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Thursday, 12th September 2024

SYMPOSIUM SESSION



THE HIDDEN PRESENCE: PSYCHOLOGICAL UNDERPINNINGS OF CHRONIC PAIN

Proposer

*Piero Porcelli*¹

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Discussant

*Silvana Grandi*¹

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Abstract

This integrated paper session aims to provide an update on new research and perspective on chronic pain from a biopsychosocial perspective. Quinto et al. will report data on psychological resources in predicting the experience of pain in terminally ill hospice patients. Galli and Nimbi will present data on the relationship between psychological functioning and central sensitization in patients with nociplastic pain. Two further studies will specifically focus on fibromyalgia (FM). In particular, Lanzara et al. will introduce a systematic review summarizing recent evidence on the association between gut microbiota and psychological distress in FM. Finally, Romeo et al. will report data on the poor investigated field of metacognition in FM patients.



Optimism, acceptance of illness, hope, and social support in palliative care: how positive psychological functioning may promote benefit finding and reduce pain in terminally ill hospice patients

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Abstract

Background: Pain experience, as well as feelings of hopelessness and despair, seems to be of relevance for palliative care patients. This investigative study aimed to explore the role of optimism, illness acceptance, hope, social support in predicting high levels of benefit finding and low levels of pain among palliative care patients, even controlling for anxiety, depression, clinical features (i.e., pain characteristics and prognosis awareness), and pain catastrophizing.

Method: Terminally ill hospice patients, who were over 18 years of age and reported a diagnosis of life-threatening disease with a prognosis ranging from 1 to 6 months (based on the evaluation of physicians who referred patients), a Karnofsky Performance Status > 30, no evidence of dementia (as determined by retrospective assessments), and the ability to read and speak Italian and to provide written informed consent, were enrolled to the study. A trained psycho-oncologist administered to each participant a battery of standardized measures of optimism, illness acceptance, hope, social support, pain catastrophizing, benefit finding, and perceived pain. Sociodemographic (i.e., sex, age, marital status, job, and school attainment) and clinical features (i.e., Karnofsky Performance Status, BMI, time since diagnosis, pain characteristics, diagnosis awareness, and prognosis awareness) were collected.

Results: Psychological resources, namely hope, optimism, and social support, played an important role in the pain experience of terminally ill hospice patients. Moreover, significant statistically differences emerged between optimist and pessimist palliative care patients in many variables of interest.

Conclusion: These preliminary findings pave the way for further research on how it is possible to promote more adjustment to the painful experience of terminal illness. Psychological interventions aimed to improve optimistic thinking and positive outcome expectancies may help patients at the end-of-life to cope with pain and to be strengthened by negative experiences.



Central sensitivity in chronic pain: exploring the role of psychological components in nociplastic pain.

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Abstract

Background and Aims: Central sensitivity (CS) is defined as an increased responsiveness of nociceptive neurons in the central nervous system to normal or subthreshold inputs. CS has recently been linked to the psychological burden associated with chronic pain, such as fibromyalgia (FM), chronic headache (CH) and vulvodynia (VU). The primary objective of this contribution is to define the most recent literature that questions the concept of CS as a basic pathogenic mechanism for nociplastic pain. Thus, three studies will be presented testing the psychological functioning of CS through a path analysis model exploring the influence of temperament, personality, childhood trauma, defence mechanisms and mental pain on women with FM, CH, and VU.



The relationship between gut microbiota, fibromyalgia, and psychological distress: a systematic review.

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Abstract

Introduction: Fibromyalgia (FM) is one of the most common forms of chronic widespread pain, characterized by a significant impairment in quality of life. The pathophysiology of FM is not well understood, with multiple hypotheses being suggested, including the potential involvement of the gut-brain axis. The human gut microbiome plays a pivotal role in two-way communication with the central nervous system. It has been observed that the microbiota-gut-brain axis modulates the production of microbial metabolites and immune mediators associated with alterations in neurotransmission, neuroinflammation, and behavior via the vagus nerve. This systematic review aimed to summarize the recent evidence of the relationship between gut microbiota, FM symptoms, and psychological distress in human studies. *Methods:* According to PRISMA guidelines, we conducted a systematic search of the literature on PubMed, Scopus, EBSCO, WOS, and Cochrane. The records were selected using multiple combinations of relevant search terms (e.g., “fibromyalgia” AND “microbiota” AND “distress”). *Results:* The initial search identified 135 records, of which 10 research reports met the predefined inclusion criteria and were analyzed. Most studies (n=7) were case-control, two were randomized controlled trials, and one was observational. Most studies found an imbalance in the gut microbial communities of FM patients and a significant difference between FM patients and HC in microbiome composition/diversity and gut permeability. Intestinal dysbiosis and gut permeability were also associated with high psychological distress (depressive, emotional, cognitive, and sleep symptoms). *Discussion:* Alterations in the gut-brain axis seem to support the hypothesis that gut-brain axis regulation is impaired in stress-related pain conditions such as FM. Further studies are needed to clarify the role of stress and the microbiota-gut-



brain axis in the pathophysiological mechanisms underlying FM. Studies presented in this review have shown encouraging results, and there are many potential applications for this research area.



The association between metacognition and pain in patients with fibromyalgia: the role of depressive symptoms.

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Abstract

Introduction: Fibromyalgia (FM) is a syndrome characterised by chronic and widespread musculoskeletal pain, often associated with psychological distress, especially depressive symptoms. Another psychological aspect associated with FM is metacognition. Metacognition is a process that enables an individual to understand the self and others in terms of intentional mental states. Several evidence have shown the presence of significant relationships between metacognitive functioning and physical and mental well-being. However, limited data are available for fibromyalgia patients. Therefore, the aim of the present study was to further investigate the relationship between metacognitive functioning, depressive symptoms, and pain intensity in a sample of fibromyalgia patients.

Methods: Sixty-one female fibromyalgia patients were consecutively recruited from the Clinical Psychology Unit of ‘Città della Salute e della Scienza’ Hospital of Turin. Participants were asked to complete questionnaires after signing informed consent. The data collected included socio-demographic and clinical information. Psychological variables were investigated by using: the pain intensity item of the Fibromyalgia Impact Questionnaire-Revised (FIQ-R), the Hospital Anxiety and Depression Scale (HADS), and the Metacognitive Functions Screening Scale (MFSS).

Results: Most of the patients (70.5 %) reported clinically relevant depressive symptoms and a mean total score of 56.15 (SD =11.91) at the MFSS. The ability to recognize emotions subscale of the MFSS was associated with both the depression subscale of the HADS and the pain intensity item of the FIQ-R. The mediation analysis showed that the depression subscale of the HADS partially mediated the relationship between the ability to recognize emotions subscale of the MFSS and the pain intensity item of the FIQ-R.

Discussion: The current findings seem to suggest a role of depressive symptoms in mediating the effect of difficulties in the ability to recognize emotions on pain intensity in fibromyalgia patients.

These results suggest important clinical implications. Proposing a psychological intervention targeting metacognitive processes could decrease depressive symptoms levels and consequently reduce the intensity of pain.



**CLINICAL AND DYNAMIC PERSPECTIVES ON THE CHALLENGE OF SOCIAL
TRAUMATIC EMERGENCIES: POSITIONINGS, ADVANCES AND TRAJECTORIES OF
RESEARCH AND INTERVENTION**

Proposer

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Discussant

*Riccardo Williams*¹

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Abstract

Several social traumatic emergencies are troubling individual and collective mental health and affective functioning. Wars, violence, and conflicts, with the consequent flight of millions of people forced to leave their homeland, represent the greatest challenges that contemporary societies face. These are extreme traumatic experiences whose effects extend beyond the individual dimension to also impact collective and social ones. This panel brings together contributions that address these issues with particular attention to the repercussions that such traumatic experiences and related research have on the human, professional, scientific, and academic communities. The panel, therefore, aims to offer a broad reflection on the phenomena of war and forced migration, outlining the trajectories and advances in research and intervention on these topics, as well as the perspectives of researchers and academics. Troisi et al., through the analysis of the lived experiences of a group of female professionals working on an Italian research-intervention project for refugee women victims of violence, share best gender-sensitive practices for clinicians and professionals facing the dual challenge of forced migration and gender-based violence. The focus on a gender-sensitive approach in research is also sustained in the contribution of Gallo et al. The authors present a systematic review of gender-sensitive research on women during the Russian-Ukrainian conflict and reflect on the unique positioning and direction of current research in addressing the trauma of war and the feminine issue. Similarly, the contribution of Cavazzoni et al. deepens the meanings, emotions, and defense mechanisms of a group of researchers engaged in “thinking about



Gaza” and “researching on and within Gaza”. In conclusion, the study of Regnoli et al., which examines the social impact of war, presents the results of an investigation aimed at evaluating the effects of the Fear of War on psychological distress and its relationship with the Intolerance of Uncertainty and Future Anxiety in a sample of Italian young adults. The authors reflect on the implications of their findings to implement targeted intervention projects capable of caring for future generations.



“A plural and feminine trauma”. A gender-sensitive intervention with African women refugees victims of violence.

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² Department of Humanistic Studies, University of Naples, Federico II, Naples, Italy.

Abstract

African migrant women experience various forms of gender-based violence in their countries of origin, during their migration journey and in the host country. Current integration policies and interventions, however, have mainly adopted a “gender-neutral” approach. In response, the MIA (Modeling Integration and Reception Pathways for Refugee Women Victims of Violence) project combined the expertise of migration and gender violence professionals to identify gender-sensitive intervention practices. This qualitative study explores the experiences of MIA Project professionals, through focus groups and interpretive phenomenological analysis (IPA). 16 monthly focus groups were organized involving the expert members of the multidisciplinary working group of the Mia project. A multidisciplinary working group was set up made up of 14 professionals combining experts in the field of combating gender violence and experts in the field of forced migration. Our findings confirm the need to build new tools to address the burden of vulnerability carried by forced African migrant women. Best gender-sensitive practices useful for clinical intervention will be presented.



The feminine and the war: a systematic review on gender-sensitive research during the Russia-Ukraine war.

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Abstract

Literature highlights that during war, generally defined as a “men’s affair”, women represent one of the most vulnerable groups, alongside children and youths. Consistently, research investigating the impact of the Russian-Ukrainian conflict on mental health has evidenced that Ukrainian women are at higher risk of developing psychopathological and psychological disturbances compared to men. Therefore, there is a need for an in-depth investigation into how psychological research explores and delves into the psychological health status and experiences of Ukrainian women during the current armed conflict. Following PRISMA guidelines, a systematic review was performed across the databases Scopus, PubMed, Web of Knowledge, and PsycArticles. The search encompassed the broad topic of psychological research on women during the Russian-Ukrainian conflict and was limited to the following inclusion criteria: research papers adopting a gender-sensitive lens on women; referring to the current conflict started in 2022; written in English. Out of a total 20 articles, only 7 studies were considered suitable for the review. Three main research trajectories were identified: (1) Women who take care of women; (2) Where war destroys, something is re-born; (3) Violence and Resistance. Overall, research on this topic appears to still be underdeveloped. Given the vulnerability of this target population, which also constitutes the main group forced to leave the country, there is a need for an increase in studies adopting a gender-sensitive approach on this issue. The emerged research trajectories summarize the main thematic areas investigated by the international scientific community on this topic. From our perspective, these may also give interesting insights to hypothesize the way in which current psychological research tries to “deal with” the extreme trauma of the war and the feminine issue. From this point of view, the mainly female-guided studies show a peculiar form of care/research that seems to find a way to “combat” the foreign aspects of war by identifying similarities with the other. Additionally, the focus on perinatal experiences and different forms of female resistance seems to testify the tendency of research to prioritise its attention to the undeniable supremacy of life over the death inflicted by war.



How is your work-war balance today? Confusion, disorientation, and possible transformations in times of bewilderment

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Abstract

How is your work-war balance, asks a colleague a November morning. She asks those of us displaced in the south of Gaza, sheltering in a school, after witnessing the destruction of our homes, universities, and cities. She asks those of us positioned in a part of the world that observes in bewildered silence. Since the Hamas attack in Israel on 7 October, where 1200 people were killed and 240 hostages taken, the Israeli military has launched an assault in the Gaza Strip and established a complete siege on all borders. By April 2024, more than 40,000 Palestinian civilians had been killed, including 13,8000 children, and more than 76,500 injured. The present work – comprising a multi-voice discussion between Italian and Gazan academics – reflects on the difficult question of how to survive in such a catastrophic and bewildering context. How can those who have been confronted for seven months with scenarios of death and the absence of any human rights, in a liminal space between life and death, psychically survive? How do those who are here live, scrolling on Instagram between pictures of blood on a flour sack and pictures of bathing in the Maldives? How do we live with feelings of guilt and shame at the precariousness of the values on which we had built the certainty of our foundations, 'as members of the most advanced human civilization'? This work reflects on possible paths of survival in the face of this bewildering. Thinking about Gaza also means confronting one's helplessness, anger, and responsibility, necessary steps in thinking about Einstein's question and wondering how we can approach a future where all can experience justice and peace. We reflect on the healing process that can take place within the encounter with the other, in the group, to counteract loneliness, and to construct sense and thoughts. Holding hands in the landscapes of mourning to restore the resources of tenderness and regain trust. Just as the wake is a community event, we need to experience communal mourning to recognize the trauma and the actions necessary to prevent its recurrence.



"Beyond the bombs": The Mediating Role of the Intolerance of Uncertainty and Future Anxiety in the Relationship Between Fear of War and Young Italian Adults' Psychological Distress

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Abstract

In between the Russian-Ukrainian War and the escalation of conflicts in the Middle East, the war is back to the center of contemporary debates, with relevant consequences affecting the psychological well-being of geographically distant populations. Although several reports indicate growing worry for the expansion of conflicts in young Italian adults, the indirect psychological impact of war remains partly unexplored in Italy - particularly in a target group living in a delicate phase of developmental transition and already affected by the pandemic collective trauma.

Using the Fear of War Scale - which we adapted and validated in Italian - and with the intention of filling this gap, the present study investigates the psychological impact of Fear of War on Psychological Distress in a sample of 310 Italian Young Adults (18–30 years; $M = 22.0$; $SD = 2.6$), exploring the potential mediating effect of Future Anxiety and Intolerance of Uncertainty.

Results reveal a strong impact of war on Italian young adults, highlighting that Fear of War is increasing Depression, Anxiety and Stress levels. In addition, parallel mediation models show that Fear of War fosters Intolerance of Uncertainty and Future Anxiety, with the latter increasing the likelihood of experiencing psychological distress. The findings also show significantly higher levels of Depression, Anxiety, Stress, Fear of War and Future Anxiety in women.

These findings shed light on new trajectories aimed at understanding the sources of youth distress, highlighting the pivotal role of potentially traumatic collective events. They also contribute to the implementation of targeted intervention projects, among which the construction of a group space where one can express and, above all, share the 'negative' associated with such events. If reflection practices enhance individual capacities of representation and understanding, the 'discovery' of sharing worries and fears may counteract the sense of loneliness and powerlessness. By reinforcing cognitive and emotional skills, group work may enhance individual and group agency, helping to better tolerate the inevitable uncertainty associated with developmental transition as well as rekindling the hope of being able to affect reality - a crucial building block for a 'good enough' perspective on the future.



NEW PERSPECTIVES IN PSYCHOPATHOLOGY OF SEXUAL BEHAVIOR

Proposer

*Lilybeth Fontanesi*¹

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Discussant

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Abstract

Understanding the complexities of human sexual behaviour is a multifaceted endeavour, especially when it intersects with psychopathology and social problems. This symposium aims to delve into the latest advancements and emerging trends in the study of psychopathology related to sexual behaviour, according to the bio-psychosocial model. The symposium seeks to explore novel methodologies, theoretical frameworks, and clinical implications that can enhance our comprehension and intervention strategies in the domain of clinical psychosexology and mental health. This symposium gathers a collection of recent research studies and clinical experiences in the field of psycho-sexology focusing on innovative approaches that integrate multiple perspectives highlighting the the bidirectional influences between psychopathology and sexuality.

First, Prof. Ciocca and colleagues will present their research findings about the relationship between Sociosexual orientation and the Capacity To Love by exploring differences in well-being and distress between sociosexual persons and a sample of subjects that do not respond to this orientation.

Dr. Costanzo and colleagues will present a research work about the mediating role of sexual concern in the relationship between emotion regulation and sexual arousal in women with anxiety disorder.

Prof. Limoncin and dr. Stanzani will discuss the influence of anxiety and depressive symptoms, personality characteristics and sexual functioning on the relational wellbeing in women in short and long-term relationship.



Finally, dr. Fontanesi will present the current research findings and clinical implications about the complex interplay between borderline personality and sexuality, discussing a case study of a young adolescent girl showing sexual identity issues and a problematic sexual conduct.



Emotion regulation difficulties and sexual arousal in women with anxiety disorders: the mediating role of sexual concern

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Abstract

Introduction: Anxiety has been conceptualized as an important risk factor for alterations in many areas of sexual functioning (i.e., sexual desire, arousal, lubrication, orgasm). Specifically, women with anxiety disorders frequently report problems with sexual arousal, conceived as the physiological and psychological response to internal or external sexual stimuli. However, it is still unclear which specific factors may undermine the experience of sexual arousal in this clinical population. Emotion dysregulation has a crucial role in the development of anxiety disorders and has been shown to be related to many sexual dysfunctions, including alterations in sexual arousal. Different mechanisms may explain this association. Among these, sexual concern (or sexual distress), defined as negative emotional responses (i.e., worry, frustration) related to personal and relational aspects of sexual experience, may be associated with both emotion regulation difficulties and decrease in sexual arousal. Thus, the aim of this study was to explore the mediating role of sexual concern in the relationship between emotion regulation and sexual arousal in women with anxiety disorders.

Methods: Participants were 156 women ranging in age between 18 and 57 years ($M_{age} = 28.22$, $SD = 7.46$); 89.7% were heterosexual, whereas 9.0% declared themselves as bisexual and 1.3% as homosexual. Women completed three self-report questionnaires: DERS, for the assessment of emotion regulation abilities; “Relational Concern” and “Personal Concern” subscales of the SSS-W, for the evaluation of sexual concern; “Sexual Arousal” subscale of the FSFI, for the assessment of female sexual arousal.

Results: Results showed that worse emotion regulation abilities were associated with lower levels of female sexual arousal. Moreover, sexual concern fully mediated this relationship, so that lower levels of emotion regulation skills were associated with increased sexual concern, which in turn was associated with decreased sexual arousal.



Discussion: Our findings suggested that difficulties of women with anxiety disorders in accepting and regulating their emotions may impair their ability to cope with negative responses of worry related to different aspects of sexual experience. In turn, increase in sexual concern and distress may favor the onset or the exacerbation of difficulties in sexual arousal.



Borderline personality disorder and sexuality-related issues: a single case study

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Abstract

Borderline personality disorder is often associated with various forms of impulsivity, including sexual impulsivity. Empirical research suggests that individuals diagnosed with borderline personality disorder exhibit atypical patterns of sexual behaviour compared to other patients. Specifically, they tend to demonstrate heightened levels of sexual preoccupation, engage in earlier sexual activities, pursue casual sexual relationships, report a larger number of sexual partners and instances of promiscuity, and may explore homosexual experiences more frequently with fluctuating sexual preferences or confusion about sexual identity. Additionally, individuals with borderline personality disorder seems to be more prone to engaging in high-risk sexual behaviours and experiencing sexual victimization. Through the discussion of a single case study of a 14-year-old female diagnosed with BPD, the present proposal aims at describing the psychosexual evaluation, intervention and outcomes of a 12 weeks immersive program, to illustrate the benefits of a psycho-socio-ecological approach in the treatment of BPD and sexual problems in adolescence.

A 14-year-old female from England, has been diagnosed with BPD and has come to the attention of social services due to self-harm, attempted suicide episodes, gaming addition and alleged psychological and sexual abuse in the family. She and her mother joined an immersive program of 12 weeks in Italy, that involves a multidisciplinary approach including a sexual evaluation and intervention due to the patient’s sexual identity issues and a-typical sexual behaviours. The assessment results revealed high levels of worry and paranoid thinking with respect to sexuality, negative perceptions and beliefs related to sexuality, confusion with respect to sexual identity, and uncontrolled and compulsive masturbatory behaviour.

The psycho-sexual treatment (along with other multidisciplinary interventions included in the program) focused on analysing sexual trauma, decreasing anxious states related to sexuality and defining aspects related to sexual identity, leading to greater control over masturbatory activity and related emotions and a general improvement in the patient's general functioning.



Sociosexuality and Capacity to Love

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Abstract

Introduction: Sociosexual Orientation has been described as "individual differences in willingness to have sex with people with whom there is no emotional relationship". Therefore, this study aims to investigate a possible correlation between Sociosexual Orientation (SO) and the Capacity To Love (CTL) and explore differences in well-being or distress between sociosexual persons and a sample of subjects that do not respond to this orientation.

Methods: Through an online platform, a convenience sample of 521 subjects was recruited. Enrolled subjects compiled a psychometric protocol composed of the Revised Sociosexual Orientation Inventory (SOI-R), the Capacity to Love Inventory (CTL-I), the Brief Symptoms Inventory (BSI) and the Relationship Questionnaire (RQ).

Results: A significant reverse correlation was found between the CTL and SO: unrestricted sociosexuality corresponded to a lower CTL. Psychological distress was present in the case of a limited CTL; in contrast, no correlation was found between psychological distress and sociosexuality. The SO also presented a significant correlation with the Dismissing Attachment Style as measured by RQ and the latter of which was also correlated with some sub-dimensions of the CTL. In fact, the analysis showed that both the CTL and the Dismissing Attachment Style were, respectively, protective and predictive factors of Sociosexuality. Limitation in the CTL, combined with an insecure attachment style, is associated with SO and psychological distress. Sociosexuality, although reversely correlated with CTL, is considered a non-pathological trait.

Discussion: Therefore, adequate knowledge about the relationship between the considered variables can promote sexual health and prevent some risky behaviours.



