quality of interactions with children. Short-term intervention is only effective if the whole family nucleus is involved. Importantly, fathers' psychopathological symptoms moderated the relationship between maternal PPD and infants' behavioral problems in cases of mild to moderate maternal depression symptoms.



Parenthood and oncological disease: parental emotion regulation strategies, psychological adjustment and child difficulties

Sonia Bramanti¹, Carmen Trumello¹, Lucia Lombardi¹, Carla Candelori¹, Alessandra Babore¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: Parental cancer affects not only the individual who receives the diagnosis, but the whole family. Dealing with the diagnosis and its treatment could make the parents less sensitive and responsive to their child needs (Watson et al., 2006). The ability of parents to understand and deal with their emotions could influence parental and child adjustment to the cancer diagnosis and the concerns related to the impact of such diagnosis. In this study we aimed to analyze if there were differences in parents’ psychological adjustment (i.e., anxious and depressive symptoms), emotion regulation strategies (i.e., cognitive reappraisal and expressive suppression), concerns (i.e., practical, emotional and co-parenting concerns) and in child adjustment (i.e., emotional, conduct and peer problems, prosocial behavior and hyperactivity) in parents who were currently under oncological treatment and parents who were not under treatment; we also explored the role of emotion regulation strategies on parents’ anxious, depressive symptoms and concerns and on child difficulties. *Methods:* The sample comprised 394 parents with a cancer diagnosis (mean age = 44.60 years; s.d. = 7.42). The following self-report instruments were administered: Emotion Regulation Questionnaire (ERQ; Gross & John, 2003), Hospital Anxiety and Depression Scale (HADS; Zigmond & Snaith, 1983), Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) and Parenting Concerns Questionnaire (PCQ; Muriel et al., 2012). *Results:* Parents who were currently under treatment reported higher levels of concerns related to the practical impact of their diagnosis ($p < .05$) and greater child emotional difficulties ($p < .05$). Cognitive reappraisal was negatively related to parental anxiety ($p < .001$) and depression ($p < .001$), child’s emotional difficulties ($p < .01$) and hyperactivity ($p < .05$); expressive suppression was positively related to anxious ($p < .001$) and depressive symptoms ($p < .001$), practical ($p < .001$), emotional ($p < .01$) and co-parenting ($p < .05$) concerns, and to child’s problems with the peer group ($p < .05$). *Discussion:* These results highlighted the importance of considering the effects of emotion regulation strategies in parents’ and child adjustment in order to improve interventions targeting emotion regulation.



ADHD trajectory from childhood to adulthood: the role of substance abuse and clinical and therapeutic implications

*Angelo G. I. Maremmani*¹

¹ Department of Psychiatry, Northern-West Tuscany Region Local Health Unit, Versilia Zone, Viareggio, Italy

Abstract

Introduction: Bipolar/cyclothymic mood disorders, ADHD in adults, and substance use disorders frequently occur under the age of 18 and their prodromes are already evident in childhood/adolescence. Aspects such as affective and behavioural dysregulation are central to the progressive structuring of the aforementioned pathologies that, over time, can lead to the onset of complex, comorbid clinical pictures, which are difficult to frame and manage therapeutically. The example of subjects with a dual diagnosis (a mental disorder associated with an independent substance use disorder) who present substance abuse pictures secondary to an Axis I psychopathological condition is emblematic in this context. According to Khantzian's theory of self-medication, in fact, the choice of substances of abuse in subjects with certain psychopathological features is not random, but dictated by 'relief craving' and thus aimed at reducing symptoms and psychic conditions of subjective suffering. *Methods:* The characteristics of a sample of 20 subjects suffering from cocaine use disorder and ADHD belonging to the University Clinic of Pisa, Santa Chiara, treated with stimulant drug therapies (atomoxetine or methylphenidate) for an average follow up period of about seven months will be presented. All study participants were assessed with standardized questionnaires for diagnostic and treatment outcome purposes. *Results:* The results showed that behaviours reflecting cocaine dependence were significantly reduced during treatment with stimulant medication for ADHD and did not correlate with age, gender, familiarity, duration of treatment or medication used. Improvement of the cocaine use disorder was closely correlated with improvement of ADHD-related symptoms, supporting the validity of the theory of self-medication in ADHD patients with co-occurrence of cocaine dependence. *Conclusions:* In line with the results some models of pharmacological treatment will be provided according to a hierarchical approach.



SMART HEALTH: DIGITAL SOLUTIONS FOR PSYCHOLOGICAL WELL-BEING

Proposer

*Giulia Bassi*¹

¹ Department of Developmental and Socialization Psychology, University of Padua, Padua, Italy

Discussant

*Maria Francesca Freda*¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

Digital solutions in healthcare have the potential to offer effective and timely parallel support allowing scalability and decentralization through the use of a wide range of platforms, from teletherapy to mobile healthcare (mHealth), applications (Apps), Virtual Reality (VR), and web-based interventions. In addition, digital solutions offer the advantage of reducing help-seeking barriers, which include, but are not limited to, stigma, cost issues, and time constraints. Growing evidence suggests that digital mental health-oriented interventions are capable of influencing the psychosocial status of individuals. However, evidence is still in its early stages. Therefore, the purpose of the present symposium is to relate some recent research contributions regarding the development and implementation of digital solutions targeting different samples to support their psychological well-being. In this regard, the symposium intends to share and discuss knowledge from theoretical, clinical, and empirical perspectives in order to gain an in-depth understanding of the role of technology in healthcare. Albano et al. (University of Palermo) will discuss the usability, effectiveness, and satisfaction of an Instagram profile, called “#How can we help you?”, developed for supporting people suffering from eating disorders. Cristofolini et al. (University of Trento) will present a feasibility study aimed to investigate the effectiveness of a VR-based platform with the purpose of enhancing social skills, and executive functions, and reducing social anxiety in adolescents with autism spectrum disorder. Mancinelli et al. (University of Padova) explore the feasibility of a supported web-based Behavioral Activation intervention that employs the Brief Behavioral Treatment for Depression-Revised protocol among pregnant women with sub-clinical depression symptoms comparing the guided vs. unguided version. Lastly, Pardini et al. (University of Padova)



examine the feasibility of a personalized naturalistic VR scenario by assessing motion-sickness effects, engagement, pleasantness, and emotions related to exposure to a VR context of individuals living in a long-term care home diagnosed with cognitive impairment.



VR-mediated multiplayer interventions to improve social skills and reduce social anxiety in ASD

Melanie Cristofolini¹, Gianpaolo Alvani², Ersilia Vallefucio¹, Elio Salvadori^{3,4}, Marco Dianti^{3,4}, Paola Venuti¹

¹ Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

² Department of Information Engineering and Computer Science, University of Trento, Trento, Italy

³ MEEVA Srl Società Benefit

⁴ Fondazione Bruno Kessler, Trento, Italy

Abstract

Virtual Reality (VR)-based interventions can aid people with Autism Spectrum Disorder (ASD) improve social and communication skills as well as reduce social anxiety. However, many VR applications for ASD focus on individual social subskills and lack interactive multiplayer scenarios. Furthermore, additional research is needed to explore the relationship between social-cognitive abilities and physiological responses in VR- settings. We present a feasibility study to investigate the effectiveness of a VR-based platform aimed to enhance social skills, executive functions, and reduce social anxiety in teens with ASD. The therapy platform consists of a multiplayer VR game, wearable sensors and a monitoring platform; its development was carried out by the Italian startup MEEVA and followed a preliminary analysis in which the acceptability of Extended games with 19 children with ASD were tested. The first part of the study aims to assess the usability of the platform. Specifically, 34 participants with ASD (ages M=14.1, $QI > 85$) were divided into small groups based on age and cognitive functioning and tested the platform in three sessions. In the second part of the study, the platform was used in clinical settings from 15 participants with ASD (ages M=15.3, $QI > 85$). The players were divided into groups of 2/3 members and played 3 VR sessions and 3 as-usual intervention sessions, one per week. During experimental sessions, the system collected and monitored in real-time physiological data (breath frequency, heart rate and heart rate variability) via wearable sensors. Moreover, all sessions were recorded for behavioral coding of social interactions. Results of the first part of the study show that the number of spontaneous social openings to peers increased ($p < .001$) together with an increment in average respiratory rates ($p < .01$) and number of peaks in breathing ($p < .001$), followed by a decrease in the variance of breath frequency ($p < .01$) during the second session. Moreover, we observed increased social interactions and physiological arousal across sessions, indicating higher engagement in group dynamics. Data from the second part of study is still under analysis. Further investigation by including data from



the second part and comparisons with traditional intervention are needed to provide some potential evidence for implementation of VR-digital therapy for ASD.



Guided self-help and eating disorders: #How can we help you? project, an Instagram-based online self-help

Gaia Albano¹, Valentina Cardi², Mariarita Semola¹, Arianna Muscolino¹, Gianluca Lo Coco¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: An update of findings (since 2017) from a systematic review of the literature on guided self-help/self-help (GSH/SH) among patients with binge eating symptoms and anorexia nervosa or their carers will be presented. GSH/SH interventions have been widely assessed for the treatment of binge eating disorder and they seem to be superior to comparison conditions in reducing symptoms. The use of these interventions for those suffering from anorexia nervosa has been investigated less, due to the severity of illness and ambivalence to change. The current literature identifies the potential of GSH interventions in anorexia nervosa especially in improving motivation to change, adherence to treatment, and carers' skills to cope with an ED. Recently, there has been a shift from face-to-face, manualized interventions delivered by clinical professionals, towards digital interventions, offering online materials delivered by people with less intensive training, including those with past experience of ED. *Methods:* We have developed a protocol study based on the definition of psychoeducational and integrated online materials able to assess the usability, effectiveness and satisfaction of the #How can we help you? Instagram profile. This profile is aimed to orient those suffering from a self-reported ED towards clinical care, providing information about eating concerns and related constructs, increasing motivation for treatment and illness awareness. The contents shared are based on: narratives about people who had recovered from an ED, importance and ability to change, nutrition management. The aim of this work is to describe the #How can we help you? project, the feedback received from users and its future directions. *Results:* We provided an overview of the needs of the Instagram profile users, a description of the main interactions recorded since the profile was opened and examples of the needs shared by users in direct messages. *Discussion:* This project represents a first step in a wider clinical trial, integrating online professional help with the provision of peer-support.



JuNEX - A Digital Behavioral Activation Intervention during Pregnancy: A first Feasibility Study

Elisa Mancinelli^{1,2}, Giulia Bassi¹, Silvia Gabrielli², Silvia Salcuni¹

¹ Department of Developmental and Socialization Psychology, University of Padua, Padua, Italy

² Digital Health Lab, Centre for Digital Health and Wellbeing, Fondazione Bruno Kessler, Trento, Povo, Italy

Abstract

Perinatal women have reported an appreciation for online-delivered interventions. Behavioral Activation (BA) interventions might be suitable to be administered digitally, being structured as well as self-administrable. The aim of the present study is to investigate the feasibility of an empirically supported in-person BA protocol (Brief Behavioral Treatment for Depression-Revised; BATD-R) in digital setting among pregnant women with sub-clinical depression symptoms comparing the Guided (G) vs. Unguided (U) version. The platform usability was investigated. N=11 pregnant women showing sub-clinical depression symptoms (Patient Health Questionnaire-9 < 15) took part in the study; N=6 women were randomized in the G group (Mage=32.17±4.36) and N=5 in the U Group (Mage=31±4.95). The digital interventions, composed by 6 core modules and 3 optional ones, were administered through Moodle; they differed, between the two groups, for the presence, in the G-Group, of a human guide supporting women in homework revision once a week through the Moodle Chat. The intervention content was delivered through text, images, and videos. Descriptive statistics were evaluated, and semi-structured interviews were conducted. Results highlighted that the intervention, as replica of the BATD-R, is not feasible to be administered digitally in a e-learning format, as exemplified by the high rate of drop-out (50% G; 75% U) and low adherence. Indeed, women described doing the homework as cumbersome and stressed the high effort required. Still, the Guided intervention resulted better accepted compared to the Unguided one. Both groups though showed appreciation for the content of the intervention, assessing that it was in-tune with their experience of pregnancy. Moreover, women reported that the 6 core modules were enough for the intervention purpose. Overall, results highlighted the shortcomings and strengths of the intervention. Adopting a user-center design approach, pregnant women feedback regarding their needs and opinions were collected, directing the refinement of the intervention content as well as of the development of an ad hoc platform through which deploying it subsequently. Indeed, women showed a desire for receiving psychosocial support during pregnancy and commented on the potentiality that digital psychosocial supports, especially if App-based, could have.



Personalized Virtual Reality scenarios to promote Engagement, Enjoyment, and Relaxation in Patients with Cognitive Impairment: A Proof-of-Concept study

Susanna Pardini^{1,2,3}, Silvia Gabrielli², Lorenzo Gios⁴, Marco Dianti², Oscar Mayora-Ibarra², Lora Appel^{5,6}, Patty Rigatti⁷, Stefano Forti², Caterina Novara¹

¹ Department of General Psychology, University of Padua, Padua, Italy

² Digital Health Research Unit, Centre for Health and Wellbeing, Fondazione Bruno Kessler, Trento, Italy

³ Human Inspired Technology Research Centre (HIT), University of Padua, Padua, Italy

⁴ TrentinoSalute4.0, Competence Center for Digital Health, Trento, Italy

⁵ OpenLab, University Health Network, Toronto, ON, Canada

⁶ Faculty of Health, School of Health Policy and Management, York University, Toronto, ON, Canada

⁷ Azienda Pubblica di Servizi alla Persona (APSP) “Margherita Grazioli”, Trento, Italy

Abstract

In long-term care settings, allowing older adults to enjoy recreational experiences in natural environments can be beneficial, especially if they have cognitive and physical impairments. Despite this, it is essential to reflect on how obstacles (e.g., reduced motor skills, and fear of injury during movement) may hinder and limit participation in organized outdoor activities. Growing evidence supports the claim that immersive virtual reality scenarios: 1) provide innovative strategies for overcoming these obstacles, 2) improve the quality of life in older adults' healthcare facilities, 3) have a positive impact on behavioral and psychological symptoms, and 4) promote engagement and relaxation. Considering the promising outcomes of recent empirical investigations and the need for more depth and breadth studies in order to have VR interventions adopted by mainstream healthcare, the current presentation aims to describe the results of a Proof-of-Concept and Mixed-Methods study. The research is mainly focused on investigating the feasibility of a personalized naturalistic VR scenario by assessing motion-sickness effects, engagement, pleasantness, and emotions related to exposure to a VR context of 23 individuals living in a long-term care home diagnosed with cognitive impairment. The measures administered were composed of self-reported and observational measures to obtain information from users and seven healthcare staff professionals who attended the VR sessions. At the end of the experimental phase, a focus group session was conducted with the healthcare staff to acquire additional information, mainly on strengths, weaknesses, future perspectives, and risks that are associated with using VR in a long-term care setting.



Feasibility and acceptability were proved to be satisfactory since the VR experience was well-tolerated by users, and no adverse side effects was reported or observed. Moreover, preliminary outcomes showed that more than half of the participants were engaged, pleased, and calm most of the time during the virtual activity, showing decreased state anxiety during and after the experience. A key leading innovation provided by the current study is its contribution to advancing knowledge on the role of customized VR scenarios and their impact on acceptability and potential clinical efficacy of their usage with frail older adults.



**THE EXPERIENCE OF SHAME: A TRANS-THEORETICAL CONCERN FOR
RESEARCHERS AND PRACTITIONERS**

Proposer

*Nadia Barberis*¹

¹ Department of Health Sciences, Magna Græcia University of Catanzaro, Catanzaro, Italy

Discussant

*Valentina Boursier*¹

¹ Department of Human Sciences, University of Naples Federico II, Naples, Italy

Abstract

Shame is a complex and multifaceted trans-theoretical construct that is gaining momentum in the clinical field. Evidence shows that feelings of shame regarding one's body may be linked to a number of undesirable outcomes in several clinical populations. This is because one's body may be perceived as defective or distant from culturally shared ideals. As such, shame may be viewed as a trans-diagnostic construct that may account for individual variation in one's psychosocial adjustment. Drawing on these assumptions, the present symposium sought to identify antecedents and consequents of feelings of shame in different populations. We propose to call clinicians and researchers for developing insights into this complex phenomenon and stimulating a reflection on how to develop sound clinical interventions to foster healthy body-related image. This session will also aim to fill practical and theoretical gaps by collecting contributions that deepen how moral feeling of shame may impact different populations.



Bodily shame, shame-proneness, guilt-proneness, body image, non-suicidal self-injury, and eating disorders psychopathology: A network analysis approach

Annarosa Cipriano¹, Walter Donato Milano², Francesca Carizzone², Stefania Cella¹

¹ Observatory on Eating Disorders, Department of Psychology, University of Campania “Luigi Vanvitelli”, Caserta, Italy

² UOSD Eating Disorder Unit, Mental Health Department ASL Napoli 2 Nord, Naples, Italy

Abstract

Introduction: Research has demonstrated that feelings of bodily shame, shame- and guilt-proneness, and body image-related dimensions are associated with eating disorders (EDs). Also, empirical evidence suggests a strong link between ED and non-suicidal self-injury (NSSI). However, although network theory conceptualizes mental disorders as systems of symptoms causally connected that influence one another, research investigating the central role of such variables in EDs is still scarce. Thus, the present study investigated the pattern of mutual association between bodily shame, shame- and guilt-proneness, body image, NSSI, and core psychopathology of EDs. *Methods:* Participants were 105 patients with EDs ($M_{age}=24.72$, $SD=10.93$; females=92) who completed self-report questionnaires. We constructed a regularized partial correlation network analysis (EBICglasso) to examine the network structure of the relationships among bodily shame, shame- and guilt-proneness, body image, NSSI, and core psychopathology of EDs (i.e., drive for thinness and bulimia). Centrality measures were calculated for each node. *Results:* Weight phobia, body image concerns, and avoidance emerged as the highly influential nodes in the network, while shame- and guilt-proneness and NSSI showed the lower expected influence (EI). Body image concerns demonstrated the highest bridge EI, with significant relationships with bulimia and bodily shame. The CS-coefficients stayed above the rule-of-thumb threshold of .5, indicating appropriate stability. *Discussion:* Our findings suggest that body image domains might play a pivotal role in EDs, especially body image concerns that significantly impact psychopathological network activation. Our network suggests that clinical interventions should prioritize the bodily dimension, and practitioners should address such symptoms early in treatment to achieve maximal outcomes. Moreover, network analysis may help in identifying basic mechanisms and processes underlying the structure and dynamics of EDs' networks.



Does bodily shame mediate the association of attachment insecurities and cognitive schemas with shame-coping styles? Results from a cross-sectional study

*Agostino Brugnera*¹, *Chiara Remondi*², *Camilla Pozzani*³, *Francesco Greco*³, *Paola Gremigni*⁴, *Giulia Casu*⁴

¹ Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy

² Department of Psychology, Sapienza University of Rome, Rome, Italy

³ Private Practice, Bologna, Italy

⁴ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

Introduction: A well-recognized risk factor for poor psychological functioning is bodily shame, or the experience that one own's body is unattractive, undesirable and a source of shame. To date, few studies investigated if bodily shame is predicted by attachment insecurities and cognitive schemas (e.g., of being unlovable or helpless), and if it mediates the association between these variables and shame-coping strategies (i.e., attack self, withdrawal, avoidance and attack others). *Methods:* Using a cross-sectional design, participants filled out a battery of measures investigating bodily shame, attachment anxiety and avoidance, cognitive schemas, and shame-coping styles. The study sample included 994 respondents (57.1% female) with a mean age of 32.23 ± 13.51 years, 148 of whom self-reported a diagnosis of mental disorder (14.9%). Data were examined through independent sample t-tests, and a path analysis (controlled for age, gender, and the presence or not of a self-reported diagnosis of mental disorder). *Results:* We found significant differences between participants with and without a diagnosis in most of the study variables, with small-to-large effects. Results of the path analysis showed that bodily shame was positively predicted by greater attachment anxiety, and by cognitive schemas of being unlovable and sensible to perceived criticism. A higher bodily shame predicted a greater adoption of specific dysfunctional shame-coping styles (namely attack-self, withdrawal, and avoidance). Finally, bodily shame mediated the associations of attachment anxiety and specific cognitive schemas (i.e., being unlovable, and sensible to perceived criticism) with attack-self, withdrawal and avoidance shame-coping styles. *Discussion:* Results suggest that specific cognitive schemas related to interpersonal sensitivity and the feeling of being unlovable, as well as Internal Working Models (IWMs) of the self as worthless, undesirable, or defective may predispose the individual to experience higher levels of bodily shame. Further, we found that insecure IWMs and specific cognitive schemas may lead to a greater bodily shame which in turn increase



the likelihood to adopt dysfunctional shame-coping styles. Mental health practitioners working with patients with heightened bodily shame should adopt interventions which target these specific risk factors.



Body Shame and Body Surveillance: Assessing different pathways from Mindfulness to Factors of Distress in Polycystic Ovary Syndrome

Nadia Barberis¹, Valeria Saladino², Marco Cannavò¹

¹ Department of Health Sciences, University of Catanzaro, Catanzaro, Italy

² Department of Human Sciences, Society and Health, University of Cassino and Southern Latium, Cassino, Italy

Abstract

Introduction: Polycystic Ovary Syndrome (PCOS) is an endocrine condition that can cause obesity, hirsutism, alopecia, infertility, and acne. Given the multifaced nature of this condition, it is not surprising that it poses multiple challenges for patients' psychological health. Accumulating evidence warned how a body-related dimension like body surveillance (BS) may foster anxiety, depression, and stress (general distress: GD), whilst studies from the clinical field showed how a range of psychopathologies is associated with a painful self-conscious feelings called shame, which is characterized by poor overall appraisals of the entire self. Consistently, others emphasized how the propensity to maintain awareness of the present moment in a nonreactive and nonjudgmental manner labeled trait mindfulness (TM) may offset said states. It is thus extremely relevant to observe all these aspects conjointly in the context of PCOS. *Methods:* 238 women, aged between 18 and 52 ($M = 29.47$, $DS = 6.78$), with PCOS filled a protocol with FFMQ, OBCS, DASS-21. *Results:* SEM with latent variables was used to test a model with TM as predictors, BS as a first-order mediator, BH as a second-order mediator, and GD as the outcome. The model showed acceptable fit indices: $\chi^2(48) = 114.20$; $p < .01$, CFI = .96, SRMR = .06; RMSEA = .08 (90% CI = .06 – .09). Significant paths were found from TM to BS ($\beta = -.27$), BH ($\beta = -.20$), and GD ($\beta = -.36$). In addition, significant links were found from BS to BH ($\beta = .64$), and from BH to GD ($\beta = .51$). Moreover, an indirect association was found from TM ($\beta = -.10$) and BS ($\beta = .33$) to GD by BH. *Conclusions:* Results emphasize how an accepting stance toward moments of experience and the capacity of observing one's thoughts in a decentered and less judgmental fashion may to lower fears of scrutiny and fear of evaluation. This may in turn lower feelings of distress. On the other hand, perceptions of flaws in appearance may foster fear of being socially evaluated. This may turn into a source of internalizing states in the long run. Clinicians should carefully screen for TM and BS in PCOS patients and these dimensions may be relevant targets for improving treatment of distress in this kind of clinical population.



A quali-quantitative analysis of an EMDR intervention with clients with multiple sclerosis and depression: The role of stigma and shame-related factors

*Cesare Cavalera*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: People with Multiple Sclerosis (MS) often experience depressive symptoms (Cavalera et al., 2018; Pagnini et al., 2019). As the MS experience often includes several traumatic events and experience of shame and inadequacy, an EMDR intervention designed for depression can be an effective treatment (Hoffmann et al., 2014). The main objective of this study was to preliminarily test EMDR intervention in people with both MS and depressive symptoms in reducing depression including quantitative and qualitative outcomes. *Methods:* 11 depressed people with MS were assessed for depressive symptoms, quality of life, and MS symptoms, pre/post intervention, and at a 3-month follow-up. Participants treatment diaries, completed after every session, were analyzed. Participants were fully interviewed at the end of the study. The study explored the feasibility of the EMDR intervention and its effects, on both psychological (i.e., depression and quality of life) and physical aspects (i.e., MS symptoms). *Results:* Quantitative analysis revealed a reduction in depression scores. Treatment diaries were analyzed with a grounded-theory approach revealing that the EMDR intervention for depression showed a high level of feasibility for the participants involved. Interviews at the end of the study highlighted the change of the role of stigma and shame related to feelings of isolation and personal inadequacy. *Conclusions:* The present findings suggest the importance of EMDR in the reduction of both stigma and depressive symptoms in people with MS. Considering the need for better coping strategies and elaboration for this population, EMDR could represent a relevant therapeutic option in improving mental well-being and reducing shame-related factors of MS.



**UNCOVERING VULNERABILITY TO ANXIETY AND DEPRESSION: EVIDENCE
FROM PERSONALITY, COGNITION, AND PSYCHOPHYSIOLOGY**

Proposers

Simone Messerotti Benvenuti¹, Carola Dell'Acqua¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Discussant

Gianluca Castelnuovo¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Given the tremendous burden of anxiety and depression, researchers are increasingly shifting their focus toward the identification of early indicators that may be involved in the onset of these conditions. Vulnerability to anxiety and depression has been explored from different perspectives, ranging from personality, cognitive, and psychophysiological domains. Particularly, individual differences in personality traits (i.e., neuroticism), the use of maladaptive emotion regulation strategies, reduced cognitive control, and altered resting-state neural networks and neural responses to emotional stimuli have been found to be associated with anxiety and depression vulnerability in community or at-risk samples. Ultimately, efforts to delineate vulnerabilities for anxiety and depression through the integration of multiple domains is essential to improve early identification strategies for these conditions. This symposium showcases cutting-edge research informing key processes in the development and maintenance of anxiety and depression.



The structure of psychopathology and dysfunctional personality: A focus on the internalizing spectrum

Giulia Gialdi¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

Introduction: A large body of research focused on the underlying structure of mood and anxiety disorders. Indeed, mood disorders and anxiety disorders are strongly comorbid; moreover, the various anxiety disorders are highly comorbid with each other. Recently, the Hierarchical Taxonomy of Psychopathology (HiTOP) was proposed as an alternative to traditional categorical classifications (Kotov et al., 2017), organizing psychopathology into a multilevel hierarchical structure. The core of the HiTOP system consists of six spectra that can be conceptualized as forming three superspectra: psychosis, externalizing, and emotional dysfunction. Interestingly, the internalizing spectrum emerges as a distinct spectrum in structural analyses, being the largest and most complex one. Notably, dysfunctional personality traits showed strong overlap with symptom measures of internalizing spectra. *Methods:* Against this background, in a first study (n = 2416), the role of dysfunctional personality domains in shaping structural models of psychopathology was examined, with a focus on the relationships between Negative Affectivity and Internalizing spectrum. To this aim, Goldberg's bass-ackwards model and hierarchical agglomerative cluster analysis around latent variables were relied upon. A second study focused on the relationships between the emotional dysfunction superspectra and dysfunctional personality dimensions in a sample of 387 Italian community-dwelling adult women, who had experienced at least one traumatic event according to DSM-5. *Results:* These studies showed significant and meaningful relationships between HiTOP Internalizing/emotional dysfunction dimensions and Negative Affectivity. *Discussion:* As a whole, these results provided further evidence on shared mechanisms and specific points of continuity between Internalizing/emotional dysfunction dimensions and Negative Affectivity paving the way to transdiagnostic treatment.



Large-scale brain networks dynamics in anxious-depressive spectrum: Insights from studies in community based populations

*Claudio Imperatori*¹

¹ Department of Human Sciences, Cognitive and Clinical Psychology Laboratory, European University of Rome, Rome, Italy

Abstract

Introduction: The study of large-scale brain networks dynamics provides a validated model to investigate cognitive, emotional and psychopathological processes. According to the triple network (TN) model, three main neural systems operate dynamically regulating the general access to cognitive functions (e.g., self-referential processing, working memory and problem solving): the default mode network (DMN), the central executive network (CEN), and the salience network (SN). On the other hand, aberrant functional and structural interactions within and/or between these networks are considered as biomarkers across multiple mental disorders, including anxious-depressive spectrum conditions. Despite this, the TN neurophysiological mechanisms in relation to anxious-depressive spectrum have been relatively understudied in community-based populations so far. The knowledge about how large-scale brain networks dynamics is altered in these samples may play a critical role in understanding the neurophysiological underpinnings related to the onset and progression of anxious-depressive spectrum disorders, thus providing an important source of information for researchers and clinicians. *Methods:* According to the TN model, connectivity data in nonclinical individuals with high levels of depressive symptoms and in nonclinical individuals with high levels of anxiety symptoms have been examined. *Results:* Nonclinical individuals with high levels of depressive symptoms as well as nonclinical individuals with high levels of anxiety symptoms showed several inter- and intra-network connectivity alterations (e.g., within the SN, and between the SN and both the CEN and the DMN). *Discussion:* These data suggest the usefulness of the TN model in understanding several psychopathological processes (e.g., rumination and impaired top-down regulation of emotions) in nonclinical individuals with high levels of depressive and anxiety symptoms. These data represent a promising start for determining potential biomarkers of anxious-depressive spectrum conditions as well as potential areas of intervention.



Psychological effects of impending job loss and unemployment: A prospective study on cognitive control, emotion regulation, and distress

Igor Marchetti¹, Nathan Van den Bergh², Ernst H. W. Koster²

¹ Department of Life Science, University of Trieste, Trieste, Italy

² Department of Experimental-Clinical and Health Psychology, Ghent University, Gent, Belgium

Abstract

Introduction: Important individual differences exist in how people respond to major stressors. Despite the key roles attributed to emotion regulation and cognitive control in resilience and vulnerability to stress, relatively few studies have directly investigated these relationships upon confrontation with major stressors, such as unemployment. The current pre-registered study thus set out to test mediational hypotheses, in which baseline cognitive control (indexed by performance on a cognitive task) and self-reported effortful control predict emotion regulation (follow-up 1), in turn predicting internalizing symptomatology or resilience (follow-up 2). *Methods:* In this prospective study, data of 84 people confronted with (impending) unemployment was analyzed using path models: one based on the primary outcome measures (repetitive negative thinking and symptoms of depression, anxiety and stress) and one based on the secondary outcome measures (positive thinking style and resilience). *Results:* For effortful control, our hypotheses were confirmed for all symptom types, as well as for resilience. In addition, cognitive control was able to directly predict stress symptoms in particular. The models accounted for substantial proportions in the variance of the outcome variables. *Discussion:* Effortful control and cognitive control are relevant distal factors to consider when investigating emotional symptoms and resilience, in the context of unemployment.



Blunted electrocortical responses to pleasant pictures in depression vulnerability: Evidence from subclinical depression and familial risk

Carola Dell'Acqua¹, Daniela Palomba¹, Simone Messerotti Benvenuti^{1,2}

¹ Department of General Psychology, University of Padua, Padua, Italy

² Hospital Psychology Unit, Padua, Italy

Abstract

Introduction: Given the tremendous burden of depression, improving its early identification and developing strategies to prevent its onset has been highlighted as a core priority. For prevention efforts to succeed, it is necessary to identify people early, and ideally, before they become ill. Reduced emotional processing has been associated with depression and might be related to its risk. The late positive potential (LPP) and time-frequency delta are two electrocortical measures that can be employed to explore motivated attention and affective disposition to salient emotional stimuli. Hence, neural responses to emotional stimuli might be useful to understand depression vulnerability. *Methods:* This talk will focus on the investigation of neural responses to highly arousing pleasant and unpleasant pictures (vs. neutral) in clinical depression (n = 117) and two at-risk samples of young adults, namely individuals with subclinical depression (n = 51) and familial risk for the disorder (n = 62). *Results:* Blunted neural responses to pleasant pictures characterized clinical and at-risk conditions, suggesting that these measures might be promising indicators of depression vulnerability. *Discussion:* The LPP and delta power might be leveraged to enhance clinical preventative utility and shed light on the underlying mechanisms associated with depression.



UPGRADING THE RORSCHACH: RESEARCH AND ADVANCES – 6TH EDITION

Proposer

*Luciano Giromini*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Discussant

*Claudia Mazzeschi*¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

This symposium aims to provide a sixth update (the first symposium on this topic was held in Rome in 2016 at the XVIII AIP conference) on the current state of Rorschach research in Italy. Milesi and Aschieri begin this session with a review of published Rorschach work using a case study design. Lanzara et al. then present the results of an empirical Rorschach study focusing on obesity, alexithymia, and interoception. Laera et al. then continue the symposium by reporting on the relationship between selected Rorschach variables and salivary cortisol concentrations during a moderately stressful situation. Finally, Orlandi et al. present the results of a one-year longitudinal study aimed at identifying early predictors of psychosis onset in a large sample of adolescent patients. Although from different perspectives, each of these presentations demonstrates the usefulness of incorporating the Rorschach test into a multimethod psychological assessment and paves the way for future research directions in this area.



Predictive validity of Rorschach R-PAS variables in the Stress and Distress domain: a study on salivary cortisol concentrations during oral examination

Domenico Laera¹, Giuseppe De Palma², Morena Bottalico³

¹ Clinical Psychology Service, Mental Health Department, ASL Taranto, Taranto, Italy

² Institutional BioBank, Experimental Oncology and Biobank Management Unit, IRCCS Istituto Tumori “Giovanni Paolo II”, Bari, Italy

³ ForPsiCom Department, University of Bari, Bari, Italy

Abstract

In Psychoneuroendocrinology, acute stress refers to a cascade of neurohormonal and metabolic responses to situations that are characterized by unpredictability and uncontrollability (Koolhaas et al., 2011), leading to a rapid activation of the sympathetic nervous system and to an activation of the hypothalamic-pituitary-adrenal (HPA) axis. This typically causes the release of stress hormones such as cortisol (Takahashi et al., 2005), and causes changes in physiology (e.g., heart rate, skin temperature and perspiration). Even if the stress response of the HPA is rather complex and modulated by numerous factors (Hellhammer et al., 2008), salivary cortisol assays offer a reliable, increasingly accessible and affordable method for quantifying psychological stress (Pisanski, 2016). Research suggests that university exam stress is the most significant source of stress experienced by undergraduate students and it seems to be a good inducer of cortisol and psychological responses to stress (Weekes et al., 2006). This research project thus aims to investigate the predictive validity of Rorschach R-PAS variables in the Stress and Distress domain by testing whether they could predict increased sympathetic reactivity and vulnerability to stress. At the baseline (T1), saliva samples from 62 student volunteers were collected into 2 ml polypropylene microtubes (SARSTEDT®) (Gröschl, 2008). Next, all 52 volunteers were administered the Rorschach, using R-PAS method. At T2, about one month after, saliva samples were collected during an oral examination for a university exam. Because it takes approximately 15 minutes for cortisol produced by the adrenal glands to manifest in saliva (Kirschbaum et al., 1993), samples were collected 15 minutes after the start of the exam session. Data analyses focused on the extent to which R-PAS variables could predict cortisol level changes from T1 to T2 and could predict the average cortisol concentrations. Results partially confirmed a-priori formulated hypotheses, with some of the variables located in the



Stress and Distress interpretive domain of R-PAS (PPD, Y) showing correlations in the expected direction with cortisol level changes and average cortisol concentrations.



A review of case studies in Rorschach literature

*Aurora Milesi*¹, *Filippo Aschieri*²

¹ Private practice, Milan, Italy

² Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

The case study research method allows to investigate, understand an outcome or test expectations based on theory with an idiographic approach. Enhancing researcher's attention to details, case studies provide intensive, specific and extensive information about a given phenomenon, observed in a real-world context. Case studies represent a fruitful method to describe complex or dynamic processes and constructs, such as the results of the Rorschach test. Although the Rorschach test is the most widely used projective technique, and case study methods represent detailed and specific information sources, there is still a lack in scientific literature of a comprehensive overview on case studies available on this topic. Furthermore, the Rorschach has often been object of debate, due to the complex and dynamic nature of the construct that aims to investigate. Our review aims to address this lack and this debate, pointing out the features of clinical case studies using the Rorschach test available in literature. Our review describes how published case studies with the Rorschach changed during the last five decades considering publication features, test administration contexts, eventual integration of the Rorschach with different data sources, theories used in the interpretation of the data and the Rorschach coding system used.



Assessing alexithymia and interoception in obesity using the heartbeat tracking test and the Rorschach Comprehensive System: an exploratory study

Roberta Lanzara¹, Martina Camelio¹, Chiara Conti¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: The failure of the brain to balance food intake with energy needs underlies the onset of obesity, as it results in a state of chronic energy surplus. Although many factors predispose individuals to weight gain and obesity, the present study focuses on alexithymia and interoception as two factors that may interfere with the ability to perceive and regulate the physiological states of one’s body and emotions by influencing eating behavior. The aim of this study was twofold: 1) to use alexithymia, interception, and binge eating for characterizing psychological profiles associated with obesity; 2) to evaluate Rorschach variables associated with altered emotional and body awareness profiles. *Methods:* A sample of n=20 patients with obesity who were starting weight loss treatment and n=16 healthy controls was recruited. Binge Eating Scale (BES), Toronto Alexithymia Scale (TAS-20), heartbeat tracking test, and Rorschach Comprehensive System were used to assess binge eating behavior, alexithymia, interception, and aspects of personality, respectively. Data were submitted to cluster analysis. *Results:* Two clusters were identified: 1) regular eating patterns, lower alexithymia, and higher body awareness; 2) altered eating patterns, higher alexithymia, and lower body awareness. Compared with the first, the second cluster was characterized by higher body mass index, higher levels of ideational stress (D, Adj.D, FM+m), and more dependency concerns outside immediate awareness (ROD%) at Rorschach-CS. *Discussion:* Lack of emotional and body awareness could play an important role in emotion regulation deficits as a core feature of binge eating. The development of binge eating patterns can be seen as a behavioral factor resulting from distressing emotional states managed by external regulators such as food (as confirmed by high levels of ideational stress and dependency detected by the Rorschach-CS). Difficulty in cognitive processing of emotional states associated with impairment in interoceptive awareness may foster the tendency to misinterpret visceral sensations related to hunger and satiety thus leading to maladaptive eating patterns (as confirmed by the co-occurrence of high levels of alexithymia, low levels of interoceptive awareness, and altered eating patterns).



One-year follow-up in a large group of adolescents with psychotic symptoms: thought beyond the inkblots

Marika Orlandi¹, Adelaide Carrara¹, Renato Borgatti¹, Martina Maria Mensi¹

¹ Child Neurology and Psychiatry Unit, IRCCS Mondino Foundation, Pavia, Italy

Abstract

Introduction: Considering the definition of the Clinical High Risk for Psychosis (CHR-P) paradigm, the literature showed the need to better understand the risk and protective factors that may result in a transition from Attenuated Psychosis Syndrome (APS) to full-blown psychosis, with the aim of enabling early intervention on psychopathological processes in adolescent patients. *Methods:* We analyzed a large cohort of adolescents to evaluate the possibility of using the Rorschach as a predictive tool. First, at baseline, we compared the Rorschach protocols of patients diagnosed with APS according to DSM-5 criteria with those of adolescents with early-onset psychosis (EOP) and those of patients with other psychopathological disorders who were considered as a control group (non-APS). Next, we tested the hypothesis that antipsychotic medication was a confounding factor affecting performance at Rorschach. After that, we analyzed possible correlations between diagnoses according to DSM-5 at one-year follow-up and Rorschach indexes assessed at baseline. Finally, we observed how the Rorschach indexes of APS adolescents who developed psychosis differed from those of patients who showed symptom remission at one-year follow-up. *Results:* Our results showed a particular trend in the Rorschach profile of APS patients, characterized by worse performance in some Perception and Thinking Problems indexes even compared with EOP patients. Antipsychotic medication does not appear to be a significant confounding factor. The analysis showed that it is possible to define a typical Rorschach profile of patients who will be at risk for psychosis after one year of follow-up in which the most significant alterations emerge in specific indices of Self and Other Representation and Stress and Distress domains. Although our sample was limited, alterations in these areas seem to show a worse trend in patients with APS who transition to psychosis. *Discussion:* Our study highlights the impact of interpersonal relationships and stress as significant risk factors for developing APS and transitioning to full-blown psychosis, suggesting the implementation of early prevention strategies. Our work proposes a direction toward which future studies aimed at understanding the risk and protective factors involved in the development of psychotic disorders and how these can be detected through the Rorschach.



**INVESTIGATING INTERPERSONAL VICTIMIZATION: CLASSICAL AND NEW
PERSPECTIVES**

Proposer

*Daniela Marchetti*¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Discussant

*Patrizia Velotti*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

One of the broadest and most interdisciplinary areas of research on human development concerns interpersonal victimization, a complex phenomenon that affects individuals and communities in various ways. For decades, scholars across various fields including public health, psychology, sociology have devoted considerable efforts to identifying the sources and consequences of victimization, at personal and social levels. However, victimization has long been viewed as a static, individual-level event, comparing victimization and perpetration, focus on the behaviors, traits, and community characteristics that shape risky activity patterns and differential exposures to violence over time. This symposium gathers a collection of recent studies in the field of victimization, focusing on innovative approaches that integrate multiple perspectives suggesting that victimization maybe associated to vulnerability factors that are often beyond a person’s control, considering the role of adverse childhood experiences (ACEs), minority stress and personal characteristics. Craig and colleagues will present an original research study on the impact of cumulative ACEs on the psychological distress in university students comparing those who had approached counseling services and those who had no experience with counseling services. Mezzalira et al. will discuss a systematic review on the relationships between victimization, resilience, and mental health among European transgender and gender diverse individuals through the lens of the gender minority stress and resilience framework. Falgares and colleagues will present original data about



psychosocial and clinical factors involved in discriminatory attitudes against sexual minorities in a sample of heterosexual adults. Lastly, Fontanesi et al. will present a study on the role of dark personality, jealousy, and attitude toward IPV on the perpetration of emotional abuse in intimate relationships.



The Impact of Early Adverse Experiences on the Psychological Distress of University Students Seeking Psychological Counseling Services

Francesco Craig¹, Rocco Servidio¹, Maria Luigia Calomino¹, Lucia Nardi¹, Alberto Polito¹, Maria Francesca Spina¹, Flavia Tenuta¹, Angela Costabile¹

¹ Department of Cultures, Education and Society (DICES), University of Calabria, Cosenza, Italy

Abstract

In recent years, there has been a noticeable increase in the number of students seeking University Psychological Counseling (UPC) services. This study aimed to investigate the impact of cumulative Adverse Childhood Experiences (ACE) on the psychological distress of two groups of students: those who had approached counseling services and those who had no experience with counseling services. Participants completed an anonymous self-report questionnaire which measured exposure to early adverse experiences (ACE-Q), psychological distress, personality traits, and coping strategies. The study found that students who sought UPC services had higher scores on cumulative ACEs compared to those who did not seek counseling. The ACE-Q score was found to be a direct positive predictor of depression symptoms but not anxiety symptoms. The results also showed that Avoidance coping, Detachment, and Psychoticism had a mediating effect on the indirect effects of ACE-Q score on psychological distress. These findings suggest the importance of screening for ACEs in UPC settings as it can help identify students at higher risk of developing mental and physical health problems and provide them with early interventions and support.



Victimization of European transgender and gender diverse people: a systematic review of quantitative studies through the lens of the gender minority stress and resilience framework

*Selene Mezzalana*¹, *Fabrizio Mezza*², *Rosa Pizzo*², *Nelson Mauro Maldonato*³, *Vincenzo Bochicchio*¹, *Cristiano Scandurra*³

¹ Department of Humanities, University of Calabria, Cosenza, Italy

² SInAPSi Center, University of Naples “Federico” II, Naples, Italy

³ Department of Neuroscience, Reproductive Sciences and Dentistry, University of Naples Federico II, Naples, Italy

Abstract

Introduction: Transgender and gender diverse (TGD) people experience a greater incidence of mental health problems compared to cisgender counterparts. Such disparities are associated with victimization of gender nonconformity and can be understood through the gender minority stress and resilience (GMSR) framework. As most of the reviews has been addressed to U.S. context, the current study aimed at systematically reviewing evidence on the relationships between victimization, resilience, and mental health among European TGD individuals through the lens of the GMSR framework. *Methods:* A systematic search was conducted in PsychINFO, PubMed, Scopus, and Google Scholar, based on PRISMA 2020 guidelines, and conducted for publications from the last 20 years. It was based on Boolean operators to combine terms related to minority stress (i.e., victimization, proximal stressors, and resilience), TGD identities, and mental health. A quality assessment of eligible papers was conducted through the National Institutes of Health’s Quality Assessment Tool for Observational Cohort and Cross-Sectional Studies and Cohen’s kappa was used to calculate agreement between evaluators, yielded a score of .91 (i.e., strong agreement). *Results:* Overall, 29 studies were included in the present systematic review. Almost all studies (n = 27, 93.1%) were cross-sectional in nature, whereas 2 (6.9%) used a longitudinal design. Sample sizes ranged from 55 to 15,845 participants. We found that distal stressors were identified as predictors of poorer mental health, with gender-related victimization emerging as the most documented risk factor. The significant role of proximal stressors was also highlighted, with some mediation analyses detecting an indirect effect on mental health. Resilience-promoting factors buffering the impact of victimization and proximal stressors were also identified, including self-esteem, pride, transitioning, and social support. The results confirmed that gender minority stress factors are crucial in



the development of mental health problems among European TGD individuals. *Conclusions:* The studies reviewed have several limitations, including lack of longitudinal designs, sampling bias, variability in measurement methods, and unaccounted for ethnic variables. Research and clinical recommendations are reported.



Dark personality and emotional abuse in intimate partner violence

Lilybeth Fontanesi¹, Giulia Cosi¹, Serena Di Giandomenico²

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Introduction: The dark triad personality is a combination of three traits: narcissism, Machiavellianism, and psychopathy. Individuals with these traits tend to focus on achieving their own goals at the expense of others with disregard for social norms and lack of empathy. They often display manipulative and abusive conducts affecting interpersonal relationships. Recently, sadism has been added to the dark personality traits and seems to play a key role in the development of abusive behaviors especially in intimate relationships. Dark Personality (DP) has been linked to many forms of intimate partner violence (IPV) but the relation between emotional abuse and DP has been poorly investigated. Emotional abuse in couples is a form of violence characterized by denigration, dominance, isolation, intimidation towards the partner, often associated with jealousy and mate retention behaviors. In the present study we investigated the role of DP, jealousy, and attitude toward IPV on the perpetration of emotional abuse in intimate relationships. *Methods:* 488 (51.4% female) participants (age 18-62, M= 32.95, SD=9.37), recruited from social networks, completed an online survey through the platform QUALTRICS. The survey included socio-biographical information, the Dirty Dozen Dark Triad and the Assessment of Sadistic Personality for the valuation of DP, the Intimate Partner Violence Attitude Scale (IPVAS), the Multidimensional Measurement of Emotional Abuse (MMEA) and the Multidimensional Jealousy Scale. *Results:* DP positively correlated with emotional abuse, jealousy, and attitudes toward IPV. Gender differences in the study variables suggested that men showed higher level of DP, while women score higher in the jealousy and in two sub-factors of the MMEA (denigration and restrictive engulfment). Regression analysis showed that gender (female), age, DP traits, attitude toward IPV, and jealousy accounted for the 29% of variance of the perpetrated emotional abuse. *Conclusion:* DP along with attitudes toward IPV and jealousy maybe responsible for emotional abusive behaviors in intimate relationships, when are associated with female gender. Prevention and intervention programs should focus on the



evaluation of individual variables to create specific programs that address IPV on both women and men. Clinical and social implications of our results are discussed.



Clinical and Psychosocial Factors in the Comprehension of Discriminatory Attitudes against Sexual Minorities

Giorgio Falgares¹, Giovanna Manna¹, Giulia Costanzo¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: Sexual minorities, including gay men, lesbian women, and bisexual individuals, often represent the target of discriminatory and intolerant attitudes. These attitudes, which apparently have recently increased, may frequently result in anti-homosexual aggressive and violent behaviors, representing a real social urgency. Thus, deepening our understanding of the roots of homophobic intolerance is needed in order to better prevent the risk of victimization processes. For this reason, the aim of this study was to comprehend which psychosocial and clinical factors may be involved in discriminatory attitudes against sexual minorities. *Methods:* The study's participants were 254 heterosexual adults (117 men and 137 women) ranging in age between 19 and 45 years ($M_{age} = 25.63$, $SD = 9.16$). Participants completed four self-report questionnaires: Modern Homophobia Scale (MHS-R), Right-Wing Authoritarianism Scale (RWAS), NEO Five-Factor Inventory 3 (NEO FFI 3), and Symptom Check List-90-R (SCL-90-R). *Results:* A structural equation model was computed to explore psychological (extroversion, agreeableness, openness to experience, conscientiousness, and neuroticism), social (religiosity, political orientation, and right-wing authoritarianism), and clinical (psychopathological symptoms) factors potentially involved in discriminatory and homophobic attitudes against sexual minorities. Results showed that social factors, particularly right-wing authoritarianism, were the most related factors to anti-homosexual feelings. Lower agreeableness and lower psychopathological symptoms were also apparently involved in discriminatory attitudes against sexual minorities. *Discussion:* High levels of right-wing authoritarianism are strongly associated with intolerant attitudes towards homosexual and bisexual people. Indeed, authoritarian individuals tend to consider sexual minorities as groups that deviate from culturally shared beliefs about gender roles and sexuality, threatening traditional norms, behaviors, and values. These beliefs may result in explicit violence and victimization processes against these minorities. Education interventions are thus needed to favor the creation of a respectful environment and the development of an inclusive and tolerant society that recognizes diversity as a value.



Saturday, 16th September 2023

THEMATIC SESSION

**NEW ADVANCES IN CLINICAL PSYCHOLOGY: ASSESSMENT
AND INTERVENTIONS**

Chair:

Vittorio Lingiardi

Sapienza University of Rome

Claudio Sica

University of Florence



Development and validation of the Countertransference Behavior Awareness Measurement (CBAM), a new instrument to detect countertransference from clinician's and observer's perspectives

Diego Rocco¹, Attà Negri², Andrea Spoto³, Jeffrey Hayes⁴, Francesco De Bei⁵

¹ Department of Developmental and Social Psychology, University of Padua, Padua, Italy

² Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy

³ Department of General Psychology, University of Padua, Padua, Italy

⁴ Department of Educational Psychology, Counseling, and Special Education, Pennsylvania State University, University Park, Pennsylvania, USA

⁵ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy

Abstract

From Freud's thought, the concept of countertransference (CT) has undergone an articulated development. Initially considered as the expression of an analyst's unresolved conflict, successively, thanks to the work of Paula Heimann (1950) and Heinrich Racker (1957) and other scholars, it was considered as a "tool" to better understand patients' inner world and the psychotherapeutic process. Nowadays CT is broadly defined as "internal and external reactions in which unresolved conflicts of the therapist, usually but not always unconscious, are implicated" (Hayes et al., 2018, p. 497). In understanding the complex activities required for a therapist to use CT as a resource, the empirical research can play a fundamental role, investigating the therapists' ability to detect, address, and manage CT (Pérez-Rojas et al., 2017). This requires an instrument that simultaneously investigates CT from both therapist's and observer's perspectives (Hayes et al., 1997; Laverdière et al., 2018). In fact, measuring the convergence or divergence between these observations seems to be extremely important because it opens the possibility of investigating the issue of the CT awareness, the first critical step in managing and using the CT in a clinically constructive way. To this aim we have developed and validated the Countertransference Behavior Awareness Measurement (CBAM), a new instrument aimed at detecting different aspects of CT, namely CT behavior, CT awareness, and, finally, CT management. Building on the Countertransference Behavior Measurement (CBM; Mohr et al., 2005) – a questionnaire designed to measure three dimensions of CT behavior in supervisees as perceived by their supervisors, i.e., dominant, hostile, and distant CT – we developed the CBAM including both a therapist and observer versions and



items regarding both CT feelings and behaviors. The CBAM was completed by 240 clinicians, and through the EFA and CFA we found a 24-item factors solution, confirming the three dimensions of the CBM. Twelve items deal with CT feelings and 12 with CT behaviors. The research and clinical applications of the CBAM will be presented and discussed.



Clinicians' adherence and competence to Mentalization-Based-Treatment's techniques stimulate in-session changes in patients' mentalization

*Guia Pandolfi*¹

¹ Psychotherapy and clinical research service, Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

There is extensive scientific evidence of the effectiveness of psychotherapy in fostering change in people suffering from mental disorders. However, the mechanisms that underlie these changes are not always clear. Therefore, it appears necessary to conduct systematic investigations to shed light on the psychotherapeutic process. Several studies have found significant associations between therapist adherence and outcome across diverse psychotherapy trial. Indeed adherence to treatment is an important predictor of the changes that occur during the psychotherapeutic process. Our aim was to assess if mentalization, defined as the ability to consider and understand self and other's behaviors in terms of intentional mental states, can be considered a non-specific therapeutic factor for treatment outcomes. Hence, we explored the relationship between the clinician's adherence and competence to Mentalization Based Treatment's (MBT) techniques and the changes in patient's mentalization in individual psychotherapy sessions. Our hypotheses were that: (1) Adherence scores would be higher in sessions where there is an increase in patient's mentalization, regardless of the clinician's theoretical model; (2) MBT techniques would foster changes in patient's mentalization over the course of the sessions; (3) MBT clinicians would show higher scores of adherence and competence compared to therapists not trained in MBT; (4) Clinicians not trained in MBT would use some of the techniques recommended by the manual. Eighty-two transcripts of audio-recorded sessions conducted with patients (N=23) suffering from different mental disorders (14 Personality Disorders, PD; 9 without PD) were assessed both at a macro- and micro-analytic level (each verbal utterance) by using the Mentalization Based Treatment- Adherence and Competence Scale (MBT-ACS), Mentalizing Prototype Scale (MPS) and Reflective Functioning Scale (RFS) by three different raters, blindly. Results showed that adherence scores are higher in sessions where mentalizing improves. Therefore, it was found a significant association between specific MBT techniques and increased mentalization, but not all items on the MBT-scale contributed in the same way. Clinicians who were not trained in MBT adopted techniques prescribed by the manual, but therapists trained in MBT showed higher treatment adherence scores.



The moderating effect of mindful Acceptance on the relationship between mindful Awareness and psychological distress

Lisa Compare¹, Giovanni Tumminaro¹, Olivia Bernini², Paolo Modica¹, Carmen Berrocal¹

¹ Department of Surgical, Medical and Molecular Pathology, and Critical Care Medicine, University of Pisa, Pisa, Italy

² University Counseling Services, University of Pisa, Pisa, Italy

Abstract

Mindfulness is a multidimensional construct including two main processes: the ability to be mindfully aware of ongoing experience (i.e., Awareness) and the ability to maintain a non-judgemental attitude towards internal experiences (i.e., Acceptance). High Acceptance has been consistently related to a range of positive psychological outcomes, while the association of Awareness with psychological outcomes is still not clear enough. Results from some studies supported Awareness as a predictor of positive psychological outcomes, while other studies did not support this relationship. The interaction between Awareness and Acceptance may account for these inconsistencies since, theoretically, high levels of both Awareness and Acceptance would be necessary for mindfulness to have positive effects. Few studies examined the moderation hypothesis to predict anxiety and depression, and they focused on clinical samples. This study extends previous research in the field by examining whether Acceptance moderates the relationship of Awareness with anxiety and depression in a sample of healthy emerging adults. It was hypothesized that the relationship of Awareness with anxiety and depression would be stronger in low- than in high-Acceptance persons. A total of 489 emerging adults (73% females; mean age = 21.3 yrs; SD = 2.37) completed the Awareness and Acceptance subscales of the Kentucky Inventory of Mindfulness Skills, the Beck Anxiety Inventory, and the Beck Depression Inventory. Acceptance was negatively associated with anxiety and depression, while Awareness was positively associated with anxiety. The interaction term (Awareness x Acceptance) was statistically significant only to predict anxiety. The relationship between Awareness and anxiety was stronger in persons with low levels of Acceptance, comparing to persons with high Acceptance. Overall, findings from this study support Acceptance as a key process associated with lower levels of anxiety and depression. Furthermore, our results suggest that increasing Awareness alone can have a detrimental effect on anxiety in persons with low levels of



Acceptance. In other words, high levels of Acceptance are needed for Awareness abilities to have a positive effect.



Effectiveness of ESDM treatment with children with Autism Spectrum Disorder

Franco Bin¹, Viviana Langher²

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

In the last decade, the incidence of Autism Spectrum Disorders (ASD) has increased and National Guidelines recognize the importance of early diagnosis and management. The FVG Region, based on international and national literature data, recognizes the ESDM (Early Start Denver Model) as one of the valid models for early intervention on Autism. The present study involved, in the period 2020-2021, 28 minors under the age of 72 months diagnosed with ASD in charge of the Neuropsychiatry Service and subjected to ESDM interventions over a period of 12 months. At diagnosis (t0) ADOS 2, Bayley III scale, Leiter II, Vineland II scale were administered and an observation was performed according to the ESDM model with relative checklist. Treatment goals were shared with parents prior to interventions. A similar sample of minors diagnosed with Autism Spectrum Disorder were evaluated with the same instruments and undertook a non-ESDM rehabilitation program for the same 12-month period. At the end of the 12 months (t1), the participants of the two groups were evaluated and the results were compared. A questionnaire of satisfaction with the treatment received was administered "a posteriori" to the parents. This study highlighted improvement not only in specific areas impaired by Spectrum Disorder, but also in expressive communication, cognition, and play. This improvement was greater in the ESDM treatment group than in the control group. The results, albeit in such a small sample, suggest the validity of the ESDM in the treatment of Autism Spectrum Disorders, and point out the necessity of a widespread diffusion in all the Neuropsychiatry Services of our Region and of the national territory.



Outpatient care for adolescents and young adults (AYA) mental health: Promoting self- and others' understanding through a Metacognitive Interpersonal Therapy-informed psychological intervention

Elisa Marconi¹, Giulia Fredda¹, Delfina Janiri², Georgios D. Kotzalidis³, Valentina Arcangeli¹, Federica Lino¹, Gabriele Sani⁴

¹ Clinical Psychology Unit, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

² Department of Psychiatry, Department of Neuroscience, Head, Neck and Thorax, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

³ NESMOS Department (Neurosciences, Mental Health, and Sensory Organs), Sapienza University of Rome, Rome, Italy

⁴ Institute of Psychiatry, Department of Neuroscience, Catholic University of the Sacred Heart of Rome, Rome, Italy

Abstract

Introduction: The psychopathology of young people has been little studied to date; studies conducted before and after the pandemic have shown a marked increase in psychiatric symptomatology in this population. It is possible to speculate that early psychopathology, while not a personality disorder, may result in impairment and difficulty understanding oneself and others. This study was conducted in the context of adolescent and young adult (AYA) multidisciplinary outpatient service that involved the close collaboration of psychiatrists and psychologists, and concomitant pharmacological and psychotherapeutic therapies. In this context, we aimed to compare Metacognitive Interpersonal Therapy MIT-informed psychotherapy with other treatment-as-usual (TAU) therapies. *Methods:* Three rating scales (Global Assessment of Functioning Scale-GAF; Clinical Global Impressions Scale-Severity-CGI-S; Brief Psychiatric Rating Scale-BPRS) administered at baseline and at 6-month intervals were used in the study. Patients within the indicated time frame received concomitant psychiatric and psychological treatment. Psychotherapeutic approaches included MIT-informed model vs. other orientations (TAU). In this study, we compared MIT-oriented with TAU and each group for BL to endpoint symptomatology trends, adherence, and drop out. *Results:* Sixty AYAs were involved in the study. The results showed a significant reduction in symptomatology after the first six months of intervention. Regarding overall adherence to the intervention, 12 patients (17%) dropped out. In the MIT group, 2 dropped out (11%); in the TAU



group 9 (19%). Regarding the overall response to treatment, all scales showed a significant reduction in symptoms between baseline (BL) and the 6-month endpoint: GAF ($\chi^2=6.61$, $p<.001$), BPRS ($\chi^2=6.77$, $p<.001$), CGI ($\chi^2=7.20$, $p<.001$). The study also showed greater efficacy for patients undergoing MIT psychotherapy in terms of symptom reduction, on the BPRS_6-months ($t=2.31$; $p<.05$). *Discussion:* The study confirmed the effectiveness of early and integrated care in adolescent psychopathology, suggesting greater effectiveness in symptom reduction of psychotherapeutic intervention focused on stimulating mentalization skills. It opens up the exploration of this type of approach to the treatment of adolescent psychopathology, also applied in a preventive capacity.



Developing a prototype for relationship therapy psychoanalysis: an empirical study with the Psychotherapy Process Q-set

Laura Bonalume^{1,2}, *Laura Corbelli*¹, *Mattia Ferro*^{1,3,4}, *Anna Lisa Mazzoleni*¹, *Maria Pia Roggero*^{1,5}

¹ Studies and Research Department, Italian Society of Psychoanalysis of the Relationship (SIPRe), Milan, Italy

² Department of Clinical Psychology, Local Social and Health Agency (ASST) Brianza, Italy

³ Department of Psychology, Sigmund Freud University, Milan, Italy

⁴ Center for Behavioral Neuroscience and Communication, Vita-Salute San Raffaele University, Milan, Italy

⁵ IPMH Umass Boston, MA, USA

Abstract

Introduction: The Psychotherapy Process Q-set (PQS) is one of the most widely used tools in psychotherapy research to investigate the technical and relational characteristics of patient-therapist interaction; many prototypes of different approaches have been made, but prototype characteristic of Psychoanalysis of Relationship therapy (SIPRe) does not yet studied. *Methods:* experts and trainees in Psychoanalysis of Relationship (SIPRe) therapy used the 100-Item PQS questionnaire to rate an ideal SIPRe therapy. *Results:* Agreement between raters was high. The prototype for SIPRe experts showed a significant correlation to the psychoanalytic prototype and to the short expressive-supportive therapy (SE) prototype. Correlations with CBT and IPT, prototypes were significant, but weaker. The correlation between the two SIPRe samples (junior and expert therapists) was highly significant. *Discussion:* The analysis of the items that make up the SIPRe prototype and its correlation with the models of psychoanalytic psychotherapy and of brief dynamic therapy describe a double belonging of the model: on the one hand, a strong link with the classic psychoanalytic approach (patient's dreams, depths and fantasies); on the other hand, a closeness to a theoretical-clinical perspective that considers it important to work on the “here and now”, on the “present” of the subject, on its solutions and on the complex interactions of events and relationships. Compared with the trainees, the senior psychoanalysts would seem less distressed by the size of their role and therefore they are less focused on emotional tuning and above all on the effects of the patient's negative feelings in the session. We realize that the study itself is not exhaustive to demonstrate that SIPRe psychoanalysts actually apply the model they claim to follow



in their clinical practice. In this regard, in future studies we intend to compare the model that the analysts describe with a careful analysis of the clinical sessions.



Analysis of the factors modulating the successful implementation of the Meeting Centers in Italy

*Alessia Guerra*¹, *Ylenia Druda*², *Cristiano Stea*¹, *Rabib Chattat*³, *Giovanni Ottoboni*³

¹ Complex Structure for Social Health Integration for Adult Cognitive and Intellectual Disabilities, Giuliano Isontina Health Authority (ASUGI), Trieste, Italy

² Department of Medical and Surgical Sciences, University of Bologna, Bologna, Italy

³ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

Introduction: The Meetingdem project aimed at deploying the Dutch model concerning the Meeting Centers Support Program (MC) in other European territories, including Italy. To do so, a series of barriers and facilitating factors for developing MCs in the Italian context have been analysed. *Methods:* The analysis was carried out considering the theoretical framework of Meiland et al. (2004), which illustrates the stages of adaptive implementation of MCs at multiple levels and individuates areas of adaptation. *Results:* At the micro level, the difficulties related to the place hosting the MC represent a barrier. They are referred to the possible need to plan several concurrent activities in the same location. This factor limits the availability of opening hours and spaces, causing a reduction in the frequency of activities aimed at patients and caregivers while decreasing staff working hours. The recruitment of professional figures and voluntary personnel operating in the MC was found to be a facilitating factor. The team must be created fostering interdisciplinarity: in addition to the health figures, the inclusion of a lawyer is advisable, both for instrumental and managerial support to the team and for professional consultations aimed at patients and caregivers (e.g., guardianship, legal disability, bequests...). At the meso level, attention needs to be paid to allow access to the program only to those diagnosed with dementia and to redirect people who don't have it to the general practitioner to start the diagnostic process. Finally, at a macro level, a significant barrier is represented by the economic financing of the project. Given the absence of homogeneous regional laws on dementia, it may be difficult to warren economic continuity of the services. *Discussion:* The analysis suggested a series of strategic actions to facilitate the effective implementation of the MC model in various territories. Despite the different healthcare and governance organisations, identifying barriers and promoting factors within the micro, meso and macro levels allows the implementation of the best conditions to adapt the Dutch MC model to local Italian realities.



Saturday, 16th September 2023

THEMATIC SESSION

CONTEMPORARY SOCIAL AND CLINICAL ISSUES

Chair:

Annamaria Petito

University of Foggia

Mario Rossi Monti

University of Urbino Carlo Bo



Couple-Level Minority Stress among trans-inclusive couples

Daniele Rucco¹, Annalisa Anzani¹, Francesco Emiliano¹, Iliaria Babbolin¹, Antonio Prunas¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: Minority Stress Theory posits that chronic stigma leads to decreased well-being and mental health on trans people. Based on existing literature about discrimination experienced by same-sex couples (known as Couple-Level Minority Stress), it is plausible that trans-inclusive couples also experience similar disadvantages. We hypothesize that when transgender and cisgender individuals form a couple, they may become vulnerable to unique couple-level minority stressors that cannot be reduced to their experiences as individuals. When their intimate relationships are devalued by society, individuals may face adversity both as individuals and jointly as a couple, because their relationship represents a form of stigmatized relationship itself. The aim of the present study is to investigate couple-level minority stressors in trans-inclusive couples and to explore the dynamics through which these stressors combine, resulting in a unique form of couple stress beyond what is experienced as individuals. *Methods:* Qualitative research was employed to investigate couple-level minority stress in trans-inclusive couples. Socio-demographic information for each partner and the couple's history were collected. Ad hoc semi-structured interviews were conducted with ten trans-inclusive couples recruited through social media ads and LGBT+ associations. Inclusion criteria included being at least 18 years old, being in a couple with a trans partner and a cisgender partner and being together for at least six months. Participants' responses were analyzed using thematic analysis with NVivo Plus. *Results:* The couple-level stressors identified in this study can be organized into four macro-categories based on participants' responses: systemic-level stigma, family-level stigma, interpersonal stigma, and coping strategies employed by partners to deal with stigma. *Discussion:* These findings suggest that couple-level minority stress is a complex phenomenon that operates at various levels, including systemic, familial, and interpersonal levels. Additionally, the coping strategies utilized by partners to manage stigma represent a crucial component of the couple-level minority stress experience. Our findings have significant implications for developing targeted interventions aimed at reducing the adverse impact of couple-level minority stress on trans-inclusive couples' well-being.



Romantic attachment, relationship satisfaction, and motives toward parenthood in Italian lesbian women and gay men: preliminary results

Massimiliano Sommantico¹, Marina Lacatena¹, Ferdinando Ramaglia¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

Despite the opening of civil union rights to same-sex couples in 2016 in Italy, sexual minority individuals continue to face additional obstacles compared to heterosexual individuals on their path to parenthood, mainly due to a legal system that prevents them from adoption, assisted reproduction, or surrogacy. This study explores the relationship between romantic attachment, relationship satisfaction, and motives toward parenthood in Italian lesbian women and gay men. Through an online survey spread throughout the country (utilizing LGBT Associations, LGBT list-serv, LGBT discussion boards, and LGBT Research Centers) participants completed: 1) a basic demographic questionnaire collecting information regarding age, sex assigned at birth, gender identity, sexual orientation, relationship status (partnered/cohabitation/civil union), relationship length, and educational level; 2) the Experiences in Close Relationships-Revised (ECR-R); 3) the Gay and Lesbian Relationship Satisfaction Scale (GLRSS); and 4) the Motives Towards Parenthood Scale (MTPS). The sample consisted of 259 individuals (lesbian women = 47.5% and gay men = 52.5%). They had been in a stable union for an average of 82.4 months, and their mean age was 36.3 years (SD = 11.7). Cohabiting participants were 46.3% and 18.1% of the participants had been in a civil union. The following hypotheses were tested: that romantic attachment was positively correlated with motives not to have children, while negatively correlated with relationship satisfaction; that relationship satisfaction was negatively correlated with motives toward parenthood; and that relationship satisfaction mediated the relationship between romantic attachment and motives toward parenthood. Results strongly supported the hypotheses. Furthermore, results indicated that lesbian participants reported lower levels of avoidance, while reported higher levels of relationship satisfaction and motives not to have children, and that participants in civil unions reported higher levels of relationship satisfaction and motives not to have children. Taken together, our findings contribute to the growing body of research on LG parenthood and may inform social policy and psychological support for LG individuals pursuing parenthood.



Exploring life experience in gender affirming care: an Interpretative Phenomenologic Analysis of the FtM transition

*Rosapia Lauro Grotto*¹, *Nicolò Conti*²

¹ Department of Health Sciences, University of Florence, Florence, Italy.

² School of Psychology, University of Florence, Florence, Italy

Abstract

Transgender people who embark on gender affirmation care may face certain obstacles which affect their personal and relational world. Nevertheless, they also activate their internal resources. The aim of this study was to describe the individual and unique experience of people who have gone through the transition, on a psychological and relational level, through the first-hand account of the participants. Participants identified themselves as Female-to-Male (FtM) transgender people and were recruited through a well-known Association (Associazione Consultorio Transgenere di Torre del Lago, Lucca) that deals with transgender and transsexual health and well-being in Tuscany (Italy). The study was designed according to the phenomenological-hermeneutical approach: the life experience of 6 participants was explored within a biographic interview, performed between December 2021 and March 2022. The participants' age varied between 40 and 54. All had already completed the FtM transition in the last decade. The interviews were performed on line by a specifically trained researcher and lasted between 45 and 60 minutes each; data were recorded and transcribed with the consensus of the participants and underwent consensual Interpretative Phenomenologic Analysis (Smith, 2003). The results describe the personal and relational world of the participants along their gender affirmation process. The emerging themes were allocated within the following macro-categories: relating to the parents and other family members; relating to friends; relating to associations supporting transgender persons; relating to healthcare professionals during and after gender affirming care; relating to one-self and, finally, the experience of being interviewed. Results were validated with a feedback meeting including the participants and the responsible of the Association. Overall the phenomenological-hermeneutical method allowed to disclose the personal and intimate world of each individual participant, by highlighting the peculiarities of his gender affirmation care experience. Results also describe the psychological needs and the supportive resources perceived by participants; they can therefore contribute to better structure



gender affirming care according to the transgender and/or transsexual individual's expectations and perceived needs.



Oppression, women's mental health and social justice. Insights from Palestinian feminist activists

Federica Cavazzoni¹, Guido Veronese¹, Cindy Sousa², Haneen Ayoub¹

¹ Department of Human Sciences "R. Massa", University of Milano-Bicocca, Milan, Italy

² Bryn Mawr College, Merion Ave, Bryn Mawr, Pennsylvania, USA

Abstract

To date, research has extensively documented the effects of political violence and military oppression on the mental health and well-being of women and men exposed to armed conflict and war. However, little attention has yet been paid to the ways in which women around the world resist the power-based constraints of their violent living environments. Indeed, transnational feminist literature highlights how women in the Majority World are too often portrayed as passive and uninformed victims who lack power and agency. As a result, few contributions have focused on their experiences and conceptions of oppression, as well as their acts of agency and resistance to oppressive powers. Exploring the resources and practices by which they circumnavigate, deconstruct, and resist these different power structures, on the other hand, is a first step in questioning their status as passive victims and accessing a glimpse into their experiences. Therefore, with a perspective informed by transnational feminist studies and liberation psychology, this study aims to explore the feminist practices of resistance and resilience that women in the West Bank and Gaza Strip practice in a context of political and colonial oppression such as Palestine. Through semi-structured interviews with feminist activists and women engaged in social justice and women's rights, this paper has delved into their experiences of resistance and survival, exploring how their experiences of activism and struggle for social justice have provided strength and resources for their well-being and daily lives. This study contributes to the growing literature on the relationships between agency, activism, and feminism and their shared impact on women's mental health and well-being in contexts of colonialism. Therefore, the work suggests implications for psychosocial practices when designing interventions for and with women in contexts of chronic political and colonial violence.



Mistrust and adolescent paranoia: a longitudinal association

Gennaro Catone¹, Luisa Almerico², Anna Pezzella², Simone Pisano³

¹ Department of Educational, Psychological and Communication Sciences, Suor Orsola Benincasa University, Naples, Italy

² Department of Psychology, University of Campania “Luigi Vanvitelli”, Naples, Italy

³ Department of Translational Medical Sciences, Federico II University, Naples, Italy

Abstract

Epidemiological research has embraced a dimensional model of psychosis in which psychotic-like experiences (PLEs) may be present to varying degrees in the general population. Paranoia is defined as the erroneous idea that people are targeting you for harm. In adolescence, rate of non-clinical paranoia is high. Recently, paranoia cognitive models have included mistrust among the possible predictors, which is a mitigated idea of personal threat. However, only a few empirical studies have verified this association. This study aims to describe the prevalence of mistrust and paranoia and investigate longitudinally the association between paranoia, mistrust and general psychopathology in adolescents. The study is part of a large two waves longitudinal, school-based project, the Bullying and Youth Mental Health Naples Study (BYMHNS). The sample was constituted of 739 participants (49.8 % Males) observed at the age of about 11 years (T1) and after two years (T2). A robust correlational analysis was carried out to investigate the relationship between sociodemographics, mistrust, internalizing/externalizing measures and paranoia. Given the large sample size, the Hommel correction to p-values was applied to limit the risk of type I error. Regarding sex and age (measured at T1), data showed only an association between sex and internalizing symptoms, confirming that boys reported fewer internalizing symptoms than girls. Regarding the general psychopathology (T1), results showed a strong and positive relationship between internalizing and externalizing symptoms and mistrust (measured at T1), and a medium association with paranoia (measured at T2), with a stronger effect size for the internalizing than externalizing symptoms, z-test of the difference = 2.02, $p = .04$. Finally, regarding the relationship between mistrust (T1) and paranoia (T2), the results show a medium association indicating that greater paranoia is associated with greater mistrust. Preliminary evidence about the longitudinal association between mistrust and paranoia are presented. Observed results could contribute to the advance of psychosis cognitive models since they provide additional information on clinical psychosis and the wide spectrum of PLEs. Clinical implications



are that in the general assessment and treatment of paranoia, practitioners should also consider mistrust among the risk factors.



Reflections on clinical governance policies in public services dedicated to the care of minors in psychosocial difficulty: what room is left for the subject's speech?

Anna Lisa Amodeo¹, Miriam Belluzzo¹

¹ SInAPSi University Centre, University of Naples Federico II, Naples, Italy

Abstract

More and more, in public services devoted to listening to and caring for minors experiencing psychosocial difficulties, we see the widespread application of clinical governance policies that prioritise the dimension of measurement and evaluation through the rigid adoption of protocols, guidelines, and diagnostic manuals, leaving little room for the patient as the subject of his speech. It is true that an increasing number of minors' behaviours are listed, categorised, and measured as mental and/or behavioural disorders. Based on this, parameters of more or less serious pathology are established that direct the clinician's intervention from the first interview onward, with the risk of (re)producing and sustaining certain highly stigmatising and marginalising developmental trajectories that, in the long run, can create identities marked by segregation. As a result, the psychologist plays the role of a mental health technician, called upon to respond objectively, standardised to subjective distress through a classificatory knowledge that names and defines, with the goal of curing, in the sense of adapting and re-establishing a supposed harmony between the individual, his body, and the contemporary society. The basic idea is that there is knowledge about the other, about the patient, that must be interpreted by the clinician using, among other things, measurement tools to optimising interactions between the individual and the environment and "normalising" behaviour to reduce risk and improve standards. Starting from some observations within a public Psychology service for minors in adoption and foster care, and through the theoretical framework provided by the vast psychoanalytic literature, it was possible to highlight how today's clinic runs the risk of turning child subjectivity into the phantasmatic idea of the existence of a generalised child, where the diagnosis assumes the traits of an ideological roadblock that pushes the clinic to the side. A defence mechanism that allows one to manage the anguish caused by the unthinkable, the uncertain, and the incalculable that emerges from the encounter with the Other, producing reassurance effects that, however, do not allow one to grasp the complexity of the human, and, even more seriously, produce institutions in which the subject, its words, its contingencies, and the uniqueness of each history, are missing.



Designing interventions to ensure the socio-occupational integration of individuals with autism: ethical and practical implications in the extensive use of digital technology and VR as elective tools

Anna Lisa Amodeo¹, Miriam Belluzzo¹, Camilla Esposito¹

¹ SInAPSi University Centre, University of Naples Federico II, Naples, Italy

Abstract

People with Autism Spectrum Disorder (ASD) present marked impairments in social and communicative functioning that can cause difficulties in adapting to the work environment. Also, the specific interests of people with ASD tend to produce routine, often non-functional behavior patterns, that may interfere with job success. Given this, vocational rehabilitation, interview preparation and workplace support programmes were designed to ensure the adaptation of the person with ASD to the potential demands of the contexts. Digital tools and VR are widely used in socio-occupational intervention programmes. The vast literature on the subject considers IT as an ally in the inclusion, socialisation, learning and training of people with autism, as the predominant communication channel of technology is the visual-spatial one, which is particularly effective with ASD people. However, through a review of the literature carried out by the SInAPSi University Centre within the Erasmus+ project "My Virtual World, 3D Job Environment for Autistic People", a number of ethical and practical risk dimensions were identified, mainly due to the overly extensive use of IT and VR. Some of the following evidence has emerged from the scientific literature: risk of engaging in compulsive behaviour and experiencing a sense of alienation from reality due to the high degree of immersiveness of VR; risk of physical trauma caused by the altered interaction with the real environment; onset of dissociative and psychotic symptoms, i.e. feelings of depersonalisation, derealisation and perceptual hallucinations following prolonged experiences within virtual environments; onset of disorders such as anxiety and panic due to the immersive nature of VR; onset of VR motion sickness and cybersickness, with symptoms such as nausea, dizziness, headaches, postural instability and eye fatigue; development of addictions to video games and rewarding digital tools, i.e. those provide entertaining content and rewards for the correct execution of tasks, with the additional risk that excessive gratification may exacerbate stereotyped, aggressive and out-of-control behaviour in case of frustration; social inclusion issues, especially if IT becomes the only mode of communication and social interaction available to them; finally, the continuous use of digital tools may lead to the emergence of new stereotyped and rigid behaviours.