Psychological, psychopathological, sexual and personality-related aspects associated with dyadic wellbeing: an observational study on women in a short- and long-term relationship

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Abstract

Introduction: Relational wellbeing is a dyadic construct which is, in general, studied in relationship to relational and sexual satisfaction. However, few studies have considered to study the possible association of other psychological, psychopathological and personality-related aspects impacting on relational wellbeing. Aim of this study is to assess which psychological, psychopathological and sexual variables may predict the relational well-being in women in short- or long-term relationships.

Methods: A sample of 298 women in a long-term relationship (>6 months), (Group 1), and a sample of 92 women in a short-term relationship (Group 2), have been enrolled through an advertisement published on social media. Relational aspects were assessed with Relationship Questionnaire (RQ), and with Dyadic Adjustment Scale (DAS). Psychopathological variables were assessed with Generalized Anxiety Disorder (GAD), and with Patient Health Questionnaire (PHQ). Personality-related aspects were evaluated with Big five Inventory-10 items (BFI-10). Sexual variables were assessed with Female Sexual Function Index (FSFI), and with Orgasmometer-F.

Results: No statistically significant difference was found in terms of total dyadic adjustment between the two study groups (short-term vs long-term relationship). Considering the long-term relationship, regression analysis showed that affective expression is significantly predicted by FSFI total score ($p < 0,0001$; $r_{\text{part}} = 0,37$), dyadic cohesion by FSFI total score ($p < 0,0001$; $r_{\text{part}} = 0,25$) and by BFI openness ($p < 0,0001$; $r_{\text{part}} = 0,24$), and dyadic satisfaction by dyadic affective expression ($p = 0,0001$; $r_{\text{part}} = 0,22$), dyadic cohesion ($p = 0,03$; $r_{\text{part}} = 0,12$), and by dyadic consensus ($p < 0,0001$; $r_{\text{part}} = 0,29$). For short-term relationship, regression analysis showed that affective expression is significantly predicted by FSFI total score ($p = 0,003$; $r_{\text{part}} = 0,30$) and by attachment ($p = 0,008$; $r_{\text{part}} = -0,28$). Dyadic cohesion is not significantly predicted by any of the variables present in this study. Dyadic satisfaction is significantly predicted by BFI extraversion ($p = 0,03$; $r_{\text{part}} = -0,23$), and by affective expression ($p = 0,0001$; $r_{\text{part}} = 0,40$).



Discussion: This study shows that several sexual and relational aspects may determine the dyadic adjustment both in short- and long-term relationships. On the other hand, psychopathological aspects seem to not impact on relational well-being. Clinical couple-based assessment oriented to the improvement of dyadic adjustment should consider these preliminary indications.



THE USE OF NARRATIVE IN MEDICAL SETTINGS: EFFICACY AND NEW RESEARCH DIRECTIONS

Proposer

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Discussant

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Abstract

During the last decades the progressively noticeable role that clinical trials, protocols and big data hold in clinical settings have decreased the importance given to the patient’s illness experience. In this light, the use of narrative in clinical settings is a useful method to collect information on the patient's experience. This is important for both: a) revealing to healthcare professionals that evidence-based practices would take into account the patients’ personal evidence, thus helping in bridging the gap between medical knowledge and patient’s experiential knowledge of illness; b) sustaining patients in the construction of their life story, thus playing a possibly therapeutic role for patients. The current symposium aims to present and discuss several contributions exploring the use of narrative in different medical settings as well as its efficacy. Vizzini et al. (Sapienza University of Rome) explore in patients suffering from Systemic Sclerosis, a rare multisystem autoimmune connective tissue disease, the perceived impact of illness on their life through the use of the Emotional Text Mining highlighting different symbolic representations. Lemmo et al. (University of Naples Federico II) use narrative for exploring the significance given to the theme of healthcare and the motivation to self-care in a group of elderly with different chronic disease as a part of an intervention-research project. Findings showed differences in the narratives according to the motivational profile emerging from quantitative self-report measures. Negri et al. (University of Bergamo) applied the Referential Process computerized linguistic measures to the narratives arising from the use of the Thurston Cradock Test of Shame in young women suffering from eating disorders and healthy controls finding a greater presence of indexes of dissociations



in the clinical group. Massari (San Raffaele telematics) and Gennaro (Unipegaso) discuss findings from a systematic review supporting the use of narrative medicine as an efficacy tool for promoting patients' and caregivers' illness experience and integration in autobiographical story. All these studies suggest the importance of the use of narrative in medical settings, both somatic and mental ones, to obtain data helpful to improve healthcare workers' knowledge on illness, helping in the development of tailored clinical interventions.



A linguistic analysis of the cultural representations and symbolizations of patients suffering from Systemic Sclerosis about their illness experience

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Abstract

Background: Systemic Sclerosis (Ssc) is a rare multisystem autoimmune connective tissue disease that affects the skin and internal organs. Patients with Ssc experience changes in physical appearance, pain, fatigue and difficulties in carrying out daily activities. Ssc undermines self-image and identity, and leads to having to deal with the rarity of the disease and the sense of loneliness it brings. There is a paucity of investigations exploring patients' perception of how Ssc has impacted on their lives. Therefore, the aim of present study is to explore the symbolic representation of the disease and related impact on life in patients with Ssc.

Method: Forty-six women with Ssc (mean age=52,98 years; sd=12,84; 80% suffering from the disease \geq 4 years) were recruited from patients consequently admitted to the Department of Vascular Medicine and Autoimmunity at Sandro Pertini Hospital in Rome. Participants completed a socio-demographic questionnaire and an interview about the impact of the disease on their past, present and future life. Interviews were recorded, transcribed and the text was analyzed through the Emotional Text Mining.

Results: The analyses revealed 2 factors and 3 clusters. The first cluster describes the marital and romantic relationship, where the patients show their ambivalence for the need and fear of dependence to partner. In the second cluster the theme of physical changes due to the pathology emerges, expressing both the fear and the need to be recognized by others as sick. The third cluster expresses the theme of therapies, strongly connected to the hospital institution representing both the possibility of care and categorization as ill.



Conclusions: These findings shed light on the illness experience of people with Ssc from a symbolic and emotional point of view. These allow us to understand how crucial it is to consider not only medical dimensions but also patients' emotional ones to develop effective clinical interventions based on the real emotional needs of these patients.



Science and Consciousness in Healthcare: A Systematic Review on Narrative Medicine

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Abstract

Introduction: Narrative Medicine, an interdisciplinary field merging storytelling and medicine, has exponentially gained significance in recent years. Despite the considerable interest surrounding the topic, there is a paucity of systematic studies investigating narrative medicine from the perspectives of patients. This literature review employs the PRISMA method to systematically analyze research studies focusing on the impact of narrative medicine on the illness experience of patients and their caregivers.

Methods: We conducted a comprehensive search across databases including MEDLINE, PsycINFO, EBSCO Psychological and Behavioral Science, The Cochrane Library, and CINAHL. We employed keywords related to 'Narrative Medicine' and 'Narrative-Based Medicine' appearing in the titles or abstracts of works up to February 2024.

Results: Through meticulous screening and data extraction from the initial pool of 920 articles, 40 studies meeting the inclusion criteria were identified and critically analyzed. Despite methodological heterogeneity that may limit generalizability, the review highlights a positive impact of narrative medicine on patient and caregiver perspectives. Additionally, patient and caregiver narratives not only positively influence their well-being but also highlight their concerns and their requirements.

Discussion: This review addresses methodological limitations and suggests future research directions to bridge gaps in the literature. Challenges such as methodological heterogeneity and the paucity of standardized protocols persist. By illuminating the role of narrative medicine in shaping the illness experience of patients and caregivers, this review contributes to a deeper understanding of its potential in enhancing patient-centered care and fostering empathy within healthcare settings.



Specific linguistic modes of shame communication in patients with eating disorders

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Abstract

Introduction: Empirical studies and clinical models agree in seeing shame as one of the central emotional processes of psychopathological functioning. Shame in fact is that process that underlies the dissociation of emotional processes at the interpersonal and intrapsychic levels. If this is true in all severe psychopathologies it takes specific forms in eating disorder patients, where the body is the central medium used for self-definition in competitive confrontation with others. The aim of the study was to investigate specific ways through which shame and dissociation can be captured in the narratives of patients with eating disorders.

Methods: Twenty-nine eating disorder patients treated at a public hospital in northern Italy and 29 nonclinical participants matched for gender, age and education were enrolled. Both groups of participants were asked to complete the Thurston Cradock Test of Shame, a projective narrative test that collects narratives stimulated by figures and interpersonal scenes that indirectly elicit shame-related themes. The dictionaries of the Referential Process, a set of computerized analysis tools that analyze and measure linguistic style in terms of emotional expressiveness and reflexivity, were applied to the collected protocol transcripts.

Results: The stories told by eating disorder patients compared with those in the non-clinical group were twice as short as those in the clinical group, with more dysfluencies and lower emotional elaboration scores. Unexpectedly, the number of shame themes was lower in the clinical group, as was the number of shame defenses, while story resolution was significantly more dysfunctional.

Discussion: Compared with nonclinical people, eating disorder patients express shame without making it explicit; shame emerges from other linguistic (shorter narratives with more disfluencies and less elaboration) and content (more maladaptive story resolutions) cues. Dissociative processes are thus active, but these patients' typical motivation for good performance leads them to produce seemingly



shame-free stories. It seems necessary for practitioners to become skilled and sensitive to these modes of manifestation of shame and dissociation to avoid reinforcing them in the treatment of these patients.



Motivations for self-care and lifestyles change: narratives in the ageing process

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Abstract

The aging population and the average life expectancy are increasing over the years posing the healthy aging as a core objective to improve quality of life among the elderly. Although older adults may suffer from chronic diseases, cognitive impairment, and functional limitations, drawing on motivations for self-care and lifestyles changes can help reduce health problems, improve psychological well-being and strengthen illness sense of the grip. However, according to the Transtheoretical Model of Behaviour Change, the motivation is a dynamic process and the elderly people are often reluctant to make necessary changes, shifting from engagement towards ambivalence and rejection. The engagement in healthy aging seems to be determined by the current health status, by self-perception of aging, and by motivation to change habits.

This study part of a larger research-intervention project of the Pnrr Age.it has the aim of assessing motivational profiles in elderly people with chronic conditions. 30 patients aged over 60 were recruited in the Federico II University Hospital. All participants were prescribed drug treatment and physical rehabilitation activities. We were conducted ad hoc semi-structured interviews and were administered a quantitative questionnaires A quali-quantitative analysis of the data allowed for the identification of both the phase and type of motivation for change and the meaning making about self-care motivation; health behaviours change motivations and healthy ageing engagement and treatment adherence.

This study found a relationship between the stages of behavioral change regarding physical activities and the type of motivation, the degree of commitment and the degree of adherence to the rehabilitation program. The qualitative perspective regarding the main themes, values, discrepancies and emotional experiences of the elderly with respect to risks, values for health, self-care and the changes to be adopted. Narration allows you to offer more personalized intervention options such as motivational interviewing that have a greater chance of aligning with your personal identity, thus encouraging engagement processes.



**CROSS-BORDER PERSPECTIVES BETWEEN CLINICAL PSYCHOLOGY,
PSYCHOANALYSIS, SOCIAL ASPECTS AND LGBTQ+ ISSUES: THEORETICAL
PROGRESS, CONTROVERSIES AND INTERVENTIONS**

Proposer

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Abstract

The symposium aims to examine in depth the integration of clinical psychology and psychoanalysis in LGBT+ issues, focusing on theoretical advances, emerging controversies and clinical interventions. The topic takes on crucial relevance in the current context, where the recognition of LGBT+ rights is at the center of the social and political debate.

Key Contents:

1. **Innovative Theoretical Approaches**: We explore new theoretical perspectives within clinical psychology and psychoanalysis regarding sexuality and gender identity, including, post-structuralist and psychotherapeutic approaches.
2. **Controversies and Debates**: We address controversies and challenges emerging within the psychology community regarding the understanding and treatment of LGBT+ issues, including debates about conversion therapies and differences of opinion within various schools of thought.
3. **Culture of differences and gender-affirming paths in developmental age**. We develop the theoretical-methodological and clinical-epistemological reflection on the relationship between the culture of



differences and sexuality, having as conceptual anchoring the affirmation and valorization of pluralist models in developmental age.

4. * Emerging Sexualities*: We delve into the new challenges and opportunities presented by various forms of emerging sexualities, including gender fluidity, non-binary identities, and other unconventional forms of sexual expression.

Goals:

- Deepen understanding of LGBT+ issues in clinical psychology and psychoanalysis.
- Explore emerging theoretical perspectives and controversies in the integration of theory and clinical practice.
- Promote the adoption of inclusive and culturally sensitive approaches in clinical practices.
- Promote interdisciplinary dialogue and exchange of knowledge between psychology professionals.

The symposium aims to provide a space for discussion and reflection to advance the understanding and effectiveness of psychological interventions regarding emerging LGBTQ+ issues. issues.



Innovative Theoretical Approaches in Clinical Psychology for the care of LGBTQ+ people

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Abstract

The presentation focuses on the exploration of innovative theoretical and psychotherapeutic approaches within psychoanalysis and clinical psychology, with particular emphasis on the international framework. In a context characterized by an increasing complexity of clinical needs, it is essential to examine new theoretical and practical perspectives in order to improve the effectiveness of therapeutic interventions and ensure treatment that is sensitive and adaptable to different individual experiences.

The focus is on the most recent theoretical developments in the fields of psychoanalysis and clinical psychology, with the exploration of post-structuralist and queer approaches that offer new ways of understanding the mind and therapeutic processes. Through critical analysis of case studies and recent research, we demonstrate how these perspectives can enrich understanding of psychopathology and inform clinical practice.

Furthermore, innovative psychotherapeutic approaches are examined, with a particular focus on evidence-based modalities, in light of international practices and trends. We discuss the challenges and opportunities presented by the integration of different therapeutic modalities and the importance of tailoring clinical interventions to specific patient needs.

Through the presentation, we aim to stimulate debate and encourage the exchange of knowledge between participants, promoting clinical practice informed by the most recent scientific and theoretical discoveries at an international level. The ultimate goal is to improve the quality of care provided to people seeking support in managing their psychological difficulties, offering sensitive, effective and culturally appropriate treatment, in line with best practices.



Controversies and debates relating to gender affirmation paths. An international psychodynamic perspective

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Abstract

In the landscape of contemporary psychology, issues related to sexuality and gender identity are often the subject of debate and controversy. This presentation proposes to take a closer look at the controversies and challenges emerging within the psychological community regarding the understanding and treatment of LGBTQ+ issues. In particular, we will focus on debates surrounding gender-affirming therapies and differences of opinion within various schools of thought and in different contexts, including the USA.

Addressing these controversies is essential to promote evidence-based and human rights-respecting clinical practice. We will explore the arguments both for and against gender-affirming therapies, analyzing their ethical and clinical implications. Additionally, we will examine differences of opinion within the psychology community on key issues related to sexuality and gender identity, with the aim of fostering a deeper and more inclusive understanding of these issues.



Culture of differences and gender-affirming paths in developmental age. Constructs and reflections for the prejudice disconfirmation.

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Abstract

The object of this contribution is to address the relevant issue of gender-affirmative paths in developmental age. The developmental age is, in fact, the one in which the issues relating to gender identity are more complex and lend themselves to prejudicial/ideological positions. These positions are frequently expressed even by professionals (doctors, psychologists/psychotherapists) who do not possess specific knowledge and who, by proposing approaches based on not scientific evidence, put at risk the health and well-being of gender variance adolescents, with consequences not only *quoad valetudinem* but also *quoad vitam*. Transgender people are not born adults. The lack of a social and cultural representation of what happens in their internal world very often leads gender creative children/adolescents to be 'invisible' to a world that does not foresee them; in the rare cases in which they affirm themselves, they very rarely encounter acceptance and support from the adults, including that of the institutions responsible for their protection. The psychological problems of young transgender people do not depend on what is defined as gender incongruence in itself, but on stigma and adverse social experiences. Institutions - schools of all levels and healthcare institutions on the front line – have to combat any transphobic attitude, the main risk factor for psychopathological conditions. Internalizing a culture of differences means affirming that gender variance related to developmental age is a possible outcome of identity development. It is therefore essential to direct healthcare choices (both medical and psychological) towards implementing protection dynamics for transgender adolescence, guaranteeing both psychotherapeutic approaches capable of ensuring processes of gender identity affirmation and self-determination, and medical protocols aimed, for involved adolescents, at reducing the risk of complex psychopathological symptoms connected to the body development in an unwanted sense and at the possibility of widening the “diagnostic” window and psychotherapeutic support with a view to achieving a conscious and stable acquisition of elective gender identity. The contribution will therefore focus the discussion on the use of puberty blockers for transgender adolescents.



New challenges for non-binary gender identities: between clinical aspects, semantic gaps and socio-cultural implications.

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Abstract

The aim of this work is to examine the recommendations proposed to healthcare professionals who find themselves following gender affirmation paths for non-binary people. Non-binary people, starting from the concept of gender variance and therefore of inconsistency between the gender assigned at birth and their own gender identity, are those people who live their gender identity outside of the male or female binary. Non-binarism suggests a stimulating perspective in which gender identity must be considered within a non-linear spectrum in which masculinity and femininity are not opposites that cancel each other out. The literature on non-binarism has highlighted how the absence of training of healthcare personnel and clear guidelines represents a risk factor both for access and for the peaceful continuation of non-binary people in care and treatment paths. From this perspective, the World Professional Association for Transgender Health (WPATH), the international multidisciplinary association of professionals whose mission is to promote the highest level of standards of care and assistance for transgender and gender diverse people, is responsible for the editorial periodical of the Standards of Care (SOC), now in their eighth version. In this work, aspects related to the importance of personalized assessments and treatments for non-binary people will be explored both in terms of hormone therapy and gender affirmation surgeries. From this perspective, SOCs would seem to be able to represent a useful tool aimed at promoting both the work of healthcare personnel and the experience of non-binary people in gender affirmation paths. Furthermore, the data and reflections of an exploratory research experience that analyzed the life stories and experiences of some non-binary people, who turned to various Italian centers for the health and well-being of women, will be presented. transgender people who implement the indications on the inclusion of non-binary people in health promotion programs.



PERSPECTIVES IN CLINICAL PSYCHOLOGY OF AGING: FROM ASSESSMENT TO INTERVENTIONS

Proposer

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Discussant

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Abstract

The present symposium proposal arises in line with the Clinical Psychology of Aging Working Group's effort, and it is aimed at discussing towards which directions the research in clinical psychology of aging is evolving, underlining both challenges and opportunities.

Aging is a complex process, which is characterized by the progressive loss of functional and cognitive capabilities and increasing comorbidity. Beyond biological aspects, aging is a phase characterized by multiple personal life transitions. Indeed, age-related changes affect older adults multidimensionally on cognitive, physical and social level. Older adults' health status is (or should, at least) no longer identified solely with the reduced presence of diseases, but with the maintenance of psychological, physical and social well-being, despite the presence of multimorbidity. Thus, within a clinical-psychological perspective of aging, the adaptation processes of older adults have assumed a growing relevance.

On one hand, equally multidimensional should be the assessment of those psychological-clinical factors capable of shaping distinct aging trajectories. The focus is mainly directed to antecedent and modifiable factors, jointly able to figure as protective or risk factors for negative age-related outcomes.

On the other hand, stepping from assessment, research in clinical psychology of aging should not disregard a transition towards the design of psychological interventions intended for older people, as well as the evaluation of their effectiveness. The keystone increasingly appears to be designing tailored



interventions, resulting from a ratio between the strengths and weaknesses of the older person, and aimed at promoting the learning of effective adaptation strategies.

In these perspectives, the active involvement of caregivers appears a further crucial step, not only in taking charge but also along the caring process of older people. The dyadic caregiver-older patient relation appears complex. The care burden is often proportional to the older adults' health status, the degree of their functional dependency and their physical and cognitive frailty status. Whatever the case may be, it appears significant to identify, within this dyadic relationship, the presence of psychological, cognitive and emotional factors that can mutually influence the adaptation processes of both caregivers and older adults to their respective care-related experiences.



The impact of Cognitive Reserve on Aging Trajectories

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Abstract

Trajectories of decline from healthy ageing to dementia are not linear, they may range from a more attenuated to more accelerated cognitive worsening.

This study investigates the impact of Cognitive Reserve (CR) on cognition in a group of 117 individuals (mean age 74.89; SD=7.43) with difficulties in daily living. They were assessed in a neuropsychology unit and those who had been re-assessed three times during the following 10 years were included in this retrospective study. CR was measured with a summary score including education and occupation. A general decline in global cognitive performance was shown over time, especially from the second to the final assessment. When participants were divided into two groups based on their CR (high and low) those with high CR showed higher cognitive efficiency at each assessment and they did not show a significant decline from second to third assessment, even in case of a diagnosis of major neurocognitive disorder. Instead, the profile of those with low CR declined significantly.

CR seems to delineate cognitive trajectories of aging and although an expected increase in brain deterioration, individuals with high CR do not necessarily experience an accelerated cognitive decline as previously suggested, rather, they decline gradually coping longer with age-related changes.



Case-control, randomized pilot study aimed at promoting adaptive emotional regulation strategies in older adults and family caregivers: a study protocol

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Abstract

Introduction: The quality of dyadic relationships between older adults and family caregivers could be a protective otherwise a risk factor in terms of adaptation to age-related negative outcomes.

Methods: It will be conducted a controlled, randomized pilot study with follow-up at 12 and 24 weeks. Older adult (aged ≥ 65 years)-family caregiver dyads will be recruited. Conflicting dyads will be included based on the Dyadic Relationship Scale score. Older adults with severe neurocognitive disorder, psychiatric conditions, and sensory and/or functional limitations will be excluded. Family caregivers with psychiatric conditions will be excluded.

Dyads will be randomly included in Cognitive Behavioral Therapy (CBT) group or psychoeducational control group; eight-teen 50-minute sessions of CBT interventions will be delivered on a weekly basis for the first 12 weeks and on a bi-weekly basis for the further 12 weeks; psychoeducational intervention on emotional functioning will be delivered at baseline (t0) for each dyad.