Saturday, 16th September 2023

SYMPOSIUM SESSION



**ADVANCES ON MATERNAL AND PATERNAL MENTALIZING: NEW PERSPECTIVES
OF RESEARCH AND INTERVENTION**

Proposers

Chiara Pazzagli¹, Fabiola Bizzi¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

² Department of Education Sciences (DISFOR), University of Genoa, Genoa, Italy

Discussant

Nicola Carone¹

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

Abstract

Parental mentalizing – the capability to understand the underlying mental states of their own behavior and of their child – is considered crucial within parent–child relationship and child development. However, there is a lack of research examining how parental mentalization is related to the development of different psychological vulnerabilities in children at specific life stages, such as in preadolescents and early adolescents. Besides, even if the role of mothers in this process has been widely studied, the empirical understanding of the specific contribution of fathers is still in its early stages. Following this direction, improving maternal and paternal mentalizing across evidence-based interventions may be particularly important to support the parent–child relationship, enhance the parent's ability to keep the child in mind, and promote the child's adaptive development. Therefore, this panel aims to present several Italian contributions that illustrate the key role of maternal and paternal mentalizing across different contexts. The University of Milano-Bicocca's contribution investigates young fathers' mentalization capability and paternal interaction styles of infants at three months. The study from the University of Urbino explores the relationship between father-child relationship quality and specific characteristics of epistemic trust and mentalization in a sample of young adults. The study from the University of Rome and University of Perugia presents preliminary data on the relationship between maternal mentalizing and attachment with child's externalizing behavior during early adolescence. The



contribution from the University of Genoa presents a pilot study following an online attachment-based intervention for parents of preadolescents with behavioral disorders focusing on mentalizing and emotion regulation in parenthood.



A pilot study to evaluate mind-mindedness and the styles of interaction of young fathers and their infants at three months

Elena Ierardi¹, Simona Fantoni¹, Margherita Moioli², Alessandro Albizzati², Cristina Riva Crugnola¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

² Neuropsychiatric Unit 2, ASST Santi Paolo e Carlo, Milan, Italy

Abstract

Introduction: Fatherhood at a young age involves psychological and social changes that may cause stress and conflict between parenting and adolescent condition, and it can be characterized by a multiproblematic background with several risk factors that can negatively affect father-child relationships, the father's well-being, and child's social-emotional development (Uengwongsapat et al., 2018). To our knowledge, only one study compared young fathers-infant interactions with young mother-infant interactions showing that young fathers were less sensitive and less engaged in social play than young mothers (McGovern, 1990). No studies have examined the mentalization ability of young fathers. *Methods:* This pilot study had two aims: to evaluate paternal interaction styles and mentalization in a sample of 20 young fathers (father's mean age=19) and their 3-month-old infants; to compare paternal interaction styles and mentalization with those of 20 adolescent and young mothers (mother's mean age=17) (the fathers' partners). Parent-infant interaction were codified with Care-Index (Crittenden, 1998) to evaluate styles of interaction and with mind-mindedness system (Meins & Fernyhough, 2015) to evaluate parental mentalization at infant 3 months. *Results:* Young fathers had low scores in sensitivity and high scores in controlling behaviors, placing them in a risk range. Infants in interaction with their fathers had high scores in passive behaviors and low scores in cooperative behaviors, placing them in a high-risk range. Young fathers showed also a low level of mind-mindedness, with a few mind-related comments aimed at their infants. Furthermore, the young father's interaction profile did not differ from the young mother's interaction profile. Moreover, young fathers had more nonattuned mind-related comments than the mothers of their infants, showing that they misunderstand their infants' behaviors more than young mothers. *Discussion:* Findings showed that the quality of adolescent and young father-infant interaction is characterized by low responsiveness and low mind-mindedness, outlining a risk profile of young father-child relationship. These results highlighted the value of providing early intervention to support the father-child relationship, enhancing the father's sensitivity and his ability to keep the infant in mind.



Mentalizing and emotion regulation in parenthood: A pilot study of an online attachment-based program for parents of preadolescents with behavioural disorders

Marta Tironi¹, Simone Charpentier Mora¹, Federico Rospo¹, Fabiola Bizzi¹

¹ Department of Educational Sciences, University of Genoa, Genoa, Italy

Abstract

Introduction: The association between attachment, mentalizing, and emotion regulation has been shown for several psychological disorders in middle-childhood, such as behavioural disorders. These are arisen as a public health crisis of today's times defining the need for early interventions. It is known that a more secure, mentalized, and emotionally regulated parent-child relationship may promote positive outcomes both in children and parents. In this scenario, the Connect Parent Group, an attachment-based parenting group intervention, has demonstrated its efficacy also in online settings (eConnect) to improve positive parent-child interactions. Therefore, this study aims to identify early changes in the ability to mentalize and regulate one's emotions in parents of preadolescents with behavioural disorders, expanding preliminary findings on an online parenting intervention. *Methods:* A total of 28 parents (82.1% mothers, 17.9% fathers, Mage = 47.48, SD = 4.73) of preadolescents with behavioural disorders (Mage = 11.22 years, SD = 2.69, 35.7% girls) were assessed on their mentalizing and emotion regulation competencies at three time points: before intervention (T1), one month after the intervention (T2) and at 6-months follow-up (T3). *Results:* Mixed-effects regression models show a reduction in uncertainty about mental states ($p = .05$) and in feeling negative emotions after the intervention ($p < .01$), although these effects didn't remain stable at follow-up. Moreover, our results highlighted a reduction in emotion dysregulation ($p = .05$) between T1 and the T3. Change in mentalized affectivity was instead not significant. *Discussion:* Results add preliminary evidence about an online attachment-based parenting program in supporting parents in the ability to mentalize and regulate their own emotions in relation to their children with behavior problems. Implement the study with a control group and with measures of children's functioning as well are future directions. Clinical and research implications will be discussed.



‘Where’s dad?’ The role of fathers in the development of children’s mentalization and epistemic trust

Giulia Gagliardini¹, Giorgia Barlotti¹, Sofia Bellucci¹, Maria Dalprato Grosu¹, Angela Proto¹, Chiara Sassolini¹, Gaia Stelletti¹, Andrea Tafini¹

¹ Psychotherapy and Clinical Research Service, Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Introduction: Mentalization, i.e., the capacity to interpret our own and others’ behaviors in terms of intentional mental states, unfolds within the close relationships with those who take care of us from the very first moments of our lives. A secure attachment relationship allows us to feel that those who care about us are reliable sources of information and helps us at developing epistemic trust and a good capacity to mentalize. The role of mothers in this process has been studied and highlighted in previous years, however the empirical understanding of the specific contribution of fathers is still at its early stages. Moreover, we lack on studies on young adults, a population which is at higher risk of developing mental health issues. *Aims:* This works aims at investigating the relationship between the quality of the relationship with fathers and the specific characteristics of epistemic trust and mentalization in a sample of young adults. *Methods.* The following measures were used: 1) the Experience in Close Relationships – Relationship Structures Questionnaire was used to investigate the quality of the relationship with mothers and fathers; 2) the Epistemic Trust, Mistrust, and Credulity Questionnaire was used to rate participants’ expectancies that others can be a reliable source of information; 3) the Reflective Functioning Questionnaire was used to assess participants’ mentalization; 4) an ad hoc questionnaire to collect demographic information. The sample was composed of 100 young adults, aged from 18 to 25 years old. Correlational analysis was used to test the relationship between the variables. Since significant correlations were found, further analyses were performed. *Results:* The quality of the relationship with fathers was significantly associated with epistemic trust and the quality of participants’ mentalization. Clinical implications will be discussed.



Early adolescents' externalizing behavior: preliminary data on the role of maternal attachment and parental reflective functioning

Livia Buratta¹, Elena Coletti¹, Chiara Pazzagli²

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Mother's understanding of the internal reality of her son, together with her attachment model, is assumed to result in a more efficient regulation of her emotions in dealing with the son's oppositional, aggressive, and hyperactive behavior. Thus, maternal attachment and reflective functioning (PRF) capability can be critical factors shaping son's externalizing behavior. Yet, there is a lack of research examining how maternal mentalization is explicitly related to son externalizing behavior during early adolescence. Moreover, only few studies in this area have assessed PRF as a multidimensional capacity. Aims of this preliminary study are to investigate: (1) the associations between mothers' PRF, attachment dimensions, and early adolescents' externalizing behavior; (2) whether mothers' PRF mediates the relation between their attachment dimensions and early adolescents' externalizing behavior. We hypothesized that maternal insecure attachment dimensions would be related to higher levels of sons' externalizing behavior. Furthermore, we expected that PRF dimensions would mediate the relationships between attachment dimensions and sons' externalizing behavior. Parental reflective functioning (PRFQ-A), maternal attachment dimensions (ASQ), and early adolescents' externalizing behaviors (CBCL) were assessed in a community sample of 60 mothers (M [SD] = 45.79 (4.69) years old) of early adolescents (M [SD] = 13.03 (0.91) years old). Pearson's correlation analyses showed from moderate to high relationships between insecure maternal attachment, mothers' pre mentalization modes (PM) and sons' externalizing behaviors. The mediation model showed that PM totally mediated the relationship between both anxious attachment and sons' externalizing behaviors ($b = .134$; $SE = .066$; $95\%CI = .028 - .285$) and maternal avoidance and sons' externalizing behaviors ($b = .108$; $SE = .039$; $95\%CI = .035 - .183$). This study provides new evidence of the importance of the mothers' mentalizing stance for the development of externalizing difficulties in early adolescents. Improving parental mentalization may be particularly



important for helping mothers understand their son's subjective experience and see beyond the early adolescent's externalizing difficulties.



**SEXUAL WELL-BEING IN THE CONTEXT OF PSYCHOPATHOLOGICAL
BEHAVIORS: CLINICAL AND PSYCHO-SOCIAL IMPLICATIONS**

Proposer

*Erika Limoncin*¹

¹ Department of Dynamic, and Clinical Psychology, and Health Sciences, Sapienza University of Rome, Rome, Italy

Discussant

*Paolo Valerio*¹

¹ Department of Neurosciences, Reproductive and Odontostomatological Sciences, University of Naples Federico II, Naples, Italy

Abstract

Introduction: Sexual well-being is in many cases the result of healthy development of psychological and psycho-relational constructs. On the contrary, it could be supposed that sexual dysfunctions, as well as sexual deviancy, are sometimes the result of psychopathological aspects. Hence, aim of this symposium is to describe which clinical and psycho-social implications may have the interpretation of sexual problems following the bio-psycho-social model, where biological, psychological and social variables are strictly connected. These last aspects may contribute to the explanation of the way psychopathology can bring to the development of a dysfunctional sexuality. *Methods:* The presentation of original data, together with the highlighting of the main literature meta-analytic findings, can give a new perspective and new direction in terms of a tailored therapeutic intervention. *Results:* Main results are presented in terms of the link between psychopathology and sexual well-being or sexual dysfunction. Specifically, in this symposium are presented data about the emotional regulation and sexual functioning, the impact of psycho-social variables on the atypical sexual behavior and on paraphilic behaviors, the association of internal operational models with the capacity to develop and maintain romantic and sexual relationship, and the impact of specific psychological traits/personality disorders on the general wellbeing and the sexual functioning. *Discussion:* Emerged evidence is described about the association between psychopathological aspects and problematic or dysfunctional sexual behavior. This data suggest the



necessity to assess psychopathological aspects in the field of psycho-sexual evaluation, in order to better define and frame the patient's sexual suffering in a broader context of a psychological functioning.



Experiences of Italian Asexual and Aromantic Individuals with Healthcare Providers: from Explicitly Aggressive to Affirming Interactions

*Sofia Pavanello Decaro*¹, *Antonio Prunas*¹, *Maric Martin Lorusso*²

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

² Department of Psychology “Renzo Canestrari”, Alma Mater Studiorum, University of Bologna, Bologna, Italy

Abstract

Background: Asexual and aromantic individuals experience stigma and invisibility and, as a consequence of socially-rooted sexual normativity, are at risk of worse mental health outcomes. Previous studies with other sexual and gender minorities documented stigmatization and invalidation in clinical settings: healthcare providers lack knowledge on the topic, resulting in intentionally or unintentionally discriminatory interactions. Therefore, sexual and gender minority people are reluctant to disclose their identities in healthcare settings. The present research focuses on the interactions that asexual and aromantic people have with healthcare providers, to explore their affirming or discriminatory nature. Ultimately, the goal is to provide the first account of experiences of Italian members of this population to inform providers on their needs and work towards creating affirming settings. *Methods:* A survey with sociodemographic assessment, followed by open-ended questions was distributed online and was filled in by 284 asexual (N=277), aromantic (N=66), or both (N=57), individuals. The answers were analyzed through thematic analysis, and their content was framed in six overarching themes: Manifest aggression, Microaggression, Clinical setting as an unsafe space, Knowledge, Neutrality, Microaffirmation, thus identifying a continuum from explicitly aggressive to affirming statements. *Results:* Participants' experiences highlight that clinical settings are often not a supportive and safe space, exposing them to greater vulnerability. Some of the people who do not engage in sexual activity are at risk of being wrongly diagnosed, or faced with recommendations that go in the direction of conversion therapy. *Discussion:* Results are discussed within the minority stress framework and the microaggression and microaffirmations models. The findings point to the lack of training for professionals and highlight the need for a sex positive clinical approach that is welcoming and affirming for and to address their needs.



The Quality of Women's Sexual Functioning: Exploring the Role of Emotion Regulation and Sexual Communication

Lilybeth Fontanesi¹, Giorgio Falgares², Giulia Costanzo², Daniela Marchetti¹

¹ Department of Psychological, Health and Territorial Sciences, University "G. d'Annunzio" of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: For long time female sexual function has been studied in relation to the ability to procreate and the presence of physical pathologies. Nevertheless, psychological experiences of desire, excitement and pleasure have proven to be crucial in the assessment of female sexual function and its alterations in clinical settings. According to the literature, altered sexual functioning may be related to several fundamental psychological factors. Emotion regulation difficulties are considered as one of the main predictors of low levels of women's sexual functioning and satisfaction. However, the mechanisms linking emotion dysregulation to female sexual dysfunctions are still unclear. Sexual communication, conceived as the ability to openly express one's sexual preferences, desires, and sexual concerns, may be related to both emotion regulation skills and quality of sexual functioning. Thus, the aim of this study was to explore the mediating role of sexual communication in the relationship between emotion regulation and female sexual functioning. *Methods:* Participants were 1280 non-menopausal women ranging in age between 18 and 57 years ($M_{age} = 27.34$, $SD = 6.48$), 77.66% was engaged in a long-term relationship, and 22.34% was single having occasional sexual intercours. Participants completed three self-report questionnaires: DERS, for the assessment of emotion regulation abilities; "Communication" subscale of the SSS-W, for the evaluation of sexual communication; FSFI, for the assessment of sexual functioning. *Results:* Results showed that worse emotion regulation skills were associated with worse female sexual functioning. Moreover, sexual communication mediated this relationship, so that lower levels of emotion regulation skills were associated with worse sexual communication, which in turn was associated with lower sexual functioning quality. *Conclusions:* Our findings suggested that difficulties in understanding and accepting one's emotions may impair the ability to openly communicate one's wishes



and concerns with a sexual partner. Failure in expressing sexual needs and preferences may in turn interfere with the quality of one's sexual life, potentially leading to sexual dysfunctions and dissatisfaction.



Psycho-social, clinical and sexual characteristics of Iranian adults referring a fetishistic interest

Erika Limoncin¹, Rezvan Shekarchi¹

¹ Department of Dynamic, and Clinical Psychology, and Health Sciences, Sapienza University of Rome, Rome, Italy

Abstract

Fetishistic interest and behavior, or, in more severe cases the fetishistic disorder, are defined by the American Psychiatric Association (APA) as recurrent and intense sexual urges or behaviors that involve inanimate objects and are accompanied, only in the case of a disorder, by stress or functional impairment. Clinical evidence suggests the existence of several types of fetishes, involving clothes, accessories, lingerie, types of material, or body parts like feet or hair. In general, the prevalence of fetishistic interest seems not to be precisely reported, with data ranging from 4 to 30% in general population. On the other hand, no scientific evidence is reported for the prevalence and clinical manifestation of feet fetish in muslim countries. Main aim of this study is to report prevalence of feet fetish in Iranian general population, together with some psycho-social and clinical variables. Subjects were enrolled through a specific Instagram page dedicated to sexual behaviors. Final sample was composed by 357 males (79%) and 88 females (19,5%). Of the total group 63,9% (291/455) declared to have a feet fetish. 241 subjects referred to suffer from anxiety disorders (82,8%; 241/291), while 65,9% declared to suffer from mood disorders (192/291). Interestingly, multiple regression model, with depression as dependent variable, showed that presence of fetish and sexual activity in the last six months are respectively positively, and negatively associated with depression. The global model explained 49,8% of the phenomenon. Based on this evidence, we could assume that feet fetish is highly prevalent among muslim persons. In addition, important clinical aspects, such as depressive mood and sexual activity should be taken into account during clinical assessment of persons with this sexual interest.



Direct and indirect impact of Internal Working Models of Self on Male Sexual Function

*Daniele Mollaioli*¹

¹ Department of Biotechnological and Applied Clinical Sciences (DISCAB), University of L'Aquila, L'Aquila, Italy

Abstract

Background: Internal working models (IWM) represent the internal representation about the self, expressed by a sense of self-worth (+) or self-blaming (-), and significant others, expressed by the expectation of availability and support (+) or indifference (-), guiding the interpersonal strategies to regulate intimate affects and choosing romantic and sexual partners. Even if the relationship between IWM and close relationships has been deeply investigated, only few studies evaluate the impact of IWM on sexual function. Thus, we aim to investigate the interplay among IWM, dyadic cohesion and erectile and orgasmic function in males. *Methods:* Through an online platform, a convenience sample of 1052 partnered males were recruited (age: 40.45 ± 12.94). Enrolled subjects compiled a psychometric protocol composed of: the Dyadic Adjustment Scale (DAS); the Relationship Questionnaire (RQ); the Sexual Health Inventory for Men (SHIM); the Premature Ejaculation Diagnostic Tool (PEDT) and the Male Orgasmometer. Correlation, linear regression and mediation model analyses were performed. *Results:* A significant positive correlation was found between the Model of Self (MS) and dyadic cohesion and sexological variables; on the other hand, no significant correlation was found between the Model of Other (MO) and sexological variable, unlike a positive correlation emerged between the MO and dyadic cohesion. Mediation Analysis evidenced the significant influence of MS towards erectile function ($\beta=0.05$), premature ejaculation ($\beta=-0.03$) and perceived orgasmic intensity ($\beta=0.04$), both directly and indirectly. Furthermore, dyadic cohesion significantly mediates the indirect pathways between the MS and sexological variables ($\beta=0.03$). *Conclusion:* These results highlighted the important role of MS in the relational and sexual health and showed how internal representation of Self could, both directly and indirectly impact on the perception of dyadic and sexual experience and the onset of sexual dysfunctions, such as erectile dysfunction and premature ejaculation in male population.



**FROM PSYCHOLOGICAL CONSULTATION TO PSYCHOTHERAPY:
PSYCHOLOGICAL SERVICES FOR UNIVERSITY STUDENTS**

Proposer

*Antonella Granieri*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Discussant

*Maria Catena Ausilia Quattropani*¹

¹ Department of Educational Sciences, University of Catania, Catania, Italy

Abstract

University students¹ report increasingly levels of distress as well as severe mental health problems, and several studies highlighted an intensified demand for clinical interventions in recent years. Thus, the provision of psychological interventions among students' psychological services has become an important professional issue throughout the world, with major implications for university health services and mental health policymaking more widely. Research underlines that the challenges students are facing now are different than in the past, and university psychological services are overwhelmed. Currently mental health services and support in tertiary education institutions typically follow an approach that gives priority to first-level interventions. However, from a clinical perspective, counseling services are not sufficient when students are facing serious mental health issues. Increasing the provision of psychotherapy services could engage a larger number of students during a critical phase of their life, thereby addressing a significant public health problem among university students. In this perspective, psychotherapeutic work can promote transformations focused on helping university students to creatively develop a meaning for the personal, interpersonal, and transpersonal events taking place in his/her internal world.



The boundary between prevention and intervention within university of Florence psychological counseling services

Silvia Casale¹, Barbara Giangrasso¹

¹ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

The number of university students seeking psychological treatment for their mental health issues is growing, and evidence shows that mental health problems may also have important implications for academic functioning (e.g., Auerbach et al., 2016). The “Centro di Servizi di Ateneo di Consulenza Psicologica, Psicoterapia e Psicologia Clinica (CeCoPs)” of the University of Florence provides services to all students experiencing any kind of distressing situation negatively affecting their life, with the exception of problems that are strictly related to academic/study issues (i.e., career and vocational counseling are not provided). Quality standards considered essential include the opening of the service throughout the year, methods of release in person or online (depending on the student’s preference), promptness of the first response (within 48 hours of the request), group or individual medium-sort counseling intervention, and follow-up at one month. Staff is able to provide counseling and support in Italian or English. The service is free of charge for college students. 749 students contacted the Cecops and seek psychological help in 2022. 63 students (8.4%) out of 749 were referred to other services, including long-term psychotherapy (50.8%), orientation services within the University (20.6%), and public Psychiatry Outpatient Clinic for presumed psychiatric diagnosis; 6.3% were referred to public Anti-violence Centers. Among those who were treated within the Cecops with psychological counseling sessions, the most prevalent psychological difficulties were relationship difficulties with family (31.2%), situational anxiety (14.3%), and problems adapting to university life (10.8%). This contribution will also present some preliminary evidence about the effectiveness of the interventions provided as assessed by the CORE-OM (Clinical Outcomes in Routine Evaluation – Outcome Measure; Evans et al., 2000; Evans et al., 2002; Connell et al., 2007).



In the eye of the storm: Psychological counselling between collective well-being and mental health

*Maria Francesca Freda*¹

¹ Department of Humanities - University of Naples Federico II, Naples, Italy

Abstract

Several epidemiological studies show that university students were affected by the consequences of the Covid-19 emergency and subsequent lockdown. In many cases, these events affected students' well-being, motivation, and their capability to orient themselves and build projects. Confusion, lack of trust in the future, anxiety and isolation are signs of growing malaise among young adults. Moreover, recent dramatic events like university students committing suicide, along with the emotional distress that their peers experienced following these tragedies, make it necessary to focus our attention on the academic context. At this moment in history, university services find themselves caught between, on the one hand, student movements which protest against society's meritocratic and performance-centred systems; and, on the other hand, the same students, facing feelings of vulnerability, asking to be welcomed, listened to, and cared for. University represents the main life context of about 1.800.000 young adults and the services offered by the university, represent a proximity device, integrating two functions: one is the promotion of psychological health, which includes the welcoming of students feeling psychological distress; the other consists of the mediation between answering the needs of individual students and the necessity to take care of the quality of life of the whole academic community. Starting from these premises and from the experience of the psychological support services of the "Sinapsi" centre of the "Federico II" university, this research focuses on the organization of various trajectories of intervention, along with the functions they serve and the different methodologies they used. It is necessary to take into account both the academic community as a whole and the individual student, as well as the need to welcome psychological discomfort and to promote change. In this post-pandemic times, the interactions between students and the academic institution take place in a context in which the health trajectories of the individual students are intertwined with social and formative processes, mediated by individual and collective resilience processes.



From ResidenzAscolta to La.To.Psi: trajectories of interventions and psychological services for university students

Isabella Giulia Franzoi¹, Maria Domenica Sauta¹, Antonella Granieri¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

The Post-Graduated School in Clinical Psychology of the University of Turin and the E.Di.S.U. Piemonte in 2014 started to collaborate on ResidenzAscolta, a free service addressed to transfer students, for the provision of psychological consultations and brief psychodynamic psychotherapies. The assessment of psychological variables carried out in the consultation phase returned significant psychopathological difficulties. In 169 students were assessed alexithymia (TAS-20), depression (BDI-II), and post-traumatic symptoms (IES-R). Students showed mild depressive symptoms ($M = 19.78$; $DS = 11.44$) with a moderate to severe condition in the 42.6% of cases. The 35.5% was at risk for suicidal ideation. Post-traumatic symptoms mean value was severe ($M = 42.71$; $DS = 14.27$) and data shows borderline or alexithymic levels in 59.8% of cases. The experience gained within ResidenzAscolta, attesting a serious psychopathological picture of university students, highlighted the importance of investigating and promoting the provision of psychological care for university students, investing in professionally trained staff, and providing more comprehensive services for students with mental health concerns. Thus, we created an academic Spin-off - La.To.Psi - that sustains the need for easily accessible and moderately priced psychological interventions addressed to university students. Hence the decision to ground the Service within university facilities frequented by students, as a precise sign of interest and care for them from the institutions. Indeed, in our opinion health and education professionals alike must invest in psychological interventions for university students at key sites to promote mental health. This will both mitigate disproportionate service supply and demand and address a wider range of specific and complex student mental health difficulties.



Psychological intervention for university students of the third millennium: Which model?

*Silvana Grandi*¹

¹ Department of Psychology “Renzo Canestrari” University of Bologna, Bologna, Italy

Abstract

Introduction: University students have to face increasing levels of psychological strain and manage subsequent distress symptoms. These situations may cause a delay during their course of study, eventually prolonging their psychological and economical dependence from their origin family and, consequently, influencing their self-identity and psychological growth. The prevalence of psychological problems in university students seem to be alarming, with various degrees of stress, anxiety, and depressive symptoms. Therefore, university counseling services may represent the ideal context to identify and support students in improving their psychological adjustment. *Methods:* The University Counseling Service (SAP) has been operating since 1983 at the Psychology Department “Renzo Canestrari” of the University of Bologna and serves all university students mostly aged between 18 and 28 years. The clinical service is free and is organized in two stages: (1) individual counseling aimed at analyzing the reasons for the help demand; (2) an individual or group psychotherapeutic treatment, in case of need. *Results:* The most prevalent diagnoses may be contextualized as anxiety and depressive symptoms, somatization, adjustment disorders, personality disorders and problems related to education and literacy. *Discussion:* University students might considerably benefit from short-term psychotherapy treatments, regardless of their theoretical approach which has a marginal influence on outcomes. It appears that teamwork and organizational structure—with its allocation criteria and assessment procedures—are most relevant in terms of service quality and effectiveness. In the last years we have assisted at the growth of students’ demand for university counseling services and their complexity of the clinical and organizational management should be considered. Psychological interventions addressing primary prevention and promotion of personal resources in university students are urgently needed to reduce the psychological distress of this at-risk population.



HOW NEW TECHNOLOGIES ARE CHANGING THE FIELD OF CLINICAL PSYCHOLOGY?

Proposer

*Raffaella Calati*¹

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

Discussant

*Gian Mauro Manzoni*¹

¹ School of Psychology, eCampus University, Novedrate, Como, Italy

Abstract

New technologies are consistently changing the field of clinical psychology. They introduced new ways for the clinical assessment of patients and to provide treatment. Digital technology (websites, apps, and teleconferencing) is rapidly changing psychotherapy, adding other options to the traditional face-to-face session. Moreover, Artificial Intelligence (AI) may represent an important help for clinicians and researchers to identify and predict in a rapid and automated way individuals' behaviors. Finally, new technologies are improving not only the screening and treatment of our patients but also how to teach clinical psychology; in fact, they emerged as an effective method for teaching complex technical and non-technical skills. This symposium aims to investigate the use of new technologies in the field of clinical psychology. In particular, we will focus on: (1) computerized clinical assessment and its comparability to face-to-face assessment; (2) an internet-based intervention targeting university students with mild to moderate psychological difficulties; (3) the use of AI to identify at-risk parent-child interactive behaviors; and (4) the use of serious gaming and avatars in psychologists' professional training. The different contributions will offer an overview of how new technologies may improve both clinical and research activities and will highlight the need of their integration into the public mental health setting.



Equivalency of in-person versus remote assessment of the PAI, IOP-29, and IOP-m

Claudia Pignolo¹, Luciano Giromini¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Introduction: Studies on the equivalence of face-to-face and tele-testing should be warranted for all published tests; however, very few studies have addressed the potential differences between remote and face-to-face administration methods, and this gap in the literature becomes even more apparent when considering the validity of computerized and/or remotely administered tests that assess the credibility of reported symptoms and response styles. Therefore, the purpose of this study was to examine the comparability and validity of remote and face-to-face administration of the Personality Assessment Inventory (PAI), the Inventory of Problems-29 (IOP-29), and the Inventory of Problems-Memory (IOP-M) by using a simulation study design. *Methods:* Three hundred eleven Italian, adult volunteers were recruited for this study. We administered the PAI, IOP-29, and IOP-M under three different conditions: (a) online/computerized, (b) face-to-face/computerized, and (c) face-to-face/ paper-and-pencil. In addition, we adopted a simulation study design, so that, for each condition, participants were randomly divided into two groups: the honest responders group, in which participants were asked to take the tests honestly, and the experimental feigners group, in which participants were instructed to feign psychopathology (e.g., psychosis or PTSD) while taking the tests. *Results:* Our results suggest that indicators of negative response bias perform similarly despite the different modes of administration when individuals are asked to take the PAI, IOP-29, and IOP-M honestly. When individuals feigned PTSD, the PAI NIM and MAL and the IOP-M # of correct answers performed differently across the three administration settings: however, these differences were better explained by differences in the demographic composition of the three administration type subgroups. *Discussion:* The purpose of this study was to contribute to the ongoing debate about whether there is a significant deviation from standard test administration when computerized or tele-assessments are administered. Our study is a response to the call for scientific evidence of equivalence between remote and face-to-face testing and suggests that clinicians should carefully consider the administration in forensic cases.



Can Serious Gaming Improve Psychologists' Professional Training? A Systematic Review

Marco Colasanti¹, Antonio Pio Facchino¹, Maria Cristina Verrocchio¹

¹ Department of Psychological, Health, and Territorial Sciences University "G. d'Annunzio" of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: In recent years, serious gaming and new technologies emerged as an effective method for teaching complex technical and non-technical skills. Even though serious games have been successfully employed in the training of various healthcare professional figures, their pedagogical role for mental health professions is less investigated. Serious gaming could, indeed, be a useful tool for addressing, in a time- and cost-effective way, the challenges met by psychologists in the making, such as the need of direct practice on real patients or the necessity to receive continuous supervision and feedback over a long period of time to ensure the training's quality. *Methods:* Thus, a systematic review following PRISMA guidelines was conducted to synthesize the evidence on the use of serious gaming and avatars in psychologists' professional training. Scopus, Web of Science, PsycInfo, and Pubmed databases were systematically searched considering articles published until September 2022. The search initially yielded 2113 results. Based on the eligibility criteria, 14 studies were included in the final synthesis: 4 randomized controlled trials, 3 case-control, and 7 cross-sectional studies. A risk of bias analysis was performed using the original Newcastle-Ottawa Scale for case-control studies, an adapted version for cross-sectional studies, and the Cochrane Collaboration Tool for randomized controlled trials, suggesting that the latter had a low risk of bias, while cross-sectional and case-control studies had a higher risk of potential bias. *Results:* Results showed that serious games and avatars are employed in various aspects of psychologists' training: teaching specific subjects in college psychological courses, psychoeducational games, training psychological skills (e.g., investigative interviews with children and counseling). Overall, serious games positively impacted trainees' performance and learning, and were largely described by participants as useful, fun, and engaging tools. *Discussion:* These findings highlight that integrating serious gaming and avatars in the traditional training of psychologists might be beneficial in developing skills for such a complex profession. Furthermore, the present systematic review underlines the need to conduct further studies on this topic, ideally employing validated instruments.



Using artificial intelligence to identify at-risk parent-child interactive behaviors: a preliminary study

Alessio Porreca¹, Merylin Monaro², Lamberto Ballan³, Alessandra Simonelli¹

¹ Department of Developmental and Social Psychology, University of Padua, Padua, Italy

² Department of General Psychology, University of Padua, Padua, Italy

³ Department of Mathematic, University of Padua, Padua, Italy

Abstract

Background: The evaluation of parent-child interactive behaviors through observation and coding grids represents one of the most direct measures adopted to assess and support the quality of parenting, parent-child relationship, and child socio-emotional development in research and clinical practice. Despite their significance with respect to the information obtained, these techniques are expensive in terms of time required for training, reaching observational experience, and viewing and re-viewing the videos to correctly identify what occurs during the frames of the videotaped sessions. Artificial Intelligence could represent an important help for clinicians and researchers to identify in a rapid and automated way parent-child dysfunctional interactive behaviors. *Objective:* The aim of this study was to develop a computer vision model able to distinguish between interactive behaviors of mother-child pairs at risk for parental psychiatric problems and low-risk mother-child pairs based on 2-minutes video segments recorded during parent-child free-play sessions. *Methods:* The study involved 37 mother-child pairs. Nine dyads (4 M, 5 F) were at-risk for parental psychiatric problems (i.e. recruited through mental health settings), whereas 28 dyads (20 M, 8 F) were low-risk (i.e. recruited from the general population). The dyads were videotaped during 20-min free-play sessions. Quality of parent-child interactive behaviors was coded through the EAS. Moreover, 2-min video segments for each dyad were processed with repositories offered by previous work developed for distance estimation, identifying the spatial coordinates of the subjects in terms of positioning and depth in space. Following, the binary classification of the two groups (at-risk vs. low-risk) was achieved through a CNN-LSTM-based deep learning model architecture. *Results:* A significant difference was found with respect to quality of interactive behaviors assessed through the EAS ($p > .05$). Moreover, the computer vision model obtained resulted able to differentiate between the two groups with a test accuracy of 79.72% on video observations of 4 seconds and of 74.42% on video



observations of 2 minutes. *Conclusions:* Artificial intelligence could provide an important support to clinicians and researchers in the assessment of the quality of parent-child interactive behaviors.



An Internet-Based Intervention Targeting University Students With Mild To Moderate Psychological Difficulties: Challenges and limitations

Raffaella Calati¹, Emanuele Preti¹

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

Abstract

Introduction: Many university students show psychological difficulties but only a small portion receive the needed care. In this regard, internet-based interventions represent an important resource. *Methods:* MindBlooming is a seven-week intervention delivered through a mobile application for university students with mild to moderate psychological difficulties. The application is the result of the interdisciplinary work between the Department of Psychology and the Department of Informatics, Systems and Communication of the University of Milan-Bicocca. *Results:* The intervention focused on symptoms of depression, anxiety, sleep problems, self-destructive thoughts, job- and study-related stress and burnout, and chronic pain. It is “multi-approach” since is based on different psychotherapeutic strategies, primarily psychoeducation, Cognitive-Behavioral Treatment (CBT), third-wave CBT, and Interpersonal Psychotherapy (IPT). Data concerning MindBlooming administration during two first pilot studies will be presented. During the two pilot studies, the intervention consisted of a 7-week treatment on two problematic areas according to each students' personal needs, identified through an initial assessment. *Conclusions:* The achieved results were promising especially in terms of interest shown by students. However, we encountered technical problems that hampered the pilot studies and high drop-out rates.



**NONBINARY AND TRANS* GENDERS: NARRATIVES OF IDENTITY,
RELATIONSHIPS, SEXUALITY, AND PARENTHOOD**

Proposer

*Guido Giovanardi*¹

¹ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy

Discussant

*Luca Rolle*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

The field of gender identities has expanded widely in recent years. More and more people are identifying with nonbinary identities, which go beyond the two genders M and F. Traditionally, research in clinical and dynamic psychology has dealt mainly with transgender people with binary identities. Especially in a context like Italy, where society and language are articulated in a strongly binary way, the psychological needs of nonbinary people are still poorly understood. This panel brings together qualitative research that explores some important issues to increase knowledge of this population. Specifically, Giovanardi et al. present research on meanings attributed to gender and experiences of gender dysphoria and gender euphoria in a sample of nonbinary adults. Anzani and Prunas offer a review of the existing literature on the sexuality of nonbinary people, highlighting implications for psychological work with this group. Di Giannantonio et al. present a study on intimate relationships and sexuality of nonbinary young adults. Finally, Miscioscia et al. present a study on the desire to be parents in a sample of transgender and nonbinary people, highlighting the factors beneath the wish to become parents or to be child-free.



Gender Representations, Gender Dysphoria and Gender Euphoria in Nonbinary Young Adults.

A qualitative study

Guido Giovanardi¹, Bianca Di Giannantonio¹, Karine Milanese¹, Tiziana Gagliano¹, Lorenzo Giordano¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Aim: Nonbinary gender identities refer to those individuals who do not identify exclusively as either male or female. Instead, they may identify as a combination of both, as neither, or as something entirely different from the traditional binary genders. Living in a binary world, nonbinary individuals have various experiences that may lead to gender dysphoria. However, the new meanings developed according to the nonbinary identity can make up also new frameworks for integrating conflicting gender aspects. The purpose of this qualitative research study is to explore gender representations, gender dysphoria and gender euphoria experienced by nonbinary young adults living in Italy, in a strong binary social and linguistic context such the Italian one. *Methods:* The study utilized a qualitative research design, specifically a phenomenological approach, to explore the lived experiences of nonbinary young adults. Participants were recruited through purposive sampling, and data were collected through in-depth, semi-structured interviews. The study included 40 participants between the ages of 19 to 36 ($M=27,19$; $SD=4,77$) who identified as nonbinary. *Results:* The analysis of the data revealed three main themes that capture the experiences of nonbinary young adults. The first theme was the representations of binary genders, which gathers the descriptions of male and female genders, the distance and the closeness they felt towards them regarding their identity. The second theme was the relationship between social dysphoria and body dysphoria, in which we analyze the complex intertwining of body, identity, gender and society, in depicting the unique form of gender dysphoria perceived by nonbinary individuals. The third theme was nonbinary as gender integration, which collects the meanings attributed to gender aspects in the light of the newly developed nonbinary identity. Participants reported feeling a sense of comfort and euphoria when they developed new understanding of their perceptions regarding gender. *Discussion:* The experiences of nonbinary young adults living in a binary world are complex and multifaceted. The findings of this study, delving deeply in the personal meanings attributed to gender, highlight the unique challenges and possibilities faced by this group. Implications for clinical care and practice are discussed.



Sexual and Romantic Relationships Beyond Binaries: A qualitative study on Experiences of Intimacies of Italian Nonbinary People

Bianca Di Giannantonio¹, Serena Degli Angeli¹, Karine Milanese¹, Guido Giovanardi¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Nonbinary people (i.e., individuals who define their gender as neither male nor female), as a marginalized population, may experience specific challenges and advantages in romantic and sexual relationships. Few studies have explored this issue in depth. The goal of this work is to enrich research in this field by highlighting what are the common positive and negative experiences in the intimate lives of nonbinary individuals, and the effects on their mental health. *Methods:* Forty nonbinary participants whose age ranged from 19 to 36 years ($M=27,19$; $SD=4,77$) were administered a semi-structured interview created by the research team. Questions were asked to understand participants' feelings and personal experiences about interpersonal intimate relational and sexual dynamics. Several related aspects have been explored, such as: the relationship with body image; experience of desire, arousal and pleasure; feelings of comfort (or discomfort) elicited by sexual fantasies and practices. *Results:* Using a Thematic Analysis method we identified three themes: 1) Validation and support as resources that facilitate gender affirmation and expression 2) Intimacy satisfaction promoted by mutual recognition, and subversion of traditional gendered sexual scripts 3) Microaggressions and traumatic events that inhibit and freeze gender affirmation and expression. *Discussion:* For nonbinary people negative experiences of stigma, discrimination and expectations of rejection, can have a significant impact on self-image, feelings of body and social dysphoria, and perceived sense of safety with others. On the other hand, sexual and romantic relationships that are experienced as supportive can be protective factors, meaningfully affecting their overall psychological well-being. In light of the emerging data, it is important in clinical practice to be aware of the specific challenges faced by nonbinary people in the interpersonal contexts, and the effects of marginalization stressors. It is key, therefore, that clinicians promote in patients the importance of pursuing, establishing, and preserving a sense of safety in romantic and sexual relationships.



Factors related to parenthood desire in Italian transgender and gender diverse persons: A qualitative study

Marina Miscioscia¹, Veronica Della Casa², Andrea Garolla³, Anna Malmquist⁴

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Department of General Psychology, University of Padua, Padua, Italy

³ Department of Medicine, Unit of Andrology and Reproductive Medicine, University of Padua, Padua, Italy

⁴ Department of Behavioural Sciences and Learning, Linköping University, Linköping, Sweden

Abstract

Introduction: Research has shown that several transgender and gender diverse (TGD) individuals desire to have children, either genetically related or adopted. Italian individuals whose identities deconstruct traditional gender- and sexuality-related norms can face substantial difficulties and challenges in their transition to parenthood. In a cis-heteronormative cultural and social context gender affirmation path has been frequently considered incompatible with parenthood. The aim of this project is to investigate, from a qualitative point of view, the factors that hindering or support the decision-making process of Italian TGD people towards the possibility of becoming parents. *Methods:* A semi-structured interview with 16 questions was administered to investigate the desire and intentions of parenthood in TGD people living in Italy. The study was based on a sample of 19 participants aged 20 to 44 years. The data that emerged have been processed using Thematic Analysis. *Results:* Although the possibility of cryopreservation is becoming more and more widely known, most participants would have liked to become parents through adoption. However, few had adequate information about the procedures and the real possibilities of engaging in a path to parenthood. The desire for biological parenthood seems prevalent in trans women and nonbinary people than trans men. The choice to remain child-free seems to be associated with trans oppression and victimization experiences that are feared to affect the child's well-being. *Discussion:* The timing in the proposal to cryopreserve remains a crucial element, as does finding well-trained professionals willing to embrace and support TGD persons in their gender-affirming path. Finally, the cis-heteronormative social and political context appears to be the biggest challenge for those individuals who desire or intend to take the path to parenthood in Italy.



Nonbinary individuals' sexuality

*Annalisa Anzani*¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

The emergence of non-binary identities challenges traditional notions of gender and sexuality. Non-binary individuals, who identify outside of the binary, are a diverse group with unique experiences and needs. The aim of this presentation is to provide an overview of the existing literature on non-binary individuals' sexuality and to discuss clinical considerations for working with this population. Firstly, it is important to acknowledge that non-binary individuals face significant barriers to accessing affirming and comprehensive sexual health care. This is due to a lack of understanding and awareness of non-binary identities and their unique sexual health needs. Research indicates that non-binary individuals are less likely to have received comprehensive sex education and are less likely to have had their sexual health needs met compared to their cisgender counterparts. Moreover, non-binary individuals may face stigma and discrimination when seeking health care, which can further exacerbate existing health disparities. In terms of sexual behavior, non-binary individuals exhibit a range of patterns and preferences that may challenge traditional binary assumptions. Non-binary individuals may experience gender dysphoria in relation to their genitals or secondary sex characteristics, which can impact their sexual expression and desire. Moreover, non-binary individuals may have diverse preferences for sexual partners and activities, which may not align with the gender binary. Clinically, working with non-binary individuals requires a gender-affirmative approach that recognizes and respects their unique experiences and identities. This includes using inclusive language that reflects the diversity of gender identities and expressions, such as neutral pronouns, rather than binary pronouns. Moreover, clinicians should prioritize informed consent when working with non-binary individuals, ensuring that they have access to comprehensive sexual health care that is tailored to their individual needs and preferences. Finally, it is important to recognize that non-binary identities intersect with other social identities, such as race, ethnicity, and socioeconomic status, which can impact their experiences of sexuality and sexual health. Clinicians must be aware of the ways in which these intersecting identities can shape non-binary individuals' experiences and work to provide culturally responsive care that addresses these unique needs. In conclusion, non-binary individuals' sexuality challenges traditional binary assumptions and requires a gender-affirmative approach that prioritizes informed consent and comprehensive sexual health care. Clinicians must be



aware of the barriers to accessing affirming sexual health care that non-binary individuals face and work to address these disparities. By centering the experiences and needs of non-binary individuals, clinicians can provide effective and culturally responsive care that promotes sexual health and well-being for all.



**PSYCHOLOGICAL ADJUSTMENT TO CHRONIC DISEASE: EMOTIONAL AND
BEHAVIORAL FACTORS FOR UNBALANCED NEED IN CHILDREN AND ADULT
PATIENTS**

Proposer

*Jessica Ranieri*¹

¹ Department of Life, Health and Environmental Sciences, University of L'Aquila, L'Aquila, Italy

Discussant

*Elisa Delvecchio*¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

Chronic diseases are disorders that persist for an extended period and have the potential to induce profound changes in a person's life resulting in increased risk of negative effects on quality of life and wellbeing. Indeed, some chronic diseases need long-term pharmacological treatment and are often characterized by progressive physical disability and pain. Others can be medically controlled, but only at the cost of strict adherence to disease management regimens. Thus, chronic disease requires adjustment across multiple life domains, adjustment unfolds over time that it is a changing, but not always fluid, process, and there is marked heterogeneity across individuals and life stages in how they adjust to chronic illness. Psychological adjustment refers to the healthy rebalancing by patients to their new circumstances. Most patients eventually reach a state of good psychological adjustment, but for about 30% of patients, the adjustment phase is prolonged and sometimes unsuccessful. The aim of the proposal was to examine psychosocial processes that contribute to people's adjustment to chronic disease, with a focus on three disease clusters that constitute the major causes of death and disability in Europe: cancer, diabetes, and asthma diseases. The symposium was based on n. 4 studies and it tackled the urgent topics of a) adjustment to diabetes and cancer in childhood, and predictors of parents' adjustment; b) successful performance of adaptive tasks (emotional regulation, self-care behavior) in young women with early-stage breast cancer; c) satisfaction and wellbeing in various life domains (health related quality of life) in adulthood severe asthma; d) and psychological intervention efficacy on young breast cancer women



undergoing surgery. Understanding the psychological, emotional and behavioral factors by which children and adult patients adjust to chronic diseases may offer important insights to enhance in healthcare the efficacy of psychological assessment and interventions with patients and loved ones that facilitate adjustment to a long-term condition.



How do children and their parents adjust to a diagnosis of cancer or type 1 diabetes in childhood?

An exploration of sleep and psychological characteristics during the pandemic

*Silvia Spaggiari*¹, *Giacomo Gaiga*¹, *Virginia Forlini*¹, *Maria Montanaro*², *Silvana Zaffani*³, *Valerio Cecinati*², *Claudio Maffei*³, *Nicola Cellini*⁴, *Daniela Di Riso*¹

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Complex Structure of Pediatrics and Pediatric Oncohematology “Nadia Toffa”, Central Hospital Santissima Annunziata, Taranto, Italy

³ Department of Surgical Sciences, Dentistry, Paediatrics and Gynaecology, University of Verona, Verona, Italy

⁴ Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: Receiving a diagnosis of type 1 diabetes (TD1) or cancer in childhood is a risky and painful event and involves children and their parents in the adaptation process to the disease. Children with chronic illnesses and their caregivers are at increased risk for sleep problems and worse psychological well-being. This study aimed to assess sleep patterns and psychological outcomes in two groups of children, respectively, with type 1 diabetes (T1D) and cancer, and their caregivers, compared to a control sample. In addition, we explored the associations between caregiver and child's sleep quality in the three groups. *Methods:* 56 children with TD1, 33 with cancer, and 61 healthy children, aged 7 to 15, and their caregivers were recruited. They completed an ad hoc survey and self-report questionnaires that evaluated sleep quality and psychological adjustment for children, sleep disruption, parenting stress, general well-being, and anxiety for parents. Data were collected between November 2020 and May 2021. *Results:* Children with cancer reported lower sleep quality compared to their peers. No differences in psychological well-being emerged between the groups, except for lower emotional symptoms in children with T1D compared to the control. As for caregivers, the cancer group reported worse sleep quality and greater anxiety compared to the other samples. No significant differences were observed in parenting stress or general health between the groups. Furthermore, greater sleep problems in children were associated with poorer caregivers' sleep quality in the whole sample and the T1D group. *Conclusions:* The present study contributes to shedding light on the sleep patterns and psychological outcomes of children with cancer and diabetes and their caregivers. A better understanding of the process of adjustment to the



disease for chronically ill children and their parents is fundamental to providing adequate care for these vulnerable populations. Furthermore, an illness-specific approach can better inform and guide practitioners in clinical practice.



Early-stage Breast Cancer, self-care and emotional regulation processes in young women: dealing with cancer as a chronic disease

Jessica Ranieri¹, Federica Guerra¹, Eleonora Cilli¹, Luciano Mutti^{2,3}, Dina Di Giacomo^{1,4}

¹ Department of Life, Health and Environmental Sciences, University of L'Aquila, L'Aquila, Italy

² Department of Biotechnological and Applied Clinical Sciences, Medical Oncology Division, San Salvatore Hospital, University of L'Aquila, L'Aquila, Italy

³ Medical Oncology Division, San Salvatore Hospital, L'Aquila, Italy

⁴ Postgraduate School in Clinical Psychology, University of L'Aquila, L'Aquila, Italy

Abstract

Introduction: Cancer can be a chronic illness and the diagnosis of breast cancer (BC) may impact many aspects of life with significant reductions in emotional functioning and well-being. The aim of the study was to understand predictive factors for disease management by evaluating psychological aspects, self-care processes and emotional regulation in young patients with early-stage BC. *Methods:* An observational study was conducted. Forty-eight BC patients, aged 18–55 y (M 45.2±sd 7.87) participated in the study. The sample was distributed in two groups by time from diagnosis (median 14,5 months): Early-term group and Long-term group. The psychological battery was administered during clinical follow-ups: DASS-21, DERS-20, SC-CII. *Results:* Significant differences on psychological dimensions emerged by time from diagnosis. Post-hoc analyses (Tukey test) showed that Long-term patients experienced lower confidence ($p = 0.002$), higher depression ($p = 0.014$) and lack of emotional clarity ($p = 0.004$). Moreover, significant differences emerged on emotional indexes by type of surgical intervention (mastectomy vs. lumpectomy). Post-hoc analyses (Tukey test) showed higher lack of emotional clarity ($p = 0.024$) and stress ($p = 0.002$) in patients who underwent mastectomy. Controlling for time from diagnosis, negative correlations emerged between confidence and depression ($p = 0.020$, $r = -0.382$) and stress ($p = 0.033$, $r = -0.351$) and lack of emotional clarity ($p = 0.040$, $r = -0.339$), also positive correlations emerged between emotion dysregulation (goals, clarity, impulse) and psychological distress indexes. Moreover, linear regression analysis showed the predictive effect of time from diagnosis on confidence. Finally, mediation analysis showed the significant effect of lack of emotional clarity on confidence ($\beta = -0.192$; $SE = 1.304$; $p < 0.021$; $CI = -5.56 - -0.45$). This evidence suggests that the relationship between time from diagnosis and confidence is mediated by emotional dysregulation indexes. *Conclusions:* Our findings highlighted that



young BC patients were emotionally challenged by ongoing clinical path and underscored the need to provide tailored psychological support to those who are in the survivorship to improve the emotional regulation process and enhance women's well-being.



Management of breast cancer: Psychological interventions in women with breast cancer and related psychological and psychosocial outcomes

Veronica Verri¹, Ilaria Pepe², Morena Bottalico¹, Chiara Abbatantuono², Maria Fara De Caro², Paolo Taurisano², Alessandro Taurino¹

¹ Department of Education, Psychology, Communication, University of Bari “Aldo Moro”, Bari, Italy

² Department of Biomedicine, Transactional and Neuroscience (DiBrain), University of Bari “Aldo Moro”, Bari, Italy

Abstract

Introduction: Breast cancer (BC) is one of the most common cancers in the female population. The subjective experience of the disease, especially when the therapeutic process involves undergoing surgery, has a major impact on the perceived quality of life. Psycho-oncological care is now recognized as an important part of the treatment pathway, and the present work aimed to investigate the effectiveness of psychological interventions in women with CM and related psychological and psychosocial outcomes. *Methods:* Seventy-two patients (Mean age=51; Std=9.66) with BC undergoing surgery were recruited. The clinical sample consisted of 33 patients (Mean age=49; StD=9.27) who received a ten-session supportive-expressive psychological intervention and 39 patients (Mean age=52; StD=9.99) who received no psychological treatment, forming the control sample. The psychological variables measured were distress (Distress Thermometer), state and trait anxiety (State-Trait Anxiety Inventory I-II), primary symptom dimensions (Symptom Checklist - Revised), and depression (Beck Depression Inventory - BDI). The Wilcoxon signed-rank test was used to assess the difference in BDI scores at T1 (pre-intervention) and T2 (post-intervention) between subjects with and without treatment. A repeated measures ANOVA was used to determine whether the change in symptomatology was the result of the interaction between treatment condition (between subjects) and time between T1 and T2 (within subjects), net of clinical and demographic covariates. *Results:* Analyses revealed a statistically significant interaction between the change in depressive symptomatology between T1 and T2 and the condition to which the two groups were exposed ($F=11.896$; $p<.05$). Although there was a mean decrease in depression in treated subjects at T2, this was not found to be statistically significant ($MT1=11.03$; $MT2=10.12$; $p>.05$); in contrast, there was a significant increase in depressive symptomatology in untreated subjects ($MT1=6.41$; $MT2=9.59$; $p<.05$). *Conclusion:* The present work highlights the effectiveness of psychological



interventions in women with BC and suggests the importance of initiating future studies to structure more homogeneous and specific intervention protocols.



Health related quality of life in patients with severe asthma

*Orlando Silvestro*¹, *Antonino Catalano*², *Luisa Ricciardi*², *Sebastiano Gangemi*², *Gabriella Martino*²

¹ Department of Health Sciences, Magna Græcia University of Catanzaro, Catanzaro, Italy

² Department of Clinical and Experimental Medicine, University of Messina, Messina, Italy

Abstract

Introduction: Among chronic illness, respiratory diseases are increasing worldwide. It is known severe asthma patients are those suffering from asthma exacerbations despite adherence to maximal optimized asthma treatment such as high dose inhalant corticosteroids and long-acting beta2 agonists. It is estimated that about 300 million people in the world are affected from asthma and among them, a percentage between 3-10% suffer from severe asthma. Anxiety and depression are reported to interfere with the perception of the disease and the patients' awareness of the need of a strict follow-up in order to adhere to the physicians' treatment plans. As psychopathological symptoms frequently occur in chronic medical conditions, our study aimed at exploring the relationship between psychological factors, asthma, hymenoptera allergy and their impact on health related quality of life (HR-QoL). *Methods:* A convenience sample of 78 outpatients (n=35, asthmatic; n=43 allergic) was consecutively recruited and assessed through: Hamilton Anxiety Rating Scale (HAM-A), Beck Depression Inventory II edition (BDI-II) and 36-Item Short Form Survey (SF-36). *Results:* Participants showed no difference in the mean age, while they showed a significant difference in age at diagnosis (26.11 ± 19 and 40.7 ± 18.3 years in asthmatic and allergic respectively). Depressive symptoms were prevalent in asthmatic patients [14 (9.7 to 18.2)] vs allergic patients [9.5 (6 to 16)], while anxious symptoms were not significantly different between the two groups. HR-QoL was significantly impaired in both groups, with a severer impact in asthmatic patients and was related to both depressive and anxious symptoms. *Discussion:* Our study suggests higher clinical psychological features exist in patients with severe asthma in comparison with allergic patients, leading to a lower HR-QoL. These results encourage further intervention studies to improve psychological health, disease management and HR-QoL, in such long duration diseases.



EMOTION REGULATION IN CLINICAL SETTINGS

Proposer

*Patrizia Velotti*¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Benedetto Farina*¹

¹ Department of Human Sciences, European University of Rome, Rome, Italy

Abstract

Emotion regulation has been an established focus of researchers' interest in recent years. Understanding how people regulate their emotions is a key question in studies on psychological functioning as well as in studies on psychological interventions. Emotion regulation is a multifaceted construct that concerns the modulation of emotional experiences and/or expressions (Gross, 1998), the intensity and/or duration of emotions (Thompson, 1993), and the regulation of associated behaviors (Dixon-Gordon et al., 2020). Accordingly, emotional dysregulation is often defined as the presence of too intense, labile, rigid, or prolonged patterns of emotional experience and expression that interfere with the most appropriate behavior to express in order to achieve goals or maintain an interpersonal relationship (Crowell et al., 2020; Beauchaine, 2015; Cole et al., 2004; Gratz & Roemer, 2004). The study of these processes has been fruitful in various fields (i.e., clinical and developmental psychology, psychopathology, etc.) proving to be a central factor in the comprehension of children and adults psychological functioning (Aldao et al., 2011; Garofalo et al., 2018, 2022). However, a quick look at the literature shows how the diverse lines of research have used distinct operationalizations and materials. The aim of this symposium is to facilitate the translation between these diverse areas of research on emotion regulation, presenting varied Italian contributions that explore the role of emotion regulation across different contexts. The contribution from the University of Cagliari investigates how ER acts in creative activities. The study from the University of Genova illustrates the central role of ER in addiction. The study from the University of



Rome explores the mind-body disconnection as an expression of emotion dysregulation, considering both the role of positive and negative emotions.



How artistic creative activities regulate our emotions? A pilot study

Stefania Cataudella¹, Alessandra Busonera¹, Stella Conte¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Abstract

Emotion regulation is increasingly considered a central component of mental health given that it drives individuals' abilities to manage their emotional experiences and adapt to daily life and has been shown to influence several mental health conditions (Karkou et al., 2022). Artistic creative activities have been shown to modulate emotions (rapidly changing reactions to events in the external or internal environment), influence our moods (more generalized, less intense states of feeling lasting longer periods), and affect our mental health (Fancourt et al., 2019). Our study examined the relationship between doing creative activities, emotion regulation (DERS, Gratz & Roemer, 2004; Giromini et al., 2012; ERS-ACA, Fancourt et al., 2019) and wellbeing (OQ45.2, Lambert et al., 1996; Chiappelli et al., 2008). 516 individuals completed questionnaires aimed to assess variables of interest: 358 of them practiced some artistic activity (G1, 30% Professionals vs 70% Amateurs), 158 did not practice any artistic activity (G2). G1 vs G2 comparisons on emotion dysregulation (DERS) returned a statistically significant difference in the dimensions of goals (G1<G2; $t=2.79$; $p=.006$) and clarity (G1<G2; $t=2.31$; $p=.021$). Professionals (G1a) vs Amateurs (G1b) comparisons returned a statistically significant difference in the dimensions of goals (DERS; G1a<G1b; $t=-2.91$; $p=.004$) and self-development strategies (ERS-ACA; G1a>G1b; $t=2.70$; $p=.007$). No significant differences emerge on the well-being scale (OQ45.2). Artistic creative activities appear to affect our emotion. These findings provide insight into which strategies are used when engaging in artistic creative activities. Future research directions should investigate how these strategies are influenced by demographic (e.g., age, gender, training in the artistic activity) and internal (e.g., personality) factors, as well as the influence of different artistic activities on emotion management. Further knowledge of this kind would be relevant to designing interventions aimed at improving emotional regulation (short-term) and mental health (long-term).



The mind-body disconnection as an expression of dysregulation: the role of positive and negative emotions

Serena Bruno¹, Camilla Tacchino¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Difficulties in emotions regulation is mutually involved in the development and maintenance of dissociative mechanisms. Especially, the inability to regulate severe emotions can result in experiencing a non-integrated state at both mental and bodily levels. However, the involvement of positive emotions dysregulation in mental and bodily aspects of dissociation needs further clarification. *Methods:* The current study involved 2.528 participants from the general population (35.1% males, mean age 30.42; SD = 13.30) assessed on mental dissociation with Dissociative Experiences Scale (DES), on bodily dissociation with Scale of Body Connection (SBC), and on the aspect related to emotion dysregulation with Difficulties in Emotion Regulation Scale (DERS) and Difficulties in Emotion Regulation Scale Positive (DERS-P). *Results:* Results of correlation analyses showed significant associations between dysregulation of positive and negative emotions and mental and bodily dissociation. Multivariate linear regression analyses showed the value of emotion dysregulation in predicting mental and bodily dissociative aspects, marking the differences between the mechanisms of positive and negative emotions dysregulation. *Discussion:* Results show a significant relation between emotions dysregulation and both mental and bodily dissociation. Specifically, the value of negative emotions dysregulation in predicting dissociation in its bodily aspects was demonstrated. The role played by dysregulation of positive emotions in predicting bodily dissociation and facets of detachment was also highlighted. The investigation of difficulties in regulating positive emotions and their involvement in dissociative mechanisms is of considerable clinical relevance. These results suggest that in the occurrence of dissociative symptomatology, clinical comprehension can be directed toward how to the individual regulates both negative and positive emotions. The implication of the dysregulation of positive emotions represents innovative theoretical and empirical insights that make it possible to explain the dynamics underlying states of manic arousal and the activation of dissociative states that attempt to be resolved by acts of self-injury and offers an original contribution to the study of psychopathological conditions in which dissociative mechanisms are involved.



Social media misuse, emotion dysregulation, clarity of self-concept and negative affect: an ecological momentary study

Guyonne Rogier¹, Carmen Carcione¹, Cecilia Serena Pace¹

¹ Department of Educational Sciences, University of Genoa, Genoa, Italy

Abstract

Introduction: Social media addiction is a growing mental health concern, especially among youths. Some key explaining factors have been identified including negative affect, difficulties in emotion regulation and poor clarity of self-concept (Berry et al., 2018; Yang et al., 2020, 2022). However, data are mostly cross-sectional, rarely estimate the interaction between variables and poorly discriminate across types of social networks and online behaviors. *Methods:* A sample of 33 young adults (Mage= 22.42 years; SD= 2.40; 87.9% females) fulfilled a brief questionnaire, four times by day per five days, assessing negative affect, poor clarity of self-concept and difficulties in emotion regulation as well as symptoms of social media addiction and frequency of specific online behaviors. Each day, smartphone statistics on time spent on Instagram, Facebook and TikTok were registered. Multilevel mixed effects models were computed. *Results:* Analyses of ecological momentary assessment data evidenced that intraday changes in negative affect, emotion dysregulation levels and clarity of self-concept as well as the interaction between negative affect and emotion dysregulation levels significantly predict changes in levels of social media addiction symptoms. Also, publishing contents on social networks was predicted by negative affect whereas glancing through others' profiles was predicted by both negative affect and emotion dysregulation levels. Lastly, daily time spent on TikTok and Instagram was predicted by daily changes in clarity of self-concept and emotion dysregulation levels whereas no significant predictor of time spent on Facebook was identified. *Conclusions:* Both emotion dysregulation and poor clarity of self-concept confirm their roles in social media addiction. The nuanced results obtained in this study suggests the need to adopt an articulated perspective on the topic, discriminating between proximal and distal roles of the predictive variables, identifying their interaction, and discriminating between the type of social networks and the activities on these social networks.



Emotion dysregulation and emotional endophenotypes: an integrative approach

Enrico Vitolo¹, Lorenzo Brienza¹, Alessandro Zennaro¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

The Primary Affective Systems (PAS) represent the emotional roots of personality and are organized as motivational pushes, defining the so-called "emotional endophenotypes," which are individual characterizations that unfold at different levels of PAS' activity. The PAS thus provide a bridge between the phenotypic representations of particular behaviors and their biological/genetic bases. In other words, the human personality could be conceptualized as the product of the interplay between individual differences in activity of affective/motivational Systems and the complex emotional and cognitive higher-order abilities. Emotion regulation processes are one of the main higher-order mechanisms that could affect the unfolding and the characterization of emotional endophenotypes. The present study aims to investigate the relationship between emotion dysregulation (ED) processes and those affective characterizations derived from the activity of the PAS, i.e. the emotional endophenotypes. One-hundred thirty-eight non-clinical subjects were recruited. Expression of emotional endophenotypes was investigated through the ANPS 2.4, whereas ED was detected with the DERS-16. Moreover, the ERQ was adopted to assess the use of specific emotion regulation strategies, and the DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure was used to assess psychopathological risk factors. Results showed significant associations between ED and the expression of specific PAS, namely PLAY, SADNESS, FEAR, and ANGER. Moreover, using a specific adaptive emotion regulation strategy, named "reappraisal", was positively associated to the expression of the SEEK System, and negatively related to the expression of the FEAR System. Last, SADNESS, FEAR, and ANGER Systems were associated to specific psychopathological development risk factors, namely Depression, Anger, Anxiety and Repetitive Thoughts and Behaviors. A linear regression model had shown how a given emotional endophenotype characterized by concomitant levels of high FEAR and SADNESS and low CARE could explain the 38% of variance involved in the development of ED processes. Taken together, these results outline how the expression of specific emotional endophenotypes is associated with the development of ED, which is a key transdiagnostic factor for psychopathological risk, particularly for anxious and depressive disorders.



Saturday, 16th September 2023

MINI TALK SESSION 3

Discussant

Nicolino Rossi

University of Bologna



Promoting primary schoolchildren's mental health through a 24-session mindfulness-based program: qualitative analysis of children subjective experiences and their association with personality traits

Alessio Matiz¹, Matteo Cimenti¹, Cristiano Crescentini¹

¹ DILL, University of Udine, Udine, Italy

Abstract

Mindfulness-based programs (MBPs) currently represent a promising field of intervention for mental health promotion in school settings. Little is known about young participants' subjective experience of MBPs and which participants' personality characteristics can influence MBPs' acceptability. In this study, 158 Italian children in grades 3 to 5 (47.5% F) participated in a 24-session junior Mindfulness-Oriented Meditation (j-MOM) program, proposed to children through the technique of storytelling and delivered by the pupils' school teachers, who had been trained in the program for about 8 months. Children's personality traits were assessed at pre-intervention with the junior Temperament and Character Inventory (j-TCI), while their subjective experiences and perception of the program were investigated at post-intervention using a survey containing open-ended and closed-ended questions. Most of the children liked the intervention (74.5%: "a lot" or "extremely"), found it useful (84.7%: "moderately", "a lot", or "extremely"), engaged in the program (94.3%: "moderately", "a lot", "extremely"), and did not find it difficult (64.3%: "not at all" or "a little" difficult); 57.5% of the children generalized in daily life the use of the mindfulness techniques and 93% of the children declared they would recommend the program to their friends and parents. When asked what they learned during the program, children gave answers that were classified in 5 main themes: "help for difficulties", "calm, relax, tranquility", "resilience, positiveness, personal growth", "self-exploration, interoception", and "attention, concentration and here and now". Higher ratings in liking the program, finding it useful and engaging in it were related to higher j-TCI scores in persistence, cooperativeness and self-transcendence, while higher ratings in finding the program difficult were related to higher j-TCI scores in harm avoidance. Children who generalized the use of mindfulness to their daily lives had higher j-TCI scores in persistence and self-transcendence than children who did not. In conclusion, the MOM program was generally well accepted by children, who reported personal gains in various areas related to psychological well-being. The study also suggests which children's personality traits should be considered when proposing a MBP in order to improve its acceptability and utility.



What are the needs of university of Trento students with specific learning disorders? An exploratory study

Sara Monaro¹, Anna Peripoli¹, Anesa Bahtic¹, Carolina Coco¹

¹ Department of Psychology and Cognitive Sciences, University of Trento, Trento, Italy

Abstract

The University of Trento's Specific Learning Disorders Desk (SLDD), a collaboration between the Psychological Counselling Service and the Student Community Inclusion Service, provides support for students diagnosed with Specific Learning Disorders (SLD) in facing university studies and determining the dispensatory measures and compensatory tools for taking exams. Following the identification of some needs during individual sessions with students at the SLDD, four focus group meetings were conducted to explore the needs and challenges faced by these students at the university. The sample consists of 11 students with SLD from different departments and degree courses at the University of Trento; all of them consistently participated in these meetings. The preliminary investigation points out that, despite being adults, these meetings were among the first opportunities for them to compare and share experiences with other students with SLD. Many participants found validation in learning that others faced similar difficulties, allowing them to relate to their peers' experiences. The meetings also revealed limited awareness about their diagnosis and associated characteristics. Moreover, there was a general difficulty in managing academic learning, a need for support in adapting previously used but no longer functional study strategies and in setting priorities and study objectives. Concerning the use of dispensatory measures and compensatory tools, two contrasting feelings emerged: feeling unfairly advantaged compared to peers, but also struggling to access fair support due to limited awareness of Specific Learning Disorders within the university environment. Based on these results, it was decided to continue the group meetings with two objectives: developing new study strategies and serving as a promoter group for initiatives and solutions addressing the challenges faced by the entire SLD student community.



**Train Youngsters' Capability to Halt and Eliminate Aggressive and Violent Relationships:
theory and design of the TYCHE-AVIR project**

Annarosa Cipriano¹, Rosanna Napolano¹, Margherita Santamato², Anna Sorrentino²

¹ Observatory on Eating Disorders, Department of Psychology, University of Campania "Luigi Vanvitelli", Viale Ellittico, 31 – 81100 – Caserta, Italy

² Department of Psychology, University of Campania "Luigi Vanvitelli", 81100 Caserta, Italy

Abstract

Building significant relationships is one of the most important developmental tasks of adolescence. Supportive and high-quality relationships have consistently linked to positive development outcomes and mental health. However, adolescents are at greater risk of engaging in aggressive and violent relationships. (Cyber)bullying and Teen Dating Violence (TDV) are serious and prevalent issues among adolescents. While (cyber)bullying refers to an aggressive and intentional behavior repeated over time characterized by an imbalance of power between the perpetrator and the victim, TDV refers to the perpetration of physical/emotional/sexual abuse, stalking, or verbal threats in a dating relationship among teens. Youngsters' involvement in peer aggression and violent behaviors have been found to be the most predictive risk factors for deviant and delinquent behaviors and adverse psychological outcomes (e.g., anxiety, depression, substance abuse, suicidal behavior). Therefore, prevention and early intervention are social and public health priorities. To address such issue, we aim to Train Youngsters' Capability to Halt and Eliminate Aggressive and Violent Relationships, implementing psychoeducational modules targeting the developmental, clinical, and social dimensions associated with teens' violent behaviors. The TYCHE-AVIR project is grounded on the Ecological System Theory and the Threat Assessment Approach, combined with the tenets of the psychodynamic tradition. Thus, the project addresses threatening behaviors and the ecological levels in which these behaviors operate and interact with each other, also paying attention to mechanisms and processes underlying the aggressive behaviors. Stemming from this assumption, a randomized controlled trial, with a pre-post 3-month follow-up design, will be conducted involving middle and high schools. Teachers, parents and students of the Experimental Group (EG) will benefit of the intervention. The program has two main components: an online training-course on (cyber)bullying and TDV for significant adults and in-class activities with students. The program is expected to effectively address risk factors for violent behaviors and encourage positive relationships and



well-being among youth. It is expected that EG-students would report a significant decrease in violent behaviors and increased personal and relational well-being.



University Students that Need Help: A Qualitative Text Analysis to Discover Them

Antonio Cosenza¹, Veronica Raspa¹, Chiara Biscarini¹, Giulia Moretti¹, Chiara Napoli¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

The interest in mental health with the opening of new university psychological services that give hearing and instance to the need for psychological support in recent years is finding increasing success. This study aims to examine the characteristics of users of university psychological services through a multi-method approach. A sample of cisgender university students (N = 207, 72.5% assigned female at birth; mean age = 22.45 years, SD = 2.86) who attended the Focus-PSI Counseling Service of the University of Perugia from January 2022 to April 2023 were asked to complete, during the intake session, the Personality Assessment Inventory (PAI) and Four open questions: how they describe themselves, how they feel others describe them, what their motivations for requesting the service are, and finally what their expectations of the service are. These open questions were content analyzed, using T-LAB text analysis software, to extrapolate the occurrences and co-occurrences, and analyze that in relation to groups of keywords (Word Associations). The results show that Anxiety is a deeply recurring theme, being a relevant keyword in the reason for requesting the service and being the highest PAI sub-scale (58.94% above the first clinic threshold). Relevant keywords to the motivations were also Study, Difficulty. Despite the anxiety, relevant keywords to describe themselves result in the terms: Sunny, followed by Empathetic, and Stubborn. Relevant keywords to be described result in Sunny, Sympathetic, and Helpful. Co-occurrences as a whole emphasize adjectives of a positive rather than negative nature and finally regarding expectations, relevant keywords show seeking help, being understood, and being able to cope with situations. These results should allow for a greater understanding of those who seek university services thus helping especially at the assessment stage.



Italian adaptation and validation of FOWARS: a self-report instrument to assess the fear of war in Young Italian Adults

Giorgio Maria Regnoli¹, Domenico Vistocco², Gioia Tiano¹, Barbara De Rosa¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

² Department of Political Science, University of Naples Federico II, Naples, Italy

Abstract

The Russia-Ukraine war, which began more than a year ago and is still ongoing, is generating tangible transformations in the economy and politics of Europe and around the world. As of now, there are very few tools aiming at investigating the psychological impact of war in territories which, though geographically distant from the war zone, are constantly exposed to its economic, political and socio psychological outcomes. Italy is one such example. The present study describes the Italian adaptation and validation of the Fear of War Scale (FOWARS), i.e., a 13-item Likert scale built by a Romanian research team (Kalcza-Janosi et al., 2022) aiming to explore the fear of war. For the Italian adaptation and valuation of its psychometrics properties, a sample of 150 young Italian adults (aged 18-35, $M = 21.7$; $SD = 2.2$) mainly coming from the Campania region (86%) has been collected. Exploratory Factor Analysis, carried out with PCA, confirmed the bifactorial structure of the scale accounting for 65% of the total variance, and detected two dimensions, i.e., the “Physiological dimension of fear” and the “Experiential dimension of fear”. Results of Confirmatory Factor Analysis show adequate goodness of fit scores ($CFI = .95$; $GFI = .90$; $NFI = .92$; $CMIN/DF = 2.03$; $RMSEA = .08$). The final version of the scale, consisting of 12 items, shows good internal consistency (Cronbach’s $\alpha = .91$; McDonald’s $\omega = .92$). Further correlation analyses with the Worry Domains Questionnaire (WDQ), the Depression Anxiety and Stress Scale (DASS-21) and the Satisfaction with life scale (SWLS) show a good convergent and discriminant validity of the Italian adaptation of FOWARS. Moreover, results from ANOVA show significant differences between men and women, the latter showing higher values of fear of war. However, occupational status and education were not statistically significant. In conclusion, the Italian version of FOWARS can be considered a reliable and valid instrument to assess the fear of war in young Italians and to measure the psychological impact of war in countries which are not involved directly.



A Content Analysis on Emerging Slang in Self-Harm Peer-Support Forums

*Vinay Jagdish Sukbija*¹, *Rachele Del Guerra*¹, *Elisa Mancinelli*^{1,2}

¹ Department of Developmental and Socialization Psychology, University of Padua, Padua, Italy

² Digital Health Lab, Centre for Digital Health and Wellbeing, Fondazione Bruno Kessler, Povo, Trento, Italy

Abstract

Introduction: Language is an integral part of our daily conversations, shaping thoughts, emotions, and behaviour. Slang forms an integral part of language and is a highly colloquial and informal vocabulary that often has an in-group meaning different from its usual one. This characteristic makes it an integral marker of in-group solidarity for people with shared experiences, such as self-harming. Users in self-harm peer support groups increasingly use slang to communicate their self-harm experience. This study aimed to explore and capture the usage of such slang in self-harm peer support groups to investigate this sharing of experience. *Methods:* Slang terms were analysed from two self-harm peer support groups on Reddit: /r/SelfHarm and /r/MadeOfStyrofoam. A list of the most frequently used slang terms was compiled based on two popular posts explaining the slang words. The PRAW Reddit API was used to conduct a preliminary analysis of the most frequently used slang terms from this list and then to source user posts containing the identified slang words. The study excluded posts that did not contain the slang word or used the word in its literal meaning. Conventional content analysis was used to extract codes from the data and identify key concepts and themes. The codes were then grouped into categories and domains for further analysis. *Results:* 239 and 241 posts were analysed on /r/SelfHarm and /r/MadeOfStyrofoam, respectively. Differences in the words usage between the groups were found, reflecting the groups purposes. Instead, the most common domains ranged from discussing medical care for wounds, seeking support, inquiring about the wound type, and themes of relapse and abstinence. *Discussion and Conclusion:* This study compiled a list of the most prevalent slang words used within these peer support groups and the key concepts that they portray. The domains analysed provide a foundation for further research on the role of slang in self-harm peer support groups. Clinicians and healthcare professionals can also utilise detailed knowledge about these slang words to penetrate the in-group culture and make meaning of their clients' self-harming experiences. Thus, this study highlights the importance of understanding the role of slang in shaping the perspectives of individuals with shared experiences.



e-ESPRIMO: An e-health biopsychosocial intervention for young adults with Multiple Sclerosis and medium/high disability. Co-creation phase

Giorgia Giusto¹, Riccardo Orlandi¹, Angelica Filosa¹, Alberto Gajofatto¹, Maria Angela Mazzi¹

¹ Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

Abstract

Introduction: The diagnosis of Multiple Sclerosis (MS) usually occurs in young adulthood with a strong impact on patients' personal development and health-related quality of life (HRQoL). Despite the evidence on the effectiveness of participatory research in improving HRQoL, experiences with co-creation approaches in MS are still limited, especially for patients with moderate to severe MS. Starting from the promising results obtained from the ESPRIMO project, a biopsychosocial co-created intervention for Young adults with Multiple Sclerosis (YawMS), we aimed to design, together with several MS experts, an e-Health biopsychosocial intervention in order to assess the needs of YawMS with medium to high disability, condition that can be considered as an obstacle for the implementation of an integrated intervention. The feasibility will later be tested in a pilot sample. *Methods:* The first phase of the co-creation included an updated review of the literature on e-health solutions and physical and psychological interventions for chronically ill patients with medium/high disability. A phase of assessment of YawMS' preferences regarding e-Health solutions and adaptation of the already developed ESPRIMO in-person intervention through an online survey (31 respondents to date) along with focus groups (10 participants to date) are currently ongoing. Both are targeted at people with MS, with moderate to high disability and aged between 18 and 55. Furthermore, assessments of other experts' opinions (i.e., healthcare providers, e-health specialists) on e-health solutions through focus groups are being implemented (15 participants to date). Mockups will be developed by the research group and discussed with an Advisory Board, helping to further optimize all e-ESPRIMO features before the actual pilot feasibility study. *Results:* To date, 35 patients have participated in the survey. Furthermore, 20 patients and 20 health care providers attended in the respective focus groups. The material was recorded and summarized to derive the main thematic areas of the intervention and will serve in the adaptation of the ESPRIMO intervention. *Discussion:* Assessing the needs and preferences of YawMS with moderate to high disability regarding e-Health solutions to co-create an e-health intervention will help increasing adherence and effectively improve patients' HRQoL.



Emotions on stage: a pilot study on the effects of the use of theatrical techniques for emotional enhancement

Marta Tremolada^{1,2}, Maria Concetta Dente¹, Valentina Mastrandrea², Sabrina Bonichini¹, Alessandra Biffi²

¹ Department of Development and Social Psychology, University of Padua, Padua, Italy

² Pediatric Hematology, Oncology and Stem Cell Transplant Center, Department of Women and Child's Health, University of Padua, Padua, Italy

Abstract

To date, there are few studies in which structured educational interventions are presented with the use of theatrical techniques. The theater is seen as an intervention tool, as it contains both the game and the educational component (Bonato, 2016; Levy, 2005). The present study aims to investigate the effectiveness of the use of some theatrical techniques, such as empathy, in improving emotional recognition skills in children with oncohaematological diseases. The methodology is both qualitative and quantitative and the research design is longitudinal. The participants involved in this study, after the parental informed consent signature, were 10 children with an average age of 9 years (SD =2.06; range: 7-13), 6 males and 4 females with various oncohaematological diseases. Nepsy-II social recognition tasks were adopted before and after the intervention, both with self and parental approval reports and mood questionnaires. Each intervention meeting was structured along four phases: vision, recognition, discussion and acting. A t test was run to understand the possible changes in social recognition T scores pre and post intervention. The test resulted significant ($t(9) = -1.84$; $p = 0.04$) with the pre-intervention scores ($M = 8.40$; $SD = 3.7$) lower than the post-intervention ones ($M = 10.40$; $SD = 2.1$) The declared delight was reported in all the total 40 intervention meetings. The children's declared a bad mood decrease before and after the meetings ($t(9) = 3.28$; $p = 0.005$) and an increase of good mood ($t(9) = -2.37$; $p = 0.02$). The results are promising, even if more patients should be involved in the next studies on this topic and the setting should be more stable. The strengths could be identified in the usefulness of this typology of emotional enhancement in patients that could have problems in verbalizing their emotional states.



The work experience of LG individuals: a ten-year systematic review

Marina Lacatena¹, Ferdinando Ramaglia¹, Massimiliano Sommatico¹

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

Despite the evolution of legal rights worldwide, sexual minorities have been an understudied demographic group, especially in the workplace. Furthermore, only few studies have examined whether LG employees' job-related well-being also suffers due to their sexual orientation. The aim of this study is thus to review the available findings of the last ten years on the work experience of LG individuals. To that end, we explored the EBSCOhost (including PsycInfo, PsycArticles, and Psychology and Behavioral Sciences Collection), EMBASE, Scopus, and Web of Science electronic databases. The search strategy involved the crosschecking of keywords that were selected based on the Medical Subjects Headings and Boolean logic operators. The following keywords were used in an [Abstract] search: 'lgb*' OR 'gay*' OR 'lesbian*' OR 'homosexual*' OR 'sexual minorit*', AND 'employee*' OR 'worker*' OR 'personnel' OR 'staff' AND 'workplace' OR 'work' OR 'job' OR 'employment' OR 'occupation' OR 'career'. Specific inclusion criteria for selection were the following: publication date between January 1st, 2013, and March 1st, 2023, original research articles published in English, and studies that reported qualitative or quantitative data. Specific exclusion criteria were: books, book chapters, reviews, abstracts, letters, editorials, and commentaries. After the removal of duplicates, not relevant records, and records included in the reported exclusion criteria, one hundred and ninety-four papers were thus included in this systematic research literature review on the work experience of LG individuals. Results showed the following: LG workers are found to be twice as likely to be victims of acts of stigma, bullying, and harassment as heterosexual coworkers; workplaces that are more attentive to LG issues have initiated actions that result in greater legal protections, a better work climate and increased opportunities for professional advancement; providing support for inclusion, providing benefits to partners of LG workers and instituting practices that improve the supportive climate through diversity training emerge as factors that moderate the negative effects of stigma on LG workers. Taken together, the results provide empirical evidence of the job-related experience and well-being of sexual minorities.



Use of Whooley questions and GAD-2 tools in screening for perinatal mental health: current expert considerations

Pietro Grussu¹, Rosa Maria Quatraro²

¹ Consultorio Familiare, South Padua District, Azienda ULSS 6 Euganea, Veneto Region, National Health Service, Padua, Italy

² Maternità in difficoltà®, Padova and Vicenza, Italy

Abstract

This scoping review looks at current expert considerations in scientific literature on the use of Whooley questions and GAD-2 tools in screening for women's perinatal mental health. Literature in English published prior to April 2023 was included. Searches in PsycINFO, PubMed, Scopus, Scilit, and Google Scholar used the terms: Whooley questions and GAD-2. A total of 12 articles on perinatal studies that used both of these tools were included. The identified studies confirm that Whooley questions and GAD-2 are both used in clinical research contexts and in the early identification of women at risk of perinatal affective disorders in territorial and hospital settings. Thanks to their simplicity and immediacy, these tools are easy to administer and compile. They can be administered by health operators and researchers of different professional profiles. Future studies should deepen and examine the instruments' sensitivity, specificity, positive and negative predictive values, and positive and negative likelihood ratio. In particular, the reliability of these tools should be verified in their concurrent use during pregnancy and after childbirth, as well as in various national contexts. Finally, it is necessary to verify the reliability of the tools when self-reported and when directly formulated by health professionals or researchers.



Assisted Reproduction Technology in Spain and Italy: a research on emerging cultures through newspapers

Marta Anna Stella Vizziini¹, Silvia Monaco¹, Loredana Tetecher¹, Vincenzo Ambriola¹, Claudia Cappadonna¹, Michela Di Trani¹, Rachele Mariani¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Assisted Reproduction Technology (ART) is the set of techniques used to help conceive in case of infertility. The ART path is strongly characterized by cultural determinants defined by each country of interest. Italy and Spain have different legislations about ART, with greater access to ART techniques in Spain. The present study therefore has the aim of exploring the cultures of ART in Italy and Spain, starting from the contents related to this theme published in the main Italian and Spanish newspapers. We want to explore the representations on the subject by comparing them by country. *Methods:* About 2,000 articles extracted from “La Repubblica” and “Il Corriere della Sera” for Italy and from “El Mundo” and “El Pais” for Spain were used as a database, selected using the keywords “Fecondazione assistita” and “Reproducción asistida”. The corpus was analyzed using the Emotional Text Mining methodology, which allows to identify the cultural representations regarding the topic in question, understood as socially shared unconscious elaborations. *Results:* Factor analysis highlighted strong differences between the representations and feelings connected to ART in the two countries. Spanish culture refers to ART as the possibility to achieve the desire of parenthood despite the relational status of those requesting it. Instead Italian culture takes advantage of ART in its technical potential as a “medical procedure” but it’s limited in its component of “moral judgment”. The representation of family turns out to be idealized as a “family myth”. *Discussion:* ART’s cultures seem to be really different depending on the country of interest. Cultures and legislations are strongly linked in both contexts. We suggest that cultures influence the emotional way people experience the access and the assisted reproduction path. The implications of the results according to the plan of psychological intervention in the context of ART will be discussed.



Body signals in behavioral addiction: analysis of interoception in binge- watching behavior

Giuseppe Forte¹, Maria Casagrande¹, Renata Tambelli¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

The study aims to test the interoceptive hypothesis as a possible marker of behavioral addiction, considering specifically the Binge Watching (BW) phenomenon as an at-risk behavior. Seven-hundred sixty-six young adults completed an online survey, which assessed self-reported interoceptive sensitivity and Binge-Watching behavior via a self-report questionnaire. Respectively, the Multidimensional Assessment of Interoceptive Awareness (MAIA) and the Binge-Watching Addiction Questionnaire (BWAQ) were adopted. Pearson's linear correlation coefficient was calculated for the association between MAIA subscales and BWAQ global score. Global BWAQ reported a significant but low positive correlation with the Noticing ($r= 0.14$; $p= 0.001$), Emotional Awareness ($r= 0.13$; $p= 0.001$), and Body Listening ($r= 0.08$; $p= 0.001$) subscales of MAIA. Moreover, a negative linear correlation between the global BWAQ and the Not Worrying subscale was reported ($r= -0.15$; $p= 0.001$). Moreover, multiple linear regressions show predictor role of the MAIA subscales on BWAQ (1) Craving= $R^2= 0.04$; $F_{8,765}= 4.39$; $p= 0.001$; (2) Dependency= $R^2= 0.04$; $F_{8,765}= 4.05$; $p= 0.001$; (3) Anticipation: $R^2= 0.04$; $F_{8,765}= 4.09$; $p= 0.001$; (4) Avoidance: $R^2= 0.03$; $F_{8,765}= 3.22$; $p= 0.01$). Results suggest that people with a lower ability to identify, access, understand, and respond appropriately to the patterns of internal bodily signals (e.g., Interoceptive sensibility) enacted a binge-watching behavior unhealthier and more addiction-oriented. Despite the paucity of studies that analyze the association between interoception and behavioral addiction, our results seem encouraging to extend previous evidence also in a novel but at-risk behavioral phenomenon such as binge-watching.



The clinical and neurobiological signature of Mindfulness-based interventions in Anorexia Nervosa

Pierre Gilbert Rossini¹, Mattia Galigani², Francesca Garbarini²

¹ Embodied Minds Lab, Department of Clinical & Biological Sciences, University of Turin, Turin, Italy

² MANIBUS Laboratory, Psychology Department, University of Turin, Turin, Italy

Abstract

Anorexia Nervosa (AN) represents a persistent disorder of food intake that alters health and psychosocial aspects, leading to high burden of disease. Also, an alteration of body image and a hypercritical attitude are central in AN psychopathology. In response to this, the Mindfulness-Based Interventions (MBI's) have been proposed as therapeutical tools for AN, able to regulate interoceptive awareness and endorsing a compassionate attitude toward the Self. Recent studies reported the concurrent reduction of alpha and increase of beta, and theta Electroencephalography (EEG) bands in AN patients. Also, the Mindfulness-based interventions (MBI's) have been reported to enhance high-frequency EEG power (i.e., beta and gamma), even if its effect on low-frequency EEG power (i.e., theta and delta) remains to be clarified. Moreover, it has been claimed that MBI's research should aim to identify the neural and clinical responses in distinct mindfulness practices and pathological conditions. This study aims at evaluating the neural of two audio recorded MBI's (i.e., Self-Contact and Loving Kindness) in twenty AN patients, as compared to controls. The neurobiological evaluation included the recording of EEG before, during, and after the audio listening. The clinical assessment entailed self-administered psychological measures for emotional style, depression, anxiety, dissociation, and exposure traumatic events. A brief experience assessment has been implemented at the end of the intervention. Our results are expected to show how different MBI practices may elicit different neurobiological responses in individuals with AN, thus furthering our understanding of its psychopathology.



Association between social competence measured through systematic observation and constructs related to psychological well-being

Teresa Claudia Pennacchio¹, Martina Grazia Asselti¹, Marianna Russo¹, Federica Cuccia¹, Antonio Rampino¹, Alessandro Bertolino¹, Ignazio Grattagliano², Linda Antonella Antonucci¹

¹ Department of Translational Biomedicine and Neuroscienze "DiBraiN", University of Bari "Aldo Moro", Bari, Italy

² Department of Education Science, Psychology and Communication Science, University of Bari "Aldo Moro", Bari, Italy

Abstract

Introduction: Social competence is the ability to understand and use cognitive and affective information during social interactions. Social competence has been traditionally assessed through self-reported instruments. However, such assessments suffer from several self-rater-related biases. Our aim is to verify the potential association between social competence, measured by an observational coding technique, and constructs associated with psychological well-being (coping strategies, self-esteem, impulsivity, interpersonal reactivity, and clinical symptoms) in adolescents and young adults. We expect that higher social competence will be associated with higher levels of constructs favoring psychological well-being (e.g., self-esteem, interpersonal reactivity), and with lower levels of constructs hindering positive psychological states (e.g. symptoms and impulsivity). *Methods:* One-hundred-and-forty-three participants (all females; age: 19.40 ± 1.66 years) underwent, in groups of four, 20 minutes of structured observation while solving dilemmas. Observations were coded through the "Group Process Analysis" (GPA) system. Participants then individually filled out these questionnaires: Brief-COPE, Self-Esteem Rating Scale, Multidimensional Self-Esteem Test, Barratt Impulsiveness Scale, Interpersonal Reactivity Index, Symptom Checklist-90. Associations between social competence and constructs measured by these questionnaires were investigated by Pearson's r (all $p < 0.05$). *Results:* Significant negative correlations were found between social competence and (i) the coping strategy "behavioral disengagement" ($r: -0.178$; $p: 0.027$), and (ii) symptoms related to phobic anxiety ($r: -0.252$; $p: 0.002$). Significant positive correlations were found between social competence and (i) impulsivity due to unplanned events ($r: 0.188$; $p: 0.020$), (ii) self-esteem levels ($r: 0.165$; $p: 0.041$), and (iii) imaginative interpersonal reactivity ($r: 0.164$; $p: 0.042$). *Discussion:* Results highlight a significant association between social competence measured by systematic



observation and a series of psychological variables that play a role in stemming psychopathological outcomes in adolescence and adulthood. They therefore support the validity of an objective approach to the measurement of social competence (i.e., systematic observation), despite the lack of a direct comparison with self-report measures.



Relationship satisfaction in same-sex couples: The role of Romantic Attachment and Internalized Homophobia within the dyad

*Vincenzo Calvo*¹, *Giulio Paoletti*¹, *Marco Aurelio Cappellini*¹, *Chiara Masaro*¹, *Lucia Ronconi*², *Cristina Marogna*¹, *Camilla Pellicelli*¹

¹ Department of Philosophy, Sociology, Pedagogy, and Applied Psychology, University of Padova, Padua, Italy

² School of Psychology, University of Padova, Padua, Italy

Abstract

Introduction: Along with insecure attachment styles, Internalized Homophobia (IH, defined as the internalization of negative views about homosexuality by LGB people) is known to negatively impact both the psychological well-being of LGB people and the quality of their romantic relationships. However, little is known on the interaction between attachment and IH in determining same-sex partners' relationship satisfaction, as well as the dyadic effect of IH within couples who live in highly heteronormative contexts such as Italy. The aim of our study was to better understand the impact of IH among Italian LGB partners considering both an individual and a dyadic perspective. Specifically, we investigated for the first time the mediating role of IH on the association between romantic attachment and relationship satisfaction, as well as potential reciprocal effects of IH on partners' relational satisfaction. *Methods:* 52 same-sex couples (24 female-female and 28 male-male; mean age = 29.6 yrs.; SD = 9.3) participated in an online survey, including self-report measures of romantic attachment (ECR-R), internalized homophobia (MISS-LG), and relationship satisfaction (GLRSS). Data were analyzed using mediational analyses and Actor-Partner Interdependence Model (APIM). *Results:* IH significantly mediated the association between attachment anxiety and relationship satisfaction, while attachment avoidance was found to only have a direct negative effect on the latter. APIM analyses showed both significant intrapersonal (actor) and interpersonal (partner) effects of IH on each partner's relationship satisfaction. *Discussion:* Our results confirm previous findings suggesting that insecure attachment orientations and IH are significantly associated with lower relationship satisfaction in same-sex partners. Furthermore, the two dimensions seem to play a complex effect on each partner's satisfaction levels, which seem to be influenced by their individual attachment style as well as both their own and their partner's internalized homophobia. These findings deepen our knowledge regarding LGB people's



relational peculiarities and underline the complexity of factors involved in one's own relationship satisfaction, thus providing crucial insights for clinical work with LGB people, both single and romantically involved.



Attachment and Defensive Functioning: A Preliminary Investigation of Their Interplay with Internalized Homophobia in Gay and Homoflexible Men

Vincenzo Calvo¹, Marco Aurelio Cappellini¹, Giulio Paoletti¹, Chiara Masaro¹, Lucia Ronconi², Cristina Marogna¹, Camilla Pellicelli¹

¹ Department of Philosophy, Sociology, Pedagogy, and Applied Psychology, University of Padua, Padua, Italy

² School of Psychology, University of Padua, Padua, Italy

Abstract

Introduction: Internalized Homophobia (IH) — defined as the internalization of negative views about homosexuality and their application to oneself — is known to interfere with LGB persons' psychological well-being. Extant literature has shown the detrimental effect of insecure attachment on IH in gay and bisexual men. Conversely, the role of defensive functioning on IH has prompted almost no empirical research, despite recent studies suggesting an association between attachment styles and defense mechanisms. The aim of this study was to investigate the mediating role of defense mechanisms on the association between romantic attachment and IH, and to outline the interaction between attachment and defensive functioning in gay and bisexual men belonging to the general non-clinical population. *Methods:* 139 adult gay and homoflexible men (mean age = 31.4 yrs., SD = 11.8) completed an online survey including self-report measures of romantic attachment (ECR-R), defensive functioning (DMRS-SR-30), and internalized homophobia (MISS-LG). Data were analyzed using correlational and path analyses. *Results:* High levels of mature defenses were associated with lower attachment anxiety and avoidance as well as lower IH; conversely, high levels of neurotic and immature defenses were associated with higher scores on all the aforementioned dimensions. Path analyses showed that only mature defenses significantly mediate the association between an overall insecure attachment score and IH, while no effect was found for neurotic and immature defenses. Moreover, anxiety and avoidance showed direct positive associations with immature and neurotic defenses levels respectively, and direct negative associations with mature defenses levels. *Discussion:* To our knowledge, our study provides the first empirical evidence that mature defenses could have a protective role in the expression of higher levels of IH, potentially mitigating the negative effects of insecure attachment. Through the implementation of a newly published gold-standard tool for defenses assessment (DMRS-SR-30), these results expand previous findings



regarding the interplay of attachment and defensive functioning, thus providing a first preliminary investigation of the potential effects of different attachment dimensions on specific defense mechanisms in non-clinical homosexual and homoflexible men.



Psychological factors in children and adolescents with syncope: a systematic review

*Gaia Cuzzocrea*¹, *Francesco Manca*¹, *Cristiana Alessia Guido*², *Paolo Versacci*², *Alberto Spalice*², *Vincenzo Caretti*¹

¹ Department of Human Sciences, LUMSA University of Rome, Rome, Italy

² Pediatric Neurology Division, Department of Maternal Sciences, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Syncope is defined as a spontaneous and transient loss of consciousness and postural tone due to brief and reversible cerebral hypoperfusion. The onset is more frequent in childhood, with a mean incidence of 15%. At this age, neurally mediated syncope is the most common, more than cardiac or orthostatic intolerance syncope. Several studies found that pediatric syncope can be related to psychological distress and emotion dysregulation, but to our knowledge, the literature has not been previously reviewed. The aim of this review was to summarize the research findings regarding the psychological correlates associated with pediatric syncope. *Methods:* A systematic review was carried out from inception to January 2023, according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, using the CINAHL Plus, APA PsycArticles, APA PsycInfo, MEDLINE, and Psychology and Behavioral Sciences Collection databases. The study search and selection were based on the Population Intervention Comparison Outcome Study Design (PICOS) strategy. A combination of keywords related to a) syncope; b) psycho*; and c) child* (Subjects) was used. Studies concerning epilepsy-related syncope were excluded. *Results:* Overall, 912 records were identified. After excluding non-English, non-original, and duplicate studies, 627 records were selected for the title screening, 88 for the abstract screening, 37 full-text articles were assessed for eligibility and a total of 22 were included. The findings highlighted that children and adolescents with syncope showed a higher rate of psychopathology as compared to the general population. Depression and anxiety symptoms were associated with female gender and more frequent syncopal episodes. Furthermore, patients reported social withdrawal and poor quality of life. *Discussion:* The findings of this review suggest that psychological assessment should be routinely included in the integrated care of children and adolescents with syncope in order to identify potential targets for treatment.

Emotional intelligence, coping and life perceptions: comparison between adolescents with oncohaematological disease and healthy peers

*Marta Tremolada^{1,2}, Roberta Maria Incardona^{1,2}, Valentina Mastrandrea², Sabrina Bonichini¹, Livia Taverna³,
Alessandra Biffi²*

¹ Department of Development and Social Psychology, University of Padua, Padua, Italy

² Pediatric Hematology, Oncology and Stem Cell Transplant Center, Department of Women and Child's Health, University of Padua, Padua, Italy

³ Faculty of Education, Free University of Bozen-Bolzano, Bozen, Italy

Abstract

Several studies identified lower adolescents' psychological wellbeing after the Covid19 pandemic and the important protective role of coping and emotional intelligence (Delvecchio et al., 2022; Mastorci et al., 2021). The aims of this study are to assess the coping strategies and emotional intelligence scores in adolescents with oncohematological diseases in post-pandemic period and comparing them with those of matched healthy peers. Participants were 23 adolescents, 16 males and 7 females, with a mean age of 15.1 (SD=2.1; range: 12-18 years old) recruited at the Pediatric Hematology-Oncology (University of Padua) and a control group of healthy peers matched by age and gender. Sixteen patients had a hematology disease and 7 had a solid one. After the signature of informed consent by parents and by themselves, the adolescents had an interview with the clinical psychologist filling in the Emotional Quotient Inventory, Coping Responses Inventory, and the Ladder of Life scale. Patients' coping strategies scales were placed at an average level compared to the reference population. In general, adolescents used more approach strategies and less the problem solving one. Intrapersonal scale of emotional intelligence obtained a score that was below the average in most patients. The clinical group used more coping strategies than the healthy group, specifically positive reappraisal [t(22)=-3.04 p=.003], seeking guidance and support [t(22)=-2.63 p=.014], problem- solving [t(22)=-2.66 p=.007], search for alternative gratifications [t(22)=-1.73 p=.048] and emotional outburst [t(22)=-1.73 p=.049]. In the perceptions of their life, the patients significantly reported lower results in the current scale [t(22)=3.3 p=.002], but a better future life perception [t(22)=-1.71 p=.05] than controls. It is of paramount importance for adolescent patients to be flexible and diversify responses to face a stressor based on one's resources, past experiences, and situational factors.



**Autobiographical Memories in women undergoing assisted reproductive technology treatment:
an analysis through the Referential Activity linguistic program**

Alessia Renzi¹, Rachele Mariani¹, Fabiola Fedele², Renzo D'Amelio³, Michela Di Trani¹, Giuliana Mazzoni¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

² ART Italian National Register, National Centre for Diseases Prevention and Health Promotion, Italian National Health Institute, Rome, Italy

³ Department of Gynecologic-Obstetrical and Urologic Sciences, Umberto I Hospital, Sapienza University of Rome, Rome, Italy

Abstract

Background: The infertility condition can cause a profound psychological discomfort and a variety of psychopathological symptoms. The diagnosis and the related treatments can represent a traumatic experience and a difficult emotional challenge for people involved. The present work aims to explore the linguistic characteristics of autobiographical memories, indicators of the ability to cope with present and past painful experiences, of infertile women undergoing Assisted Reproductive Treatment. *Methods:* 44 women (mean age=36.05; sd=4.66) enrolled in a fertility medical centre in Rome completed a brief socio-demographic questionnaire and a semi-structured interview aimed to collect their memories on a neutral, a positive and a negative event and a) on how they realized to have fertility problems and b) an episode when they talked about these difficulties with their partner. The interviews were audio recorded and transcribed and the text analyzed through the Referential Process (RP) linguistic measures via IDAAP software. *Results:* In the narratives related to the awareness of suffering of fertility problems women reported higher scores in the Weighted Referential Activity Dictionary (WRAD) ($p=.001$) and Weighted Reflection and Reorganization List (WRRL) ($p=.001$) than in narratives of neutral event; higher WRAD ($p=.04$) than in narratives of positive episode; lower Sensory Somatic (SenS) scores than those regarding the negative episode and lower WRRL ($p=.02$) than in narratives regarding the discussion about the fertility problems with the partner. In the narrative exploring the discussion with the partner women reported higher scores in WRRL and lower in the WRAD (both $p=.001$) than in neutral event, higher in the WRRL ($p=.05$) than in the positive event and lower SenS ($p=.01$) than in the negative episode. *Conclusions:* Present findings highlight different capabilities in symbolizing and reflection/reorganization



process according to the specific nature of the episode. Women appear to be engaged in an elaboration process of their experience of infertility/parenthood seeking. Further studies are needed to confirm these preliminary findings.



Online gaming during the COVID-19 pandemic: A systematic review

Maria Teresa Graffeo¹, Alessandro Pepi¹

¹ Department of Psychology, Educational Sciences and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: The effects of the increased online gaming within the context of the COVID-19 outbreak and all the related shelter-in-place restrictions are becoming increasingly clear in the literature. Although gaming often represents a healthy and enjoyable activity, previous studies showed that a minority of gamers may experience problematic gaming patterns that can put individuals at risk of a Gaming Disorder (GD). In order to promote a better comprehension of the phenomenon, the present systematic review aims to explore the characteristics of problematic gaming among adolescents, young adults and adults during the pandemic, and to examine the relationship between online gaming and mental health distress. *Methods:* A systematic search was performed through PubMed, Web of Knowledge and AGRIS, Embase, Medline, PsychINFO (from January 2020 to January 2023), using keywords related to problematic gaming and mental health. Both cross-sectional and longitudinal empirical studies were included. Furthermore, to contrast the heterogeneity of definitions, psychological frameworks and measurement approaches used to assess problematic gaming, only studies which employ validated measures of problematic gaming and mental health outcomes were included. *Results:* Twenty-five empirical articles were eligible for the current review, involving 28,978 participants. The large majority (76%) of the selected studies has cross-sectional designs. Overall, most eligible studies highlighted significant associations between problematic gaming and poor mental health outcomes during the pandemic. Correlations were predominantly found between problematic gaming, depression and anxiety. *Discussion:* The link between online gaming, depression and anxiety suggests that playing video games - maybe with a social compensation motivation due to the social isolation condition - may represent a dysfunctional and maladaptive way to cope with negative emotions. Further monitoring of changes in the prevalence of problematic gaming and its association with mental health distress will be crucial, considering the long-lasting negative consequences of the pandemic on mental health. Future studies are needed to evaluate



the moderating role of variables such as types of video games, types of gamers, motives for playing, and socio-cultural context.



Saturday, 16th September 2023

MINI TALK SESSION 4

Discussant

Silvia Salcuni

University of Padua



Profiles of Italian preschool educators: younger teachers are at higher risk of psychological discomfort and burnout

Federica Ambrosini¹, Zeynep Özal², Marta Girotto¹, Elena Trombini³, Roberta Biolcati¹, Giacomo Mancini¹

¹ Department of Education Sciences, Alma Mater Studiorum University of Bologna, Bologna, Italy

² Department of Social Sciences, Technical University of Kaiserslautern, Kaiserslautern, Germany

³ Department of Psychology, Alma Mater Studiorum University of Bologna, Bologna, Italy

Abstract

Introduction: Recent research has emphasized that teachers are increasingly exposed to Burnout (prolonged and intense occupational distress with psycho-physical and emotional exhaustion, lack of motivation and a sense of ineffectiveness) due to specific properties of the education profession: close interaction between practitioner and users, intense emotional involvement and the increased socio-cultural context's pressures and demands on the school. This study aims to identify subgroups of preschool educators - a population still under-researched - based on socio-demographic and occupational factors and to determine how these subgroups are related to psychological variables (such as burnout, anxiety and alexithymia). *Methods:* 143 Italian preschool educators (females n = 138), aged from 20 to 60 years and older completed an online survey comprising the following tools: Maslach Burnout Inventory; State-Trait Anxiety Inventory Y-form; Toronto Alexithymia Scale (TAS-20); socio-demographic and occupational data sheet. A latent class analysis was applied to a set of indicators related to demographics (sex, age, degree) and job-related factors (job position, seniority, time of employment, number of children per class) to identify distinct profiles of educators. MANOVA was used to examine the relationship between the class membership and levels of burnout, state anxiety and alexithymia. *Results:* Three classes with different patterns were identified: a class (C1) with a high prevalence of teachers with higher age (>51 years), greater professional experience (>21 years) and stable employment; a class (C2) with a high prevalence of teachers aged 31-50, mostly in an open-ended contract and full-time employment; and a class (C3) with a high prevalence of young teachers (aged 20-30), with low professional experience (<10 years) and precarious work. C3 exhibited significantly greater levels of state anxiety (compared to C1), alexithymia (compared to C2) and Depersonalization dimension of Burnout, that is the tendency to distancing from others within relationships (compared to C1 and C2). *Discussion:* The youngest group of teachers seems to be the one most at a risk of discomfort and burnout, probably due to the job insecurity, anxiety and concern for the future typical of the contemporary society.



The association between implicit and explicit responses to different infant cues and the quality of mother-child interactions

Carla Nasti¹, Sonia La Resta¹, Stefania Paternoster², Simona De Falco², Vincenzo Paolo Senese¹

¹ Department of Psychology, University of Campania "Luigi Vanvitelli", Caserta, Italy

² Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Abstract

In the literature, studies that have investigated the factors responsible for the quality of the caregiver-child relationship have emphasized that this may depend on the caregiver's responses to infant cues. However, few studies have thoroughly investigated how different infant cues are processed at different levels, and no study has investigated to what extent these responses are related to the quality of the caregiver-child relationship. Therefore, the aim of this study was to explore the association between the responses to different infant cues, evaluated at different levels, and the quality of the caregiver-child relationships measured in terms of caregivers' emotional availability and verbal responsiveness. To this aim, 25 mother-child dyads participated in a study carried out in their family setting. Mothers (age range = 27-50 years) first were administered two implicit and two explicit measures, SC-IAT and semantic differential respectively, to collect responses to sad and happy infant faces, and then were invited to freely interact with their child (age range = 20-68 months) using a standardized set of games. The results showed that the implicit responses to sad faces (not happy faces) were significantly and positively associated with verbal responsiveness, $r=.35$, $p<.05$, and emotional availability, $r=.37$, $p<.05$. No significant associations were observed between explicit responses and the quality of the observed interaction. The results of this study confirm the importance of taking different processing levels into account when assessing the response to childhood cues and show, for the first time, how the association between response and behavior depends on the characteristics of the stimulus and the processing level considered.



Autobiographical memory in bereaved persons: does memory change after the loss of a loved one?

Giulia Marselli¹, Beatrice Fiorilli², Angela Guarino^{1,3}

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

³ Save the Parents APS Roma, Rome, Italy

Abstract

Grief is a universal human experience that is often associated with intense emotional pain and an increased risk of developing physical and mental illnesses. Generally, bereaved persons stop experiencing symptoms within 6 months from their loss. However, 7-10% of the population develops intensified symptoms that last for at least 12 months. These symptoms can cause physical and psychological discomfort, thus compromising both quality of life and cognitive functioning. Some studies have found alterations in autobiographical memory (AM) in persons exposed to traumatic events, such as bereavement. AM is fundamental for social functioning since it gives people the sense of a subjective timeline. Thanks to AM, individuals can mentally travel back, acquiring a sense of “self” that can exist in the subjective time. Therefore, the objective of the present systematic review is to analyze AM functioning in bereaved persons. This review adhered to the guidelines developed by the PRISMA-Statement and the search was conducted until 20 March 2023 in the following bibliographical databases: PubMed, Web of Science, Scopus, Medline and PsycInfo. The search syntax was: (bereav* OR grief OR mourning) AND ("autobiograph* memor*" OR "episodic memory" OR "semantic memory"). After the eligibility assessment, 15 studies were retained. Globally, the results highlight the existence of a significant correlation between grief symptoms and alterations in AM. Specifically, the majority of the included studies revealed that worse grief symptoms are associated with a reduction in the specificity of AM. However, some studies suggest that bereaved persons tend to recall a higher number of specific memories related to their loss, but this is not a consistent result across the included studies. In conclusion, past autobiographical memories are extremely significant, since they are associated with one’s identity and emotional state, as well as with mood, social functioning, and abilities such as problem solving. Starting from the evidence of this systematic review, further studies should detect and investigate the cognitive



and emotional mechanisms that undermine AM performance in bereaved persons, allowing the development of specific interventions targeting these mechanisms.



Attentional bias in old age gambling: an experimental study

Maria Ciccarelli¹, Francesca D'Olimpio¹

¹ Department of Psychology, University of Campania Luigi Vanvitelli, Caserta, Italy

Abstract

Introduction: The frequency of problem gambling in older adults have steadily increased in recent years, yet experimental research on this topic remains relatively scarce. A central role in the development and maintenance of gambling is played by attentional bias, i.e., an enhanced attentional processing of addiction-related stimuli. The aim of the present study was to examine, for the first time, which component of attention and what type of attentional bias would be involved in gambling in old age. Furthermore, we aimed to investigate the joint role of attentional bias, craving, and emotion dysregulation in gambling in old age. *Methods:* Sixty-two gamblers (53% males), aged over 60 years ($M_{age} = 66.11$; $SD = 5.64$) carried out a modified version of the Posner Task, a computerized version of a detecting attentional biases task that – through the manipulation of stimuli presentation time – allows to measure both initial orienting and maintenance of attention and to identify three attentional biases, namely, facilitation, disengagement, and avoidance. Participants also completed the South Oaks Gambling Screen (SOGS), the Gambling Craving Scale (GACS), and the Difficulties in Emotion Regulation Strategies (DERS) in order to assess the severity of gambling involvement, the subjective feeling of gambling-related craving, and emotion dysregulation, respectively. *Results:* Problem gamblers showed facilitation bias for gambling cues at 100ms (initial orienting of attention) and reported higher levels of craving and emotion dysregulation. Regression analyses showed that, along with male gender ($\beta = -.42$), facilitation bias at 100ms ($\beta = .10$), craving relief ($\beta = .12$), and non-acceptance of emotional responses ($\beta = .45$) are significant predictors of gambling severity ($R^2_{adj} = .42$; $F_{4,57} = 12.13$; $p < .001$). *Discussion:* The present study found, for the first time, evidence of an attentional facilitation for gambling cues in old age participants with gambling problems, and confirmed the joint role of attentional biases, craving, and emotional dysregulation in maintaining problem gambling, even in old age. This study also provides a basis for evidence-based prevention and intervention programs, tailored to the particular characteristics of this age cohort gamblers.



Exploring factors associated with chasing behavior among adolescents: the influence of craving, decision-making, alcohol use, and gambling involvement

Mariagiulia Sacco¹, Giovanna Nigro¹

¹ Department of Psychology, University of Campania “Luigi Vanvitelli”, Caserta, Italy

Abstract

Chasing is a behavioral marker and a core feature of problematic gambling that significantly contributes to the etiology and maintenance of gambling disorder. Chasing refers to the act of continuing gambling to recover gambling-related losses. Though it plays a key role in gambling disorder, experimental research on chasing behavior among adolescents is still in its infancy. This study aimed to first explore the interplay between chasing behavior, craving, affective-decision-making, decision-making styles, alcohol consumption, and gambling severity among Italian adolescents. A sample of 272 adolescents (44.9% boys) aged between 14 and 19 years attending public high schools in Southern Italy participated in the study. Participants were administered the South Oaks Gambling Screen Revised for Adolescents (SOGS-RA), to estimate gambling severity, the Gambling Craving Scale (GACS) to assess gambling-related craving, the Iowa Gambling Task (IGT) to measure affective decision-making, the General Decision-Making Style (GDMS) to identify individual decision-making styles, the Alcohol Use Disorders Identification Test (AUDIT), to measure alcohol consumption, drinking behavior, and alcohol-related problems, as well as a computerized task assessing chasing behavior. Participants were randomly assigned to two chasing conditions (Control/Loss). Logistic regression showed that high scores on both the GACS Anticipation and Desire scales and the GDMS Dependent style predicted the choice to chase. Furthermore, the results of hierarchical linear regression analysis indicated that the Dependent style, craving, and alcohol consumption were significant predictors of chasing proneness. Since in both regression analyses gambling severity was not included in the final models, it might be that other things being equal, chasers and nonchasers belong to two quite distinct subtypes of gamblers, as suggested by previous investigations. This study provides insights into the factors that contribute to chasing behavior among adolescents and may inform interventions aimed at reducing the risk of developing gambling disorder.



Association of traumatic experiences and related PTSD symptoms with perceived pain levels and sexual dysfunction in women with endometriosis

Mariagrazia Merola¹, Ilaria Quaranta², Lorena Giovinazzo², Laura Mosino³, Giovanna Cacciato², Chiara Benedetto³, Stefano Cosma³, Sara Carletto⁴

¹ Department of Neuroscience, University of Turin, Turin, Italy

² Clinical Psychology Unit, University Hospital "Città della Salute e della Scienza", Turin, Italy

³ Department of Surgical Sciences, University of Turin, Turin, Italy

⁴ Department of Clinical and Biological Sciences, University of Turin, Turin, Italy

Abstract

Endometriosis is a gynecological disease affecting approximately 6–10% of women. Endometriosis is a clinically heterogeneous condition representing a major cause of disability and impaired quality of life for women of reproductive age. The chronic and progressive nature of the condition with its damaging implications have negative impact on women's quality of life, working and social level, sexuality and mental health. Recent studies show that "pain catastrophizing" is a critical factor in women with endometriosis, and it is associated with higher levels of pain, uncorrelated to the extent or clinical features of the disease. The levels of pelvic pain detected are mutually correlated with a history of traumatic and/or stressful events and symptoms related to Post Traumatic Stress Disorder (PTSD). Moreover, dyspareunia, a common complaint in patients with endometriosis, causes a severe impairment of sexual functioning and distress in interpersonal relationships. The study aims at investigating the association between perceived pain, pain catastrophizing levels, sexual dysfunction, traumatic and/or stressful experiences and the subsequent development of PTSD symptoms in a sample of women affected by endometriosis. The clinical assessment, through self-administered questionnaires, involves the collection of measures of anxiety, depression, stress, PTSD symptoms, levels of perceived and catastrophizing pain, the presence of stressful and/ or traumatic events, as well as assessing quality of life and sexual impairment of women with endometriosis. Investigating the influence of stressful life events on the subjective experience of pain could further our knowledge on the role of psychosocial factors in endometriosis, in order also to provide insight into psychological interventions that may be effective in improving quality of life of women affected by this disease.



Emotional and behavioral dysregulation in middle childhood: a pilot study of functional impairment and clinical correlates

*Pia Rita Fragomeni*¹

¹ Department of Dynamic, Clinical Psychology and Health, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Severe emotional and behavioral dysregulation is a trans-diagnostic condition common in children from clinical samples. These children show significant impairments in multiple domains of self-regulation and are particularly at risk for psychopathology. The Child Behavior Checklist Dysregulation Profile (CBCL-DP) is a useful marker of severe dysregulation and risk for future major psychopathology in children and may identify children requiring early intervention. Some studies have defined the CBCL-DP as the sum of T-scores ≥ 210 on the Anxious/Depressed, Attention Problems and Aggressive Behavior subscales. The aim of this study is to examine the extent of emotional and behavioral dysregulation using the CBCL-DP in children aged 7-11 years referred to a children's hospital for clinical assessment of emotional and behavioral difficulties, and to explore functional impairment and the clinical correlates of symptomatology. *Methods:* All children were assessed using the CBCL/6-18, completed independently by parents. In addition, parents, teachers, and children completed the Conners 3 Rating Scales (CRS). *Results:* A preliminary analysis was conducted on N= 13 (69,2% boys) of 20 subjects. Children with DP-210 accounted for almost half of the sample (46%) and received the following DSM-5 diagnoses: ADHD (16.7%), anxiety-depression problems and learning difficulties (16.7%), depressive disorders (33.3%) and conduct disorder (33.3%). Significant associations were found between the DP-210 and the CBCL Problems Scales. Compared to the non-DP-210 group, the parent/teacher ratings also differed with respect to the presence of symptoms and functional impairment. Finally, DP-210 symptoms in children show significant associations with CRS content scales, symptom scales and impairment scales. *Discussion:* DP-210 children are frequent, show high rates of comorbidity between internalizing and externalizing disorders, and significant functional impairment in peer relations and academic domains. Exploratory data also suggest that clinical correlates could help to discriminate between children with and without emotional and behavioral dysregulation. This study draws clinical attention to the presence of severe dysregulation across nosological categories in order to identify children with high symptom severity and functional impairment who require early intervention.



The Italian validation of the Child PTSD Symptom Scale for DSM-5 (CPSS-5)

*Giovanni Borrelli*¹, *Annachiara Lamberti Zanardi*¹, *Claudia Scognamiglio*², *Vincenza Cinquegrana*², *Raffaella Perrella*²

¹ Department of Human Sciences, Guglielmo Marconi University, Rome, Italy

² Department of Psychology, University of Study of Campania “Luigi Vanvitelli”, Caserta, Italy

Abstract

Introduction: Traumatic experiences, especially when experienced during development, can have significant effects on the person. One possible consequence of exposure to trauma is the development of Post-Traumatic Stress Disorder (PTSD; Kessler et al., 2012). Children and adolescents are particularly at risk for exposure to traumatic events. Nearly 60 percent of them will experience a traumatic event by the end of adolescence (McLaughlin et al., 2013). Early detection of PTSD constitutes the first and fundamental step in managing these risks the generated by the pathology – increased risk for substance use, suicidality, and poorer mental health (Chapman & Ford, 2008; Jaycox et al., 2004; Foa et al, 2018). Measuring the effects of traumatic stress is crucial for comprehensive clinical pictures, service delivery and research. The Child PTSD Symptom Scale - CPSS-5 (Foa et al, 2018) identifies PTSD in children and adolescents early and reliably according to DSM-5 criteria. This research proposes the necessary validation of the CPSS-5 in Italy. *Methods:* The study involved Italian children and adolescents aged between 8 and 18 years, who had experienced a DSM-5 Criterion A trauma. They were identified through quota-adjusted convenience sampling. With CPSS-5 evaluated the symptoms of post-traumatic stress, providing scores for intrusion, avoidance, changes in cognition and mood, and increased arousal and reactivity. The reliability and validity of the scale was studied. *Results:* Results showed that the Italian version of CPSS-5 highly discriminated traumatized children and adolescents on the base of DSM-5 Criteria. Broadly speaking, results provide evidence of the validity and reliability of the CPSS-5 in Italian children. *Discussion:* The CPSS-5 has an impact on the representation of trauma measure of DSM-5 PTSD symptomatology in traumatized young people. This scale could contribute to improving certain aspects at stake in the negative symptoms of Italian children.



Italian validation of the “reading the mind in the eyes test” - children’s version for age range 8-18 years

Annachiara Lamberti Zanardi¹, Giovanni Borrelli¹, Claudia Scognamiglio², Vincenza Cinquegrana², Raffaella Perrella²

¹ Department of Human Sciences, Guglielmo Marconi University, Rome, Italy

² Department of Psychology, University of Study of Campania “Luigi Vanvitelli”, Caserta, Italy

Abstract

Introduction: The “Reading the Mind in the Eyes Test” - RMET - Children’s Version has been developed from the adult version of the test (Baron-Cohen et al., 1997, 2001). The RMET assesses emotion recognition and involves presenting participants with twenty-eight images of the human eye region with emotional value. Four words are associated with each image, and each participant has to indicate for each image which word corresponds to the emotion that the subject sees in the eyes. The test, therefore, requires the participant to be able to identify with the image and understand the emotion it represents. The ability to recognize and describe one's own and others' emotions is a key aspect of metacognition, which can be described as the ability to understand one's own and others' mental states and to give meaning to behaviors from those mental states (Baron-Cohen et al., 1985; Flavell, 1979). Metacognition develops during childhood through the relationship with the caregiver; in effect, early childhood traumas can disrupt or impair this development. Metacognition deficits can be found in many psychiatric disorders, such as autism spectrum disorder, schizophrenia, eating disorders, post-traumatic stress disorder, borderline personality disorder, antisocial personality disorder, etc. (Allen et al., 2008; Fonagy & Bateman, 2005; Fonagy & Target, 2001). *Methods:* Currently, in Italy there is the validation of the RMET for adults (Vellante et al., 2013) and a validation for children on a small sample (thirty subjects) with a restricted age range (Liverta Sempio et al., 2003). Therefore, this study aims to carry out the Italian validation of the RMET - Children’s Version for age range 8-18 years and involves the selection of both a clinical and a normative sample. The clinical sample was found within situation of foster care, while the normative sample within schools. *Results:* Results show that the Italian version of the RMET - Children’s Version highly discriminated emotion recognition in children and adolescents. *Discussion:* This validation will allow the professional community to administer the RMET - Children’s Version to a wide age range in both clinical and forensic settings.



The contribution of cognitive rehabilitation to the improvement of the quality of life in patients with psychiatric conditions

Salvatore Iuso¹, Nicoletta Trotta², Nadia Genzano¹, Melania Rita Difino¹, Pietro Fiore³

¹ Department of Humanistic Studies, University of Foggia, Foggia, Italy.

² Department of Mental and Physical Health and Preventive Medicine, University of Campania “Luigi Vanvitelli”, Naples, Italy

³ Department of Medical and Surgical Sciences, University of Foggia, Foggia, Italy

Abstract

Introduction: Cognitive rehabilitation is based on the neuroplastic capabilities of the brain and its ability to reorganize functionally and structurally after some damages or a result of cognitive deterioration. Through environmental stimuli, the human brain is driven to change to respond to external demands more efficiently. Of particular interest is the use of cognitive enhancement strategies in psychiatric patients with severe cognitive impairment. Treatment of cognitive symptomatology makes it possible to reduce the impact the illness has on patients' lives by restoring their autonomy and self-efficacy. The objective of this study is to evaluate the consequential benefits of personalized cognitive rehabilitation training, specifically the focus of the research is to investigate the effectiveness of using a cognitive rehabilitation program to achieve an increase in perceived quality of life. The hypothesis is that the improvement in cognitive performance is related to greater functionality in daily living thus generating an increase in quality of life. *Methods:* The study involved 11, patients aged 23 to 62 years. All patients underwent neuropsychological assessment and quality of life assessment by self-administration of the WHOQOL-BREF. The assessment was performed before treatment (t0) and after treatment (t1). *Results:* Statistical analyses showed a positively oriented correlation between the subtests of the WMS and the dimension of the individual level measured by WHOQOL-BREF (Prose story (1): $p = 0,1063$; Prose story (2): $p = 0,0784$; Memory in numbers: $p = 0,0219$); a positively oriented correlation between the score totaled at the Phonemic Fluency the dimension of the individual level measured by WHOQOL-BREF ($p = 0,0734$); and a negatively oriented correlation between the number of attempts made at the WCST and the individual level measured by WHOQOL-BREF ($p = 0,0663$). *Discussion:* The intervention was effective in improving clinical and cognitive outcomes. The improvements achieved in the different cognitive domains also improved daily life functions. Integrating cognitive remediation exercises into



psychiatric rehabilitation interventions is effective in achieving an improvement in patients' quality of life; through the proposed exercises, patients enhanced their abilities with an overall improvement in daily functioning.



The relationship between belief in conspiracy theories and health during the COVID-19 pandemic

Vittoria Spicuzza¹, Martina Riolo¹, Emanuele Cusumano¹, Gaia Teresi¹, Maria Stella Epifanio¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: A pervasive phenomenon during the COVID-19 pandemic has been the spread of conspiracy theories through social media. Is possible to assume that in the pandemic situation, people have experienced a lack of personal control; this might have triggered “compensation strategies” through an external source that would provide control, such as conspiracy theories. The present study aimed to analyze the relationship between belief in conspiracy theories, perceived personal control, psychological well-being, use of main sources of information and adherence to health-related behaviours such as vaccines against SARS-CoV-2. *Methods:* Online data collection was performed through Google Forms. The final sample included 437 (n= 296 females; n= 140 males; n= 1 non-binary) with a mean age of 31.41. The Psychological General Well-Being Index (PGWBI) was used to assess psychological well-being, while ad-hoc surveys were used to assess perceived lack of control, opinions about Covid-19 and related vaccines, health-related behaviours, primary information sources use, and confidence in them. Statistical analyses were performed using SPSS (version 25.0) for Windows. Specifically, analysis of variance (ANOVA) 2x2 to assess the relationship between belief in conspiracy theories and the various dependent variables (i.e. demographic variables, perceived control, psychological well-being, adherence to the vaccination campaign). *Results:* Preliminary results show that beliefs in conspiracy theories are related to lower adherence to the vaccination campaign and government guidelines on pandemic control ($p<0.01$), increased use of social networks as the primary source of information ($p<0.05$), and a higher level of anxiety ($p<0.05$). Therefore, It was observed that individuals with higher perceptions of personal control had a stronger belief in conspiracy theories ($p<0.05$). *Discussion:* The study highlighted that belief in conspiracy theories could favour implementing risky behaviours such as not adhering to vaccination campaigns. In contrast to the literature, results show a positive relationship between higher levels of perceived control and belief in conspiracy theories; this may be because belief in conspiracy theories acts as a compensatory mechanism that increases perceived control in those who have experienced more uncertainty.



The challenge of polysubstance users within Therapeutic Communities: a pilot study on patient profiling and motivation to change

Federica Ambrosini¹, Zeynep Özal², Giacomo Mancini¹, Roberta Biolcati¹

¹ Department of Education Studies "G. M. Bertin", University of Bologna, Bologna, Italy

² Department of Social Sciences, Technical University of Kaiserslautern, Kaiserslautern, Germany

Abstract

Introduction: Motivation to change plays a key role in the treatment process of individuals with polysubstance addicted within Therapeutic Communities (TCs). However, motivation to change may vary according to several patients' features that should be considered in the treatment planning, in order to avoid dropouts. Profiling patients addicted to multiple substances based on various sociodemographic and clinical features may contribute to identify more tailored and effective interventions. Therefore, this preliminary study aims to detect clusters of TCs polysubstance addicted and to determine how motivation to change varies among these subgroups. *Methods:* The study involved 35 polysubstance addicted (female $n = 12$), aged 22-59 years (mean = 36.9, SD = 10.7), in residential treatment within two therapeutic communities in Emilia-Romagna. Sociodemographic and clinical data were collected. All patients completed the Treatment Motivation Questionnaire (TMQ), aimed to assess Internalized Motivation (IM), External Motivation (EM), Help seeking (HS) and Confidence in treatment (C). A latent class analysis (LCA) was applied to variables related to demographics (sex, age), primary substance of abuse and legal situation to identify distinct profiles of patients. MANOVA was used to examine the relationship between the class membership and TMQ dimensions. *Results:* LCA identifies two profiles of patients. The first profile (P1) is composed by females, mainly aged from 21 to 30, without pending legal proceedings, whose primary substances are mainly heroin and cannabinoids. The second profile (P2) includes mainly higher aged men, showing pending legal proceedings and cocaine as primary substance. P1 and P2 differed based on sex, age, and primary substance of abuse, but not based on legal status. P1 show higher scores related to EM. *Discussion:* Despite had no pending legal proceedings, younger female polysubstance users, compared to older male polysubstance users, perceived greater lack of choice in seeking treatment and experienced more external pressure to remain in treatment rather than an inner motivation. These findings provide insights for CT's practitioners on the group more difficult to engage and on the sociodemographic and clinical features which may act as barriers to motivation to change.



DSM-5/DSM-5-TR Assessment Measures for Depression, Anxiety, Anger, Somatic Symptom, and Dissociative Symptoms: Reliability, Factor Structure, and Normative Data

Arianna De Ciechi^{1,2}, *Valeria Mariani*²

¹ School of Psychology, Vita-Salute San Raffaele University, Milan

² Clinical Psychology and Psychotherapy Unit, San Raffaele Turro Hospital, Milan, Italy

Abstract

Introduction: DSM-5/DSM-5-TR provides clinicians with instruments for clinical evaluation and research. Patient assessment measures were developed to be administered at initial assessment and to monitor treatment progress. These set of measures include: the Level 2-Depression which assesses the domain of depression, the Level 2-Anxiety that assesses the domain of anxiety, the Level 2-Anger, a self-report instrument that assesses the domain of anger, the Level 2-Somatic Symptom, which is a 15-item instrument that assesses the domain of somatic symptoms, and the Severity of Dissociative Symptoms. Because these instruments are thought to be used in clinical practice, the availability of normative data represents a relevant issue. To the best of our knowledge, only US normative scores are currently available for these measures. Starting from these considerations, the present study aims at providing internal consistency estimates, factor structure data and Italian normative data (i.e., T scores) for these instruments. *Methods:* Three independent samples were collected. The Level 2-Depression, and Level 2-Anxiety scales were administered to 2,378 community-dwelling participants (50% male; age range: 18-88 years). An independent sample of community-dwelling adults completed the Level 2-Anger scale (N = 1,966; 50% male; 18-88 years), whereas a third independent sample of 1,686 community adults (50% male; age range: 18-88 years) completed the Level 2-Somatic Symptom and the Severity of Dissociative Symptoms scale. Cronbach's alpha and mean inter-item correlation coefficient was used as an internal consistency measure; item-level confirmatory factor analysis was used to test the unidimensionality of the scales. *Results:* The Level 2-Depression, Level 2-Anxiety, Level 2-Anger, Level 2-Somatic Symptom, and the Severity of Dissociative Symptoms scales were provided with adequate reliability also in their Italian translation. The factor structure of the measures supported the possibility to rely on their respective total scores, and normalized T-score were provided. *Discussion:* As a whole, these findings supported the basic psychometric properties of selected DSM-5-TR assessment measure. Finally, the possibility to rely on



Italian T-scores for these measures offers clinicians the opportunity to administer these measures in clinical practice.

The Italian Version of the Perth Alexithymia Questionnaire – Short form (IT-PAQ-S): Structural validity, psychometric properties, and cut-off scores

*Alessandro Alberto Rossi*¹, *Federica Taccini*², *Luisa Orrù*¹, *Stefania Mannarini*¹

¹ Department of Philosophy, Sociology, Education, and Applied Psychology, Section of Applied Psychology, University of Padova, Padua, Italy

² Department of Developmental Psychology and Socialisation, University of Padua, Padua, Italy

Abstract

Background: In recent years, the construct of alexithymia has been widely studied because it is an important transdiagnostic risk factor for several psychological difficulties such as anxiety and depression. Given its importance, precise, feasible, and effective measurement tools are essential. To date, Toronto Alexithymia Scale20 (TAS20) is currently one of the most important questionnaires measuring alexithymia – despite its psychometric properties are not fully satisfactory and its length – often – precludes its use in long assessment batteries. Thus, this work aimed to provide a preliminary validation of the Italian version of a new promising and brief instrument (6 items) examining alexithymia: the Perth Alexithymia Questionnaire – Short form (IT-PAQ-S). *Methods:* 225 participants were enrolled from the general population [56 males and 169 females; aged from 18 to 70 (mean = 38.01, SD = 14.69)]. A battery of questionnaires comprising Toronto Alexithymia Scale20 (TAS20), Emotion Regulation Questionnaire (EQR), Italian DERS Short Form (IT-DERS-SF), Patient Health Questionnaire9 (PHQ9), and Generalized Anxiety Disorder7 (GAD7) was administered. A confirmatory factor analysis (CFA) was conducted to test the factorial structure of the IT-PAQ-S. Hence, psychometric properties such as convergent validity were assessed. Lastly, a ROC curve was performed to provide cut-off scores identifying problematic vs non-problematic alexithymia. *Results:* CFA confirmed the single-first-order factorial structure of the IT-PAQ-S, which provides good fit indices: $\chi^2(9) = 20.421$; $p = 0.015$; RMSEA = 0.075; CFI = 0.998; SRMR = 0.038. McDonald's omega coefficient showed good internal consistency (0.82). Analysis of psychometric properties revealed optimal convergent validity among IT-PAQ-S and aforementioned questionnaires. Lastly, the ROC curve shows that a score of 14 on the IT-PAQ-S correctly identifies 90.2% of individuals with problematic and those with non-problematic alexithymia (AUC = 0.856, sensitivity = 0.87, specificity = 0.70). *Conclusion:* This study provided evidence that the



IT-PAQ-S is a valid and reliable measure of alexithymia. The shortness of the IT-PAQ-S and its strong psychometric properties make it particularly useful for both research and clinical practice.



Validation of the Short Mood And Feelings Questionnaire (SMFQ) in a sample of Italian adolescents

Luisa Almerico¹, Anna Pezzella¹, Simone Pisano², Gennaro Catone³

¹ Department of Psychology, University of Campania “Luigi Vanvitelli”, 80120 Naples, Italy

² Department of Translational Medical Sciences, Federico II University, Naples, Italy

³ Department of Educational, Psychological and Communication Sciences, Suor Orsola Benincasa University, Naples, Italy

Abstract

Introduction: Depression is a widespread mental disorder in adolescence associated with several negative outcomes, such as increased suicide risk, delinquent or risky sexual behaviours, self-harm and worse quality of life in adulthood. Therefore, it is very important to identify valid and easy to administer instruments for depression screening in adolescence. The Short Mood and Feelings Questionnaire (SMFQ) is a widely used screening tool for depression in many countries, but it has not yet been validated with Italian adolescents. This study aimed to examine the psychometric properties of the Italian version of the SMFQ. *Methods:* Preliminarily, the SMFQ was adapted to Italian, and the face validity was verified with the back-translation procedure and by administering it to a small sample of Italian adolescents. Subsequently, the scale was administered to a sample of 580 subjects (317 males, 263 females) aged between 14 and 20 years in combination with another measure for assessing validity. In particular, the Personality Assessment Questionnaire – short form (PAQ-SF) or the Weinstein’s Noise Sensitivity Scale (WNSS) was administered to evaluate convergent and divergent validity respectively. *Results:* The Italian SMFQ showed excellent internal consistency ($\omega=.90$). In line with the literature, a correlated two-factor model, measuring “affective-somatic” and “cognitive” symptoms had the better fit, CFI = 0.97, TLI = 0.97, RMSEA = 0.07. The model also showed good convergent, $r_s > .55$, and divergent validity, $r_s < .234$. *Discussion:* The SMFQ is confirmed to be a valid and short scale that can be used as a screening measure to identify depression in Italian adolescents.



Inter-rater reliability of the Italian Translation of the Structured Clinical Interview for DSM-5 Disorders (SCID-5-CV): A Preliminary Study

Chiara Arioli^{1,2}, Giorgia Casasco²

¹ School of Psychology, Vita-Salute San Raffaele University, Milan

² Clinical Psychology and Psychotherapy Unit, San Raffaele Turro Hospital, Milan, Italy

Abstract

Introduction: The aim of the present study was to evaluate the inter-rater reliability of the Italian translation of the Structured Clinical Interview for DSM-5 Personality Disorders - Version for the Clinician (SCID-5-CV), in a psychiatric sample of adult patients. *Methods:* To assess the inter-rater reliability of SCID-5-CV diagnoses, one clinician administered the interview flanked by a second evaluator (i.e. pairwise design interview); both independently issued a diagnosis. The sample consisted of 79 adult clinical participants (44.0% females; mean age of participants = 42.20 years, SD = 15.18 years) who were consecutively admitted to the treatments for psychiatric disorders and referred for personological problems to the Clinical Psychology and Psychotherapy Unit of San Raffaele Turro Hospital, Milan, Italy. *Results:* In our sample, we were able to assess the inter-rater reliability of the following disorders: Schizophrenia, Mood Disorders, Bipolar and Related Disorders, Substance Use Disorders, and Anxiety Disorders, i.e., disorders that had a base rate greater than 5. Our results indicate that SCID-5-CV diagnoses showed an adequate inter-rater reliability. Specifically, Cohen's coefficient value k was 1 for Schizophrenia (current), .918 for Mood Disorders (current), .940 for Bipolar and Related Disorders (current), .901 for Substance Use Disorders (current) and .780 for Anxiety Disorders (current) (all $p < .001$). *Discussion:* The analyses in the present study support the hypothesis that the diagnoses obtained through the SCID-5-CV interview administration have an adequate inter-rater reliability, at least in a sample of adult clinical participants.



Are PID-5 personality traits and self-harm attitudes related? A study on a young adult sample pre-post COVID-19 pandemic

Francesca De Salve¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: The need to distinguish between the different types of self-injurious behavior has arisen over the years. This necessity led to the identification of three different terminologies: suicidal ideation, Non-Suicidal Self-Injury (NSSI), and suicidal behavior. Many studies confirm a stronger link between maladaptive personality traits and Non-suicidal Self-injury (NSSI). Additionally, the interest in the relationship between the experience of the COVID-19 pandemic and NSSI is growing, and recent research suggests loneliness should be considered one of the triggers able to exacerbate self-injurious behaviors. The present study aims (a) to investigate differences in personality traits between individuals with NSSI, suicidal ideation, NSSI and suicidal ideation co-occurrence and none; (b) to observe which personality traits predominantly influence the occurrence of self-harm acts; (c) to evaluate the difference in self-harm attitudes pre and post COVID-19 pandemic. *Methods:* 270 (108 males and 162 females) participants aged between 18 and 25 recruited at Niguarda Hospital (Milan) were included in the study. Everyone participated in a clinical interview and completed an assessment consisting of the Personality Inventory for DSM-5 (PID-5) and the Health of the Nation Outcome Scales (HoNOS). PID-5 and HoNOS permit to respectively evaluate the dysfunctional personality traits and NSSI. A multivariate analysis of variance (MANOVA), a multiple hierarchical regression analysis, controlling for age and gender, and a T-test for independent samples were conducted. *Results:* The individuals with the highest levels of negative affectivity, detachment, antagonism, and psychoticism are those who simultaneously present suicidal ideation and NSSI. Moreover, age and detachment predicted higher scores in self-harm attitudes. Our results unexpectedly do not confirm an upward trend of NSSI and suicidal ideation during the pandemic period. *Conclusions:* the results obtained by the present studies are in line with the previous ones which considered dysfunctional personality traits as risk factors for suicidal behavior. Understanding the role of maladaptive traits should be considered fundamental to a greater understanding of NSSIs. Moreover working clinically on those could potentially reduce self-harm attitudes.



Assessing Narcissism in Psychotherapy Clients: The Psychometric Properties of the Five-Factor Narcissism Inventory-Short Form and Super Short Form Scales

Linda Boscaro ¹, Davide Carlotta ²

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

² Clinical Psychology and Psychotherapy Unit, San Raffaele Turro Hospital, Milan, Italy

Abstract

Introduction: The Five-Factor Narcissism Inventory (FFNI-SF) is a 60-item self-report measure developed to assess grandiose and vulnerable features of narcissism. Moreover, it allows for assessing the tripartite model of narcissism (i.e., Antagonism, Agentic Extraversion, and Neuroticism). The FFNI-SF showed solid psychometric properties, and recently a super-short form named FFNI-Super Short Form (FFNI-SSF) has been developed. Despite these promising findings, further research is needed to test the psychometric properties of the FFNI-SF in clinical samples. Against this background, a major aim of this study was to assess the internal consistency, factor structure, and validity of the FFNI-SF, and FFNI-SF in a large sample (N = 580; 63% female; mean age = 32.9 years; SD = 12.83) of psychotherapy participants. *Methods:* Participants were administered the Italian translations of the FFNI-SF, Pathological Narcissism Inventory (PNI), Level of Personality Functioning Scale-Brief Form (LPFS-BF), and Personality Inventory for DSM-5 (PID-5). Cronbach's alpha and mean inter-item correlation coefficients were used to evaluate the internal consistency of the FFNI-SF and FFNI-SSF scales. Principal component analysis (PCA) was used to assess the two and three factor structure of the FFNI-SF, as well as the three-factor structure of the FFNI-SSF. Bivariate and multivariate analysis were used to assess the relationships between the LPFS-BF and PID-5 scales and FFNI-SF, and FFNI-SSF scales, respectively. *Results:* The FFNI-SF and the FFNI-SSF were provided with adequate reliability (i.e., all Cronbach's alpha >.70), and the theoretical three-factor structure of the FFNI-SF scales and the FFNI-SSF items was confirmed; support was also found for the FFNI-SF. Finally, significant and meaningful relationships were observed between FFNI-SF scales and AMPD Criterion A and Criterion B measures. *Discussion:* As a whole, the results of the present study supported the possibility to rely on the FFNI-SF as a self-report measure of narcissism in psychotherapy contexts. The availability of a super-short form of the FFNI (FFNI-SSF) may be particularly useful for monitoring psychotherapy outcomes, particularly in intensive longitudinal studies.



The influence of exposure to social-fitness content on self-esteem, perfectionism and body image: study on a sample of young italian adults

Benedetta Frusi¹, Martina Lattanzi¹, Andrea Gambarini¹, Ilaria Polenghi¹, Anna Lucia Ogliari¹

¹ Faculty of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

The present study aimed to investigate whether there is an influence of fitness content posted on image-based social networks on three variables that represent risk factors for the development of eating disorders: low self-esteem, perfectionism and body dissatisfaction. A total of 149 subjects between the ages of 18 and 28 were interviewed, who filled in a self-administered questionnaire disseminated via the Instagram and WhatsApp platforms to carry out an avalanche sampling. The questionnaire is divided into five parts: the first two sections include questions about socio-demographic characteristics and the use of social networks. Subsequently, the scales that would have measured the three variables of interest were administered: the Body Shape Questionnaire to assess dissatisfaction with body shape, the Rosenberg Self-Esteem Scale to investigate self-esteem and, finally, the Perfectionistic Self-Presentation Scale, to measure the subjects' level of perfectionism. After carrying out descriptive analyses, a correlational study was performed to assess whether there were significant relationships among the scales. Then, mean comparisons were conducted between the experimental group, made up of subjects who follow fitness accounts on social networks, and the control group, made up of those who do not follow this type of account, for each scale. Finally, further mean comparisons were carried out to investigate whether there were any differences in the variables considered with respect to the time spent surfing online. Correlational analyses showed that all scales were moderately correlated with each other. In contrast, the independent-samples T-tests showed that subjects who usually come across fitness-related content on social networks showed a greater tendency not to reveal their imperfections. The Kruskal-Wallis tests showed that spending more time on SNs has negative consequences on both body satisfaction and self-esteem of the users. This research suggests that the use of image-based social networks, to learn about the world of fitness has an impact on the three risk factors for the development of DCA that were considered. In this way it will be possible to implement tools, both for prevention and intervention on eating disorders, that are more specific to the influence that fitness content published on social networks has on users.



Saturday, 16th September 2023

SYMPOSIUM SESSION



**A BRAVE NEW WORLD OF PERSONALITY AND PSYCHOPATHOLOGY: TOWARDS A
MULTI-DISCIPLINARY ASSESSMENT OF TRANS-NOSOGRAPHIC HITOP SPECTRA**

Proposer

*Andrea Fossati*¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Discussant

*Maria Catena Ausilia Quattropani*¹

¹ Department of Education, University of Catania, Catania, Italy

Abstract

Recently, a quantitative classification of psychopathology named the Hierarchical Taxonomy of Psychopathology (HiTOP) has been proposed as an alternative to traditional categorical classifications of psychopathology (Kotov et al., 2017). The HiTOP model is grounded in empirical research and aims at developing a classification system based on available evidence on broad dimensions of mental disorders and maladaptive personality. The HiTOP empirical enterprise is based on the recognition that traditional diagnoses have fundamental limitations (e.g., arbitrary thresholds between disorders; heterogeneity and high rates of comorbidity across disorders), and aims at facilitating both clinical practice (i.e., transdiagnostic intervention), and mental health research (i.e., improve our understanding of the continuities between psychopathological dimensions, dysfunctional personality profiles, and even potentially adaptive features). Against this background, the symposium will cover different applications of this dimensional approach, spanning from source monitoring as a transdiagnostic dimension, altered neuroception as a shared psychopathological mechanism, to vulnerability to internalizing disorders, and latent structures of psychopathology and personality dysfunctions.



Specificity and overlap of cognitive vulnerability factors to anxiety symptoms

Barbara Penolazzi¹

¹ Department of Life Sciences, University of Trieste, Trieste, Italy

Abstract

The belief that the lack of sufficient information/controllability is harmful and the following inability to cope with this perception (i.e., intolerance of uncertainty, IU) is thought to be a fundamental vulnerability factor to generalized anxiety disorder (GAD). The belief that anxiety or anxiety-related physical arousal can have undesirable and damaging consequences and the following inability to cope with this perception (i.e., anxiety sensitivity, AS) is considered a major vulnerability factor to panic attack disorder (PAD). The belief of being constantly subject to the judgment of others and the following inability to cope with this perception (i.e., fear of negative evaluation, FNE) is deemed a key vulnerability factor to social anxiety disorder (SAD). Despite the fact that these cognitive vulnerability factors are disorder-specific, each of them also characterises different anxiety conditions and meta-analytic data suggest a common etiologic core factor shared among them. However, the degree to which each vulnerability is associated with the various anxiety symptoms has not yet been clarified, so I addressed this issue in the present study, by collecting self-report measures of the three vulnerabilities factors and the specific symptoms of GAD, PAD, SAD in a sample of healthy volunteers (N=495). To evaluate the extent to which vulnerabilities specifically and redundantly predict the presence of a given symptom class, I relied on commonality analysis, a powerful tool to detect unique and overlapping variance between multiple factors. Results showed that the common partition regarding all the vulnerabilities explained the highest proportion of variance for GAD and SAD symptoms, whereas AS was the most relevant predictor for PAD symptoms. Unexpectedly, AS provided the largest unique statistical contribution not only to PAD, but also to GAD and SAD symptoms. Taken together, the results indicate that, on the one side, a core cognitive vulnerability, common to the three investigated factors, was able to explain different anxiety symptoms, whereas, on the other side, AS was the most relevant specific transdiagnostic vulnerability factor within this symptom classes. Overall, the present findings suggest a mixed pattern of specificity and redundancy of the examined cognitive vulnerabilities factors in determining the different anxiety symptoms.



Latent structures of psychopathology and personality dysfunctions from the HiTOP perspective

Andrea Fossati¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

Introduction: The Hierarchical Taxonomy of Psychopathology (HiTOP) is a research effort aiming at developing a quantitative classification of psychopathology. The DSM-5 Alternative Model of Personality Disorder (AMPD) dimensional trait model closely aligns with the HiTOP model; rather, there is currently no explicit reference within HiTOP to the AMPD Criterion A (i.e., impairment in self and personality functioning). Against this background, the present study aims at assessing the relationships between dysfunctional personality (i.e., AMPD Criterion A and Criterion B) and psychopathological symptoms from the HiTOP perspective. *Methods:* A sample of 857 community-dwelling adults was administered the DSM-5 Level 2 Anger, Anxiety, Depression, Alcohol Use Disorders Identification Test, Drug Use Disorders Identification Test, Personality Diagnostic Questionnaire-4+ Antisocial Personality Disorder Scale, Mood Disorder Questionnaire, Prodromal Questionnaire-16, Brief Obsessive-Compulsive Scale, Level of Personality Functioning Scale-Brief Form, and Personality Inventory for DSM-5. *Results:* Dimensionality analysis results suggested to extract a number of components ranging from 3 to 6; when six principal components were extracted, Goldberg's bass-ackwards analysis results were highly consistent with the HiTOP predictions. Interestingly, DSM-5 Alternative Model of Personality Disorders Criterion A impairment in self functioning indicators yielded meaningful relationships with the general psychopathology component (i.e., first unrotated principal component), as well as with specific principal components at the sixth level of hierarchy. *Discussion:* As a whole, these findings may provide useful insights on the continuity between psychopathology symptoms and dysfunctional personality, helping to clarify their reciprocal relationships.



Source monitoring as a transdiagnostic dimension

Antonella Somma¹

¹ School of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

Introduction: Source monitoring (i.e., the ability to remember the origin of information) is based on memory characteristics recorded such as perceptions, contextual information or emotional reactions. Previous studies showed the associations between source monitoring impairments and psychotic symptoms, mania or obsessive-compulsive disorder symptoms. Moreover, source monitoring impairments have been found to be associated with schizotypal personality traits. However, a dearth of studies examined the relationships between source monitoring deficits and dysfunctional personality traits. Against this background, the present study aimed at examining the association between the performance on a source monitoring task and dysfunctional personality, with particular reference to antagonistic personality features. *Methods:* A sample of 295 community-dwelling adults (65% female; mean age = 33.8 years, SD = 15.3 years, age range: 18-80 years) was administered a source monitoring task which consisted of watching photographs, and hearing lists of objects seen by other participants. Soon after that, subjects were asked to make a source monitoring judgment by indicating who originally saw the item. Moreover, participants were administered the Italian translation of the Community Assessment of Psychic Experiences-Positive scale, the Creative Experiences Questionnaire, the Revised Green et al. Paranoid Thoughts Scale, the Brief Dissociative Experiences Scale, as well as measures of dysfunctional personality traits, self and interpersonal functioning, and narcissistic personality features. *Results:* Source monitoring index was significantly and positively associated with psychotic-like experience measures, as well as dissociative experience; notably, narcissistic features showed meaningful association with source monitoring index. Partial correlation analysis showed that dysfunctional personality played a role in the association between source monitoring and psychotic-like experience. *Discussion:* As a whole, these findings seemed to suggest the usefulness of considering source monitoring deficits as a transdiagnostic dimension that could be used to identify susceptibility to different expressions of psychopathology.



The polyvagal theory: from neurophysiologic research to clinical practice

*Vincenzo Caretti*¹, *Gaia Cuzzocrea*¹, *Marta Mascanzoni*¹, *Camilla Guccione*¹, *Cristiana Alessia Guido*^{2,3}, *Alberto Spalice*², *Lucia Sideli*¹

¹ Department of Human Sciences, LUMSA University of Rome, Italy

² Pediatric Neurology Division, Department of Maternal Sciences, Sapienza University, Italy

³ Department of Developmental and Social Psychology, Faculty of Medicine and Psychology, Sapienza University of Rome, Italy

Abstract

Introduction: The Polyvagal Theory (PVT; Porges, 2011) has gained increased attention as an explanatory model to understand self and emotion dysregulation disorders according to a biological, psychological, and relational framework. *Methods:* This presentation will provide an overview of the dorso-vagal, sympathetic, and ventro-vagal systems involved in emotion regulation processes. Next, it will describe the developmental basis of neuroception, through which the individual copes with external and internal threats. Finally, diagnostic and therapeutic implications will be discussed. *Results:* Accumulating literature has suggested that sustained activation of the dorso-vagal (i.e., freezing or shutting down behaviors) and the sympathetic system (i.e., flight or fight behaviors) represents a maladaptive way to cope with early and recent traumatic experiences and are related with several psychopathological conditions. In light of the PVT, psychopathological conditions may be viewed as the result of an altered neuroception, which fosters primitive defenses over the more advanced social engagement system, providing emotion regulation via social connection, safety, and compassion. Neurophysiologic research has provided evidence of impaired ventro-vagal regulation across a range of mental and functional somatic disorders, including gastrointestinal functional disorders, fibromyalgia, and vasovagal syncope. Furthermore, poor vagal efficiency mediated the effect of early and recent stressors on anxiety and depressive symptoms. *Discussion:* Evidence suggests that altered neuroception may be viewed as a core psychopathological mechanism, through which early parental failures and early adversities affect childhood and adult mental health. The self-regulation therapy provides a model of integrating PVT in clinical practice, improving self-regulation and interpersonal abilities, and fostering mind-body integration.



**SEXUAL AND GENDER MINORITIES, MINORITY STRESS AND WELL BEING:
THEORETICAL REFLECTIONS AND CLINICAL IMPLICATIONS**

Proposers

Alessandra Santona¹, Luca Rollè²

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

² Department of Psychology, University of Turin, Turin, Italy

Discussant

Alessandro Taurino¹

¹ Department of Education, Psychology, Communication, University of Bari Aldo Moro, Bari, Italy

Abstract

LGBTQIA+ people, due to a cultural context, but not only, which still cannot be defined as representative of all uniqueness, are constantly victims of events that we now know are related to their belonging to sexual minorities. In particular, discrimination can impact LGBTQIA+ people's lives at the individual, couple, and social levels. Integrating these dimensions seems necessary to implement competent services and interventions. Accordingly, the first contribution presented by the University of Turin applies the Psychological Mediation Framework (PMF) to assess the mediating role of general psychological processes in the association between minority stress and well-being among lesbian, gay, and bisexual people. The second contribution presented by the University of Palermo is focused on slut-shaming towards LGBTQIA+ individuals. Through focus groups and interviews, the authors highlighted complex conflicting feelings due to internal and external oppression among the participants. Findings may advance understanding of slut-shaming experiences among LGBTQIA+ individuals. The third contribution presented by the University of Turin and Milan-Bicocca focuses on factors associated with the perpetration of isolating behaviors among lesbian and gay couples. Assessing the role of adult attachment and minority stress, the authors found a significant effect only of attachment anxiety, providing preliminary theoretical and clinical preliminary insights. The fourth contribution presented by the University of Milan-Bicocca explores the gender experience of cisgender and transgender/gender non-conforming people within the Italian context, providing an overview of the current



conceptualization concerning gender categories, meanings, and personal and cultural experiences related to gender.