As antecedent factors, personality traits will be investigated only at t0 in the dyads; frailty, cognitive, functional and physical status will be assessed in older adults only at t0. Dyads will be assessed at t0 and t2 (24 weeks) for the following variables: emotion regulation (ER), quality of life (QoL), anxiety and depressive symptoms, perceived loneliness. Caregiver burden will be assessed in caregivers at t0 and t2.

As for interventions, process evaluation will be carried in dyads at t0, t1 (12 weeks) and t2; outcome evaluation will be carried out in dyads at t0 and t2.

Results: It is planned to include 60 participants (15 dyads for group). Based on cognitive reconstructing of dysfunctional beliefs and acceptance strategies, the CBT intervention, compared to the sole psychoeducational intervention, is expected to favor the implementation of adaptive ER strategies in



both older adults and caregivers with positive effects on dyadic quality of life, dyadic levels of psychological distress as well as on caregiver burden's levels.

Discussion: Through the restructuring of beliefs potentially responsible for the onset and the maintenance of psychological suffering, older adults and family caregivers would be provided with an alternative reading of their respective emotional experiences, thus favoring a better psychological adaptation.



Clinical-psychological interventions with older people in nursing homes: quality of listening and characteristics of observation.

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Abstract

Elderly people living in care homes face a number of problems on a physical, emotional and even financial level, as well as the burden of living away from their families. The latter is an aspect that should not be underestimated, as the place where we live, what we call home, is an essential part of the process in which personal identity continues to build, with both the relational environment and the physical environment defining the "context" of aging. In conjunction with these aspects, the physical health of older people is often characterized by organic multipathologies associated with progressive cognitive decline. In order to grasp the complexity of older people's life experience, it is necessary to consider the intertwining of intrapsychic, intersubjective and environmental elements. Methods: A number of clinical vignettes are presented that aim to describe the qualities of listening and the nature of observation of older care home residents, within and beyond the clinical interview. Results: The vignettes illustrate a psychological way of listening to welcome, help and accompany an aging person, considering aging not as a symptom but as an evolutionary pathway. Such an intervention makes it possible to identify the aspects of greatest vulnerability in order to contain and reduce anxious-depressive experiences and social isolation, but also to promote the most integrated self-expression in the exploration of one's desires and expectations. Discussion: In the psychological-clinical listening to the institutionalized older person, the clinical psychologist is called upon to re-read the process of regression of the older person as a kind of process of experiencing psychological and affective domains in which it is no longer the higher cognitive functions that predominate, but the more primal, archaic and essentially bodily functions. The return to a feeling, and therefore to a life and a relationship, more characterized by unconscious somatic and emotional aspects that are less controllable, manageable and communicable, necessarily implies a profound revision of the relationship with this type of patient and of the way of thinking about the aging process in general.



P.E.R.D.A.S. People with Extreme Resources During Ageing in Sardinia: preliminary data from the study of narratives of a sample of long-lived individuals.

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Abstract

Introduction: Sardinia is characterized by certain areas and communities with a high rate of longevity, where an unexpected number of people live long and well and in good health. In order to contribute to the understanding of the variables associated with long life and longevity, over time, the focus has been on the psychological profile of samples of long-lived Sardinians. This time, the focus is on a sample of individuals over ninety and over one hundred years old residing in Perdadefogu, a small village in central Sardinia known for its high longevity.

Methods: During the study, semi-structured interviews were conducted. The transcripts of the interviews were analyzed using content analysis to identify the thematic cores.

Results: The following thematic cores emerged:

- **Guidance of Phronesis:** Phronesis, understood as the virtue that guides human action towards a good life in accordance with moral principles, emerges as a central element in the ethos of the long-lived.
- **Eudaimonia as a Good and Virtuous Life:** For the long-lived individuals of Perdasdefogu, eudaimonia is not seen as an end to be achieved through external or superficial means, but rather as the actualization of a good and virtuous life.
- **Personal Fulfillment and Sense of Accomplishment:** The importance of a life that justifies its duration and is fully realized emerges as a key element in the ethos of the long-lived

Discussion:

This study, conducted within the scope of Clinical Psychology of Aging, analyzes the importance of these themes in the lives of individuals over ninety and over one hundred years old and their impact on health and well-being. The values that emerged from the narratives represent a foundation upon which the elderly may have based their lives and seek to transfer to future generations. The analysis of the narratives suggests that these values may play a significant role in promoting the mental, emotional, and physical



health of elderly people. The authors discuss the possible impact of these psychological profiles in the development of psychological support interventions aimed at improving the health and well-being of aging individuals as well as future generations.



LGBTQ+ PEOPLE IN HEALTHCARE CONTEXTS: HEALTH PROCESSES AND OUTCOMES

Proposer

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Abstract

Despite significant progress in health equity, disparities persist among LGBTQ+ populations in accessing and resorting to quality care. In fact, LGBTQ+ people are less likely to access health care and to seek routine care than their cisgender, heterosexual counterparts. In addition, LGBTQ+ individuals are more likely to report unmet health care needs due to experiences of heterosexism and cisgenderism in the health care system, including stigma and inadequate cultural competency among health care providers. Therefore, we need to understand how these challenges impact healthcare outcomes, including delayed healthcare utilization and increased risk for mental and physical health problems. Regardless, it is time to integrate deficit-oriented models with health equity models to understand not only poor but also good health processes and outcomes, with the goal of identifying which psychological dimensions are most likely to promote optimal health trajectories. Based on these premises and within the framework of the PRIN 2022 project “Intersectional Stigma and Health Equity Promotion for LGBT People in Primary, Sexual/Reproductive, and Mental Health Care Settings”, funded by the Italian Ministry of University, the current symposium aims to present some recent and innovative research in the field of LGBTQ+ health. Specifically, as addressing the unique needs and concerns of LGBTQ+ people in health care settings is critical to promoting health equity and ensuring compassionate, affirming, and quality care for all people, we aim to highlight strategies to improve the experiences of LGBTQ+ people in health care settings and improve the education of health care providers on LGBTQ+ health issues. The symposium opens with



two systematic reviews. While Mezzalana et al. will address the most recent research on the experiences of LGBTQ+ people in healthcare, Cruciani et al. will present the most recent research on the attitudes, knowledge, and unmet needs of mental health providers working with LGBTQ+ people. In addition, Giovanardi et al. will present a study on the experiences of non-binary clients in psychotherapeutic relationships. Finally, Bonato et al. will present a study looking at the use of avatars as a clinical tool to support multidisciplinary teams and transgender clients on the journey to gender affirmation path.



Health-promoting and adverse pathways in healthcare contexts: A systematic review on the experiences of LGBTQ+ European individuals in healthcare settings.

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Abstract

Introduction: LGBTQ+ people face significant health disparities in healthcare, both in terms of access to and utilization of healthcare services. As a result, they are often prevented from fully benefitting from optimal health care, with negative consequences for their quality of life. As most research relates to the US context, the aim of the present work is to review the scientific literature on the healthcare experiences of LGBTQ+ people in Europe.

Method: In March 2024, a systematic search was conducted for quantitative and qualitative studies that explicitly addressed the experiences of European LGBTQ+ people in healthcare. PRISMA guidelines were followed, and Web of Science, PubMed and Scopus were used as databases. 3,105 records were initially found. The quality of the eligible papers was assessed using the National Institutes of Health's Quality Assessment Tool. Inter-reviewer agreement was calculated using Cohen's Kappa and resulted in a score of .93.

Results: A total of 31 studies were included in this systematic review. Most studies (n = 23, 74.19%) were qualitative, 5 (16.13%) were quantitative and cross-sectional, and 3 (9.68%) used a mixed-method design. Sample sizes ranged from 5 to 1,066 participants. Structural deficits in understanding the specific medical needs of LGBTQ+ people and internalized homo- and trans-hostility among medical staff were found to be major barriers to the health equity for LGBTQ+ people. The lack of specific education of health care providers can result in overt or subtle forms of prejudice within healthcare settings. The expectation of discrimination can also prevent LGBTQ+ people from accessing health services, leading to an increased risk of physical and mental health problems. Family and peer support was found to be a protective factor facilitating access to healthcare services for the LGBTQ+ population.

Conclusions: The lack of information about the needs of the LGBTQ+ population and the cis-heterosexist attitudes of healthcare professionals are grounds for interventions targeting healthcare providers to increase specific competencies in treating LGBTQ+ individuals. Promoting pathways that



facilitate access to and use of healthcare services in the face of intersectional stigma and from a lifespan perspective can contribute to a depathologizing approach for LGBTQ+ individuals.



Knowledge and attitudes of mental health providers towards LGBTQ+ individuals: A mixed methods systematic review.

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Abstract

Introduction: Lesbian, gay, bisexual, transgender and queer (LGBTQ+) people are less likely to access health care and utilize mental health services than their cisgender, heterosexual counterparts. Additionally, they are more likely to report an unmet need for care due to experiences of heterosexism and cisgenderism in healthcare settings. According to the *Culturally Competent Compassion Model*, deficiencies in skills and knowledge, as well as negative attitudes and behaviors among healthcare professionals, are linked to reduced likelihood of LGBTQ+ individuals seeking healthcare services. Similar mechanisms could also expand onto mental health settings, with detrimental effects on LGBTQ+ people, who have higher rates of mental disorders than the general population. For these reasons, a mixed methods systematic review was conducted to address knowledge gaps and attitudes of mental health providers (MHP) towards the LGBTQ+ individuals and their effects on service utilization.

Methods: The review was conducted in compliance with the PRISMA guidelines. Empirical qualitative and quantitative studies investigating knowledge and attitudes of MHP towards the LGBTQ+ population were searched using a predefined algorithm in 5 databases (PsycInfo, PsycArticles, PubMed, Scopus, Web of Science). Retrieved articles underwent a screening process and, after the application of predetermined inclusion and exclusion criteria, 32 articles were identified.

Results: Identified articles are consistent in showing generally positive attitudes towards the LGBTQ+ individuals among MHP as well as being comfortable in working with LGBTQ+ patients. On the other hand, retrieved literature highlighted several gaps regarding MHP knowledge when working with LGBTQ+ patients, including feelings of being inadequately skilled, lack of competence, and low clinical preparedness in addressing specific needs of the LGBTQ+ patients, inadequacy of available training and the desire of further LGBTQ+ education.

Discussion: MHP generally hold positive attitudes towards LGBTQ+ individuals but lack the knowledge and skills to address their specific needs effectively. Efforts to promote inclusivity and cultural competence at organizational and educational levels are thus crucial to improving care for LGBTQ+



patients, as addressing knowledge gaps may reduce disparities in access to mental health services for this population.



Avatar-assisted gender affirmation path: a personalized approach with avatars for better understanding transgender and gender diverse needs

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Abstract

The challenge of accessing clear information about hormone therapy often fosters unrealistic expectations, potentially leading to dissatisfaction. Given the wide range of gender identities, not everyone desires the same changes, with some opting for hormonal microdosing for minor adjustments. Avatars, as customizable virtual images, aid in deeper exploration of body image by visually representing anticipated physical changes, facilitating mental and emotional preparation. They also help explore discrepancies between actual and ideal body images. Research indicates that such discrepancies might correlate with lower body satisfaction and poor overall well-being, emphasizing the importance of self-representation exploration in supporting individuals on their gender affirmation path.

This single case study involves a transgender participant (assigned female at birth, 22 years old) who began a psychological gender affirmation path, which included clinical interviews and questionnaire assessments. The participant was asked to create three avatars: one representing their actual body image (A), one depicting their expected body image after a year of hormone therapy (E), and one illustrating their ideal body image (I). Brief interviews were conducted after each avatar creation session.

This exploratory study suggests that avatars could serve as a clinical tool to assist the multidisciplinary team and individuals undergoing gender affirmation in navigating their path. Specifically, avatars helped



in exploring realistic and unrealistic expectations about the bodily changes anticipated after one year of hormone therapy. They also highlighted discrepancies between the avatar models representing actual (A), expected (E), and ideal body images (I), thereby enabling clinicians to provide accurate and personalized information and fostering person-centered care. The analysis of interviews uncovered prevalent themes, including feelings of gender euphoria and concerns regarding potentially unattainable changes.

Avatars serve as visual representations that enable individuals to project their self-images, enhancing self-exploration and offering clinicians insights for person-centered care. These visual representations capture the nuanced internal views of one's actual, expected and ideal body images, aiding in setting realistic expectations and clarifying doubts. By promoting self-awareness, avatars have the potential to become a valuable tool in the gender affirmation path, benefiting both TGD individuals and healthcare providers.



Non-Binary Clients' Experiences of Psychotherapy: Uncomfortable and Affirmative Approaches

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Abstract

Introduction: Non-binary individuals often encounter unique challenges in psychological settings due to psychotherapists' general lack of preparation in handling non-binary gender identities. This unpreparedness can lead to both overt and subtle prejudices, adversely affecting the therapeutic alliance. This study aims to shed light on both positive and negative experiences of non-binary clients within therapeutic relationships. *Method:* The study involved twenty-five interviews with non-binary individuals aged between 19 and 35. *Results:* Through codebook thematic analysis, three primary themes were identified: (1) the self of the psychotherapist, which includes the influence of the therapist's personal (e.g., sexual identity) and professional (e.g., competence) characteristics on the therapeutic experience; (2) the practice of the psychotherapist, characterized by either affirmative actions (such as validation and microaffirmations) or negative interactions (including efforts to change gender identity, manifest aggressions, and microaggressions); (3) the therapeutic relationship, focusing on the formation of the alliance, as well as its ruptures and repairs, which hinge on the therapist's openness to non-binary identities. *Discussion:* Ensuring a safer environment for non-binary clients requires that psychotherapists include gender minority issues in their training. It is crucial for therapists to recognize and acknowledge clinical mistakes and foster a proactive attitude toward learning from clients' experiences, thereby valuing their unique perspectives. The findings are discussed by integrating insights from a study on the countertransference reactions of cisgender therapists working with transgender and non-binary clients.



**INVESTIGATING THE IMPACT OF PARENTAL OVERCONTROL AND OTHER
FORMS OF CHILDHOOD MALTREATMENT: INSIGHTS FROM CLINICAL AND
PSYCHOPHYSIOLOGICAL STUDIES**

Proposer

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Discussant

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Abstract

Introduction: Exposure to maltreatment, abuse and/or neglect during childhood is one of the most important predictor of symptoms severity and negative prognosis for almost all mental disorders. For this reason, the identification of different forms of childhood maltreatment (CM) is a challenging issue for researchers and clinicians. Although the role of CM in the development of psychopathology has been widely demonstrated, recent studies suggest that the current literature does not consider and include certain specific forms, such as parental overcontrol (PO). In fact, similar to CM, high levels of PO (i.e., the repeated and prolonged behavioral pattern of overprotection and intrusion by parental figures negatively affecting child autonomy and independence) are associated with various psychopathological manifestations and related neurophysiological alterations.

Methods: This symposium aims to explore the impact of different forms of CM, including PO, under different perspectives, ranging from clinical to neuroscientific domains.

Results/Discussion: These perspectives could help clinicians and researchers to better understand the etiopathogenetic processes underlying the development of several clinical pictures associated with CM as well as with this specific form of parenting style.

The impact of parental overcontrol on mentalization and emotional regulation abilities: a cross-sectional study in a sample non-clinical adults

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Abstract

Introduction: A growing body of research shows that childhood trauma (CT; i.e. emotional, sexual and physical abuse and neglect) can negatively affect both mentalization and emotional regulation abilities, representing a general risk factor for psychopathology. However, while the detrimental effect of CT has been widely investigated, the impact of other specific forms of CT, such as parental overcontrol, has been relatively understudied so far. Thus, the aim of the current study was to assess the association of parental overcontrol with both mentalization and emotional dysregulation in a sample of non-clinical adults, controlling for several confounding factors including CT severity.

Methods: 676 participants (193 males; mean age and standard deviation: 30.25 ± 11.65 years) answered an online survey including a form for sociodemographic data, the Mentalization Questionnaire (MZQ), the Difficulties in Emotion Regulation Scale-18 (DERS-18), the Overcontrol subscale of the Measure of Parental Style (MOPS), the Childhood Trauma Questionnaire (CTQ-SF) and the Brief Symptom Inventory-18 (BSI-18).

Results: Regression analysis models showed that parental overcontrol was independently and negatively associated with mentalization abilities ($B = -.020$; $p = .003$; CI: $-.033, -.006$) and independently and positively associated with emotional dysregulation severity ($B = .390$; $p = .001$; CI: $.146, .635$). Supplementary analyses showed that the total effect of parental overcontrol on psychopathological symptoms severity was significant and that both mentalization deficit and emotional dysregulation were significant mediators of such association.

Discussion: Despite longitudinal studies are needed to confirm our results, the current study showed that parental overcontrol, as well as other forms of CT, may affect the development of mentalization and emotional regulation abilities. Besides recommending the assessment of parental overcontrol in the measurement of CT in both research and clinical practice, the current results may inform preventive programs.



Adverse childhood events and internalizing symptoms: the moderating role of neural responses to threat

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Abstract

Introduction: Adverse childhood events (ACEs), defined as potentially stressful and traumatic events occurring during development, represent an established vulnerability condition for internalizing disorders. A potential mechanism for this association is that experiencing prolonged stress and trauma increases processing of threat and unpleasant cues, even outside of the context in which the maltreatment occurs. *Methods:* In this study, the interaction between ACEs and neural correlates of emotional processing in predicting internalizing symptoms was explored in a sample of 38 university students (20 females). Participants completed the Adverse Childhood Experiences Questionnaire to assess self-reported childhood maltreatment and adverse rearing contexts, and the Brief Symptoms Checklist to assess depression and anxiety. Then, electroencephalography (EEG) was recorded while they viewed pleasant, neutral, and unpleasant pictures from the International Affective Pictures System (IAPS). The late positive potential (LPP) was employed as a neural measure of affective processing. *Results:* ACEs were positively correlated with the LPP amplitude to unpleasant images, indicating that childhood maltreatment might be related to increased elaboration of threatening information in adulthood. Interestingly, the interaction between the LPP to unpleasant stimuli and ACEs significantly predicted greater symptoms of anxiety, but not depressive symptoms. Specifically, ACEs were associated with increases in anxiety symptoms when the LPP to unpleasant pictures was potentiated, whereas ACEs were associated with decreased anxiety symptoms when the LPP to unpleasant pictures was reduced.

Discussion: Together, these findings suggest that the LPP to unpleasant pictures may represent a useful measure for identifying individuals at greatest risk of experiencing anxiety symptoms following adverse childhood events.



From parental bonding to disordered eating: the mediating role of self-esteem, emotion dysregulation and anger expression

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Abstract

Introduction: Perceived parental bonding (care and overprotection), low self-esteem, emotion regulation difficulties, and anger expression are correlated and associated with disordered eating among adolescents. Also, the theoretical literature consistently highlights the crucial role of these constructs in the occurrence of eating disorder symptomology in clinical and non-clinical samples. However, no studies have examined all these variables simultaneously. The present study tested the independent and combined influences of such constructs on eating style (emotional, external, and restrained eating) with a path model separately for males and females.

Methods: A sample of 877 middle and high school students ($M_{age}=14.13$, $SD = 1.25$; *males*=468, 53.4%) was screened by means of self-report measures assessing parental care and overprotection (Parental bonding instrument), self-esteem (Rosenberg Self-Esteem Scale), emotion dysregulation (Difficulties in Emotion Regulation Scale-18), anger expression (redirecting anger inwardly or expressing anger outwardly; State-Trait Anger Expression Inventory) and eating styles (Dutch Eating Behavior Questionnaire).

Results: The model ($RMSEA=.060$; $SRMR =.047$; $CFI =.959$; $TLI =.902$) revealed that the paths from both low parental care and maternal overprotection to each eating style were mediated through low self-esteem, emotion dysregulation, and externalizing modalities of anger expression. The indirect effects between paternal overprotection and each pattern of eating habits were not significantly mediated by self-esteem, emotion regulation difficulties, and anger expression. No significant difference between males and females was observed ($\chi^2=20.05$; $p=.217$).

Discussion: These findings provide preliminary support for the hypothesized model of risk factors for disordered eating among youth and enhance understanding of the pathways linking the quality of parent-child relationships to the development of dysfunctional eating patterns. Preventive programs and



treatment approaches should be targeted at improving self-esteem and emotion regulation capabilities, including adaptive ways of expressing anger.



Maternal overcontrol is associated with increased resting state theta connectivity within the Salience Network: an eLORETA study

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Abstract

Introduction: Although Childhood Trauma (CT) generally encompasses several forms of maltreatment, such as physical abuse, emotional abuse, sexual abuse, physical neglect, and emotional neglect, recent studies suggest that parental overcontrol should also be included. It has been recently hypothesized that CT is involved in specific connectivity alterations in the Salience Network (SN). Therefore, the main aim of the current study was to investigate the relationship between parental overcontrol (i.e., both maternal and paternal) and Resting State (RS)-SN functional connectivity using the electroencephalogram (EEG).

Methods: 56 participants underwent an experimental procedure that consisted of completing inclusion criteria via an online questionnaire, then completing a battery of questionnaires that included both clinical (Measure of Parental Style, MOPS, Childhood Trauma Questionnaire, CTQ, and Brief Symptom Inventory, BSI) and sociodemographic variables (age, sex, education, tobacco and alcohol use), and undergoing EEG recording the following week. Four different frequency bands were used for EEG connectivity analysis (i.e., delta 0.5 – 4 Hz, theta 4.5 – 7.5 Hz, alpha 8 – 13 Hz, beta 13.5 – 30 Hz).

Results: A significant positive correlation was found only between the MOPS maternal overcontrol subscale and connectivity data in the theta frequency band ($r = .474, p = .027$), with higher overcontrol scores positively associated with increased theta activity between the right middle frontal gyrus and the left insula. This correlation remained significant in the *rho* partial correlation when controlling for sociodemographic and clinical variables such as general psychopathology (i.e., BSI-GSI) and all CTQ subscales, $r = .349, p = .020$. No other significant correlations were observed in the other frequency bands or between paternal overcontrol and SN EEG connectivity.