Between the rails: An exploratory study on gender issues in an Italian sample

Chiara Fusco¹, Laura Gorla¹, Fabio Bianco Madau¹, Alessandra Santona¹

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

Abstract

Considering gender identity as a direct fallout of biological sex is defined as gender binarism, which allows the existence of only two mutually exclusive genders (Scandurra et al., 2016; Meyerowitz, 2003; De Leo, 2021). However, people tend to experience gender identity in a much less binary way than traditionally expected (Joel et al., 2013). Building on these relevant theoretical and clinical assumptions, the following study aimed to deepen Joel and colleagues' work within the Italian context by exploring the gender experience of cisgender (or people who identify with the gender assigned at birth) and transgender/gender non-conforming people (TGNC, those who do not identify with the gender they were assigned at birth). For this purpose, we administered an online questionnaire to 305 individuals living in Italy. Respondents were divided into two groups: young adults (18 – 27 years old) and adults (28 – 60+ years old). The questionnaire comprised two sections. The first part collected quantitative data through the Multi-Gender Identity Questionnaire (Multi-GIQ, Joel et al., 2013) and the Bem Sex Role Inventory (BSRI, 1979). The second section aimed to collect qualitative data through two open-ended questions on the perception of gender identity social models and one's own gender identity and personal life experience. Statistical analysis and qualitative Thematic Analysis showed that the study's results align with and add to previous literature (Joel et al., 2013). We found that TGNC people were more represented among the younger group and reported a more fluid gender identity. More than cis men, cis women tended to self-attribute traits of the opposite gender. Cis men and women showed different levels of gender satisfaction and desire to be born of the other gender in different generational groups. Younger cisgender people more easily represented their gender experience as they were between being a man or a woman. Cis women were similar to TGNC people in their conception of gender as a performance, showing a less essentialist conception of gender. The present research provides an overview of the current conceptualization of gender and gender identity within the Italian population concerning gender categories, meanings, and personal and cultural experiences related to gender.



LGBTQIA+ community and slut-shaming: A melange of protective and risk factors. How grounded theory can help in understanding slut-shaming exposure in sexual minority individuals

Chiara Urone¹, Ginevra Passiglia¹, Giulia Graceffa¹, Paola Miano¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: Slut-shaming is a sexual stigmatization that consist in a form of discrimination against those who do not respect gender stereotypes in terms of external appearance, behavior and attitude. In fact, when people do not conform to gender roles and stereotypes, their behavior is sanctioned through slut-shaming. Therefore, LGBTQIA+ individuals may actually be exposed to specific forms of slut-shaming in regard to their sexual orientation, gender identity or gender expression. *Methods:* We recruited a sample (N= 36) from an Italian university, and we conducted some focus groups and interviews focused on the participants' slut-shaming experiences and on the factors that influenced their disclosure. We aimed to explore young adults' slut-shaming victimization in relation to their sociocultural context and their perception of the phenomenon. We employed grounded theory in order to understand how young adults deal with slut-shaming, and we analysed the role of social community, developmental and situational factors. In conclusion, we considered the influence of the stigmatization process on slut-shaming experiences and disclosure processes. *Results:* We identified some specific elements concerning slut-shaming experiences in LGBTQIA+ individuals, and thus we tried to analyze this peculiarity relying both on personal participants' experiences and on theoretical knowledge. The transcripts were divided into 986 meaning units and analysis produced 157 initial codes which created 23 subcategories. We identified 6 core categories useful to explain slut-shaming exposure and we focused on the "LGBTQIA+ and slut-shaming" core category in order to identify the specific risk and protective factors involved in sexual minority individuals' experiences. Particularly, the main risk factors are represented by: a) the development of negative affects, b) the inhibition of personality, c) the increase of exposure to other forms of harassment. *Discussion:* We found that slut-shaming victimization is not uniformly experienced, and that disclosure process is influenced by several social and cultural factors. In fact, narratives highlighted complex conflicting feelings caused by a pervasive internal and external form of oppression.



The findings of this study could be of assistance in recognising and understanding slut-shaming experiences in LGBTQIA+ individuals.



“Stigma gets under the skin” in Italy too: The role of emotion dysregulation in the association between experiences of discrimination and negative affect in lesbian, gay and bisexual people

Tommaso Trombetta¹, Luca Rolle¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

As largely demonstrated in the last decades, minority stress influences LGBTQIA+ people’s wellbeing. More recently, studies are focusing on mechanisms that can regulate this association in order to inform clinical settings, services, and interventions. Drawing from the Hatzenbuehler’s Psychological Mediation Framework, the current study aimed to assess the relation between experiences of discrimination and negative affect, exploring the mediating role of emotion dysregulation. Two hundred and forty-three lesbian, gay, or bisexual people (49.1% female) aged between 20 and 76 years ($M = 30.67$; $SD: 10.45$) completed the online questionnaire. The results demonstrated a direct association between experiences of discrimination and emotion dysregulation ($b: 0.14$; $se: .05$; $p < .05$), and between emotion dysregulation and negative affect ($b: 0.76$; $se: .55$; $p < .001$). Experiences of discrimination were indirectly associated to negative effect through emotion dysregulation ($b: 1.11$; Bootstrap $se: .43$; $CI: 0.30; 1.97$), while the direct association between these variables was not significant ($b: -0.02$; $se: 0.44$; $p .605$). The model was significant and explained the 58% of variance in negative affect. The results are in line with the hypotheses suggested by the PMF and confirm the role of ego depletion processes and emotion dysregulation in the widely supported association between minority stress and wellbeing, providing information useful at clinical level.



How Minority Stress and Adult Attachment influence isolating behaviors perpetration

Tommaso Trombetta¹, Fabrizio Santoniccolo¹, Giacomo Tognasso²

¹ Department of Psychology, University of Turin, Turin, Italy

² Department of Psychology, University of Milan-Bicocca, Milan, Italy

Abstract

The perpetration of isolation behaviors is a poorly investigated form of intimate partner violence (IPV) within same-sex couples. However, given the risk of isolation to which lesbian and gay (LG) people may be exposed because of their sexual orientation, this phenomenon is particularly prominent within this population. The present study aimed to investigate the influence of adult attachment (i.e., attachment anxiety and avoidance) and minority stress (i.e., experiences of discrimination, perceived stigma, and internalized homonegativity) on the perpetration of isolation behaviors within same-sex couples. One hundred and seventy-eight LG people (53.1% female) aged between 20 and 76 years ($M = 31.11$; $SD = 10.639$) involved in a same-sex relationship completed an online questionnaire. The multiple regression model was significant and explained the 17.9% of the variance in isolating behaviors perpetration. However, only attachment anxiety was significantly and positively associated with perpetration of isolating behaviors ($b: 0.022$; $p < .001$), while attachment avoidance ($b: 0.003$; $p .605$), experiences of discrimination ($b: 0.004$; $p .432$), perceived stigma ($b: 0.004$; $p .863$), and internalized homonegativity ($b: 0.007$; $p .581$) were not. The results seem to suggest that controlling forms of IPV are less related to stressful situations and contextual and isolating difficulties in coping with conflict and intense affect, but rather to more stable features of psychological functioning, as found in our sample in relation to the tendency to hyperactivate the attachment system. However, further studies are needed to deepen our findings.



CARING FOR THE CARER: HOW TO SUPPORT HEALTH PROFESSIONALS ENGAGED IN PARTICULARLY DEMANDING HEALTH CARE SETTINGS, SUCH AS ONCOLOGICAL ILLNESS, PALLIATIVE AND PANDEMIC CARE, OR SEVERE MENTAL DISEASE?

Proposers

Elena Faccio¹, Michele Rocelli¹

¹ Department of Philosophy, Sociology, Education and Applied Psychology University of Padua, Padua, Italy

Discussant

Maria Francesca Freda¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

Over the past decades, a growing body of research has highlighted the prevalence of critical psychological situations in professionals with a strong social welfare content, where the care relationship is characterized by strong emotional aspects and implies the use of personal skills to an equal or even greater extent than professional ones. Indeed, caring for the person and not just the disease requires professionals who have direct contact with the patient at high health risk to confront above all their own emotional experiences, fears and fragilities. "The mental and physical well-being of health professionals should have the highest priority in the promotion of public health" (Lancet Editorial), it is evident how this should be considered an important factor of intervention, which in turn can affect the quality of life of the patient. The symposium aims to investigate the experience and difficulties of practitioners in four different contexts with high emotional impact: that of palliative care, that of oncological illness, that of health care workers during the Covid-19 pandemic, and that of mental health professionals working with severe mental illness. Various strategies will be presented and discussed to preemptively recognize symptoms of depression and posttraumatic stress disorder, to enable the emotional expression and processing of countertransference experience, and to support practitioners in recognizing what has actually worked during their practice. A number of best practices will be identified, some specific with



respect to the professional role involved, and some cross-cutting with respect to the various roles (physicians, psychotherapists, health and mental health workers).



When does a helping relationship become “meaningful” and “transformative”?

Elena Faccio¹, Ludovica Aquili¹, Michele Rocelli¹

¹ Department of Philosophy, Sociology, Education and Applied Psychology University of Padua

Abstract

This paper is in the strand of study that considers the experience of recovery post severe mental distress as an inherently relational process ("relational recovery"). This conceptualization is based on the idea that human beings are interdependent creatures in attributing meaning and significance to their experiences, and that their lives cannot be considered in isolation from the meaningful relationships in which they are embedded, as these can have both transformative and devastating effects. In the present study, 25 people with histories of severe mental distress (depression and bipolar disorder) were interviewed in established and stabilized recovery, at least five years after their last relapse. The interviews were collected at the Trent Mental Health Center and involved both separately and jointly (dual interviews) health professionals who, within their various roles (psychotherapist, psychiatrist, educator), were indicated by the protagonists of the stories themselves as particularly significant people during the recovery process. The interviews were audio-recorded, transcribed and analyzed using both qualitative and quantitative methods. From the results, which are still being processed, many of the elements peculiar to the literature on common factors in psychotherapy as fundamental to the quality of the relationship (therapeutic alliance, emotional acceptance, development of a more positive self-image, understanding and perceived listening) emerged. Other relational characteristics, independent of the specificity of the professional role, were also considered fundamental such as: 1) patience, understood as acceptance of non-change, 2) having chosen a particular professional to confide very intense stories that would not have been entrusted to anyone else, 3) perceived confidence in the favorable outcome of the recovery despite long periods of stagnation, 4) the exceptional nature of some special non-formal moments, 5) personal involvement, and much more. We believe that the outcomes of this study may have great potential in terms of the advancement of knowledge in positive recovery.



Along the unsteady border: a phenomenologic-hermeneutic study on the perception of end-of-life care in Internal Medicine

Diego Donnini¹, Gianluca Villa², Rosapia Lauro Grotto²

¹ School of Human Health, University of Florence, Florence, Italy

² Department of Health Sciences, University of Florence, Florence, Italy

Abstract

Caring for the patient with a terminal illness is a demanding task for the physician, in terms of clinical and emotional skills. In Internal Medicine wards some bad practices may hinder the assistance to the total pain of the patient: some misconceptions are a major issue in determining the severe underutilization that afflicts Palliative Care. The aim of this study is to explore generalist providers' perceptions of the end-of-life care for what concerns both their own task in the medical ward and the collaboration with Palliative Care specialists, in order to highlight the main critical issues. The study has been designed according to the phenomenological-hermeneutical approach. By means of in-depth interviews researchers collected the experience of eight resident doctors among the wards of the University Hospital of Careggi in Florence. Interviews were audio-recorded and transcribed for a consensual thematic analysis. The results display providers' perspective on the procedures that are routinely applied in taking care of the terminal phases of diseases, as well as their intimate response when facing the death of a patient. The emerging themes were organized within the following phenomenological categories: patient characterization, end-of-life decisions, communication of end-of-life issues, end-of-life care in the ward, end-of-life care at home, hospice care, providers' reactions, providers' perceptions of palliative care. This qualitative study depicts the complexity of the social context of care relationships, giving voice to healthcare professionals' experience through their own words and thus enhancing the value of individual contribution to a comprehensive knowledge of end-of-life care. A deep insight of the critical issues that hinder the assistance to the terminally ill patient will promote good new practices and lead future educational interventions.



Healthcare workers and the COVID-19 Pandemic: linguistic predictors of psychological adjustment

Marco Castiglioni¹, Cristina Liviana Caldiroli¹, Attà Negri², Rossella Procaccia³

¹ Department of Human Sciences “R. Massa”, University of Milano-Bicocca, 20126 Milan, Italy

² Department of Human and Social Sciences, University of Bergamo, 24129 Bergamo, Italy

³ Faculty of Psychology, eCampus University, Novedrate, Como, Italy

Abstract

Many studies have shown that HCWs who worked on the front-line during the Covid-19 pandemic period developed symptoms of psychological maladjustment. Identifying early predictors of mental health disorders in this population is key to informing effective treatment and prevention. The aim of this study was to investigate the strength of language-based variables to predict PTSD and depression symptoms in HCWs. One hundred fifty-five HCWs (mean age = 48.22; SD = 12.06) were randomly assigned to one of two writing conditions: expressive writing (EW n = 83) or neutral writing (NW n = 72) and completed three writing sessions. PTSD and depression symptoms were assessed both pre- and post-writing. LIWC was used to analyze linguistic markers of four trauma-related processing (cognitive elaboration, emotional elaboration, perceived threat to life, and self-immersed processing). Changes in PTSD and depression were regressed onto the linguistic markers in hierarchical multiple regression models. The EW group displayed greater changes on the psychological measures and in terms of narrative categories deployed than the NW group. Changes in PTSD symptoms were predicted by cognitive elaboration, emotional elaboration, and perceived threat to life; changes in depression symptoms were predicted by self-immersed processing and cognitive elaboration. Linguistic markers can facilitate the early identification of vulnerability to mental disorders in HCWs involved in public health emergencies. We discuss the clinical implications of these findings.



Countertransference dreams about patients suffering from oncological diseases

Chiara Fioretti¹

¹ Department of Human, Philosophical and Educational Sciences, University of Salerno, Italy

Abstract

Introduction: Very few studies investigated countertransference in psycho-oncological settings and mainly about single case studies reporting emotional responses of therapists. Nevertheless, researches in clinical and psychodynamic psychology field stress the importance of studying countertransference, as well as countertransference dreams, to understand the therapeutic relationship and the patient's experience of suffering. The present work aims to discuss results of a qualitative study on narratives about dreams of countertransference in Italian psychotherapists facing the relationship with patients suffering from an oncological disease. *Methods:* 32 Italian psychotherapists of different approach took part in the present study and narrated their countertransference dreams in relation to the therapeutic relationship with a patient suffering from a tumor. Narratives were collected anonymously and analysed by means of an inductive-data driven thematic analysis as theorized by Braun and Clarke. *Results:* Four main themes emerged from thematic analysis: the theme "crossing the setting boundaries", saturating the 67% of collected narratives and defining the presence in dreams of experience of meeting and supporting the patient in their daily life and out of the clinical setting, "feeding the suffering body and the relationship", "touching the patient" (54%), in which participants narrated the attempt to feel themselves close to a patient touching and embracing them, referring to dreams about experiences of eating with the patient enjoying the feeding experience and saturating the 23% of narratives, and "anguish due to contagion" (18%), referring to psychotherapists' fear of being sick or being infected by the disease and the treatments symptoms. In the 58% of narratives, two or more themes were co-present. No differences in themes occurrence were found considering participants' age, length of service or gender. *Discussion:* The author discusses results considering psycho-dynamic literature about countertransference and evidence on meanings related to the oncological illness experience and psycho-somatic issues. Future directions of the study and ongoing studies are also reported.



**DESIRE FOR PARENTHOOD AND INFERTILITY: PHANTASIES, FEARS AND
PSYCHOLOGICAL ADJUSTMENT OF INFERTILE COUPLES DURING THE
ASSISTED REPRODUCTIVE TECHNOLOGY AND AFTER THE PREGNANCY**

Proposer

*Alessandra Babore*¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Discussant

*Claudia Mazzeschi*¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

The proposed symposium aims to explore the parenthood from the particular perspective of couples who desire to become parents but are hindered in achieving this goal by infertility problems. According to the World Health Organization (WHO), infertility may be considered a global health issue affecting millions of reproductive age individuals worldwide. Recent data (WHO, 2023) suggest that globally one in six people experience the inability to have a child in their lifetime. Despite its spread, infertility is still understudied, especially with respect to its impact on the psychological adjustment of couples and to the outcomes in pregnancies following assisted reproductive technology (ART). To address this issue, the contributions proposed within this symposium aim to analyze couples’ adjustment both during the assisted reproductive technology and after the achievement of pregnancy or the childbirth following ART. Specifically, the University of Chieti’s team will present a study exploring phantasies, fears and distress of couples undergoing ART. The team of Catholic University of Sacred Heart of Milan will explore males’ psychological well-being, analyzing some of their own and their partners’ dimensions that can be considered risk or protective factors. The group composed by the University of Pisa and the University of Urbino will analyze the impact of antenatal hospitalization in women who become pregnant following ART. The University of Bologna’s team will critically discuss an overview of recent research that investigated the post-natal outcomes (parental representations and parent-infant interactions) after



ART in both mothers and fathers. Overall, this symposium aims to offer a chance to integrate several Italian studies considering different aspects (theoretical, research, and clinical) and different moments (during and after ART) of the psychological impact of infertility.

Psychological distress of women who become pregnant through Assisted Reproductive Techniques: What is the impact of antenatal hospitalization?

Martina Smorti¹, Lucia Ponti², Giulia Mauri¹

¹ Department of Surgical, Medical and Molecular Pathology, and Critical Care Medicine, University of Pisa, Italy

² Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Background: Women who become pregnant through Assisted Reproductive Techniques (ART) experience a high psychological distress before and during gestation with an enhanced risk for depression and anxiety. Women who become pregnant through ART tend to report higher level of distress, anxiety, depression for a pending loss of pregnancy than women who conceive naturally. Less is known about how the experience of hospitalization due to high-risk pregnancy impact on stress, anxiety and depression in women who conceived through ART. Literature (not specific for ART conception) showed that antenatal hospitalization constitutes a risk for women's psychological wellbeing. *Aims.* This study aims to compare the level of general anxiety, perinatal anxiety, perinatal depression and prenatal attachment reported by low-risk and high-risk women who conceived through ART. The low-risk sample consisted of women with low-risk pregnancy followed in the routine obstetric care while the high-risk sample consisted of women hospitalized due to high-risk pregnancy. *Methods:* A cross-sectional study on 61 women who become pregnant through ART was conducted. The sample consisted of low-risk group (n=30) and high risk group (n=31). Participants were recruited during routine 3rd trimester obstetric visit (low-risk sample) or during the hospitalization for the high-risk pregnancy (high-risk sample). Participants were invited to completed a self-reported questionnaire composed by: Edinburgh Postnatal Depression Scale, Hospital Anxiety and Depression Scale (Anxiety subscale), Pregnancy Related Anxiety Questionnaire and Prenatal Attachment Index. *Results:* Multivariate analysis of covariance showed higher level of general anxiety ($p<.05$) and perinatal depression ($p<.01$) in the high-risk sample. No difference emerged between high-risk and low-risk sample in perinatal anxiety and prenatal attachment.



Psychological well-being of men undergoing an ART treatment

Sara Molgora ¹, Emanuela Saita ¹

¹ Department of Psychology, Catholic University of Sacred Heart, Milan, Italy

Abstract

Introduction: Literature has shown that an infertility diagnosis and infertility treatments represent potentially stressful experiences that can have significant psychological effects on both women and men, albeit with relevant gender differences. Several studies have reported a high prevalence of anxiety and depressive symptoms. However, the quality of the couple's relationship and partner's support were found to have a protective role in facing infertility-related stress. The present study aimed to investigate the psychological well-being of men undergoing Assisted Reproductive Technology (ART) treatment, analyzing some of their own and partners' dimensions that can be deemed risk or protective factors. *Methods:* A sample of 285 couples undergoing ART treatment was recruited. Each subject completed a self-report questionnaire including a sheet on socio-demographics and medical variables and some measures of psychological (individual and relational) well-being: the ScreenIVF, the Dyadic Adjustment Scale and the Experience in Close Relationship Questionnaire. This contribution specifically will focus on men and their well-being in terms of anxiety and depressive symptoms. *Results:* Findings revealed that, although anxiety and depressive symptoms were significantly associated, different predictive factors emerged for these symptoms. Specifically, the presence of depressive symptoms was predicted by the partner's depressive symptoms as well as her helplessness feeling and attachment anxiety. Anxiety symptoms were predicted by male couple adjustment, lack of perceived social support, and female anxiety. These results showed that men's disease can be expressed in various ways with a different pattern of predictive factors; furthermore, they highlight the dyadic nature of infertility and assisted reproductive technology treatments, as well as the interdependence of men's and female well-being.



Psychological adjustment of infertile couples in the postpartum period: the characteristics of parental mental representations and early parent-infant interactions

Francesca Agostini¹, Marcella Paterlini², Alessandra Provera¹, Erica Neri¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

² Department of Obstetrics and Pediatrics, AUSL-IRCCS, Reggio Emilia, Italy

Abstract

Clinical and empirical literature has recognized Assisted Reproductive Technology (ART) as a stressful condition that may impact on psychological transition to parenthood during pregnancy. However, poor attention has been paid to investigate parental adjustment in the postpartum period, a crucial moment for the parent-infant relationship. We therefore aimed to investigate transition to motherhood and fatherhood in the postnatal period, discussing an overview of recent studies on postnatal outcomes (parental representations and parent-infant interactions) of infertile couples after a successful ART treatment. The first study included a sample of 17 ART conceiving and 25 spontaneous conception (SC) couples; at 3 months postpartum all parents completed the Semantic Differential of IRMAG/IRPAG (Interview of Maternal/Paternal Representations During Pregnancy; Ammaniti et al., 1992, 1995, 2006), a self-report tool to evaluate domains of mental representations according to individual (Child, Self-as-woman/man, and Partner) and parental (Self-as-parent, Own parent) characteristics. The second study aimed to assess the quality of a 5-minute free parent–infant interaction on 25 ART and 31 SC couples and their 3-month-old baby. Fathers, mothers and babies’ interactive patterns were coded using CARE-Index (Crittenden, 1994). Results on mental representations showed that both ART mothers and fathers had significantly higher positive representations of the Child than SC ones. The type of ART treatment (IVF/ICSI) showed a significant influence on the representation of Self-as-woman/man, with higher positive scores in IVF parents compared to ICSI ones. Regarding parent-infant interactions, both ART mothers and fathers showed more frequently “inept” and “at-risk” interactive patterns, compared to SC ones. ART variables significantly influenced interactive behaviours: infants conceived at first ART cycle showed lower scores at Difficulty scale than those conceived after more attempts; ICSI babies got lower scores at Compulsivity and higher at Passivity compared to IVF ones. These findings support the clinical relevance of exploring parents’ psychological adjustment after successful ART treatments, to improve



the understanding of the transition to parenthood in infertile couples and to target more specific interventions when needed.



“The struggle with infertility”: quality of life, distress, phantasies and fears of infertile couples undergoing Assisted Reproductive Technology treatments (ARTs)

Carmen Trumello¹, Carla Candelori¹, Alessandra Babore¹

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: According to recent data (World Health Organization, 2023), infertility affects about 15% of all couples worldwide; assisted reproductive technology treatments (ARTs) represent the most important scientific progress to help couples with this condition to reach the desired parenthood. Although a large body of literature has emphasized the psychological distress faced by individuals seeking medical treatment for infertility, research on couples’ subjective experience (e.g., phantasies, dreams) is scarce. Thus, the aim of the study was twice: to analyse gender differences in quality of life, depression and anxiety and to explore phantasies and fears related to the desire of parenthood and to medical treatments in both males and females. *Methods:* A total of 108 participants (mean age = 38,65; sd = 5,32; 59% females) completed a set of questionnaires analysing quality of life (Fertility Quality of Life, FertiQoL) and distress (Depression Anxiety and Stress Scale, DASS-21). In addition, an ad hoc questionnaire explored phantasies and dreams on pregnancy, phantasies and dreams on the child, desire of pregnancy and child and fears about ARTs and infertility. The reliability of this questionnaire was satisfactory (Chronbach’s alpha = 0.86). *Results:* As for gender differences, depressive levels were higher among women than men ($p = .028$), but no differences emerged on anxiety, stress and total distress. Besides, males showed better quality of life in all domains (emotional, mind-body, relational and social). Finally, females had higher levels of phantasies and dreams on pregnancy ($p = .004$), phantasies and dreams on the child ($p = .039$) and fears about ARTs and infertility ($p = .003$) but no differences were observed on the desire of pregnancy and child. Levels of fears were positively correlated with depression, anxiety, stress and total distress. *Conclusion:* Overall, these results highlight the need for better understanding the subjective experience (in terms of phantasies, dreams, fears) of couples suffering for the condition of infertility, in order to implement tailored care interventions that might attenuate psychological distress.



NOVEL STRATEGIES TO ASSESS THE CREDIBILITY OF REPORTS

Proposer

*Paolo Roma*¹

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

Discussant

*Filippo Aschieri*¹

¹ Department of Psychology, Catholic University of the Sacred Heart of Milan, Milan, Italy

Abstract

It is critically important for practitioners to be able to assess the credibility of symptomatology presented by individuals in both clinical and forensic settings. Consistently, assessing the credibility of what is reported, and the results of psychological testing protocols is a key component of mental health assessment. To this end, the American Academy of Clinical Neuropsychology (AACN) has recently published a Consensus Statement according to which it would be necessary to include in the assessment battery multiple measures, not redundant with each other, that attest to the credibility of the symptomatological presentation reported directly by patients, thus not basing the simulation assessment on a single textological data. To follow these recommendations, research is needed to take action. To illustrate new ways to assess the credibility of an individual's presentation, Colasanti et al. will present an empirical decision-making strategy in interpreting test result that could reliably help professionals to distinguish feigned depression from genuine patients. Along this research line, Monaro et al. will discuss the results of comparing naïve humans, expert raters, and machine algorithms in detecting deception from speech content in the context of the cognitive load framework. Andò et al. will show whether speech analysis (using PRAAT software) during the Rorschach test (R-PAS) can help determine whether a complaint of depressive symptoms can be considered credible or not. Finally, Laera et al. will illustrate the validity and usefulness of the Inventory of Problems-29 (IOP-29) and the Inventory of Problems - Memory module (IOP-M) in a real sample with a criterion-group research design.



How to assess the credibility of a patient with depression? An empirical decision-making strategy in interpreting test results

Marco Colasanti¹, Eleonora Ricci¹, Cristina Mazza²

¹ Department of Psychological, Health and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Neuroscience, Imaging and Clinical Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: In civil and forensic evaluations of psychic damage, depression is one of the most prevalent disorders and one of the most frequently feigned. As a result, practitioners are often required to assess whether the symptomatology presented by a patient is genuine or is being feigned for secondary gains. To detect this feigned symptomatology, many instruments have been developed; even though they are effective, their specificity is fairly low, generating a great number of false positives, especially in the cases of legitimate patients with a severe symptomatology. The present study intended to equip forensic specialists with an empirical decision-making strategy in interpreting test results that will assist them in evaluating patients’ credibility. *Methods:* Employing a simulation between-subjects design, participants were divided into two groups, based on the experimental condition: Honest (subsequently divided into Honest and Patients) and Simulators, for a total of three experimental groups. Three-hundreds fifteen participants were administered a test battery comprised of the Beck Depression Inventory-II (BDI-II) and SIMS Affective Disorders (AF) scale, to which they had to respond honestly or by feigning depression according to prior experimental instruction. Response patterns of these three groups were analyzed, a machine learning (ML) decision tree model was implemented, and a forward logistic regression was run to understand the performance of SIMS Affective Disorders single items in distinguishing between Simulators and Patients. *Results:* J48 model obtained a classification accuracy of about 88.2% and, overall, results indicated that combining symptom validity and clinical tests generated incremental specificity, limiting the risk of bona fide patients being misclassified as feigners. Furthermore, the items’ performance analysis highlighted that Patients were less likely to endorse SIMS 47, 55, and 60 items than Simulators. *Discussion:* Future studies should revise the content of the items in the SIMS Affective Disorders scale, to reach a better accuracy in the discrimination between feigners and bona fide



patients. Overall, these findings confirm how artificial intelligence may sustain forensic practitioners when making complex decisions based on multiple elements.



Inkblots & Voice: Speech analysis during the Rorschach test (R- PAS) as a potential discriminating tool between real and feigned depressive symptoms

Agat Andò¹, Angelica Ferraris¹, Giacomo Aimini¹, Giulia Tomaselli¹, Luciano Giromini¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Introduction: Malingering is defined as the “intentional production of false or grossly exaggerated physical or psychological symptoms, motivated by external incentives” (DSM-5TR), and there are several possible incentives to feign depression, such as disability compensation, insurance claims, medication costs, medical prescriptions, and absenteeism from work. Therefore, the assessment of the extent to which a clinical presentation and the credibility of depressive symptoms are plausible plays a central role in any forensic psychological assessment. The aim of the study is to evaluate whether analysis of speech (using PRAAT software) during the Rorschach test (R-PAS) can help to understand whether a complaint of depressive symptoms can be considered credible or not. *Methods:* Currently recruited participants (N = 80) were asked to either (a) respond honestly or (b) pretend to suffer from depression using a vignette describing a person with symptoms of depression. The honest group consists of nonclinical subjects and subclinical-depressed individuals. *Results:* From the preliminary analyses, it emerges that the Rorschach test reveals statistically significant differences between the three subgroups; specifically, feigners report more R-PAS contents and themes that can be easily manipulated and associated with depressive symptoms such as dysphoria and suffering (MOR, Mean Difference (MD) = 14.90, $p = .04$; CritCont%, MD = 10.05, $p = .04$), feeling insecure and threatened (AGC, MD = 13.7, $p = .05$; AGM, MD = 23, $p \leq .01$) if compared to the subclinical subjects. In addition, the feigners show a tendency toward greater variability in vocal intonation (pitch variability), faster speech (speaking rate), less verbal interruptions (voice breaks), and greater speech intensity (intensity) when compared to the nonclinical and subclinical groups. *Discussion:* The study has the merit of investigating the effectiveness of a multimethod assessment of the credibility of symptoms, but also of particular features of some subclinical individuals. The main limitation concerns the external validity of the study, since simulating for experimental purposes might differ from simulation in real assessments.



Are humans bad evaluators or poor decision-makers in detecting verbal indicators of deception? A Human vs Machine experiment

Merylin Monaro¹, Riccardo Loconte², Stephanie Maldera¹, Chiara Battaglini², Pietro Pietrini², Giuseppe Sartori¹

¹ Department of General Psychology, University of Padova, Padova, Italy

² IMT Scuola di Alti Studi Lucca, Lucca, Italy

Abstract

In the field of psychology, several methods have been developed to analyse speech content to distinguish between genuine or deceptive narratives. On the one hand, the Reality Monitoring (RM) framework relies on specific criteria to assess the veracity of statements. On the other hand, the Cognitive Load (CL) framework suggests that lying increases the liars' cognitive effort required to produce credible statements.

With the arise of the most modern techniques in Natural Language Processing (NLP), also the Artificial Intelligence community has exhibited considerable interest in the automated detection of deception from speech content. While a growing body of evidence indicates that machines are reliable in classifying deception, whether humans are poor evaluators or poor decision-makers in this regard has yet to be fully explored. To this aim, we compared the performance of naïve humans, expert raters, and machine algorithms in classifying deception from speech content. We employed a new dataset of transcribed records collected in low-stakes interviews designed to increase liars' cognitive load by posing unexpected questions. Firstly, humans were required to provide a gut-decision, while experts evaluated each transcribed text using Reality Monitoring criteria before making their decisions. Secondly, Machine learning algorithms were built to classify texts based on linguistic features extracted through LIWC scoring and NLP techniques. Finally, to disentangle whether humans are bad evaluators or bad decision-makers, we built a new classifier based on the RM scores provided by expert humans. The results of the comparison between human and machine performance in detecting deception from speech content are discussed in the context of the CL framework.



An Inventory of Problems (IOP) study of symptom and performance validity in a sample of driving license renewal applicants

Domenico Laera¹, Giuseppina Barbara¹, Maria Carucci², Dora Chiloiro¹

¹ Clinical Psychology Service, Mental Health Department, ASL Taranto, Taranto, Italy

² Mental Health Department, ASL Bari, Bari, Italy

Abstract

Assessing the credibility of presented psychological problems is a key component of forensic mental health assessment. To this end, professionals are encouraged to include multiple symptom validity tests (SVTs) and performance validity tests (PVTs) in their battery of tests. To save time for both professionals and test takers and to improve the cost-benefit ratio, Giromini et al. (2020) recently introduced the Inventory of Problems - Memory module (IOP-M), a short, 34-item forced-choice PVT that is administered in conjunction with the Inventory of Problems - 29 (IOP-29), a short, self-administered 29-item SVT. While the IOP-29 and the IOP-M have been widely studied using a simulation design, there have been relatively fewer studies that have examined their validity and utility using real-world samples with a criterion-group research design. The current study aims to fill this gap by examining the IOP-29 and IOP-M results of 122 individuals who had applied for renewal of their driver's license after their license had been revoked. These individuals had no reason to exaggerate their symptoms; rather, they were likely motivated to inflate their positive traits because adequate cognitive functioning was required to obtain the requested driver's license renewal. The results showed that a nontrivial percentage of these individuals suffered from moderate or mild cognitive impairment, such that some of them could not obtain the renewal they applied for. Nevertheless, with few exceptions, the IOP-29 and IOP-M of these protocols appeared entirely credible. Taken together, these results suggest that the presence of mild cognitive impairment is not a likely explanation for failure on the IOP-29 and/or IOP-M. More broadly, this study thus contributes to the growing body of evidence supporting the validity and efficacy of these brief symptom and performance validity tests.



THE KEY ROLE OF CLINICAL PSYCHOLOGY IN HEALTH SETTINGS

Proposer

*Gabriella Martino*¹

¹ Department of Clinical and Experimental Medicine, University of Messina, Messina, Italy

Discussant

*Gianluca Castelnuovo*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

This symposium highlights the crucial role of clinical psychology in patients suffering from medical diseases. The contributions allow a deeper knowledge of psychological experience in health settings, in line with the body-mind processes. Life expectancy is increasing world-wide and age-related illness embodies an important health concern. Chronic conditions impact perceived quality of life, leading to psychological distress. Psychological features may also impact patient's behavior, conditioning the managing of chronic illness. Four contributions highlighting how psychopathological factors may influence health related experience, including adherence, compliance and treatment strategy, will be presented. The first contribution (Silvestro O., et al.) aims to explore clinical psychological features in patients with Crohn's disease and ulcerative colitis, including coping and defense strategies. The second contribution (Ciacchini R., et al.) explores the link between mindfulness and defense mechanisms in psychopathological disturbances. The third contribution (Rosa I., et al.) examines the impact of gastrointestinal symptoms and psychological distress on health related quality of life, in patients with Crohn's disease and ulcerative colitis. The fourth contribution (Spatola C., et al.) shows a brief multi-disciplinary ACT programme for improving modifiable risk factors in people with coronary heart disease.



The key role of clinical psychology factors in inflammatory bowel diseases

*Orlando Silvestro*¹, *Antonino Catalano*², *Peter Schwarz*³, *Walter Fries*², *Gabriella Martino*²

¹ Department of Health Science, Magna Graecia University of Catanzaro, Catanzaro, Italy

² Department of Clinical and Experimental Medicine, University of Messina, Messina, Italy

³ Department of Medical Endocrinology, Copenhagen University Hospital, Copenhagen, Denmark

Abstract

Introduction: The inflammatory bowel diseases (IBDs) represent a group of non-infectious, chronic, relapsing disorders of the gastrointestinal tract of unknown aetiology, driven by an inappropriate immune response in genetically susceptible hosts. Primarily, IBDs include Crohn's disease (CD) and ulcerative colitis (UC). The prevalence of IBDs increased substantially from 1990 to 2017, not only in the high-income nations, but also in the more recently developed areas. Overall, IBDs affect more than 6.8 million people worldwide, representing a serious medical, psychological and social burden due to patient's debilitating physical and psychological symptoms impacting daily life. The purpose of this study was to investigate clinical psychological features in patients with Crohn's disease (CD) and ulcerative colitis (UC). *Methods:* Patients with IBDs were recruited at the outpatients IBD Unit, University Hospital of Messina, Italy. Anxiety, depression, quality of life, alexithymia, coping styles and defense mechanisms were detected through the administration of HAM-A, BDI-II, SF-12, IBDQ, TAS-20, COPE-NVI-25 and DMI. Gender, age at diagnosis, smoking habits, family history of IBD, comorbidities and related treatments were collected. *Results:* 84 participants reported low to moderate HR-QoL and anxiety, besides alexithymia. Women experienced lower QoL and higher levels of anxiety and depressive symptoms. All coping and defense strategies were related to distress symptoms and QoL. Adaptive coping and defense strategies such as positive attitude and principalization, showed negative associations with depression, anxiety and alexithymia and were also found to be associated with mental health. CD patients used significantly more turning against objects ($p=0.02$) and projections ($p=0.01$) and UC patients used more reversal ($p=0.04$). Elderly women showed higher anxiety symptoms and lower perceived QoL. Multiple regression analysis revealed anxiety and depression were independently associated with QoL. *Discussion:* Significant differences emerged in defense styles among CD and UC. CD participants used more maladaptive coping and defense styles which were related to mental distress, depression and anxiety,



together with higher level of alexithymia. Our research suggests a multi-integrated clinical strategy is appropriate to realize a global intervention on IBDs.



Which link between mindfulness and defense mechanisms in psychiatric pathology? A cross-sectional observational study

Rebecca Ciacchini¹, Mario Miniati², Graziella Orrù¹, Matteo Rano¹, Ciro Conversano¹, Angelo Gemignani¹

¹ Department of Surgical, Medical and Molecular Pathology, Critical and Care Medicine, University of Pisa, Pisa, Italy

² Department of Clinical and Experimental Medicine. University of Pisa, Pisa, Italy

Abstract

Psychopathology hinges on the dysregulation of our cognitive and affective systems whose maladaptive functioning cross the standard categories of psychiatric diagnosis. While the aspect of emotional and cognitive regulation is widely studied, mindfulness and defense mechanisms' skills and development are still poorly understood in this area. It is not known how these traits compare between different diagnostic groups. For this purpose, we investigated the levels of trait and state-like mindfulness and the functioning of defense mechanisms in a sample of individuals coming for a visit to the Operating Unit Psychiatry of the Pisa University Hospital (AOUP). Between October 2022 and January 2023 a brief socio-demographic questionnaire and psychometric questionnaire were administered to the sample (n=60); for trait and state-like mindfulness, Mindfulness Awareness Attention Scale (MAAS) and The Five Facet Mindfulness (FFMQ) Questionnaires, while to observe defensive functioning, the Defense Mechanisms Rating Scales – Self Report -30 (DMRS-SR-30). Descriptive and correlation analyses were firstly performed to the data, subsequently, machine learning techniques were used (SPSS 20.0; Rstudio; Weka 3.8.6). The results of correlational analyses show how mindfulness levels (MAAS) correlate moderately and negatively with the overall functioning of defense mechanisms ($r = -0.451$; $p < 0.01$). In addition, mindfulness levels (FFMQ) are positively associated with the use of mature defense mechanisms ($r=0.514$; $p < 0.01$) and global defensive functioning ($r=0.458$; $p < 0.01$). In particular, the "non-Judgment" component (FFMQ) would be positively correlated with mature defenses ($r=0.529$; $p < 0.01$) and negatively correlated with immature defense strategies ($r=-0.532$; $p < 0.01$). Machine learning results' analysis will also be presented. To our knowledge, this is the first research investigating both defense mechanisms and mindfulness in a sample of psychiatric patients; research in this area would allow a greater understanding of coping mechanisms and management strategies which are known to promote well-being and to improve psychopathological symptoms.



The ACTonHEART study: a two-arm RCT of a brief multi-disciplinary ACT programme for improving modifiable risk factors in people with Coronary Heart Disease

Chiara Spatola¹, Giada Rapelli²

¹ Department of Clinical and Experimental Medicine, University of Messina, Messina, Italy

² Department of Medicine and Surgery, University of Parma, Parma, Italy

Abstract

Introduction: Modifiable risk factors, including life-style habits and psychological variables, have an important role in influencing morbidity and mortality in cardiovascular patients, Acceptance and Commitment Therapy (ACT) has shown effectiveness in promoting healthy behaviors, and improving psychological well-being in patients with chronic physical conditions. The ACTonHEART study is the first RCT to evaluate the effectiveness and feasibility of an ACT-based intervention protocol focused on promoting a change in lifestyle and reducing psychological stress of patients with Coronary Heart Disease, through an increase in psychological flexibility. *Methods:* Ninety-two patients were enrolled and randomized, following an unbalanced randomization ratio of 2:1, to the experimental group (N= 59) and the control group (N= 33). The control group was administered Treatment-as-Usual (TAU), while experimental subjects participated in the ACTonHEART group intervention in addition to the cardiac rehabilitation process. The ACTonHEART protocol consists in 3 sessions of 2 hours each, integrating educational topics on heart-healthy behaviours with acceptance and mindfulness skills. Participants were assessed at baseline (t0), at the end of the rehabilitation period (t1), and at a six-month follow-up (t2). A partially-nested design with three levels was used to balance effects due to clustering of participants into small therapy groups. Primary outcome measures included: Body Mass Index, Psychological Inflexibility and Psychological Well-Being. *Results:* The levels of well-being significantly improved over time, regardless of the treatment condition. The BMI levels decreased only in the ACTonHEART group, however the time x treatment interaction was not significant. *Discussion:* The results of this first pilot study may inform the future implementations of the ACTonHEART program.



Cluster analysis of gastrointestinal symptoms and psychological distress differentiates subgroups of patients with Inflammatory Bowel Disease: a longitudinal study on health-related quality of life

Ilenia Rosa^{1,2}, Luigia Zito^{1,2}

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Inflammatory bowel disease (IBD) is a chronic intestinal disease whose main clinical forms are Crohn's disease and ulcerative colitis. It is characterized by intermittent phases of acute relapses and periods of quiescence. The main symptoms of IBD are fatigue, fever, abdominal pain, diarrhea and weight loss. Due to severe symptoms, patients with IBD experience a significant psychological burden. Symptoms of anxiety and depression are strongly associated with IBD-related disability. IBD patients with severe gastrointestinal symptoms and psychological distress have a lower health-related quality of life (HRQoL). The aims of the study were: a) to compare sociodemographic and disease characteristics between four patient profiles; b) to compare HRQoL during the two different pandemic waves between four patient profiles. *Methods:* A sample of 224 IBD patients was included. Participants were recruited during the two different COVID-19 pandemic waves in 2020 (T1) and 2021 (T2). Anxiety and depression (HADS), HRQoL (IBDQ), gastrointestinal Symptoms (GSRS-IBS) and post-traumatic COVID 19-related symptoms (IES-R) were assessed. *Results:* A cluster analysis with the K-mean method was performed to identify four patient profiles, using the GSRS-IBS and HADS scores at T1 (Profile 1: high gastrointestinal symptoms – low psychological distress; Profile 2: high gastrointestinal symptoms – high psychological distress; Profile 3: low gastrointestinal symptoms – high psychological distress; Profile 4: low gastrointestinal symptoms – low psychological distress). Comparing the sociodemographic and disease characteristics, no between-group difference was present, except the disease activity. Even after controlling for the post-traumatic symptoms COVID-19 related at baseline, the results of repeated measure ANCOVA showed that Profile 1 and Profile 3 reported the same levels of HRQoL over time. The extreme levels of better and worse HRQoL were obtained by Profile 4 and Profile 2, respectively.



Discussion: Gastrointestinal symptoms and psychological distress equally impaired HRQoL levels in patients with IBD. These findings suggest the need to give equal weight to physical and mental health because both can impair HRQoL independently in IBD patients.



Saturday, 16th September 2023

THEMATIC SESSION

**PARENTHOOD CHALLENGES AND THEIR IMPACT ON
CHILD DEVELOPMENT**

Chair:

Alessandra Simonelli

University of Padua

Anna Maria Speranza

Sapienza University of Rome



Paternal Features and Child Development in the Context of Autism

Silvia Perzollì¹, Arianna Bentenuto¹

¹ Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Abstract

Introduction: Nowadays, the fundamental effect of the father's involvement in children with autism upbringing is recognized. However, few studies focused on interactive aspects of the father-child dyad in the context of ASD. Therefore, this work explores the relationship between paternal features associated with child variables. *Methods:* We gathered data from 43 fathers during video-recorded interaction with their preschool children (M=40.74 months; SD=11.51), considering parental stress levels (Parental Stress Index), affective quality (Emotional Availability Scales), play behaviors (Play Code), and functional language (Penman Code). We also analyzed the child's cognitive functioning (Griffiths Mental Development Scales) and symptom severity (ADOS-2). *Results:* First, we conducted a correlational analysis to investigate associations between paternal variables and the child's characteristics. Then, we performed a cluster analysis using the Two-Step Clustering Algorithm. The best model with good quality properties (ratio of sizes = 2.58) was considered, and two distinctive clusters emerged. The first cluster is made by 31 fathers (72.1%) displaying high-stress levels, a greater percentage of directive statements directed to the child, and fewer levels of symbolic play. Conversely, cluster 2 is made by 12 fathers (27.9%), showing less stress considering child difficulties, fewer directives, and more symbolic play. Finally, multiple regression models revealed that in fathers of cluster 1 increased levels of directiveness ($\beta = -0.49$; $t(30) = -3.01$; $p = 0.005$) were negatively associated with the child's cognitive functioning. *Discussion:* These findings may provide relevant clinical implications in implementing activities with children during the intervention. On one side, interventions should focus on targeted cognitive domains to favor children's developmental outcomes. On the other hand, interventions should indirectly consider paternal representations of the child to support fathers toward an increased understanding of the child's difficulties. By comprehending the nature of parent-child interactions, it may be possible to devise more efficient intervention strategies, providing new insights considering paternal behaviors that need to be addressed in personalized interventions with fathers' involvement.



Talking about the gender variance of children: a qualitative study of parents' discourses

Antonio Iudici¹, Jessica Neri¹, Gloria Orczyk²

¹ Department of Philosophy, Sociology, Education and Applied Psychology- University of Padua, Padua, Italy

² Interactionist School of Padua, Padua, Italy

Abstract

Various studies and research support the idea that the binary form of social organization has the effect of reducing social cohesion. Many people do not recognize themselves in this gender categorization and experience this with much suffering. In addition, their identity is sometimes even the object of ridicule and mockery, especially children with gender variance. Along with them there are currently many parents who experience the difficulty of interpreting such variance, which does not put them in a position to help their children and which calls into question some of the foundations of their own identity and parental role. In the Italian context, there is little awareness of the experience of transgender and gender-variant children and what could be their needs and those of their families. The present work fits within the matrix of qualitative research and considered the aim to investigate how parents live their experience towards the gender variance of their children. Data analysis was carried out through discourse analysis. We described how parents configure their children's gender variance and how they position themselves in their experience of understanding and dealing with it. Overall, we discussed and promoted modes of parent-child interaction aimed at co-constructing and sharing the process of gender identity development, rather than adopting self-referential or ideological positioning. The limitations of the study and suggestions for future research are also presented.



The Parental Reflective Functioning Questionnaire – Adolescent Version: Italian Validation Process in Mothers and Fathers of Adolescents

Serena Di Giandomenico¹, Antonello Colli¹

¹ Department of Humanities, University of Urbino Carlo Bo, Urbino, Italy

Abstract

Parental reflective function (PRF) is a relationship-specific manifestation of the more general reflective functioning, and it is thought as the caregiver's capacity to reflect upon his/her own internal mental experiences and those of the child. PRF is positively related to the quality of parent-child interaction and negatively to dysfunctional parenting; also, it is linked to a range of offspring outcomes. A self-report instrument used to measure this construct is the Parental Reflective Functioning Questionnaire (PRFQ), which consists of 18 items divided into three dimensions: Pre-Mentalizing Modes, Certainty About Mental States, and Interest and Curiosity. This instrument was validated on a population of parents with children between 0 to 5 years of age, and the Italian validation confirmed its consistency and structure in parents of children aged 3 to 10 years. Recently, it was adapted for parents of adolescents, but empirical data in samples of Italian parents are not yet available. The aims of this study are to examine the psychometric properties of the Italian version of the PRFQ-A, by testing its factor structure, reliability, and validity, to explore differences between mothers' and fathers' PRF, and to evaluate the association between PRF and related constructs. A sample of mothers ($M_{age} = 47.4 \pm 5.06$) and fathers ($M_{age} = 50.08 \pm 5.20$) of 310 adolescents ($M_{age} = 15.6 \pm 1.59$) were recruited through high schools. Upon explicit written consent to the developers, the participants completed the PRFQ previously validated in Italian parents of children, after rewording some items. Results showed an acceptable level of internal consistency and confirmed the hypothesized three-factor model among both fathers and mothers. ANOVA showed a significant effect of parent's gender, only on the PRFQ-A-IC, where mothers reported greater interest and curiosity in their child's mental states than fathers. Correlation analysis support moderate associations with reported parenting style, confirming its similarity but specificity to similar dimensions. Even if more research on the PRFQ-A and minor revisions are needed, these preliminary data show that the PRFQ-A could be a suitable measure to assess parental reflective functioning also in parents of Italian adolescents.



Sense of Grip Construction in Parents of Children and Adolescents Affected by Autism Spectrum Disorder

Raffaele De Luca Picione¹, Gina Troisi¹, Chiara Fante², Barbara Dioni³, Tommaso Manari³, Alessandro Musetti³

¹ Giustino Fortunato University, Benevento, Italy

² Institute for Educational Technology - National Research Council of Italy (ITD- CNR), Genoa, Italy

³ Department of Humanities, Social Sciences and Cultural Industries, University of Parma, Parma, Italy

Abstract

The authors present and discuss the narrative analysis of verbatim transcription of semi-structured interviews of 20 mothers and 20 fathers of children with Autism Spectrum Disorder (ASD). ASD is a pervasive neurodevelopmental disorder characterized by persistent atypicalities in social communication and social interactions across different domains, together with restricted, repetitive, stereotyped patterns of behaviour, interest, or activities. Parental involvement in caregiving is often perceived as stressful and challenging, in many cases resulting in poorer parental quality of life (Musetti et al, 2021). The interviews were performed and analyzed according the ‘Sense of Grip’ (SoG) construct (Freda et al, 2020; De Luca Picione et al, 2022). SoG refers to the sensemaking processes that a person realizes to master the relationship with the disease by organizing variable degrees of flexibility, differentiation and adaptation to the variability of experiences and contexts of life. In this model, main semiotic narrative functions have been identified: 1. Temporal organization of the narration; 2. Degree of integration of the disease in one's life narrative; 3. Articulation of emotional experience; 4. Sharing of experience; 5. Agentive Function. The system of analysis and codification of parents' interviews is based on these five functions. The results of analysis allow to identify different SoG profiles that show interesting processual aspects of the ways of treating, managing and sharing children conditions within family and other relational contexts.



Associations between parental neuropsychological functioning, quality of parenting and child cognitive development in mothers with substance use disorder and their offspring

Alessio Porreca¹, Marta Vecchiato¹, Valeria Fucci², Francesca De Palo², Nicoletta Capra²

¹Department of Developmental and Social Psychology – University of Padua, Padua, Italy

²Comunità Terapeutica Casa Aurora – Comunità di Vezia scs, Venezia, Italy

Abstract

Background: Parental Substance Use Disorder (SUD) represents a well-known risk condition for parent and child wellbeing, affecting different domains of functioning, as parent neuropsychological functioning, quality of parenting and child development. Although several studies pointed out that parental neuropsychological functioning and quality of parenting are linked to child cognitive development in low-risk populations, no study investigated associations between these domains in the specific context of SUD. This aspect could be of particular importance in terms of assessment and treatment. *Objective:* The aim of this study was to explore associations among parental neuropsychological functioning, quality of parenting and child cognitive development in mothers with SUD and their children. *Methods:* The study involved 38 mothers with SUD (Mage=30.29yrs., SD=6.32) and their children aged between 1 and 42 months (Mage=11.99mths., SD=11.57) enrolled in residential treatment for drug misuse. At the beginning of treatment, the dyads were assessed with respect to maternal neuropsychological functioning (ENB2) and child cognitive development (BSID-III). Moreover, the dyads were videotaped during 20-min free-play sessions and quality of parent-child interactive behaviors was coded through the EAS. *Results:* The results pointed out the presence moderate difficulties in adult neuropsychological functioning and child cognitive development, as well as the presence of low-quality parenting behaviors. Moreover, significant associations were found between parental neuropsychological functioning, quality of parenting and child cognitive development. *Conclusions:* The findings provide initial evidence of the association between parental neuropsychological functioning, quality of parenting and child cognitive development also in the context of SUD. Implications of the results for research and clinical practice are discussed.



Parental perceptions of screen media use in children and preadolescents and its relationship with parental stress, parental style and the parent-child relationship quality

Giulia Bassi¹, Rachele Del Guerra¹, Silvia Salcuni¹

¹ Department of Developmental and Socialization Psychology, University of Padova, Padova, Italy

Abstract

Children's problematic screen media use is defined as excessive use that may interfere with the child's psychosocial, behavioural, or academic functioning. Research on problematic screen media use among adolescents and young adults is constantly growing; however, few studies have considered the possibility that younger children may exhibit problematic screen media use. Therefore, the purpose of the present cross-sectional study was to explore parents' perceptions of their children's and preadolescents' problematic screen media use in association with parental stress, parent-child relationship quality, and parenting style dimensions. A total of N = 224 caregivers (n = 209, 93.3% females) of n = 119 (53.1%) children (Mage = 7.19, SD = 1.81) and n = 105 (46.9%) preadolescents (Mage = 12.34, SD = 1.16) completed an online survey comprising the Problematic Media Use Measure, the Parenting Stress Scale, the Child Parent Relationship Scale, and the Parenting Style Questionnaire-Short Form. A multiple linear model was computed relying on the stepwise backward method in order to identify the model better accounting for parental perception of problematic screen media use in their children and preadolescents. The child's age was included as covariate, as parents of preadolescents presented significantly greater perceptions of problematic screen media use as well as greater conflicts than parents of children. The final model showed that the permissive parenting style ($\beta = 2.98$), child's age ($\beta = 1.64$), and conflicts in the parent-child relationship ($\beta = 1.28$) were all positively and significantly associated with problematic screen media use ($F(3,220) = 76.92, p < 0.001, f^2 = 1.04$), explaining 51% of its total variance. Overall, these findings highlighted that a parenting style with low demands on self-control and a relationship characterized by conflict might lead to greater maladaptive media viewing habits. Therefore, the implementation of psychoeducational interventions may be useful to support parents of children and preadolescents in coping with the challenges of digital parenting, and to prevent this problematic media use during adolescence or adulthood.



The role of parental overcontrol in the psychological distress of vulnerable narcissists: The burden of shame

*Simon Gbinassi*¹

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

Abstract

Introduction: Numerous empirical evidence has shown the central role played by parental overcontrolling attitudes and behaviors in the development of the child's personality, such as vulnerable narcissism traits. Individuals with vulnerable traits are marked by hypersensitivity toward the opinions of others, an intense desire for approval and defensiveness, as well as a grandiose self-concept. In accordance with an early psychodynamic view, there is a general consensus that shame is a cornerstone aspect of vulnerable narcissists which, in turn, can lead to the onset of psychological distress, including internalizing symptoms. Therefore, this study aims to build upon previous evidence by exploring the role played by parental overcontrol in the onset of vulnerable narcissism and whether this link leads to the onset of psychological distress through shame experiences. *Methods:* A convenience sample of 643 participants (68% females; Mage = 29.87 ± 13.00) was recruited for the present study. The Italian versions of the Measure of Parental Style (MOPS), the Hypersensitive Narcissism Scale (HSNS), the Experience of Shame Scale (ESS), and the Depression, Anxiety and Stress Scale-21 (DASS-21) were used to assess the level of parental overcontrol (maternal and paternal), vulnerable narcissism, shame proneness (characterological, bodily, and behavioral shame), and distress (depression, anxiety, and stress), respectively. In order to verify the theoretical hypothesized model a Structural Equation Modeling was performed. The indirect effects were tested using the bootstrapping method with 5000 bootstrap samples. *Results:* The assessed structural model produced adequate fit to the data [$\chi^2 = 1199.870$, $df = 306$, $p < .001$; RMSEA = 0.067 (90% C.I. = 0.063–0.071), CFI = 0.917, SRMR = 0.051]. Results showed the significant role played by maternal – but not paternal – overcontrol in the onset of vulnerable narcissism and that shame proneness, particularly bodily shame, fosters psychological distress in such individuals. *Discussion:* Overall, results suggest that clinicians dealing with individuals with high vulnerable traits could help them reduce their distress by working on the level of narratives relating to experiences of maternal overcontrol perceived during childhood and feelings of shame expressed, in particular when connected to one's own body.



Saturday, 16th September 2023

THEMATIC SESSION

**BODY IMAGE AND RELATED COGNITIONS, AFFECTS AND
BEHAVIORS**

Chair:

Davide Dèttore

University of Florence

Silvana Grandi

University of Bologna



Thinking about my body and how it seems flawed: psychometric properties of the Italian version of the Cognitive Fusion Questionnaire adapted to Body Dysmorphic Disorder

Giulia Rosa Policardo¹, Cristian Di Gesto², Camilla Puccetti³, Elena Micheli³

¹ Department of Psychology, University of Bologna, Bologna, Italy

² Department of Education, Languages, Interculture, Literature and Psychology, University of Florence, Florence, Italy

³ Institute of Behavioural and Cognitive Psychology and Psychotherapy, Florence, Italy

Abstract

Introduction: Body Dysmorphic Disorder (BDD) is a mental disorder characterized by undesired worries about defects or body imperfections (APA, 2013). Cognitive fusion, a process of the Acceptance Commitment Therapy (ACT) defined as the tendency to identify thoughts with reality and let behavior be guided excessively by cognition, seems relevant in the BDD's symptomatology (Dastgir & Karimi, 2019). However, Cognitive Fusion Questionnaire (CFQ; Gillanders et al., 2014), a scale that measures general cognitive fusion, may not accurately capture the body defects-related cognitive fusion. The present study aimed to investigate the psychometric properties of the 7-item Italian version of the CFQ (Donati et al., 2021) contextually adapted to BDD (BDD-CFQ). *Methods:* Participants were 120 men (mean-age=35.37; SD=11.78) and 166 women (mean-age=32.31; SD=9.14), who completed Italian measures of general cognitive fusion, body compassion, BDD's symptomatology, and psychological well-being, in addition to the BDD-adapted version of the CFQ-7. Factorial structure, construct, and predictive validity were tested for men and women separately. *Results:* The EFAs showed that the BDD-CFQ has a unifactorial structure, with optimal factor loadings in both sexes. Internal consistency was excellent for men ($\alpha=.94$) and women ($\alpha=.92$). Regarding construct validity, the scale showed strong positive and negative correlations with the BDD's symptoms and body compassion levels, respectively. Predictive validity was tested with a hierarchical regression model, showing that higher scores on the BDD-CFQ predicted lower levels of psychological well-being among men and women. Significant explained variance increased after the inclusion of body compassion in the regression models for both sexes. Mediation analyses showed that body compassion mediated the relationship between the BDD-CFQ and psychological well-being in both men and women. *Discussion:* BDD-CFQ is a brief scale that seems useful to measure an important ACT's process that is negatively associated with maladaptive health



outcomes, and it has the potential to predict psychological well-being. These findings may be relevant for providing increasingly tailored measure targeting ACT-processes affecting patients who manifest specific concerns about body defects and for evaluating the efficacy of the ACT treatment for BDD.



Muscle dysmorphia, orthorexia, and perfectionism in bodybuilders, powerlifters, and fitness practitioners: a cross-cultural study

Marco Scotto Rosato¹, Marziyeh Abdoli¹, Hasan Emre Kandemir², Barış Önen Ünsalver³, Stefania Cella¹

¹ Observatory on Eating Disorders, Department of Psychology, University of Campania “Luigi Vanvitelli”, Caserta, Italy

² Department of Health Management, Uskudar University, İstanbul, Türkiye

³ Vocational School of Health Services, Department of Medical Documentation and Secretariat, Uskudar University, İstanbul, Türkiye

Abstract

Introduction: Muscle dysmorphia (MD) is characterized by the pathological preoccupation of not being sufficiently large and muscular. Concerns about muscular appearance can impact individual functioning and lead to a wide range of downstream outcomes, such as disordered eating, strict dietary regimen, anxiety and depressive symptoms. Athletes are at increased risk for MD development, especially those involved in resistance training activities, such as bodybuilders and powerlifters. Although MD is globally widespread, cultural differences in vulnerability factors associated with MD risk are poorly understudied in literature. Thus, the present study aims to compare Italian and Turkish athletes investigating factors that may play a role in the development of MD. *Methods:* Participants were 174 Italian and 138 Turkish athletes (bodybuilder: BB; powerlifter: PL; fitness practitioner: FP) who completed self-report measures assessing muscle dysmorphia, perfectionism, and orthorexic behaviors. A two-way ANOVA with gender as covariate was performed to analyze the effect of training activities and nationality. *Results:* The factorial model showed a statistically significant interaction effect ($F(14,598)=3.257, p<.001$). Also, simple main effects analysis revealed a significant effect for nationality ($F(14,598)=27.969, p<.001$) and training activities type ($F(14,598)=12.147, p<.001$). Specifically, Turkish athletes reported more functional impairment (MD risk), greater self- and other-oriented perfectionism and more severe orthorexic behaviors than Italian ones. A similar pattern of results was reported by BBs, who also scored higher in drive for size, compared to PL and FP groups. Also, PL scored higher on functional impairment than FP. *Discussion:* Our results suggest that Turkish nationality may strongly impact MD and related factors. While PLs report scores more akin to FPs than BB group, the latter is characterized by more MD general symptomatology and vulnerability factors. The present study offers new insights into the understanding



of MD among athletes and opens a worthwhile avenue for future research and cross-cultural and clinical implications.



Cultural Differences in Body Image: A Comprehensive Review

Marzjeh Abdoli¹, Marco Scotto Rosato¹, Paolo Cotrufo¹

¹ Observatory on Eating Disorders, Department of Psychology, University of Campania “Luigi Vanvitelli”, Caserta, Italy

Abstract

Objective: Body image, a multifaceted construct, is influenced by individual, social, and cultural factors. Cultural elements shape beauty ideals and body satisfaction, with different societies holding diverse standards, resulting in varied body image experiences. This review explores cultural differences in body image across multiple cultural groups, focusing on beauty ideals, cultural expectations, internalization, consequences of body dissatisfaction, and the need for culturally sensitive interventions. *Methods:* A systematic literature search following PRISMA guidelines was conducted in PubMed, Scopus, and Web of Science databases, yielding 2,064 articles published between 1990 and 2023. After applying inclusion and exclusion criteria, 103 articles were reviewed, examining the interplay between beauty ideals, cultural expectations, internalization of standards, consequences of body dissatisfaction, and the need for culturally sensitive interventions. *Results:* The review reveals variations in body image ideals and preferences across cultures and contributing factors to body image concerns, such as cultural norms, social comparison, weight stigma, and appearance-focused values. Key findings include cultural differences in beauty ideals and internalization patterns, impacting body dissatisfaction and psychological outcomes. Body dissatisfaction is associated with various psychological issues, and the most frequent is low self-esteem and mental health conditions such as eating disorders and depression. Interventions promoting body acceptance, empowerment, and challenging cultural norms have shown promise, with examples of successful culturally sensitive approaches. *Conclusion:* Cultural differences significantly impact body image perceptions and ideals, affecting mental health and well-being. Understanding these variations informs culturally sensitive interventions, promoting body positivity across diverse populations.



Intuitive physical exercise: gender differences and impact on positive body image and intuitive eating

Alice Valdesalici¹, Giada Carli¹, Laura Madeleine Bosc¹, Erika Borella¹, Marta Ghisi^{1,2}

¹ Department of General Psychology, University of Padua, Padua, Italy

² U.O.C. Hospital Psychology, University-Hospital of Padova, Padova, Italy

Abstract

Practicing physical activity contributes to good health. It is important to regulate the level of physical activity according to what an individual can manage. The intuitive exercise involves listening to one's bodily cues and being aware of the senses while moving to guide decisions on when to start and stop exercise, rather than forcing oneself to adhere to a rigid program (Reel et al., 2016). Practicing physical exercise intuitively can have a positive impact on body image. The aims of the present study are to examine 1) gender differences in intuitive exercise, 2) and the relationship between intuitive exercise, positive body image and intuitive eating in the general population. An online survey composed of questionnaires about intuitive exercise (Intuitive Exercise Scale, IEXS) and positive body image (Functionality Appreciation Scale, FAS; Body Appreciation Scale-2, BAS-2; Intuitive Eating Scale-2, IES-2) was administered to 1260 individuals ($M_{age} = 43.6 \pm 12.7$, range = 20 – 76; %female = 54.2). Results showed significant gender differences with women scoring higher than men in the IEXS subscales of exercise rigidity ($p = .003$) and mindful exercise ($p = .004$). Regression analyses showed that the BAS-2 ($R^2_{adj} = .13$) and the FAS ($R^2_{adj} = .10$) scores significantly increased with the increase of IEXS subscales of body trust (respectively, $p = .001$ and $p < .001$) and decreased with the increase of exercise rigidity (both $ps < .001$). Total IES-2 scores ($R^2_{adj} = .19$) significantly increased with the increase of body trust ($p < .001$) and decreased with the increase of emotional exercise and exercise rigidity (both $ps < .001$). It also tested whether intuitive exercise has a different effect on positive body image and intuitive eating depending on gender. No significant interaction was found. These results suggest that women engage in less various exercise protocols, but they are more aware of cues deriving from their body on when to stop exercising compared to men. Moreover, positive body image and adaptive eating styles (i.e., intuitive eating) seem to be promoted by relying on bodily cues to guide one's own exercise type, frequency, and intensity (i.e., body trust). Conversely, positive body image and intuitive eating are negatively affected by engagement in various exercise protocols and the practice of exercise to manage negative emotions.



Exposure to food-related information affects associative learning processes in patients with Anorexia Nervosa

Ilaria Colpizzini¹, Corrado Caudek², Lisa Guidi³, Sara Danti³, Silvia Lucchesi³, Elisa Giusti³, Martina Di Meglio³, Claudio Sica⁴

¹ Department of Experimental and Clinical Medicine, University of Florence, Florence, Italy

² Department of NEUROFARBA, University of Florence, Florence, Italy

³ Istituto Specchidacqua, Florence, Italy

⁴ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

Eating disorders (EDs) are severe psychiatric conditions associated with high mortality risk. Despite the significant impact of these disorders, the underlying mechanisms remain poorly understood. Recently, it has been proposed that cognitive flexibility (CF) might be impaired in ED, leading to the maintenance of those pathological mechanisms that prevent treatment. However, it remains unclear whether CF deficits in EDs are domain-general or domain-specific. We hypothesized that cognitive flexibility in EDs might be domain-specific, meaning that CF would be impaired only in specific contexts, when patients diagnosed with EDs dealt with symptom-related information (e.g., food). Conversely when they approached symptoms-unrelated cues cognitive flexibility was preserved (domain-general point of view). We investigated CF in a group of outpatients diagnosed with Anorexia Nervosa (AN) and in a group of Healthy Controls (HCs), using two versions of a Probabilistic Reversal Learning Task (PRL): a neutral version with symptoms-unrelated cues (e.g., a lamp) and a version with symptoms-related cues (e.g., food). The results are clear. Individuals with AN exhibit a lower learning rate in the food-related task compared with HCs, but no differences emerge for AN and HCs performance in the symptoms-unrelated task. These results suggest that individuals with AN have preserved CF ability, but external factors such as food cues can disrupt their cognitive mechanisms. The study sheds light on the importance of taking into account the influence of food-related information on cognitive functioning in this patient population. The results may have implications for developing interventions that target cognitive flexibility processes in individuals with Anorexia Nervosa.



The relationship between sports practice and risk of eating disorders among young Italian adults: a cross-sectional study

Sabina La Grutta¹, Maria Stella Epifanio¹, Marianna Bellafiore¹, Martina Riolo¹, Vittoria Spicuzza¹, Gaia Teresi¹, Marco Andrea Piombo², Federica Andrei², Elena Trombini²

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo Italy

² Department of Psychology “Renzo Canestrari”, Alma Mater Studiorum, University of Bologna, Bologna, Italy

Abstract

Introduction: Eating disorders are characterized by the presence of a disrupted perception of weight and one's body image. Although the prevalence of eating disorders in athletes has not been sufficiently analyzed, it is known that concern about body weight and one's fitness is more prevalent in athletes than in the general population. This study aims to investigate eating behaviors and one's body's perception in a sample of athletes and to assess the existence of specific sports characteristics or activities that may exacerbate the risk of occurrence of dysfunctional eating behaviors. *Methods:* An online data collection was performed through the Qualtrics platform, and it's still ongoing. The sample included 562 subjects (n= 395 females; n= 161 males; n= six non-binary) with a mean age of 25.6 at the moment. Eating disorder inventory 3 (EDI-3), Uneasiness Test (BUT), Muscle Dysmorphic Disorder Inventory (MDDI), and Recovery Stress Questionnaire were used to assess the presence of eating disorders, the perception of body image, body dysmorphism, and bigorexia, and the perceived stress during sports activity respectively. Statistical analyses were performed using SPSS (version 25.0) for Windows. Specifically, analysis of variance (ANOVA) to assess perceived stress in training, the χ^2 statistical test to assess possible differences between the risk ranges of EDI, BUT, and MDDI scores, depending on the level of sports activity and the type of sport played. *Results:* According to the literature, preliminary results show that women have higher scores ($p<0.01$) than men in all EDI-3 scales except B and OC ($p<0.05$) and in the BUT scale ($p<0.01$). In contrast, men scored higher than women on the MDDI ($p<0.05$). The prevalence of a moderate/high score in the EDCR, IC, IP, and GPM scales of the EDI-3 is significantly lower in subjects who participate in sports than in those who do not, while the prevalence of a high MDDI is significantly higher in subjects who participate in sports. *Discussion:* In contrast to the literature, these



preliminary results show a generally lower tendency for athletes to develop eating disorders than the general population; deeper analysis will be performed, and more results will be presented at the conference.



Investigating the relationships between orthorexia nervosa and psychosocial functioning: a structural equation modelling analysis

Andrea Zagaria¹, Mariacarolina Vacca¹, Silvia Cerolini¹, Claudio Barbaranelli¹, Caterina Lombardo¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Orthorexia Nervosa (ON) is a clinical entity characterized by an obsessive fixation with consuming healthy foods, strict avoidance of food deemed to be unhealthy, and excessive time spent buying, preparing, and consuming meals. In current nosographic classifications, the clinical significance is a key diagnostic criterion for diagnosing mental disorders, reflecting the notion that disorders are not a mere constellation of symptoms but rather involve marked psychological distress and psychosocial dysfunction in various domains of life. In spite of the growing research, ON has not yet been formally recognized as a distinct disorder, and the evidence of its consequences are still limited. To address this gap, this study aimed to examine the relationships between ON and psychosocial impairment across multiple domains. *Methods:* A sample of 261 participants of the general population, aged 18-73 years (Mage = 30.03; 85% women), was recruited for a cross-sectional survey. Participants completed a battery of self-report questionnaires, including the Düsseldorf Orthorexia Scale (DOS) and the Barkley Functional Impairment Scale (BFIS). Structural equation modelling (SEM) was employed to estimate the relationships between ON and psychosocial impairment. *Results:* SEM highlighted meaningful associations between ON symptoms and multiple psychosocial domains, overcoming the suggested cut-off for practical significance. Specifically, ON was linked with impairment in family life, household chores, social and sexual relationships, money management, daily self-care practices, and education activities (β range: 0.219 to 0.305; $ps < .01$). *Discussion:* ON was associated with impairment in a wide range of psychosocial domains, providing further evidence regarding its potential clinical significance. Findings may contribute to shedding light on the future recognition of ON as a formal disorder and developing evidence-based interventions for treating orthorexic symptoms. Future studies are warranted to examine the relationships between ON and psychosocial impairment in clinical samples and to adopt longitudinal designs to disentangle the directionality of these associations.



Saturday, 16th September 2023

THEMATIC SESSION

HEALTH, WELL-BEING, AND QUALITY OF LIFE

Chair:

Omar Carlo Gioacchino Gelo

University of Salento

Antonella Granieri

University of Turin



Professional Quality of Life and Emotion (dis)Regulation in caring

Anna Maria Meneghini¹, Daiana Colledani², Laura Cunico³

¹ Department of Human Sciences, University of Verona, Verona, Italy

² Department FISPPA, University of Padua, Padua, Italy

³ Nursing Degree, University of Verona, Verona, Italy

Abstract

The professional quality of life (ProQOL) is the quality one feels about her/his work as a helper. ProQOL includes both positive (Compassion Satisfaction, CS) and negative (Compassion Fatigue, CF) aspects. CF breaks into two dimensions: burnout (BO) and secondary traumatic stress (STS). In the case of many professionals, e.g., nurses, their ability to regulate emotional distress arising from the exposure to the suffering of others (i.e., emotion regulation, ER) is at the core of caring and is expected to be related to their well-being. Consequently, ER individual ability and individual level of ProQOL could influence the type of strategy a nurse chooses to adopt in specific situations of caring for patients in pain. We aimed to assess: 1) which, among three strategies (i.e., distraction, reappraisal and brooding), nurses choose to adopt in their relationship with a suffering patient; 2) if this choice varies according to nurses' levels of CS/CF; 3) if the individual level of difficulties in ER mediates the relationship between the ProQOL aspects and the choice of the ER strategies. The perceived ability to regulate negative emotions (measured by the Difficulties in Emotion Regulation Scale, DERS) and the positive (CS) and negative (BO and STS) aspects of their job (measured by the ProQOL Scale) were assessed in 213 nurses (83.6% females, Mage = 36.73, SD = 11.05) working in various public departments. In addition, each participant was asked to recall a situation in which had cared for a suffering patient and to indicate how much she/he had used each of the three ER strategies measured by the State Emotion Regulation Inventory (SERI). A path model was run and it revealed that the relationship between CS and the choice of all the ER strategies is mediated by individual perceptions of the ability to regulate one's negative emotions (DERS). On the contrary, a direct, negative effect is observed between BO and reappraisal, and a direct positive effect is observed between STS and distraction. These results suggest that the level of CS positively affects the nurse's perception that she/he is able to manage the distress arising from the relationship with the suffering patient, and this guides her/him to the use of various strategies (i.e., she/he relies on a wide ER repertoire; Meneghini et al., in press).



Tailored Motivational Interviewing and Varenicline for vaping cessation: A double-blind, randomized, parallel-group, placebo-controlled trial

Pasquale Caponnetto¹, Marilena Maglia¹, Riccardo Polosa², Maria Catena Ausilia Quattropani¹

¹ Department of Educational Sciences, Section of Psychology, University of Catania, Catania, Italy

² COEHAR, Catania, Italy

Abstract

Background: Vaping cessation is virtually unexplored. The efficacy and safety of varenicline for vaping cessation has not been studied and rigorous research is required to advance best practice and outcomes for people who use electronic cigarettes (EC) and want to quit. The objective is to evaluate the efficacy and safety of varenicline (1 mg BID, administered for 12 weeks, with follow-up to week 24) combined with vaping cessation counseling in exclusive daily EC users intending to quit vaping. *Methods:* Design: Double-blind, randomized, parallel-group, placebo-controlled trial. Setting: The study took place at a University-run smoking cessation center. Participants: People who exclusively use ECs daily and intend to quit vaping. Intervention: A total of 140 subjects were randomized to either varenicline (1 mg, administered twice daily for 12 weeks) plus motivational interviewing or placebo treatment (administered twice daily, for 12 weeks) plus motivational interviewing. The trial consisted of a 12-week treatment phase followed by a 12-week follow-up, nontreatment phase. Main outcomes and measures: The primary efficacy endpoint of the study was biochemically validated continuous abstinence rate (CAR) at weeks 4 to 12. Secondary efficacy end points were CAR at weeks 4 to 24 and 7-day point prevalence of vaping abstinence at weeks 12 and 24. *Results:* CAR was significantly higher for varenicline vs placebo at each interval: weeks 4-12, 40.0% and 20.0%, respectively (OR = 2.67, 95% CI = [1.25 - 5.68], P = 0.011); weeks 4-24, 34.3% for varenicline with counseling and 17.2% for placebo with counseling (OR = 2.52, 95% CI = [1.14 - 5.58], P = 0.0224). The 7-day point prevalence of vaping abstinence was also higher for the varenicline than placebo at each time point. Serious adverse events were infrequent in both groups and not treatment-related. *Conclusions:* The findings of the present RCT indicate that inclusion of varenicline in a vaping cessation program for people who use electronic cigarettes and intending to quit may result in prolonged abstinence. These positive findings establish a benchmark of intervention effectiveness, may support the use of varenicline combined with counseling in vaping cessation programs, and may also help guiding future recommendations by health authorities and healthcare providers.



Did distance schooling affect results in gambling prevention with adolescents? Findings from the PRIZE 2 program

Carola Beccari¹, Giuseppe Iraci Sareri², Francesco Sanson¹

¹ Department of NEUROFARBA, University of Florence, Florence, Italy

² Gruppo Incontro and CEART (Coordinamento Enti Accreditati Regione Toscana), Pistoia, Italy

Abstract

In the field of adolescent gambling prevention, there is a lack of intervention studies based on robust evidence-based explanation and intervention models. Our contribution will be focused on the gambling prevention program called PRIZE 2 [Prevention of gambling risks among adolescents – Second Edition], funded by Tuscany Region through ANCI TOSCANA (Association of Tuscan Municipalities). This is a large dissemination program based on previous experimental studies about the efficacy. We were interested in providing evidence of the intervention even in pandemic time, characterized by high rates of distance schooling. The intervention was conducted with 2505 high school students (59% males; Mage = 16.40 years). In the short term, we found a significant increase of correct gambling knowledge, random events knowledge, and probabilistic reasoning ability, and a significant decrease of monetary positive outcome expectation, and gambling-related erroneous thoughts. In the long-term, a significant decrease of self-reported erroneous thoughts towards gambling and fallacious behavioral choices was obtained. Moreover, gambling craving resulted to be reduced. We verified if the above-reported results were achieved regardless of the delivery of the training activities (in school class or online). Overall, this work offers empirical evidence about the possibility of doing prevention against gambling, even in online modality.



Technostress and Psychological Health Conditions Among University Students: The Mediating Role of Academic Motivation

Federica Vallone¹, John Galvin², Maria Clelia Zurlo¹

¹ Dynamic Psychology Laboratory, Department of Political Sciences, University of Naples Federico II, Naples, Italy

² University of Warwick, Coventry, England, UK

Abstract

Introduction: Research has well-recognized that the pandemic entailed several implications among university students globally in terms of increased use of Information and Communication Technologies (ICTs), technostress, disruptions in academic goals and motivation processes, and growing psychological disease. Responding to the new research need to go in-depth into the processes linking technostress and motivation dimensions to inform current research and interventions, the present study aimed to examine direct effects of perceived technostress dimensions (Techno-Overload, Work-Home Conflict, Pace of Change, Techno-Ease, Techno-Reliability, Techno-Sociality) and academic motivation dimensions (Amotivation, Intrinsic and Extrinsic Motivation dimensions) on students' perceived levels of Anxiety and Depression, and to test the potential mediating role of Academic Motivation dimensions in the associations between technostress and psychological health conditions. *Methods:* Participants were 1.541 students from five European countries (Czech Republic, Greece, Italy, Serbia, United Kingdom) who were asked to complete a survey including a Background Information Form, the Technostress Scale, the Academic Motivation Scale-College, and the Hospital Anxiety and Depression Scale. Hayes' PROCESS tool was used to test direct and mediating effects. *Results:* Techno-Overload, Work-Home Conflict, Amotivation, and Extrinsic Motivation-Introjected had a direct detrimental role, whereas Techno-Ease, Techno-Reliability, Techno-Sociality, all Intrinsic Motivation dimensions and Extrinsic Motivation-Identified had a direct protective role for students' psychological health. Academic Motivation dimensions significantly mediated the associations between Technostress dimensions and Anxiety/Depression. *Conclusion:* Findings allow gaining insight into the pathways of relationships between technostress, motivation, and psychological health, to be used in the current post-emergency phase, featured by the restoration of face-to-face contacts, to inform the development of tailored research and



interventions which address lights and shadows of the technology use, and which take into account the necessity to enhance its potentials yet without impairing students' motivation and psychological health.



The mediating role of psychological flexibility in the association between adverse social-relational events, self-esteem, and quality of life: analysis and intervention

Leonardo Fazio¹, Cristina Semeraro², Teresa Claudia Pennacchio³, Martina Grazia Asselti³, Rosalinda Cassibba², Alessandro Bertolino³, Antonio Rampino³, Ignazio Grattagliano², Giulio Pergola^{3,4}

¹ Department of Medicine and Surgery, LUM University, Casamassima (BA), Italy

² Department of Education, Psychology, Communication Sciences, University of Bari Aldo Moro, Bari, Italy

³ Department of Translational Biomedicine and Neuroscience, University of Bari Aldo Moro, Bari, Italy

⁴ Lieber Institute for Brain Development, Johns Hopkins Medical Campus, Baltimore, MD, USA

Abstract

Exposure to adverse social-relational events may impact an adult's psychological functioning, negatively affecting self-esteem and quality of life and increasing the risk of psychopathological outcomes. This harmful effect can be mitigated by specific positive psychological skills, such as psychological flexibility, which can be targeted for intervention. Our study investigated the potential role of psychological flexibility in modulating the relationship between adverse social-relational events, self-esteem, and quality of life, as well as the effectiveness of an Acceptance and Commitment Therapy (ACT) intervention in improving psychological flexibility. We recruited ninety-six women (age range: 19-21 years). Exposure to adverse social-relational events was assessed with the Childhood Trauma Questionnaire (CTQ) and the Bullying Scale (BS), while self-esteem and quality of life were measured with the Self-Esteem Rating Scale and the World Health Organization Quality of Life Scale, respectively. All participants underwent a six-meeting ACT intervention. Psychological flexibility was assessed using the Multidimensional Psychological Flexibility Inventory, before and after the ACT intervention. Frequency of adverse social-relational events was negatively correlated with self-esteem (BS $r=-0.38$; CTQ $r=-0.43$, all $p<0.001$) as well as psychological quality of life (BS $r=-0.37$; CTQ $r=-0.48$, all $p<0.001$). Psychological flexibility partially mediated the relationship between the frequency of bullying episodes and (I) self-esteem (direct effect $Z:-2.6$, $p=0.01$; indirect effect $Z:-2.8$, $p=0.005$ —48.6% of the total effect explained; total effect $Z:-3.8$, $p<0.001$) and (II) psychological quality of life (direct effect $Z:-2.1$, $p=0.04$; indirect effect $Z:-3.1$, $p=0.002$ —40% of the total effect explained; total effect $Z:-3.8$, $p<0.001$). The ANOVA showed an increase in psychological flexibility after the ACT intervention ($F_{95}=17.1$, $p<0.001$). Our results highlight



the impact of exposure to adverse social-relational events on several aspects of adult psychological functioning. In addition, they show that psychological flexibility can be enhanced in the short term by ACT-based interventions, which allows us to hypothesize intervention models designed to promote self-esteem and improve quality of life in young adults with a history of exposure to adverse events.



Mental flexibility, perfectionism, and quality of life in children and adolescents with type 1 diabetes

Maria Cusinato¹, Sabrina Brigadoi², Arianna Negri¹, Livia Avagliano², Valentino Cherubini³, Carlo Moretti¹

¹ Department of Women's and Children's Health, Pediatric Diabetes Unit, Azienda Ospedale Università di Padova, Padova, Italy

² Department of Developmental Psychology and Socialisation, University of Padua, Padua, Italy

³ Department of Women's and Children's Health, Division of Pediatric Diabetology, Azienda Ospedaliero Universitaria delle Marche, Ancona, Italy

Abstract

Type 1 diabetes is a chronic illness that requires repeated administrations of insulin, blood glucose levels monitoring and carbohydrates counting. Diabetes management is time-consuming, distressing and cognitively challenging, especially in the domain of executive functions (EFs). Literature shows a higher prevalence of psychopathology in young people with T1D, in particular anxiety, depression and eating disorders. Some psychological variables, such as perfectionism, constitute risk factors for mental disease. There is a gap in the literature concerning the study of the relationship between cognitive functions and psychological adjustment in T1D and the effect of perfectionism has not been properly explored in this population. Fifty children and adolescents with T1D (mean age= 11,76 ± 2,75; F=26 M=24) were enrolled. Glycaemic metrics (Hb1Ac, %TIR, %TAR, %TBR) were extracted from the database. Mental flexibility was evaluated through a computerized version of the set-shifting task. Assessed psychological variables were: perfectionism (Child-Adolescent Perfectionism Scale - CAPS), depression and anxiety (Test of Depression and Anxiety Scale - TAD) and quality of life related to diabetes (the Paediatric Quality of Life (QoL) related to Diabetes - PedsQL-Diabetes Module). Regression analysis showed a significant negative effect between reaction times (RT) and %Time in Range (TIR%) ($p= 0.006$). Increased RTs were observed for the easy shift condition compared to the repeat condition and this was negatively associated with QoL related to diabetes ($r= -0.456$) and positively associated with anxiety ($r= 0,423$). Anxiety was negatively correlated with QoL ($r= -0.630$) and positively associated with self-oriented perfectionism ($r= 0.366$). Increased RTs were also found for the difficult shift condition compared to the easy one, and this was correlated with other-oriented perfectionism ($r=0.358$). These results show a correlation between perfectionism, executive functions and quality of life in patients with T1D; in particular, some psychological variables seem to be relevant factors modulating cognitive functions that



are crucial to diabetes management. Therefore, it is important to take care of the psychological state of patients with T1D in order to prevent a psychopathological frame, and to support cognitive functions that are needed for diabetes management.



Sunday, 17th September 2023

SYMPOSIUM SESSION



**BEYOND TAXONOMIES: A UNIFIED SYSTEM VIEW ON PSYCHOPATHOLOGY
THROUGH THE P FACTOR FRAMEWORK AND THE HARMONIUM MODEL**

Proposer

*Linda A. Antonucci*¹

¹ Department of Translational Biomedicine and Neuroscience, University of Bari Aldo Moro, Bari, Italy

Discussant

*Alessandro Gennaro*¹

¹ Department of Dynamic Psychology, Clinic and Health, Sapienza University of Rome, Rome, Italy

Abstract

The taxonomic model of psychopathology relies on the assumption that there exist different forms of mental disease, and that each of them corresponds to a nosological category. However, the validity of such a paradigm (i.e., the extent to which a given diagnostic category could be considered a distinct and separate disease entity with clear boundaries) is poorly supported. Conversely, studies have highlighted the existence of substantial correlation among psychopathological characteristics, transversal to their taxonomy. In this context, as for the g factor in cognitive sciences, various authors have hypothesized the existence of a common factor of psychopathology (i.e., the p factor), which would (i) explain covariance between different diagnostic categories, and (ii) account for individuals' likelihood to develop any or all forms of psychopathological conditions. The p factor framework – operationalized through the so-called Harmonium model – has the potential of going beyond many of the previously described shortcomings of diagnostic categories. In the proposed symposium, we aim at making the audience aware of the state-of-the-art regarding evidence supporting the Harmonium Model. First, we will discuss the model, its specific conceptualization (i.e., the “Phase Space of Meaning”), as well as the promises and pitfalls of previous evidence. Then, we will provide information regarding the strong potential of empirical simulation studies in supporting empirical and clinical applications of the Harmonium Model in real-world scenarios by describing our experimental works. Prof. Antonucci will describe how convolutional neural networks represent a reliable computational framework to validate the Harmonium Model. Prof. Conversano will discuss about the relationship between psychopathological profiles and the



dimensionality of the Phase Space of Meaning. Prof. Palmieri will present results regarding the empirical and computational validity of the Harmonium Model. Prof. Salvatore will discuss about the intersubjective interpretation of the p-factor framework within psychotherapeutic settings. Through the proposed symposium, we wish to spread knowledge about this brand new and cutting-edge research field in clinical psychology, and to discuss with the audience its potential and limitations for its application in clinical practice.



Harmonium model and p-factor: from neural simulation to empirical validation on clinical sample

Arianna Palmieri^{1,2}, Johann Roland Kleinbub¹, Diego Rocco³, Annalisa Lella⁴, Davide Ruffin¹, Valentina Cimmino Picone¹

¹ Department of Philosophy, Sociology, Education and Applied Psychology, University of Padua, Padua, Italy

² Centro Ateneo dei Servizi Clinici Universitari Psicologici (SCUP), University of Padua, Padua, Italy

³ Department of Developmental and Socialization Psychology (DPSS), University of Padua, Padua, Italy

⁴ Department of Translational Biomedicine and Neuroscience “DiBraiN”, University of Bari “Aldo Moro”, Bari, Italy

Abstract

Recently, a semiotic, embodied, and psychoanalytic conceptualization of this construct, known as the Harmonium Model (HM), has been proposed. Grounded in the conceptualization of the Phase Space of Meaning (PSM) i.e., the mental semiotic space where each dimension maps a component of the environmental variability, the HM posits that psychopathology (conceived as underlined by a common p-factor) is caused by rigid cognitive processes, resulting in a low dimensional PSM. We present two simulation studies designed to validate this model. The first used a deep learning architecture modeling the psychophysics of letter recognition in humans. Two neural networks, trained respectively on a high and low complexity training sets were compared on a letter classification task. The networks' accuracy and the dimensionality of their internal computational dynamics were assessed as simulated equivalents of cognitive performance and the PSM dimensionality. The second study employed two convolutional neural network dealing with a similar classification tasks. In this case the training sets were obtained manipulating the independency of the set's dimensions (letters and colours) to simulate normotypical and pathological cognitive processes according to the HM. Both studies' results showed better performance of the complex networks in the classification of harder stimuli. Notably, principal component analyses on the networks' internal dynamics showed that complex networks were characterized by higher dimensionality. These findings provide support for the view of psychopathology as a low-dimensional, poorly modulable PSM preventing complex information patterns from being accessible in the meaning making process. To move beyond simulation studies, the empirical validation of the HM is aimed to



investigate the meaning making process in a clinical population. To achieve this, we introduce an ongoing data collection organized by a national consortium of university collaborations, measuring the relationship between the rigidity of the PSM and various dimensions of psychopathology and psychological functioning (e.g., SCL-90, Millon) in a clinical and non-clinical sample. Last part of our contribution concerns preliminary observations of a sub-sample of 25 patients attending the Padova University Clinical Service (SCUP) and 25 non-clinical individuals.



A view of psychopathology as a peculiar mind's mode of making meaning, that patient and therapist can contextually share. An intersubjective interpretation of the nature of the p-factor

Gianpaolo Salvatore¹, Anna Maria Petito¹, Leonardo Carlucci¹, & Équipe Studio Maya Salerno²

¹ Department of Humanities. Letters, Cultural Heritage, Education Sciences, University of Foggia, Italy

² Studio Maya, Psychiatry, Psychotherapy, Criminology, Research, Training, Salerno, Italy

Abstract

Ventilating the perspective of a unified view of psychopathology, the p-factor hypothesis has a breakthrough potential in the clinical field. What reduces this potential is that the specific nature of the p factor appears controversial. For example, this nature has been interpreted as a superordered general factor of personality (van der Linden et al., 2017); a tendency to experience an unpleasant affective state (Lahey et al., 2017); an impulsive responsivity to emotion (Carver et al., 2017). These and others competitive explanations are all based on the idea that the p factor reflects a given single (or restricted set of) latent construct(s). An alternative approach frames the explanation of the p factor as the empirical marker of the degree of rigidity of meaning-making (Venuleo et al., 2020). In this perspective, psychopathology can be modelled as the mind's incapability to modulate the complexity of the processes of meaning-making in accordance to the variability of the environmental state. According to this approach, psychopathology is conceived as one of the mind's modes of working, rather than the manifestation of its disruption, that takes form when one of the constructs above described is altered. In the clinical context, this incapability seems manifesting itself as an impossibility to access an intersubjective mode of meaning-making, namely a mode in which the other's affective states and psychological suffering are perceived as a nuancedly different version of one's suffering. This intersubjective mode of meaning-making can be lost or achieved by both the patient and therapist in the different phases of the therapeutic relationship. We will present a series of suggestive clinical experience and preliminary empirical data supporting our theorization. The theoretical implications for the interpretation of the nature of the p-factor are also examined.



Validation of the Harmonium model: Preliminary analysis and study of the relationship between psychopathological profiles and dimensionality

Ciro Conversano¹, Graziella Orrù¹, Rebecca Ciacchini¹, Camilla Belletich¹, Angelo Gemignani¹

¹ Department of Surgical, Medical and Molecular Pathology, Critical and Care Medicine, University of Pisa, Pisa, Italy

Abstract

In order to evolve from the compartmentalized view of mental disorders, which sees mental issues and pathologies classified solely according to symptomatic manifestations and clinical observation of different treatments' efficacy, the Harmonium project aims to add the salience of the “p” factor to the explanatory model of psychopathology. The hypothesis of the existence of this “p” factor is supported by a unified vision of psychopathology, which involves already known psychological constructs and processes (i.e., personality, emotional regulation, etc.) to an extent above or below order. The experimental study of the “p” factor is carried out through the measurements of the degree of rigidity of our way of interpreting reality while giving meaning to the experience, thanks to the range of meanings that are expressed in a dimensional way and serve the individual to create a mapping of the internal and external environment.

Psychopathology could therefore be conceptualized as an affective and cognitive process that modulates according to the variability of different contexts. In order to empirically validate this model, the analysis of the preliminary data of the ongoing multicenter study is presented, which sees the observation of the processes of signification in experimental samples (of clinical interest) and control, together with an in-depth analysis of the dimensionality of mental space and its insertion in psychological and psychopathological functioning's theories.



Validation of the Harmonium Model and its unified system view of psychopathology through convolutional neural network

Linda A. Antonucci¹, Loredana Bellantuono¹, Annalisa Lella¹, Sergio Salvatore²

¹ Department of Translational Biomedicine and Neuroscience, University of Bari “Aldo Moro”, Bari, Italy

² Department of Human and Social Science, University of Salento, Lecce, Italy

Abstract

Introduction: The Harmonium Model (HM) is a recent conceptualization of the unifying view of psychopathology, namely the idea of a general mechanism underpinning all mental disorders (the p factor). According to HM, psychopathology consists of a low dimensional Phase Space of Meaning (PSM), where each dimension of meaning maps a component of the environmental variability. Accordingly, the lower the number of independent dimensions in the PSM, and hence its intrinsic complexity, the more limited the way of interpreting the environment. The current simulation study, based on a Convolutional Neural Network (CNN) framework, aims at providing a straightforward validation of the HM, by testing its core hypothesis, namely the idea that the low-dimensional PSM is the computational equivalent of psychopathology. The study pursues this purpose by: (i) employing a new deep learning architecture that enables the direct analysis of the representational output of the neural network, and (ii) adopting a dimensionality-based method to set the neural network simulating psychopathological cognitive processing, which is consistent with the HM framework. *Methods:* CNNs were employed to simulate normotypical and pathological cognitive processes, through the performance of the “recognition of handwritten digits” classification tasks, which we manipulated by introducing the color of the digit, which could vary across numbers as a function of random assignment (simulating the normotypical, more flexible condition) or of fixed assignment (simulating the pathological, less flexible condition). *Results:* Results revealed that normotypical and pathological CNNs were different in terms of both classification performance and layer activation patterns. Using Principal Component Analysis to characterize the PSM associated with the two algorithms, we found that the performance of the normotypical CNN relies on a larger and more evenly distributed number of components, compared with the pathological one. *Discussion:* Our findings might be indicative of the fact that psychopathology can be modelled as a low-dimensional, poorly modulable PSM, which means the environment is detected



through few components of meaning, preventing complex information patterns from being taken into account.



COMPLEX INTERACTIONS: AN INTEGRATED PERSPECTIVE ON THE PERCEPTION AND INTERPRETATION OF INTERNAL SENSATIONS IN PSYCHOPATHOLOGY AND NEUROBIOLOGY

Proposer

*Elisabetta Patron*¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Discussant

*Lidia Del Piccolo*¹

¹ Department of Neurosciences, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

Abstract

A small but growing body of literature supports the role of the body-mind relationship as a critical point in the development and maintenance of psychophysiological conditions. In this context, there has been a specific interest in how the perception and interpretation of internal sensations is deeply intertwined with alterations in cognitive processes and affective states. This symposium fits into this by offering studies that suggest novel approaches useful for the diagnosis and treatment of different clinical conditions. A contribution evaluates the relationship between different features of interoception (the ability to perceive and interpret internal sensations) and measures of autonomic nervous system activity, suggesting that impaired interoception ability could play a central role in emotion dysregulation increasing the risk of psychopathology. In this regard, a contribution highlights the role of the assessment of internal emotional states to investigate the neurobiological characteristics of mental health disorders and contribute to the development of personalized treatment plans. Two contributions consider the role of expectations in the perception and interpretation of internal sensations in relation to placebo/nocebo effects. Specifically, one contribution suggests how prior expectations may influence outcomes via attentional mechanisms. Another contribution underlines how beliefs and expectations might be targeted in patients with chronic conditions to improve their care processes.



Exploring the association between interoceptive features and cardiac vagal activity

Matteo Giraldo¹, Elisabetta Patron¹

¹ Department of General Psychology, University of Padova, Padova, Italy

Abstract

Interoception refers to the ability to perceive and interpret bodily changes mediated primarily by the autonomic nervous system (ANS). Interoception interacts with cognition and determines the individual's ability to perceive and interpret ANS activity during emotional states and emotion regulation. Interoception is defined and quantified through different dimensions, among which: interoceptive accuracy (performance on heart-beat detection tasks) and interoceptive sensibility (self-evaluated assessment of subjective interoception). ANS activity on the heart can be reliably assessed through heart rate variability (HRV) which specifically indices cardiac vagal activation. To date, no studies have investigated the association between interoceptive accuracy, interoceptive sensibility, and cardiac vagal activation. In a normative sample of young adults, measures of interoceptive accuracy (heart-beat detection task, heart-beat discrimination task), interoceptive sensibility (body perception questionnaire, BPQ), and resting-state HRV were collected. The results showed that interoceptive accuracy (heartbeat detection task) was associated with interoceptive sensibility (body awareness, BPQ). In addition, both lower interoceptive accuracy and sensibility were correlated with reduced cardiac vagal activity. These findings suggest that altered interoceptive patterns (subjective and objective) are related to a reduction in cardiac vagal activity. This is of paramount relevance considering that decreased cardiac vagal activity has been associated with difficulties in emotion regulation which, in turn, has been linked to a higher vulnerability to mental disorders. Impaired interoception could play a central role in emotion dysregulation, a central transdiagnostic factor for mental disorders, increasing the risk of psychopathology. In clinical practice, psychophysiological interventions specifically aimed at improving interoceptive features could improve emotion regulation and, in turn, reduce the risk of psychopathological conditions.



Minimally invasive and continuous rating of affective experience in immersive Virtual Reality

Francesca Malandrone¹, Antonin Fourcade², Anthony Ciston², Jaroen de Mooji², Arno Villringer^{2,3}, Michael Gaebler²

¹ Department of Clinical and Biological Sciences, University of Turin, Italy

² Department of Neurology, Max Planck Institute for Human Cognitive and Brain Sciences, Leipzig, Germany

³ Universitätsmedizin Berlin, Germany

Abstract

Subjective experience is crucial in affective states (AS), but common summary ratings (SR) may not capture AS changes. Continuous assessment during dynamic stimulation can provide a better understanding of AS however, a potential challenge is that self-report continuous rating (CR) may alter the experience. The study aims to investigate if and how CR and SR are associated and to determine the best rating method (RM) to continuously rate participants' AS in VR. We compared trial-by-trial SR and CR, and different RMs of CR to identify the least invasive/distracting. We hypothesized that CR were associated with SR and the proprioceptive RM was the least invasive. Fifty participants underwent a 1-hour VR experiment in which they experienced 3 different RMs and a baseline (without CR) condition. They were shown four 1-minute 360° videos and rated their AS twice (CR and SR) during each trial. Participants also used different RMs to indicate their position in the arousal-valence space. Data were analyzed using linear regression, ANOVA, and post-hoc t-tests. The findings suggest that continuous assessment of AS in real-time during VR experiences is feasible and can provide valuable information about the dynamic changes in AS. This methodology can be applied to investigate the neurobiological features of mental health disorders such as depression and PTSD and may contribute to the development of personalized treatment plans for affected individuals. Future studies should consider using longer stimuli with more affective variability to further validate the findings.



The role of expectations on the respiratory performance of people with Chronic Obstructive Pulmonary Disease

Eleonora Volpato^{1,2}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy;

² IRCCS Fondazione Don Carlo Gnocchi, Milan, Italy

Abstract

Introduction: Previous studies have investigated the effects of oxygen therapy both during sleep and daily life, investigating its influences in patients with hypoxaemia. However, there are no studies investigating the role of oxygen (O₂) during the performance of the 6 Minute Walking Test (6MWT) compared to a placebo. The study aimed to investigate the role of the placebo effect during oxygen therapy in patients with moderate Chronic Obstructive Pulmonary Disease (COPD) (GOLD2). *Methods:* An experimental, randomized, two-arm, counterbalanced study was carried out, involving 95 people with COPD (68.4% male, average age 67). Participants were randomized and assigned to two groups: 1) Participants who usually use oxygen (O₂): in addition to standard care, they underwent the 6MWT using compressed medical air (RA) cylinders, believing that O₂ was inside the concentrator. The same, subsequently, underwent the 6MWT, thanks to the use of concentrators of O₂, believing that inside the cylinder there was O₂. The sequence of this group was thus characterized as follows: ABC (A=Baseline, B=Air, C=Oxygen). 2) Participants who do not usually use O₂: the same methodology was used, with a different sequence (ACB). Mini-Mental Status Examination (MMSE), to assess cognitive impairment; Modified British Medical Research Council questionnaire (mMRC), to detect dyspnea; Fatigue Severity Scale (FSS); Simple Spirometry, were taken at baseline. Saturation (SpO₂), heart rate and blood pressure were measured at baseline, at 3':30" and at the end of the 6MWT, from which the main outcome of the study was taken. *Results:* A repeated measures ANOVA was performed to compare the effect of oxygen usage on the 6MWT. There was no statistically significant difference in the 6MWT between the two groups ($F(2, 1) = 0.113, p = 0.888$). *Discussion:* Whilst oxygen therapy is and remains an important treatment for COPD patients, working on their beliefs and expectations can improve their care processes.



The two-dimensional model of Power behavioural System: the ‘problematic’ activation style and psychopathology

Sara Salzano^{1,2}, *Massimiliano Conson*³, *Isa Zappullo*^{1,3}, *Chiara Baiano*^{1,3}, *Roberta Cecere*^{1,2,3}, *Anna Citro*¹,
Monica Positano^{1,2}, *Gennaro Raimo*^{1,2,3}, *Vincenzo Paolo Senese*³

¹ Studies of Integrated Neuropsychological Therapy, Salerno, Italy

² Cognitive-Behavioral School of Psychotherapy ‘Serapide SPEE’, Naples, Italy

³ Department of Psychology, University of Campania Luigi Vanvitelli, Caserta, Italy

Abstract

Introduction: The Power behavioural system is involved in acquisition and control of resources important for increasing chances of survival. The two-dimensional model of the Power system, consistently with that of the attachment one, conceives hyperactivation and deactivation as the two main dimensions of the system. From the orthogonal combination of the two dimensions, it is possible to derive four prototypical styles of activation of the system. In particular, the two-dimensional model of the behavioral systems identifies a ‘problematic’ style characterized by the coexistence of high hyperactivating and deactivating strategies, and relating to chaotic and unpredictable behaviors, and to higher rates of psychopathology. Here, we tested predictions of the two-dimensional model on the problematic activation of the Power system, and verified whether specific relationships exist between this activation style, affective symptoms, and executive control. *Materials and Methods:* Participants. For the present study, 386 healthy volunteers (208 females; age range: 18-45) were recruited. *Materials.* The following measures were used: the Power Behavioural System Scale, assessing individual differences in hyperactivation and deactivation of the Power system; the Anxiety Sensitivity Index-3, assessing different concerns about negative consequences of anxiety symptoms; the Beck Depression Inventory-II, assessing depression severity; the Behaviour Rating Inventory of Executive Function–Adult Version, assessing executive functions in everyday environment. *Results:* A multivariate multiple regression analysis was performed to test the hypotheses. The results showed a significant effect of both dimensions of the Power behavioural system ($W_s < .905$, $ps < .001$, $\eta^2p > .095$) on the dependent variables. Univariate multiple regression analyses confirmed the significant and additive effect of both dimensions on all the three dependent variables. *Discussion:* The present findings confirm the predictions of the two-dimensional model of the Power system on the problematic style of activation, demonstrating that specific pattern of affective and executive control functioning differentiated this activation style from the other ones identified by the



model. The problematic style seems to represent the most vulnerable one to the risk of developing emotional problems and psychopathology.



HYPERSEXUALITY: CONCEPTUAL, DIAGNOSTIC, AND CLINICAL CHALLENGES

Proposer

*Igor Marchetti*¹

¹ Department of Life Sciences, University of Trieste, Trieste, Italy

Discussant

*Luca Rollè*¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Hypersexuality is a complex phenomenon characterized by highly frequent sexual activity, feelings that one's sexual behaviors and thoughts are uncontrollable, and negative sex-related consequences. Despite its pervasive impact on mental well-being, it is a phenomenon whose definition, developmental trajectory, and clinical treatment remain open to debate. With this symposium, we aim to bridge the gap in our understanding of hypersexuality and related phenomena, which could be of great interest for both researchers and clinicians. Firstly, Prof. Dettore (University of Florence) will provide a comprehensive overview of the field, by critically evaluating the partially overlapping phenomena of hypersexuality, sexual addiction, sexual compulsive behavior, and paraphilia-related disorder. Secondly, dr. Limoncin (University of Rome La Sapienza) will present a systematic review of the literature on the relationship between hypersexuality and concomitant psychopathology, highlighting the high level of comorbidity with major psychiatric disorders. Thirdly, Prof. Ciocca (University of Rome La Sapienza) will present his work on the relationship between hypersexuality symptoms and trauma in a sample of non-clinical individuals, and will shed light on the mediator role of depression and guilt. Fourthly, Prof. Marchetti (University of Trieste) will show a recent network analysis study, where the internal structure of sexual compulsivity has been investigated across different age groups, gender, and risk status to develop a full-blown disorder. Finally, Dr. Mollaioli (University of L'Aquila) will conclude the symposium with a discussion on the theoretical and clinical implications of the presented findings.



Hypersexuality as the expression of a concomitant psychopathology

Erika Limoncin¹, Daniele Mollaioli²

¹ Department Dynamic, and Clinical Psychology, and Health Sciences, Sapienza University of Rome, Rome, Italy

² Department of Systems Medicine, Tor Vergata University of Rome, Rome, Italy

Abstract

Based on the most recent definitions, compulsive sexual behavior is defined as a “recurrent lack of control of intense and repetitive sexual impulses, which causes distress or clinically significant disorders in important areas of functioning”. Its multifaceted nature, based on sexual impulsivity, sexual addiction, sexual compulsions, lack of control, makes often its clinical frame very difficult. Consequently, also its assessment and treatment become often inadequate. The main difficulty is related to the clinical evidence of the co-presence of hypersexual behavior with many psychiatric and psychopathological conditions. Hence, the aim of this presentation is to highlight all the clinical manifestations of hypersexuality as a comorbid condition of other diagnoses. A general literature overview of the selected English articles dealing with the topic of hypersexuality is given. The selection criteria are articles published in English; range period of publication 2010-2020; clinical articles. Out of 899 results, 47 articles are considered in this review. A specific attention is paid to bipolar disorder, borderline personality disorder, psychotic diseases, organic diseases, attention deficit and hyperactivity disorder (ADHD), Post-traumatic Stress Disorder (PTSD), sexual dysfunctions. Based on emerging literature evidence, it is warmly suggested to evaluate, in presence of a patient referring hypersexual behavior, the presence of other psychiatric or psychopathological comorbid conditions, in order to better tailor treatment options.



Hypersexual Behavior and post-traumatic symptoms: the role of traumatic life experience for problematic sexuality

*Giacomo Ciocca*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Hypersexuality is a clinical condition regarding the psychopathology of sexual behavior. In this study, we aimed to investigate the role of trauma, through the post-traumatic stress-disorder (PTSD), depression, shame and guilt on the hypersexual behavior. *Methods:* Through an online platform, a convenience sample of 1025 subjects was recruited (females: n=731; 71.3%; males: 294; 28.7%; age: 29.62±10.90). Recruited subjects compiled a psychometric protocol composed by the Hypersexual Behavior Inventory (HBI) to assess hypersexuality, the International Trauma Questionnaire (ITQ) for PTSD, the Patient Health Questionnaire (PHQ-9) to evaluate depression and the State Shame and Guilt Scale (SSGS) for shame and guilt. Then a mediation/moderation model was performed for the data analysis. *Results:* There was a statistically significant direct effect of post-traumatic symptoms (ITQTotal) on hypersexual behavior (HBTtotal). Furthermore, indirect effects were also statistically significant, providing support to the hypothesis that depression and guilt would be serial mediators of trauma-hypersexual behavior relations. The paths through depression and guilt have been found to be the most significant with moderate and high indirect effects on hypersexuality. Moreover, male gender, as covariate variable, is a relevant risk factor for hypersexual behavior. *Discussion:* We found the relationship between hypersexuality and trauma describing a possible etiological pathway mainly involving depression, shame and guilt. Hypersexuality can be considered as a reactive form of a major affective psychopathology representing a tip of the iceberg hiding the real issues of a suffering personality. Clinicians and researchers should therefore consider hypersexual behavior in the light of a symptomatic manifestation of a major psychopathology involving the affective aspects of personality.



Hypersexual states: problems of conceptualization

Davide Dettore ¹

¹ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

Introduction: Hypersexual states do not constitute a condition that presents a clear conceptualization and are still absent even in the latest edition of the DSM, i.e. the DSM-5-TR (2022). Basically, they could be considered the final common path, from a phenomenological point of view, of three different etiological pathways that correspond to as many diagnostic conceptualizations: sexual addiction, sexual compulsivity and paraphilia-related disorders. *Methods and results:* these three conceptualizations will be exposed, showing their strengths and weaknesses, and at the same time the diagnosis of “Compulsive sexual behavior disorder” of the ICD-11, which is currently the only classification of these states in an international diagnostic manual, will be critically analyzed. *Discussion:* the above analysis shows that a clear conceptualization of these state is even today missing.



The structure of compulsive sexual behavior: A network analysis study

Igor Marchetti ¹

¹ Department of Life Sciences, University of Trieste, Trieste, Italy

Abstract

Introduction: Compulsive sexual behavior is a phenomenon characterized by a persistent failure to control intense, repetitive sexual impulses or urges, resulting in repetitive sexual behavior that causes marked distress or impairment in personal, familial, social, educational, or occupational areas of functioning. Despite its major impact on mental health and quality of life, little is known about its internal structure and whether this phenomenon differs across genders, age groups, and risk status. *Methods:* By considering a large online sample (n = 3186; 68.3% males), ranging from 14 to 64 years old, compulsive sexual behavior was explored by means of network analysis. State-of-the-art analytical techniques were adopted to investigate the pattern of association among the different elements of compulsive sexual behavior, identify possible communities of nodes, pinpoint the most central nodes, and detect differences between males and females, among different age groups, as well as between individuals at low and high risk of developing a full-blown disorder. *Results:* The analyses revealed that the network was characterized by three communities, namely consequence, preoccupation, and (perceived) impulse dyscontrol, and that the most central node was related to (perceived) impulse dyscontrol. No substantial differences were found between males and females and across age. Failing to meet one's own commitments and responsibilities was more central in individuals at high risk of developing a full-blown disorder than in those at low risk. *Discussion:* The structure of compulsive sexual behaviour was revealed as substantially stable across age groups and gender, with a specific node structure difference for individuals at risk. These findings could be of importance for both preventive and treatment purposes.



**PSYCHOLOGICAL RISKS AND PROTECTIVE FACTORS FOR COGNITIVE
IMPAIRMENT IN THE ELDERLY**

Proposer

*Maria Casagrande*¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Rabih Chattat*¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

Abstract

Aging is a heterogeneous phenomenon with high inter-individual variability, characterized by physical pathologies and cognitive decline risks. The overall state of the elderly is influenced by numerous variables, such as forced modifications of lifestyle habits, retirement, changes in the family unit, etc., with relevant psychological consequences. These numerous changes determine the impossibility of describing a single pattern of physiological aging. The lengthening of the average life span has seen the flourishing of many studies on the cognitive changes that characterize aging that have highlighted how senescence can be defined not so much as an inevitable and pervasive decline of all cognitive functions but rather as a multidirectional and multidimensional phenomenon, characterized by both losses and gains. Therefore, the current evolution of aging requires a redefinition of the measures and resources destined for the elderly population, preventing the risk of illness and loss of self-sufficiency. In fact, it is estimated that in 2050 the share of over 65s will amount to 35.9% of the total population, with a life expectancy average of 82.5 years. It is important to underline that aging is a multifactorial process characterized by a progressive loss of functional abilities and increasing comorbidity proportional to the advancement of age. However, the elderly is no longer identified solely with the reduced presence of disease but with the maintenance of psychophysical and relational well-being. For this reason, one of the indicators most frequently used to measure the well-being and health of the population is the disability-free life expectancy (DFLE); the DFLE is a composite indicator that combines information on mortality and



disability, extending the concept of life expectancy beyond the simple number of years lived and quantifying how many of these are lived without limitations in daily activities. The DFLE identified the maintenance of self-sufficiency and the quality of life as fundamental objectives. Therefore, it is important to implement preventive interventions capable of minimizing the main risk factors and promoting adequate lifestyles at all ages. This ambitious goal envisages an articulated study of the risk and protective factors of pathological aging. This is the theme that will be addressed from a multidimensional perspective.



Association of the pentagon-copying task with handgrip strength, gait speed and frailty in older adults

Alberto Sardella¹, Giorgio Basile², Maria Catena Ausilia Quattropani³

¹ Department of Clinical and Experimental Medicine, University of Messina, Italy

² Department of Biomedical and Dental Sciences and Morphofunctional Imaging, University of Messina, Italy

³ Department of Educational Sciences, University of Catania, Italy

Abstract

Background: The pentagon copy is a sensitive item to the prediction of cognitive decline and dementia. Cognitive and physical/motor decline are able to accelerate the evolution of each other, by representing a shared pathway towards frailty. *Purpose:* The study aimed to investigate the association of the pentagon-copying task with physical and motor performances and with frailty, in a sample of older adults. *Materials and Methods:* The study was conducted in a Geriatric Outpatients Clinic. *Subjects:* Subjects aged ≥ 65 years were consecutively recruited. Subjects with positive psychiatric history, with a severe neurocognitive disorder, with severe limitations on the upper limbs and/or reporting sensory deficits were excluded. The pentagon-copying task was scored from the Mini Mental State Examination (MMSE); the Qualitative Scoring Pentagon Test (QSPT) was also used. Handgrip strength was measured by a dynamometer; a 46-item Frailty Index was calculated; in subjects with autonomous walking, a 4-meter gait speed was also measured. *Results:* The study included 253 subjects (mean age 80.59 ± 6.89 years). The mean MMSE score was 22.24 ± 4.82 ; ninety-three subjects correctly performed the pentagon-copying task. Subjects making a wrong pentagon copy showed greater odds of exhibiting a strength deficit (OR = 3.57; $p=0.001$) and of being frail (OR= 4.80; $p<0.001$), and exhibited a slower gait. The QSPT score was significantly correlated with handgrip strength ($r= 0.388$) and gait speed ($r= 0.188$), and inversely correlated with frailty ($r= -0.428$); progressively better QSPT scores were significantly obtained by subjects in the higher quartiles of grip strength; progressively worse QSPT scores were significantly obtained by subjects in the higher quartiles of frailty. *Conclusions:* An established feature of cognitive decline, such as the copy task, may also interact with physical and motor indexes, and consequently with frailty. The pentagon copying-task might also be confirmed as a quick screening tool of aging trajectories towards frailty, by jointly evaluating cognitive and physical performances.



The influence of stressful life events on dementia onset: a retrospective study

Elisa Di Rosa¹, Giulia Pirazzoli¹, Andrea Melendugno²

¹ Department of General Psychology, University of Padua, Padua, Italy

² C.S. Casa Madre Teresa di Calcutta - O.P.S.A., Sarameola di Rubano (PD), Italy

Abstract

It is now well recognized that stress exposure represents a risk factor for the development of dementia (Bougea et al., 2022; Franks et al., 2021; Lou et al., 2020; Fratiglioni et al., 2020). However, evidence available so far are focused on “late-onset dementia”, i.e., the one affecting people aged over 65. Indeed, while dementia is an age-related disease and its prevalence is increasing also because of the global population aging, it can also affect younger individuals (age <65; early-onset dementia) and new evidence are therefore needed on this population. Hence, the present study aimed at overcoming this limitation by investigating the relationship between stressful life events and dementia age of onset, with the hypothesis of an inverse correlation between the two, such as higher is the number of stressful events experienced, lower will be the age of dementia onset. We have analyzed the medical records of 60 patients with early-onset dementia (mean age = 59.9 ± 4.89 y; 35 M) and of 50 patients with late-onset dementia (mean age 78.3 ± 4.40 y; 27 F). Information about the presence of stressful life events, occurred before the dementia diagnosis, was collected in both the groups. Precisely, we have considered as stressful, events such as: mourning, separations, and divorces (familial), working and economic difficulties (psychosocial), surgery, and diagnosis of pathologies like cancer (medical). Because this information was collected through a clinical interview, we have either compared the frequency of this report in both groups, and calculated the total number of events reported. Results firstly indicated a significantly higher frequency of reports for familial stressful events in the early-onset dementia group, when compared with the late-onset one ($\chi^2(1) = 5.26$, $p = .02$). Moreover, results showed a significant negative correlation between the number of stressful events reported and the age of dementia onset ($\rho = -.394$, $p = .01$), with higher number of stressful events being associated with lower age of onset. Results will be discussed taking into account the possible biological basis underlying the association between stress and dementia onset, and considering possible future directions in this research field.



Exploring to Remediate Behavioral Disturbances of Spatial Cognition in community-dwelling Senior Citizens with Mild Cognitive Impairment by innovative technological apparatus (BDSC-MCI Project): Preliminary findings

Davide Maria Cammisuli¹, Giada Pavanello², Gianluca Castelnuovo³

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

² School of Specialization, Catholic University of Sacred Heart of Milan, Milan, Italy

³ Istituto Auxologico Italiano, IRCCS, Psychology Research Laboratory, Milan, Italy

Abstract

Alzheimer's disease (AD) is characterized by progressive deterioration of cognitive functions with episodic memory loss and spatial disorientation (SD) as principal hallmarks. Spatial navigation (SN) is one of the earliest cognitive domains to be impaired in individuals with AD-related neuropathological features (i.e., patients with Mild Cognitive Impairment [MCI] due to AD). Beyond increasing age, the $\epsilon 4$ allele of the Apolipoprotein-E (Apo-E) gene represents the most important risk factor for AD. It has been proposed that subjective cognitive impairment [SCI] might appear as a preclinical phase of AD. Further, SD may occur in patients with AD and MCI as deficits in route learning, free recall or temporal order of the landmarks, landmarks recognition and location on a 2D map, route drawing, and evaluating directions. In this experimental study, hosted by the Istituto Auxologico Italiano in Milano/Piancavallo (VB), 25 participants (5 individual with SCI, 5 patients with MCI due to AD, and 15 healthy older adults) were administered a wide neuropsychological battery and two SN tasks: a computer-based SN task and an ecological task of SN. Specifically, the ecological task was carried out by a technological apparatus, i.e. the Howdy Senior© device (Comtech S.r.l., Monza, Italy), a wearable monitoring system recording physiological data and able to provide gait analysis parameters. Results reported specific alterations of SN in individuals at higher risk of conversion into dementia, that improve after rehabilitation. The research was financed by the Associazione Italiana Ricerca Alzheimer Onlus (Airalzh), through AGYR grant 2023.



The protective role of cognitive reserve for healthy functioning in the elderly

Francesca Favieri¹, Maria Casagrande¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

As reported by the World Health Organization (WHO), aging presents challenges and opportunities in modern society due to its constant increase in worldwide prevalence and social implications in local communities. Aging is associated with a physiological health decline that, also implying cognitive impairment that may follow a pathological trajectory. For this reason, promoting healthy and proactive aging is crucial, and the main goal of health systems should be facilitating healthy overall from physical, cognitive, and psychological perspectives. Considering mental decline, multiple studies reported that about 40% of dementia cases could be delayed or prevented through healthy lifestyles and improving psychological and social well-being, with consequential positive effects on cognitive functioning. From these premises, a new interest has surfaced toward a dimension long investigated in aging studies, i.e., cognitive reserve (CR). CR is defined as a latent construct of brain resilience that helps to preserve cognitive abilities and daily functioning. CR is considered a dimension to compensate for the deterioration of aging, representing a protective factor from pathological conditions, such as age-related mild or severe cognitive impairment. According to the protective role of CR, many data showed significant relationships between the general CR (with a specific role of leisure activities) and the functioning of multiple cognitive domains (e.g., memory, executive functions, language). These results underline how a CR promotion program can prevent and delay cognitive decline, with important repercussions on psychological well-being across different stages of life (from late adulthood to late elderly) and at varying levels of cognitive decline (e.g., healthy ageing, mild cognitive impairment, early dementia, severe dementia). Further theoretical models and empirical research should consider the role played by each CR dimension (education, work, leisure activities) in improving cognitive functioning, also determining its direct or indirect influence on the psychological well-being and the general health state of old people.



PROTECTIVE AND RISK FACTORS IN MENTAL HEALTH ACROSS THE LIFE STAGES: STUDIES PRESENTED BY E-CARE RESEARCHERS OF THE AIP, CLINICAL AND DYNAMIC PSYCHOLOGY SECTION

Proposer

Ilaria Chirico^{1,2}

¹ Department of Psychology, University of Bologna, Bologna, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

Discussant

*Maria di Blasi*¹

¹ Department of Psychological, Pedagogical and Training Sciences, University of Palermo, Palermo, Italy

Abstract

This symposium provides an overview of the latest research on protective and risk factors in mental health across different life stages. In the first contribution, Provera and Neri investigated the influence of both maternal depressive symptoms and child's severe prematurity on the features of maternal input directed to the infant. In the second contribution, Charpentier Mora and Tironi found that child's emotional process during a stressing situation with their caregiver may constitute an indicator of both child's representational attachment models and psychological difficulties, thus emphasizing the importance of studying specific family dynamics involved in the emergence of psychopathological outcomes during middle childhood. In the third contribution, Minazzi et al. investigated the role of psychiatrists' expectations of the treatment offered on patient's inclination to guilt and shame feelings, as well as levels of well-being, clinical and social impairment and required care load of inpatient in a psychiatric residential facility. In the fourth contribution, Moretta et al. investigated the relationship between the level of problematic use of social media (PUSM) and the startle response to social media-related and affective cues among young adults, thus underlying the role played by defective emotion regulation processes that prioritize the processing of unpleasant cues. Overall, findings will offer



insights into protective and risk factors involved in the onset of various clinical conditions across the life stages, thus suggesting directions for intervention research and implementation.



Attachment and psychological difficulties in middle childhood: What association with emotional processes during a parent-child interaction?

Simone Charpentier Mora^{1,2}, *Marta Tironi*^{1,2}

¹ Department of Educational Sciences, University of Genoa, Genoa, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

Abstract

Introduction: Literature linked attachment system as a key variable on the development of child's emotional processes. These processes are thus involved in both parent-child attachment and emergence of psychological difficulties. However, few studies have investigated intercorrelations between these variables during middle childhood, a critical age for psychological trajectories due to significant psychological, physical, and social changes. For this reason, our aim is to explore the relationship between child's emotional processes – both emotional subjective experience and physiological reactivity – during an interpersonal stress task and child's attachment and child's psychological difficulties during middle childhood. *Methods:* 20 children (Mage=10.7, SD=1.25; 65% males) and their mothers were recruited from general population throughout a non-probabilistic convenience sampling. Attachment was assessed with the Child Attachment Interview (CAI). Emotional subjective experience was assessed with (1) the How I Feel (HIF) and the Positive and Negative Affect (PANAS) questionnaires while physiological reactivity was assessed with (1) Heart Rate (i.e., Beats Per Minute, BPM) and (2) Heart Rate Variability (i.e., Low Frequency and High Frequency ratio, LF/HF). Child's psychological difficulties were measured with the Child Behavioral Checklist 6-18 (CBCL-6/18). *Results:* Interestingly results emerged linking emotional processes with (1) child's attachment and (2) child's psychological difficulties. Firstly, significant correlations have been found between the HIF-Control scale and the Mother and Father CAI's Dismissal scale, the PANAS-Negative Affect scale and the Mother and Father CAI's Preoccupied Anger scale. Secondly, significant correlations have also been found between the HIF-Positive emotions scale and both internalizing and externalizing difficulties; HIF-Negative emotions scale and internalizing difficulties; LF/HF ratio and internalizing difficulties. *Discussion:* Our preliminary findings suggest that child's emotional process during a stressing situation with their caregiver may constitute an indicator of both child's representational attachment models and psychological difficulties. All this emphasizes the



importance of studying family dynamics involved in the emergence of psychopathological outcomes during middle childhood. Implications are discussed.



Lack of startle blink potentiation to unpleasant pictures is linked to problematic use of social media

Tania Moretta ^{1,2}, Egle Orlando ¹, Giulia Buodo ¹

¹ Department of General Psychology, University of Padua, Padua, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

Abstract

Introduction: Cue-reactivity and affective startle modulation have been used in addiction research to determine the affective motivational state of craving induced by viewing drug-related cues. However, to our knowledge, no studies so far have investigated social media-related attentional processing and affective disposition in the problematic use of social media (PUSM). *Methods:* In the present study, we investigated the relationship between the level of problematic use of social media (PUSM) and the startle response to social media-related and affective cues among Italian young adults. The magnitude of the startle eyeblink reflex elicited during the viewing of pleasant, unpleasant, neutral, and Facebook-related pictures was recorded in 31 healthy young adults. Startle eyeblink responses were measured at 300, 1500, and 3500 ms after picture onset to assess the attentional/affective modulation and its temporal course. *Results:* While reliable startle potentiation to unpleasant pictures was found relative to neutral pictures in individuals with lower levels of PUSM, higher levels of PUSM were associated with startle inhibition during the viewing of unpleasant pictures. *Discussion:* This finding may suggest defective defensive motivation and/or enhanced attentional engagement to unpleasant content. In line with previous findings, the underlying mechanisms may be represented by defective emotion regulation processes that prioritize the processing of unpleasant cues, thus capturing more motivational/attentional resources.



Treatment expectations in a residential psychiatric context

Giacomo Andrea Minazzi^{1,2,3}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

³ Adele Bonolis As.Fra. Onlus Foundation, Vedano al Lambro, Monza e Brianza, Italy

Abstract

Introduction: The project aims to investigate the level of well-being, clinical and social impairment and required care load of inpatient at Fondazione Adele Bonolis - As.Fra, a psychiatric residential facility accredited with the Italian National Health Service in Lombardy region. This project also aims to explore psychiatrists' expectations of the treatment offered and how these expectations are related to the patient's inclination to guilt and shame feelings. *Methods:* To achieve this goal, a longitudinal study will be adopted using self- and hetero-administered measures involving patients and referring psychiatrists. Baseline variables (well-being, clinical and social impairment, required care burden, guilt and shame bias) will be measured every 3 months through an accelerated longitudinal multi-cohort design. The design will be proposed to in-patients who will be divided as follows: subjects admitted less than one month (admissions), subjects admitted 1 to 6 months, subjects admitted 6 to 12 months and subjects admitted longer than 12 months. During the first measurement, psychiatrists' expectations of the treatment outcome will be investigated in addition to the baseline variables. Follow-up will then be carried out at 3, 6 and 9 months after the first administration. *Results:* The aim is to monitor changes in the variables of interest during 9 months of treatment and to identify how consistent the psychiatrists' expectations are with the outcomes measured subsequently over time. It will also be monitored how the level of guilt and shame inclination in the patient may mediate the course of treatment. *Discussion:* The results of this study could allow to focus more closely on the development of the therapeutic-rehabilitation pathways of the patients in care at the Foundation, also by comparing their progress in relation to psychiatric diagnosis, typology of admission and duration of treatment. In addition, it will be possible to assess whether there is a correlation between the expectations - of patients and clinicians- and the said courses of treatment. This may imply the possibility of redesigning and enhancing the rehabilitation services provided within this facility.



Infant-Directed Speech to preterm infants in the first year postpartum: the influence of severe premature birth and maternal postnatal depression

Alessandra Provera^{1,2}, *Erica Neri*¹

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy

² Early Career Researchers Network (E-CARE) of the AIP, Clinical and Dynamic Psychology Section

Abstract

Introduction: Preterm birth could negatively influence the quality of mother-infant interactions during the first year of life. To date, few studies have investigated the effects of prematurity on the features of maternal input during interactive patterns, especially considering the role played by the severity of prematurity and maternal postnatal depression (PND). This study aimed to describe functional and morpho-syntactic features of maternal Infant-Directed Speech (IDS) in preterm dyads, exploring the influence of maternal PND and severity of prematurity, comparing dyads of Extremely Low Birth Weight (ELBW; <1000 gr.), Very Low Birth Weight (VLBW; 1000-1500 gr), and Full-Term (FT) babies. *Methods:* At 3 and 9 months postpartum (corrected age for preterm infants), sixty mother-infant dyads (15 ELBW, 15 VLBW, 30 FT) freely interacted for 5 minutes. Lexical, syntactic, and functional features of maternal input produced during the interaction were analyzed using the CHILDES software. Moreover, maternal PND symptomatology was assessed using the Edinburgh Postnatal Depression Scale. *Results:* At 3 months, maternal IDS in high-risk conditions (PND or ELBW preterm condition) showed a lower frequency of affect-salient speech ($F(2,49)=10.83, p=.002$; $F(2,49)=3.60, p=.034$, respectively) and a higher proportion of questions ($F(2,49)=6.61, p=.013$; $F(2,49)=3.32, p=.043$, respectively) and directives (PND: $F(2,49)=4.39, p=.040$) compared to IDS produced by non-depressed mothers and those of FT and VLBW infants, respectively. At 9 months, mothers with higher levels of PND showed an IDS characterized by lower verbosity ($F(2,49)=4.602; p=.032$) and higher frequency of attention-getter utterances ($F(2,49)=6.911; p=.009$) than mothers with lower levels of PND. *Discussion:* Despite preliminary, these findings highlighted that maternal IDS might be influenced by both the presence of depressive symptoms and severe prematurity. Moreover, IDS features seemed to change during the first year postpartum, suggesting the need to monitor the influence of both the severity of preterm birth and the presence of PND on the features of maternal input directed to the infant.



**APPLICATION OF THE DMRS IN VARIOUS CONTEXTS OF RESEARCH ON
IMPLICIT EMOTION REGULATION AND DEFENSE MECHANISMS**

Proposer

*Mariagrazia Di Giuseppe*¹

¹ Department of History, Culture and Society, Tor Vergata University of Rome, Rome, Italy

Discussant

*Fabio Madeddu*¹

¹ Department of Psychology, Università degli Studi di Milano-Bicocca, Milan, Italy

Abstract

Research has largely demonstrated the role of emotion regulation in mediating psychological well-being. Defense mechanisms are an important component of implicit emotion regulation that can be assessed with a valid and reliable empirical based method known as Defense Mechanisms Rating Scales (DMRS; Perry, 1990), nowadays considered the gold-standard procedure for studying defenses. In recent years, a group of DMRS experts have developed three novel measures to help studying defense mechanisms in different contexts, such as clinical setting (DMRS-Q; Di Giuseppe et al., 2014), large sample research (DMRS-SR-30; Di Giuseppe et al., 2020) and child psychotherapy (DMRS-Q-C; Di Giuseppe et al., 2021). In the present symposium various applications of DMRS-based measures will be discussed, testifying how scientific progress is closely linked to advance in assessment methodologies. In the first presentation, Dr. Mariagrazia Di Giuseppe will briefly describe the DMRS theory and its application in child psychotherapy. She will present psychometric properties and clinical relevance of a novel measure for assessing the whole hierarchy of defenses based on the DMRS-Q for adult, the so-called DMRS-Q-C. In the second presentation, Dr. Meltem Yilmaz will show results of a randomized clinical trial conducted at Lausanne University Hospital on 60 patients with BPD and of 30 controls assessed with DMRS and CCRT. She will show whether her hypothesis that overall defensive functioning mediates the link between the degree of pervasiveness of conflictual relationship themes and the severity of borderline psychopathology is confirmed or not. In the third presentation, Dr. Nicola Carone will examine the effects of helicopter parenting on problematic internet use through defensive functioning in emerging



adulthood. He will demonstrate that using more mature defenses following psychotherapeutic work may result in healthier emerging adults' adjustment. In the fourth presentation, Dr. Oronzo Mazzeo will discuss results of a narrative systematic review focused on the role of defense mechanisms in psychotherapeutic outcome. He will show how pre-treatment as well as post-session or within session defenses predicts outcome. In conclusion, we will debate on the importance of modern instruments in impacting research advance and evidence-based psychotherapies.



Pervasiveness of Core Conflictual Relationship Themes, Defensive Functioning and Symptom Severity in Patients with Borderline Personality Disorder

Meltem Yilmaz¹, Loris Grandjean², H el ene Beuchat², Yves de Roten², Ueli Kramer^{2,3}

¹ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy

² Institute of Psychotherapy, Department of Psychiatry-CHUV, University of Lausanne, Switzerland

³ Department of Psychology, University of Windsor, Canada

Abstract

Introduction: Patients with Borderline Personality Disorder (BPD) have a tendency to repeat their conflictual relationship themes across various interpersonal contexts which are accompanied by the activation of dysfunctional internal mechanisms to defend themselves against overwhelming relational anxieties. Although commonly accepted in psychodynamic clinical literature, the link between the pervasiveness of relational conflicts and defensive functioning is not yet empirically investigated along with BPD. *Methods:* The current study is a secondary analysis of a randomized clinical trial (NCT03717818) at Lausanne University Hospital and the University of Lausanne, Switzerland. The sample consisted of 60 patients with BPD who requested treatment from the university clinical service and of 30 students recruited from the university as a control sample. All participants were assessed with the Zanarini Borderline Personality Disorder Scale (ZAN-BPD; Zanarini, 2003) by a clinician and underwent the Relationship Anecdote Paradigm (RAP) Interview (Luborsky & Crits-Christoph, 1998). The RAP interviews continue to be coded with the Core Conflictual Relationship Theme (CCRT; Luborsky & Crits-Christoph, 1998) and the Defense Mechanism Rating Scale-Q version (DMRS-Q; Di Giuseppe & Perry, 2021). It is hypothesized that overall defensive functioning (ODF; obtained from the DMRS-Q coding system) mediates the link between the degree of pervasiveness of conflictual relationship themes (P; the percentage obtained from the ratio of the prevalence of the most frequent theme over the total number of anecdotes) and the severity of borderline psychopathology (BP; total ZAN-BPD score). To test this hypothesis, a path model will be applied. *Results and Discussion:* The preliminary results of the analysis with completed codings will be presented in the panel. Results are expected to show a significant indirect effect of P on BPD through ODF. Based on the results, it might be asserted that psychotherapies would benefit from targeting ODF in patients with BPD while working



with their maladaptive interpersonal patterns to lessen symptom severity. Advantages and limits of the RAP Interview regarding the coding of the DMRS-Q will further be discussed.



**From Maternal Helicopter Parenting to Problematic Internet Use in Emerging Adulthood:
Defensive Functioning as a Mediating Mechanism**

Nicola Carone¹

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

Abstract

Introduction: In emerging adulthood, problematic Internet use is a rising clinical issue, possibly linked to the quality of parent-child relationships with both mothers and fathers. Previous studies have indicated that explicit emotion regulation strategies may be associated with problematic Internet use. However, implicit emotion regulation strategies, such as defense mechanisms, which are ongoing, effortless, and automatic, might be even more crucial in understanding problematic Internet use among emerging adults as they are building their adult lives and making long-term commitments in relationships and work. The present study aimed at examining the effects of maternal and paternal helicopter parenting on problematic Internet use through defensive functioning in emerging adulthood. *Methods:* A cross-sectional, questionnaire-based survey was administered online to 401 cisgender emerging adults (71.8% females; 82% heterosexuals; Mage = 24.9, SD = 2.5) living in Italy. *Results:* About one-fourth (25.2%) reported problematic Internet use. Mediation analysis indicated that the indirect effect of mothers' helicopter parenting on problematic Internet use through overall defensive functioning was significant, estimate = 0.904, SE = 0.235, 95% CI [0.477, 1.380], $p < .001$. In contrast, the indirect effect of fathers' helicopter parenting was not significant, estimate = 0.343, SE = 0.188, 95% CI [-0.011, 0.749], $p = .068$. Considering the significant indirect effect, emerging adults reporting higher levels of helicopter parenting by mothers showed a less mature overall defensive functioning, which, in turn, reflected in greater problematic Internet use. Neither maternal, estimate = 1.158, SE = 0.722, 95% CI [-0.250, 2.555], $p = .109$, nor paternal, estimate = 0.355, SE = 0.731, 95% CI [-1.100, 1.792], $p = .628$, helicopter parenting had a significant direct effect on problematic Internet use. Overall, the full model explained 15% of the variance ($p < .001$). *Discussion:* The results have important treatment implications as they help explain Internet use's inner motives: psychotherapists cannot overshadow individuals' core defense mechanisms to deliver tailored interventions to treat PIU effectively. Such focus is paramount as using more mature defense mechanisms following psychotherapeutic work may result in healthier emerging adults' adjustment.



The assessment of implicit emotion regulation in children: Development and validation of the DMRS-Q-C

Mariagrazia Di Giuseppe¹, Tracy A. Prout²

¹ Department of History, Culture and Society, Tor Vergata University of Rome, Rome, Italy

² IMPACT Psychological Services, Beacon, New York, United States

Abstract

Introduction: Defense mechanisms are an important aspect of implicit emotion regulation that serve to protect the individual from awareness of internal and external stressors since childhood. Despite numerous attempts to provide valid and reliable measures for assessing defenses in children, only few instruments obtained good psychometric properties and large application. However, their limitations are evident and inspired us to develop a new tool based on the DMRS gold-standard empirical-based approach to study defense mechanisms. *Methods:* The present study introduces the Defense Mechanisms Rating Scale Q-Sort for Children (DMRS-Q-C), a novel 60 items observer-rated method for assessing 30 hierarchically organized defense mechanisms in children ages 5 to 13. Theoretical background, methodology used to develop the measure, coding and scoring systems, and preliminary reliability and validity of the DMRS-Q-C are described. *Results:* The DMRS-Q-C offers an easy-to-use, empirically-based method that can be used in research and clinical contexts without intensive training. Its detailed quantitative and qualitative assessment procedure allows the DMRS-Q-C to be used as an outcome measure. Preliminary psychometric properties showed promising results that need further validation. *Discussion:* The accurate assessment of the hierarchy of defense mechanisms in children has been a long-standing challenge for researchers and clinicians. The novel DMRS-Q-C method may finally help in investigating the child's implicit emotion regulation and, therefore, in formulating the clinical case, tailoring therapeutic intervention, and monitoring changes during the treatment.



Defense mechanisms and psychotherapy outcome: A systematic narrative review

Oronzo Mazzeo¹, Omar Carlo Gioacchino Gelo²

¹ Department of Engineering for Innovation, University of Salento, Lecce, Italy

² Department of Human and Social Sciences, University of Salento, Lecce, Italy

Abstract

Introduction: Defense mechanisms are unconscious processes that mediate between drives, feelings, internalised rules, and reality demands, which progressively stabilise as more or less adaptive, structured, global, and automatic ways of perceiving the world. Their relevance to personality functioning and psychopathology has led many authors to investigate how defences relate to psychotherapy process and outcome. This systematic narrative review examines the relationship between patients' defences and treatment outcome. *Methods:* A literature search was conducted in the electronic databases PsycINFO, PsycARTICLES and MEDLINE. The following keywords were used: defence mechanisms AND psychotherapy outcome AND/OR psychotherapy effectiveness. To be included in the study, an article had to be published in English and had to use a valid assessment of defence mechanisms or style and of therapeutic outcome. Of the 737 records produced by the initial search, 18 studies were identified as eligible. Analysis of their reference sections led to the identification of a further 7 studies, for a total of 25 articles included in the sample. *Results:* The most commonly used measures to assess defences were the Defense Style Questionnaire (pre- or post-session) and the Defense Mechanisms Rating Scale (within-session). These were mainly conceptualised as process variables ($n = 16$) and, in a smaller number of cases, as pre-treatment characteristics ($n = 6$) and treatment outcome ($n = 3$). Pre-treatment overall defensive functioning predicted treatment outcome in four out of five studies and retention in one study. Within-treatment defensive functioning predicted outcome in 15 out of 16 studies. Defensive functioning also predicted therapeutic alliance in one study. Finally, when defensive functioning was considered a treatment outcome, one study showed that clients who remained in treatment showed an increase in defensive functioning compared with clients who discontinued treatment. Two studies showed an increase in defensive functioning that was further associated with symptom reduction. *Discussion:* Defensive functioning seems to predict treatment outcome. Furthermore, one of the outcomes of psychotherapy seems to be an increase of defensive functioning, which may also favour retention. Limitations and suggestions for future research and clinical implications are discussed.



**DISSOCIATION AND THE DISSOCIATIVE DISORDERS: CONCEPTUALIZATION,
NEUROBIOLOGICAL FOUNDATIONS, ASSESSMENT, AND TREATMENT**

Proposer

*Adriano Schimmenti*¹

¹ Faculty of Human and Social Sciences, UKE- Kore University of Enna, Enna, Italy

Discussant

*Vincenzo Caretti*¹

¹ Department of Human Sciences, LUMSA University of Rome, Rome, Italy

Abstract

Knowledge regarding dissociation has dramatically expanded in the last decades. In keeping with the growth of the knowledge base, a need exists to provide a fresh lens on the topic, also to inform researchers and clinicians on the advancements in this field. On the one side, neurobiological research has generated clear evidence that traumatized individuals with dissociative disorders tend to show different patterns of brain activations than individuals with other disorders; on the other side, metaanalytic findings show that dissociative symptoms, such as amnesia, depersonalization, derealization, identity alteration, and identity confusion, are increasingly recognized in non-dissociative disorders. Also, the conceptualization of dissociation has recently been refined, allowing clinicians to differentiate between disintegrative and disassociative processes linked with traumatic experiences. This results in a more accurate understanding of dissociative domains resulting from the assessment of dissociation (e.g., via the Dissociative Experiences Scale or the Semi-Structured Clinical Interview for Dissociative Symptoms and Disorders) and, consequently, in more effective case formulation and treatment. The symposium aims to critically discuss these critical advancements in the field, and to provide directions for future research on dissociation and the dissociative disorders.



A primer on the SCID-D: Assessment, diagnosis, and treatment of dissociative disorders

Adriano Schimmenti¹, Gianluca Santoro¹, Antonino Costanzo¹, Giulia Lanza di Scalea¹

¹ Faculty of Human and Social Sciences, UKE, Kore University of Enna, Enna, Italy

Abstract

Introduction: The Semi-Structured Clinical Interview for Dissociative Symptoms and Disorders (SCID-D) is widely recognized as the gold-standard measure for the assessment of dissociative symptoms and disorders. Recently, the revised version of the SCID-D has been published and translated into Italian language. The current review was aimed to discuss the characteristics of the SCID-D and its implications for the assessment and treatment of dissociative symptoms and disorders. *Methods:* We examined the theoretical framework underlying the development of the SCID-D, its psychometric properties, and essential features in clinical settings. *Results:* The SCID-D is based on the Five Component Model of Dissociation Assessment, positing that the primary symptoms of dissociation are amnesia, depersonalization, derealization, identity confusion, and identity alteration. The SCID-D consists of different sections which allows interviewer to collect information on the patient's psychiatric and medical history, to evaluate the severity of the five dissociative components, and to explore their associated features. The measure has demonstrated high inter-rater reliability and criterion validity worldwide. For these reasons, the SCID-D is employed to determine a diagnosis of dissociative disorder in accordance with the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition Text Revision (DSM-5-TR) and the 11th Revision of the International Statistical Classification of Diseases (ICD-11). Finally, the information collected through the SCID-D can inform on the extent of the impairments in individual and interpersonal functioning, and can improve the clinician's understanding of the origins and triggers of dissociative symptoms. *Conclusions:* The SCID-D constitutes a fundamental instrument for the assessment of dissociative symptoms and disorders, and might help clinicians to plan targeted interventions for patients with a traumatic history and/or relevant alterations in functioning related to dissociation.



Dissociation: Conceptual Models and Methods of Operationalization

Carlo Garofalo¹, Claudia Mazzeschi¹

¹ Department of Philosophy, Social Sciences and Education, University of Perugia, Perugia, Italy

Abstract

The international debate on how it is best to operationalize dissociation for the purpose of its evaluation has a long tradition, and has often clouded the important discussion on the conceptual definition and theoretical modeling of this construct. With the aim of stimulating a critical reflection on the topic, this presentation reviews the conceptual and empirical work that has concerned some important conceptual assumptions inherent to the construct of dissociation as well as its operational consequences for assessment. Specifically, this presentation will summarize the conceptual perspectives on the following topics: 1. The dimensionality of the dissociation construct (i.e., uni- vs. multi-dimensionality); 2. The categorical nature vs. dimensional of the dissociation; 3. The equivalence of the meaning of dissociative symptoms across different groups (e.g., across gender and age as well as across clinical and nonclinical populations). Based on this conceptual synthesis, the corresponding implications for measurement models will be reviewed with respect to: 1. The use of total or subscale scores in the assessment of dissociation; 2. The use of cut-offs vs. of dimensional scores for the evaluation of the dissociation; 3. The evidence of measurement invariance for dissociation assessment tools and the need for adaptations for specific populations, with particular reference to developmental age and potentially alienating contexts (e.g. long hospital stays, incarceration). In conclusion, this presentation stresses the importance to never lose of the conceptual modeling level, which can serve as a "secure base" for venturing into the development and testing of the most appropriate methods of operationalization of the construct, emphasizing the important role of dissociation to explain various forms of maladaptive functioning.



Dissociative states of brain-mind functioning: A clinical neuropsychodynamic perspective between self-organization and self-regulation mechanisms

Andrea Scalabrini¹, Clara Mucci¹, Marco Cavicchioli²

¹ Department of Humanities and Social Sciences, University of Bergamo, Bergamo, Italy

² Department of Psychology, Vita-Salute San Raffaele University, Milan, Italy

Abstract

Dissociation is a complex construct that includes a broad constellation of symptoms, phenomena and processes. Different clinical perspectives and psychometric approaches support a transdiagnostic nature of dissociation across psychopathological disorders and, they identify a dissociative spectrum (DS) composed of dissociative disorders, posttraumatic stress disorder, conversion disorder, somatoform disorders and borderline personality disorder. Furthermore, neuroscience research has provided a support for common and specific neurobiological proxies of dissociation across the DS.

Departing from these findings, this presentation will discuss results of several papers published by the presenters on dissociation and its implications for clinical considerations, especially supporting them through neuroscience evidence. Particularly, it will be discussed the role of dissociation as a disorder of integration at the base of self-organization of mind-brain functioning together with the self-regulation of individual's internal-external interactions, especially in the context of affective responses.



Disintegration, detachment, and dissociation: Three strands of a single braid?

*Benedetto Farina*¹

¹ Department of Human Sciences, European University of Rome, Rome, Italy

Abstract

Despite the high prevalence of dissociation in psychiatric disorders and general agreement regarding its clinical relevance as a marker of clinical severity and poorer treatment response there is no consensus on its definition and pathogenesis. Indeed, dissociation includes a wide and diverse group of symptoms that need of different treatment approaches. Most of contemporary scholars agree it is unlikely that so many different manifestations could be generated by the same pathogenic process and that a unidimensional approach to dissociation treatment is unfounded and not clinically effective. It is possible to hypothesize that so different dissociative manifestations are generated by different pathogenic processes that interplay between them: traumatic disintegration, what is more properly called dissociation, and detachment. These processes are the main features of a traumatic disintegrative psychopathological dimension dominating clinical pictures of cumulative developmental trauma. This presentation aims to describe this dimension that could have relevance for treatment and research.



**MENTALIZATION AND MINDFULNESS IN PSYCHOPATHOLOGY: WHERE DO WE
STAND?**

Proposer

*Francesca De Salve*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Discussant

*Giovanna Esposito*¹

¹ Department of Humanities, University of Naples "Federico II", Naples, Italy

Abstract

The shared identity of mentalization, mindfulness, metacognition, and Theory of Mind is captured by Higher-Order Cognition (HOC) construct. HOC involves awareness of self, others, and the world. These processes derive from hierarchical networks of information processing that enable abstraction but may be impaired by psychopathology. The symposium aims to show the impact of mentalizing deficits and mindfulness abilities in psychopathology through 4 contributions: (1) Mentalizing in patients with At-Risk Mental States (ARMS): a systematic review of its role in the psychotic onset; (2) A Mind of One's Own: Exploring Mentalized Affectivity in Adolescents; (3) Trans-diagnostic efficacy of mindfulness-based programs: an umbrella review of meta-analyses of randomized controlled trials; (4) The role of attachment and mentalization on therapeutic outcome: preliminary findings from a psychodynamic group therapy. The contributions respectively aim to (1) review the role of mentalization abilities (e.g., metacognition and Theory of Mind) in young adults with At-Risk Mental States, comparing the difference in mentalizing abilities between patients with ARMS, full-blown psychosis, and healthy control; (2) validate the Brief-Mentalized Affectivity Scale (B-MAS) on a sample of Italian adolescents, testing the factorial structure of the instrument and investigating the relationships between MA and other dimensions of psychological functioning, including mentalization, alexithymia, epistemic trust, self-efficacy, psychological difficulties, and early traumatic experiences; (3) comprehensively evaluate meta-analyses (MAs) of randomized controlled trials (RCTs) that investigated associations between mindfulness-based programs (MBPs) and any mental and physical outcome; (4) to



explore predictors of outcome and mechanisms of change in patients of group therapy by focusing on the therapeutic relationship process and on its interrelation with two main constructs: attachment, and mentalizing. The studies presented provide evidence of the importance of considering mentalization and mindfulness in treating psychiatric disorders. Clinical implications and potential preventive intervention will be discussed.



Mentalizing in patients with At-Risk Mental States (ARMS): A systematic review of its role in the psychotic onset

Francesca De Salve¹, Osmano Oasi¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: Mentalization is an umbrella concept defined as the ability to interpret one's and others' mental states. Previous studies have hypothesized that mentalization may be a crucial resilience factor that significantly moderates the risk of developing psychotic onset in individuals with At-Risk Mental States (ARMS). The study reviews the role of mentalization abilities (e.g., mentalizing, metacognition, and Theory of Mind) in young adults with ARMS. Specifically, the objective is to compare the difference in mentalizing abilities between patients with ARMS, full-blown psychosis, and healthy control. *Methods:* Electronic databases (PsycINFO, PubMed, Scopus, and Google Scholar) were used to search for articles, while Rayyan was employed to facilitate the screening and selection of studies. Eligible studies are original English-language; peer-reviewed research articles on populations that met validated risk diagnostic criteria for psychosis and ARMS; empirical studies evaluating the association or differences between psychotic risk and mentalizing abilities. No English-language studies, the ones not considering the diagnostic criteria for ARMS and qualitative studies were excluded. After the application of the PRISMA checklist and the inclusion and exclusion criteria previously mentioned, 10 articles were extracted. The systematic review has been registered on Prospero. *Results:* Low levels of mentalization and metacognition can predict a transition to psychosis. In addition, mentalization and metacognition impairments were associated with a wide range of attenuated psychotic symptoms both in ARMS and individuals with high schizotypy traits. Concerning cognitive ToM tasks, no significant differences with healthy controls emerged, whereas difficulties in detecting emotional ToM were present in individuals with ARMS. *Discussion:* The results obtained from the review suggest that the application of strategies to attenuate maladaptive metacognitive beliefs and low mentalizing may be equally effective in improving psychotic symptoms. The assessment of mentalization and metacognition could potentially provide additional prognostic value over factors predisposing to psychosis. Good mentalization and metacognition functioning should be considered as protective factors able to minimize the transition to psychosis.



The role of attachment and mentalization on therapeutic outcome: preliminary findings from a psychodynamic group therapy

Maria Rita Infurna¹, Eleonora Bevacqua¹, Anna Maria Ferraro², Linda Giusino², Francesca Giannone¹

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Self-employed psychotherapist

Abstract

Introduction: There is substantial evidence that group treatment is effective with several disorders, however, the understanding of underlying mechanisms that influence patients' change is a major research question. Previous research agrees in identifying the therapeutic relationship as the main factor of change in group therapy, contributing to patient improvement and lower drop-out rates. The present study sought to explore predictors of outcome and mechanisms of change in patients of group therapy by focusing on the therapeutic relationship process and on its interrelation with two main constructs: attachment and mentalizing. Mentalization refers to the capacity to understand others' actions as well as one's own behavior in terms of intentional mental states, such as feelings, desires, attitudes, and goals. Reflective function refers to this ability operationalized in the context of attachment relationships. Mentalization has been shown to predict group processes and outcomes in adults with psychiatric disorders. *Methods:* Nine patients entered psychodynamic group treatment, meeting weekly for one year. Self-report measures of attachment and mentalization were completed at the start of treatment, and at 6-month, and 12-month sessions by patients. Further, outcome measurements of psychological distress and group process variables were regularly assessed using quantitative measures. *Results:* We proposed that insecure attachment and mentalizing difficulties at the start of treatment would be associated with poorer therapeutic process ratings. We hypothesized that one mechanism by which attachment and mentalization might influence the outcome is via their association with the development of positive therapeutic bonding, a well-established predictor of outcome in psychotherapy. Preliminary results point in this direction, highlighting the important role played by the reflective function on the therapeutic outcome. *Discussion:* These preliminary results suggest the importance of assessing attachment and mentalizing dimensions to predict better outcomes. However, more work is needed before firm conclusions can be drawn.



A Mind of One's Own: Exploring Mentalized Affectivity in Adolescents

Marianna Liotti¹, Fabiola Bizzi², Alice Fiorini Bincoletto¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Educational Science, University of Genoa, Genoa, Italy

Abstract

Introduction: Mentalized affectivity (MA) describes the ability to identify, regulate, and express emotions, combining the concepts of mentalization and affective regulation. It emphasizes the importance of reflecting on one's emotional experiences and how they relate to one's personal history. This construct appears relevant to understand the onset and maintenance of adolescent psychopathology, since this life phase is characterized by significant changes, many of them involving the surfacing of new, complex, and often intense emotions. This study aimed to validate the Brief-Mentalized Affectivity Scale (B-MAS) on a sample of Italian adolescents, testing the factorial structure of the instrument and investigating the relationships between MA and other dimensions of psychological functioning, including mentalization, alexithymia, epistemic trust, self-efficacy, psychological difficulties, and early traumatic experiences. *Methods:* The study was conducted through an online survey using widely validated self-report tools. Principal component analysis and confirmatory factor analysis regarding the B-MAS were conducted on a sample consisting of 566 adolescents aged 13–19 years (Study 1). A smaller percentage also completed questionnaires pertaining to other variables of psychological functioning (Study 2, n=288). *Results:* The original three-factor structure of the instrument was replicated, and all subscales showed good reliability and construct validity. Furthermore, good MA abilities were correlated with indices of adaptive functioning, while impairments in MA were associated with both internalizing and externalizing symptoms, as well as ruptures in epistemic trust. *Discussion:* The results of this study suggest that the B-MAS possesses excellent psychometric properties. Its brevity and ease of administration make it particularly suitable for use in the adolescent population, both in clinical and research settings.