Discussion: Based on our results, we suggest that maternal overcontrol may promote the perception of the world as dangerous and as “a place from which to be protected”. Thus, the reported association between maternal overcontrol and increased SN-theta connectivity may underline automatic and controlled attentional detection of potentially threatening external stimuli at rest.



**SEVERE MENTAL HEALTH DISEASES AND ADDICTIONS: CLINICAL PSYCHOLOGY
AND HARM REDUCTION AS WAY TO HEALTH EMPOWERMENT**

Proposer

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Discussant

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Abstract

Approximately 80% of people with a severe mental health disorder will also have addictions at some point in their lives. Despite extensive sign of the complex interactions between severe mental diseases and addictions and the value of integrated treatment, the majority of people with concurrent disorders do not receive treatment that addresses both conditions. Clinical psychologists are ideally suited to bridge this gap in care, but this will not be without challenges. Clinical psychologists possess extensive skills in identifying, diagnosing, and treating mental health disorders, which are transferrable to addictions. Clinical psychologists also have formal training in supervision and consultation and thus can supervise or act as consultants for other professionals in treating concurrent disorders. They have expertise in program development, assessment, and research and can lead projects to integrate mental health conditions and addictions services. Barriers to clinical psychologists bridging this gap center on siloes in our healthcare system, the frequent lack of training for psychologists to develop competency and confidence in addiction diagnosis and treatment, misperceptions about how individuals' addictions respond to psychological treatment, as well as system barriers and lack of knowledge about the harm reduction approach. Overpowering these barriers comes with clear aids and will require changes to professional training, clinical practice, and research on evidence-based treatments for dual diagnosis. Harm reduction is an evidence-based approach that is critical to engaging with people who are addicted and equipping them with life-saving tools and information to create positive change in their lives and



potentially save their lives. Harm reduction also accounts for the intersection of addictive behaviours, other stigmatized behaviors, and people's health. Fundamentally, a harm reduction approach meets people where they are, engaging with them and providing support. Harm reduction opens the door to more options for these special population, for whom traditional treatment approaches are inaccessible, ineffective, or inappropriate — and who want to make safer, healthier choices with their life and health. By viewing addictive behaviour on a continuum, incremental change can be made, allowing for risk reduction to better suit a person's own individual goals and motivations. Most importantly, harm reduction approaches save lives and being at the leading edge of this change offers an important opportunity for clinical psychologists.



Advancing in GENESIS international trial: A 12-month RCT examining a harm reduction intervention in smokers with schizophrenia spectrum disorders

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Abstract

Background Smoking prevalence among people with mental disorders is about two to four times higher than in the general population. As a result of high smoking rates, people with a mental health condition also have high rates of morbidity and mortality from smoking-related diseases compared with the general population. Progress in reducing smoking prevalence in people with mental health diagnoses has been very slow compared to the general population. Consequently, there is a pressing need for alternative and more efficient interventions to reduce or prevent morbidity and mortality in smokers with schizophrenia spectrum disorders.

Methods A volunteer population of 258 adult smokers with Schizophrenia Spectrum Disorder will be recruited for the GENESIS study, a randomized, double blind, smoking cessation trial comparing effectiveness, safety and subjective effects between 5% and 1.5% nicotine e-cigarette combined with psychological support inspired to tailored motivational interviewing. The study duration will be 12-month. The primary endpoint of this study will be the continuous quit rate defined as the proportion of study participants who self-report that they had stopped smoking at 6-month, biochemically verified by exhaled CO measurements of ≤ 7 ppm. These participants will be referred to as “Quitters”. The differences in continuous variables between the two groups for normally distributed data will be evaluated by one-way analysis of variance (ANOVA). The differences between the two groups for not normally distributed data will be evaluated by the Mann-Whitney U test. Any correlation between the variables under evaluation will be assessed by Spearman r correlation. To analyze differences in frequency distribution of categorical variables we will use the Chi-square test with the Yates correction or the Fisher exact test. All statistical tests are two-tailed and are considered to be statistically significant at a P value <0.05 . The consistency of effects for pre-specified subgroups will be assessed using tests for heterogeneity. Subgroups will be based on age, sex, education, level of nicotine dependence.



Discussion This will be the first multicenter randomized trial directly comparing high (JUUL 5% nicotine) with low nicotine strength devices (JUUL 1.5% nicotine) in term of reduction in cigarette consumption, adoption rates, product acceptability, tolerability, and tobacco harm reduction potential. This knowledge can contribute to a better understanding of e-cigarette with high nicotine content as a pragmatic and much less harmful alternative to tobacco smoking with the possibility of significant health gains in smokers with schizophrenia spectrum disorders.



Examining the integration and efficacy of smartwatch technology in clinical institutional settings

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Abstract

We propose the use of Empatica® Embrace Plus smartwatches in institutionalized healthcare settings. These clinical devices, equipped with a multitude of sensors, measure parameters such as heart rate, wrist skin temperature, respiratory rhythm, electrodermal activity, and standard deviation of movement acceleration, in addition to raw data from gyroscopes and accelerometers. The real-time measurement and online display of these parameters could be instrumental in monitoring vulnerable or sensitive patients, particularly those with specific psychopathological or psychiatric conditions, such as substance dependencies. The objective is to enhance treatments and rehabilitation pathways, as well as the overall health of the patient during their stay in the facility. The integration of these smartwatches into the healthcare system could revolutionize patient monitoring by providing continuous, real-time data, thereby enabling more personalized and timely interventions. This could be particularly beneficial for patients with fluctuating conditions, where timely intervention can significantly impact outcomes. Furthermore, the data collected could contribute to a better understanding of the physiological correlates of various psychiatric and psychopathological conditions, potentially leading to improved diagnostic criteria and therapeutic strategies. Clinical smartwatches represent a promising tool for modern healthcare, with the potential to improve patient outcomes, enhance the efficiency of healthcare delivery, and contribute to the advancement of medical knowledge.



Efficacy of a structured Functional Therapy approach in treating Gambling Disorder: Clinical Findings

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Abstract

Background: Despite significant advancements in treatment methodologies for Gambling Disorder (GD), the exploration of effective therapies remains paramount. This study is designed to evaluate the efficacy of a standardized protocol derived from Functional Theory in treating GD. Functional Therapy (FT) is conceived as an integrated body-mind therapy that addresses the multifaceted nature of this disorder.

Methods: A group of forty-six individuals diagnosed with GD underwent the FT protocol, which consisted of 16 sessions conducted twice a week over a two-month period, all in individual settings. None of the participants were undergoing psychopharmacological treatment during the study. Psychological assessment was employed to measure treatment outcomes, including the South Oaks Gambling Screen, the PG-Yale-Brown Obsessive-Compulsive Scale (PG-YBOCS), State-Trait Anxiety Inventory (STAI), the Beck Depression Inventory – II version (BDI-II), the Barrat Impulsiveness Scale 11th version (BIS-11), and the Measurement of Psychological Stress (MSP).

Results: The intervention led to a significant reduction in the core symptoms of GD, such as gambling frequency, duration, financial investment, and expenditure. Accompanying these reductions were notable decreases in associated psychological symptoms including depression, anxiety, impulsivity, and perceived stress. Noteworthy these improvements were also maintained at 1 month follow-up, indicating the potential for long-term benefit.

Conclusions: The structured FT program highlighted substantial efficacy in ameliorating gambling behaviors and reducing related psychological issues such as impulsivity, depression, anxiety, and



perceived stress. The findings suggest that FT could be a viable and effective treatment modality for GD, characterized by good patient compliance and minimal dropout rates. The durability of treatment effects, as evidenced by sustained improvements at follow-up, further supports the clinical utility of this therapeutic approach. This pilot study lays the groundwork for future research into the long-term outcomes of FT for GD and its potential adaptation for broader clinical applications.



Harm reduction intervention for smokers with severe psychiatric disorders: A qualitative study on experiences with the electronic cigarette

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Abstract

Introduction: Beyond nicotine addiction as a biological phenomenon, psychological and social aspects need to be taken into consideration, which contribute to the meaning-making behind smoking behaviour. Those who suffer from mental disorders are particularly vulnerable to smoking addiction with higher rates of morbidity and mortality compared to the general population. This is why Harm Reduction approaches for this population, delivered by professionals with specific knowledge, as clinical psychologist, are crucial. However, there is still little knowledge about how smokers who suffer from psychiatric disorders experience Harm Reduction programmes, the therapeutic alliance and, consequently, which meaning they attribute to alternatives to the conventional cigarette.

Methods: Participants of the study are smokers with severe psychiatric disorders that participate in the Harm Reduction intervention “Genesis Trial” consisting in 6-month programme that promotes the electronic cigarette, reflect on their experience in semi-structured interviews. The qualitative data will then be analysed with Reflexive Thematic Analysis via Atlas.ti.

Results: In the absence of preliminary results, the researchers hypothesize that participants could report about the Harm Reduction programme’s influence on their smoking behaviour and, specifically, of the role of the therapeutic alliance. As an extension of it, the alternative to the conventional cigarette could be experienced as a transitional object, possibly reminding the participants of the common commitment to improve their health.

Discussion: This study contributes to the understanding of participants’ experiences of Harm Reduction programmes, the importance of therapeutic alliance with mental health professionals its influence on the attribution of meaning to alternatives to conventional cigarettes, such as electronic cigarettes.



**INTERPERSONAL DYNAMICS IN PERSONALITY DISORDERS: NEW INSIGHTS IN
AND OUT OF THE THERAPY ROOM**

Proposer

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Discussant

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Abstract

Navigating interpersonal dynamics can be particularly difficult for individuals with personality disorders. Such difficulties have an impact both in everyday life and in the therapeutic relation. In recent years, research started elucidating the mechanisms underlying interpersonal difficulties and daily fluctuations in personality states that play a role in interpersonal dynamics. In the present symposium, we will describe potential mechanisms accounting for interpersonal dysfunction in PD both in daily life and in the therapeutic relation.

The first presentation (Fanti et al.) will focus on a network analysis of the core elements of personality structure according to the object relations theory in patients and non-clinical controls. The second presentation (Somma et al.) will present data on a novel index of malignant narcissism that combines maladaptive personality traits dimensions. The third presentation (Tanzilli et al.) will investigate the role of adolescent patients' personality on the emotional reactions of therapists. Finally, the fourth presentation (Di Sarno et al.) will present ambulatory assessment data on the influence of narcissistic traits and interpersonal perceptions on the emotional experience of the therapeutic relation session-by-session.

Overall, this set of presentations will be discussed in light of core structural elements, mechanisms, and dynamics that play a role in the interpersonal dynamics that characterize personality disorders.



Patient Personality and Therapist Responses in the Psychotherapy of Adolescents With Depressive Disorders: Toward the Psychodynamic Diagnostic Manual-Third Edition (PDM-3)

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Abstract

Introduction: Depressive disorders in adolescence pose unique challenges for assessment and treatment, particularly due to high comorbidity with various personality disorders. Moreover, young depressed patients may elicit very intense and difficult-to-manage emotional responses in therapists (in this context, countertransference). This study aimed at empirically identifying specific personality disorders (or subtypes) among adolescents with depressive pathology and exploring distinct countertransference patterns emerging in their psychotherapy.

Methods: One hundred adolescents (58 with depressive disorders; 42 with other clinical conditions) were assessed by their respective clinicians (N = 100) using the Psychodiagnostic Chart-Adolescent of the Psychodynamic Diagnostic Manual-Second Edition (PDM-2), and the Therapist Response Questionnaire for Adolescents.

Results: Results showed that depressed adolescent patients exhibited marked traits of four personality subtypes – i.e., depressive, anxious–avoidant, narcissistic, and borderline – characterized by different levels of mental functioning and personality organization. These subtypes were predictably related to specific clinicians' emotional responses, even when controlling for the intensity of depressive symptomatology. Patients with depressive or anxious-avoidant personality subtypes evoked more positive countertransference responses, whereas patients with narcissistic or borderline subtypes elicited strong and hard-to-face emotional responses in therapists.

Discussion: Consistent with the next edition of PDM-3, the study emphasizes the importance of comprehensive psychodynamic assessment in the developmental age, which frames depressive disorders in the context of accurate emerging personality and mental functioning profiles. This approach, which also relies heavily on the clinician's subjective experience in therapy, provides crucial information on how



to specifically tailor interventions which more effectively meet the needs of adolescents with these heterogenous and complex clinical conditions.



Pathological narcissism, self/therapist perceptions, and emotions during treatment: An experience sampling study

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Abstract

Traits of pathological narcissism are linked with dysfunctional interpersonal processes and an array of negative emotions. Given their relevance in clinical settings, this study explores interpersonal and emotional processes linked to narcissism during psychotherapy sessions, using an experience sampling design.

Patients enrolled in individual psychotherapy are assessed on a number of trait variables, including grandiose and vulnerable narcissistic traits, prior to entering a 17-week experience sampling (ES) procedure. The ES procedure collects patient's emotions and patient-reported dominance and hostility (both relative to self and therapist's behavior) as they occur during treatment, session by session, with a brief survey administered after each psychotherapy session using a smartphone app and following an event-contingent design.

Preliminary data are available from 25 patients (19 female), rating an average of 3.72 sessions each and providing a total of 93 observations. Random-intercept multilevel models indicate that grandiose narcissism predicts describing one's behavior during the sessions as both dominant and warm, while vulnerable narcissism predicts describing one's behavior as hostile. Perceptions of therapist's behavior are not predicted by narcissism. Grandiose narcissism also predicts experiencing more pride in the interaction with the clinician. Current data suggest that no additional in-session emotion is predicted by narcissistic traits.

Though very preliminary in nature, these findings start shedding new light on the emotional and interpersonal dynamics associated with traits of pathological narcissism in clinical settings.



Malignant narcissism in community and psychotherapy participants

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Abstract

Introduction: Dimensional conceptualization of personality disorders may be useful to describe and understand the nature of different manifestations of personality pathology, including malignant narcissism. Recently, a sound scoring procedure for malignant narcissism (i.e., MNARC index) based on the Personality Inventory for *DSM-5* (PID-5) trait scores was proposed. The present study aimed at providing further evidence of the reliability and validity of the MNARC index in a sample of community-dwelling adults ($N = 288$) and in a sample of psychotherapy adult participants ($N = 168$).

Methods: All participants were administered the PID-5 and Five Factor Narcissism Inventory-Short Form (FFNI-SF). Moreover, community-dwelling adults completed the Machiavellianism Inventory-Version IV, Triarchic Psychopathy Measure, and Self-Report of Delinquency Scale (SRDS); rather, clinical participants were administered the Structured Clinical Interview for *DSM-5* Personality Disorders (SCID-5-PD), and Structured Clinical Interview for the *DSM-5* Alternative Model for Personality Disorders Module I.

Results: The MNARC index showed adequate reliability in both samples, and MNARC index mean score significantly discriminated clinical participants from non-clinical participants; moreover, according to exploratory graph analysis (EGA), the 11 PID-5 scale weighted scores shaped a highly coherent personality profile. In the community sample, MNARC index was significantly closer to grandiose narcissism than to vulnerable narcissism, as well as to Machiavellianism and even psychopathy. In multiple regression analysis, PID-5 MNARC index, showed unique, positive, significant, and non-negligible contribution to explaining the variation in all SRDS dimensions. Among psychotherapy participants, EGA findings suggested that MNARC index clustered together with histrionic personality disorder (PD), narcissistic PD, and antisocial PD symptom counts, as well as FFNI-SF narcissistic grandiosity. Notably, positive and significant associations between MNARC index, and impairment in personality functioning were observed.



Discussion: These findings seemed to support the reliability and validity of the MNARC index, expanding empirical knowledge of malignant narcissism, while providing additional support to the possibility to rely on the PID-5 for assessing constructs grounded in different theoretical perspectives.



Rolling in the Deep of Personality: a Network Analysis of the Revised Structured Interview for Personality Organization (STIPO-R) in Clinical and Non-Clinical Italian Samples

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Abstract

The concept of personality organization, proposed by Kernberg and colleagues, has extensively contributed to the understanding and treatment of personality disorders, facilitating a paradigm shift in clinical practice. The Structured Interview for Personality Organization (STIPO-R) is a semi-structured interview designed for the dimensional assessment of personality organization as elaborated by Kernberg.

In the present contribution, we tested the applicability and psychometric properties of the revised version of the Structured Interview for Personality Organization (STIPO-R) in the Italian population. In the first study, the STIPO-R was administered to 350 Italian participants, divided into 170 nonclinical participants and 180 clinical individuals. The theoretical dimensionality of the STIPO-R and the internal consistency of each scale were tested through Confirmatory Factor Analysis. Convergent validity was established using both criterion measures of maladaptive personality (Inventory of Personality Organization, IPO; Personality Inventory for DSM-5, PID-5) and general psychopathology (Symptom Checklist 90-R, SCL-90-R; Pathological Narcissism Inventory, PNI). Subsequently, a network analysis was conducted on the STIPO-R domains and subdomains to elucidate the interrelationships among personality organization components and investigate differences in their underlying structure in the community versus clinical sample.

In a second study, we tested how STIPO-R performed in evaluating the personality structure in three different samples: 60 participants from the community, 45 outpatients with SUDs, and 42 inpatients with DD of SUDs and co-occurring PD. Analysis of variance (ANOVA) revealed that SUD and DD patients shared poorly integrated identity and object relations, rigid and primitive defenses, poorly integrated moral values, and higher self-directed aggression levels compared to individuals from the community sample. Moreover, DD patients were characterized by a more impaired sense of self, overall maladaptive defenses, higher levels of other-directed aggression, and narcissism.



Findings contribute to providing a standardized and culturally sensitive tool for personality assessment in Italy, adequately capturing pathological dimensions of personality across different samples.



INTERDISCIPLINARY INSIGHTS INTO PHYSICAL ILLNESS: EXPLORING PATIENT PERSPECTIVES AND PSYCHOLOGICAL IMPACTS ACROSS DIFFERENT CHRONIC DISEASES

Proposer

*Alessandr Provera*¹

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Discussant

*Adriana Lis*¹

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

Abstract

The present symposium has been organized by the Early CAREER REsearchers' network (E-CARE) of the Clinical and Dynamic Section of the Italian Association of Psychology (AIP). The E-CARE association aims to facilitate learning, networking, and interdisciplinary collaboration among researchers in the early stages of their careers, promoting the exchange of expertise and fostering collaboration at both national and international levels.

The contributions featured in this symposium delve into various aspects surrounding physical illness, including patient perspectives on treatment, disease management, and psychological impacts across conditions such as sleep apnea, Crohn's disease, multiple sclerosis, and cancer susceptibility.

The first contribution by Poli and Di Domenico offers a systematic review on the feasibility, acceptability, and efficacy of psychological interventions utilizing digital health technologies for people with Multiple Sclerosis, highlighting their potential benefits, challenges, and future directions.

In the second contribution, Poletti offers a qualitative study based on the Interpretative Phenomenological Analysis (IPA) which explored the experiences of obstructive sleep apnea (OSA) patients and bedpartners with CPAP therapy, highlighting the importance of tailored interventions to enhance treatment adherence and improve overall quality of life, emphasizing the need for comprehensive support systems within OSA-affected couples.



The third contribution by Gattoni explores the role of mastery among individuals coping with Crohn's disease, examining its correlation with various aspects such as medical adherence, mental well-being, quality of life, perceived social support, and interoception. The findings underscore significant association between mastery, clinical and psychological variables, thereby emphasizing the necessity for additional research and psychological support for those affected by this disease.

Finally, Lombardi, Savio e Bramanti investigate the levels of cancer worry and perceived cancer risk among individuals who underwent genetic testing for cancer susceptibility genes, revealing significant correlations with anxiety, depression, stress, and coping strategies. Findings underscore the need to address emotional states and coping strategies in genetic counseling to effectively manage cancer worry and perceived risk.



A systematic review on Digital Health Technologies in psychological interventions for people with MS

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² Unit of Neuroepidemiology, Fondazione IRCCS Istituto Neurologico Carlo Besta, Milan, Italy

Abstract

Background: Multiple Sclerosis (MS) is a chronic disease of the central nervous system characterized by inflammation, demyelination, and neurodegeneration, leading to a wide range of symptoms. People with MS also experience symptoms of anxiety and depression, with a higher prevalence than in the general population. Digital health technologies (DHTs) are an emerging way of delivering MS care. Leveraging DHTs presents an opportunity to address the diverse needs of pwMS efficiently and effectively, improving accessibility. However, the use of DHTs in psychological interventions for people with MS require further investigation.

Aim: This study aims to systematically review psychological intervention using DHTs for people with MS, focusing on intervention feasibility, acceptability, and efficacy.

Method: PubMed, Web of Science, Scopus, CINHAIL and PsycINFO will be systematically searched, limiting the search to article published after January 2015. We will include peer-reviewed studies describing the evaluation or piloting of psychological intervention (e.g., psychotherapy, psychological support, psychoeducation, motivational) for adults (age \geq 18) diagnosed with any type of MS. Studies will be considered eligible if one (or more) DHT is included in the intervention delivery; articles using DHTs exclusively for assessment will not be included. Regarding efficacy, we will focus on quality of life and well-being but we will also consider psychological, social, clinical and physical variables. Regarding feasibility/acceptability of DHT, both qualitative and quantitative measurements will be included. Two independent reviewers will conduct the initial screening, review the full texts, and extract the data.

Results: The preliminary search has yielded 7851 articles. After the screening process we expect to produce: 1) a summary of what type of DHTs are used in psychological intervention, 2) a narrative synthesis and/or meta-analysis on acceptability, feasibility and efficacy of interventions, 3) a description of targeted groups (e.g., newly diagnosed).



Conclusion: The present systematic review will provide an overview of the current landscape of digital psychological interventions for people with MS, highlighting their potential benefits, challenges, and future directions. The results will help future intervention development and implementation in the clinical settings.

Navigating the Complexities of Obstructive Sleep Apnea: Insights from Patients and Bedpartners on CPAP Therapy and Relationship Dynamics

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Abstract

Obstructive Sleep Apnea (OSA) is a common sleep disorder characterized by repeated interruptions in breathing during sleep, often leading to daytime sleepiness and other complications. Continuous Positive Airway Pressure (CPAP) therapy is a widely used treatment, involving the use of a machine to keep the airways open during sleep. The involvement of bedpartners, typically spouses, in OSA management and CPAP therapy is crucial, as they often witness the effects of the disorder firsthand and play a significant role in treatment adherence. The main aim was to explore OSA patients and bedpartners experience with illness and CPAP therapy.

A qualitative study based on Interpretative Phenomenological Analysis (IPA) has been conducted at the Sleep Center of the IRCCS Fondazione Don Gnocchi (Milan).

17 patients who underwent CPAP therapy (Males: 13, 66.58 ± 12.34) and 17 bedpartners (Females: 12, 63.40 ± 10.12) were involved through audio-recorded semi-structured interviews, about themes such as illness perceptions and expectations, risk and protective factors associated with CPAP use and efficacy, and the bedpartner's role in the healthcare journey.

Following verbatim transcription of the patients' interviews, analysis using NVivo software unveiled three superordinate themes, relative themes, and sub-ordinate themes. These include: "Living with a mysterious and invisible illness" highlighting the hidden nature of OSA; "OSA, a shared experience" underscoring the impact of the disorder on both patients and bedpartners; and "A challenging management of CPAP" illustrating the difficulties encountered in CPAP therapy. Similar findings emerged from bedpartners' interviews.

In addition to qualitative data, clinical metrics were collected, including CPAP usage hours/night, the Apnea-Hypopnea Index (AHI), and the duration of CPAP usage in months.

Findings underscore the importance of understanding the perspectives of both couple members in coping with OSA and CPAP therapy. By shedding light on the unique challenges faced by patients and



bedpartners, healthcare professionals can tailor interventions to enhance treatment adherence and improve overall quality of life. Recognizing the burden of OSA within relationships emphasizes the need for comprehensive support systems and interventions that address the concerns of both individuals. Ultimately, fostering open communication and mutual understanding within OSA couples affected can facilitate better treatment outcomes and long-term adherence to therapy.



The role of mastery in Crohn's disease: a mixed-method cross-sectional study.

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¹ University of Florence, Florence, Italy

² IRCCS Fondazione Don Carlo Gnocchi, Milan, Italy

Abstract

Introduction: Crohn's disease (CD) is a chronic inflammatory bowel disease marked by autoimmune inflammations with a typical progressive destructive course. CD can impose significant stress on persons, affecting their mental health, quality of life, and sense of mastery. Mastery pertains to an individual's awareness of possessing abilities and capacities essential for effectively managing life events and situations.

This study aimed to investigate the role of mastery in relation to medical adherence, distress, perceived social support, quality of life, depressive and anxious symptoms, and interoception in persons with a diagnosis of CD.

Methods: The first qualitative phase explored the representations related to mastery and the psychological factors involved in the healthcare process of CD. The subsequent quantitative phase proposed to a larger sample the aspects emerged from the narrations.

Results: Employing the Interpretative Phenomenological Analysis approach, 20 eligible adults diagnosed with CD participated in a semi-structured interview. Significant findings highlighted the recurring theme of a lack of control and personal mastery in the narrations, underscoring the pivotal role of social support in managing CD. The themes also prominently included numerous mentions of stressful events, along with indications of anxious and depressive symptoms.

The cross-sectional phase involved 261 adults diagnosed with CD who completed an online survey composed of validated psychological scales (i.e. "Harvey-Bradshaw Index", "Medication Adherence Report Scale", "Hospital Anxiety and Depression Scale", "Perceived Stress Scale", "Pearlin Mastery Scale", "World Health Organization Quality Of Life", "Multidimensional Assessment of Interoceptive Awareness"), which lasted around 20 minutes. Data analysis reported discrete levels of mastery in patients with CD. Two factorial ANOVA highlighted statistically significant differences in mastery in relation to clinical conditions ($F(2, 253)=11.22, p<0.001$), and a significant interaction effect between gender



and symptoms ($F(2, 253)=7.22, p<0.001$). Multiple linear regression illustrated a statistically significant association between mastery, clinical conditions, quality of life, stress, and interoception (Adjusted R Square=0.558, $F(14, 211)=21.32, p<0.001$).

Discussion: Further studies are necessary to expand the construct of mastery in people with CD, considering the implications for mental health in CD, and the consequent frequent research for psychological support by patients.



The relationship between perceived cancer risk and cancer worry: an explorative research study among individuals undergoing genetic testing for cancer susceptibility genes.

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

Abstract

Introduction: Genetic predisposition, in the form of a pathogenetic variant of a cancer susceptibility gene, is estimated to account for 5–10% of all cancer diagnoses (Ford et al., 1995). Genetic counseling aims at improving individuals’ long-term health outcomes by identifying those at risk, prior to their development of cancer (Calzone et al., 2002). Individuals who underwent genetic counseling for cancer susceptibility genes must cope with cancer worry, perceived cancer risk, distress, and other psychological challenges (Hopwood et al., 2001; Lombardi et al., 2019).

This study aimed to analyze (1) cancer worry and perceived cancer risk levels of individuals, (2) correlations between cancer worry and the other investigated variables (anxiety, stress, depression, perceived cancer risk, coping strategies), and (3) whether the relationship between perceived cancer risk and cancer worry was mediated by emotional states such as anxiety and depression and moderated by avoidance coping strategies.

Methods: Participants were recruited from a Department of Medical Genetics. 189 individuals who underwent genetic testing for cancer susceptibility genes (e.g., BRCA 1/2 or other common cancer genes, such as APC, PALB2, or CHEK2) agreed to participate and completed all questionnaires. Participants’ mean age was 47.41 years (SD = 10.62; range = 25–75 years) and the majority were female (83.6%).

Results: We found that 46.4% of participants had high levels of cancer worry (requiring clinical attention) and 36.7% had high levels of perceived cancer risk. The correlation analysis revealed that cancer worry was significantly and positively correlated with perceived cancer risk, anxiety, depression and stress. Concerning coping strategies, cancer worry was positively associated with avoidance strategies and negatively associated with social support. The mediation and moderation model confirmed that anxiety and depression significantly mediated the relationship between perceived cancer risk and cancer worry. Furthermore, perceived cancer risk, in combination with avoidance strategies as a moderator, had a further impact on cancer worry.



Discussion: This study highlighted the importance of considering levels of cancer worry and cancer risk in individuals who underwent genetic counselling, and underlined the role of coping strategies and emotional states in the relationship between perceived cancer risk and cancer worry.



Thursday, 12th September 2024

THEMATIC SESSION

“NEW FRONTIERS IN ADDICTIVE BEHAVIORS RESEARCH”

Chair:

Patrizia Velotti

La Sapienza University of Rome



Factors Contributing to Problematic Gambling Behavior: testing a Moderated-Mediation Analysis on a sample of Regular Gamblers

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Abstract

Background. Gambling may serve as a leisure activity (i.e., a relaxing pastime that entails no negative consequences) for certain individuals, known as social gamblers. However, the problematic drift of this behaviour (i.e., gambling disorder) is an addiction leading to severe impairments across important domains of functioning. Given the clinical significance of this condition, the scientific international research on its antecedents is ongoing and continuously evolving. In light of this, the present study aimed to explore the associations between Problematic Gambling Behaviour and some risk factors, specifically focusing on alexithymia, dissociation, and locus of control.

Method. A sample of regular gamblers was involved in this research. They completed an online survey hosted on the Google Form platform. The collected data have been elaborated by implementing ANOVA and moderated-mediation analyses.

Results. ANOVA highlighted statistically significant differences in the levels of alexithymia, dissociation, and external locus of control based on the levels of Gambling Disease (Absence of Gambling Disease; At Risk for Gambling Disease; Problematic Gambling). Furthermore, a significant moderated-mediation model emerged, suggesting that the association between alexithymia and the severity of problematic gambling behaviour was mediated by absorption (a dissociation subdimension), with the indirect path moderated by external locus of control. The role of gender as a confounding variable was controlled.

Conclusions. These findings contribute to a deeper understanding of the potential risk factors and underlying mechanisms implicated in the emergence of problematic gambling behaviour, offering valuable insights for guiding future research efforts and informing clinical interventions.



Psychological distress, cognitive distortions, and mentalizing in chasing behavior among older-aged gamblers

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Abstract

Introduction: Despite the increasing participation in gambling activities by older adults, this age group is one of the least represented in the gambling literature. Chasing represents a key clinical symptom of gambling disorder and plays a prominent role in facilitating the transition from recreational to disordered gambling. Although the last decade has seen a significant increase in empirical research investigating the correlates of chasing, there is paucity of studies examining the factors contributing to chasing behavior among old-aged gamblers. The present study is the first to empirically investigate the role of psychological distress, cognitive distortions, and mentalizing in chasing behavior among older-aged gamblers.

Methods: The sample comprised 84 older-aged gamblers who performed the ChasIT, a computerized task assessing chasing behavior, in which participants were randomly assigned to three different experimental conditions: loss, control, and win. Participants also completed the South Oaks Gambling Screen, the Depression Anxiety Stress Scale, the Gambling Related Cognitive Distortions, and the Reflective Functioning Questionnaire to assess gambling severity, psychological distress, cognitive distortions, and mentalizing, respectively.

Results: Significant effect of the experimental conditions of ChasIT on chasing behavior was observed, with participants in the Loss condition playing for more trials. Regression analyses indicated that gambling severity and loss condition of ChasIt predicted both the decision to chase and chasing frequency. Chasing frequency was also predicted by old age, stress, gambling expectancies, and lower levels of certainty about mental states (i.e., hypermentalizing).

Discussion: The present study demonstrated that old age, problematic gambling involvement, previous gambling losses, stress, cognitive distortions, and hypermentalizing have a role in promoting chasing behavior among older-aged gamblers. These findings shed light on the variables that promote chasing behavior among older-aged gamblers, so providing critical information for future prevention and treatment protocols for this specific age group.



Which characteristics of personality favor the smartphone dependence risk in children?

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² Department of Biomedical Science, University of Milano, Milan, Italy

Abstract

In recent years an increasing use of Smartphone in school-aged children has been observed. Its interference in the management of emotions and relationships is causing a distortion of social and psychological functions (Sapacz, M., 2016; Scott, D., 2016). This research aims to verify the relationship between smartphone dependence risk and personality traits in primary school children. A self-assessment questionnaire (16 item) SARCQ (Conte et al. 2022) was administered in order to assess the Smartphone Dependence risk in a sample of children (N = 257; Mean age: = 108 months; StDev = \pm 9 months). The test measures smartphone dependence risk according to two aspects: smartphone as a tool to handle emotions ("I'm Not Afraid Of You": INAOY) and the smartphone as a transactional object ("Linus Blanket": LB).

These dependence risk factors have been related to some personality traits. The Big Five Children Test (BFC) (Barbaranelli, et al., 2003) was administered in order to measure some personality traits in children. Results showed that the percentage of children emotionally dependent from Smartphone is 16% and the percentage of children using the Smartphone as a transitional object is 15%. The correlations between the factors of SDRCQ and BFC showed a significant negative correlation between INAOY and: (1) Friendliness ($r = -0.41$); (2) Conscientiousness ($r = -0.35$) and (3) Openness ($r = -0.41$). In contrast, a positive correlation ($r = 0.31$) with the Emotional Instability factor has been observed. Concerning LB, a significant negative correlation with Friendliness ($r = -0.31$) and with Conscientiousness factor ($r = -0.29$) was observed.

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



Factors Related to Sex Addiction and Internet Use for Sexual Purposes among Italian Young Adults

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Abstract

Introduction: As the Internet has proliferated, its use for sexual activities has become widespread, especially among young adults, yet research on the sexual well-being of Italian youth in the digital age remains limited. Therefore, this study seeks to investigate the socio-demographic factors and sexual behavior patterns associated with sex addiction and Internet use for sexual purposes among young Italian adults, while also examining the potential relationship between Internet use for sexual arousal and levels of sex addiction.

Methods: 390 Italian young adults (67% female, mean age = 23.78, SD = 2.81) completed an online survey. Socio-demographic data (age, sex, gender, sexual orientation, level of education, occupational status, presence of sons/daughters, living alone, relationship status) and information regarding their sexuality (frequency of autoerotism, sexual activities, number of lifetime sexual and romantic partners, use of the Internet for sexual purposes) were collected. Additionally, the Bergen-Yale Sexual Addiction Scale was used to measure levels of sex addiction. A series of regressions, chi-square tests, Mann-Whitney tests and ANOVAs were conducted to identify the socio-demographic and behavioral factors most commonly associated with levels of sex addiction and with the use of the Internet for sexual purposes.

Results: The 12% of the sample showed a score at the Bergen-Yale Sex Addiction Scale corresponding to sex addiction. Higher levels of sex addiction were observed among males, those with a lower level of education, individuals who engage in masturbation more frequently, and those with a greater number of lifetime sexual partners. The 86% of the sample (N = 337) reported using the Internet for purposes related to sexual arousal at least once in their lifetime. Having used the Internet at least once in life for purposes related to sexual arousal is more common among males, individuals with non-heterosexual sexual orientation, and those without children. Furthermore, those who have used the Internet at least once in life for purposes related to sexual arousal, compared to those who have not, showed a higher frequency of masturbation, a greater number of lifetime sexual partners without interest in developing a stable relationship and higher levels of sex addiction.



Discussion: Our findings underscore the complex interplay between socio-demographic variables and sexual behavior in shaping online sexual activities and the risk of sex addiction among Italian young adults. Particularly, the association between Internet use for sexual arousal, increased masturbation frequency, and a higher number of casual sexual partners suggests potential behavioral patterns influenced by online sexual activities.



Emotion dysregulation, reflective functioning, and disordered eating behavior related to excessive food intake: the role of food addiction

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² Center for intervention and Research on Family studies, University of Padova, Padova, Italy

Abstract

Background. Emotion regulation difficulties and deficits in mentalization often drive individuals to use maladaptive coping mechanisms like emotional eating, leading to compulsive and uncontrolled eating. However, the (possible) role of food addiction has been underexplored. This study examines how food addiction moderates the relationship between the above-mentioned variables.

Methods. 258 individuals [93 M and 165 F (Mage = 47.33, SD = 11.36); BMI from 31.25 to 41.11 (M = 35.27, SD = 5.21)] were enrolled from the general population and they were tested with the Reflective Functioning Questionnaire (RFQ), the Difficulties in Emotion Regulation Scale, Short Form (DERS-SF), the Emotional Eating subscale (EE) and the Uncontrolled Eating subscale (UE) of the Three Factor Eating Questionnaire Revised 18 (TFEQ-R-18), the Measure of Eating Compulsivity (MEC10), and the modified Yale Food Addiction Scale2.0 (mYFAS2.0). A moderated mediation analysis with observed variables was performed (5,000 bootstrap).

Results. The relationships between EDR ($p < .001$) and RFQ ($p < .001$) to EC were partially mediated by EE ($p < .001$) – $R^2 = 0.438$. Also, the relationships between EDR ($p < .001$) and RFQ ($p < .001$) to UE were partially mediated by EE ($p < .001$) – $R^2 = 0.453$. Moreover, these relationships were moderated by FA ($p < .050$).

Discussions. These results emphasize the crucial role of food addiction in the progression from emotion regulation difficulties and mentalization to both compulsive eating and uncontrolled eating via emotional eating. Furthermore, they underscore the pivotal role of emotions, suggesting potential strategies for psychological interventions by clinicians.



Cannabis Use Disorder, Alcohol Use Disorder, and Suicidal Ideation: Insights from a nomological network analysis

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Abstract

Introduction: Substance use disorder (SUD) is a common mental disorder consisting of the reiterated use of one or more substances despite the negative outcomes. In 2021, 46.3 million people met the diagnostic criteria for a SUD in the US. Of these, 29.5 million individuals met the diagnostic criteria for Alcohol Use Disorder (AUD) and 16 million for Cannabis Use Disorder (CUD). One of the most severe consequences of both those SUDs is suicidal ideation (SI), which in 2021 was reported by 12.3 million people in the US. The aim of this study was to explore the complex relationship among AUD, CUD, SI, demographic factors, sociocultural features, stressful events, and mental distress.

Methods: We relied on a large epidemiological study named National Survey on Drug Use and Health (NSDUH) referring to year 2021. The sample, representative of the US American population, was composed of 44.360 adult individuals, almost equal by gender (55.68% female). We estimated a Mixed Graphical Model (MGM) consisting of only categorical variables.

Results: The network estimation was very precise, with excellent stability, and strongly inter-connected, with all but one significant edge. The most central nodes were age, mental distress, and CUD, while the strongest edges were mental distress-SI, age-CUD, AUD-CUD. All three variables of interest (e.g., CUD, AUD, and SI) were strictly related with each other and with mental distress. They were all developmentally characterized, as CUD and SI were most common in young adulthood, and AUD in middle adulthood. Gender gap was evident for SUDs, being more common in men, while this difference was not relevant for SI.

Sexual orientation was strongly relevant for SI, with bisexual individuals being at incrementally higher risk as compared to homosexual and heterosexual individuals.

Discussion: In conclusion, this study provides a comprehensive overview on how addiction to cannabis and alcohol and suicidal ideation occur when also considering sociodemographic and sociocultural contextual factors.



Thursday, 12th September 2024

THEMATIC SESSION

**“CHALLENGING PARENTHOOD AND FAMILY
EXPERIENCES”**

Chair:

Alessandra Santona

University of Milan-Bicocca



The role of anxious attachment style towards mother-father on problematic gaming in adolescence: a longitudinal study

Camilla Gregorini¹, Erika Pivetta¹, Claudia Marino¹, Alessio Vieno¹, Natale Canale¹

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Abstract

Introduction: Problematic gaming in adolescence might result from a compensatory strategy to mitigate negative emotions and fulfill attachment needs. However, the potential influence of attachment styles and the mediating role of dispositional factors in this association remains largely unknown. The aim of the present longitudinal study at two-time points (T1 = baseline; T2 = six months) was to test a model in which the anxious attachment style towards parents (T1) predicted problematic gaming (T2) and the potential effect of intolerance of uncertainty (T1) and gaming compensation (T2) as mediators. Gender differences were explored in these associations.

Method: Data were collected via an online questionnaire administered in Italy at high and middle schools. The model was examined via path analysis on the total sample [N = 581 adolescent gamers (Mage = 15.60; SDage = 1.55; 68.8% males)] and multi-group analysis to identify differences between males and females. Results: Anxious attachment style (T1) towards the mother (but not towards the father) positively predicted gaming compensation (T2). Furthermore, the anxious attachment style towards the mother (T1) indirectly predicted higher problematic gaming (T2) via increased intolerance of uncertainty (T1) and gaming compensation (T2). Moreover, the anxious attachment style towards the mother indirectly predicted problematic gaming via increased intolerance of uncertainty in males while via increased gaming compensation in females. *Discussion:* Those findings suggest that the anxious attachment style could be a vulnerable factor for the potential development of problematic gaming at six months. Moreover, such individual dimensions might act differently on problematic gaming through the mediating roles of intolerance of uncertainty in males and gaming as a coping strategy in females. Findings are discussed in relation to the clinical and preventive implications.



The parenting experience of children with type 1 diabetes: evidence on a possible relationship between sense of parental competence, health locus of control and levels of anxiety, depression, and somatization

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Abstract

The well-being and psychological health of parents of children with chronic illnesses can be influenced by perceived stress, emotional experiences, feelings of helplessness, low sense of self-efficacy, anxiety, and depression, reducing their quality of life. In particular, parents of children with type 1 diabetes are more likely to experience stress, anxiety, and depression than parents of healthy children. The aims of the present study are twofold: to investigate the relationship between levels of depression, anxiety, and somatization, the sense of parenting competence, and the health locus of control in parents of children with type 1 diabetes; to compare these dimensions in parents of children with type 1 diabetes and parents of children without chronic illness. The sample consisted of two groups. The experimental group comprised n=31 parents of children with type 1 diabetes, while the control group comprised n=71 parents of children without chronic and/or psychiatric conditions. To assess these aspects, specific measures were administered. The Brief Symptom Inventory-18 (BSI-18) to evaluate psychological distress; the Parent Health Locus of Control (PHLOC) to assess a parent's beliefs about a child's health and Parenting Sense of Competence (PSOC) to measure parental satisfaction and perceived competence in the parenting role. A one-way analysis of variance (ANOVA) and Pearson's correlations were carried out. Significant differences between the two groups in Depression and Internal Locus of Control levels emerged. A positive correlation between Internal Locus Of Control and Efficacy in both samples, and a negative

correlation between Somatization and Satisfaction in the experimental group were detected. No significant differences were found between the two groups for Parenting Sense of Competence. The findings suggest that, contrarily to the expectations, the sense of parental competence may not be compromised by the presence of the child's condition. The active involvement in supporting and managing the needs of a child with type 1 diabetes seems to emerge as a source of empowerment for the



parent, contributing to the maintenance of their sense of competence. The importance of considering the health locus of control and psychological distress is also emphasized.



Adaptations and generativity of parents of lgbq+ children more than 15 years after coming out: a qualitative lifespan study.

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² Department of Developmental Psychology and Socialization, "Sapienza" University of Rome, Rome, Italy

Abstract

Introduction: In Italy, there is a lack of in-depth studies on the experience of parents of LGBQ+ children and how parents adapt to their role after the coming out (CO). When experiencing acceptance from their families, LGBQ+ youth show improved self-esteem and better overall health, which underscores the significance of parental responses to the CO event. This study qualitatively explored parents' experiences starting from their children's CO, spanning retrospectively over a period of more than 15 years.

Methods: The study involved 15 Italian parents (9 mothers, 6 fathers) of 4 lesbian daughters (average age in years = 20.7; sd = 7.8) and 11 gay sons (average age in years = 23.0; sd = 6.2). A semi-structured interview analysed using ATLAS.ti software investigated parents' responses to the CO (average time elapsed in years = 20.1; sd = 4.8) and the long-term evolution of their experiences related to their parental role.