Trans-diagnostic efficacy of mindfulness-based programs: An umbrella review of meta-analyses of randomized controlled trials

Tommaso Boldrini¹, Alessandra Andreani¹, Viola Ghiandoni¹, Gaia Dell'Arciprete¹, Marco Solmi²

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Ottawa Hospital Research Institute (OHRI) Clinical Epidemiology Program University of Ottawa, Ontario, Canada

Abstract

Introduction: To comprehensively evaluate meta-analyses (MAs) of randomized controlled trials (RCTs) that investigated associations between mindfulness-based programs (MBPs) and any mental and physical outcome. *Methods:* Three electronic databases (PubMed, Embase, and Cochrane Library) were systematically searched from inception to April 2022 for meta-analyses of RCTs investigating associations between mindfulness-based programs and health outcomes. We included 44 MAs (432 RCT), reporting on 204 meta-analytic comparisons. Methodological quality of individual primary studies was evaluated using the Assessing the Methodological Quality of Systematic Reviews (AMSTAR) assessment. Each MA has been reanalyzed using the random-effects model. Summary effect sizes and their confidence intervals for each outcome were estimated, along with prediction intervals. We also calculated I², small study effects, and excess significance that are associated with heterogeneity and bias. The quality of evidence for every comparison has been rated using the Grading of Recommendations, Assessment, Development and Evaluation (GRADE) assessment. *Results:* Overall, the quality of RCTs included by MAs is very poor. Moderate evidence for the efficacy of MBPs is limited to the reduction of obsessive-compulsive symptoms, obsessive beliefs, and depressive symptoms among adults with obsessive-compulsive disorder. All other (i.e., 201) meta-analytic comparisons showed “low” or “very low” evidence. *Discussion:* Considering the economic interests that revolve around the mindfulness industry (estimated at around \$4 billion every year), high-quality RCT studies and longer follow-up periods are needed. Our results are currently the most comprehensive and up-to-date and should urgently inform clinical guidelines.



Sunday, 17th September 2023

THEMATIC SESSION

**EMOTIONAL REGULATION AND DYSREGULATION IN
HEALTHY AND CLINICAL POPULATIONS**

Chair:

Alessandra Santona

University of Milano-Bicocca

Patrizia Velotti

Sapienza University of Rome



Migraine and Emotion regulation: a Systematic review

Cecilia Blandizzi¹, Giulia Alfani¹, Anna Contardi¹

¹ Department of Human Science, European University of Rome, Rome, Italy

Abstract

Previous studies investigating chronic pain and emotion regulation found direct and indirect relationships between emotion regulation strategies and pain (i.e., intensity or pain-related functioning). Furthermore, migraine sufferers have significantly higher rates of psychiatric comorbidities (primarily anxiety and depression disorders) than the general population, which may be a risk factor for increased migraine-related disability, chronicity of migraine, and reduced quality of life and treatment adherence. Emotion dysregulation has emerged as a transdiagnostic feature of different mental health outcomes. The present systematic review investigates the role of emotion regulation/dysregulation in migraine patients following the PRISMA guidelines. Pubmed, SCOPUS, PsycINFO, and PsycArticles databases were searched until February 2023. Studies were included if they quantitatively examined the association between migraine, defined according to International Headache Society (IHS) criteria, and emotion regulation or dysregulation in adults. Of the 84 records identified through database searches, only four studies met the eligibility criteria. Results showed that migraine patients reported significantly higher difficulties in emotion regulation than healthy controls and fewer positive cognitive emotion regulation strategies than normal headaches. Moreover, positive correlations were found between difficulties in emotional regulation, migraine-related disability, and frequency of migraine episodes. Instead, migraine frequency, severity and disability were not significantly associated with cognitive reappraisal and expressive suppression. These findings suggest that migraine patients use fewer positive emotion regulation strategies and that difficulty in emotion regulation, but not cognitive reappraisal and expressive suppression, may be associated with migraine-related disabilities and migraine episodes frequency. Overall, the migraine-emotion regulation relationship has not been sufficiently investigated. In addition, several psychological and clinical variables could be studied as mediators of this relationship. Future research could consider this line of research and its clinical implications.



Emotional dysregulation, personality traits and eating styles in adolescents: an observational study

Adriana Leccese¹, Nadia Genzano¹, Nicoletta Trotta², Antonella Calvio¹, Lucia Monacis¹, Giusi Antonia Toto¹, Pierpaolo Limone¹

¹ Department of Humanities, University of Foggia, Foggia, Italy

² Department of Mental, Physical Health and Preventive Medicine, University Vanvitelli, Naples, Italy

Abstract

Introduction: Research data demonstrate the role that emotions play in food choices and behaviors by discriminating concepts of physical and emotional hunger. Alexithymia, a disturbance in the cognitive and affective processing of experience, and emotional dysregulation marked by an inability to manage and regulate one's emotions, appear to be associated with unhealthy behaviors, such as those included in Nutrition and Eating Disorders. People affected by subthreshold clinical syndrome may experience emotions as unacceptable or frightening, and use food control as an emotive avoidance or coping strategy. In addition, a greater inclination to be impulsive would be found to be correlated with the construct of emotional eating, for example, the tendency to eat compulsively to reduce the intensity of experienced negative emotions and a particular sensitivity to external stimuli that signal the presence and accessibility of food even when the physiological sensation of hunger is not experienced. The present study is an observational research design aimed at investigating the correlation of personality traits and emotional dysregulation with eating-related behaviors and cognitions in adolescent students of a high school in the city of Foggia. *Methods:* The sample, consisting of 89 adolescents, predominantly female, from the Notarangelo-Rosati Technical Institute in Foggia, completed a series of self-report questionnaires (TAS 20, DERS, FCQ-T, FCQ-S, BES, FA, BIS-15, EAT-26, TOS, DOS). *Results:* Consistent with the state of the art that motivated the present observational study design, it is observed scores considerable of impulsiveness, difficulty in recognising, verbalising and managing emotions. The results confirm a positive and significant correlation between difficulty in processing ($r= 0.28$; $p=0.007$) and emotional regulation ($r= 0.49$; $p<0.0001$) with food-related symptoms. Impulsivity is not significantly associated with dysfunctional eating behaviour. *Discussion:* Temperament and emotion regulation factors appear to be predictive in the choice of dysfunctional eating behaviour in adolescent. Based on these premises, future studies could evaluate the effectiveness of cognitive-behaviourally oriented group



psycho-educational interventions for emotional regulation as a form of prevention against the development of nutrition and eating disorders.



Anger and primary affects

Paola Manfredi ¹

¹ Department of Clinical and Experimental Sciences- University of Brescia, Brescia, Italy

Abstract

Introduction: Primary affective systems are embedded tools for survival, encoded in the genome and subsequently refined by basic learning mechanisms (secondary processes) and higher-order cognitions/thoughts (tertiary processes). In a healthy condition, the various systems receive adequate responses; when this is not the case, the over-activation or hypo-activation of one system generally leads to a cascade of alterations in other systems as well. The aim of this work is to compare some indicators of anger with basic affective systems. *Methods:* The Staxi-2, to measure anger, and the ANPS 3.1 to detect basic affective systems were administered to a sample of 456 subjects. Considering the indicators of the Staxi-2, the sample was divided according to the 50th percentile and groups were assessed with the one-way ANOVA. *Results:* In the group with higher scores in Status Anger (R/S), Trait Anger (R/T), Expression of Anger Out (ER/Out), Temperament (RT/T), Anger Reaction (RT/R) there were also statistically significant differences in the scores of the FEAR, ANGER, Dominance, SADNESS systems. In the group with higher anger control scores, both internal and external, there are significantly different higher scores in the SEEKING, CARE, and PLAY systems and lower scores in the FEAR, ANGER, Dominance, and Social Anxiety systems. Higher CARE and SEEKING scores are found in the sample with low scores in suppression or non-expression of anger In (ER/In). Higher scores in FEAR, Dominance, Social Anxiety, and SADNESS are found in the group with higher scores in the general anger expression index (ER/In), while the sample with lower scores has higher scores in SEEKING, CARE, and PLAY. *Discussion:* Without comparing conditions of pathological or normal presence of anger, an increase or decrease in anger seems to affect all basic affective systems. In particular, it seems important to consider that the experience of anger also involves emotions of pain and fear, but above all, it is relevant to observe that the complex expression of anger plays a significant role in the SEEKING, CARE, and PLAY systems. In the diagnosis and care of patients, even when there are no obvious problems with anger, these issues seem to us to deserve careful consideration.



Anger, violence, and fear

*Paola Manfredi*¹

¹ Department of Clinical and Experimental Sciences, University of Brescia, Brescia, Italy

Abstract

Introduction: Anger is a universal emotion, sometimes expressed maladaptively and violently. The literature has highlighted some limitations in the therapeutic pathways, related to diagnosis, the effectiveness of interventions, and alliance. Another way could include a diagnosis of primary functioning and related feelings. This abstract will present some findings concerning fear. *Methods:* An ad hoc questionnaire is administered to a sample of inmates for violent offenses (33 subjects). The data were compared with a non-clinical sample using the Mann-Whitney U-test. *Results:* The belief that one's anger may be related to some fear belongs more to the non-clinical than to the inmates (49.8 vs. 30.3%). Significant differences emerge in the typology of the fears, in particular among the inmates the fear of being mistreated ($p = .000$), fear of being eliminated ($p = .002$), fear of not knowing how to defend oneself ($p = .005$), fear of feeling humiliated ($p = .028$), fear of being judged as inept ($p = .041$) and fear of succumbing ($p = .042$) are more frequent. There is no difference when investigating the existence, in childhood and in the past, of people who had aroused fear (45% vs. 45.5%), but there is a difference in the way the subjects think about the child they were and who was afraid. In prisoners, grief ($p = .001$), shame ($p = .001$) contempt ($p = .000$) and anger ($p = .001$) are prevalent in non-prisoners, tenderness ($p = .046$). The feeling of having to keep a dangerous part of oneself at bay is shared by 34.3% of the inmates vs. 20.1 % of the controls. For this one that feeling is linked to the concern that anger is never legitimate, whereas the inmates are continually focused on themselves, feeling potentially dangerous and afraid of what they might do ($p = .000$). *Discussion:* It would thus seem that fear is an element to be carefully investigated and evaluated, both in current experiences and in the processing of childhood experiences in which it was suffered. In particular, difficulties in processing can be understood within the framework of a primary functioning deficit.



Cardiovascular disease, self-care and emotional regulation processes in adult patients: balancing unmet needs and quality of life

*Dina Di Giacomo*¹

¹ University of L'Aquila, L'Aquila, Italy

Abstract

Background: Cardiovascular disease is a chronic non-communicable illness that causes more than half of all deaths across Europe. An unhealthy lifestyle, and inadequate adherence to medical prescriptions, themselves associated with psycho-emotional disorders are considered risk factors for reduced quality of life as well physical condition. *Objective.* The aim of our study was to understand predictive factors for disease management by evaluating psychological aspects, self-care processes and emotional regulation in CVD outpatients. *Methods:* An observational study was conducted. Sixty-one patients, age 18–75 years ($M 56.4 \pm sd 12.0$), diagnosed with CVD participated in the study. The psychological battery was administered during clinical follow-up oriented to detect emotional and psychological dimensions as well adaptive behavior and quality of life by standardized questionnaire/scales. *Results:* The finding showed that emotional dysregulation might influence QoL, a particularly significant effect of awareness ($\beta = 0.022$; $SE = 1.826$; $p < 0.002$), goals ($\beta = -0.54$; $SE = 1.48$; $p < 0.001$) and clarity ($\beta = -0.211$; $SE = 2.087$; $p < 0.003$). The results also suggest that the mediated effect accounted for the awareness index was 18.7% ($R^2 = 0.187$) of the variance, the goals index 62.8% ($R^2 = 0.628$) of the variance and, the significant mediated effect of clarity was 58.8% ($R^2 = 0.588$) of the variance. This evidence suggests that the relationship between triggers and QoL is mediated by emotional dysregulation indexes. *Conclusion:* In clinical practice psychological screening can be an effective tool for detecting predictive factors in the management of the CVD patient's health and adherence to medical treatment: the screening of predictive psychological factors for allowing good clinical condition management and self-care empowerment aimed at increasing psychological well-being and the Quality of Life by planning adequate integrated and multidisciplinary support.



Emotional-behavioral problems in Italian adolescents measured through the Achenbach System of Empirically Based Assessment (ASEBA): a systematic review

*Stefania Muzi*¹, *Victoria Alys Bianchi*¹, *Alessandra Frigerio*²

¹ Department of Education Sciences, University of Genoa, Genoa, Italy

² IRCSS E. Medea, Italy

Abstract

Introduction: International literature (Achenbach et al., 2016) highlights the utility and accuracy of three questionnaires of the Achenbach System of Empirically Based Assessment – the parent report Child Behavior Checklist 6-18 years (CBCL), the teacher-report Teacher Report Form 6-18 years (TRF), and the self-report Youth Self Report 11-18 (YSR) – in screening emotional-behavioral problems of adolescents. In Italy, these three questionnaires are largely used both in research and clinical settings and in social sciences and pediatric research (Frigerio et al., 2009; Muratori et al., 2008). However, there is no synthesis of the findings of these Italian studies, helping to define the state-of-art, trends, limits, and gaps of the existing research on emotional-behavioral problems of Italian adolescents. *Methods:* To fill this gap a systematic review of studies using CBCL, YSR and TRF was performed, to assess the emotional-behavioral problems of Italian adolescents, following the PRISMA guidelines. The search was performed on five scientific databases and for grey literature, considering contributions published from January 2001 to November 2021. Their methodological quality was assessed with the Newcastle-Ottawa Scale. *Results:* Records retrieved were 7103. Duplicate removal and double screening led to the inclusion of 82 independent contributions, none employing the TRF. In studies on community participants, emotional-behavioral problems at CBCL were higher and those at YSR lower than Italian rates reported in previous cross-country comparisons (Rescorla et al., 2012). Community adolescents' problems were associated with lower attachment security or comorbid symptoms of eating or social media disorder. In studies on at-risk and clinical participants, emotional-behavioral problems were mainly investigated through the CBCL and mostly on clinical adolescents suffering from eating and externalizing disorders, or affected by a medical condition. Associations were investigated mainly with emotional regulation difficulties. *Conclusion:* The authors discuss the clinical and research implications of this review findings, and future research directions are discussed in light of the limitations of the systematic review, including the heterogeneity of studies included.



Sunday, 17th September 2023

THEMATIC SESSION

**ASSESSMENT AND TREATMENT OF THE INTERNALIZING
SPECTRUM IN THE LIFESPAN**

Chair:

Antonello Colli

University of Urbino Carlo Bo

Eliana Tossani

University of Bologna



Perinatal depression: screening and identification of a psychological risk profile

Melania Severo^{1,2}, *Alessia Marconcini*³, *Elisa Giannaccari*^{4,5}, *Giuseppe Luigi Palma*⁴, *Antonio Ventriglio*⁶, *Luigi Nappi*⁷, *Mario Vicino*⁸, *Antonello Bellomo*⁶

¹ Psychology and Psychiatry Unit, Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

² Department of Humanistic Studies, University of Foggia, Foggia, Italy

³ Clinical Psychology Outpatient Clinic, “San Paolo” Hospital, Via Caposcardicchio, Bari, Italy

⁴ Hospital Psychology Unit, U.O. “Vito Fazzi” Hospital, Piazza Filippo Muratore, Lecce, Italy;

⁵ Obstetrics and Gynecology Unit, U.O.C. “Vito Fazzi” Hospital, Piazza Filippo Muratore, Lecce, Italy

⁶ Psychology and Psychiatry Unit, Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

⁷ Department of Medical and Surgical Sciences, Institute of Obstetrics and Gynecology, University of Foggia, Foggia, Italy

⁸ Obstetrics and Gynecology Unit, U.O.C. “Di Venere” Hospital, Via Ospedale Di Venere 1, Bari, Italy

Abstract

Introduction: Pregnancy is often associated with emotional conditions such as anxiety and depression. Perinatal depression has an incidence of about 12% and occurs during pregnancy or after delivery. Risk factors for perinatal depression among pregnant women may include personality traits such as neuroticism, low resilience, insecure attachment to a partner and dysfunctional coping strategies. We report descriptive results of a screening programs aimed at detecting depressive symptoms and associated risk factors in a large sample of women (N = 1,664). *Methods:* Women who accessed gynecology departments in the Puglia Region were assessed in the third trimester of pregnancy (T0) and after delivery (T1), while those at risk of depression were reassessed at 1 month and 1 year after delivery (T2-T4). The EPDS was used to screen for perinatal depression, while other instruments were used to assess neuroticism (NEO), resilience (CD-RISC), coping strategies (Brief-COPE) and quality of life (WHOQOL-Brief). *Results:* Of 1664 women, 1541 were examined at T1 and 131 women considered at depressive risk were followed up over time at 1, 6 and 12 months postpartum (T2-T4). In our sample, approximately 9% of the women were at risk for depression after childbirth. Of the 131 patients at risk



for EPDS ≥ 12 after childbirth, 59 patients (45.04%) were already at risk at pre-term (also for EPDS ≥ 12). Women with a higher risk of depression reported higher levels of neuroticism, lower levels of personal resilience, greater anxiety and avoidance in intimate relationships, greater use of dysfunctional strategies (such as (e.g., denial, self-blame, etc.), and lower quality of life ($0.0008 < \text{all } p < 0.0001$).

Conclusions: This study confirms the usefulness of screening programs for the early detection of the risk of depression in pregnant women. The implementation of similar programs would allow a more accurate assessment of risk and protective factors, as well as early intervention through referral to the most appropriate specialist services.



The Effectiveness of Cognitive Behavioral Therapy for Prolonged Grief Symptoms in Children and Adolescents: A Systematic Review

*Valeria Saladino*¹, *Valeria Verraastro*², *Danilo Calaresi*², *Nadia Barberis*²

¹ Department of Human, Social and Health Sciences, University of Cassino and Southern Lazio, Cassino, Italy

² Department of Medical and Surgical Sciences, Magna Græcia University of Catanzaro, Catanzaro, Italy

Abstract

Introduction: The loss of a loved one may lead to prolonged grief, a recently recognized disorder (DSM-5-TR) that can result in changes in the mourning process, a feeling of isolation and unease, and an overall functional impairment. In contrast to adults, children and adolescents may become more concerned with events related to death and may be more influenced by their social surroundings and cognitive growth. Research has demonstrated that Grief- and Trauma-focused Cognitive Behavioral Therapy (CBT) is highly effective in treating symptoms of grief and trauma in children and adolescents and reducing secondary outcomes such as anxiety and depression. *Methods:* In this systematic review, the main objective was to assess how effective CBT is in treating prolonged grief symptoms in children and adolescents. Two independent reviewers conducted a search of four electronic databases, including Scopus, Web of Science, PubMed, Cochrane Library, and PsycArticles, using three groups of keywords related to prolonged grief, children and adolescents, and CBT. The chosen studies were evaluated based on specific inclusion and exclusion criteria and a risk of bias assessment. Data from 20 selected studies were analyzed, with a focus on three macro-categories: participants' characteristics, instruments used, and the effectiveness of CBT. *Results:* CBT effectively reduced prolonged grief symptoms and enhanced overall functioning. The studies included had well-balanced sociodemographic characteristics, and there were no significant differences in age, gender, or ethnicity among the participants. However, there was some variation in the instruments used, with the IPG-C/A and ICG-RC being the most sensitive measures. The treatments were tailored to different contextual and structural factors while maintaining their clinical importance. Primary and secondary outcomes showed significant medium/large or small/medium effect sizes, respectively. *Discussion:* The results indicate that CBT is a promising treatment for prolonged grief symptoms in children and adolescents. However, the studies included in this review exhibit some level of heterogeneity in their characteristics, and their quality varied due to biases. There is a need to establish



standard methodologies for prolonged grief symptoms in children and adolescents, both in research and clinical settings.



The use of the Rorschach test in malingering assessment

Sara Pasqualini¹, Francesca Ales¹, Salvatore Zizolfi², Alessandro Zennaro¹

¹ Department of Psychology, University of Turin, Turin, Italy

² Private practice

Abstract

Malingering is defined as the intentional production of false or grossly exaggerated psychological or physical symptoms with the aim of obtaining external incentives (APA, 2013). In forensic contexts, it is deemed to occur in about $15\% \pm 15\%$ of evaluations (Young, 2016). As such, the credibility of presented symptoms cannot be taken for granted and needs to be assessed. To that extent, the Rorschach test may have some potential, in that test-takers are unlikely to know which scores the assessor will consider. However, the research on how negative response bias affects Rorschach scores is scarce, so that this experimental study evaluated whether the Rorschach Performance Assessment System (R-PAS) could discriminate feigned from genuine schizophrenic symptoms. The sample consisted of 60 volunteers divided into three groups: $n=20$ patients with schizophrenia instructed to respond honestly (i.e., clinical contrast group), $n=20$ non-clinical adults instructed to feign schizophrenia (i.e., experimental feigners group), and $n=20$ non-clinical adults instructed to respond honestly (i.e., non-clinical control group). All were given the Rorschach test following R-PAS guidelines with a recently developed app designed to conduct remote assessments. Taken together results showed that a subset of R-PAS scores (mainly focused on thinking problems) were able to discriminate between subjects really suffering from schizophrenia and feigners. However, some of the variables supposed to differentiate healthy controls from bona fide patients did not perform as expected (particularly from quality-related codes).



Assessing Pragmatic Language Skills and SWAP-200 Personality Factors in Adults with Major Depressive Disorder: An Exploratory Study

*Maria Clelia Zurlo*¹, *Federica Vallone*²

¹ Dynamic Psychology Laboratory, Department of Political Sciences, University of Naples Federico II, Naples, Italy

² Dynamic Psychology Laboratory, Department of Humanities, University of Naples Federico II, Naples, Italy

Abstract

Introduction: There is increasing evidence that Major Depressive Disorder (MDD) is associated with significant impairments in pragmatic language, yet this issue is still under-researched and - mainly - there is a lack of studies using standardized tools. The present study aims at investigating pragmatic language skills in association with SWAP-200 Personality Q Factors among patients with MDD, also comparing findings by using a control group of patients who did not receive an MDD diagnosis (non-MDD patients). A single case was also deepened to explore potential changes in personality factors and in pragmatic language skills after two years of psychotherapy. *Methods:* Twenty adults (aged 22-65) with a DSM-5 diagnosis of MDD were evaluated by using the SWAP-200, to assess Personality Q Factors, and the BLED Santa Lucia (Batteria sul Linguaggio dell'Emisfero Destro Santa Lucia), which is a battery designed to investigate pragmatic language skills (comprehension of inferences, picture and written metaphors, indirect requests, humoristic expressions, and prosody). The performance of the MDD participants on all BLED subscales was compared to those reported by twenty subjects (control group of non-MDD patients) matched for gender, age, years of education, and employment status. Associations between pragmatic language skills and Personality Q factors were evaluated. The single case was then analysed by assessing any pre-post changes in study variables after two years of psychotherapy. *Results:* MDD patients performed poorer than controls in Comprehension of Inferences ($p < 0.01$), Picture Metaphors ($p < 0.001$), Written Metaphors ($p < 0.001$), Indirect Requests ($p < 0.01$), Humoristic Expression ($p < 0.05$), and Prosody ($p < 0.05$). Moreover, BLED subscales were significantly positively related to SWAP-200 High Functioning Depressive Personality Q Factor, while significantly negatively related to Dysphoric-Emotionally Dysregulated Q Factor. Data from the single case revealed significant therapeutic changes towards a more functioning profile. *Conclusions:* Pragmatic language skills can be



significantly impaired in MDD patients, yet data supported the possibility to use valid tools in clinical settings for the assessment and monitoring, and to inform psychotherapeutic interventions fostering positive changes in MDD patients.



The association between grandiose narcissism and depressive symptoms in patients with insomnia disorder: Results from a pilot study

Cecilia Zucconi¹, Virginia Tarantino¹, Martina De Angelis¹, Nicola Biagio Mercuri², Mariana Fernandes², Francesca Avvento², Serena Covino², Claudio Liguori²

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Systems Medicine, Tor Vergata University of Rome, Rome, Italy

Abstract

Introduction: Insomnia is one of the most common sleep disorders, affecting approximately one-third of the adult population. Although multiple studies have supported the bidirectional relationship between insomnia and depressive symptoms, a growing body of research suggests that insomnia may itself be a risk factor for depression. In insomniacs, depression – beyond being related to insomnia severity and sleep quality – is also associated with stress caused by dysfunctions of daily activities, childhood interpersonal traumas, and with difficulty controlling negative emotions. Of note, there is also clear evidence that certain personality traits (particularly neuroticism) may act as predisposing/perpetuating factors for insomnia and related emotional-adaptive problems, including depression. Nevertheless, no study has ever considered the role of grandiose narcissism in predicting depression in patients with insomnia disorder (PsWID). *Methods:* Twenty-two PsWID were administered the Beck Depression Inventory (BDI-II), the Narcissistic Admiration and Rivalry Questionnaire (NARQ), the Insomnia Severity Index (ISI), the Pittsburgh Sleep Quality Index (PSQI), the Perceived Stress Scale (PSS), the Traumatic Experiences Checklist (TEC), and the Difficulties in Emotion Regulation Scale (DERS). A hierarchical multiple linear regression was performed to determine the role of the factors that were significant in Pearson correlations in predicting depressive symptoms. *Results:* Depressive symptoms were negatively associated with the ‘charmingness’ facet of the narcissistic admiration dimension, and positively associated with insomnia severity, sleep-induced daytime dysfunction, perceived stress, early interpersonal traumas, and – as regards emotion dysregulation – nonacceptance of negative emotions and difficulties controlling behaviors. Moreover, charmingness emerged as the strongest predictor of depression, followed by early interpersonal traumas and insomnia severity. *Discussion:* Narcissistic admiration (of which charmingness is the behavioral expression) is an agentic form of grandiose



narcissism, which is supposed to act as a protective factor against depression. The results of this study, albeit preliminary, may shed further light on the research investigating the relationship between personality traits, early interpersonal traumas, and depression in PwID.



Unusual subjective experiences in the nonclinical population: a preliminary study using the questionnaire for psychotic experiences (QPE) in an Italian adult sample

Alessandra D'Agostino¹, Chiara Gagliardi¹, Mario Rossi Monti¹

¹ Department of Humanities (DISTUM), University of Urbino Carlo Bo, Urbino, Italy

Abstract

Introduction: In recent decades, research has increasingly supported the hypothesis of a continuum of psychotic experiences from healthy individuals to schizophrenic patients, highlighting that "unusual subjective experiences" (USEs), i.e. subclinical psychotic experiences, are quite common in the general population. The aim of this study was to investigate USEs in a nonclinical population, using, for the first time in Italy, the Questionnaire of Psychotic Experiences (QPE), a semi-structured interview recently developed for the transdiagnostic, quali-quantitative assessment of psychotic experiences. *Methods:* Participants (n = 39; mean age = 26.9 ± 5.5 years) completed the QPE, which had previously undergone a cross-cultural adaptation process, and three self-report instruments: 1) CAPE, which measures the clinical symptoms of psychosis and is also able to detect individuals at very high risk for psychosis; 2) STAY, which assesses current anxiety state and a general tendency to be anxious; c) SCL-90-R, which evaluate a broad range of psychopathological symptoms. Qualitative and quantitative features of psychotic experiences were investigated, along with possible relationships with clinical scales. *Results:* The majority of participants reported unusual subjective experiences, with a prevalence of delusional ideation (paranoid type) and a lower presence of hallucinatory phenomena (tactile, olfactory, and sensed presences). Only two participants showed a more complex profile, reporting auditory hallucinations, delusional ideation with high preoccupation, belief, distress, and impact on functioning, weekly use of cannabis and alcohol, higher than average scores on all SCL-90-R clinical scales, and a CAPE positive dimension score very close to the cut-off indicating individuals at very high risk for psychosis in the clinical population. *Discussion:* These results preliminarily suggest that the QPE may be useful for the quali-quantitative assessment of USEs in the general population. Furthermore, they emphasize that it is not the mere presence, but rather the psychopathological complexity of USEs that may intercept an ultra-high risk for the development of psychosis. Further research on USEs and mental health problems may help to differentiate the clinical significance of psychotic experiences, improve risk screening, and promote early intervention strategies.



Cross-Validating the Atypical Response Scale of the Trauma Symptom Inventory - Second Edition in a Forensic Sample

Francesca Ales¹

¹ Department of Psychology, University of Turin, Turin, Italy

Abstract

Malingering represents a critical issue in clinical evaluations, especially in forensic settings, where the external incentives to appear impaired are substantial. Thus, it is crucial to assess the credibility of self-reported symptoms. Specifically, the assessment of trauma-related symptoms appear to be problematic. These kinds of symptoms, in fact, are among the most common to be feigned, as they usually arise after stressful events for which one may be entitled to seek compensation. The TSI-2 is a self-report inventory designed to assess symptoms and behaviors following trauma. However, its clinical and forensic utility is under-investigated, and previous literature suggests the need for further research. In addition, there is no information on the TSI-2's differential predictive power using Symptom vs Performance Validity Tests as criterion measures. This study aimed to address this gap in the literature. The classification accuracy of TSI-2's validity scale (ATR) was computed against the Negative Impression Management Scale (NIM) of the PAI as criterion, as well as against a number of PVTs in order to empirically evaluate its differential predictive power. We collected data from clinical patients with identifiable external incentives to appear impaired. All participants were administered a number of SVTs and PVTs (i.e., TSI-2, PAI, Beck Anxiety Inventory, Beck Depression Inventory – Second Edition, Test of Memory Malingering, California Verbal Learning Test – Second Edition, Validity Index Five). Descriptive statistics were calculated. Inferential statistics included receiver operating characteristics curves with corresponding 95% confidence intervals, one-way ANOVAs, independent t-tests and Chi-square tests of independence. Effect size were estimated and expressed in partial eta squared, phi-squared and Cohen's d. Sensitivity, specificity, positive and negative likelihood ratios and overall correct classification were calculated using standard formulas. Results showed that ATR was a significant predictor of 1) the NIMPAI, 2) self-reported emotional distress on other scales, and 3) non-credible performance. In contrast, ATR showed a much weaker relationship with tests of cognitive ability compared to self-reported psychiatric symptoms. Clinical implications – with emphasis on the forensic setting – will be discussed.



Sunday, 17th September 2023

SYMPOSIUM SESSION



ASSESSING DISSOCIATION: NEW PERSPECTIVES

Proposer

*Luca Ostacoli*¹

¹ Embodied Minds Lab, Department of Clinical and Biological Sciences, University of Turin, Italy

Discussant

*Francesco Pagnini*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Dissociation is usually defined as a disruption or a discontinuity of the integrated functions of consciousness, memory, identity, emotion, perception, motor control, and behavior. Even if the psychiatric nosography recognizes five forms of dissociative disorders, i.e., dissociative identity, dissociative amnesia, depersonalization and derealization, other and unspecified dissociative disorder, recent metanalytic data suggest that dissociation may be seen as a transdiagnostic processes within several psychopathological conditions. This may be very relevant since peritraumatic and persistent dissociative symptoms have been found to strongly predict psychiatric and psychotherapeutical outcomes. For these reasons, a proper evaluation of dissociative symptomatology is a key factor of the assessment phase. Moreover, although clinicians often refer to dissociation as a unitary construct, it has been claimed to conceptualize it as a multifaceted phenomenon. To address this complexity, several multidimensional measures of dissociation have been developed, such as the Multiscale Dissociation Inventory (MDI), the Detachment and Compartmentalization Inventory (DCI) and the Dissociative Symptoms Scale (DSS). The aim of the present symposium is to outline the importance of considering the dissociative phenomena both in clinical and research setting: the Italian adaptation of the MDI and the DCI scales will be then presented, providing new tools to tap the multifactorial structure of dissociative experiences. Moreover, it will be showed how the Mindfulness-based Self Contact technique can be integrated with the MDI in evaluating dissociative symptoms and their association with a recently developed measure of the Emotional Style and resources (ESQ). Finally, the association between Childhood Trauma, Dissociation, and Obsessive-Compulsive Symptoms will be then depicted



with a correlation network approach. This may enrich both the research and the clinical landscape, advancing the pathogenetic and therapeutic aspects of dissociative symptoms.



One word, many faces: The Italian validation of the Multiscale Dissociation Inventory

Pierre Gilbert Rossini¹, Gabriele Berti², Silvia Cibinel², Luca Ostacoli¹

¹ Embodied Minds Lab, Department of Clinical and Biological Sciences, University of Turin, Turin, Italy

² Clinical Psychology Service, City of Health and Science, Turin

Abstract

Dissociation is usually defined as a disruption or a discontinuity of the integrated functions of consciousness, memory, identity, emotion, perception, motor control, and behavior (Schimmenti et al., 2020). Even if the psychiatric nosography recognizes five forms of dissociative disorders, i.e., dissociative identity, dissociative amnesia, depersonalization and derealization, other and unspecified dissociative disorder (American Psychiatric Association, 2022), recent metanalytic data suggest that dissociation may be seen as a transdiagnostic processes within several psychopathological conditions (Lyssenko et al., 2018). This may be very relevant since peritraumatic and persistent dissociative symptoms have been found to strongly predict psychiatric and psychotherapeutical outcomes (Lebois et al., 2022; Lyssenko et al., 2018). Moreover, although clinicians often refer to dissociation as a unitary construct, it has been claimed to conceptualize it as a multidimensional phenomenon (Briere et al., 2016). Indeed, a single term is commonly applied to describe different experiences, ranging from the alterations of memory, consciousness or of the somatosensory perceptions (Canan & North, 2019), likely requiring targeted interventions. To address this complexity, two main multidimensional measures of dissociation have been developed, the Multidimensional Inventory of Dissociation (MID; Dell, 2006) and the Multiscale Dissociation Inventory (MDI; Briere, 2002). The aim of the present study is to validate the Italian version of the Multiscale Dissociation Inventory (MDI; Briere, 2002). This is quick and self-administered 30-items measure of dissociative symptoms, consisting of six sub-scales: Disengagement, Depersonalization, Derealization, Emotional Constriction, Memory Disturbance, and Identity Dissociation. The construct validity, internal consistency, Cronbach's alpha estimates, and test–retest reliability will be examined, as well as the dimensional structure of the items. Convergent and divergent validity will be also assessed, examining the correlations with anxiety, post-traumatic and alternative dissociative measures. The Italian version of the MDI may enrich the research landscape, advancing the pathogenetic and therapeutic aspects of dissociative symptoms.



Childhood Trauma, Dissociation, and Obsessive-Compulsive Symptoms: A Correlation Network Approach

Gianluca Santoro¹, Adriano Schimmenti¹

¹ Faculty of Human and Social Sciences, UKE, Kore University of Enna, Enna, Italy

Abstract

Introduction: Previous research showed that childhood trauma and dissociation are associated with obsessive-compulsive symptoms (OCSs). However, little is known about the influence of different types of childhood traumatization and domains of dissociation on OCSs. Accordingly, the aim of the study was to examine how obsessions and compulsions are linked with types of childhood trauma and factors of dissociation, from a correlation network perspective. *Methods:* Six hundred and seventeen community adults (370 females, 60%), ranging in age from 18 to 69 years old ($M = 31.67$, $SD = 13.70$), were recruited through advertisements on social media. All participants were administered a socio-demographic schedule and self-report measures assessing the variables of interest. Correlation network analysis was performed to investigate the regularized partial correlations among different types of childhood trauma (i.e., emotional abuse, emotional neglect, physical abuse, physical neglect, and sexual abuse), dissociative domains (i.e., depersonalization and derealization, gaps in awareness and memory, sensory misperceptions, and cognitive and behavioral reexperiencing), obsessions, and compulsions. The stability of the network properties was tested through 1000 nonparametric bootstraps. *Results:* Correlation network analysis showed that individuals exposed to emotional abuse are likely to being exposed to other types of childhood trauma and to suffer from dissociative symptoms in adulthood. Also, the dissociative domain of cognitive and behavioral reexperiencing was a bridge variable in the network, connecting childhood traumatic experiences with obsessive-compulsive symptoms. Bootstrap analyses showed that the network properties were relatively stable. *Conclusion:* Our findings suggest that procedural memories of childhood trauma may foster intrusive thoughts and compulsive behaviors, which might thus constitute dysfunctional attempts to manage trauma-related experiences.



Relationship between neurobiological-based emotional style, dissociative symptoms and the experience of Self Contact

Mariagrazia Merola¹, Francesco Oliva²

¹ Department of Neuroscience, University of Turin, Turin, Italy

² Department of Clinical and Biological Sciences, University of Turin, Turin

Abstract

In addition to disorders primarily characterized by dissociation, included in DSM 5th ed. (APA, 2013), the presence of dissociative symptoms seems to have an important relevance in many clinical conditions, representing a transdiagnostic psychological element. Dissociative symptoms include a range of psychological, behavioral, and somatic phenomena, and research has identified diverse domains of dissociation, underlying its multidimensional nature. The psychopathological core of dissociation is the tendency to avoid emotions, thoughts, and aspects of personal experiences. Emotional style is defined as the ways in which individuals adapt and respond to the world, reflecting the kind of emotional states experienced, as well as their intensity and duration. Emotional Style Questionnaire (ESQ) has been recently considered as a useful tool to assess the multidimensional framework of individual's overall level of emotional health. Effectiveness of Mindfulness-Based Technique (MBT) is well-known in regulating interoceptive awareness, reducing the severity of psychopathological symptoms, improving emotional regulation and managing dissociation through building awareness of dissociative processes. The aim of the present study is to evaluate the relationship between dissociative symptoms and individual's emotional style with the experience of Mindfulness-Based Technique (MBT) called Self-Contact (SC) in a clinical population compared to control. The population comprises subject affected by different medical and psychiatric conditions (diabetes, obesity, anorexia nervosa, attention deficit hyperactivity disorder) and healthy controls. Participants carried out 10-minutes audiorecorded MBT called Self-Contact (SC). SC is based on bodily self-awareness in the present moment and involves the subject placing their hands on their body in three distinct and successive positions, each held for a few breaths. Subjects underwent a self-administered clinical assessment evaluating emotional style with ESQ, dissociative symptoms through Multiscale Dissociation Inventory (MDI) and a qualitative experience assessment at the end of the intervention. Results show that emotional style and dissociative state seem to be correlated; regarding



SC, some elements seem to have relationships with emotional style, while others have greater correlation with the severity of dissociation.



Toward a differential assessment of dissociative experiences: An Italian adaptation of the Detachment and Compartmentalization Inventory (DCI)

*Elena De Rossi*¹, *Benedetto Farina*¹, *Giulia Raimondi*^{1,2}, *Mauro Adenzato*³, *Giuseppe Alessio Carbone*³, *Claudio Imperatori*¹, *Rita B. Ardito*³

¹ Department of Human Sciences, European University of Rome, Rome, Italy

² Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy

³ Department of Psychology, University of Turin, Turin, Italy

Abstract

Introduction: The term dissociation describes a wide range of psychological experiences that vary for phenomenological, psychopathological, and neurophysiological characteristics, dissuading from a one-dimensional approach to it. The Detachment and Compartmentalization Inventory (DCI) has been recently developed in order to assess two qualitatively distinct forms of dissociation. The main purpose of the current study was to investigate the psychometric properties of the Italian version of the DCI.

Methods: 1276 participants were recruited (389 males; mean age and standard deviation: 29.57 ± 10.96 years) and asked to answer an online survey comprehensive of a form for sociodemographic data, the Italian translation of the DCI, the Dissociative Experiences Scale (DES) and the Childhood Trauma Questionnaire (CTQ-SF). *Results:* The original two-factor model fitted the data better than the one-factor model. The scale demonstrated good internal consistency and convergent validity with DES scores. Lastly, DCI scores were higher in participants reporting moderate to severe history of childhood trauma.

Discussion: The Italian adaptation of the DCI showed good psychometric properties and it could be used to detect detachment and compartmentalization manifestations. The assessment of these forms of dissociation is crucial in clinical practice. Indeed, it is well documented that the severity of dissociative symptoms can contribute to worsen clinical outcomes and treatment response in several psychiatric disorders.



BEHAVIORAL ADDICTIONS: TOWARDS AN INTEGRATIVE UNDERSTANDING

Proposers

Silvia Casale¹, Maria Di Blasi²

¹ Department of Health Sciences, University of Florence, Florence, Italy

² Department of Psychology, Educational Sciences and Human Movement, University of Palermo, Palermo, Italy

Discussant

Valentina Boursier¹

¹ Department of Humanities, University of Naples

Abstract

A comprehensive conceptualization of behavioral addictions (BA) as an umbrella construct including excessive online and offline activities - such as social media use, smartphone use, pornography viewing, love addiction, and compulsive buying – and its cognitive, affective, and motivational components is still lacking and controversial. The symposium aims to share and discuss the scientific results from four contributions to promote a better understanding of these emerging phenomena and evaluate whether they can be conceptualized as addictive disorders. The topic will be discussed to grasp relevant implications in assessment and treatment, which should allow clinicians to take into account the high heterogeneity that characterizes BA. The first contribution suggests that online porn use is linked to detachment processes and fear of interpersonal intimacy. The study evidences that these difficulties could lead some individuals to use online porn as a compensatory and regulatory strategy. The second contribution highlights the need to understand better the psychological and psychopathological mechanism underlying Love Addiction and stresses the lack of assessment instruments. The research highlights that different psychopathological facets (e.g., emotion dysregulation, insecure attachment, personality dysfunctionality) characterize individuals at risk for Love Addiction. The third contribution, which focuses on the longitudinal associations between problematic social media (PSM) and well-being among a group of adolescents, indicates that individuals with higher PSM use levels also reported heightened levels of psychological distress across the four waves (i.e., between-person level). The last



contribution presents two studies on compulsive online shopping conducted within different theoretical frameworks and suggest that both psychodynamic and cognitive conceptualizations are effective in explaining COS dimensions.



Investigating the Psychodynamics and Metacognitions in Compulsive Shopping: Towards an integrated model?

Silvia Casale¹, Giulia Fioravanti¹, Alessio Gori¹

¹ Department of Health Sciences, University of Florence, Florence, Italy

Abstract

The spread of the Internet and the growth of e-commerce activities increase the triggers for compulsive shopping for vulnerable individuals. Two studies were conducted investigating the factors that may be associated with compulsive shopping by adopting two theoretical approaches (i.e., modern psychodynamic theories on addiction and the metacognitive model of addictive behaviors). In Study 1 the role of alexithymia, dissociation, and average annual income on compulsive shopping, both online and on-site, was investigated among a sample of 310 participants (mean age=31.86±11.98; 77% females). Results showed that (i) dissociation partially mediated the relationship between alexithymia and general compulsive shopping (ii) dissociation partially mediated the relationship between alexithymia and compulsive online shopping (COS), and this relationship was moderated by average annual income (being stronger at lower average annual income). Such findings suggest focusing therapeutic interventions for problematic shopping behavior on alexithymia and dissociation and may orient preventive activities in specific populations (i.e., disadvantaged economic classes). In Study 2 the contribution of metacognitions about online shopping as potential mediating variables in the relationship between some well-established predisposing variables (i.e., boredom proneness, impulsivity, materialism, negative affect) and COS was investigated on a sample of 254 participants (mean age=34.79±11.45; 84.3% females). Results showed that the model produced a good fit to the data and accounted for 48% of COS variance. All the predictors were significantly and positively associated with positive metacognitions about emotional and cognitive regulation, which in turn positively predicted COS. Boredom proneness and impulsivity were also positively associated with negative metacognitions about uncontrollability and cognitive harm of online shopping, which in turn predicted COS. Such findings add to the argument that metacognitive theory should be applied to the understanding of COS, akin to what has been done for other addictive behaviors. The findings of both studies suggest considering the possibility of an integrative model for the understanding of compulsive shopping that combines cognitive and psychodynamic factors and emphasizes the role of both unconscious and active mental processing.



Sex and the virtual city: Risk and maintenance factors of online porn use

Antonino Costanzo¹, Andrea Scalone¹, Alessandra Melita¹

¹ Faculty of Human and Social Sciences, UAE - Kore University of Enna, Enna, Italy

Abstract

Introduction: Research showed that impairments in personal and interpersonal functioning are associated with online pornography use. However, the differences between users and non-users of online pornography have been scarcely investigated. The current study was aimed at examining the role of maladaptive daydreaming, alexithymic features, attachment styles, maladaptive personality traits, childhood trauma, and dissociative experiences between online pornography users and non-users. *Methods:* A cross-sectional study was performed on 525 adults from the community (n= 314 females; 59.8%), aged between 18 and 68 years-old (M= 30.08 years, SD = 11.03). Participants completed a sociodemographic schedule and self-report measures assessing the variables of interest. A multivariate analysis of covariance was performed to investigate differences online pornography users (n= 113; 21.5%) and non-users, controlling for the effects of socio-demographic variables. A two-step cluster analysis was also computed to reveal profiles of online pornography users. *Results:* Statistical analyses showed that porn users reported higher levels of difficulties identifying feelings, interference of maladaptive daydreaming with life, preoccupied and fearful attachment styles, maladaptive personality traits (including negative affectivity, detachment and psychoticism), childhood traumatic experiences, and dissociative absorption than non-users. Cluster analysis revealed that a subgroup of online pornography users displayed increased levels of vulnerability factors than other participants. *Discussion:* Findings suggest that childhood trauma, difficulties in emotion regulation, insecure attachment, and dissociative experiences might foster online pornography use. This suggests that online porn can be used with both compensatory and regulatory strategy, depending on the intensity of these psychological difficulties.



A pathway to understand a new behavioral addiction: psychopathological facets underlying Love Addiction

Roberta Gabriella Cavalli¹, Serena Bruno¹, Patrizia Velotti¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Despite the growing interest towards Love Addiction (LA), its understanding and operationalization is still far off. Preliminary research and clinical observations proposed Love Addiction as a form of obsessive love, where the relationship with the significant other has a central role in regards to the individual's life. Two of the main issues in operationalizing the construct are: the identification of the psychological and psychopathological mechanism underlying Love Addiction, and the lack of assessment instrument. The main goal of this study was to identify psychopathological facets in love addicts. *Methods:* We administered to a sample of 72 Italian adults, divided in 36 control group and 36 at-risk of Love Addiction group, ($M_{age}=30.36$; $SD=9.72$) a battery of self-report questionnaires that assess individuals (such as emotion dysregulation, emotion beliefs, personality functioning, self-concept clarity, etc.) and relational (such as relationship belief, relationship obsessive and compulsive symptoms, etc.,) dimensions. To assess significant differences between groups, a multivariate analysis of the variance was tested, performing the Bonferroni correction. *Results:* in the at-risk of Love Addiction group we observed a higher score of psychopathological facets, including emotion dysregulation, insecure attachment dimensions, personality dysfunctionality, relational obsessive-compulsive symptoms. The control group had increased self-concept clarity, adaptive emotion regulation strategies, and caregiving behaviors. *Discussion:* This preliminary study showed the presence of different psychopathological facets in groups at-risk for Love Addiction. Our results could be a promising starting point for future research, aimed at understanding the clinical features of Love Addiction and the construction of ad-hoc instruments.



Social Media addiction and psychological distress among adolescents. A longitudinal investigation

Lucia Fortunato¹, Laura Salerno¹, Maria Di Blasi¹, Gianluca Lo Coco¹

¹ Department of Psychology, Educational Sciences and Human Movement, University of Palermo, Palermo, Italy

Abstract

Background: With the widespread use of social media (SM) among adolescents, there is a call for examining the characteristics of social media addiction and its detrimental effect on individual's psychological well-being. This longitudinal study aims to examine the relationship between social media addiction and psychological distress over time. *Methods:* Four-wave panel data from 340 adolescents (Mage=15.61±1.19; 39.4% females), who provided self-reported data on SM addiction (BSMAS) and psychological distress (CORE-YP) were analyzed. Moreover, participants' baseline levels of difficulties in emotion regulation (DERS), self-esteem (RSES), and social support (MSPSS) were collected. Random-Intercept Cross-Lagged Panel Models were applied to disaggregate between-person from within-person associations as regards SM addiction and psychological distress. *Results:* On a between-person level, there was a large positive correlation between the random intercepts of psychological distress and SM addiction. Thus, participants with higher SM addiction levels also reported heightened levels of psychological distress across the four waves. Moreover, participants who experienced more psychological distress also showed higher SM addiction at T1 and T4. However, on the within-person level over time, we did not find any significant cross-lagged path. Thus, experiencing more psychological distress than usual at a specific time point did not lead to more SM addiction at a subsequent time point or vice versa. The role of baseline covariates will be discussed. *Discussion:* These preliminary results show the correlation between SM addiction and distress, highlighting the bidirectionality of the two variables over time, as suggested by previous studies. Further investigation will aim to understand the psychological moderators of this relationship and its individual variability among adolescents.



NEW TRENDS IN RESEARCH ON BODY IMAGE AND EATING DISORDERS

Proposer

*Silvia Cerea*¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Discussant

*Caterina Grano*¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Body image is the internal representation that individuals have of their own body. Body image may be positive – a source of satisfaction and wellbeing - or negative - express by body dissatisfaction. Body dissatisfaction is a widespread phenomenon that has rapidly increased during the last decade (Galmiche et al., 2019), and represents one of the strongest predictors of Eating Disorders (EDs) symptoms in both males and females. Body image might be influenced by multiple factors (e.g., social media, family pressures, sport context). These factors may contribute to the development of body dissatisfaction and, in turn, of ED symptoms. Such a scenario outlines the importance of investigating body image in different contexts and populations. The present symposium illustrates new trends in research in this field. Specifically, Silvia Cerea will provide data about the efficacy of a psychological intervention focused on functionality appreciation in enhancing positive body image and in reducing body dissatisfaction and ED risk in women practicing aesthetic sports (e.g., ballet, ice skating, rhythmic gymnastics). Cristian Di Gesto will describe the impact of Instagram use and body compassion on ED symptoms among young men, since the investigation of their impact on ED symptoms in young males is still scarce, despite recent works highlight the importance of studying EDs symptoms also among men. Sara Iannattone will show preliminary results of the intergenerational associations between mothers' and adolescent children's positive body image, perceived family appearance pressure, and ED symptoms. Despite the critical role of mothers in shaping their children's body image and eating behaviors is well-known, most research has only considered children's reports about appearance-related pressures from parents, ignoring their mothers' reports. Lastly, Rubinia Celeste Bonfanti will describe



the results of a systematic literature review and meta-analysis aimed at investigating the impact of online social comparisons on individuals' body dissatisfaction, ED symptoms and positive body image. Overall, evidence from these contributions will expand current knowledge about body image in different contexts and populations. This knowledge will allow us to developing effective prevention and intervention programs targeting body image in different contexts and populations.



Evaluating the efficacy of a psychological intervention based on body functionality appreciation in the context of aesthetic sports: A randomized controlled trial of the More than Body Appearance (MBA) intervention

Silvia Cerea¹, Mimi Marycarmen Caputo¹, Sara Zonaro¹, Chiara Maniscalco¹, Marta Gbisi¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Abstract

The practice of aesthetic sports may represent a risk factor for the development of body dissatisfaction and Eating Disorders (EDs) (Dantas et al., 2018); in fact, in aesthetic sport contexts, performance success is closely related to low body weight and thinness (Bratland-Sanda & Sundgot-Borgen, 2013). The promotion of a positive body image may represent a protective factor for the development of body dissatisfaction and EDs in this context (Piran, 2015). The aim of the study is to investigate the efficacy of an online psychological intervention (More Than Body Appearance, MBA) focused on body functionality appreciation in enhancing positive body image and in reducing body dissatisfaction and EDs risk in women practicing aesthetic sports. Sixty-four females (Mage = 24.59 ± 4.97, range: 18-40) practicing different types of aesthetic sports (e.g., ballet, ice skating, rhythmic gymnastics) were randomized into two groups: experimental group (n = 31) and waiting-list group (n = 33). The experimental group started the intervention at baseline (T0) for 15 days (until T1). The waiting-list group waited for 15 days before starting the intervention (T1 to T2). Participants completed questionnaires about positive body image (Functionality Appreciation Scale, FAS), body dissatisfaction (Questionario sul Dismorfismo Corporeo, QDC), and EDs risk (Eating Disorder Inventory-3, Eating Disorder Risk Composite Score, EDRC) at baseline (T0), 15 days from baseline (T1), and 30 days from baseline (T2). Repeated measure Analyses of Variances (ANOVAs) showed Group (experimental vs. waiting-list) × Time (T0 vs. T1) interactions on the FAS (p = .001), the QDC (p < .001), and the EDRC (p = .03), indicating increases in body functionality appreciation and reductions in extreme body dissatisfaction and EDs risk in the experimental group compared to the waiting-list at T1. Results of the study shows that a 15-days online psychological intervention focused on functionality appreciation may enhance positive body image and reduce body dissatisfaction and EDs risk in the context of aesthetic sports. Focusing on functionality appreciation may help individuals to positively reframe the way they think about their body; this prevents from focusing on physical imperfections and to evaluate the body based only on its physical appearance.



The impact of online social comparison on individuals' body image concerns, eating disorders and positive body image: A systematic review and meta-analysis

Rubinia Celeste Bonfanti¹, Arianna Teti¹, Francesco Maria Melchiori², Rachel Rodgers^{3,4}

¹ Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

² Department of Psychology, Niccolò Cusano University, Rome, Italy

³ APPEAR, Department of Applied Psychology, Northeastern University, Boston, MA, USA

⁴ Department of Psychiatric Emergency & Acute Care, University of Montpellier, Montpellier, France

Abstract

Introduction: Over the past decade research has reported that intensive social media use is associated with a tendency to compare oneself with others, which in turn may trigger body image concerns and/or dysfunctional eating behaviours. The aim of this systematic review and meta-analysis was to examine the average impact of online social comparison on body image concerns, eating disorder behaviours and positive body image in the general population. *Methods:* We searched eligible articles published between 2008 and 2022 in Medline, Embase, PsycInfo, Scopus, and Web of Science. We conducted a random-effects meta-analysis of eligible studies reporting the association between social comparison and body image and/or eating disorder outcomes. Heterogeneity was tested using I-squared (I²) statistics. *Results:* Results from 57 cross-sectional studies with 44,116 participants (mean age 22.01 years; mean BMI 22.98; 88.28% female) indicated that the weighted average correlation between higher social comparison and greater body image concerns was significant ($r = .44$; 95% CI: .39 – .48), as were the correlations between higher social comparison and lower positive body image ($r = -.30$ 95% CI: -.44 – -.17) and between higher social comparison and greater eating behaviour symptoms ($r = .35$; 95% CI: .23 – .48). The heterogeneity of effect sizes was high and meta-regression analyses showed that quality of studies, country, type of social comparison, % female participants, age and BMI moderated the relationship between online social comparison and body image outcomes. *Discussion:* This meta-analysis suggests a negative impact of social comparison processes on body image outcomes in the context of social media use. However, more research is needed to establish causal connections between online social comparison and body image concerns.

#Instagramization. Examining the role of Instagram on eating disorders symptoms among young men

*Cristian Di Gesto*¹, *Giulia Rosa Policardo*², *Amanda Nerini*¹, *Camilla Matera*¹

¹ Department of Education, Languages, Intercultures, Literatures and Psychology, University of Florence, Italy

² Department of Psychology “Renzo Canestrari”, University of Bologna, Italy

Abstract

Introduction: Instagram use for images-related activities focused on physical appearance has been positively associated with eating disorders (EDs) symptoms among women and girls (González-Nuevo et al., 2021); however, despite notable evidence of women’s susceptibility to physical appearance pressures, it remains less clear whether these associations could be generalized to men. As more recent works highlight the importance of studying EDs among men (e.g., Murray et al., 2017), including potentially divergent etiological pathways (Allen et al., 2016), examination of the different predictors of EDs to capture the unique experiences of men is needed (Schaefer et al., 2021). *Methods:* Participants were 150 men (mean-age=23; SD=4.20), who completed a questionnaire containing the Instagram Image Activity Scale (IIAS; Di Gesto et al., 2020), the Body Compassion Scale (BCS; Policardo et al., 2022), and the Eating Disorder Examination Questionnaire (EDE-Q; Calugi et al., 2017) (we considered EDE-Q subscales: Restraint, Eating, Shape, and Weight Concerns). Hierarchical regression and mediation analyses were performed. *Results:* Regressions showed that both Instagram use for appearance-related activities and body compassion significantly predicted Restraint ($\beta_{\text{Instagram}}=.15$; $p<.05$; $\beta_{\text{Body Compassion}}=-.43$; $p<.001$), Eating Concerns ($\beta_{\text{Instagram}}=.07$; $p>.05$; $\beta_{\text{Body Compassion}}=-.47$; $p<.001$), Shape Concerns ($\beta_{\text{Instagram}}=.14$; $p<.05$; $\beta_{\text{Body Compassion}}=-.55$; $p<.001$), Weight Concerns ($\beta_{\text{Instagram}}=.13$; $p>.05$; $\beta_{\text{Body Compassion}}=-.49$; $p<.001$). Notably, with the inclusion of body compassion in the regression models, the significance of the Instagram use decreased. Mediation analyses showed that body compassion mediated the relationship between Instagram use and all the EDs symptoms (Restraint: $z=2.16$, $p<.05$; Eating Concerns: $z=2.83$, $p<.001$; Shape Concerns: $z=2.60$, $p<.001$; Weight Concerns: $z=2.41$, $p<.01$). *Discussion:* These findings may be useful for planning tailored prevention and intervention programs providing information about possible risks and protective factors implicated in EDs symptoms among men. Social media literacy training aimed at increasing a healthier use of Instagram for appearance-related activities, fostering the development of



compassionate attitude towards one's body, could be beneficial for the prevention of the onset of concerns involved in eating disorders in men.



The intergenerational associations between positive body image, appearance-related sociocultural influence, and eating disorder symptoms: A preliminary study on dyads of Italian mothers and their adolescent children

Sara Iannattone¹, Silvia Cerea¹, Laura Poggiato¹, Noemi Spagnolo¹, Alessandra Farina¹, Gioia Bottesi¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Abstract

Introduction: The critical role of mothers in shaping their children's body image and eating behaviors is well-known. However, most research has considered children's reports about appearance-related pressure from parents; conversely, it is still unclear whether mothers and children share similar attitudes toward body and food, especially in adolescence. This study aimed to examine the associations between mothers' and adolescent children's positive body image, perceived family appearance pressure, and eating disorder (ED) symptoms. *Methods:* 64 dyads of Italian mothers (Mage = 49.1 ± 5.35, range: 37-60) and children (Mage = 16.3 ± 1.28, range: 14-19; 55.7% girls) entered the study. They completed measures of positive body image (i.e., body and functionality appreciation), appearance-related sociocultural influence, and ED symptoms. Paired t-tests were run to compare mothers' and children's levels of the above variables. Pearson's r correlations were conducted to analyse the relations between constructs among dyad members. *Results:* Significant differences between mothers and children emerged for all the scales, except for body dissatisfaction; specifically, children scored higher on ED symptoms and perceived family appearance pressure, while lower on positive body image. Mothers' and children's perceptions of appearance pressure from family were positively correlated ($r = .29$). Family pressure perceived by mothers also resulted negatively related with children's body ($r = -.29$) and functionality appreciation ($r = -.34$), while positively associated with overall ED symptoms ($r = .29$). Finally, a positive association emerged between mothers' perfectionism and children's perception of family pressure ($r = .33$). *Discussion:* Adolescents seem to be characterized by lower positive body image levels and greater vulnerability to EDs than adults, highlighting the importance of prevention programs. Moreover, mothers with high perfectionism levels may be particularly critical of their children's physical appearance, thus making them experience more pressure. From an intergenerational viewpoint, mothers perceiving high appearance pressure from their family can convey negative messages about body and eating, resulting in appearance pressure on their children; this could then contribute to reducing their children's positive body image, while also increasing ED risk.



EMOTIONAL IMPACT AND ADJUSTMENT: INNOVATIVE PSYCHOLOGICAL TREATMENTS IN PERSONALIZED MEDICINE PERSPECTIVE

Proposer

*Dina Di Giacomo*¹

¹ Life, Health and Environmental Sciences Department, University of L'Aquila

Discussant

*Chiara Conti*¹

¹ Department of Psychological, Health and Territorial Sciences, University "G. d'Annunzio" of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

The incidence of chronic non-communicable diseases (CNCDs) such as cardiovascular diseases, neurological disorders, multiple sclerosis and end stage renal diseases are associated with lower quality of life (QoL) in the elderly. CNCDs contribute to 41 million deaths annually worldwide (71% of total deaths). The development of chronic disease is often a life-changing event, with significant physiological, social, and psychological consequences. As such, the development of severe disease and living with the burden of the disease could both lead to long-term changes in self-perception. Consequently, emotion regulation, experience, processing, and modulation of the emotional response are needed to manage common emotional stressors in chronic disease patients. Psychosocial factors also appear to have an impact on the development and progression of chronic diseases such as coronary, metabolic, neurodegenerative, and oncological disease. Similarly, psychosocial interventions have been shown to improve the Quality of Life of patients with established disease and appear to influence the biological process designed to improve disease progression. Considering this, health systems and the professionals working within them are expected to provide continuous, patient-centred care and support patients in active self-management of their chronic conditions. Support for self-management is very important in the management of chronic conditions and multimorbidity. There is evidence that a more person-centred care approach can enhance self-efficacy in single diseases (e.g., acute coronary syndrome, stroke) and that self-management support in CNCDs improves self-efficacy



and patient outcomes. The aim of this symposium is to investigate the psychological factors in the process of adapting to the clinical course of chronic diseases such as multiple sclerosis, renal disease, heart-related disorders, and neurodegenerative diseases. Furthermore, it is intended to verify psychological well-being and quality of life by planning adequate integrated and multidisciplinary support, in the personalized medicine perspective.



Affective temperament and Attachment style in somatic symptoms related to heart

*Carmela Mento*¹, *Maria Catena Silvestri*², *Clara Lombardo*³, *Simone Minossi*⁴, *Abed Hadipour Lakmehsari*²,
*Toshio Kawai*⁵

¹ Department of Biomedical and Dental Sciences and Morphofunctional Imaging, University of Messina, Messina, Italy

² Department of Cognitive Sciences, Psychology, Education and Cultural Studies, University of Messina

³ Psychiatric Sciences, University Hospital Policlinico, Messina, Messina, Italy

⁴ University of Messina

⁵ Kyoto University, Kyoto, Japan

Abstract

Introduction: Takotsubo syndrome (TTS), is an acute heart failure syndrome triggered by intense psychological or physiological stress (Boynd et al., 2020). Consists in temporary cardiac distress caused by a stressful situation or strong emotion (Wang et al., 2020). Typically manifests as acute chest pain, dyspnea or syncope, the cause of Takotsubo syndrome remain unclear (Jabri et al., 2020). In the light of this the aim of this study is to explore the psychological factors of Takotsubo syndrome related to the end of a love relationship. *Methods:* The study was conducted by an online survey released through social networks, web advertising, institutional and professional mailing lists, and messaging services. The study included healthy subjects from the Italian population 18 years of age and older. The following psychological tests were administered: Temperament Evaluation of Memphis, Pisa, Paris and San Diego (TEMPS-A) questionnaire, Attachment Style Questionnaire (ASQ) and Ruminative Response Scale (RRS). Correlation analysis (Pearson correlation) was performed to assess the association between somatic symptoms, affective temperaments, depressive rumination and attachment styles. *Results:* The sample consisted of 1.110 subjects (F: 630; M: 480) and 70% were not in a romantic relationship and had been left by their partner. It was found that 89% of the subjects had difficulty breathing, experienced chest pains, had cold sweats, experienced palpitations, felt fatigued and did not have a restful sleep. Cyclothymic, depressive, irritable and anxious temperaments correlate negatively with the reflexive component of depressive rumination. *Discussion:* This research focused on Takotsubo Syndrome which has been analyzed in relationship at the end of a love story, and our findings showed that the subjects experience depressive symptoms. Furthermore, a worsening of anxiety was highlighted and depressive for fear of COVID-19. Analyzing the results related to the end of a love relationship and the malaise



somatic, it is clear that all the subjects in question, at the end of a relationship, experience psychosomatic symptoms.



Bouncing back to life: resilience and illness perception in young adults after a diagnosis of Multiple Sclerosis

Silvia Poli¹, Alberto Gajofatto¹, Francesca Gobbin¹, Riccardo Orlandi¹, Maria Angela Mazzzi¹

¹ Department of Neuroscience, Biomedicine and Movement Science, University of Verona, Verona, Italy

Abstract

Introduction: Multiple Sclerosis (MS) is a chronic inflammatory disease usually diagnosed at an early age, between the ages of 20 and 40, a critical life stage for personal, professional and relational development. The disease is rarely fatal and most people with MS have a normal life expectancy, however, a diagnosis of MS can have existential repercussions, hijacking the person's life trajectory and limiting the expression of one's potential. The person diagnosed with MS has to deal with vulnerability and uncertainty, to redefine their priorities and, often, to search for new meanings. All of these themes are common in survivors. In the process of adapting to the disease resilience and illness perception play an important role. Resilience, which can be defined as the ability to adapt to and bounce back from adversity, is a fundamental protective factor for quality of life and mental distress in people living with MS. Illness perception (i.e., cognitive, and emotional representations of one's own illness) can also influence adjustment to the disease. To date, research on young adults with MS is limited. The aim of the present contribution is to describe a sample of young adults living with MS (YawMS) and compare resilience and illness perception between YawMS newly diagnosed (<2 years) and YawMS with a less recent diagnosis. *Methods:* Participant were recruited at the University Hospital of Verona, according to the following criteria: age 18-45 years, diagnosis of MS. After giving informed consent, participants completed a battery of self-report questionnaires, including the Connor-Davison Resilience Scale (CD-RISC-25) and the Brief Illness Perception Questionnaire. *Results:* A preliminary sample of 83 YawMS has completed the questionnaires. Newly diagnosed patients (91% Relapsing-Remitting MS; 63% women; mean age 33.3±7.0) had mean score at the CD-RISC-25 of 64.3±16.7. YawMS with a less recent diagnosis (96% Relapsing-Remitting MS; 76% women; mean age 33.5±6.7) had mean score at the CD-RISC-25 of 60.1±16. Descriptive and inferential statistics will be performed. *Discussion:* The results will give insight into the process of adaptation of young adults after the diagnosis of MS. Such results will inform the design of future psychological interventions aimed at promoting young adults' adjustment to MS in an early phase of the illness.



The early HD Integrative Support in Hemodialysis Patients: a pilot study from the patient-centred perspective

Federica Guerra¹, Claudio Ferri², Jessica Ranieri¹, Marilena Tunno³, Luca Piscitani³

¹ Life, Health and Environmental Sciences Department, University of L'Aquila

² Internal Medicine Division, S. Salvatore Hospital, ASL1 AQ, L'Aquila, Italy

³ Dialysis Division, San Salvatore Hospital of L'Aquila

Abstract

Patients with end stage renal disease (ESRD) are characterized by muscle wasting and consequently decreased physical functioning and poor outcome. Hemodialysis (HD) therapy is a stressful process, and its burden affects the daily living of patients, as regular therapy in the hospital and recovering from therapy impacts physical functioning and leads to negative emotions related to the progression of the disease and the onset of depression and anxiety. Endurance training improves cardio-pulmonary fitness in maintenance HD. Tailored psychological and physical support is necessary. The aim of the present study was to verify the preliminary efficacy of integrative physical and psychological intervention on biomarkers and emotional dimensions with an innovative orientation: the early HD Integrative Support (HD-IS). A controlled study design was used to investigate the efficacy of HD-IS intervention. Of the 20 patients in Dialysis Division during HD treatment at the S. Salvatore Hospital, 15 patients met the inclusion criteria and 10 volunteered to take part. A controlled clinical study was conducted by comparing treated and untreated groups to measure the psychological influence of the HD-IS on ten patients in the age range of 33–80 years, diagnosed with ESRD. Eligible patients were approached to propose they take part in the experimental protocol (with or without psychological support), and, after acceptance, they were enrolled and distributed randomly in two groups: HD-IS group and Control group. The HD-IS group was composed of patients who took part in the whole experimental protocol (measurement and intervention phases), and the group was exposed to the HD-IS protocol for 3 months. The control group was composed of patients who only took part in the measurement phase of the research but not the intervention phase; it was considered the comparison group. Patients were measured by psychological testing at Time 0 and Time 1 over a 3-month period. Evaluated emotional dimensions were stress, anxiety, depression, QoL, self-care, and physical activity. We conducted non-parametric analysis to verify the influence of the HD-IS intervention on biomarkers and psychological dimensions. Preliminary data



demonstrated encouraging outcomes in this vulnerable population, highlighting the positive impact of the HD-IS.



Subjective experience of Virtual Reality neurorehabilitation: qualitative data from Vespa 2.0 project

Emanuele Maria Merlo^{1,2}, Salvatore Marco Pappalardo¹

¹ Department of Biomedical and Dental Sciences and Morphofunctional Imaging, University of Messina, Messina, Italy

² Software Engineering Italia, Catania, Italy

Abstract

The present contribution is based on relevant themes such as chronicity, neurodevelopmental and neurocognitive disorders in the light of rehabilitation through Virtual Reality (VR) treatments. With reference to this latter point, our experience in the field is directly linked to Vespa 2.0 project, involving subjects affected by Alzheimer, Multiple Sclerosis, Parkinson with reference to adults, Intellectual Disability and Communication Disorders for developmental age subjects. In these terms, the experience linked to rehabilitation considers both cross-sectional and subjective domains in order to highlight how clinical experience can be declined to different pathological issues. Considering subjective and qualitative fields, this contribution is aimed at providing results referred to assessment of usability and likability witnessed by patients and foreseen by the project structure. This phase is adherent to qualitative standards of Vespa 2.0 project, providing information about patients' experience, including subjective results to nomothetic data.



MIND THE HEART: NEW DIRECTIONS IN PSYCHOCARDIOLOGY

Proposer

*Federica Galli*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Piero Porcelli*¹

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

The American Heart Association recently recognizes the pivotal role of many emotional, cognitive and psychopathologic factors in influencing cardiovascular diseases (CVDs) (Levine et al., 2021). However, the right psychophysiological mechanisms and routes connecting mind and heart are unknown and merit wide consideration by research. Explanations of such a connection may open to new psychological interventions in CVDs. The symposium will deal with the most prevalent CVDs. According to this view, we will explore the fields of Takotsubo syndrome and Heart Rate Variability (“A systematic review and meta-analysis on heart rate variability alterations in Takotsubo syndrome and their potential connections to psychological factors”, Sapienza), Heart Failure (“The escape randomized trial and cohort study: an integrated care approach for multimorbid elderly patient”, University of Bologna), Acute Coronary Syndrome, (“Unbalanced psychological well-being dimensions as potential risk factors for worse cardiac prognosis in depressed patients with acute coronary syndrome” University of Bologna) and Chronic Pulmonary Arterial Hypertension (“Psychological and physiological responses to acute mental stress and relaxation in patients affected by Chronic Pulmonary Arterial Hypertension”, University of Milan) with attention to physiopathological mechanisms (e.g. abnormal Heart Rate Variability) and new psychological interventions (e.g. virtual reality).



Unbalanced psychological well-being dimensions as potential risk factors for worse cardiac prognosis in depressed patients with acute coronary syndrome

Sara Gostoli¹, Graziano Gigante¹, Regina Subach¹, Chiara Rafanelli¹

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy

Abstract

Introduction: Patients with acute coronary syndromes (ACS) represent a vulnerable population who might display very different health pathways after the cardiac event. Even though international guidelines advocate the importance to join secondary prevention (SP) programs after ACS, participation rate is far from optimal. Previous research showed inconclusive findings on psychological factors (i.e., depression and anxiety) that could be involved in patients' decision to join those programs. Moreover, although literature supports the positive effects of psychological well-being (PWB) on health, most studies focused on a unitary construct of PWB, neglecting the different role that distinct PWB dimensions might play on health-related outcomes. The present study aimed to determine whether unbalanced (i.e., low or high) levels of PWB dimensions could differentially affect cardiac course after ACS, in terms of participation to SP, cardiac morbidity and mortality. *Methods:* 136 depressed and/or demoralized patients after a first episode of ACS were referred to join a SP program on lifestyle modification, in addition to routine cardiac visits provided by the hospital. Psychological assessment included validated interviews on depression and demoralization, and self-report measures: Symptom Questionnaire (symptoms of depression, anxiety, somatization, hostility) and Ryff's PWB scales (autonomy, environmental mastery, positive relations, self-acceptance, purpose in life, personal growth). *Results:* 100 patients joined the SP program, 36 did not. Logistic regression revealed that older age ($B=0.051$; $p<0.05$), higher autonomy ($B=0.070$; $p<0.05$) and lower personal growth ($B=-0.073$; $p<0.05$) were associated with refusal of SP. Moreover, only among patients who did not join the program, those presenting with impaired positive relations dimension (i.e., with a score below the 25th percentile) showed a worse cardiac prognosis (LogRank: $\chi^2(1)=4.654$; $p<0.05$), in terms of re-hospitalizations for cardiac complications, new ACS episodes, cardiac surgery and mortality. *Conclusions:* Negative health outcomes in depressed ACS patients, such as non-participation in SP and worse cardiac course, are associated with both high and low levels of specific PWB dimensions. Psychotherapeutic approaches geared to an optimal balance in PWB dimensions could represent promising new additions to SP programs.



A systematic review and meta-analysis on heart rate variability alterations in Takotsubo syndrome and their potential connections to psychological factors

Gianluca Cruciani¹, Gaetano Tanzilli², Federica Galli¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Clinical Internal, Anesthesiologic and Cardiovascular Sciences, Sapienza University of Rome, Rome, Italy

Abstract

Background: Takotsubo syndrome (TS) may be exacerbated by psychological factors. There have been reports of abnormal heart rate variability (HRV) in TS, which point to an inflexibility of the autonomous. Results on HRV changes and their relationship to psychological aspects in TS, however, are contradictory. The purpose of this study was to systematically investigate any potential links between TS and altered HRV. A secondary goal was evaluating the relationship between HRV changes and psychological factors. *Methods:* Up until September 2022, we searched the literature using several databases (Pubmed, Scopus, PsycInfo, Web of Science). We collected empirical papers that included TS patients and analyzed one or more HRV parameters. Psychological results and HRV were gathered. *Results:* Ten empirical studies were included. TS patients had significantly decreased HRV indices, according to meta-analytic data ($d = .91$ [.65-1.29]; $p < .001$), whereas evidence from the systematic review pointed to a considerable rebound following the acute phase. There was significant study-to-study heterogeneity ($I^2 = 85.67\%$). There were only 2 research that examined the relationship between changes in HRV and psychological outcomes (i.e., coping strategies and emotional arousal). *Conclusion:* The autonomic profile of TS patients appears to be compromised, but additional study is necessary to better understand how HRV varies over time. HRV changes seem to be related to trait, rather than state, psychological factors, in TS patients. Future research is warranted to further examine the precise impact of individual HRV indices on TS elapse and prediction as well as the part played by psychological vulnerabilities in the relationship between HRV and TS.



The escape randomized trial and cohort study: an integrated care approach for multimorbid elderly patients

Graziano Gigante¹, Sara Gostoli¹, Regina Subach¹, Chiara Rafanelli¹

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Bologna, Italy

Abstract

Introduction: Heart failure (HF) is a relevant cause of mortality, morbidity, hospitalizations and reduced Health Related Quality of Life (HRQoL) in European countries. The common association of HF with not only somatic, but also mental comorbidities, such as anxiety and depression, which can heavily affect prognosis and adherence to treatment, requires an integrated care. Yet, multimorbidity is often not treated adequately in healthcare systems, mainly for the presence of relevant treatment gaps and fragmented care delivered by different health providers. In literature, Blended Collaborative Care (BCC) studies conducted in the USA, focusing on a team-based approach addressing both somatic and mental comorbidities, have been shown to be effective in reducing the burden linked to these conditions. ESCAPE aims to enhance quality of care and HRQoL by testing in Europe a personalized BCC intervention, backed by advanced information and communication technology, and supported by a meta-algorithm for multi-morbidity to optimize patient-centred treatment plans. *Methods:* ESCAPE is conducting an observational cohort study across six European countries to recruit patients with heart failure, mental distress/disorder, and at least two medical co-morbidities. Within the cohort study, a randomized controlled assessor-blinded two-arm parallel group interventional clinical trial will be conducted on 300 patients. The patients in the experimental group will receive regular support from trained care managers (CMs) who will work with a clinical specialist team to remotely assist patients in implementing a personalized treatment plan that addresses their individual needs and preferences. An eHealth platform with an integrated patient registry will guide the intervention and empowers patients and their informal carers. *Results:* At the present time, no results are available yet. Future results will be focused on various elements: the primary outcome will be HRQoL measured using the EQ-5D-5L, while secondary outcomes will include medical and patient-reported outcomes, healthcare costs, cost-effectiveness, and informal carer burden. The assessments will be conducted at 9 and ≥ 18 months. *Conclusions:* The ESCAPE BCC has the potential to be part of routine care for elderly patients with HF and somatic and mental comorbidities.



A chatbot-delivered multicomponent intervention to promote change in physical exercise and dietary habits: preliminary results from a randomized controlled trial

Antonino La Tona¹, Agostino Brugnera¹, Angelo Compare¹

¹ Department of Human and Social Sciences, University of Bergamo, Bergamo, Italy

Abstract

Introduction: Digital tools offer a user-friendly, cost-effective, and accessible solution to broadly disseminate mental health-related interventions. Such tools include chatbots, which are computer programs that simulate human conversations. This research project aimed to use a motivational chatbot to promote and monitor behavioral changes related to healthy lifestyles, specifically physical exercise, and dietary habits. *Materials and methods:* This randomized controlled trial (RCT) study tested the usability and the effectiveness of a 4-weeks, ACT-based, chatbot intervention. Based on the theoretical model of Acceptance and Commitment Therapy (ACT), the chatbot aimed at increasing psychological flexibility (PF) among participants as a core mechanism of change towards more healthy lifestyles. A total of 156 (75,76% females; Mage = 22.24 ± 6.09 years) Italian adults were randomized to either the experimental or control group and completed a package of questionnaires at pre- and post-treatment, and at two-months follow-up. *Results:* Longitudinal data will be analyzed using mixed models. Comparisons will be made between the two groups over time, with the expectation that the group receiving the motivational Bot intervention (Group I – “treatment”) will experience greater changes in targeted behaviors compared to the control group, providing valuable insights on the use of chatbots as a motivational tool and on the usability of such interventions. *Discussion and Conclusions:* The results will supposedly show that the usability and quality of the chatbot, as well as its actual frequency of use and psychological flexibility, play a key role in producing motivational changes. Results from this study will also provide additional insights on chatbot interventions and inform mental health practitioners on the role of patient-tailored artificial intelligence (AI)-led chatbot services to foster healthy lifestyles.