Results: The thematic analysis identified four themes: (1) risk and protective factors; (2) effects of CO on relationships; (3) parents' generativity; (4) life balance CO. The Italian socio-cultural context, particularly the conservative and Catholic environment in which the participants were raised, poses a challenge for the acceptance of LGBQ+ children, along with the difficulty of sharing the news with the extended family, especially grandparents.

Conclusions: Social milestones such as marriage and the grandchildren's birth seem to restore parents' protective role as they age. Numerous strategies identifiable as "parental generativity" are also reported, such as engagement in LGBQ+ activism or acknowledgment that the CO marked a transformative moment that led to a more authentic relationship with the child. The study provides valuable insights into how elderly parents adapt their social lives and relationships after the CO and can guide LGBQ+ associations and professionals in welcoming parents in this phase of their lives.



Impact of the Covid-19 Pandemic on Families at Risk: An Examination of Juvenile Court Records.

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² Tiarè, Health Mental Association Services, Turin

Abstract

Introduction: The Covid-19 pandemic has significantly impacted society, exacerbating pre-existing psychosocial vulnerabilities in some cases. Families, in particular, have been compelled to navigate the repercussions of pandemic-related restrictions and measures. Existing literature underscores Covid-19 as a stressor capable of disrupting the socio-economic and emotional equilibrium within families. This study aims to investigate the changes observed in families involved in juvenile court proceedings due to risks of abuse, neglect, and abandonment of minors.

Methods: The sample was obtained through collaboration with the Juvenile Court of Piemonte and Valle d'Aosta, which provided closed and definitive files pertaining to adoption and deprivation of parental responsibility procedures. The study period spans from 2019 to 2021, facilitating comparisons between pre-pandemic and pandemic-era files. The total sample comprises 152 proceedings, with 72 initiated before the onset of the pandemic. Through file analysis, 118 variables were identified and categorized into four domains: parental background, characteristics of the minor, service activation, and procedural aspects. Descriptive analysis and comparisons between pre- and pandemic-era samples were conducted.

Results: Findings indicate discernible changes between pre- and pandemic-era file samples. In post-pandemic families, both parents are more likely to be employed, albeit facing greater socio-economic disadvantages. The prevalence of parents with diagnosed or undiagnosed psychopathological characteristics has decreased, while parental conflict has increased.

Discussion: These results prompt reflection on the repercussions of extreme social and health events like Covid-19 on families, emphasizing the imperative of preparing for future changes through preventive measures targeting vulnerable aspects. There is a pressing need for awareness-raising initiatives directed at service providers to identify low-risk situations effectively, facilitating more comprehensive and efficacious prevention efforts.



Exploration of dyadic interaction features between caregivers and their autistic children.

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Abstract

Introduction: Autism socio-communicative difficulties deeply impact interaction with others. However, research focuses either on child socio-communicative difficulties or the consequences on parent behaviors, while bidirectional caregiver-child interaction variables have rarely been investigated.

The aim was to quantitatively and qualitatively characterize the dyadic interaction of autistic children with their parents, considering differences between mothers and fathers, while focusing on two constructs: Interpersonal Synchrony to gain knowledge about the structural aspects of the exchange and Emotional Availability, to study emotional aspects.

Methods: This study involved 56 paired parent-child dyads of 28 autistic children (mean age= 38.60 months, sd=9.50, range=22-58 months) interacting with their caregivers for 10 minutes, the child played with one of the caregivers first and the second one later. Specifically, they were asked to play as they typically would using a standard set of toys. The sessions were video-recorded and coded through the Emotional Availability Scales (EAS) and the Interpersonal Synchrony coding system (IS).

Results: Regarding IS, fathers and mothers did not show significant differences except for mother's widenings, which are more frequent ($W=504$, $p=0.03$, $r=0.29$) and successful ($W=150$, $p=0.03$, $r=0.44$). Parents and children showed similar Emotional Availability levels. However, these were not optimal, indicating that caregivers may struggle with structuring, sensitivity and that children present difficulties regarding responsiveness and involvement. Interpersonal Synchrony and child engagement was predicted by both parent and child's EA dimensions.

Discussion: This study revealed parents' similar abilities in interacting with their children, as well as children's ability to respond to them. Considering that fathers seem to be less involved in intervention than mothers, our study suggests the need to involve both caregivers, targeting interaction structure and affect features during the dyadic exchange.



**EMDR group intervention to reduce the perceived stress in parents with disable children:
efficacy study**

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Abstract

Background. Severe disability represents a factor of high family stress related not only to the care, but also to the insufficient knowledge of the procedures for taking care of one's relatives. National and international literature reports a few studies about using EMDR group interventions for reducing parents or caregivers stress. EMDR (Eye Movement Desensitization and Reprocessing) is a therapeutic intervention that can be also used to treat stress-related problems and it is based on the adaptive information processing (AIP) model. Objectives. The objectives of the present study were: a) to verify the effectiveness of the group EMDR intervention in reducing perceived stress in family members of minors with severe disabilities; b) detect a possible reduction in some psychopathological aspects linked to the daily management of the relative disability. *Methods.* This research involved 15 parents with children in charge of the Child Neuropsychiatry of Udine with important diagnoses in the field of childhood disability. 10 sessions of 90 – 100 min each were conducted, on a fortnightly basis, according to the EMDR group protocol by two trained EMDR therapists and a professional educator. Before the start of the first session, the PSS (Stress Perception Scale) and the SCL-90 (for the evaluation of some psychopathological components) were administered to the participants. At the end of the 10 sessions, the same scales were administered along with a satisfaction questionnaire. *Results.* The results demonstrated an important improvement in perceived stress and in some psychopathological components, as emerged on the SCL-90.



Conclusion. EMDR group intervention appears to be an effective approach in reducing the stress perceived by disabled people caregivers and it is useful in reducing anxiety and increasing mood related to the workload and uncertainty about the future of their relatives.



Paternal mind matters: exploring fathers' mentalization and its implications for family system and child's psychological outcomes

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Abstract

Introduction: Research interest has been dedicated to deepening the understanding of parental mentalization in parents, with a recent focus on paternal mentalization. However, the exploration of fathers' mentalizing processes remains limited. We therefore introduce a contribution that integrates findings from two separate systematic reviews conducted with the aim to examine the role of paternal mentalization on the family system and child's psychological outcomes within attachment theory. *Methods:* The two systematic reviews have searched in the main psychological databases – PsycInfo, PsycArticles, WoS, Scopus, Medline and PubMed – in accordance with the PRISMA guidelines. Studies were eligible if they studied paternal mentalizing as independent variable on variables related to family processes or child's psychological outcomes. The reason for conducting two reviews is because the number of studies dealing with paternal mentalization has increased dramatically after the first investigation: a total of 2116 records over thirty years (1991-2021) in the first review compared with 561 records over two years (2021-2023) in the second review. *Results:* The initial review, spanning from 1991 to February 2021, identified 36 studies exploring three operationalizations of paternal mentalizing: Parental Reflective Functioning, Parental Insightfulness, and Mind-Mindedness. Significant associations were found between paternal mentalizing and fathers' parenting characteristics, as well as broader family system and child's psychological outcomes. The updated systematic review, encompassing studies published between February 2021 and November 2023, identified 34 additional articles, reaffirming the significant influence of fathers' mentalizing processes on family dynamics and child development. *Discussion:* The combined evidence underscores the importance of paternal mentalizing in having a key role on family system and child's psychological development. Recommendations for future research include further examination of specific role played by paternal mentalizing, investigation of causal pathways, and development of mentalization-informed interventions involving fathers. This comprehensive synthesis advances our understanding of paternal mentalizing within the family context and highlights avenues for future investigation and clinical practice.



Risk and protective factors of parental psychopathology and mental health in the perinatal period: A narrative umbrella review

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² Faculty of Psychotherapy Science, Sigmund Freud University, Vienna, Austria

Abstract

Introduction: Becoming a parent means going through changes in emotional state, mood, and representations of self and others, and these changes represent a natural response of adaptation to the changes that the arrival of a child brings, from pregnancy to the postpartum months. However, the evidence on maternal and paternal risk and protective factors for psychopathology, distress, maladjustment, and mental health is currently fragmentary and sometimes contradictory. The aim of this narrative review is to summarize and synthesize previously published systematic reviews and meta-analyses on this topic.

Method: We systematically searched five databases including APA PsycInfo, APA PsycArticles, PSYINDEX, MEDLINE, Cochrane, and ERIC through April 10, 2024. We included systematic reviews and meta-analyses related to our research question. The final sample included 27 secondary research studies that were eligible based on theoretically established inclusion criteria. Methodological quality was assessed. Data extraction included the specific risk and/or protective factors examined and their association with reported outcomes.

Results: The vast majority of studies focused on maternal postpartum depression and depressive symptoms, followed by anxiety disorders, postpartum psychosis, and postpartum posttraumatic stress disorder. The vast majority of risk and/or protective factors for these outcomes concerned maternal personal factors (low income and educational level, history of mental and/or physical illness, pregnancy complications, history of pregnancy loss, childhood abuse, coping style, sleep disturbances, diet, and physical activity), followed by family factors (family support, emotional support from relatives, intimate partner violence, marital conflict) and environmental factors (stressful life events and life adversities, social support). None of the identified studies involved fathers.



Discussion: Maternal psychopathology and mental health are predicted by a complex array of personal, family, and environmental risk and protective factors. Further research is needed to better understand these relationships in mothers and especially in father.



Thursday, 12th September 2024

ROUND TABLE



OPPORTUNITIES AND CRITICAL ISSUES OF TPV: OPEN DISCUSSION

Participants

Sergio Salvatore, AIP President

Piero Porcelli, Section Coordinator

Adriano Schimmenti, President College of Dynamic Psychology

Eliana Tossani, Referent of the Training Commission of the College of Clinical Psychology Professors and Researchers



Friday, 13th September 2024

SYMPOSIUM SESSION



PSYCHOLOGICAL INTERVENTIONS IN DIFFERENT MEDICAL SETTINGS

Proposer

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Discussant

Lorys Castelli¹

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Abstract

This symposium aims to present different medical settings in which psychological intervention contributes to improving patient outcomes and clinical practice. Galli et al. begin this session with a comprehensive review of published studies exploring the effectiveness of Cognitive Behavioral Therapy (CBT), psychodynamic interventions, and psycho-education in the treatment of fibromyalgia. Tossani et al. then present findings from a retrospective cohort study examining trauma and post-traumatic stress disorder among intensive care unit (ICU) survivors post-COVID-19. This research highlights the pressing need for targeted psychological interventions in ICU settings. Continuing the symposium, Severo et al. review the literature to investigate the effectiveness of group psychological interventions in improving behavioral, psychological, and clinical outcomes of patients with cardiovascular disease. Finally, Giusto et al. systematically examine the results of the literature on digital tools and interventions aimed at promoting psychological well-being among informal caregivers of individuals with multiple sclerosis. In sum, while offering diverse perspectives, each presentation underscores the critical importance of integrating psychological interventions within medical settings. Despite diverse perspectives, each presentation illustrates the value of assessing psychological interventions within medical settings and paves the way for future research directions in this field.



Digital tools and interventions for promoting psychological wellbeing and resources among informal caregivers of people with multiple sclerosis

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Abstract

Multiple sclerosis (MS) is the most common neurological degenerative disease that causes disability in youth. As the disease progresses, people often develop an accrual of symptoms and worsened disability. Informal caregivers (ICs), typically family members, friends, or acquaintances, provide direct unpaid care and support, but they are usually not trained and prepared for this function. They frequently face frustration as they grapple with evolving needs in People with MS (PwMS) and may experience burden and emotional distress. This review aims to explore existent digital interventions and tools developed to provide support and promote psychosocial well-being and resources for ICs of PwMS (e.g., resilience, adaptation, health literacy, and empowerment), with the aim of integrating existent knowledge in a new intervention.

A systematic search of four electronic databases (i.e., PubMed, Scopus, PsycINFO, Web of Science) has been conducted, limiting the search to articles published after 2000. Publications are considered eligible for inclusion if they describe the development and/or implementation and/or evaluation of digital-delivered interventions or tools promoting psychosocial well-being and resources in ICs of persons with MS, with no restriction regarding MS type, level of disability, or sociodemographic characteristics of people with MS and caregivers.

An initial total of 2749 potentially relevant studies were found, with 1028 duplicates deleted. The results of the included studies will be analyzed and discussed, and clinical implications will be assessed. Expected outcomes are main characteristics, effectiveness, and feasibility and acceptability of the targeted interventions and tools.

The direct implications of the study are the detection of interventions' main characteristics and of the barriers and facilitators in terms of feasibility, acceptability, and involvement with such tools and interventions. Results will serve to design and pilot an intervention that has the best characteristics to provide support and promote psychosocial well-being and resources for ICs of persons with MS.

Group psychological interventions in patients with cardiovascular disorders. A Systematic Review

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

Abstract

Introduction: Cardiovascular diseases are the major cause of death worldwide. Emotions such as anger and anxiety could be risk factors for coronary heart disease. Scientific evidence confirmed that chronic anxiety increases the risk of coronary heart disease through effects on unhealthy behaviors and autonomic nervous system activity. Difficulties in negative emotion regulation were associated with the onset of cardiovascular diseases and their worse prognosis and mortality. This systematic review aims to investigate the effectiveness of group psychological interventions in improving behavioral, psychological, and clinical outcomes of patients with cardiovascular disease.

Methods: This systematic review was conducted according to the Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA) checklist. Studies were identified through the following electronic databases: Pubmed, Scopus, and Web of Science. The following search string was used: (emotion training OR psychological intervention* OR psychotherapeutic intervention* OR psychotherap* OR psychological rehabilitation OR emotion focused therapy OR emotion* regulation intervention*) AND (hypertension OR cardiovascular disease OR coronary heart disease OR heart failure OR cardiac morbidity OR cardiac patients OR myocardial infarction OR heart attack OR angina pectoris OR cardiac rehabilitation OR stroke OR Major adverse cardiovascular events OR MACE*) AND (group*) AND (outcome* OR mortality).

Results: 43 studies were selected and a total of 12,324 patients were included. The most common conditions were coronary artery disease, myocardial infarction, and acute coronary syndrome. Group psychological interventions were shown to be useful in patients with cardiovascular disorders, being associated with improved quality of life and mental health, reduced cardiovascular risk factors, increased healthy behaviors, and improved perceptions of the disease. However, many interventions showed lower efficacy in clinical outcomes in terms of mortality or rehospitalization.



Conclusions: Group psychological interventions could improve the overall care of patients with cardiac and cardiovascular diseases. However, given the heterogeneity of the methods and outcomes examined, further studies are needed to evaluate the impact of these interventions on cardiac morbidity and mortality over time.



Trauma and PTSD in ICU Survivors Post-COVID-19: Evaluating the Need for Targeted Psychological Interventions

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³ Ospedale M. Bufalini, Cesena, Italy

Abstract

Introduction: The COVID-19 pandemic has led to significant admissions to Intensive Care Units (ICUs), where patients face not only immediate physical health challenges but also long-term psychological impacts. This study focuses on Post-Traumatic Stress Disorder (PTSD) and associated trauma in patients discharged from ICUs after COVID-19 treatment.

Methods: This retrospective cohort study included 81 adults who were admitted for COVID-19 to the ICU at Bufalini Hospital, Cesena, Italy, from March 2020 to January 2022. We examined the severity of COVID-19, long COVID symptoms, perceived psychological support, and mental health outcomes including PTSD, anxiety, and depression through hierarchical regression analysis.

Results: Findings revealed that prolonged COVID-19 symptoms were significantly associated with lower quality of life ($R^2=0.48$, $p<0.001$) and increased symptoms of PTSD ($R^2=0.22$, $p<0.01$), anxiety ($R^2=0.26$, $p<0.001$), and depression ($R^2=0.12$, $p<0.01$). Perceived psychological support was negatively associated with quality of life but did not significantly impact PTSD or other mental health outcomes. The severity of the initial COVID-19 infection did not correlate with the psychological outcomes measured.

Discussion and Conclusions: The results underscore the critical need for focused psychological interventions to address trauma and PTSD among ICU survivors. PTSD remains a pervasive issue, often exacerbated by the intensive and traumatic experiences within ICU settings. Literature supports the deployment of cognitive-behavioral therapy and other psychological interventions tailored to the unique stresses of the ICU environment. Integrating routine psychological screening, particularly for PTSD and related trauma, into ICU care protocols could significantly enhance recovery and improve long-term mental health outcomes for survivors. Future research should prioritize developing and testing interventions specifically designed to prevent and manage PTSD in this high-risk population. This approach will not only address



immediate psychological needs but also contribute to the overall recovery and quality of life of ICU survivors.



Psychotherapy in fibromyalgia: The state of the art and new directions

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Abstract

Background and Aims: Fibromyalgia (FM) is a persistent syndrome predominantly affecting women marked by widespread pain, fatigue, sleep disruptions, and mood fluctuations. Its intricate pathogenesis poses a clinical puzzle, prompting integrated approaches combining pharmaceutical and non-pharmaceutical treatments. Despite a surge in studies, literature lacks a definitive indication of the efficacy of psychological interventions on specific FM-related outcomes. This contribution aims to offer an overview of recent evidence concerning the effectiveness of psychological and psychotherapeutic interventions for FM and their impact on associated outcomes.

Methods: A systematic review of the past decade's literature was conducted across pertinent databases, including PubMed, Web of Science, PsychInfo, and Cochrane. Search terms encompassed FM + psychotherapy, cognitive-behavioral therapy (CBT), non-pharmacological treatment, counseling, mindfulness, psycho-education, and psychological treatment. A total of 453 relevant articles were scrutinized for this analysis.

Results: Predominantly, CBT approaches like Acceptance and Commitment Therapy (ACT) and Mindfulness-Based Stress Reduction (MBSR) are among the most studied and utilized in FM treatment. Other effective modalities include biofeedback, hypnotherapy, psycho-education, and psychodynamic interventions, such as Emotional Awareness and Expression Therapy (EAET). Most studies focus on outputs on perceived pain, sleep disturbances, fatigue, affective symptoms (e.g., depression, anxiety), functional limitations, and cognitive impairments. However, results regarding the efficacy of CBT, ACT, and MBSR show discrepancies, particularly in intermediate treatments (6-12 months). EAET exhibits limited evidence for the few studies reported. Biofeedback and hypnotherapy show moderate efficacy in pain relief and psychological distress reduction, albeit with conflicting results. Psychoeducational programs and other psychodynamic therapies demonstrate low-level evidence in improving various FM symptoms. Multidisciplinary interventions integrating diverse treatments showed effective results in alleviating symptoms especially in the short term (1-6 months).



Conclusion: Recent guidelines, such as those from EULAR and NICE, strongly advocate for multidisciplinary and personalized treatment approaches combining pharmacological and non-pharmacological options. This review underscores the nuanced effectiveness of different therapeutic modalities and highlights the necessity for further research to refine protocols and comprehend the long-term implications for FM management.



MIND OVER BODY: PSYCHOLOGICAL ECHOES IN PHYSICAL HEALTH

Proposer

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Discussant

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Abstract

The symposium explores the dynamic interactions between the mind and body, presenting cutting-edge research across various disciplines that highlight the profound impact of mental states on physical health. The presentations cover a range of topics, including the modulation of depression symptoms through mindfulness-based interventions, the role of attention in enhancing placebo effects, the interconnected symptoms of fibromyalgia and their psychological underpinnings, and the influence of positive expectations on migraine treatment outcomes. The session will discuss the mechanisms through which psychological processes can alter physiological responses, suggesting potential therapeutic strategies that integrate mental and physical health practices, but also introducing potential pitfalls and limitations.



The Role of Attention in Shaping the Placebo Effect

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Abstract

Introduction: the Bayesian mind framework applied to placebo responses and other mind-body interactions suggests that effects on the body result from the interaction between priors, such as expectations and learning, and likelihood, such as somatosensory information (Pagnini et al., 2023). Despite significant research on priors in this area, the relevance of likelihood has been surprisingly neglected. Likelihood can be influenced by manipulating attention towards sensory information, through mindful attention, which is characterized by a reduction in the influence of priors and a focus on sensory information in the present moment. This study aims to examine whether these forms of attention to sensory information can modulate mind-body interaction.

Methods: we propose to conduct a study on the role of attention as a modulator of the mind-body effect for physical performance in the general population, using a classic placebo induction. In particular, the study aims to evaluate the effect of perceived control within a placebo manipulation, comparing a classic placebo paradigm (an inert beverage is given that is presented, instead, as being capable of reducing the perception of fatigue) with a placebo control group (no deception) and a natural control group (subjects maintained under the same conditions as those under examination without undergoing any treatment), according to a within-between design.

Results: data collection is currently ongoing, and preliminary results will be ready by September 2024.

Discussion: attention focused on physical sensations could directly influence the body's physiological responses. Identification of the effect of perceived control within the placebo manipulation could improve our understanding of patient expectations and optimize doctor-patient communication. It could provide crucial information on the specificity of the placebo effect and guide the development of new therapeutic strategies that integrate mental attention with physical intervention.



The circular mechanisms underpinning the complex clinical presentation of fibromyalgia: A structural equation modelling approach.

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Abstract

Introduction: the present study explored the relationship between psychopathology, stress and relevant symptoms of fibromyalgia aiming to uncover the underlying cybernetic circular system.

Methods: a representative sample of fibromyalgia outpatients referring to the Clinical Psychology Unit of the “Città della Salute e della Scienza di Torino” University Hospital, Turin, Italy, was assessed for pain (Brief Pain Inventory), personal attitude to the pain (Pain Catastrophizing Scale), fatigue (Fatigue assessment scale), perceived stress (Perceived Stress Scale) as well as for depression (Beck Depression Inventory) and anxiety (Generalized Anxiety Disorder). The relationships between fibromyalgia symptoms and psychopathology were evaluated by a non-parametric correlogram and then confirmed by structural equation modelling to estimate also the mediator effect of stress and fatigue.

Results: contrary to expectations, the depression levels showed a direct effect on pain rather than vice versa. However, pain exerted an indirect effect mediated by stress and fatigue on the depression levels.

Discussion: the preliminary findings of the present study shed light on the entangled circular relationship between fibromyalgia’s main symptoms and depression, suggesting a pivotal role for a depression-focused approach in treating this particular, not so somatic symptoms disorder.



Short and long-term impact of positive expectations on the standard pharmacological treatment of migraine patients: an exploratory study

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Abstract

Introduction: Migraine is a common neurological condition, which heavily affect physical, psychological, and socio-economical functioning of patients. The role of placebo effect in chronic pain, including migraine, is scarcely explored. Since some studies showed that patients' positive expectations may induce a relief of pain, the present study investigated whether positive verbal instructions promoting hope and optimism associated to a given drug may positively influence the short- and the long-term outcome in patients with migraine.

Methods: One-hundred and two migraine outpatients were consecutively recruited and randomly assigned (1:1) to two different groups: 1) the experimental group (EG), in which verbal instructions promoting hope and optimism were associated to the pharmacological prescription; 2) the control group (CG), in which neutral verbal instructions were associated to the pharmacological prescription. Subjects were assessed before the pharmacological prescription for migraine associated to the verbal instructions (T0), 7-day (T1), 15-day (T2), 1-month (T3), 2-month (T4), and 3-month after the prescription (T5). The following self-report instruments were proposed at each time-point: the Headache Impact Test (HIT-6) assessing the level of disability due to the migraine, the Numeric Rating Scale (NRS) assessing the migraine pain intensity during the last attack. The Kellner's scale of change (KSC) was administered at T1-T5 for evaluating the perceived change of symptoms.

Results: No significative differences were found in HIT-6, NSR, and KSC between the two groups at any time-point ($p > 0,05$). The CG showed more negative expectations of having a painful migraine attack than the EC at T2 (4.86 ± 1.75 vs 3.80 ± 2.42 ; $p = 0,00$), T3 (4.53 ± 2.28 vs 3.41 ± 2.23 ; $p = 0,01$) and T4



(4.22 ± 2.13 vs 3.14 ± 2.45 ; $p=0,02$). At T5, the CG showed lower expectations about the efficacy of pharmacological therapy than the EG (1.00 ± 1.80 vs 2.14 ± 2.85 ; $p \leq 0.05$).

Discussion and conclusions: The association between verbal instructions inducing optimism and the standard pharmacological treatment did not lead a better outcome in terms of pain relief, disability of subjective change, even though the experimental group showed better expectations about pain and pharmacotherapy at some point.



Brain Heart Interplay in Mindful Self Contact in Depression.

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Abstract

The relationship between depression and mindfulness-based interventions (MBIs) is gaining attention, with MBIs showing promise in reducing symptoms and enhancing well-being. Exploring individuals' emotional style sheds light on the link between mindfulness, its dimensions, and depression. MBIs modulate the endocrine system, including the HPA axis, reducing cortisol levels and bolstering stress resilience. Additionally, MBIs influence brain regions involved in negative emotional processing. The brain-heart interplay (BHI) reflects autonomic and central nervous system activity and may serve as a biomarker for depressive symptoms. Studies suggest altered BHI communication in individuals with depression, particularly during rest and emotional tasks.

This study aims to estimate BHI index after two audio-recorded MBIs (i.e., Self-Contact and Loving Kindness), comparing 24 endocrinological patients with moderate to severe depression to 36 healthy controls. The neurobiological evaluation included recording EEG and ECG before, during, and after audio listening. The clinical assessment entailed self-administered psychological measures for depression, anxiety, stress, and emotional style in all its dimensions such as self-awareness, attention, resilience, outlook, social intuition, and sensitivity to context. A brief experience assessment was implemented at the end of the MBIs. This is the first study to investigate changes in functional directional BHI following MBIs techniques in depression. Our results are expected to show how different MBIs practices may elicit different neurobiological responses in individuals with depression, thus furthering our understanding of its psychopathology and potential therapeutic options.



**MENTAL HEALTH, PSYCHOSOCIAL ISSUES AND TREATMENT ADHERENCE IN
ORGAN TRANSPLANTATION**

Proposer

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Discussant

*Silvana Grandi*¹

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Abstract

The literature shows us that the transplant is not just a surgical operation, but a complex process, in which the extraordinary physiological and psychological stress places substantial demands on the adaptive processes of the patient and his family, and in every phase, from the moment of the first evaluation for intervention until subsequent rehabilitation, psychological and psychosocial problems can disturb the patient's adaptation and influence the therapeutic outcome.

In the pre-transplant period, the physical disorders of the worsening disease, the sense of uncertainty and threat to life, the events of loss and the forced changes in work and in the family and social environment are dominant. However, the existential situation and the illness experience of terminal uremic patients is very different compared to patients who have reached the terminal stage of other vital organs such as the heart, liver and lungs. Several studies have recognized significant correlations between psychological and psychosocial aspects and post-transplant outcomes, in several respects:

- psychic and psychosocial disorders appear to be predictive of psychological decompensation, non-compliance and poor adaptation in the post-transplant period;
- anxiety, depression, psychosocial risk factors are correlated with the number of rejections, infections and hospitalizations and with a worse quality of life post-transplant;
- the psychological-psychiatric evaluation and the measurement of coping methods and social support are predictive factors of post-transplant mortality.



Therefore, psychological assistance becomes important in this phase, not only for current help to patients, but also to recognize risk factors on which to operate preventively.

This symposium will analyze some central aspects of patients awaiting transplants and transplant recipients: psychopathology, therapeutic adherence and quality of life, with the aim of examining these issues in depth and discussing among experts who operate in this field.



Study of the psychological impact of kidney transplantation. Specific assessments during the transplant process: from waiting at the time of transplant to follow up.

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Abstract

Introduction: preliminary study that presents the psychological progress of patients during the kidney transplant process, from an evaluation phase for registration on the waiting list, to the day of the transplant, to the follow up at least one month after the transplant itself. The objective is to evaluate whether the transplant could represent a "traumatic" moment for patients, creating situations of psychological distress or making aspects contained before the operation untrue.

Methods: a retrospective study was conducted identifying the subjects who presented psychodiagnostic evaluations in the three defined steps (PRE-TX-POST). The sample is currently made up of 16 subjects evaluated through two instruments: SCL90R and SF36. Data analysis was performed using the Student's T test for paired samples.

Results: the results show statistically significant scores for the wait-tx phase (worsening of the scales: hysteria p 0.034, anxiety p 0.06, vitality p 0.033), wait-post (e.g. worsening of the scales: Phob p 0.054, physical activity p 0.015, physical role limitations p 0.001, social activities p 0.020, emotional role limitations p 0.002; improvement in the general health scale p = 0.030), tx-post (worsening in the scales: anxiety p 0.036, physical pain 0.011, social activities p 0.019, physical activity p = 0.036).

Discussion: Transplantation represents a moment in which significant variations are recorded, highlighting the global involvement of patients from both a physical and psychological point of view. In this overall situation, several nuances emerge, with statistical relevance, ranging from the limitation of the physical role to general health to the limitation of the emotional role to anxious symptoms. The worsening of the scales linked to physical and social limitations must also be read taking into account the post-intervention lifestyle, in which the healthcare professionals themselves recommend a controlled lifestyle given the important immunosuppressive therapy, an indirect indicator of good adherence to treatment and protection of the organ. The implications of this first study are linked to the possibility of identifying critical psychological areas in the process of inclusion on the transplant list, a decisive clinical moment



that allows planning preparatory interventions for the transplant program and promoting greater physical and psychological well-being.

Risk and protective factors for relapse to alcohol use in patients with alcohol-related liver disease and undergoing orthotopic liver transplantation.

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Abstract

Background: Alcohol-related liver disease ((ARLD) refers to liver damage caused by the inappropriate intake of alcohol for a prolonged time. This etiopathology is the second indication for liver transplantation, in fact, it represents the cause of almost 20% of all liver transplants in Italy and 30-50% in Europe.

The literature shows how psychiatric-psychological and psycho-social variables could impact on treatment compliance and the risk of post-transplant alcohol relapse. The study involves a retrospective and a prospective evaluation. The aim of the study is to evaluate the rate of relapse of alcohol consumption to stratify the consequences on transplantation and identify psychiatric-psychological and/or protective risk factors in a population of transplant patients for alcoholic liver disease.

Methods: For the retrospective part were examined, through consultation of medical records, subject to informed consent, the clinical, laboratory, psychiatric-psychological and psychosocial data of 131 patients undergoing liver transplantation in the time window between 2017 and 2022 belonging to the IRCCS Hospital. -University of Bologna. The data were preliminarily examined in order to characterize the patient sample through descriptive statistics.

Results: The sample of 131 patients is mainly composed of men (75.6%) and the average age is 61 years. The most represented diagnosis is post-alcoholic Laennec cirrhosis (67%) and the median pre-intervention MELD score is 19 (IQR 15-29). 9.16% have a previous psychiatric diagnosis with related psychiatric and anti-craving therapy. At the 5-year follow-up, 7.64% of the sample did not adhere to the prescribed therapies and 6.87% did not comply with the outpatient checks. Preliminary data reports a recidivism rate of 6.1% and a recidivism rate of 6.87%.

Conclusions: The integration of prospective and retrospective data will allow identifying the correlation between psychiatric, psychological, and social factors and the risk of alcoholic relapse. The identification



of risk profiles will make it possible to define further evaluation criteria for patients undergoing transplant screening and to structure multidisciplinary clinical pathways that comply with psychiatric-psychological and social risk factors to reduce the risk of alcohol relapse.

Psychosocial Suitability for Kidney Transplant through the SIPAT: Parental Bonding, Adult Attachment, and Psychopathological Symptoms as Protective- and Risk-Factors.

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Abstract

Introduction: Despite the well-recognized role of psychological conditions in kidney transplant candidates, scientific literature is lacking evidence evaluating how suitability for transplantation is associated with / predicted by parental bonding, attachment, physical and mental health.

Methods: Eighty-five patients with chronic kidney disease awaiting transplantation were recruited at the Italian Transplant Center and were administered the Stanford Integrated Psychosocial Assessment for Transplantation (SIPAT), the Attachment Style Questionnaire (ASQ), the Parental Bonding Instrument (PBI), the Short Form Health Survey-36 (SF-36), and the Middlesex Hospital Questionnaire (MHQ). Measures were entered in blocks in a stepwise multiple regression.

Results: Potential post-transplant issues measured by the SIPAT were significantly associated with key psycho-physical constructs. SIPAT was negatively predicted by maternal care ($\beta = -.35$, $p = .001$), secure attachment (i.e., confidence) ($\beta = -.23$, $p = .029$), and general physical health ($\beta = -.25$, $p = .016$) – which could be considered protective factors for transplant suitability. Conversely, anxiety symptoms were positively associated with SIPAT ($\beta = .32$, $p = .001$) and may serve as a risk factor for post-transplant issues.

Discussion: These findings highlight that in the evaluation of kidney transplant candidates greater attention should be paid to parental bonding, adult attachment, and psychopathological symptoms, as these factors may play a key role as protective or risk factors for post-transplant issues. A timely assessment of these constructs may improve the evaluation of psychosocial suitability for transplantation, as well as allowing



the provision of targeted psychotherapeutic interventions to enhance the acceptance and management of illness in patients awaiting kidney transplant.



Mentalization as a protective factor for adherence to immunosuppressant therapy in solid organ transplanted patients.

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Abstract

Introduction: Transplant restore good physical recovery and higher quality of life, but patients may experience complications and psychological distress even after years post-surgery due the chronicity of this peculiar condition. Indeed, recipients with higher levels of psychological distress are more likely to be non-adherent, thus exposed to severe post-transplant adversities. Since poor mental health represents a risk factor for non-adherence, the aim of this study is to assess the protective role of reflective function, where its expression reveal a crucial role in emotional regulation and adaptation to critical life conditions, such as grief and chronic illness. The main hypothesis includes reflective function as a moderating variable on the relationship between mental health and medical adherence, where transplant recipients with a low reflexive function, therefore oriented to hypomentalization, have lower levels of adherence in the face of the psychological distress experienced. *Methods:* The sample was composed of 117 Italian solid organ transplant recipients (52 M; 55 F; Mean age 49.46; DS 12.9; range 23–78), fulfilling: Reflective Functioning Questionnaire (RFQ–8); Transplantation Effects Questionnaire Adherence subscale (TxEQ); Brief Symptoms Inventory (BSI); Multidimensional Scale of Perceived Social Support (MSPSS); Short Form Health Survey (SF-12). *Results:* Correlational analysis showed that perceived social support and time elapsed from transplantation was not associated with adherence. Multiple hierarchical regression analysis applied on variables significantly associated with adherence showed that the interaction term between reflective function and psychopathology global severity index positively affect adherence. Furthermore, results indicate that negative association between psychopathology and medical adherence is stronger in presence of uncertainty of mental states. Therefore, transplant recipients with lower mentalization present higher risk of being non-adherent. From the results emerged, it is possible to consider the ability to mentalize as a relevant factor in supporting individuals engaged in adapting to complex life experiences, such as loss and illness, to recover autonomy and a sense of mastery and to encourage conscious and adaptive actions, essential in understanding and promoting adherent behaviors.



ADVANCES IN WOMEN'S MENTAL AND SEXUAL HEALTH

Proposer

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Discussant

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Abstract

This symposium aims to explore some aspects of women's psychological and sexual health in specific contexts. The first contribution entitled “Psychological Distress and Quality of Life of Women Affected by Chronic Pain Conditions: Understanding the Role of Sexual Functioning, Genito-Pelvic Pain, and Sexual Satisfaction” examines the influence of sexual functioning, genito-pelvic pain, and sexual satisfaction on the psychological distress and quality of life (QoL) of women with chronic pain (CP) conditions. The findings underscore the importance of assessing genito-pelvic pain and addressing sexual challenges in CP diagnosis and management to enhance overall well-being and QoL. The second contribution entitled “Lesbian and Bisexual Women: Internalized Homonegativity and Sexual Quality of Life” explores the relationship between sexual quality of life (SQoL) and internalized homonegativity among Italian lesbian and bisexual cisgender women. The findings highlight the need for tailored attention to specific sexual identities in clinical practice and research, especially noting the heightened risk of negative outcomes among bisexual individuals. The third contribution is “LGBTQ+ Sexuality Education: Perspectives of Bisexual Women” and reports the perspectives of 459 Italian bisexual women on Sexuality Education (SE). The study emphasizes the necessity of integrating LGBTQ+ issues into Italian SE programs to cater to diverse needs and promote inclusivity. The last contribution for this symposium delves into “The Mediating Role of Intolerance of Uncertainty in the Relationship Between Interpersonal Guilt and Emotional Addiction” exploring how interpersonal guilt influences emotional addiction in the context of females in romantic relationships, mediated by intolerance of uncertainty. The study suggests that targeting intolerance of uncertainty in interventions could reduce reliance on relationships as coping mechanisms, promoting healthier self-perception and relationship dynamics. The



various contributors to the symposium emphasize that there is still much to be done to explore the differentiated needs of women and to address both sexual and mental health needs. Strategies and future steps will be discussed by the speakers in an frame of multidisciplinary and tailored strategies.



**Psychological Distress and Quality of Life of women affected by Chronic Pain conditions:
understanding the role of sexual functioning, genito-pelvic pain and sexual satisfaction**

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Abstract

Background and Aims: This contribution aimed to summarize the role of sexual functioning, genital pain, and satisfaction among women diagnosed with various chronic pain (CP) conditions, while also examining the influence of sexual factors on central sensitization levels and quality of life (QoL) for each condition separately.

Methods: Between April 2023 and January 2024, an online protocol was completed by 1006 women distributed across five groups: Chronic Headache (CH), Fibromyalgia (FM), Vulvodynia (VU), Mixed Condition (MX), and Healthy Controls (HC).

Results: Sexual impairment was reported across all groups, with the VU group exhibiting the highest prevalence of genital pain (97.93%), followed by MIX (74.29%) and FM (55.91%). Analysis of covariance (ANCOVA) indicated lower sexual functioning scores for FM, VU, and MIX compared to HC and CH. VU and MIX also reported lower satisfaction scores than other groups. Genital pain emerged as the primary predictor of central sensitization across all groups



Lesbian and Bisexual Women: Internalized Homonegativity and Sexual Quality of Life

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Abstract

Introduction: The study investigates the relationship between sexual quality of life (SQoL) and internalized homonegativity among Italian lesbian and bisexual cisgender women, drawing on the minority stress model.

Methods: The data were collected through an online questionnaire from 686 women, including 217 lesbians and 469 bisexuals, using the Lesbian Internalized Homophobia Scale and the Female-Sexual Quality of Life Questionnaire. T-tests and linear regressions were performed to assess group differences and predictors of SQoL.

Results: Bisexual women experience higher levels of internalized homonegativity. Additionally, the findings reveal disparities in SQoL, with lesbian women reporting better outcomes. The linear regression model confirmed a significant negative association between internalized homonegativity and SQoL.

Discussion: The results hold clinical implications, as they underline the need to give thorough attention to specific sexual identities in clinical and research practice, and keeping in mind the heightened risk of negative outcomes in the bisexual population. The study also highlights the need for further research on factors influencing sexual well-being in sexual minority women.



The Mediating Role of Intolerance of Uncertainty in the Relationship Between Interpersonal Guilt and Emotional Addiction

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Abstract

It is well demonstrated that interpersonal guilt, which may encompass a sense of harsh self-critique and a punitive attitude towards oneself for presumed failures or shortcomings, potentially leading to relational entrapment where independence is perceived as harmful. This exaggerated sense of self-critique may predispose individuals to experience higher levels of stress in the face of life's inherent uncertainties. On the other hand, the intolerance of uncertainty could aggravate this emotional distress, manifesting in maladaptive coping strategies, such as emotional addiction, defined as the compulsive reliance on romantic relationships, often to the detriment of other life domains.

This study explores how interpersonal guilt might influence emotional addiction and whether intolerance of uncertainty mediates this relationship in the context of females who are in romantic relationships.

A cohort of 996 females (Mean age = 25.7, SD = 5.81), all within a romantic relationship context, provided data through the Interpersonal Guilt Rating Scale, Intolerance for Uncertainty Scale, and Love Addiction Inventory – Short Form. Structural equation modelling via the “*lavaan*” package in R was utilized to assess the proposed mediation effect.

“Self-Hate” Guilt significantly predicts Intolerance for Uncertainty ($\beta=0.465$, $p < .001$). Intolerance for Uncertainty, in turn, significantly predicts Love Addiction ($\beta=0.350$, $p < .001$). The mediation analysis indicates that the indirect effect of Self Hate Guilt on Love Addiction through Intolerance for Uncertainty ($\beta=0.163$, $p < .001$) accounts for 52.4% of the total effect, while the direct effect ($\beta=0.148$, $p < .001$) comprises the remaining 47.6%. The total effect ($\beta=0.311$, $p < .001$) underscores a robust relationship between Self Hate Guilt and Love Addiction.

The findings suggest that intolerance of uncertainty is a significant mediator in the association between self-hate and emotional addiction, accounting for over half of the impact. Specifically, the propensity to harshly self-criticize may intensify a reliance on romantic relationships as individuals strive to cope with



the stress associated with uncertain situations. This result specifically highlights a critical target for psychological interventions: By cultivating strategies to increase tolerance of uncertainty, it could be possible to reduce the reliance on relationships as coping mechanism, thereby fostering healthier self-perception and relationship dynamics.



LGBTQ+ sexuality education: Perspectives of bisexual women

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Abstract

Introduction: Bisexual individuals suffer negative attitudes and stigma in both their personal and public lives. Bi women face greater sexual and reproductive health risks and they are more vulnerable to intimate partner violence. There is a notable absence of LGBTQ+ issues in the school context, where bisexual identities are predominantly invisible. The current study aims to understand the perspectives of Italian bi women regarding Sexuality Education (SE).

Methods: Mixed-methods with a sequential design. A total of 459 self-identified bisexual women (Mean age = 27.5; SD = 6.052) participated in the first stage of the study, with a quantitative approach. The second stage, with a qualitative approach, was composed of 19 women. The instruments used were: a) Sociodemographic Questionnaire; b) Questionnaire about Sexuality Education; c) Semi-structured Interview. Descriptive statistics regarding quantitative data were analyzed with SPSS27 and qualitative data from the interviews will be analyzed by bottom-up thematic analyses.

Results: Preliminary data shows that for 94.4% of the sample (n = 435), it was important to receive sexual education. Furthermore, of 139 bisexual women that were working in the educational field; 77% perceived the need for training before considering engaging in SE activities in their work practice. The sample also reported receiving information about sexuality mainly through the Internet, Social Media, friends, LGBTQ+ community, and books; and moderately through partners, peer groups, and scientific articles. These results align with the preliminary data from the interviews: they reported lack of SE at school, and, when they received it, it was only education related to the biological aspects of sexuality, disregarding a more inclusive and broad view of sexual and relationships education.

Discussion: The findings highlight that bisexual women do not receive adequate SE and emphasizes the importance of including LGBTQ+ issues into Italian SE programs and projects. This research contributes to shedding light on the perspectives of this sexual minority, often marginalized and silenced even within the LGBTQ+ community itself. The study has relevant policy, sociocultural, and educational



implications for SE's implementation taking count of different needs, aiming to offer it in a suitable way for all individuals regardless of sexual identities.