**NEW PERSPECTIVES ON PARENTING: FROM ASSESSMENT TO INTERVENTION
IN DIVERSE SETTINGS**

Proposer

*Maria Cristina Verrocchio*¹

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Discussant

*Silvia Salcuni*¹

¹ Department of Developmental and Socialization Psychology, University of Padua, Padua, Italy

Abstract

Extensive literature on parenting has explored the broad themes of who are parents, the scope of parenting and its multiple effects, the determinants of parenting, and the nature, structure, and meaning of parenthood for parents. Existing evidence has many important implications for clinical psychologists when designing parenting assessment and intervention programs. This symposium examines new trajectories in parenting studies providing valuable insights towards the improvement of parents’ assessment and intervention in diverse settings, such as clinical or forensic. Four topics were chosen to debate the most recent trends and efforts for enhancing parenting skills and family interaction dynamics. Marchetti and colleagues will present a systematic review aimed at summarizing the literature on the relationship between parents’ personality and parenting, considering the Big-Five Model and Hexaco Model of personality structure. Procaccia will illustrate a study aimed to explore the effect of maternal PTSD and depression symptoms on the children adjustment (in terms of internalizing/externalizing behaviors), the benefits of a narrative intervention on mothers, and, finally, to explore the mediating role of maternal resilience and social support. Roma et al. will present a virtual reality (VR) perspective-taking study of parents’ reflective functioning to test a VR conflict scenario in the assessment and treatment of parenting skills. Lastly, Aschieri and colleagues will illustrate a study on the Italian validation of the Parent Experience of Assessment Scale’s revised version (PEAS), called



“Questionario sull’Esperienza di Valutazione – Genitori” (QUEVA-G), a measure to assess parents’ satisfaction for their children’s psychological assessment.



Dad, Mom, put yourselves in my shoes! A virtual reality (VR) perspective-taking study of parents' reflective functioning

Paolo Roma¹, Edoardo Spinetti², Benedetta Barchielli³, Francesca Bosco¹, Silvia Biondi¹, Christian Napoli², Cristina Mazza⁴

¹ Department of Human Neuroscience, Sapienza University of Rome, Rome, Italy

² Department of Computer, Control, and Management Engineering "Antonio Ruberti", Sapienza University of Rome, Rome, Italy

³ Department of Clinical and Dynamic Psychology, Sapienza University of Rome, Rome, Italy

⁴ Department of Neuroscience, Imaging and Clinical Sciences, University "G. d'Annunzio" of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Virtual Reality (VR) environments can be highly immersive and presence-inducing and can offer, at the same time, agency and control over their virtual contents, making them a prime candidate for perspective-taking studies. Prior results showed that it is possible to change, via immersive VR experiences, the perspective of intimate partner violence perpetrators, modifying the socio-perceptual processes, such as emotion recognition, that are associated with this specific form of aggressive behavior. In this study, we used a VR scenario to foster a perspective change in parents. Indeed, research has consistently shown how children's maladjustment can be due to conflict between parents, especially when it is entrenched, severe, poorly resolved, and child-focused, and how low parental reflective functioning can undermine parenting. The sample was composed of 30 parents aged 29-49 years ($M=39.4$ $SD=4.7$; 66.7% mothers). Within the immersive scenario, displayed in a Head-Mounted Display (HMD, i.e., Meta Quest 2), the caregivers' real bodies were replaced by a life-size virtual child body that moved in synchrony with their real movements. Participants, in the role of children, witnessed a rough fight between two parents. Initially, parents' social desirability was assessed; their reflective functioning before and after virtual exposure was evaluated; finally, the virtual experience after the exposure was analyzed. We found that the VR experience mainly affected parents' inability to recognize that mental states are not immediately apparent. These preliminary empirical data support the idea that embodiment from the child's perspective in a conflict scenario has an impact on parents' reflective functioning, making VR a tool that could be usefully employed in the assessment and treatment of parenting skills.



How to measure the parents' experience of the assessment of their children? The Italian validation of the Parent Experience of the Assessment scale (PEAS)

Filippo Aschieri¹, Sara Brasili², Giulia Cera²

¹ Department of Psychology, Catholic University of the Sacred Heart, Milan, Italy

² Private practice, Milan, Italy

Abstract

Given the lack of validated measures to assess parents' satisfaction for their children's psychological assessment in Italy, this study was undertaken to pursue the Italian validation of the Parent Experience of Assessment Scale's revised version (PEAS; Austin, Finn, Keith, Tharinger & Fernando, 2018), called "Questionario sull'Esperienza di Valutazione – Genitori" (QUEVA-G). The PEAS is a 24 items scale based on the Therapeutic Assessment theory. A total of 185 participants completed the Italian translation of the questionnaire. Confirmatory factor analysis and Cronbach's alpha were used to evaluate the scale structure and reliability. Confirmatory factor analysis showed that items loaded on factors in a five-factor model (Parent-Assessor Relationship and Collaboration; New Understanding of the Child; Child-Assessor Relationship; Systemic Awareness; Negative Feelings) and that PARC factor can be conceptualized as a hierarchical factor as it accounts for other factors' correlations. Correlation analysis with Client Satisfaction Questionnaire showed that PARC factor had the strongest direct and indirect effects via NUC factor on General Satisfaction. Also, differences in subscale scores were found among demographics, such as the type of assessment, the way the scale was completed (whether online or in paper form), and the child's age. The results suggest that the QUEVA-G is a valid and internally reliable tool for assessing parent satisfaction with their child's assessment.



Personality and parenting: A systematic review

Daniela Marchetti¹, Melissa D'Ettore¹, Maria Cristina Verrocchio¹

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Personality is extensively related with parenting because personality influences how an individual thinks, feels, and behaves, and all of which would in turn have an important impact on the parent-child relationship. Several review papers (Belsky & Barends, 2002; Belsky & Jaffee, 2006; McCabe, 2014; Prinzie et al., 2009) summarized the extant literature on the association between personality and parenting. Notwithstanding, these reviews and meta-analyses are dated, have not covered all aspects of parenting (e.g., attitude, behavior, style), or have not considered fathers as parenting figures. Five-Factor Model (Extraversion, Conscientiousness, Agreeableness, Neuroticism, and Openness) and Hexaco Model (Honesty–Humility, Emotionality, Extraversion, Agreeableness, Conscientiousness, and Openness to Experience) are two structural models of personality widely used. This review summarized the literature on the relationship between parents’ personality and parenting, considering the Big-Five Model and Hexaco Model of personality structure. A systematic search was run on major databases (i.e., Scopus, Web of Science, PubMed, and PsycInfo) according to 2020 PRISMA guidelines. The search produced 2733 articles published in the international literature. After removing duplicates, 1384 studies were screened for title and abstract, and 50 studies met eligibility criteria and were selected for the present systematic review. Mainly studies showed significant associations between one or more personality traits and parenting styles (e.g., authoritative, authoritarian, permissive, uninvolved) or parenting behaviors (e.g., warmth, nurturance, intrusiveness, restrictive control, support, discipline, and setting limits). These relationships have many clinical implications since parents’ personalities may impact children and adolescents’ development and health outcomes through parenting. The strengths and limitations of the systematic review were discussed.



Parenting in women victims of intimate partner violence: do resilience and social support mediate the effects of maternal PTSD and depressive symptoms on children's psychological adjustment?

*Rossella Procaccia*¹

¹ Faculty of Psychology, eCampus University, Novedrate, Como, Italy

Abstract

Intimate partner violence (IPV) is a widespread serious problem affecting women from many different cultures and backgrounds. Many studies have investigated the negative consequences of violence, suggesting a higher prevalence in women with a history of abuse of depressive and PTSD symptoms. Conversely, few studies have investigated the effects of violence on women's parenting with a non-blaming perspective, analyzing the effect of meditative variables capable of counteracting negative outcomes. Thus, the present study aimed to explore the effect of maternal PTSD and depression symptoms on the children adjustment (internalizing/externalizing behaviors), the benefits for both of a narrative intervention on mothers, and, finally, to explore the mediating role of maternal resilience and social support. 53 mother-child couples made up of women survivors of IPV (maternal mean age=32,15; DS=2,43; children mean age=8,23; DS=3,12) were administered LASC (King et al., 1995) to assess PTSD symptoms; BDI-II (Beck et al., 1996; Italian validation by Ghisi et al., 2006), to assess depression, RSA (Friborg et al., 2003) to assess resilience; MSPSS (Zimet, 1988) to assess perceived social support and CBCL (Achenbach & Rescorla, 2000) to assess internalizing/externalizing symptoms in children. Correlational analysis and a mediational model based on hierarchical regression were conducted. Results showed that benefits in maternal symptomatology were connected to improvement in child adjustment; that greater maternal PTSD was connected to higher children externalizing behavior, but its effects were fully mediated by resilience and social support; greater maternal depressive symptoms were connected to higher children internalizing behavior with a partial mediation effect of resilience. Clinical implications were discussed.



POST-ADOPTION INTERVENTION: PROPOSALS AND IMPACT

Proposer

*Cecilia Serena Pace*¹

¹ Department of Educational Sciences, University of Genoa, Genoa

Discussant

*Giancarlo Tamanza*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Brescia, Brescia, Italy

Abstract

The psychological and relational processes involved in becoming an adoptive family are complex and dynamic, often very demanding for both the adopted children and the adoptive parents, calling for specific psychological interventions. Most of existing post-adoption interventions target the development of nurturing and balanced relationships between adopted children and their parents (Juffer et al., 1997; Ní Chobhthaigh and Duffy, 2019). However, empirical studies continuously highlight the complexity of the challenges faced by adoptive families. For instance, the psychological needs may vary according to the nature of the processes occurring in the family system (e.g., communicating about adoption history, searching of origin), or to the presence of additional risk factors (e.g., special needs) and in different post-adoption periods (e.g., adolescence). Consequently, psychological interventions directed to adoptive families should be tailored on these specificities, adapting intervention targets or developing new clinical methods. This symposium aims to discuss recent Italian advances in this field. Gorla and colleagues investigate correlates of Communicative openness (CO) during the first year of adoption. Pace and colleagues report results of a trauma-informed attachments-based intervention for adoptive parents of adopted adolescents, and La Fico and colleagues report results of a family enrichment group intervention for adoptive parents of adopted adolescents suffering from Fetal Alcohol Spectrum Disorders (FASD). Lastly, Cordella investigate the impact of the child's search of origin on the adoptive mothers, highlighting the need of a long-lasting and continuous support to adoptive families.



Applications of the Connect Parent Group with adoptive parents of adolescents

Cecilia Serena Pace¹, Stefania Muzi¹, Guyonne Rogier¹, Marlene Moretti², Lavinia Barone^{3,4}

¹ Department of Education Sciences, University of Genoa, Genoa, Italy

² Department of Psychology, Simon Fraser University, Vancouver, Canada

³ Department of Psychology, Simon Fraser University, Canada

⁴ Department of Nervous System and Behavioral Sciences, University of Pavia, Italy

Abstract

Introduction: Adopted adolescents can show high levels of behavioral problems and attachment difficulties, and adoptive parents appear at risk of excessive parental distress (Barroso et al., 2017; Sanchez-Sandoval and Palacios, 2012). This contribution aims at testing two different versions of the Connect Parent Group (CPG©; Moretti, 2020) in parents of adopted adolescents. The CPG© is a 10-week manualized attachment-oriented evidence-based group intervention aiming at supporting parents in recognizing the attachment needs underlying adolescents' problematic behaviors, and in responding to these behaviors sensitively and thoughtfully, with possible positive effects also on distress in the parental role. *Methods:* The first group (G1) attended the standard version of the CPG© intervention in person and it was composed of 10 adoptive parents (Mage = 54.6 years, SDage = 4.46; five mothers and five fathers) of eight internationally adopted adolescents (Mage = 18.2 years, SDage = 2.15; 75% males). The second group (G2) attended a trauma-informed adaptation of the CPG© for adoptive and foster parents (Moretti et al., 2014), delivered in an online form (i.e., e-Connect, Bao and Moretti, 2023), and it was composed of 10 adoptive parents (Mage = 51.3, SDage = 5.3; 5 mothers and 5 fathers) of five adopted adolescents (Mage = 13.6 years, SDage = 1.56; 60% males). Both groups were assessed the week before the intervention start (T1) and the week after the intervention end (T2) with a set of questionnaires assessing the adolescents' internalizing and externalizing problems, the parental distress and self-efficacy, and the perception of the parent-adolescent relationship. *Results:* G1 parents reported a significant decrease in internalizing symptoms and the perception of the child as "difficult", as well as an increase in the perceived quality of the parent-adolescent relationship (all $p < .05$) in T2. G2 parents reported a significant decrease in adolescents' affective dysregulation ($p = .024$). Parents of both groups reported satisfaction in having attended the intervention, with some differences. *Conclusions:* The authors will



discuss the results considering the differences between the two versions and forms of delivering the intervention.



FASD and adoption: The “Groups for Family Enrichment” for adoptive parents

Giuliana La Fico¹, Laura Ferrari¹, Chiara Righetti¹, Stefania Bazzo², Sonia Ranieri¹, Chiara Zullo¹, Rosa Rosnati¹

¹ Family Studies and Research University Centre, Catholic University of the Sacred Heart of Milan, Milan, Italy

² Scientific Committee AIDEFAD, Italian Association FASD, Italy

Abstract

A large theoretical and empirical corpus of studies highlights that adoption has been usually considered a risk factor for adoptees' psychosocial adjustment and well-being. This picture becomes more complex taking into account the notable proportion of children with special needs (SN) placed through international adoption, up to 62.5% according to the statistics relating to 2021 adoptions in Italy. In particular, despite the evidence regarding a high prevalence of children affected by the “Fetal Alcohol Spectrum Disorders” (FASD) in the adoptive population, few studies have focused on this specific group and the additional tasks they have to face with. According to a preventive-promotional approach, the psychological and clinical post-adoption support can be useful to strengthen the parental resources and skills. In this line we could place the “Groups for Family Enrichment” (GFE), a semi-structured preventive group intervention aimed at promoting participants' reflection on their couple, parental, and family identity as well as their personal and relational resources. Despite the widespread application of this intervention, there is still little research that evaluates its effectiveness, especially in the specific context of adoptive families with disabilities. Therefore, this study was aimed at evaluating an application of the GFE with Italian adoptive parents with children affected by FASD. The process and results evaluation was implemented administering some instruments across the six sessions and a self-report questionnaire at the beginning (T0) and at the end of the intervention (T1). Participants were 22 Italian parents of adopted adolescents, members of the AIDEFAD association and coming from all over the national territory. The data analyses are in progress and the results will be discussed in the light of their implications for professionals interested in the implementation of interventions for adoptive families.



Openly communicate about adoption within the adoptive family: an intervention proposal

Laura Gorla¹, Alessandra Santona¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Communicative openness (CO) is a complex process involving exploring adoption-related themes within the adoptive family. As CO is essential for healthy psychological adjustment in adopted children and requires an active role of parents, it needs to be addressed as a specific target for psychological interventions. The current study explores CO, specifically focusing on parents' actions, difficulties, and characteristics that influence communication and could be a target of intervention. Our sample was composed of 219 adoptive parents (72% females, meanly aged 50 years) who fulfilled a) an ad hoc questionnaire for CO in the first year together as a family, b) the Interpersonal Reactivity Index (IRI), c) the Strength and Difficulties Questionnaire (SDQ). In the first year after the child's adoption, most of our participants reported not sharing all the information regarding their children's past lives and experiencing difficulties properly communicating their emotions and responding to children's questions. Moreover, parents reported being calm while talking with their children but perceived them as sad during the conversation. Parents with more "other-oriented" sympathy feelings were more comfortable talking with their children ($B = .366, p < .001$). In contrast, parents showing personal anxiety and uneasiness in emotional situations reported being less calm ($B = -.639, p < .001$) and found more difficult to answer their children's questions ($B = .403, p < .001$) and communicate their emotions ($B = .422, p < .001$). Finally, parents of children with more problematic behaviors were likely to report more difficulties in CO ($B = .035, p < .001$). Our study sheds light on a novel research path by examining how adoptive family members communicate about adoption-related themes in the first year after the adoption. Our results could guide future interventions as they highlight emotions and difficulties experienced by adoptive parents while openly communicating in the first year and connect them to parents' empathy and child's behaviors.



Adoptive families in search of their roots

*Barbara Cordella*¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Faculty of Medicine and Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: The proposed contribution originates from research that explored the way in which adoptive mother deal with their children's search for biological origins. *Methods:* 36 Italian adoptive mothers were interviewed. The collected narratives were elaborated through a cluster analysis and a subsequent analysis of multiple correspondences. *Results:* A space composed of 6 factors and 7 cluster emerged from the elaboration. *Discussion:* The analysis highlights the distance between the experiences of mothers and the role assigned to them by current regulation (149/2001), the fragility with which one's maternal function is perceived and how this fragility is evoked by the search for the origin on the part of the children. What emerges support the need to accompany adoptive families over the years, through the construction of parental groups accompanied by a facilitator. Comparison between peers allows sharing of the difficulties encountered in the various evolutionary stage, favoring the recognition of a specific family configuration not attributable to a supposed normality to which adoptive families often seem to refer.



**SEXUAL MINORITY PARENT FAMILIES THROUGH PSYCHODYNAMIC AND
NEUROBIOLOGICAL LENSES**

Proposers

Nicola Carone¹, Michele Giannotti¹

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

² Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Discussant

Alessandro Taurino¹

¹ Department of Education, Psychology, Communication, University of Bari Aldo Moro, Bari, Italy

Abstract

Parenting has been increasingly studied combining different levels of analysis, including representational, interactive, and, more recently, neurobiological aspects. Yet, to date, available evidence is limited to heterosexual parent families with children born through unassisted conception. Considering the rise of families who are diverse in parents' sexual orientation and child's conception method, this represents a missing opportunity to extend previous well-established psychodynamic constructs and neurobiological approaches to the understanding of sexual minority parent families formed by assisted reproduction. This pairs with the fact that most previous studies on sexual minority parent families have been driven more by public debate than by theory. In the present symposium we bring together four papers which analyze parenting and parent-child relationship in sexual minority parent families through assisted reproduction using psychodynamic and neurobiological lenses. In the first paper, Rigo et al. will explore involvement in childcare among mothers in a same-sex relationship analyzing the activation of neural networks related to maternal brain model during an fMRI listening task of infant vocalization. In the second paper, Carone and Speranza will combine attachment and defense theories to examine the implications of maternal AAI coherence of mind and defensive functioning for emotional availability in toddlerhood in a sample of lesbian, first-time biological mothers with children born through donor insemination. In the third paper, Gemignani et al. will study the EEG response to mother-child stimuli and its association with the quality of dyadic interactions in a sample of mothers who had a child, aged 3–11 years, within a same-sex



relationship. In the fourth paper, Quintigliano et al. will investigate the mediating role of parental reflective functioning in the intergenerational transmission of attachment in lesbian, gay, and heterosexual parent families with school-age children born through donor insemination, surrogacy, and gamete donation, respectively. The results will be discussed pointing to the need of framing research on sexual minority parent families through assisted reproduction within psychodynamic theories and neurobiological approaches to empirically inform social policy and clinical interventions aimed at supporting these families.



Attachment transmission during middle childhood in lesbian, gay, and heterosexual families formed through assisted reproduction

Maria Quintigliano¹, Demetria Manzi², Chiara Antonucci³, Vittorio Lingiardi¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy.

³ Department of Developmental and Social Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Previous research showed that parents' sexual orientation and child's method of conception are not associated with parent-child relationship quality. However, parent-child relationship in diverse families formed through assisted reproduction techniques (ARTs) has been rarely framed by attachment theory. Examining child-parent attachment in lesbian, gay, and heterosexual (LGH) ART parent families during middle childhood may provide key information on the functioning of these under-researched families and the mechanisms involved in the transmission of attachment, in a period by which children become able to grasp the meaning of their biological (un)relatedness to their parents and the existence of diverse family forms. The present study aimed at: (1) confronting the distribution of parents' and children's attachment patterns in LGH ART parent families with international and national normative data; (2) exploring how parental reflective functioning mediated the intergenerational transmission of attachment in the three diverse ART families during middle childhood. *Methods:* Sixty lesbian mothers through donor insemination, 50 gay fathers through surrogacy, and 42 heterosexual parents through gamete donation and their children aged 6–12 years participated. Each parent was administered the Adult Attachment Interview (AAI; also coded for reflective functioning), while each child was administered the Friends and Family Interview (FFI). *Results:* No differences were found both in the AAI and FFI attachment distributions compared to normative data. Furthermore, across the three family types, parental reflective functioning significantly mediated the relation between parents' AAI coherence of mind and child's FFI attachment security. Finally, parents' coherence of mind also had a direct influence on child's attachment security. *Discussion:* The results provide unique insights for understanding and working with diverse ART families in middle childhood. Also, they confirm previous literature, showing that parents with greater coherence of mind reported a higher ability to reflect and give meaning to their



own parents' behavior, which, in turn, was associated with greater child's attachment security, in terms of searching for a safe haven in case of distress and secure base from which to explore their environment.



Attachment mental states and defense mechanisms in lesbian biological mothers with donor-conceived children: Implications for emotional availability one year later

Nicola Carone¹, Anna Maria Speranza²

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

² Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: For lesbian biological mothers through donor insemination the transition to parenthood may be particularly stressful given that the physical and emotional changes following pregnancy and childbirth add to the barriers lesbian mothers had already to face for accessing parenthood due to their sexual minority status. Attachment theory represents a unique perspective to examine the transition to parenthood in lesbian biological mothers insofar as an individual's experience in their family of origin generates relatively stable mental representations of childhood experiences, which will likely influence their future parenting quality. Also, in the context of major relational changes, such as the arrival of a child, maternal defensive functioning may have unique implications for subsequent mother-child relationship quality. The present study explored attachment patterns in lesbian biological mothers and examined the mediating role of maternal defensive functioning in the relation between coherence of mind rated on the Adult Attachment Interview (AAI) and observed emotional availability. *Methods:* Thirty-one cisgender, lesbian, first-time biological mothers with donor-conceived children ($M_{\text{months}} = 17.5$, $SD = 5.9$; 48.4% females) were administered the AAI, which was then scored also for defenses applying the Defense Mechanism Rating Scale-Q sort (DMRS-Q). About one year later ($\text{child's } M_{\text{months}} = 29.4$, $SD = 5.5$), mother-child interactions were rated using the Emotional Availability Scales (EAS). *Results:* Lesbian mothers did not differ in their three-way and four-way AAI patterns from international and national normative data. Also, lesbian mothers showing greater AAI coherence of mind demonstrated a more adaptive defensive functioning which, in turn, predicted greater emotional availability. *Discussion:* The results emphasize the importance of assessing defense mechanisms in the context of AAI since the mother's ability to be internally consistent, but not emotionally overwrought, when discussing her own



childhood attachment experiences is associated with her defensive functioning, and both shape emotional availability during mother-child interactions.



Electrophysiological responses to child cues and the quality of mother-child interactions in a sample of same-sex mothers

Micol Gemignani¹, Michele Giannotti¹, Paola Rigo², Alessandra Simonelli²

¹ Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

² Department of Developmental Psychology and Socialization, University of Padua, Italy

Abstract

Mothers, compared to non-mothers, display a heightened electrophysiological (EEG) response to child cues, especially to stimuli of their own child. Variations in the EEG response to child cues have been associated with indicators of parental quality, such as parental sensitivity and parent-infant bonding. However, these patterns have been left unexplored in same-sex parents. Our study investigates the EEG response to mother-child stimuli and its association with the quality of dyadic interactions in a sample of same-sex mothers and their children. Fifteen mothers (recruitment in progress) are videotaped during a 15-min structured play session with their own child (age range 3-11 years). Interactions are coded using the Emotional Availability Scales and experimental stimuli for EEG task are extracted. Mothers undergo the EEG task to evaluate their own and other mother-child interactions displaying either positive or negative emotional valences. Mothers' actual and previous experiences of care are assessed through self-reported measures. Preliminary results suggest that same-sex mothers show an enhanced response to their own versus other child and a differential activation related to the emotional valence of the interaction displayed. An increased recruitment of cognitive resources to their own child may serve to benefit the quality of mother-child relationship, as it might be considered as an integral part of maternal sensitivity, which develops during mothers' attachment history. Thus, neurophysiological mechanisms related to child processing could be potentially regulated by mothers' experiences of care. Overall, our findings chart a brain-behavior pathway that might ultimately support motherhood in different family contexts.



The effect of caregiving involvement on maternal responsiveness to children cues in same-sex families: an fMRI study

Paola Rigo¹, Bianca Filippi¹, Simona de Falco²

¹ Department of Developmental Psychology and Socialization, University of Padua, Padua, Italy

² Department of Psychology and Cognitive Science, University of Trento, Trento, Italy

Abstract

Responding appropriately to infant cues is vital for proper child development. Neuroimaging research has mainly focused on the maternal response to signals from their infants, highlighting regional patterns of brain activation related to attention, emotional processing, motivation, and social cognition (maternal brain model mBM). Recent evidence has shown that the responsiveness of a caregiver's brain to infant cues and the quality of adult-infant interaction appear to be significantly influenced by the type of involvement in childcare rather than the role of caregiver type. However, more attention must be paid to how the kind of care involvement may shape the neurobiological basis of parenting and influence adaptive caregiving behaviors. Our study intends to extend the understanding of childcare involvement in same-sex families. We expect that the role of parents in terms of primary or secondary caregivers may better explain differences between subjects rather than gender. Twenty-five mothers (recruitment in progress) are subjected to an fMRI listening task of positive and negative infant vocalizations and control sounds to evaluate involved neural networks related to mBM. Participants' psychological well-being, childcare involvement, and quality of parent-child interaction are assessed. We expect that primary caregiver mothers, more than secondary caregiver mothers, would show brain activation consistent with mBM. Our findings will contribute to bridging the gap that clarifies caregiver roles beyond the rigid logic of gender differences and promote the identification of new perspectives for an advanced screening of at-risk parenting and advanced clinical treatments that can benefit from the specificity and complementarity of caregivers' contribution in the therapeutic process.



Sunday, 17th September 2023

THEMATIC SESSION

**EMOTIONAL, BEHAVIOURAL AND COGNITIVE
FUNCTIONING OF CHILDREN AND ADOLESCENTS**

Chair:

Claudia Mazzeschi

University of Perugia

Maria Clelia Zurlo

University of Naples Federico II



Preliminary investigation of the Italian version of The Tromsø Social Intelligence Scale (TSIS) for children

Marco Andrea Piombo¹, Sabina La Grutta², Federica Andrei¹

¹ Department of Psychology “Renzo Canestrari”, Alma Mater Studiorum, University of Bologna, Bologna, Italy

² Department of Psychology, Educational Science and Human Movement, University of Palermo, Palermo, Italy

Abstract

Introduction: Social intelligence (SI) is a construct that has shown promising practical applications, but its use in research and applied settings has been limited by both definitional and operational problems. Overall, SI is currently defined as a set of cognitive, emotional, and behavioral abilities that individuals can use to interpret events, plan their life, achieve personal and social goals, solving personal and interpersonal problems. These abilities could be fundamental in primary school children because classrooms represent the context for first experiences with social acceptance and rejection, as well as for the development of relationships between classmates. However, there is a lack of studies on the measurement of SI in children. *Methods:* An adapted version of the Tromsø Social Intelligence Scale (TSIS-IV) was administered to 228 Italian primary school children (115 females; mean age: 9.57; SD: .62). The original questionnaire consists in 21 items on a 7- point Likert scale and provides scores to three subscales: Social information Processing (SP), Social Skills (SS), and Social Awareness (SA). *Results:* Internal reliability was evaluated using Cronbach’s alpha coefficient. The adapted version for children showed acceptable levels of reliability ($\alpha=.75$). Explorative factor analysis with varimax rotation showed three factors that correspond to the subscales of the original version of the TSIS: SP (eigenvalue= 3.04), SS (eigenvalue= 2.59), and SA (eigenvalue= 2.43). However, while all items of SP load onto one factor, three items are switched between SS and SA. Nevertheless, these three factors explain 14.47%, 12.34%, and 11.57% of the variance, respectively. Each item showed a loading of almost .30, except for item 5. *Conclusion:* These preliminary results showed that the factorial structure of the TSIS-IV for children is somehow different to the adult form, with SS and SA subscales seeming to be structured differently. This could be interpreted by the fact that a number of psychological variables measured by the questionnaire,



such as those included in the subscale SA, may not be already developed by children and may overlap with more concrete dimensions which are included into the subscale SS.



Dyadic interaction features and Emotional Availability gender differences in autistic preschoolers

Silvia Perzollì¹, Eleonora Paolizzi¹, Giulio Bertamini¹, Arianna Bentenuto¹

¹ Department of Psychology and Cognitive Science, University of Trento, Rovereto, Italy

Abstract

Autistic females are under-diagnosed compared to males due to better social skills and camouflage strategies which are conscious or unconscious behaviors adopted to face social challenges. Therefore, attention should be directed toward investigating social behaviors using observational methods. In line with this, recent research showed gender differences in the interaction of autistic preschoolers with therapists. The aim of the current study is to extend current knowledge regarding interpersonal Synchrony gender differences while studying dyadic Emotional Availability and moving the focus to the parent-child dyads, as parents are the primary people interacting with the child. 64 dyads of autistic children with their parents participated in our study. Specifically, 17 females (M chronological age= 41,1 months, SD= 9,41 months) and 16 males (M= 35,6 months, SD= 8,59 months) in interacting with their mothers, and 15 females (M= 44,3 months, SD= 9,39 months) and 16 males (M = 35,8 months, SD= 8,74) with their fathers. 10-min long interactions were video-recorded as dyads were requested to play as they typically would and then analyzed using the Interpersonal Synchrony Observational Coding System and the Emotional Availability Scales 4th Edition. Females received their diagnosis significantly later than males, and despite not showing significant differences in the general development quotient, females presented higher levels of Autistic symptomatology, as highlighted by the ADOS-2. Considering interaction features, females' presented a higher degree of interpersonal synchrony, and responded more and quicker to the adult play proposals. Further, their interplays lasted longer and were more engaging than males'. Concluding, females were more responsive and involved with the adult. No differences were highlighted considering the parent's sex. In line with the literature, autistic females received the diagnosis significantly later. While no differences in the interaction were highlighted considering parents' gender, significant differences emerged considering children's sex, with females resulting in more synchronous, responsive, and involved in the interplay. Our results suggest the relevance of deepening the knowledge on interaction gender differences, potentially disclosing sex-specific behavioral characteristics involved in the under-diagnosis of females.



Parent and Teacher Agreement on the Executive Function Assessment of Preschoolers

*Livia Taverna*¹, *Francesca Sangiuliano Intra*¹, *Roberta Maria Incardona*², *Alberto Amadori*¹, *Giulia Prestera*¹,
*Alessandro Failo*¹, *Antonella Brighi*¹

¹ Faculty of Education, Free University of Bozen-Bolzano, Brixen, Italy

² Pediatric Hematology, Oncology and Stem Cell Transplant Center, Department of Women and Child's Health, University of Padua, Padua, Italy

Abstract

Collecting assessments from different informants is considered a fundamental clinical practice to acquire reliable information on child's behavior in order to make a diagnosis. Executive Functions (EFs) are a set of fundamental processes involved in cognitive tasks as in self-regulated behaviors. However, discrepancies between informants could be due to the characteristics of the assessor, the context in which the child's behavior is detected or, in the case of clinical populations, the type of disorder manifested. The current study aimed firstly at examining whether there were differences between parent and teacher ratings of preschool children's EFs. Secondly, it has been investigated whether such differences were related to socio-demographic factors (i.e. child's gender, age or school district). The third aim was to examine whether the potential disagreement was larger for the clinical or for the non-clinical population. Participants included a sample of 118 preschoolers (55M, 63F) and their parents and teachers. Behavioral EFs were measured with the BRIEF-P. Both the teacher's and the parent's form were used to assess the same components of EFs in the classroom and in the home situation. Findings show that the mean of the teacher ratings was significant greater for Working Memory, Plan/Organization, Inhibitory Self-Control Index, Flexibility Index, Emergent Metacognition-Index, and Global Executive Composite scales ($t_{WM} (2,117)=4,999, p<.001$; $t_{P/O} (2,116)=1,795, p=.038$; $t_{ISCI} (2,104)=4,048, p<.001$; $t_{FI} (2,118)=3,682, p<.001$; $t_{EMI} (2,118)=5,657, p<.001$; $t_{GEC} (2,104)=4,883, p<.001$). Discrepancies in informants ratings of children EFs have been found to be statistically significantly related with child's gender ($r_{WM_MeanDiff}=.21, p=.01$; $r_{ISCI_MeanDiff}=-.37, p<.001$; $r_{FI_MeanDiff}=-.27, p=.002$; $r_{EMI_MeanDiff}=-.25, p=.002$; $r_{GEC_MeanDiff}=-.34, p<.001$) and school district ($r_{Shift_MeanDiff}=-.34, p<.001$; $r_{ISCI_MeanDiff}=.27, p<.005$). Teachers and parents disagreed in estimating EFs of the clinical and non-clinical populations: the typical developing children were rated more dysfunctional by teachers, whereas disordered children scored higher in parents' ratings. These data draw attention to the



interpretation of the executive profile of children for diagnostic purposes, which implies taking into account the traits assessed with respect to context of expression.



A multidimensional network analysis in clinical high-risk for psychosis and help-seeking youth

Gabriele Lo Buglio¹, Erika Cerasti¹, Maria Pontillo², Stefano Vicari^{2,3}, Marco Solmi^{4,5,6,7,8}

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Child Psychiatry Unit, Department of Neuroscience Bambino Gesù Children's Hospital, IRCCS, Rome, Italy

³ Department of Life Science and Public Health, Catholic University of the Sacred Heart of Rome, Rome, Italy

⁴ School of Epidemiology and Public Health, Faculty of Medicine, University of Ottawa, Ottawa

⁵ Canada Department of Psychiatry, University of Ottawa, Ottawa, Canada

⁶ Department of Mental Health, The Ottawa Hospital, Ottawa, Canada Ottawa Hospital Research

⁷ Institute (OHRI) Clinical Epidemiology Program University of Ottawa, Ottawa, Canada

⁸ Department of Child and Adolescent Psychiatry, Charité Universitätsmedizin, Berlin, Germany

Abstract

Introduction: Children and adolescents at clinical-high risk for psychosis (CHR-P) represent a subsample of help-seeking individuals attending early intervention services. However, knowledge about differences between help-seeking and CHR-P youth is limited. This study aims to (a) to build two network architectures: the first including both CHR-P and non-CHR-P help-seeking youth and the second including only CHR-P youth, and (b) to explore differences between the two network structures. *Methods:* We recruited 146 CHR-P and 103 non-CHR-P help-seeking youth in a specialized Child and Adolescence Neuropsychiatric Unit. They were assessed with the Structured Interview for Psychosis-Risk Syndromes, Children Depression Inventory, Multidimensional Anxiety Scale for Children, Global Functioning: Social, Global Functioning: Role, and Wechsler Intelligence Scale for Children/Wechsler Adult Intelligence Scale. Network analysis was applied to both help-seeking and CHR-P patients. Central nodes, relevant edges, and correlation stability coefficients were examined. *Results:* In the first network structure, depressive symptoms displayed the greatest number of connections. In the second network, two isolated “archipelagos of symptoms” were observed: (a) a component including subclinical psychotic symptoms (positive symptoms excluded), functioning and comorbid symptoms, and (b) a sub-graph including only



subclinical positive symptoms and IQ. Subclinical negative and disorganization symptoms were the most central nodes, and functioning played a key role in bridging subclinical psychotic and non-psychotic symptoms. The correlation stability coefficient of the second network was above .50. *Discussion:* Depressive symptoms were crucial in maintaining and spreading psychopathological manifestation in help-seeking youth. Findings suggest that preventive interventions focusing on negative and disorganization symptoms and impaired functioning in CHR-P youth are needed. Further research exploring longitudinal course of symptom co-occurrence is warranted.



Adolescent mental health hospital service: a study on Theory of Mind, cognitive performance and psychological well-being of young people

*Laura Monti*¹, *Elisa Marconi*¹, *Giulia Fredda*¹, *Delfina Janiri*², *Georgios D. Kotzalidis*³, *Federica Moriconi*¹, *Angelica Marfoli*⁴, *Gabriele Sani*⁵, *Daniela Pia Rosaria Chieffo*⁶

¹ Clinical Psychology Unit, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

² Department of Psychiatry, Department of Neuroscience, Head, Neck and Thorax, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

³ NESMOS Department (Neurosciences, Mental Health, and Sensory Organs), Sapienza University of Rome, Rome, Italy

⁴ Catholic University of the Sacred Heart of Rome, Rome, Italy

⁵ Institute of Psychiatry, Department of Neuroscience, Catholic University of the Sacred Heart of Rome, Rome, Italy

⁶ Department of Life Sciences and Public Health Department, Catholic University of Sacred Heart of Rome, Rome, Italy

Abstract

Introduction: The literature shows an inverse correlation between mental illness and ability in mentalization tests (Theory of Mind, ToM, assessed with the Reading the Mind in the Eyes Test [RMET]) and cognitive performance, such as visuospatial skills (SPM, Standard Progressive Matrices; Tower of London, ToL). The present study was conducted by the Clinical Psychology Service of the Early Intervention Outpatient Clinic for Adolescents and Young Adults of the A. Gemelli IRCC University Polyclinic Foundation aged 15 to 25 years, of both sexes. The aim of the study was to analyze possible intercorrelations between the above tests and the psychological well-being of young people with psychological distress investigated with the Clinical Outcome in Routine Evaluation CORE-OM. *Methods:* The following tests were administered to patients: the RMET to assess ToM, Raven's Standard Progressive Matrices (SPM) to assess nonverbal fluid intelligence and the ToL to assess executive functions of planning and problem-solving, and the CORE-OM for the level of psychological well-being. *Results:* Eighty-four patients participated in the study, 60 females (mean age 16.4 ± 2.57) and 24 males (mean age 17.1 ± 2.33). RMET values were correlated with SPM values, while perseveration errors on ToL correlated inversely with



planning time and total score. Psychological distress factors detected with the CORE-OM correlated negatively with performance on the RMET, ToL and SPM tests. Performance in the RMET and ToL tests did not differ between the sexes, while in Raven's SPM, males had higher percentile scores ($U=482$, $p<0.05$). In the CORE-OM, gender differences also emerged, in fact, females had higher percentile scores ($U=480$, $p<0.05$), indicating a higher level of perceived psychological distress. *Discussion:* In conclusion, the study confirmed that psychological distress states in adolescence are correlated with worse cognitive abilities and mentalizing (Theory of Mind) performance. Gender differences are in line with this finding. In fact, females manifest higher levels of psychological distress and males have significantly higher performance on the fluid Intelligence test (SPM).



The role of worries on young adults' mental health and future representation

Giorgio Maria Regnoli¹, Barbara De Rosa¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

According to recent developments in the literature, young adults are affected by a decline in the quality of mental health as a consequence of the pandemic trauma. Hence, the constant exposure to potentially traumatic collective events, such as the war in Europe and the climate crisis could play a role in young adults' ability to be projected in a positive vision of the future and, more generally, on the quality of their psychological well-being. The present study aims to delve into the role of collective and personal worries on future vision and mental health. In doing so, data from 310 young Italian adults (49% male and 51% female, ages 18-30 years, $M=21.9$, $SD=2.6$) have been collected via a web-based survey including the following scales: The Penn State Worry Questionnaire (PSWQ), the Worry Domains Scale (WDQ), the Climate Change Worry Scale (CCWS), the Fear of War Scale (FOWARS), the Dark Future Scale (DFS) and the Depression Anxiety Stress Scale (DASS-21). The descriptive results show a moderate level of pathological worry ($M=44.4$; $SD=8.8$) and the predominance of worries related to Lack of Confidence ($M=10.4$; $SD=5.2$), Aimless Future ($M=11.6$; $SD=5.1$) and Work ($M=10.2$; $SD=4.7$). In addition, they show slightly above average levels of worry with respect to climate change ($M=3.1$; $SD=.9$) and fear of war ($M=3.2$; $SD=.9$) as well as extremely severe to moderate levels of Anxiety ($M=17.7$; $SD=10.9$), Depression ($M=20.8$; $SD=10.8$) and Stress ($M=25.6$; $SD=10.0$). Results from ANOVA show that women reported significantly higher scores than men of Anxiety, Depression, Stress, pathological worry and future anxiety. Several hierarchical multiple regression models were run in order to explore the role of worries on the representation of future anxiety ($R^2=.59$; $p < .001$), stress ($R^2=.44$; $p < .001$), anxiety ($R^2=.42$; $p < .001$) and depression ($R^2=.45$; $p < .001$). The results show that the conceptualization of worry, intended as both pathological and non-pathological, individual and collective, has a strong impact on young adults' mental health and future representation. The results also highlight the importance of worry as a variable worth investigating in psychological research and interventions aiming at improving youth well-being.



Sunday, 17th September 2023

THEMATIC SESSION

**CLINICAL PSYCHOLOGY IN MEDICAL CONDITIONS:
ADVANCES AND PERSPECTIVES**

Chair:

Maria Grazia Strepparava

University of Milano-Bicocca

Elena Vegni

University of Milan



The promise of digital tools to enhance quality of life and pain-related psychosocial outcomes in fibromyalgia syndrome

Valeria Donisi¹, Annalisa De Lucia¹, Ilenia Pasini¹, Lidia Del Piccolo¹, Cinzia Perlini¹

¹ Section of Clinical Psychology, Department of Neuroscience, Biomedicine and Movement Science, University of Verona, Verona, Italy

Abstract

Introduction: There has been an increasing and encouraging use of e-Health interventions addressing psychological variables for different chronic pain conditions, including fibromyalgia syndrome (FMS). A systematic review was conducted to provide a detailed analysis of the available e-Health psychological and/or multicomponent interventions for patients with FMS. *Methods:* Four electronic databases (PubMed, Cochrane, Web of Science, PsycINFO) were searched up to August 2022. The review was carried out following PRISMA guidelines. *Results:* In total, twenty-five articles published between 2008 and 2022 were included. 52% of the studies were randomized controlled trials (RCTs). The following four e-Health modalities were used for the interventions: web-based (n=19), m-Health (n=3), virtual reality (VR) (n=2) and video-consulting (n=1). The majority of the studies used Cognitive Behavioral Therapy-based interventions and included some kind of contact with a healthcare professional. The main outcome variables considered in the included papers were emotional distress, pain-related psychological variables (e.g., self-efficacy, catastrophizing, coping strategies, etc.) and integrated outcome including psychological/emotional component. *Discussion:* The results of our review confirm that e-Health psychological and multicomponent interventions have the potential to improve several psychosocial and pain-related psychological variables in the context of FMS. Among digital tools, web-based modalities are the most used, while there are only a few examples regarding the use of m-Health, virtual reality and video-consulting in this field. However, due to the high heterogeneity of included studies, no robust conclusions can be drawn and thus further research is needed.



Psychological profiles of patients with chronic pain evaluated for spinal cord stimulation (SCS) at the University Hospital of Verona

Cinzia Perlini¹, Annalisa De Lucia¹, Ilenia Pasini¹, Daniela Bettoni¹, Vittorio Schweiger², Lidia Del Piccolo¹

¹ Department of Neuroscience, Biomedicine and Movement Science, University of Verona, Verona, Italy

² Department of Surgery, Dentistry, Paediatrics and Gynaecology, Pain Therapy Center, University of Verona, Verona, Italy

Abstract

Introduction: Spinal cord stimulation (SCS) is a treatment for chronic neuropathic pain conditions resistant to other therapies/procedures, which consists of the implantation of a device that delivers electrical stimulation along ascending nerve pathways. According to the bio-psycho-social model of pain, SCS success depends on factors beyond the technical aspects of implantation, including psychological and relational ones. A deep evaluation of psycho-social variables associated with SCS outcome is indeed clinically relevant in the pre-implant phase. *Methods:* Patients candidates for SCS from the Pain Therapy Center of the University Hospital of Verona undergo a psychological assessment at the USD Clinical Psychology of the same Hospital before the implant. The evaluation includes an interview focused on the impact of pain on the patient's life and coping strategies, family support, along with the presence of traumatic experiences and the use of alcohol/substances lifetime. The assessment also includes the administration of questionnaires on pain (Brief Pain Inventory, BPI), personality (Minnesota Multiphasic Personality Inventory, MMPI-2), coping style (Coping Strategies Questionnaire, CSQ), the tendency to catastrophize (Pain Catastrophizing Scale, PCS), family and social support (Multidimensional Scale for Perceived Social Support, MSPSS), self-efficacy (General Self-Efficacy Scale, G-SES), and the presence of psychopathology (Symptom Checklist 90, SCL-90). *Results:* One-hundred eighteen (n=118) patients have been evaluated from April 2018 onward. Seventy of them (59%) are females. Statistical analyses exploring clinical, socio-demographic and psychological variables and their relationship with SCS outcomes are ongoing, and results along with clinical implications will be discussed. *Discussion:* The psychological assessment in the pre-implant phase allows detecting patients with an increased risk of SCS failure. It also gives the opportunity to identify patients who need for psychological support before or post-SCS, having implications for clinical practice.



Inflammatory Bowel Disease and Irritable Bowel Syndrome: what differences in mentalization abilities? A scoping review

*Agata Benfante*¹, *Fabio Cisarò*², *Davide Giuseppe Ribaldone*³, *Lorys Castelli*¹, *Nikolas Sandroni*¹, *Annunziata Romeo*¹

¹ Department of Psychology, University of Turin, Turin, Italy

² Division of Digestive Endoscopy, University Hospital "Città della Salute e della Scienza", Turin, Italy

³ Department of Medical Sciences, University of Turin, Turin, Italy

Abstract

Introduction: Mentalization is a psychological process that enables individuals to understand the self and others in terms of intentional mental states. According to the mentalization-based approach, biological and environmental factors may predispose to the development of functional somatic disorders. If psychological and/or physiological precipitating factors are added to this condition, individuals may experience stress system dysfunctions, present in both irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD). The aim of this scoping review was to provide an overview of the findings on mentalization in patients with IBD and/or IBS. *Methods:* A literature search, in line with the Preferred Reporting Items for Systematic Review and Meta-analysis Protocols extension for Scoping Review guidelines, was conducted in the following bibliographic databases: PubMed, PsycINFO, and Scopus. Databases were queried using the following Boolean strings: (“mentaliz*” OR “metacogniti*” OR “theory of mind” OR “ToM” OR “reflective function*”) AND (“irritable bowel syndrome” OR “IBS” OR “inflammatory bowel disease” OR “IBD”). *Results:* In line with the eligibility criteria, seven articles were included. Firstly, results showed a mentalization deficit in IBD and IBS patients, and no significant differences were found between the two groups. Secondly, studies provided discordant data regarding the differences in mentalization between patients with IBD or IBS and those with other clinical conditions or healthy controls, suggesting the non-specificity of mentalization impairment. *Discussion:* This review revealed the mentalizing difficulties for patients with IBD and IBS. These results should be interpreted with caution since they are based on a few studies that used different instruments. However, the studies included suggesting that a mentalization deficit could be considered a transversal factor. Although deficits in mentalization are usually considered predictors of a functional somatic syndrome, it is plausible that living with chronic organic disease results in stress and, consequently, impairs the ability



to mentalize. Future studies are needed to clarify the role of mentalization in patients with these gastrointestinal conditions, and to provide new scenarios for psychotherapeutic approaches to the treatment of emotional disturbances based on the mentalization theories.



Exploring the role of psychological evaluation in patients with Gluten Related Disorders

Daniele Ferrarese¹, Giorgia Spagnolo¹, Stefano Bibbò¹, Michele Vecchione², Gianluca Ianaro¹, Antonio Gasbarrini¹, Giovanni Cammarota¹

¹ UOS Clinical Psychology Fondazione Policlinico Univeristario A. Gemelli IRCCS, CEMAD Digestive Disease Center Fondazione Policlinico Univeristario A. Gemelli IRCCS, Catholic University of Sacred Heart of Rome, Rome, Italy

² Faculty of Medicine and Psychology. Department of Social and Developmental Psychology, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Several studies suggest the presence of psychiatric disorders in patients with coeliac disease (CD) and non-coeliac gluten sensitivity (NCGS). In this study, we investigated the presence of alexithymia, anxiety, depression and well-being in NCGS individuals compared with CD patients and healthy control group. *Methods:* This is an observational study in which patients with celiac disease or with NCGS and healthy controls were prospectively enrolled. All patients were subjected to questionnaires to analyze the gastrointestinal symptoms (GSRS) and psychometric (HADS, PGWBI, TAS). The univariate analysis of variance (ANOVA) was conducted to test the study hypotheses. Tukey's post-hoc tests were used to compare the three groups of subjects. *Results:* 83 patients (52 celiacs and 31 NCGS) and 55 controls were enrolled. Regarding gastroenterological symptoms, no significant differences were identified between the two groups of patients, except for the “constipation” subscale ($p = 0.02$). The analysis of psychometric questionnaires highlighted interesting significant differences between celiacs and patients with NCGS. The “HADS” scale allowed us to identify a higher level of anxiety ($p < 0.001$) and depression ($p < 0.001$) in the NCGS compared to celiacs and the control group. The “PGWBI” index confirms a reduced well-being of the NCGS compared to the other study groups, in particular it confirms a greater perception of anxiety ($p = 0.001$) and depression ($p = 0.027$), reduced perception of positivity ($p = 0.009$), general health ($p = 0.004$), vitality ($p < 0.001$) and self-control ($p = 0.022$). The “TAS” scale for the assessment of alexithymia showed a slight significant difference in the reduced ability to identify one's feelings for the NCGS ($p = 0.003$). *Discussion:* The innovative results reported in this study suggest that NCGS have a higher level of anxiety and depression, with associated reduced perception of well-being and health. This result supports the hypothesis of a relevant psychosomatic component in the



development of NCGS. In consideration of the results, the integrated approach between gastroenterologist and psychotherapist appears to be fundamental for the proper management of these patients.



The psychological profile of the patient with age-related macular degeneration through the use of the Symptom Checklist-90R. A pilot study

Emanuela Rellini^{1,2}, *Simona Turco*^{1,3}, *Filippo Maria Amore*^{1,3}, *Valeria Silvestri*^{1,3}, *Margherita Guidobaldi*^{1,3}, *Stefania Fortini*^{1,2}

¹ National Centre of Services and Research for the Prevention of Blindness and Rehabilitation of Visually Impaired, International Agency for Prevention of Blindness-Italia Onlus, Italy

² Service of Clinical Psychology, Fondazione Policlinico Universitario “Agostino Gemelli” IRCCS, Rome Italy

³ Department of Ophthalmology, Fondazione Policlinico Universitario “Agostino Gemelli” IRCCS, Rome, Italy

Abstract

Introduction: The psychological profile of the patient affected by chronic ocular pathologies such as age-related macular degeneration (AMD) is still little known although the studies has been estimated that approximately 10% to 30% of the visually impaired experience mild clinically significant symptoms of depression and anxiety whose prevalence is at least twice of the general population. In the literature, the use of the Symptom Checklist-90R (SCL-90R) is suggested to understand the state of mental health, psychopathological distress, and to monitor the progress of the rehabilitation path of chronic patients in an outpatient setting. *Objective:* To investigate the state of mental health and the psychological characteristics of patients with AMD who access to the National Low Vision Centre. *Methods:* 116 patients, average age 65.6, 68 females and 48 males with visual acuity below 3/10 were analyzed. SCL-90R was administered within the psychological interview at the initial evaluation. Scores of the 9 dimensions and the General Symptomatic Index (GSI) were examined. *Results:* 35% of patients showed discomfort related to the perception of bodily dysfunctions; 23% focused on thoughts, impulses and actions experienced as persistent and unwanted; 20% presented feelings of inadequacy and inferiority; 50% depression; 50% anxiety, nervousness, tension, tremors; 17% withdrawal and isolation; 67% sleep-wake rhythm alterations. 48% of patients with GSI higher than the mean value of the group (0.71). *Conclusion:* The administration of the SCL-90R carried out to the patient during the initial evaluation to the National Low Vision Centre allowed to highlight the severity of the symptoms of psychic discomfort and guided the choice and timing for the psychological treatment. It has therefore proved



to be a useful tool for understanding the degree of adaptation of the subject to the vision impairment and for measuring stress levels. Finally, it is confirmed as one of the tools of choice for the early diagnosis of psychopathology and to assist in the clinical evaluation of the patient. The next step will be to evaluate the effectiveness of the vision rehabilitation path through the administration of the SCL-90R.



The protective role of resilience on depression in patients with IBD

*Daniele Ferrarese*¹, *Giorgia Spagnolo*¹, *Michele Vecchione*², *Federica di Vincenzo*¹, *Franco Scaldaferrì*¹, *Antonio Gasbarrini*¹, *Giovanni Addolorato*³

¹ UOS Clinical Psychology Fondazione Policlinico Universitario A. Gemelli IRCCS, CEMAD Digestive Disease Center Fondazione Policlinico Universitario A. Gemelli IRCCS, Catholic University of Sacred Heart of Rome, Rome, Italy

² Faculty of Medicine and Psychology. Department of Social and Developmental Psychology, Sapienza University of Rome, Rome, Italy

³ Alcohol Use Disorders Unit. UOC di Medicina Interna e Gastroenterologia, Fondazione Policlinico Universitario A. Gemelli IRCCS. Catholic University of Sacred Heart of Rome, Rome, Italy

Abstract

Introduction: Inflammatory bowel disease (IBD) represents a group of intestinal disorders that includes two main forms, Crohn's disease (CD) and ulcerative colitis (UC). The incidence of depression and anxiety is high in this group of patients, particularly when disease is active. However, not all patients with IBD present these psychopathological manifestations. It is therefore important to understand the factors that moderate this relationship. In the present study, we considered the psychological construct of resilience as a modulating factor and examined its effect on the relationship between IBD activity level and patients' levels of anxiety and depression. *Methods:* The Connor-Davidson Resilience Scale and the Hospital Anxiety and Depression Scale were administered to consecutive IBD outpatients. Two factorial ANOVAs were conducted for each group of IBD patients (CD and UC), with anxiety and depression as the dependent variables. A 3×2 between-subjects design was employed. *Results:* The study includes a total of 424 IBD patients: 208 with CD and 216 with UC. As far as depression is concerned, results revealed a significant main effect for both disease activity and resilience. Furthermore, results showed a significant interaction effect between activity and resilience. We observed an overall tendency for patients with low resilience to report more depressive symptoms as the CD get worse. Patients with high resilience, by contrast, reported fewer depressive symptoms regardless the severity of the disease. Concerning anxiety, the main effect of resilience and the interaction between resilience and CD activity were statistically significant. Similarly to what observed for depression, anxiety increased as the severity of CD symptoms increased, but only among individuals reporting low levels of resilience. The main effect of CD activity,



by contrast, failed to reach statistical significance. Regarding UC patients, only the main effect of resilience was found to be significant. *Discussion:* These results suggest that resilience plays a protective role against depression and anxiety in CD patients. To the best of our knowledge, no empirical research has focused on this issue. Since resilience is a dynamic factor that is susceptible of improvement, the results suggest the importance of creating personalized care pathways for IBD patients.



Sunday, 17th September 2023

SYMPOSIUM SESSION



ADVANCES IN PSYCHOSOMATICS: FOLLOWING THE FOOTSTEPS OF LUCA IANI

Proposer

*Benedetto Farina*¹

¹ Cognitive and Clinical Psychology Laboratory, Department of Human Science, European University of Rome, Rome, Italy

Discussant

*Riccardo Williams*¹

¹ Department of Dynamic and Clinical Psychology, ad Health Studies, Sapienza University of Rome , Rome, Italy

Abstract

The visionary work of the Professor Luca Iani has paved the way to new trends in psychosomatics. In general, he was interested in how Positive Psychology can be used in Clinical Psychology interventions. Specifically, he worked to explore the role of positive psychological resources (e.g., dispositional mindfulness, illness acceptance, spirituality, positive emotion regulation) in promoting health-related quality of life and psychological well-being as well as reducing distress in patients with chronic diseases, psychiatric disorders, and terminal illness. The aim of this Symposium is to present current researches that are in line with the work of Luca Iani and focused on the role of some biopsychosocial factors in the illness experience of patients with chronic and psychiatric diseases. In the first contribution, De Vincenzo and colleagues examine the role of dispositional mindfulness, self-compassion, anxiety, depression, peaceful acceptance and struggle with illness in predicting body image satisfaction in terminally ill patients. The second presentation by Castelli and colleagues examines traumatic experiences, dissociative symptoms and psychological distress in women with fibromyalgia. The third contribution by Conti and colleagues describes the results of a pilot open trial with a guided-self-help and concurrent biofeedback intervention on emotional, behavioral, and psychophysiological dysregulation in patients with eating disorders. The final contribution by Tossani and Grandi examines the effectiveness of an ACT-based telepsychology intervention on depression, anxiety, and distress in parents of chronically ill patients.



Traumatic experiences, personality and dissociation in women with fibromyalgia

Lorys Castelli ¹, Marialaura Di Tella ¹, Ada Ghiggia ², Valentina Tesio ¹

¹ Department of Psychology, University of Turin, Turin, Italy

² Department of Life Sciences, University of Trieste, Trieste, Italy

Abstract

Introduction: The results of two studies will be presented. In the first study we aimed at investigating prevalence of traumatic events and psychoform and somatoform dissociation in patients with Fibromyalgia Syndrome (FM). In the second study personality traits and defence mechanisms were assessed. In both studies we compared FM patients with healthy controls (HC). *Methods:* The first study investigated traumatic experiences, dissociative symptoms and psychological distress in 99 consecutive FM patients. The effects of these variables on FM symptom were assessed too. As far as the second study is concerned, temperament and character traits, alexithymia, defense mechanism and psychological distress were assessed in 54 FM patients. *Results:* Globally, results revealed that FM patients displayed higher levels of both somatoform and psychoform dissociation, alexithymia, harm avoidance, and psychological distress, higher use of maladaptive defence style, lower self-directedness and persistence, compared to HC. Moreover, severity of FM symptoms was significantly predicted by the presence of depressive symptoms, somatoform dissociation, and cumulative trauma. Also, alexithymia, harm avoidance and maladaptive defence style were significant predictors of psychological distress in FM patients. *Discussion:* Results of these two studies suggest that multiple traumas as well as dissociations are more frequent in FM patients than in HC. Diagnostic and psychological interventions should address these aspects along with the assessment of anxiety and depressive psychopathology.



Body image satisfaction in palliative care patients: a pilot study on psychological factors associated with self-perception at the end of life

Francesco De Vincenza¹, Rossella Mattea Quinto¹, Luigi Lombardo², Sieva Durante², Debora Sangermano¹, Luca Iani¹

¹ Department of Human Sciences, European University of Rome, Rome, Italy

² Palliative Care Unit, Fondazione Sanità e Ricerca, Rome, Italy

Abstract

Introduction: Body image satisfaction seems to be of relevance for palliative care patients. This investigative study aimed to explore the role of mindfulness, self-compassion, peaceful acceptance, and struggle with illness in predicting body image satisfaction among palliative care patients, even controlling for anxiety, depression, and clinical features. *Methods:* A total of 100 terminally ill hospice patients were enrolled to the study. A trained psycho-oncologist administered to patients a battery of standardized measures of dispositional mindfulness, self-compassion, anxiety, depression, peaceful acceptance and struggle with illness, and body image. Sociodemographic (i.e., sex, age, marital status, job, and school attainment) and clinical features (i.e., Karnofsky Performance Status, BMI, time since diagnosis, and prognosis awareness) were collected. *Results:* Body image dissatisfaction was positively associated with anxiety ($r = 0.43$; $p < .001$), depression ($r = 0.46$; $p < .001$), and struggle with illness ($r = 0.65$; $p < .001$), and negatively associated with age ($r = -0.36$; $p < .001$), self-compassion ($r = -0.35$; $p < .001$), dispositional mindfulness ($r = -0.23$; $p = .022$), and peaceful acceptance of illness ($r = -0.35$; $p < .001$). A linear regression model was performed to determine whether body image satisfaction was accounted for by self-compassion, dispositional mindfulness, peaceful acceptance of illness, and struggle with illness, controlled for anxiety, depression, and age. Struggle with illness was the most important contributor to higher body image dissatisfaction ($\beta = .56$; $p < .001$), after controlling for the other variables. *Conclusion:* These preliminary findings pave the way for further research on how a sense of struggle and desperation concerning the terminally ill may lead to lower body image satisfaction. Interventions aimed to reduce worry, anger, shame, and embarrassment about the illness may help palliative care patients to find a meaning concerning self-perceived changes in physical appearance or function, which may improve, in turn, body image satisfaction.



Biofeedback and guided-self-help interventions in binge eating disorder: A pilot open trial

Chiara Conti ¹, Ilenia Rosa ¹, Roberta Lanzara ¹, Cristina Montesano ², Maria Teresa Guagnano ², Marika Berchicci ²

¹ Department of Psychological, Health, and Territorial Sciences, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

² Department of Medicine and Science of Ageing, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: Biofeedback is a broadly used method to train people to become aware of the body's physiological functions, such as breathing and heart rate. It is a mind-body, self-regulation process for improving performance and health. Biofeedback training has been utilized to help people with various conditions including anxiety, depression, asthma, chronic pain, headache, hypertension, insomnia, irritable bowel syndrome, and eating disorder. Findings on biofeedback interventions for severe emotional and behavioral dysregulation are promising but, so far, only sparse data on their use for binge eating disorder are available. The singular and combined effects of biofeedback and guided-self-help interventions on emotional and behavioral dysregulation in outpatients with binge eating disorder were examined. *Methods:* Nine women and three men with binge eating disorder completed a psychophysiological assessment and standardized self-report measures of emotional dysregulation and eating disorder symptomatology at baseline and approximately 6 weeks thereafter. *Results:* Guided-self-help and concurrent biofeedback were associated with reductions in self-reported emotional, behavioral and psychophysiological dysregulation ($p < 0.01$). Eating disorder and mood symptoms decreased moderately ($p < 0.05$). *Conclusion:* These preliminary findings suggest that guided-self-help and concurrent biofeedback interventions may reduce emotional instability and behavioral impulsivity in binge eating-disordered patients. Although limited and preliminary, our results support further investigations in rigorous controlled trials.



New trends in clinical psychosomatics: web-based programs to increase psychological flexibility in families impacted by chronic disease

Eliana Tossani^{1,2}, Silvana Grandi^{1,2}

¹ Department of Psychology “Renzo Canestrari”, University of Bologna, Italy.

² Laboratory of Psychosomatics and Clinimetrics, Department of Psychology “Renzo Canestrari”, University of Bologna, Italy.

Abstract

Introduction: Chronic diseases are the first leading cause of disability and death globally and are associated with low quality of life and high psychological distress. Chronic diseases further adversely affect parenting and family functioning. It is estimated that approximately 12% to 25% of individuals with chronic disease have children and youth up to 30 years of age who are, in turn, exposed to a higher risk of serious mental health problems. Particular attention has been paid to interventions on psychological flexibility which have shown to be effective in improving quality of life and psychological distress in families impacted by chronic disease. According to the Acceptance and Commitment Therapy (ACT) framework, psychological flexibility enables individuals to change behavioral repertoires facilitating optimal adaptation to changing circumstances and is regarded as the cornerstone of health. Telemedicine has been further applied as a promising alternative to in-person interventions in the ACT field. This talk introduces two telemedicine ACT-based approaches to improve psychological flexibility in families impacted by chronic disease. The first is an online preventive program called You Only Live Once (YOLO) which aims to increase the mental health of young people with chronically ill parents. The second is a training online intervention tailored for people with chronic diseases called “e-READY”. The efficacy of both interventions was evaluated in pilot studies. *Methods:* 192 youth of parents with type 1 diabetes, cancer, and solid organ transplant and 28 patients with multiple sclerosis were randomized to the intervention or waitlist control (WLC). *Results:* Compared to the WCG, youth of parents with chronic disease in the YOLO intervention group reported significant post-intervention improvements in depression ($d=0.34$), anxiety ($d=0.48$), and stress ($d=0.59$), which were maintained at follow-up. As for the e-READY, patients with multiple sclerosis in the intervention group reported greater improvements in anxiety ($d=0.52$) and stress ($d=0.64$) than WCG. *Discussion:* ACT-based telepsychology interventions are promising approaches to reduce distress and increase quality of life in families impacted by chronic



diseases enabling rehabilitation care that could reach more families, improve disease awareness, and offer continuity of care.



**CLINICAL PSYCHOLOGY IN MEDICAL SETTING: EXPERIENCES FROM
DIFFERENT HEALTH CONTEXTS**

Proposer

Giampaolo Nicolais¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

Daniela De Berardinis¹

¹ San Giovanni Calibita Fatebenefratelli General Hospital Rome, Rome, Italy

Abstract

Clinical psychology in medical settings is receiving increasing attention, and the number of clinical psychologists working in hospitals has grown along with the range of services provided to patients with a multitude of medical problems across the lifespan (Hubley, Miller, 2016). In our country, clinical psychology units are similarly growing both quantitatively and with regard to services provided, as the Covid-19 emergency management has recently proved (Cao di San Marco et al., 2020). The symposium aims at shedding light on clinical psychology interventions and experiences from different health contexts in our country. Data and methodologies of intervention developed in academic health centers as well as university hospitals will be presented. The first contribution (Carola, Vincenzo, Morale, Cecchi, Melina, Nicolais) illustrates data collected in a clinical screening of preoperative consultation with patients of a Cardiac Surgery Hospital Unit with the description of three explanatory clinical vignettes. Implications for the development of a clinical psychological support protocol within a cardiac surgical pathway are discussed. The second contribution (Carletto, Merola, Quaranta, Giovinazzo, Mosino, Cacciato, Benedetto, Cosma) investigates the association between perceived pain and pain catastrophizing levels and traumatic and/or stressful experiences, and the subsequent development of PTSD symptoms in a sample of women affected by endometriosis. The third contribution (De Angelis, Liguori, Mercuri, Fernandes, Trentini) illustrates the results of a preliminary study aimed at exploring the role played by early-life adversities in predicting anxiety and depressive symptoms in epileptic patients. The fourth



contribution (Pagnini) illustrates a study where the hypothesis regarding the mediating role of Illness Expectation (IE) asthma symptoms has been tested. Data confirming the hypothesis are described, along with implications of the study for mind/body interventions.



The Impact of Illness Expectations on Asthma Symptoms and Respiratory Values: A Longitudinal Study

*Francesco Pagnini*¹

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

Abstract

Background: Placebo and nocebo effects can promote physical modifications by creating an expectation of change through a primer, such as a fake pill. Every person who receives a diagnosis develops their expectations about the course of the disease, known as “Illness Expectation” (IE). This cognitive schema defines future-oriented beliefs about the illness and symptoms of individuals with chronic diseases, which can be both explicit and implicit and characterized by different degrees of rigidity. *Aims:* This study aims to test the hypothesis that IEs affect illness symptoms in asthma. *Methods:* Three hundred twelve participants with asthma were assessed three times over six months for asthma symptoms (using the Asthma Control Test), respiratory values (using FEV1 measured by spirometer), and illness expectations, using the previously validated “Illness Expectation Test”, which assesses both explicit and implicit expectations. The predictive values of illness expectations on asthma symptoms and respiratory parameters were measured using latent growth modeling and linear regressions. *Results:* Longitudinal data analysis suggests a strong predictive value of explicit expectations on self-reported asthma symptoms ($\beta=-0.50$, $se=0.21$, $p=0.01$). Implicit expectations showed a similar pattern, with a trend towards significance ($\beta=-0.014$, $se=0.008$, $p=0.09$). Furthermore, expectations of improvement or worsening of symptoms over time strongly predicted changes in respiratory values ($\beta=0.51$, $se=0.11$, $p=0.001$). *Conclusions:* These results confirm the relevance of illness expectations in asthma progression and suggest a high potential for mind/body interventions.



Do early-life adversities predict anxiety and depressive symptoms in epileptic patients? A preliminary study

*Martina De Angelis*¹, *Claudio Liguori*², *Nicola Biagio Mercuri*², *Mariana Fernandes*², *Cristina Trentini*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome , Rome, Italy

² Department of Systems Medicine, Tor Vergata University of Rome, Italy

Abstract

Introduction: There is clear evidence that anxiety and depressive disorders are more prevalent among epileptic patients (EPs) as compared with the general population. While numerous preclinical models have shown that early and prolonged exposure to stressful experiences increases seizure susceptibility and comorbid anxiety/depression-like behaviors in animals, the impact of early-life adversities on depression and anxiety has been hardly explored in human epilepsy. *Methods:* In this study, 60 EPs and 60 healthy controls (HCs) completed standardized surveys, including: the Generalized Anxiety Disorder 7-item (GAD-7), the Beck Depression Inventory-II (BDI-II), the Adverse Childhood Experiences (ACE), the Perceived Stress Scale (PSS-10), and the Difficulties in Emotion Regulation Scale (DERS). Two hierarchical multiple linear regressions were run for both EPs and HCs, to determine the role of the factors that were significant at a 0.01 significance level in Pearson correlations in predicting anxiety and depressive symptoms, respectively. *Results:* The analyses showed that anxiety symptoms were uniquely predicted by perceived stress, in both EPs and HCs. Depressive symptoms were instead uniquely predicted by adverse childhood experiences, only in EPs. *Discussion:* These results showed that, in EPs, perceived stress and early-life adversities play a distinct role in predicting anxiety and depressive symptoms, respectively. The results of this study – albeit preliminary – may have clinical implications, guiding the psychological intervention programs that could be designed, along with medical treatments, to mitigate the psychopathological (particularly, depressive) sequelae of early adverse experiences in EPs.



Association of traumatic experiences and related PTSD symptoms with perceived pain and pain catastrophizing levels in women with endometriosis

Sara Carletto¹, Ilaria Quaranta¹, Lorena Giovinazzo², Giovanna Cacciato², Laura Mosino³, Chiara Benedetto³, Stefano Cosma³

¹ Department of Clinical and Biological Sciences, University of Turin, Italy

² Clinical Psychology Unit, University Hospital "Città della Salute e della Scienza", Turin, Italy

³ Obstetrics and Gynecology 1U, Department of Surgical Sciences, Sant' Anna Hospital, University of Turin, Turin, Italy.

Abstract

Endometriosis is a gynecological disease that affects approximately 6–10% of all women in reproductive age. The chronic nature of the condition and the clinically damaging implications have a negative impact on women's quality of life, impairing working and social level, sexuality and mental health. Endometriosis is an extremely variable condition in terms of clinical heterogeneity and severity, recognizing chronic pain as a common denominator (80% of patients). Recent studies show that "pain catastrophizing" is a critical factor in women with endometriosis and it is associated with higher levels of pain and symptoms related to Post Traumatic Stress Disorder (PTSD). Moreover, the correlation between chronic pain and traumatic and/or stressful life experiences has been highlighted, confirming their role in the increased risk of developing both mental and physical pathologies, including endometriosis. The study aims at investigating the association between perceived pain and pain catastrophizing levels and traumatic and/or stressful experiences, and the subsequent development of PTSD symptoms in a sample of women affected by endometriosis, enrolled at the Sant'Anna Gynecological University Hospital of A.O.U. "Città della Salute e della Scienza di Torino", Italy. The clinical assessment is performed during routine gynecological visits through self-administered questionnaires, and involves the collection of measures of anxiety, depression, stress, PTSD symptoms, levels of perceived and catastrophizing pain and the presence of stressful and/ or traumatic events, as well as assessing the quality of life of women with endometriosis. The preliminary results regarding the association between perceived pain and pain catastrophizing levels and the exposure to previous traumatic experiences and associated symptoms of PTSD, anxiety and depression will be presented during the symposium. Investigating the influence of stressful life experiences on the subjective experience of pain could further our knowledge on the role of



psychosocial factors in endometriosis, in order also to provide insight into psychological interventions that may be effective in improving the quality of life of women affected by this disease.



Psychological factors in cardiovascular disease: a clinical experience in a cardiac-surgery unit

Valeria Carola ¹, Cristina Vincenzo ¹, Chiara Morale ¹, Valentina Cecchi ¹, Giovanni Melina ², Giampaolo Nicolais ¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

² Cardiac Surgery Unit, Ospedale Sant'Andrea, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: In cardiovascular disease, the impact of psychological components and stress factors on the onset and progression of this disease is widely recognized. In particular, psychological and personality characteristics (e.g., history of psychopathology) and stress factors are believed to be modulating factors of this organic pathology. In the event that, in the presence of this pathology, it is necessary to undergo cardiac surgery, psychological factors such as anxiety, depression, and perceived stress may influence the healing process. This study aims to evaluate how alterations in psychological parameters can be found in patients with cardiovascular disease who require cardiac surgery. In addition, coping style and exposure to adverse stressful events were assessed in the same population. *Methods:* In this study conducted in a cardiac surgery unit, patients had an initial clinical interview and filled out some questionnaires at the preoperative stage to assess psychological conditions before surgery. In a second meeting, 2 months after surgery, these conditions were re-evaluated and other factors such as life stress exposure, attachment style, presence of post-traumatic growth, or post-traumatic stress were analyzed. *Results:* Data analysis showed high levels of perceived stress and average levels of anxiety/depression in the preoperative phase. Notably the passive/negative coping strategy was the most represented in this population. Finally, the clinical interviews showed that patients had often experienced major stressful events in the year prior to surgery. *Discussion:* These preliminary data show how the psychological component, in particular exposure to recent stressful events, contributes to the modulation of cardiovascular disease. Moreover, some of the evidence obtained from the clinical interviews report how much the psychological experience related to surgery may impact the patient and shape her/his coping attitude. Overall, the results of our study can contribute to the design of a clinical psychological support protocol within a cardiac surgical pathway.



**DIMENSIONAL MODELS OF PSYCHOPATHOLOGY IN ADOLESCENCE.
PERSONALITY, MENTALIZATION, AND INTERNALIZING AND EXTERNALIZING
FEATURES**

Proposer

*Ilaria Maria Antonietta Benzi*¹

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

Discussant

*Silvia Salcuni*¹

¹ Department of Developmental Psychology and Socialisation, University of Padua, Padua, Italy

Abstract

Diagnostic taxonomies have been recently questioned to overcome the limitations of categorical approaches (i.e., symptoms count), such as variability in comorbidity, co-occurrence, and presentation of various disorders. Thus, dimensional models (i.e., continuum of severity) have been integrated into the major psychiatric manuals. On the one hand, dimensional approaches allow a multifaceted understanding of psychopathology; on the other, they offer the possibility of reflecting on sub-threshold clinical presentations and exploring their associations with significant variables. Against this backdrop, adolescence is especially challenging for developing sensitive and reliable diagnostic frameworks: indeed, the physical, neural, and psychological changes occurring during this phase further complicate our ability to recognize both clinically relevant manifestations and prodromes of psychopathology. Thus, in this symposium, we will discuss the applications of dimensional models of psychopathology on adolescent populations. The first talk (“Internalizing and Externalizing Problems in Adolescence: The Role of Borderline and Narcissistic Personality Traits”) will tackle the concurrent contribution of borderline and narcissistic personality traits to the presence and longitudinal maintenance of internalizing and externalizing problems. The second talk (“Associations of Mentalization and Epistemic Trust with Internalizing and Externalizing Problems in Adolescence: a gender-sensitive structural equation modeling approach”) will account for gender-specific associations between mentalizing, epistemic trust, and behavioral problems, suggesting the utility of adopting transdiagnostic factors to understand



psychopathological risk. The third talk (“Unpacking p-factor. Associations between borderline and narcissistic traits and general psychopathology in female and male adolescents”) will expand the discussion on the presence of a general factor for psychopathology in adolescence (p-factor) and explore its associations with borderline personality features and narcissistic traits. Finally, the fourth talk (“Exploring the General Psychopathology Factor in Adolescent Personality Disorders: Implications for Assessment and Treatment”) will explore the presence of the p-factor in personality disorders, highlighting the complexities of assessing emerging personality pathology in adolescence.



Associations of Mentalization and Epistemic Trust with Internalizing and Externalizing Problems in Adolescence: a gender-sensitive structural equation modeling approach

*Francesca Locati*¹, *Ilaria Maria Antonietta Benzi*², *Alberto Milesi*³, *Chloe Campbell*⁴, *Nicholas Midgley*⁴, *Peter Fonagy*⁴, *Laura Parolin*³

¹ Department of Humanities, University of Pavia, Pavia, Italy

² Department of Brain and Behavioral Sciences, University of Pavia, Italy

³ Department of Psychology, University of Milano-Bicocca, Italy

⁴ Research Department of Clinical, Educational and Health Psychology, UCL London, and the Anna Freud Centre

Abstract

Mentalization, operationalized as reflective functioning (RF), allows individuals to interpret actions as caused by intentional mental states. Previous research highlighted the gender-specific associations between adolescents' internalizing and externalizing difficulties and mentalizing impairments. In addition, research suggested that mentalizing facilitates the creation of epistemic trust (ET) to evaluate social information as accurate, reliable, and relevant. However, few investigations explored the concurrent associations between RF, ET, and adolescent psychopathology. A sample of 447 (masked for peer review) cisgender adolescents (57% assigned females at birth; age range 12 to 19 years old; Mage = 15.54, SD = 1.98) self-reported RF (RFQY-5), ET towards mother, father, and peers (IPPA) and mental health problems (YSR-112). Gender-specific structural equation modeling explored the associations between RF, ET, and internalizing/externalizing problems. Results suggested an excellent fit for the theoretical model and revealed gender-related associations. In females, findings suggest that ET mediates the association between RF and psychopathology, with indirect associations from RF through ET to lower internalizing and externalizing problems. However, in males, RF and ET display independent associations with psychopathology. Overall, findings suggest that ET might be a transdiagnostic factor playing different roles associated with adolescent psychopathology. Indeed, links between RF and ET might help to explore gender differences in mental health problems in this developmental phase.



Internalizing and Externalizing Problems in Adolescence: The Role of Borderline and Narcissistic Personality Traits

Rossella Di Pierro ¹, Erika Fanti ¹

¹ Department of Psychology, University of Milano-Bicocca, Milan, Italy

Abstract

Introduction: Adolescence is a sensitive period for developing internalizing and externalizing problems, and extensive research has shown that borderline personality traits may significantly impact both. Conversely, the relationship between narcissistic personality traits and internalizing and externalizing problems in adolescence has been understudied. The present study examines the current contribution of borderline and narcissistic personality traits to the presence and maintenance of internalizing and externalizing problems in adolescence. *Methods:* We conducted a two-wave study on a sample of adolescents (N baseline = 705; M age = 15.84, SD = 1.31; N follow-up = 186). They were asked to complete self-reported measures of borderline and narcissistic traits at the baseline and internalizing and externalizing problems at the baseline and the follow-up. Regression analyses were performed to examine the associations of borderline and narcissistic personality traits with the presence and maintenance of internalizing and externalizing problems. To account for gender-related patterns of associations and predictions, regression models were conducted separately on males and females. *Results:* Borderline personality traits were significantly related to both the presence and maintenance of internalizing and externalizing problems in both males and females. Moreover, grandiose narcissistic traits showed to be predictive of externalizing problems after 12 months in males only. *Discussion:* The study provides evidence of a significant but differential contribution of borderline and narcissistic personality traits to the presence of co-occurring internalizing and externalizing problems in adolescents and their maintenance over time.



Unpacking p-factor. Maladaptive personality traits and general psychopathology in adolescence

*Ilaria Maria Antonietta Benzi*¹, *Karin Ensink*²

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

² Department of Psychology, Laval University, Quebec, QC, Canada

Abstract

Introduction: The simultaneous maturation of physical, psychological, and neural dimensions makes adolescents vulnerable to the onset of frank psychopathology or to sub-threshold conditions that anticipate the exacerbation of later psychopathology. The literature has highlighted the importance of identifying indicators of psychopathology in adolescence to structure early interventions. In this scenario, research suggested that a latent factor of psychopathology (p-factor) might account for the variability of psychopathology presentations that traditional models do not capture. In addition, recent models suggested considering the association of maladaptive personality with general psychopathology. However, the literature on the association between maladaptive personality and the p-factor is still scarce. *Methods:* Two cross-sectional data collections were included. In Study 1, 974 cisgender adolescents (63% assigned females at birth; age range: 13 - 19; Mage = 16.68, SD = 1.40) reported on internalizing and externalizing problems (YSR) to test via structural equation models (SEM), different theoretical models for general adolescent psychopathology (p-factor). In Study 2, 725 cisgender adolescents (64.5% assigned females at birth; age range: 13-19; Mage = 16.22, SD = 1.32) reported internalizing and externalizing problems (YSR), borderline personality traits (BPFSC-11), and narcissistic personality traits (PNI), to explore, via SEM, the associations between borderline and narcissistic traits with psychopathology and to account for gender differences in these associations. *Results:* In Study 1, data showed that the bi-factor model was useful compared to a correlated-factors-only model, enhancing the understanding of some aspects of externalization and internalization. In Study 2, only borderline traits and narcissistic grandiosity were associated with general psychopathology. However, no associations of maladaptive personality with p emerged in males. *Conclusions:* Our study adds to the literature on the p-factor, suggesting that accounting for the general liability to psychopathology is useful in adolescence. Moreover, our findings highlight the importance of examining the unique associations between maladaptive personality traits and externalization and internalization. Implications for clinical assessment and intervention are discussed.



**Exploring the General Psychopathology Factor in Adolescent Personality Disorders:
Implications for Assessment and Treatment**

*Riccardo Pecora*¹

¹ Department of Human Science, LUMSA University of Rome, Rome, Italy

Abstract

Introduction: Adolescent personality disorders (PDs) are associated with high rates of comorbidity, substance misuse, impairment in self and interpersonal functioning, and difficulties in romantic relationships, peer relations, education, and vocational goals. PDs tend to be moderately stable, associated with high distress, and hard to recover over time. The psychopathology p-factor, a general latent dimension derived from a wide range of items measuring adult psychiatric symptoms, has been proposed as a possible framework for understanding psychopathology across multiple domains. *Methods:* Approximately 350 adolescents were assessed using the Inventory of Personality Organization for Adolescents (IPOP-A), a semi-structured interview based on the Kernberg model for the assessment of personality disorders. A bifactorial model and a second-order model were tested to explore the presence of a general p-factor in adolescent personality disorders. *Results:* The results of the study were conflicting, with the bifactorial model indicating a general p-factor, while the second-order model did not support the presence of a general p-factor. However, the study provided evidence for the usefulness of the IPOP-A in assessing adolescent personality disorders and highlighted the complexity of assessing personality disorders in this population. *Conclusions:* The findings of this study suggest that the general p-factor may be a promising dimension to explore in the assessment of adolescent functioning. However, further research is needed to confirm the presence of a general p-factor in adolescent personality disorders.



AN UPDATE ON PREVENTION AND CLINICAL INTERVENTIONS FOR NON-COMMUNICABLE DISEASES: THE PROMINENCE OF MIND-BODY CONNECTIONS

Proposers

Mauro Cozzolino¹, Chiara Fioretti¹

¹ Department of Human, Philosophical and Educational Sciences, University of Salerno, Italy

Discussant

Carlo Lai¹

¹ Department of Dynamic and Clinical Psychology, Sapienza University of Rome, Rome, Italy

Abstract

The symposium aims to present an update on incoming studies on prevention and clinical interventions within the support of chronic diseases. The care of chronic disease is facing new challenges due to the need of a personalized approach the pivotal role of prevention and the multidisciplinary care (Bode & Dong, 2017): the chronicity of the disease and the growing role of prevention and tailored treatments imply the need of caring for the patient from a multilevel perspective. Clinical psychological studies can bring evidence on prevention and on clinical intervention aiming to personalized treatments and to include an integrative body-mind view in the care management. Four groups of research will take part to the symposium presenting their studies. A first group from Naples Federico II University will present a study on psychological issues related to prevention in Oncology, with a specific focus on psychosomatic issues related to the decision to undergo preventive investigation. Catholic University of Milan will present data a study proposing a longitudinal evaluation of a biopsychosocial model predicting BMI and disordered eating among young adults, in the light of a body-mind approach to emerging adults' dysfunctional eating habits. Foggia University will discuss a study on psychological/psychotherapeutic intervention on neuroticisms aspects in patients suffering from various somatic and chronic diseases. The group from the University of Salerno and Foggia will present the results of some studies showing how a specific mind-body intervention can promote general well-being. The application of BWM-T can have positive effects by reducing levels of perceived stress, anxiety, global discomfort and negative affect, as well as improving the positive one in young adults. The invited discussant will promote a discussion on



presented studies by comparing and analyzing different approaches on the support of decision-making, prevention decisions and clinical intervention with people suffering from chronic diseases.



A longitudinal evaluation of a biopsychosocial model predicting BMI and disordered eating among young adults

Giada Pietrabissa¹, Gianluca Castelnuovo¹

¹ Department of Psychology, Catholic University of Milan, Milan, Italy

Abstract

Objective: This study examined the utility of a biopsychosocial model to explain both higher body mass index (BMI) and disordered eating. The study was designed to examine the predictors of higher BMI and a number of measures of disordered eating (dietary restraint, drive for muscularity, drive for thinness, binge eating, and compensatory behaviour). *Methods:* Young adults (N = 838) recruited from seven countries, grouped into four regions (Europe, North American countries, Australia, Japan), completed an online survey, with each completion being 12 months apart. The survey included assessments of BMI and disordered eating, and a range of biological, psychological and sociocultural factors expected to predict both outcomes. *Results:* Results revealed unique patterns of association between predictors and BMI as well as different measures of disordered eating in the four geographical regions. *Conclusions:* The findings identify the specific nature of biopsychosocial factors that predict both higher BMI and different aspects of disordered eating. They also demonstrate that caution needs to be exercised in generalising findings from one country to other countries.



The prominence of mind-body connections in clinical interventions: The Brain Wave Modulation Technique effects

Mauro Cozzolino¹, Chiara Fioretti¹, Francesca Tessitore¹, Giovanna Celia²

¹ Department of Human, Philosophical and Educational Sciences, University of Salerno, Salerno, Italy

² Department of Humanistic Studies, University of Foggia, Foggia, Italy

Abstract

Introduction: Mind–body interventions are based on several practices designed to facilitate the mind positive impact on the body. This definition includes new practices developed over the past few decades such as eye movement desensitization reprocessing, mind–body transformation therapy and brain wave modulation. This presentation aims to introduce and describe a specific intervention focused on mind–body connections and defined Brain Wave Modulation Technique (BWM-T) with a broader description of the clinical intervention and preliminary data on its effects. *Methods and results:* The technique involves an easy-to-implement 4-step finger movement procedure, and spontaneously helps our brain to release slower alpha waves. The BWM presents certain advantages over traditional mind–body interventions. First, it is very easy to learn and can be performed in minutes. It is a sustainable and reproducible intervention that patients might prefer over other methods that are more time-consuming and difficult to learn. Second, neither special premises nor specific equipment is required, so the BWM can be performed virtually everywhere. Third, the intervention can be administered individually as well as to a large number of subjects at the same time in a single session, and it takes just one psychologist, which simplifies scheduling. Fourth, the BWM-T might be particularly suited for administration in digital environment because, since it replicates these natural mind-body automatic processes, face-to-face human interaction is not so important and key as it is in traditional interventions. Moreover, once the subjects have learned the technique, they can perform it autonomously. A growing number of studies showed the positive effects that both face-to-face and online BWM-T application have in reducing the perceived level of stress as compared to other kind of session on stress management in young adults. Other positive results have been noted in improving general wellbeing and positive affect by reducing the levels of anxiety, global distress, and negative affect. *Discussion:* Authors discuss studies and procedures on BWM-T technique underlining its effects as well as the clinical implications, with a specific focus on the importance to empower clinical practice with a mind-body connection approach.



Psychosomatic trajectories in decision-making to participate in cancer screening: implications for clinical psychological intervention

Daniela Lemmo¹, Maria Luisa Martino¹, Marcella Bianchi¹, Daniela Caso¹

¹ Department of Humanistic Studies, University of Naples Federico II, Naples, Italy

Abstract

Decisions regarding cancer screening participation have become increasingly complex and driven by numerous psychosocial factors. In an integrated mind-body conception, the literature increasingly suggests turning our gaze towards the direct differential impact, i.e. physiological, and indirect, i.e. the outcome of health behaviors, of specific individual traits and emotional aspects that can influence on preventative choices. The construct of body awareness seems to play an important role in self-care. Likewise, health anxiety and emotional regulation style influence behaviors of health, use of health services, and decision to engage in screening behaviors. This contribution aims to analyze the associations between the aforementioned clinical variables and some psychosocial variables related to the relationship with colorectal screenings, i.e. attitude affective and cognitive towards them, the intention, the perception of the control of the behavior of screening. A convenience sample of 235 subjects aged 50 to 74 participated in one online survey by completing a questionnaire created ad hoc. Cluster analyzes were conducted using the Spss software through multiple correspondence analysis. The results highlight different profiles that group individual traits and psychosomatic functioning aspects that outline trajectories of participation in colorectal screening so as to be able to think of stepped-care interventions oriented to the individual, to the group and to the wider target population.



Psychological-psychotherapeutic treatments of the neuroticism of patients suffering from somatic and chronic illnesses

*Salvatore Iuso*¹, *Annamaria Petito*²

¹ Department of Humanities, Humanities, Cultural Heritage and Education Sciences, University of Foggia, Foggia, Italy

² Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

Abstract

Introduction: This study investigated whether the Diagnostic Criteria for Psychosomatic Research (DCPR) were able to predict psychosocial functioning in addition to somatisation in patients undergoing psychological consultation in hospital wards at the Policlinico Riuniti di Foggia. Personalised medicine should consider the interplay between genotype and phenotype in reducing levels of clinical psychological distress, highlighting how psychotherapeutic processes should improve patients' quality of life. People with medically unexplained physical symptoms are often referred to psychotherapy, which has been shown to be modestly effective in reducing symptom severity. *Methods:* A consecutive sample of 208 patients was recruited and evaluated for sociodemographic and clinical data, psychosomatic syndromes (structured DCPR interview) and somatisation psychosomatic syndromes (DCPR structured interview) and somatisation (SCL-90-R SOM scale and multisomatiform disorder, MSD). Of particular relevance was the study of the sub-sample consisting of 41 gynaecological cancer patients who completed self-report questionnaires, including the NEO Five-Factor Inventory, the Depression-Depression (D/D) dimension of the Mood Profile and the Perceived Stress Scale (PSS). *Results:* 51 patients (25%) had positive criteria for DCPR, 176 (85%) had any DCPR syndrome and 105 (51%) had multiple DCPR syndromes. The one-way ANOVA test, across the 5-HTTLPR genotype groups, showed significant effects of the short variants on neuroticism ($p=0.009$) and of the long variant on agreeableness ($p=0.022$), as well as a tendency to a statistical significance of the 1/1 variant on consciousness ($p=0.074$). *Discussion:* In every somatic disease we can find a psychological element, just as it is not uncommon in a mental illness to have numerous physical symptoms. The common characteristic of this group of patients is a strong focus on physical disorders, omitting or almost completely ignoring the psychological factors involved. Particular emphasis is placed on the goals and difficulties of psychotherapy. Furthermore, the



pluralistic perspective used to evaluate treatment outcomes proved to be very useful in improving the understanding of patient idiosyncrasies.



**PERINATAL AFFECTIVE DISORDERS: UNRAVELING THE COMPLEX INTERPLAY
OF PERSONALITY, PSYCHOPATHOLOGY, AND COUPLE'S FUNCTIONING**

Proposer

*Andrea Fontana*¹

¹ Department of Human Science, LUMSA University of Rome, Rome, Italy

Discussant

*Alessandra Santona*¹

¹ Department of Psychology, University of Milan-Bicocca, Milan, Italy

Abstract

Perinatal affective disorders pose a significant public health challenge, affecting expectant mothers, fathers, and their families. The intricate relationships among personality factors, psychopathology, and couple's functioning within the context of perinatal mental health warrant further investigation to enhance our understanding and inform intervention strategies. Therefore, this symposium aims to delve deeper into these complex interactions and their implications for perinatal mental health outcomes. The first presentation (Baldoni) explores the need to adopt a gender-based perspective in the assessment of perinatal affective disorders. Fathers, in fact, frequently present these disorders, but tend to manifest them differently from mothers. The second presentation (Terrone) investigates the protective roles of extraversion and dyadic consensus in the context of perinatal affective disorders. The findings highlight the need to consider dyadic adjustment and personality as protective factors for expectant mothers, potentially shielding them from the adverse psychological effects of stressors. The third presentation (Mangialavori) examines the impact of paternal psychopathology on maternal perinatal affective disorders, utilizing an APIM model. The results emphasize the importance of considering both partners' mental health and relational dynamics when addressing maternal perinatal affective disorders and suggest that these factors should be incorporated into clinical practice. The fourth presentation (Fontana) explores the influence of maternal perceived stress and alexithymia on dyadic consensus, perinatal maternal affective disorders, and antenatal attachment. The findings underscore the significance of addressing alexithymia, particularly the difficulties in identifying emotions, as a means to improve



maternal mental health and foster secure antenatal attachment. Collectively, these presentations outline the complex interplay among individual, relational, and contextual factors in perinatal mental health. By examining the roles of personality, psychopathology, and couple's functioning in perinatal affective disorders, this symposium contributes to a more comprehensive understanding of these disorders and their associated risk factors. The findings can guide the development of targeted interventions that take into account the intricate interactions among these factors.



Perinatal affective disorders: towards a gender-based assessment

Franco Baldoni¹, Michele Giannotti², Giulia Casu¹, Francesca Agostini¹

¹ Department of Psychology, University of Bologna, Bologna, Italy

² Department of Psychology and Cognitive Sciences, University of Trento, Trento, Italy

Abstract

Perinatal affective disorders, such as Perinatal Depression, are very common, but for the screening and clinical assessment of these complex disorders it is necessary to use specific tools that consider gender differences and take into account other aspects, such as anxiety symptoms, illness behavior, irritability, behavioral acting outs like the anger attacks, addiction, and the quality of the couple relationship. In fact, the most common and usual screening tools in this field are developed considering female over male signs and symptoms. Only in recent years, the growing concern on paternal mental health during the perinatal period have pushed some researchers to develop different and specific screening and assessment tools for fathers, such as the Perinatal Assessment of Paternal Affectivity (PAPA). In a recent cross-sectional study (Baldoni et al. 2022) with a 3-month test-retest involving 385 Italian fathers, the PAPA showed adequate reliability and internal consistency as well as acceptable test-retest indices. A single factor common to the male disorder was evidenced at confirmatory factor analysis. Concurrent validity was also confirmed by significant correlations between PAPA total score and standardized test scores. Italian validation data provide initial evidence of validity and reliability of the PAPA as a simple screening tool to detect affective disorders in fathers during the perinatal period. The Perinatal Assessment of Maternal Affectivity (PAMA) is a modified version of the PAPA specifically developed for the mother: the items and the scores are the same, with only a few differences in the formulation of some questions, as the aim of the PAMA is the global assessment of the maternal affectivity during the perinatal period. The psychometric properties of the PAMA were examined also. A study (Baldoni et al. 2023), based on 225 mothers and their partners, used a cross-sectional design with a single assessment at the third trimester of pregnancy. Results confirmed for the PAMA acceptable reliability and internal consistency. The fit of the one-factor model, confirmed for the PAPA, was not satisfactory for the PAMA. The findings suggest the usefulness of developing gender sensitive screening tools for the detection of perinatal affective disorders.



The Protective Role of Extraversion and Dyadic Consensus on Fear of COVID-19 in Expectant Mothers: A Moderated Mediation Approach

Grazia Terrone¹, Valeria Trincia², Giulia Lisi², Giuseppe Ducci²

¹ Department of History, Cultural Heritage, Education and Society, Tor Vergata University of Rome, Rome, Italy

² Department of Mental Health, ASL Roma 1, Rome, Italy

Abstract

Introduction: Perinatal affective disorders are a significant public health concern, affecting expectant mothers and their families. The COVID-19 pandemic has exacerbated fears and anxieties, potentially influencing perinatal mental health outcomes. This study explores the protective role of extraversion and dyadic consensus in moderating the impact of perinatal affective disorders on fear of COVID-19 among expectant mothers. *Methods:* A sample of 241 expectant mothers in their third trimester of pregnancy were screened for perinatal affective disorders, fear of COVID-19, personality features, and dyadic adjustment with their partners. Data were collected using self-report questionnaires, including measures of personality, dyadic consensus, and fear of COVID-19. Zero-order correlations and a moderated mediation analysis were performed to explore the relationships among these variables. *Results:* Our findings indicated that dyadic consensus moderated the protective and indirect effect of extraversion on fear of COVID-19, with perinatal affective disorders acting as the mediator. Specifically, higher levels of extraversion and dyadic consensus were associated with lower levels of perinatal affective disorders and reduced fear of COVID-19. The interaction between extraversion and dyadic consensus significantly contributed to the prediction of fear of COVID-19, highlighting the importance of considering both factors in the context of perinatal mental health. *Conclusions:* The results of this study underscore the importance of considering dyadic adjustment and personality as protective factors against fear of COVID-19 in expectant mothers with perinatal affective disorders. These findings can inform clinical interventions aimed at promoting maternal mental health during the COVID-19 pandemic, as well as contribute to a better understanding of the factors that may buffer expectant mothers from the negative psychological impacts of the pandemic.



The Role of Paternal Psychopathology in Maternal Perinatal Affective Disorders: An Actor-Partner Interdependence Model Analysis

Sonia Mangialavori¹, Valeria Trincia², Giulia Lisi², Giuseppe Ducci²

¹ Department of Pathophysiology and Transplantation, University of Milan, Milan, Italy

² Department of Mental Health, ASL Roma 1, Rome, Italy

Abstract

Introduction: Perinatal affective disorders pose a substantial public health challenge, impacting expectant mothers, fathers, and their families. While most research has centered on maternal factors, the potential effects of paternal psychopathology have been relatively unexplored. This study employs an Actor-Partner Interdependence Model (APIM) approach to examine the impact of paternal psychopathology on maternal perinatal affective disorders and the protective role of dyadic adjustment. *Methods:* We assessed 130 primiparous couples in their third trimester of pregnancy using self-reports on psychopathological features, dyadic adjustment, and perinatal affective disorders. Given the mutual determination of dyadic adjustment by both partners, a dyadic plan of analysis was incorporated. The APIM was used to investigate the relationships between paternal psychopathology, maternal perinatal affective disorders, and the moderating effect of dyadic adjustment. *Results:* Our analysis revealed a significant relationship between paternal psychopathology and maternal perinatal affective disorders. Notably, dyadic adjustment demonstrated a protective function, mitigating the adverse effects of paternal psychopathology on maternal perinatal affective disorders. These results emphasize the importance of considering both partners' mental health and relational dynamics when addressing maternal perinatal affective disorders. *Conclusions:* Our findings underscore the importance of considering dynamics within the couple in the development of perinatal affective disorders and suggest that clinical practice should take these factors into account. This study emphasizes the complexity of pregnancy, during which both individual and relational factors contribute to the development of maternal perinatal affective disorders. Future research should continue to investigate the intricate interplay between paternal psychopathology, maternal mental health, and dyadic adjustment, as well as their implications for intervention and prevention strategies.



The Impact of Maternal Perceived Stress and Alexithymia on Dyadic Consensus, Perinatal Maternal Affective Disorders, and Antenatal Attachment: A Path Analysis

Andrea Fontana¹, Marco Cacioppo¹, Lucrezia Trani¹, Eleonora Topino¹

¹ Department of Human Science, LUMSA University of Rome, Rome, Italy

Abstract

Introduction: Maternal perinatal affective disorders present significant challenges to expectant mothers and their families, with potential long-term consequences. Maternal perceived stress and alexithymia may contribute to these disorders and have implications for dyadic consensus and maternal antenatal attachment. This study employs a path analysis to explore the relationships between maternal perceived stress, alexithymia, dyadic consensus, perinatal maternal affective disorders, and antenatal attachment. *Methods:* A sample of 260 expectant mothers was assessed using self-reports on perceived stress, alexithymia, dyadic consensus, perinatal maternal affective disorders, and antenatal attachment. The path analysis was conducted to examine the direct and indirect relationships among these variables and to identify potential predictors of dyadic consensus, perinatal maternal affective disorders, and antenatal attachment. *Results:* The findings indicated that difficulties in identifying emotions, a key component of alexithymia, predicted lower dyadic consensus, which in turn predicted higher perinatal maternal affective disorders and lower antenatal attachment. The results highlight the importance of addressing alexithymia in understanding and managing perinatal maternal affective disorders and their influence on antenatal attachment. *Conclusions:* This study emphasizes the significance of considering maternal alexithymia, particularly difficulties in identifying emotions, in the assessment and intervention of perinatal maternal affective disorders and their impact on antenatal attachment. The findings suggest that improving emotional identification skills could positively affect dyadic consensus, perinatal maternal affective disorders, and antenatal attachment. Clinicians should be aware of the potential interplay between these factors when addressing maternal mental health during the perinatal period.



**PROMOTING PSYCHOLOGICAL WELL-BEING IN UNIVERSITY STUDENTS: FROM
CRITICAL ISSUES TO INNOVATIVE SOLUTIONS**

Proposer

*Alessandro Conyoumdjian*¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Discussant

*Claudio Gentili*¹

¹ Department of General Psychology, University of Padua, Padua, Italy

Abstract

Mental health problems are common among young people, and many university students experience high levels of psychological distress, with a high percentage of comorbidities. Notably, approximately 20%-30% of this population meet the criteria for at least one 12-month disorder and, according to a recent meta-analysis, medical students are at high risk of depression and suicidal ideation. Mental health problems affect several areas of students' life, leading to engaging in deviant behaviors, significant impairment in individual, social, and academic functioning, and physical health complications. The picture outlined is even worse, considering that students, especially males, are reluctant to ask for psychological help. Different obstacles hinder help-seeking behavior, such as the fear of being stigmatized, poor mental health literacy, low awareness, individual preferences in dealing with this type of problem, high costs of traditional interventions, long waiting lists, or the lack of sustainable community services. To deal with these problems, the most recent WHO guidelines (Comprehensive Mental Health Action Plan 2013–2030) highlighted the need to develop more effective and sustainable prevention programs among young people, decreasing the treatment gap, reducing the time between symptoms onset and treatment, and improving the quality of interventions according to the principles of evidence-based practice. Moreover, an integrated approach to mental health was suggested, considering the importance of fostering individuals' adaptive skills, strengths, and resources besides preventing and reducing psychopathological symptoms. In line with this background, the symposium aims to present studies and interventions related to preventing mental disorders, promoting psychological well-being, and supporting



academic achievement in the context of Italian universities. In particular, the symposium will focus on the main critical issues and on the identification of innovative approaches that guarantee sustainable, scalable and efficacy interventions.



A short positive psychology intervention for promoting positive mental health in university students

Chiara Ruini¹, Sabrina Castaldo², Beatrice Aquilini², Alessandro Davoli², Sare Sarrionandia³

¹ Department of Life Quality Studies, University of Bologna, Rimini, Italy

² Department of Psychology, University of Bologna, Cesena, Italy

³ Faculty of Psychology and Education, University of Deusto, Bilboa Spain

Abstract

Introduction: The COVID-19 pandemic had a major impact on the mental health of university students, and the importance of introducing initiatives to support for the well-being of this population has emerged a national and international level. In this study we tested a short group intervention to promote positive mental health in students from the University of Bologna. The intervention was carried out in collaboration with the University of Deusto in Spain with the aim of replicating the Spanish program and testing the effectiveness of its short version, particularly for those students who reported a negative impact of Covid in their quality of life. *Methods:* The protocol consisted of 4 -90mins group sessions and it was based on Keyes' positive mental health model, composed of subjective, psychological and social well-being. The students were recruited among those attending the course of positive psychology and clinical psychology and they were assessed before and after the intervention with these questionnaires: Satisfaction with Life, Psychological well-being, Social well-being, and General Health Questionnaire. *Results:* 57 students (82.5% F) voluntarily participated to the intervention and they reported a significant increase in positive mental health at post-test, while no statistically significant changes emerged in the dimensions of social well-being and psychological distress. *Conclusions:* The results documented that a brief psychoeducational intervention yielded beneficial effects in promoting positive mental health and well-being of students. For its characteristics, this program is feasible and largely scalable in university settings.



Distress and Psychological wellbeing in a Students' population: The SMS-ME Project on MEntal-Health

*Carmela Mento*¹, *Caterina La Cascia*², *Nicole Bonaccorso*³, *Claudio Costantino*³, *Francesco Vitale*³, *Maria Salvina Signorelli*⁴, *Maria Rosaria Anna Muscatello*¹, *Daniele La Barbera*², *Laura Ferraro*²

¹ Department of Biomedical and Dental Sciences, Morphofunctional Imaging, University of Messina, Messina, Italy

² Department of Biomedicine, Neuroscience and Advanced Diagnostic, University of Palermo, Palermo, Italy

³ Department of Health Promotion, Maternal and Child Care "G. D'Alessandro", University of Palermo, Palermo, Italy

⁴ Department of Clinical and Experimental Medicine, University of Catania, Catania, Italy

Abstract

Introduction: The literature suggests that University Students are at high risk for mental distress. In the Italian contest, the pandemic may have constituted an additional risk factor, affecting well-being and performance in learning. This cross-sectional survey assessed stress, anxiety, depression, eating disorders and suicidal ideation in a sample of Sicilian medical students and their preferred initiatives to monitor them. *Methods:* The psychological protocol comprises DASS-21, EAT -26 and ad hoc questions with an online interview template. We run multivariate regressions with SPSS 28 and R 3.6.1. by symptoms due to crucial predictors. *Results:* Among 1,600 responders, the variables of stress, anxiety and depression were higher than expected in the general population, and 14% had at least a moderate risk for eating disorders. In addition, 26% of respondents reported suicidal or negative thoughts related to a higher risk for eating disorders (AdjOR=1.56) and depression (AdjOR=3.05). The students perceiving a worse adjustment in their study during the pandemic had higher general distress (AdjOR=0.71). Participants suggested that University could enhance mentoring/psychological support and a psychological self-assessment monitoring App. *Discussion:* This study confirms the high risk for mental alterations and negative thoughts among students in Sicily, partly related to the pandemic. Therefore, constructing a self-assessment and informative App could be a feasible way to monitor their wellness.



The role of Academic Engagement in promoting psychological wellbeing and preventing drop-out: an intervention to sustain university students during their first year

Raffaella Passeggia¹, Giovanna Esposito¹, Anna Cannata², Maria Rosaria Di Natale², Maria Francesca Freda¹ &

¹ Department of Humanities, University of Naples Federico II, Naples, Italy

² SInAPSi Center, University of Naples Federico II, Naples, Italy

Abstract

Introduction: University students represent a group of notable interest which is drawing attention for clinical interventions, in light of the increasing of this population's psychological problems. Along to the provision of mental health services, it is important to develop interventions oriented at promoting university students' wellbeing and personal resources to foster their adjustment in the academic context. A crucial factor for university students' experience is the Academic Engagement (AE) which refers to the positive and proactive positioning that captures the quality of academic experience. AE may be conceived as a catalyst for positive processes that has both short-term and long-term effects on persistence, wellbeing, performance, and the drop-out risk. In this perspective, first year students may represent the eligible target for interventions aimed at promoting AE, as they live both a developmental (from adolescence to adulthood) and an educational transition (from school to university). *Aim:* Based on this theoretical premises and on previous research that demonstrated the role of AE in preventing psychological distress, we developed an intervention aimed at promoting students' AE during their first year at university, "Welcome, Freshmen!". *Methods:* The intervention consisted of four thematic group sessions, each focused on specific AE dimensions, as theorized by the SInAPSi Academic Engagement Model: university and academic project value; perception of capability to persist in the academic project; relationship with peers and teachers; integration of the academic project in the wide relational net and personal project. In order to assess the efficacy of the intervention, we performed a quasi-experimental research design, providing the intervention to two of the four degree courses of the Department of Agriculture of University of Naples Federico II, namely Mediterranean and Gastronomical Sciences and Food Technology. The other two degree courses, Forest and Ambiental Sciences and Oenology and Viticulture, received a single session as a control condition. Both the experimental (N = 92) and control (N = 77) groups filled in a set of questionnaires for measuring AE, intention to drop-out, and academic



performance. *Results and Conclusion:* We will discuss the methodology of the intervention, its implementation and preliminary results on its efficacy.



NoiBene: a guided self-help intervention to promote psychological well-being and reduce treatment-gap among Sapienza students

Micaela Di Consiglio¹, Carolina Papa¹, Marco Bassi de Toni¹, Barbara Barcaccia¹, Alessandro Conyoumdjian¹

¹ Department of Psychology, Sapienza University of Rome, Rome, Italy

Abstract

University students' mental health is an important issue that has received increasing attention in recent decades. Increasing evidence suggests that students experience high levels of psychological distress and meet the criteria for mental disorders. Despite that, the treatment gap is an important problem among university students, as many students who experience psychological suffering do not ask for help. To overcome this mental health crisis, NoiBene has been developed. NoiBene is a guided online self-help intervention that aims to enhance a range of transversal skills related to mental health and self-realization (i.e., emotional awareness, assertiveness), to reduce the main transdiagnostic factors (i.e., perfectionism, repetitive thinking, and avoidance), and to reduce the treatment gap. The present study aims to investigate the effectiveness of NoiBene and the factors associated with drop-out and help-seeking behavior. A total of 538 students (F = 86.8%; M = 13.2%) with a mean age of 24.36 years (SD = 4.48) were included in the study. Standardized questionnaires to measure symptomatology, personality traits, well-being, emotional awareness, assertiveness, and transdiagnostic factors were administered at pre-and post-intervention. Results suggested that NoiBene effectively improved students' well-being, emotional awareness, and assertiveness and reduced the transdiagnostic factors considered. In addition, concerning drop-out, it was found that it was related to a series of characteristics such as personality traits, symptomatology, and perceived needs. Finally, through psychodiagnostic and motivational interviews, help-seeking behavior was facilitated. However, the results showed that students with more severe and persistent symptoms were less likely to initiate psychological therapy than those with moderate symptoms. In conclusion, universities play a fundamental role in supporting students' mental health. In this context, NoiBene is an effective tool for supporting students' mental health, reducing risk factors associated with psychopathology, and promoting help-seeking behavior. Moreover, NoiBene overcomes the limitations of traditional counseling services as it can be applied across broad populations.



**THE MULTIPLE FACES OF GIFTEDNESS: ADVANCES, PERSPECTIVES, AND
CLINICAL IMPLICATIONS**

Proposer

*Maria Quintigliano*¹

¹ Department of Dynamic and Clinical Psychology, and Health Studies, Sapienza University of Rome, Rome, Italy

Discussant

*Loredana Lucarelli*¹

¹ Department of Pedagogy, Psychology, Philosophy, University of Cagliari, Cagliari, Italy

Abstract

A purely psychometric view conceives a 'gifted' subject as someone who shows a cognitive efficiency (assessed according to standardized measures) that rises above the mean (conventionally set at 100) by at least two standard deviations, reaching or exceeding the 97.7th percentile of the normal distribution. In a broader conception, with the term 'gifted', several authors refer to an individual that, when compared with peers, shows, or has the potential to show an exceptional level of performance in one or more of the following areas: general intellectual ability, specific scholastic aptitude, creative thinking, leadership and, finally, visual and performing arts. Notwithstanding, this condition is not necessarily associated with individual's better functioning. On the contrary, research, but mostly clinical evidence shows that in some cases it can also be a risk factor rather than a resource. In this vein, giftedness can best be conceptualized as a multifactorial construct, which finds in IQ only a partial expression. However, studies about giftedness are still very scarce, especially in Italy. To date, the international literature has not produced in-depth knowledge on the adaptive, family functioning and personality characteristics of subjects with high cognitive potential, reducing the assessment of the cognitive plus-dotation only to the IQ value. In this symposium we bring together four contributions that, from different perspectives, investigate giftedness in its complexity. Three of these studies investigate plusdotation during childhood, highlighting how it can be associated with other features of cognitive functioning, such as creativity (Farese et al.), but also with features of emotional-behavioral functioning, such as personality and attachment (Quintigliano



& Fortunato), and how, from the clinical point of view, it is important to approach it (Zanetti & Sparaciari); the fourth paper, on the other hand, investigates some dimensional aspects of the cognitive functioning profile over the life span (Toffalini, et al.). The results will be discussed giving an insight into the complexity of the condition of “giftedness”, which far from being solely a gift, needs much attention to express its actual potential, in balance with the individual’s overall well-being.



A dimensional approach to cognitive characteristics of giftedness across the lifespan

*Enrico Toffalini*¹, *Cesare Cornoldi*¹, *Erika Borella*¹, *Lina Pezzuti*²

¹ Department of General Psychology, University of Padua, Padua, Italy

² Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Giftedness is often associated with internal discrepancies within cognitive functioning, suggesting an additional element of "abnormality". At the same time, however, giftedness could be interpreted as simply the high end of the continuum of general intelligence (dimensional approach). When evaluating evidence, the representativeness of the samples must be considered: extensive heterogeneity is expected in clinical cases where giftedness is combined with neurodevelopmental disorders, which explain both the referral for evaluation and the peculiarities of the profile. However, considering giftedness as a separate feature in the general population, its characteristics could simply reflect what is expected to be observed in the high end of the global intelligence continuum, without any specificity.

Methods: A representative sample of 291 individuals with high cognitive potential ($IQ \geq 125$) across the lifespan was evaluated with the 15 subtests of the Wechsler scales. At the same time, their profiles were simulated using variance and covariance matrices from the standardization sample of the battery at different ages.

Results: For most of the lifespan, the observed mean functioning profile is heterogeneous, but such heterogeneity only reflects the sample identification criterion from a dimensional perspective. For example, higher scores are observed, on average, in areas more closely related to global intelligence, and lower scores in peripheral areas. In advanced age, there is homogenization of the profile and a tendency towards higher mean scores in the group factor indices, reflecting the dedifferentiation of intelligence areas observed in the elderly population.

Discussion: These results confirm a dimensional interpretation of giftedness, adding to a growing literature that suggests how, at least from a cognitive point of view, various neurodevelopmental conditions are better interpreted as continuous traits than as categories.



Gifted children: Personality and attachment patterns

Maria Quintigliano¹, Alessandro Fortunato¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Research about giftedness, although increasing, is still at an early stage, especially in Italy. Even if a potentiality, giftedness does not represent an actual achievement and needs stimulating input from the environment to express. In fact, gifted children may have several characteristics that expose them to specific risks (e.g., adjustment difficulties, behavioral, and emotional problems). Studying personality and attachment patterns in gifted children may be useful for understanding how each different pattern may lead to different developmental trajectories, profoundly influencing children's adjustment. To date, very few studies have explored these characteristics in gifted children. Then, the following study aims at: 1) exploring personality patterns in a group of gifted children; 2) investigate attachment models in these children. *Methods:* A group of 50 gifted children aged between 6 and 11 years old (IQ>130 measured through the WISC-IV) was recruited and evaluated by two clinicians involved in the study. They participated to two free play sessions at the end of which the clinician completes the Child Personality Assessment – Q Sort (CPAP-Q); then, they were administered the Friends and Family Interview (FFI) for the evaluation of attachment. Their parents were administered the Children Behavior Check-List (CBCL). *Results:* The following personality patterns were the most represented in this group: inhibited/self-critical (28%), psychological health (28%), borderline/impulsive (20%) and obsessive (20%). Regarding attachment patterns, about 55% had distancing attachment, 27% secure, 12% insecure preoccupied, and finally 6% disorganized. Moreover, significative correlations were found between CPAP-Q obsessive dimension and some cognitive indices measured by the WISC-IV. Finally, as expected, some CBCL indices related to externalizing problems were found to be significantly associated to the “borderline/impulsive” and “borderline/dysregulated” patterns of CPAP-Q. *Discussion:* This study highlights some of gifted children’s typical characteristics, such as the tendency to inhibition and self-criticism, and the prevalence of distancing attachment strategies. To know these aspects could be useful for helping gifted children when they get to clinical evaluation.



Strength and fragility in high potential profiles: Discussion about clinical cases

Maria Assunta Zanetti¹, Sara Sparaciani¹

¹ Department of Brain and Behavioral Sciences, University of Pavia, Pavia, Italy

Abstract

In clinical practice and in research in the field of neurodevelopment, giftedness is an issue increasingly discussed, as it affects 5-7% of the population, and involves professionals who work not only in the clinical and health fields, but also in school and education. To offer further food for thought, we address the issue through the clinical experience of the Laboratorio of Research and Development of Potential, Talent and Giftedness at the University of Pavia, known as LabTalento. The Laboratory works to identify and support children and young people with a high intellectual potential, promoting awareness of the issue and raising public opinion, especially in educational contexts. To identify such profiles, we propose assessment paths, in which the process involves not only analyzing IQ but ample space is given to further investigations to clarify strengths or areas of fragility of the subject, which may influence the expression of potential in school performance. In addition, we consider emotional and behavioral characteristics, in order to complete the functioning profile. With the presentation and discussion of some clinical cases, this intervention aims to address the importance on the part of the clinical point of view to propose a broad and diversified assessment procedure, with a critical analysis of the assessment's results, in order to be able to identify, even in particularly developed cognitive profiles, areas of fragility or specific difficulties that might not fit in the thresholds commonly used to define deficits or disorders. Moreover, some peculiarities of these profiles on the emotional and social side will be dealt with, through the clinical reading of specific tests and assessment tools, in order to deepen the functioning profile and clarify some dynamics encountered in everyday life contexts. Finally, we discuss about the importance of enriching and integrating the analysis of scores with qualitative observations collected during the anamnestic interview and during the assessment phase, in order to interpret the meaning of results and to plan not only different clinical/therapeutic intervention plans, but also educational and scholastic, to guarantee the full realization of the individual and his or her potential.



Giftedness and Creativity: a correlational study using WISC-IV and EPOC

Morena Farese¹, Rosa Ferri¹, Lina Pezzuti¹

¹ Department of Dynamic and Clinical Psychology and Health Studies, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Creativity – as the ability to produce original work that fits within particular task or domain constraints – is considered to be a vital and distinctive facet of intellectual giftedness. Gifted children, when compared with peers, appear more intuitive, inventive, curious and attracted to challenges. They would prefer to use divergent thinking – an essential skill for creativity – to expand the range of original and innovative solutions in problem solving. Although psychologist and researchers agree that creativity plays a key role in the full expression of gifted children's potential, there is still little knowledge concerning the relationship between creativity and giftedness. In fact, to date most research about giftedness have mainly focused on assessing the intellectual profile of talented children, disregarding the analysis of other typical features of giftedness. In this regard, the present study appears to be a first attempt to examine the relationship between intelligence – particularly verbal and visuo-perceptual abilities – and creativity in a sample of Italian gifted children. *Methods:* For this purpose, 51 Italian gifted children (IQ \geq 130), aged 5-11 years, were administered WISC-IV scale for intelligence assessment, and the Evaluation of Potential Creativity (EPoC) for potential creativity evaluation, that is able to measure two key creative thinking-process clusters (divergent-exploratory and convergent-integrative) in two content-domains (verbal-literary and graphic). *Results:* Correlational analyses highlighted interesting relationships between Wechsler Indexes (ICV, IRP, IML, IVE, IAG, ICC) and children's scores on the EPoC. *Discussion:* Early and correct identification of significant characteristics of creative potential in gifted children can play a critical role in the proper implementation and planning of educational interventions. Such approaches could allow gifted learners to cope better with the proposed tasks and to maintain adequate levels of involvement in the required activities.



**PSYCHOTHERAPY IN PUBLIC SERVICES AND INSTITUTIONS: OBSTACLES AND
NEW DEVELOPMENTS**

Proposer

*Lorenzo Antichi*¹

¹ Department of Health Science, University of Florence, Florence, Italy

Discussant

*Anna Maria Della Vedova*¹

¹ Department of Clinical and Experimental Sciences, University of Brescia, Brescia, Italy

Abstract

Although it is often implicitly assumed that patients undergo private psychotherapy, the mental public health system and institutional settings provide substantial psychotherapy services. Nevertheless, the experiences of patients and therapists regarding public psychotherapy services are often overlooked. Moreover, unlike controlled studies, the outcome and process of psychotherapy in public services are perturbed by factors internal and external to the institutions. Hence, the present symposium aims to describe the obstacles and developments of psychotherapy in public services and institutional contexts in Italy. Specifically, the experiences of patients and therapists will be addressed by considering various topics, such as efficacy or public psychotherapy services access. Hence, the four presented contributions will be: 1) “Effectiveness of psychological counselling in improving university students’ well-being: results from a clinical outcome evaluation”: This study evaluated the effectiveness of psychological counseling provided by the Vanvitelli University Students Psychological Help Service (SAPS) in improving young adults’ psychological well-being during their years of higher education; 2) “Personality risk factors, social functioning, and early intervention strategies in a Psychiatric Unit of the North of Italy”: this quantitative study aimed to investigate the factors promoting social functioning and mental health in patients attending psychotherapy services, assessing their personality and functioning; 3) “Evaluating group rehabilitation activities in a residential psychiatric context”: this is a qualitative study aimed to explore the specific process indicators of the good functioning of the group activities, analyzing patients and therapists’ experiences with Grounded Theory; 4) “Factors inhibiting public psychotherapy services: a



qualitative two-steps study”: this qualitative study aimed to investigate the multiple factors causing difficulties in accessing public psychotherapy services adopting the Consensual Qualitative Research, Action Research, Interactive Qualitative Analysis, and Dynamic System Theory.



Factors inhibiting public psychotherapy services: A qualitative two-steps study

Lorenzo Antichi¹, Marco Giannini¹

¹ Department of Health Science, University of Florence, Florence, Italy

Abstract

This qualitative study aimed to explore and understand the causes relying on the difficulties in public access to psychotherapy services in Italy. Since the health system can be considered a complex dynamic system where multiple interrelated components change over time nonlinearly, dynamic system theory has been used as a framework. In addition, we got inspired by Consensual Qualitative Research, Action Research, and Interactive Qualitative Analysis. The study was comprised of two steps. Regarding the former, 37 students enrolled in psychology at the master course have been recruited. We asked to write two thoughts anonymously in silence about the possible causes of the scant access (silenced brainstorming). Three groups were formed, and participants decided on a name, that was, Cheerleaders & Mascotte (n = 14), Prima Topica (n = 12), and Giorgio (n = 11). Each group classified the thoughts of every member into categories in a consensual process. Then, a system influence map (SIM) of the causes of the limited access was made by every group, defining virtuous and vicious cycles, strength, important and urgent needs, and neutral, activating, and inhibiting components. Finally, every group elected a leader to represent and explain the system to the class. Regarding the second step, one group of 4 students enrolled in psychology at the master course has been recruited. First, we asked participants to decide on a name for the group, “Le Benzo.” Next, the group discussed each category of the previous step, adding new ones and renaming or eliminating them. After, the SIM was made consensually, and an elected leader explained to researchers the system’s functioning. Le Benzo renamed three categories, formed two new ones, merged two causes, and specified one. Emerged categories were “Funds”, “Disinformation”, “Stigma”, “Prejudice”, “Stereotype”, “Slow Access”, “Lack of Staff”, “Politics”, “High Costs of the Private”, “Bureaucratic Difficulties”, “Inefficient Service”, “Increase in Access Requests”, “Information and Awareness”, “Waiver”. At the end of every step, we asked to write two emotions about group dynamics, calculating frequencies for every category. The most frequent emotions were fear (n = 18), surprise (n = 13), and anger (n = 12).



Evaluating group rehabilitation activities in a residential psychiatric context

Giacomo Andrea Minauzzi^{1,2}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Italy

² Adele Bonolis As.Fra. Onlus Foundation, Vedano al Lambro, Monza e Brianza, Italy

Abstract

Introduction: The project aims at identifying, among the group rehabilitation activities offered by Fondazione Adele Bonolis - As.Fra., a psychiatric residential facility accredited with the Italian National Health Service in Lombardy region, the specific process indicators of a good functioning of group activities, according to PREM (patient reported experience measure) approach. *Methods:* In order to do this, a Grounded Theory method will be adopted, whereby staff and patients will be interviewed about their experiences of group rehabilitation activities; from these interviews, the aim will be to bring out a poll of specific indicators of a “good functioning” of group rehabilitation activities, taking into account the differences between the activities belonging to the different typologies and the adopted intervention methodologies, identifying the processes of construction of the “therapeutic nature” of group activities. *Results:* Therefore, starting from the unique experiences of the patients who participate in these activities and the practitioners who conduct them, the aim is to identify elements that hinder and promote these activities in a transversal sense. We expect to be able to extract around 10-15 indicators of the elements considered by patients and clinicians as useful for the treatment process of group rehabilitation activities. *Discussion:* The first and most direct gain of the present study is to come up with a questionnaire that can be used in the evaluation of group rehabilitation activities, regardless of the area to which they pertain. In fact, there does not seem to be such a wide-ranging instrument in the literature, which can also allow a comparison between different group rehabilitation activities. Furthermore, but primarily with respect to the first point, the study will make it possible to focus on which elements are subjectively experienced by patients as useful for them in such group rehabilitation contexts. Similarly, it will make it possible to identify the most effective groups, to study their characteristics and implementation processes in greater depth. Therefore, the study should offer some tools for reflection to improve the rehabilitation offer of the Foundation, highlighting the salient points around which to design (or redesign) the group activities they provide.



Personality risk factors, social functioning, and early intervention strategies in a Psychiatric Unit of the North of Italy

Chiara Rossi¹, Osmano Oasi¹

¹ Department of Psychology, Catholic University of the Sacred Heart of Milan, Milan, Italy

Abstract

Introduction: Functional impairment is prevalent in patients with mental health disorders and/or with first-episode psychosis help-seeking in public mental health services aimed to prevent or intervene early in patients' vulnerability. Public services in Italy often offer a psychotherapeutic treatment of a brief duration and focused on enhancing social and professional functioning. However, brief interventions are not always effective, and the identification of mental disorders' risk factors (such as some personality characteristics) could enable the development of early intervention strategies. On these bases, the present study has been conducted at the ASST Ovest Milanese in the North of Italy to assess which individual factors should be considered in psychotherapeutic treatment to enhance social functioning and mental health. *Methods:* 229 (82 males and 147 females) participants aged between 18-27 were included in the study. Everyone completed an assessment consisting of a socio-demographic questionnaire, the Personality Inventory for DSM-5 (PID-5), and the Social Occupational Functioning Assessment Scale (SOFAS). *Results:* The most predictive factors of dysfunction in social and occupational functioning were detachment, disinhibition, negative affect, and psychoticism. Moreover, the majority of individuals who had previous contact with Child Neuropsychiatry present low social functioning. *Discussion:* Findings from this study highlight that it is necessary to tailor a specific intervention to several personality traits including detachment, disinhibition, negative affect, and psychoticism to improve social functioning levels. Recognizing these risk factors could be useful in preventing, detecting, and treating severe mental disorders in public mental health Italian services. Individualized therapies could, indeed, improve mental health and cost less for public clinical facilities.



Effectiveness of psychological counselling in improving university students' well-being: results from a clinical outcome evaluation

Barbara Pizzini¹, Alda Troncone², Marina Cosenza²

¹ Telematic University "Giustino Fortunato", Benevento, Italy

² Department of Psychology, University of Campania - Luigi Vanvitelli, Caserta, Italy

Abstract

Over the past few decades, there has been an increased interest in the mental health of university students, also due to the growing number of students seeking psychological help. However, there is still limited empirical evidence on the effectiveness of psychological counselling in reducing mental distress in this population. This study aimed to evaluate the effectiveness of psychological counselling provided by the Vanvitelli University Students Psychological Help Service (SAPS) in improving young adults' psychological well-being during their years of higher education. Fifty-four college students between the ages of 20 and 30 years (mean age = 23.34 years) who underwent psychological-clinical consultations at the SAPS were assessed using the Clinical Outcome in Routine Evaluation-Outcome Measure (CORE-OM) and the Difficulties in Emotion Regulation Scale (DERS) before and after the consultation. The CORE-OM measured mental functioning and behavioural problems, while the DERS assessed several emotion regulation problems. The results showed a significant reduction in all CORE-OM subscale scores and in five of the six dimensions of the DERS. The study found that the psychological counselling intervention led to higher levels of well-being and psychological functioning, along with lower levels of mental problems and risk behaviours among the students. Furthermore, the students demonstrated significant improvement in their ability to control their behaviour, engage in goal-oriented behaviour, access emotion regulation strategies, and make sense of their feelings when upset. After the intervention, the students also reported being more accepting of their emotions and more confident in their ability to change the way they feel. However, there were no significant changes in emotional awareness scores. Overall, these findings provide evidence of the effectiveness of psychological counselling interventions in reducing mental distress and improving emotional regulation abilities among university students.



Sunday, 17th September 2023

THEMATIC SESSION

NEW FRONTIERS IN ADDICTIVE BEHAVIORS RESEARCH

Chair:

Maria Casagrande

Sapienza University of Rome

Cecilia Giordano

University of Palermo



Love addiction, emotional dysregulation and attachment bonds: An empirical research on a group of love addicts

Alice Salani¹, Paolo Antonelli², Gioele Salvatori¹, Maria Chiara Gritti³, Rossano Bisciglia¹, Francesca Mascherini¹, Davide Dèttore²

¹ Integrated Center of Clinical Sexology "Il Ponte", Florence, Italy

² Department of Health Sciences, University of Florence, Florence, Italy

³ New Addiction Treatment Center "Dipendiamo", Bergamo, Italy

Abstract

Introduction: As several authors have suggested, "Love Addiction" is a condition that can be considered as a behavioral addiction toward an object of romantic love. It can lead to negative outcomes to an individual's psychological and relational wellbeing. Our study aims to examine the mechanisms underlying love addiction, in particular investigating its association with attachment styles and emotional dysregulation. *Methods:* The research involved a clinical and a control group, consisting of 155 men and 189 women. The Italian adaptations of the following tools were used: The Difficulties in Emotion Regulation Scale (DERS), The Toronto Alexithymia Scale (TAS-20), The Parental Bonding Instruments (PBI) and the Relationship Questionnaire (RQ). The statistical analyses were carried out with SPSS and AMOS. Independent sample t-test was used to assess the differences between the two groups as for the observed mean scores of the variables. Pearson's correlation was used to test the associations between variables in the two groups. Lastly, we tested several potential causal models through path analyses. *Results:* The clinical group showed higher levels of emotion dysregulation, alexithymia and preoccupied adult attachment. Participants of the clinical group also reported having experienced lower levels of maternal and paternal care, as well as higher levels of maternal control during childhood. Many different patterns of correlation, as well as eight causal models, among the several measures were observed in the two groups. *Discussion:* Our results suggest that love addiction seems to be associated with negative experiences in childhood and adult attachment. Moreover, the individual abilities to understand and regulate one's own emotion appears to be lower among those who suffer from love addiction, as well as associated with attachment experiences.



**Measuring symptoms of psychopathology and addiction severity with a single instrument:
Development and psychometric properties of the Dual Disorder Rating Scale (DDRS)**

Maria Anna Donati¹, Maria Chiara Alessi², Giovanni Martinotti², Caterina Primi¹

¹Department of NEUROFARBA, University of Florence, Florence, Italy

²Department of Neuroscience, Imaging, Clinical Science, University “G. d’Annunzio” of Chieti-Pescara, Chieti-Pescara, Italy

Abstract

Introduction: Currently, there is no psychometric tool that measures at the same time signs of psychopathological impairment and addiction symptoms in people with an addictive disorder. Instead, the co-presence of psychopathology in patients with addiction is frequent. Thus, it becomes important to assess both the aspects in order to do a valid diagnosis. To fill this gap, in this study, we developed the Dual Disorder Rating Scale (DDRS) to measure both psychiatric and addiction severity symptoms among individuals with addiction. *Methods:* We started from the 24-item Brief Psychiatric Rating Scale (BPRS), a hetero-evaluative multidimensional scale assessing the severity of psychiatric symptoms with Likert-type items ranging from 1 (not present) to 7 (extremely severe). To that scale, we added 10 items measuring signs of addiction (e.g., craving). Participants were 284 patients (80% males, mean age = 40.01, SD = 12.04) with a diagnosis of substance-addiction (cocaine, alcohol, cannabis, benzodiazepines) or non-substance related addiction (gambling) under treatment at specialized treatment centers across Italy. Fifty-two percent of the sample had also a psychiatric diagnosis. *Results:* Item analysis showed a non-normal distribution of item responses. Thus, a logarithmic transformation was adopted. Exploratory factor analysis conducted with the 34 items suggested the necessity to delete four items. The resulting thirty-items solution was found to have a four-factor structure. A randomized item parceling procedure confirmed the four factors, respectively defined as Mood Disturbance, Mania/Activation, Addiction, Reality Distortion. The four dimensions had a high internal consistency. The ability of the four dimensions to discriminate across addicted patients with and without a psychiatric diagnosis was investigated. *Discussion:* Findings indicate that the resulting DDRS, as a whole, may be used as a multi-factorial hetero-evaluative instrument to assess both signs of psychopathological impairment and addiction symptoms in patients with addiction.



Bidirectional relationship between (Internet) Gaming Disorder, internalizing psychopathology, and psychological distress: A meta-analysis of longitudinal studies

Simone Amendola¹, Jael Bernath¹, Gregor Waller¹, Michael Pascal Hengartner¹

¹ Department of Applied Psychology, Zurich University of Applied Sciences, Zurich, Switzerland

Abstract

The diagnosis of (Internet) Gaming disorder (GD) has been included in the main diagnostic manuals of mental disorders. Recent meta-analyses found that the estimated prevalence of GD or problematic video game use ranges from 2% to 12% depending on contextual and methodological factors. Associations between GD or problematic video game use and symptoms of psychopathology or distress are well established in cross-sectional studies and demonstrated by recent meta-analyses. What lacks in the scientific literature is a synthesis of longitudinal studies' findings to clarify the causal nature of the association, if any. To date, no systematic review and meta-analysis of longitudinal studies examined relationships between GD or problematic video game use and symptoms of psychopathology or distress over time. Therefore, the present study focused on the following research question: are there longitudinal reciprocal associations between GD or problematic video game use, internalizing psychopathology, and psychological distress, or one leads to the other over time? To address this gap in the scientific literature, the present study undertook a systematic review and meta-analysis of longitudinal studies examining the relationship between GD or problematic video game use, internalizing psychopathology (i.e., depression and anxiety) and psychological distress (i.e., loneliness, stress, life satisfaction, quality of life, well-being), at both symptom and disorder levels. The protocol of the study was preregistered online on PROSPERO (n: CRD42023407665). Research articles, published until December 29, 2022, were searched in PsycInfo, PsycArticles, PubMed, and Web of Science. After the removal of 226 duplicates, 567 titles and abstracts were screened. 72 articles were included in the full-text assessment stage. The review is ongoing and expected to be completed by July 2023. The results will thus be presented during the conference. The findings of the study will broaden scientific knowledge on the relationship between GD, psychopathology, and psychological distress, as well as provide new evidence on the impact of GD on relevant aspects of life.



The conceptualization of Internet Addiction in Adolescence: A Study of the Psychometric Properties of the Italian version of Internet Addiction Test – Short Form

Carola Beccari¹, Maria Anna Donati¹, Caterina Primi¹

¹ Department of NEUROFARBA, University of Florence, Florence, Italy

Abstract

Introduction: The expansion of Internet technology during the last two decades and the current COVID-19 pandemic have dramatically increased the use of the internet for socialization and gaming, raising the prevalence and severity of Internet Addiction (IA). An alarming high prevalence of IA has been found among adolescents in different parts of the world, including Italy. IA has been associated with negative consequences such as poor academic performance, mood disorders, and risky behaviors in adolescents. Nowadays, the most used tool to investigate IA is the Internet Addiction Test (IAT), of which several short versions have been developed. However, there is less agreement on its construct structure, which some studies indicate as unidimensional and others as a two-factor structure, in line with the current debate on the conceptualization of addictions as one-dimensional or multi-component constructs. The aim of the present study was to investigate the psychometric properties of a six-item version of IAT in a sample of Italian adolescents. *Methods:* Participants were 2290 high school students (60% male; mean age = 16.43, SD = 1.19). Adolescents filled out a research protocol online. *Results:* Confirmatory factor analysis highlighted the two-factor structure had a better fit to the data in comparison to the unidimensional one. Moreover, validity analysis considering criterion variables, such as problematic use of smartphones and video games, showed a different weight of the two IAT – SF dimensions, with a greater explanatory capacity for the subscale Social Problems, adding support for the multidimensional conceptualization of IA. *Discussion:* Results confirm that IAT- SF is a valid brief assessment tool to investigate the multidimensional construct of IA in adolescents. Moreover, this study provides a contribution to the current debate on the component model and the unidimensional one concerning addictions.



Trauma, attachment, and reflective functioning toward food addiction behaviors: A path analysis model

Alessandro Alberto Rossi¹, Stefania Mannarini¹

¹ Department of Philosophy, Sociology, Education, and Applied Psychology, Section of Applied Psychology, University of Padua, Padua, Italy

Abstract

Background: The relationship between traumatic life events, insecure attachment styles, and reflective functioning in predicting dysfunctional eating behaviors – such as emotional eating – is well known in the literature. At the same time, it is known that certain eating behaviors and certain foods (e.g., highly palatable foods) can lead to the development of addictive behaviors (namely, food addiction; FA). However, the hypothesis that FA can be predicted by traumatic experiences, attachment styles, and reflective functioning has never been tested before. *Methods:* 298 individuals [75 M and 223 F (Mage = 44.37, SD = 14.78); BMI from 24.91 to 58.83 (M = 42.32, SD = 5.81)] were enrolled from the general population. Participants were tested with the Post-Traumatic Symptom Questionnaire (PTSQ), the Relationship Questionnaire (RQ), the Reflective Functioning Questionnaire (RFQ), the Emotional Eating Scale of Italian Three Factor Eating Questionnaire-18R (EE), and the Measure of Eating Compulsivity (MEC). A mediation analysis (5000 bootstraps) was performed. *Results:* The model resulted be statistically significant with a good amount of explained variance: $R^2 = .421$, $F = 53.228$, $p < .001$. The relationship between traumatic life events (PTSQ) and food-addictive behaviors (MEC) was partially mediated by insecure attachment (RQ; $p < .001$), reflective functioning (RFQ; $p < .001$), and emotional eating (EE; $p < .001$). Moreover, the total indirect effect was statistically significant: .008 95% CI [.003; .018]. *Discussion:* These results emphasize that FA is in line with both other dysfunctional eating behaviors and addictive behaviors. Also, these results show the process that leads to food addiction behaviors (namely, eating compulsivity) from traumatic life experiences through insecure attachment styles and difficulties in reflective functioning. Furthermore, these results emphasize the central importance of reflective functioning and emotion regulation, highlighting how clinicians could implement psychological interventions.



Substance addictions and suicide thoughts and behaviors: Evidence from a multi-wave epidemiological study

Angela Giugovaz¹, Michele Grassi¹

¹ Department of Life Sciences, University of Trieste, Trieste, Italy

Abstract

Substance addiction (SA) is a complex condition that can have a wide range of negative effects, among which major depressive disorder, bipolar disorder, and dysthymia. One of the most severe consequences of SA is an increased risk for suicidal thoughts and behaviors (STB). The aim of this study was to define the differential associations between self-reported addiction to eleven substances (e.g., nicotine, alcohol, cocaine, heroin, sedatives, stimulants, inhalants, pain relievers, hallucinogens, marijuana, and tranquilizers) and STB, namely suicide ideation, planning, and attempt. Methods. The study was based on the National Survey on Drug Use and Health (NSDUH) data spanning from 2008 to 2020. The total sample, representative of the US American population, consisted of more than 500000 adult individuals. We performed a series of logistic regressions to observe which substance addictions were significantly related to each STB with at least a small effect size ($d \geq .20$) through at least 10 years. We then estimated four predictor models, namely (i) with only socio-demographic and contextual factors (baseline model), (ii) with selected substance addictions and baseline factors, (iii) with non-selected substance addictions and baseline factors, and (iv) with all the variables (i.e., baseline as well as selected and unselected substance addictions). We also performed a ROC analysis for each year, model, and STB. Finally, we averaged the ROC areas through the years and compared the models for each STB. Results. The selected substance addictions were alcohol, pain relievers, marijuana and cocaine for ideation and planning, and only alcohol, pain relievers, and marijuana for suicide attempts. The model with selected substance addiction showed a discriminative ability comparable to the full model and greater than the baseline model and model with unselected substance addictions. We evaluated the predictive accuracy of alcohol addiction and the baseline model compared to a baseline-only model and the baseline model with all the other ten substance addictions. The alcohol model yielded AUC values that were greater than the baseline-only model and comparable to those of the other substance addictions model. Discussion. Specific substance addictions are strongly related to STBs. Particular attention should be paid to alcohol addiction with respect to its relationship with STB.



Sunday, 17th September 2023

THEMATIC SESSION

VULNERABILITY IN HEALTHCARE PROFESSIONALS

Chair:

Lidia Del Piccolo

University of Verona

Viviana Langher

Sapienza University of Rome



Emotional Distress and Mindfulness Traits in Healthcare Profession students

Loretta Berti ¹, Annamaria Ghellere ¹, Elisabetta Colombari ^{1,2}, Giorgia Parisi ^{1,2}, Chiara Mazzi ^{1,2}, Silvia Savazzi ^{1,2}

¹ Section of Clinical Psychology, Department of Neuroscience, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

² Perception and Awareness (Panda) Laboratory, Department of Neuroscience, Biomedicine and Movement Sciences, University of Verona, Verona, Italy

Abstract

Introduction: The literature indicates that healthcare profession students are prone to psychological distress, thus potentially leading to lower quality and safety of patient care. Mindfulness, on the other hand, as well as a self-aware attitude in clinical practice can positively impact students' professional and personal well-being. This study aimed to investigate distress and mindfulness in healthcare profession students and to examine the relationship between these variables. *Methods:* Mindfulness traits and psychological distress were assessed applying the Italian versions of the Five Facet Mindfulness Questionnaire Short Form (FFMQ-SF) and the Symptom Checklist-90 Revised (SCL-90-R). Descriptive statistics and Pearson's correlations were computed using Stata 15.1. *Results:* Thirty-six out of the 63 participants (41 women, 22 men) were studying medicine, 12 nursing, 10 medical biotechnology, and five other healthcare professions (e.g., psychology). The mean FFMQ-SF total score was 81.03 (SD=10.14). The overall scores of the three global distress indices of the SCL90-R, namely the Global Severity Index (GSI), the Positive Symptom Total (PST) and the Positive Symptom Distress Index (PSDI), were 50.48 (SD=10.09), 52.59 (SD=11.58), and 45.54 (SD=7.68), respectively. Compared to normative standards, 12.7% of the participants had elevated levels of distress and 12.7% showed distress above clinical threshold (GSI). Mindfulness (i.e., FFMQ-SF total score) was significantly negatively correlated with global distress (i.e., $r = -.59, p < 0.01$; $r = -.542, p < 0.01$; $r = -.478, p < 0.01$, for GSI, PST, and PSDI, respectively). *Conclusions:* The evidence from this study supports the idea that caring for students' emotional well-being and promoting a mindful practice should be treated as priorities by universities and academic hospitals from the very beginning of medical education and training.

Coping with moral distress: A qualitative study on the spontaneous strategies used by healthcare professionals

*Michele Montecalvo*¹, *Chiara Luridiana Battistini*², *Lidia Borghi*², *Giulia Lamiani*¹

¹ Department of Health Sciences, University of Milan Department of Health Sciences, University of Milan, Milan, Italy

² Unit of Clinical Psychology, ASST Santi Paolo e Carlo, Milan, Italy

Abstract

Rationale: Moral distress is a specific type of psychological stress related to the moral dimension of clinical practice. It has been defined as the painful feeling that occurs when healthcare professionals (HPs) cannot act according to what they judge right. Literature showed that moral distress is associated with depressive symptoms, job resignation and burnout. However, few studies explored the psychological factors that can modulate moral distress. The aim of this qualitative study is to explore the spontaneous strategies used by HPs to cope with moral distress. *Methods:* Using a snowball sampling technique, a convenience sample of interdisciplinary HPs working in a large public hospital in Milan was recruited. Semi-structured interviews were conducted in person and online. During the interview, HPs were asked to recall a morally distressing situation and the strategies used to cope with it. The interviews were audio-recorded and analyzed through thematic content analysis by 2 researchers and 1 supervisor to identify moral coping strategies. *Results:* A total of 19 HPs were interviewed (58% physicians, 32% nurses and 10% other professionals; 79% females; mean age = 50.39; SD = 8.41). Six moral coping strategies emerged: 1) trying to modify the situation; 2) withdrawing from the situation; 3) passively accepting the situation; 4) venting; 5) setting boundaries; 6) reinterpreting the situation (limiting omnipotence and responsibility; understanding the others' perspective; trusting others; receiving validation; recognizing the pursued values). *Conclusions:* This is the first project exploring moral coping strategies. The results showed that the strategies identified to cope with moral distress are similar to the coping strategies identified in the literature for coping with psychological distress. However, the content of some strategies, such as reinterpreting the situation or acting on the situation, seem specific for moral distress. In the future, identifying clusters of strategies associated with a low level of moral distress could allow the implementation of preventive or supportive interventions for HPs.



Burnout, resilience and well-being in health care professionals

Antonella Calvio¹, Melania Rita Difino¹, Melania Severo¹, Gaia Di Maria², Adriana Leccese¹, Michele Russo¹

¹ Department of Humanistic Studies, University of Foggia, Foggia, Italy

² Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy

Abstract

Introduction: Social and organizational characteristics of work can give rise to the phenomena of maladaptation, stress reactions, including, in the most extreme cases, occupation-related diseases. Maslach observed how specialists who worked with the public, after a few years, presented a kind of apathy, restlessness, and anxiety in the workplace which, then affected the specialists' quality of life. If burnout can be classically defined the pathological outcome of a stressful process affecting people who practise helping professions, the moderating role of resilience can help promote individual and organizational well-being. We assess levels of burnout and levels of overall well-being perceived by health personnel, especially nurses. In addition, we compare sub-groups of our sample to identify groups of health professionals at higher risk from a psychological and emotional point of view. *Methods:* Data are collected through online google forms with a battery of standardized psychometric tests aimed at investigating patients' levels of burnout, resilience, and well-being. These questionnaires included the Maslach Burnout Inventory (MBI) used to assess the level of burnout; the Connor- Davidson Resilience Scale (CD-RISC) to assess resilience; and the I COPPE Scale Italian Short form to measure multidimensional well-being. *Results:* The results of the correlations show that higher levels of overall well-being are associated with higher levels of resilience and that the level of emotional burnout reported at Maslach is associated with levels of overall well-being. Specifically, a positive correlation emerges between overall well-being, assessed with the I COPPE and the CD-RISC total scale ($r=0.287$; $p=0.0037$); and a negative correlation between Maslach-assessed levels of emotional burnout and I COPPE overall well-being ($r= -0.250$; $p= 0.011$). *Discussion:* Although these are preliminary data, implementing short courses or interventions aimed at increasing resilience in health professionals could have an impact, improving personal and professional quality of life. For this reason, if resilience is related to general well-being, working on the strengths of operators could improve the levels of it; to conclude, resilience can be considered a process that can change and improve, interventions on it could also have a positive impact on personal and professional well-being.



Work-related stress risk in Intensive Care Unit workers in nine Italian regions

Laura Monti¹, Maria Grazia Bocci², Massimo Antonelli², Giovanni Mistraretti³, Riccardo Maviglia², Serena Lochi², Sara Tranquilli¹, Angela Gonzalez Del Castillo¹, Daniela Pia Rosaria Chieffo¹

¹ UOS Clinical Psychology, Clinical Government, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

² UOC Anesthesia, Resuscitation, Intensive Therapy and Clinical Toxicology, Department of Emergency, Anesthesiological and Resuscitation Sciences, Fondazione Policlinico Universitario Agostino Gemelli IRCCS, Rome, Italy

³ Department of Medical-Surgical and Transplantation Pathophysiology, State University of Milan, San Paolo Hospital – Polo Universitario, Milan, Italy

Abstract

Introduction: Work-related stress risk is increasingly important for productivity loss within organisations. To assess work-related stress risk, the most commonly used tool is the 22-item self-rated Maslach Burnout Inventory (MBI), a questionnaire exploring three domains, i.e., Emotional Exhaustion (EE), Depersonalization (DP), and Personal Accomplishment (PA). *Methods:* We distributed an online MBI version and invited 2,130 healthcare workers working at 248 Intensive Care Units (ICUs) in nine Italian regions, i.e., Emilia Romagna, Friuli-Venezia-Giulia, Lazio, Liguria, Lombardy, Piedmont, Trentino-Alto Adige/Südtirol, Tuscany, and Veneto, to complete it. By 30-June-2019, all ICUs had joined the project, with data being collected until 31-December-2019. *Results:* Respondents were 2,130 ICU workers; 868 [40.8%] scored low on the EE dimension of the MBI, 807 [37.9%] scored moderate, and 455 [21.4%] scored high. On the DP domain, 1,180 [55.4%] scored low, 629 [29.5%] scored moderate, and 321 [15.1%] scored high, while on the PA, 5 ICU workers [0.2%] scored low, 292 [13.7%] scored moderate, and 1,833 [86.1%] ICU workers scored high (note that higher PA scores correspond to lower work-related stress risk). Participants were 1,282 nurses, 635 physicians, 128 auxiliaries, 51 trainees, and 34 worked in hospital administration. There were 1,336 women and 755 men, while 39 did not specify their gender. Mean age was 43 years, years of ICU experience were 13 on the average. Data were analysed according to ICU subtype, hospital type, to whether a trauma centre was present in the hospital, to how many beds were available at the healthcare facility and at the ICU, how many doctors or nurses were on the night shift or working in ICU, how many health auxiliaries, students or psychologists were working



in the ICU, whether there were audit rooms to speak to family members or a waiting room, whether doctors, nurses or psychologists assisted at interviews with family members, and according to the marital status, gender, age, years of experience at ICU, and professional role of the participant. *Discussion:* There were no significant differences according to these parameters. Pre-pandemic work-related stress risk was not negligible among ICU workers and is expected to rise after the COVID-19 pandemic.



The well-being of social-health professionals: relationship between coping strategies, emotion regulation, metacognition, and quality of professional life

Laura Ferro¹, Alessandra Colombesi¹, Marina Cariello¹, Chiara Adduci¹, Giorgia Baccini¹, Eleonora Centonze¹, Stefania Cristofanelli¹

¹ Tiarè Association, Turin, Italy

Abstract

Social health professionals involved in helping relationships with minors act at multiple levels that include affect, thought, and action. In particular, the helping relationship with minors with psychosocial problems requires significant emotional and affective commitment in order to understand their needs and to find appropriate and effective ways to intervene. The effectiveness of such an intervention requires relational skills such as knowledge of emotion regulation, selection and use of appropriate coping strategies, and use of metacognitive skills. When the resources described are perceived to be inadequate, social professionals are at increased risk for burnout and reduced quality of professional life. The purpose of this study was to examine the relationship between coping strategies, emotion regulation, metacognition, and quality of professional life among workers. The sample consisted of 100 socio-educational professionals working with minors who were administered the questionnaires COPE-NVI (to assess coping strategies), DERS (to examine difficulties in emotion regulation), MSAS (to assess metacognition skills) and PROQOL (to examine satisfaction levels and quality of professional life). The results show that quality of work life is related to emotion regulation skills, coping strategies, and metacognitive resources. The data suggest an influence of these dimensions on the risk of burnout and secondary traumatization, as well as on job satisfaction. These results can be used to propose training interventions aimed at improving the skills already present in operators and promoting the missing ones, also to improve the work life quality of operators.



The end of Assisted Reproductive Technologies Treatment: A qualitative study

Federica Bonazza^{1,2}, Daniela Leone^{1,3}, Sara Molgora¹, Lidia Borghi², Elena Vegni^{2,3}

¹ Department of Psychology, Catholic University of Sacred Heart of Milan, Milan, Italy

² Department of Health Sciences, University of Milan, Milan, Italy

³ Unit of Clinical Psychology, ASST Santi Paolo e Carlo, Milan, Italy

Abstract

Introduction: End of treatment is one of the most complex phases of the ART process. In the ART setting, there is no clearly defined biological endpoint; the end of ART treatment occurs or should occur when probabilities of success are so low that it is in the couple's best interest to stop any further attempt. Patients may experience the end of treatment as an existential failure, as they gain awareness that the desired biological pregnancy will not be achieved. In the doctor-patient relationship, the decision to end treatment is one of the most challenging bad news to break because it drastically and negatively changes patients' expectation and future perspective. This contribution aims to delineate the end of ART treatment, as health professionals devise it. *Methods:* A grounded theory approach was used to explore healthcare professionals' perspectives on the end of ART treatment. Data were collected through two focus group interviews with physicians, biologists, and psychologists working in public and private Italian medically assisted procreation centers. The focus group interviews were audiotaped and transcribed verbatim. Content analysis was conducted to identify areas and sub-areas related to the end of ART treatment. *Results:* A total of 16 health care professionals were involved in the focus groups. The findings provide an illustration of the attributes and components at the end of the ART. The resulting coding system considers seven areas: patients' clinical conditions and probabilities of treatment success; patients' and physicians' roles in decision-making; ethical issues, affective and emotional experiences; physicians' personal attitudes; physician-patient relationship; communication strategies and difficulties. *Discussion:* The results not only describe the complex process based on expertise and experience leading to the clinical decision to discontinue treatment but also outline the ethical and emotional aspects of this complex phase. Our considerations highlight physicians' perceptions and attitudes in the doctor-patient relationship, some of which are specific to the ART context and treatment discontinuation.



Individual differences in helping behavior: empathy and personal distress as dimensions of the caregiving behavioral system

Sara Salzano^{1,2}, *Isa Zappullo*^{1,3}, *Chiara Baiano*^{1,3}, *Roberta Cecere*^{1,2,3}, *Anna Citro*¹, *Monica Positano*^{1,2}, *Gennaro Raimo*^{1,2,3}, *Massimiliano Conson*³

¹ Studies of Integrated Neuropsychological Therapy, Salerno, Italy

² Cognitive-Behavioral School of Psychotherapy ‘Serapide SPEE’, Naples, Italy

³ Department of Psychology, University of Campania Luigi Vanvitelli, Caserta, Italy

Abstract

Introduction: Helping behaviors are prosocial acts aimed at promoting others’ well-being. They can be affected by individual’s empathic skills, allowing to be sensitive to others’ needs and emotions, and by personal distress, implying feelings of apprehension and discomfort in response others’ distress and producing a selfish motivation to reduce such feelings once elicited. The caregiving behavioral system can be considered to account for variability in helping behaviors. The two-dimensional model of the caregiving system predicts that it is possible to identify four activation styles (responsive, intrusive, rejecting, and confused), differing in the use of hyperactivation and deactivation strategies, by crossing the dimensions of control and indifference. Here, we tested the predictions of the models using personal distress and empathy as proxy of control and indifference dimensions, respectively. *Materials and Methods:* Participants. For the present study, 242 healthy volunteers (166 females; age range: 18-45) were recruited. Measures. The Caregiving System Scale, assessing individual differences in hyperactivation and deactivation of the Caregiving system; the Empathic Quotient assesses, a widely used measure of empathy; the Personal Distress Scale of the Interpersonal Reactivity Index. *Results:* First, median splits were performed on the hyperactivation and deactivation scales of the Caregiving System Scale and then four groups were created by combining high and low groups of the two dimensions. Results of a MANOVA showed that personal distress was higher in the intrusive and confused groups than both rejecting and responsive ones, while empathy was higher in the responsive and intrusive groups compared to the other two groups. These results were confirmed by multinomial logistic regression models on the four activation styles showing that the probability of belonging to each of them increased or decreased depending on levels of personal distress and empathy. *Discussion:* The present findings demonstrate the existence of four activation styles of the caregiving system differing in the use of hyperactivation and



deactivation strategies. Of particular interest is the confused activation style, since it is characterized by high degrees of both hyperactivation and deactivation and, thus, can be relevant in clinical settings.



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