TRANSGENDER AND NONBINARY IDENTITIES: STUDIES ON NARRATIVES OF BODIES, GENDERS, DYSPHORIA, AND EUPHORIA

Proposer

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Discussant

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Abstract

Body, Identity, Gender. In the contemporary world, the meanings of these three elements, traditionally understood in a binary sense, have been enriched with new nuances. Gender incongruence is increasingly understood as an existential condition, in which identity is subjectively affirmed. This panel brings together research on transgender and nonbinary individuals and their processes of meaning-making regarding bodily perceptions, psychological identifications, and social representations, through the analysis of narratives collected in interviews, focus groups, and research-intervention groups. Specifically, Anzani et al. present research on the meanings and embodiment of masculinity in a sample of transmasculine and cisgender young adults. Di Giannantonio et al. explored the feelings of gender dysphoria at the intersection of the bodily and social dimensions in two focus groups conducted with transgender and nonbinary people. Lorusso et al. present the results of an action research project in which transgender and nonbinary young adults were supported in deconstructing narratives of internalized transnormativity, and in constructing more positive representations of pride and euphoria in their identities. Finally, Miscioscia et al. present a study on the meanings attributed to tattoos used to cover surgical scars in a group of transmasculine individuals.



Co-deconstructing Transnormative Stereotypes and Co-creating Transpositive Imaginaries through Participatory Action Research in Group Settings with Trans and Nonbinary Individuals

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Abstract

Introduction: Cisnormativity, transnormativity, and transphobia stemming from essentialist perspectives on gender and sex and emerge as distal stressors that marginalize and invalidate trans and nonbinary (TNB) individuals. These manifestations permeate social relationships at individual, interpersonal, and systemic levels, contributing to their internalization among TNB individuals. Gender identity pride and community support emerge as potential moderators of the impact of these stressors on TNB people's well-being. Research has predominantly privileged individual approaches, neglecting group approaches, despite these settings being able to promote empowerment.

Methods: This project adopts participatory action research (PAR) to promote well-being and empowerment in a group context, collaboratively involving researchers and participants in identifying effective strategies to address the challenges of gender exploration and affirmation paths. Through 12 group sessions, the project aims to deconstruct narratives of internalized transnormativity, supporting trajectories of pride and gender euphoria in their own identities among 12 young TNB individuals (aged 18-25 years). Group sessions include participatory activities and discussions on gender and body norms, encouraging reflection on how such norms perpetuate systemically.

Results: The group project highlights how narratives in the life trajectories of young TNB individuals are heterogeneous but with numerous points of contact, especially regarding challenges in life contexts such as family relationships, intimate relationships, and medicalized gender affirmation paths. The challenges and difficulties expressed by participants are placed by them in the socio-cultural and familial context rather than being intrapersonal.

Discussion: The project emphasizes the importance of groups as spaces for the exploration and affirmation of TNB people's life trajectories and as spaces to co-create and disseminate transpositive imaginaries. Furthermore, the project's final outcome is the creation of material resources to be shared in TNB



communities, made by the TNB community. These resources aim to contain experiences that challenge transnormative views on TNB experiences and advance stories that celebrate gender euphoria and overcome the centrality of gender dysphoria as the sole narrative among TNB lives.



Inking identities: exploring the significance of cover-up tattoos in transgender and gender-diverse people after chest masculinization.

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Abstract

Throughout history, humans have used their bodies as external expressions of their inner selves, utilizing skin as a boundary between interior and exterior. Regardless of the meaning behind a tattoo, it represents an act of identity self-determination and is thus transformative, symbolizing a transition to a new status through the ritualistic transformation of the body. This research aimed to explore the meanings, experiences, and emotions behind tattoo choices in transgender or gender diverse individuals (TGD) who underwent chest masculinization surgery and may have opted to cover or embellish scars with this art form, reflecting personal narratives and empowerment.

This online research recruited a total of five participants (mean age: 26,6 y. o. SD: 4.07) through Instagram, utilizing direct messages and user referrals. Participants were asked to complete a questionnaire regarding tattoo cover-ups and were given the option to share a photo of their tattoo.

The analysis of questionnaire responses unveiled that transgender and gender diverse (TGD) individuals pursue tattoos for several significant reasons: to affirm and express their gender identity; to facilitate healing and alleviate discomfort associated with their bodies, covering areas causing dysphoria or discrimination; to highlight their unique experiences; and to testify to their gender affirmation journey. These tattoos symbolize meanings of rebirth, transformation, self-love, and perseverance, evoking positive emotions such as gender euphoria, happiness, and pride.

Getting a tattoo is a form of self-expression and affirmation that helps individuals align their appearance with their identity. This act of modifying one's body carries various personal meanings and changes how the individual is viewed by themselves and others, marking a transformation from their former self. Tattoos play a crucial role in embracing this new identity, supporting the path of gender affirmation, facilitating social transition, and shaping new interpersonal relationships. This study has highlighted the



plurality and complexity of TGD experiences through exploring the meanings attributed to cover-up tattoos after chest masculinization surgery.



What Kind of Dysphoria? Bodily and Social Dysphoria in the Narratives of Transgender and Nonbinary Individuals

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Abstract

Introduction: Gender dysphoria, understood as the discomfort that can be associated with a mismatch between one's assigned gender at birth and their experienced gender identity, has traditionally been conceptualized and assessed through a clinical and medical lens, which has focused on the bodily dimension of incongruence and dissatisfaction. This perspective underpins the main clinical scales and research tools used, which recent studies show are seen as inadequate by many transgender and nonbinary (TGNB) individuals, especially those with a nonbinary gender identity. The present study aims to develop a new scale for assessing gender dysphoria within the TGNB population, with a focus on an in-depth exploration of its dimensions, especially the interplay between bodily and social aspects. *Methods:* Two focus groups were conducted with transgender men and women (N = 4) and nonbinary (N = 4) young adults. *Results:* The descriptions of gender dysphoria provided by participants varied widely, ranging from solely bodily experiences and bodily discomfort elicited by social interactions to distress strictly linked to social contexts, gender stereotypes, and expectations, including experiences of misgendering and identity invalidation. Differences between the two groups were observed, with a prevalence of bodily dysphoria experiences in the first group and social dysphoria in the second. *Discussion:* A broader understanding of the experience of gender dysphoria, informed by the voices of those who directly experience it, proves fundamental in both research and clinical settings. It is essential to move towards a more comprehensive assessment that captures all dimensions of gender dysphoria in their complexity and towards a treatment that is more sensitive and tailored to individual needs.



Reimagining masculinity: models of masculinities in Italian cisgender and transgender emerging adults

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Abstract

Masculinities are defined as the repository of cultural and personal meanings attributed to men and boys. According to literature, masculinity ideals have an impact on how men behave. The present study aims at investigating how emerging adults interpret the concept of masculinity and embody and enact it. We were interested in understanding whether trans masculine and cisgender emerging adults conceptualized masculinity differently or similarly and whether they adopted different or similar strategies to act it out. To this aim, we conducted 6 focus groups with trans masculine (N = 16) and cisgender (N = 15) young adults. During the focus groups, participants discussed their concept of masculinity and how they embody and perform masculinity. Results showed that both groups identified social and bodily aspects in their conceptualization of masculinity. Although to varying extents, emerging adults were able to identify the limits of traditional models of masculinity. In both groups, markers for being recognized and affirming masculinity were found at both the bodily and social levels. Some peculiarities of the trans experience involve recognition of the privilege associated with masculinity, medicalized transition in order to achieve certain masculine markers, and a shift in perspective following social recognition of masculine identity.



**PERSPECTIVES AND PRACTICES: INTERVENTIONS IN CORRECTIONAL
SETTINGS**

Proposer

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Discussant

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Abstract

This symposium aims to explore some of the most recent perspectives and practices related to interventions targeted at adult and juvenile offenders in correctional settings. In the complex field of managing the psycho-social rehabilitation of offenders, mental health professionals encounter various challenges. The commission of offences results from the intricate interaction of multiple static and dynamic risk factors, encompassing biological, psychological, and social aspects.

This situation not only negatively impacts the psychological well-being of the offender but also that of their victims, underscoring the necessity for a holistic and attentive approach to the involved relational and environmental dynamics.

Identifying the most appropriate perspectives to comprehend the complexity of deviant behaviour phenomenology is crucial for developing effective interventions for managing the risk of recidivism and alleviating suffering. Internationally, the process of evaluating and managing the risk of recidivism among offenders, alongside psycho-social rehabilitative interventions, relies on established methodologies involving well-defined theoretical models and the use of scientifically validated tools.

The symposium aims to foster a profound reflection on the latest theoretical models and interventions addressing the themes of health and recidivism management within the framework of correctional execution. Specifically, it will examine the dynamics of groups of minor offenders undergoing probation within a Restorative Justice intervention, as well as the effectiveness of theatre as a therapeutic tool for



adult offenders, highlighting the opportunity to adopt alternative treatment activities within the penitentiary context. Additionally, we will explore the applicability of the Level of Service/Case Management Inventory (LS/CMI) in Italy for evaluating the risk of recidivism and planning psychosocial rehabilitative interventions. Lastly, we will analyse a clinical case, emphasising the crucial role of employing contemporary evaluation models and tools to tailor treatment programmes, considering the bio-psychosocial factors that shape criminal behaviour and the rehabilitation process.



Risk Assessment Among Italian Offenders: A Study on the Applicability of the Level of Service/Case Management Inventory (LS/CMI)

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Abstract

Preventing recidivism, rehabilitating, and reintegrating offenders represent the primary goals of criminal justice system practitioners. Extensive literature highlights how the use of unstructured clinical judgment is associated with a higher likelihood of judgment errors, leading to negative consequences in the utilization of resources for the recovery and reintegration of offenders. The emphasis on evidence-based "risk assessment" has prompted organizations to revisit their current assessment methodologies in search of tools and practices that may improve their ability to predict offender recidivism and allocate criminal justice resources. Despite advancements, Italy has not fully adopted such tools in its criminal justice system. This study aims to bridge this gap by exploring the applicability of the Level of Service/Case Management Inventory (LS/CMI) among Italian offenders.

After a back-translation procedure, we conducted preliminary analyses on 74 Italian adult offenders to assess the psychometric properties of the Italian LS/CMI. Descriptive statistics were compared with the North American normative sample, and Cronbach's Alpha was calculated for internal consistency. Factor analyses were performed to evaluate the scale's dimensionality and item-level analysis. Converged validity was assessed through correlation with the Psychopathy Check-list Revised (PCL-R). Then, binary logistic regression was performed to assess the predictive validity.

Significant differences have emerged in the scores of LS/CMI's subcomponents compared to the North American normative sample, indicating cultural or contextual variations that must be considered in risk assessment. The results indicate significant differences in educational and occupational systems. Additionally, intrafamilial and social relationships play a significantly more relevant role in the development of criminal behavior in Italy compared to North America.

Despite some coherence issues in subcomponents, the LS/CMI demonstrates good internal consistency and convergent validity with the other criminal risk assessment tools. Logistic regression suggests that the total LS/CMI score is positively associated with the likelihood of recidivism, indicating its potential as a predictive tool.



In conclusion, the results represent an initial step towards validating the Italian version of the LS/CMI. Further longitudinal research is needed to improve the reliability of the tool and contribute to efforts to reduce the recidivism rate in the Italian penal system.



Monitoring negative emotionality through a rehabilitative theatre experience in prison

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Abstract

Introduction: Mental health within a prison is more vulnerable than in free society. The structure of prison environments can promote the development of psychopathologies. Theatre activity, as a therapeutic function, in this specific context, aims to improve on relational aspects and stimulate individual change. Theatre is considered a true form of therapy, utilizing specific protocols and procedures to prevent and alleviate various forms of psychological distress. The aim of this work is to assess the effectiveness of theatre activity in the re-educating inmates within a prison context.

Methods: A five-month drama workshop was conducted at the Messina prison. Qualitative research was used to examine in detail the subjective changes observed during the theatre activity. Out of the 18 participating subjects, only 3 users underwent a semi-structured interview, carried out before and after the theatre activity. The narrative in re-tests T0 and T1 is analyzed using Atlas.ti qualitative analysis software.

Results: The themes emerging from the different interviews were examined and compared through phenomenological interpretative analysis, to group together common concepts and the transformations observed in the participants. The results suggest that the theatre workshop provides a safe space for prisoners to explore and express themselves, enabling significant changes in self-perception. These changes include increased self-awareness, recognition of impulsive behaviour, improved socialisation, and emotional management skills.

Discussion: This research has highlighted the effectiveness of theatre as a therapeutic tool, underscoring the importance of incorporating rehabilitation treatment activities focused on emotional regulation in the prison context.



The role of individualized planning of psychosocial rehabilitation interventions in offenders: a comprehensive case study

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Abstract

This paper examines the complex relationship between childhood trauma, dissociation and borderline personality disorder (BPD) through the case of a perpetrator. The offender, an accused murderer, experienced various traumatic events, including childhood abuse and domestic violence. These experiences led to dissociative states characterised by high emotional intensity, particularly of an aggressive nature, and reduced impulse control, resulting in violent behaviour during dissociative episodes. These factors must be strongly considered when planning a psycho-social rehabilitation intervention.

The study uses advanced assessment tools such as the Level of Service/Case Management Inventory (LS/CMI) to obtain a comprehensive understanding of Paul's psychopathological condition, risk factors and rehabilitation needs

The LS/CMI assessment shows a high risk of reoffending, influenced mainly by family relationships, educational challenges, interpersonal ties and aggressive tendencies.

The planning of psycho-social rehabilitative interventions to contain the risk of reoffending must be strongly customised according to the subjectivity of the perpetrator. Therefore, it is essential to carry out assessments that allow an understanding of the complex deviant dynamic of the offender. The assessment must consider psycho-social components, for the structuring of resocialising interventions, and psychopathological components, for the management of the subject's disorder, when this is strongly implicated in the deviant dynamic. In order to plan psycho-social rehabilitative interventions, the study emphasises the importance of using transdiagnostic models for trauma and dissociation to be combined with the most recent tools for assessing the risk of recidivism, such as LS/CMI. In the case under study, the intervention should include processing past traumatic experiences, improving self-identity, nurturing healthy relational patterns and improving emotional regulation. Such interventions should be complementary to resocialisation that allows for the management of the subject's risk factors. Future



research should broaden the scope of cases and further validate assessment tools to advance our understanding of this complex relationship.



Adolescent victims and offenders. Restorative group interventions

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Abstract

The paper presents the results of a Restorative Justice intervention involving two groups of adolescents: a group of violent offenders (assault and injury) and a group of victims of the same crimes. The intervention considered here is part of a larger Probation program and consisted of an experimental, innovative and appropriately adapted application of the practice of "Word Groups." The activity was developed in two parallel tracks: the first track involved the group of offenders and consisted of nine subjects, five males and four females, aged between 14 and 17; the second track involved the group of victims and consisted of five subjects, four males and one female, aged between 14 and 16.

The aims of the survey are twofold. The first objective intends first of all to assess the effects produced by the intervention, considering in particular the transformation of the representations that participants express regarding the criminal action, its effects (the harm produced/suffered), the meaning attributed to the criminal action, their own involvement and responsibility in the criminal action, and the other group/subject (offender/victim) involved in the criminal action. The second objective aims to analyze the work process in order to identify the factors that to a greater extent determine the development of the pathway and its outcomes.

The study was based on the transcripts of video recordings of all the meetings conducted; it was carried out through qualitative methods and involved the use of thematic and content analysis techniques and communicative interaction analysis. The results revealed significant differences between the two paths, both about the extent of the elaborative processes produced and the development of the work process. Indeed, it could be observed that while significant transformative elements were recorded in both pathways, they appeared to be much more relevant in the victims' group than in the offenders' group. This appears to be explicitly associated with several contextual factors, but a significant association with the process elements of the intervention is also evident.



**JOURNEYING THROUGH ADOLESCENCE: CHANGES, CHALLENGES, AND RISKS
WHICH MAY AFFECT THE FUTURE**

Proposer

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Discussant

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Abstract

Adolescence period significantly affects the developmental trajectory and the transition to adult life. The prodromes of mental health emerge in adolescence and can set the trend for future psychopathology.

In recent years there has been a dramatic increase in the rates of adolescents turning to clinical services and reporting psychological fragility, psychopathologies, or problematic behaviors. To highlight even more the need for attention this period, the WHO reported that around half of all mental disorders arise around the age of 14, the elected transition cut-off from the prepubertal phase to early adolescence. This perspective on mental health of adolescents has been confirmed also in the Italian context, in which emerged that, despite the risks that characterize them, young people between 18 and 24 years old rarely request help among services of mental health.

But how we can contribute to promote “healthy adolescence” and what critical aspects we should consider? Adolescence represents a period of changes and challenges for the individual's development. It is characterized by significant biological, relational and social modifications. Young people try to cope toward these changes by using the resources they were able to put together. In this sense relational and social environment is essential, as well as the consolidation of affective and regulatory skills. However, when difficulties emerge, the attempts to self-regulate involve strategies and behaviors that from one side may contribute to an improved well-being, but to the other side may also be the cause of potential



pathological constellations that should be clinically considered. This appears clear when we referred to phenomenon involving self-regulation, such as “new addictions” phenomenon or anxiety and psychopathologies associated to the environmental conditions, as suggested by the contribute of this symposium.

These aspects should be deep in a context in which a disconnection between empirical research and clinical practice is largely reported. Adolescents is often subject to a "rebound" in considerations between childhood and adulthood, without focusing on the peculiar characteristics of this well-defined and rich phase of life. Implementing the integration between research and practice in understanding the issues of adolescence can provide the framework for promoting healthy growth and adult life.



Online vigilance among community adolescents: exploring the role of attachment

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Abstract

Introduction: Social media use has been pointed out as potentially excessive and problematic in the population of adolescents. In particular, excessive online vigilance may be related to problems in interpersonal functioning linked to anxious attachment and fear of missing out. This study aims to explore the interplay between fear of missing out, anxious attachment and excessive online vigilance in a sample of community adolescents.

Methods: A sample of 230 adolescents were recruited (42.4% males; Mage=16.30 years, S.D.age=1.28) and were asked to fulfill a battery of self-report questionnaires including a demographic sheet, the Fear of Missing Out Scale, the Smartphone Distraction Scale and the Attachment Style Questionnaire.

Results: Bivariate correlations revealed positive and significant association between online vigilance, FOMO and anxious attachment levels. Regression analyses showed that, controlling for age and gender, anxious attachment positively predicted FOMO levels and that FOMO levels positively predicted online vigilance. Lastly, we found that FOMO levels mediated the pathways between preoccupation for relationships and online vigilance but not between need for approval and online vigilance.

Discussion: The link between anxious attachment and excessive online vigilance appears to be partially explained by the fear of missing out, suggesting that targeting this variable may be a strategic clinical approach. Additional research replicating and extending these preliminary results is needed to draw sounder conclusions.



Problematic gaming in Italian adolescents: The influence of individual characteristics and family functioning.

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Abstract

Problematic gaming is a growing worldwide phenomenon, and its most serious manifestation was officially recognized as a behavioral addiction by the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and the International Classification of Disease (ICD-11), characterized by a persistent pattern of gaming behavior associated with negative consequences. Studies highlighted a high risk of developing problematic gaming in adolescents. Several factors have been associated with problematic gaming, including individual characteristics (e.g., gender, age, personality traits) and environmental factors. Research showed that poorer family relationships represent a central risk factor for problematic gaming, while good family functioning emerges as a protective factor. The present study investigated the associations between demographical characteristics, the Big Five personality traits, family functioning, and problematic gaming. Differences in gaming behaviors based on age and gender were also evaluated. Referring to Olson’s Circumplex Model, a specific aim was to examine the contribution of dimensions of family functioning to predict problematic gaming. The study sample consists of 1717 Italian adolescents (47.7% males and 52.3% females) aged 13 to 21 (mean = 17.18, SD = 1.76). All participants were evaluated for demographic characteristics, the Gaming Addiction Scale for Adolescents, the Big Five Questionnaire, and the Family Adaptability and Cohesion Evaluation Scale. Results found that males showed a higher mean score of problematic gaming compared to females, and age was negatively associated with problematic gaming. Two Hierarchical Regression Analyses were run. The first model highlighted that adolescents’ gender and age, Big Five personality traits, and Total Circumplex ratio (i.e., a summary of family characteristics) interaction were significant predictors of problematic gaming. Analyzing all balanced and unbalanced dimensions of family functioning, only disengaged, enmeshment, and chaotic scales significantly predicted problematic gaming in the second model. These findings



contribute to expanding the literature on problematic gaming, emphasizing the role of the family system. The clinical implications and limitations of the study will be discussed



Behavioural addiction in adolescence: a rising tide?

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Abstract

The prodromes of mental health emerge during adolescence and can set the trend for future psychopathologies. However, this stage of development is highly affected by externalized and internalized problems related to conflicts that emerge during this period and linked to some relevant aspects, such as (i) the search for autonomy and new relationships, (ii) the development of the psychological profile, and (iii) the acquisition of knowledge about own identity. In this context, a new phenomenon is receiving attention in this population: “new addictive behaviors”. In recent years, partly related to the recent pandemic experience, there has been an increase in problematic behaviors in adolescence, in co-occurrence with affective pathologies. These behaviors are particularly associated with new technologies. The use of smartphones, the internet, and social media, and addiction to television series (i.e., binge watching) have been particularly spread among the younger generation. However, there is a divergence of opinion among the clinical and scientific communities regarding this issue. On the one hand, there is evidence supporting a negative association between such behaviors and an at-risk psychological profile characterized by high levels of anxiety, depression, somatization, and low emotional regulation and perception of one's own body signals. Moreover, an association between problematic relational styles and high involvement in these behaviors was identified. On the other hand, there is also evidence suggesting a possible positive impact of these new behaviors. In the context of Generation Z, which encompasses adolescents immersed in the digital world, these behaviors may represent a new way of interacting with the external environment, potentially reducing the risk of the onset of psychopathological problems.

Moving from these premises, this contribution aims to present various models of risky behaviors in young people, beginning with the maladaptive-adaptive continuum of the new behaviors. Specifically, personological variables (e.g., emotional regulation, interception, motivational system, impulsivity, and psychological variables) were tested in relation to the continuum of multiple risk behaviors as well as to the severity index of risk in a large sample of adolescents and young adults. The evidence that emerged from this study should be regarded as a first step in the investigation of the “new addiction” phenomenon in younger individuals, with significant clinical implications for further discussion.

Climatic change and environmental pollution: the new challenge of eco-anxiety affecting young and vulnerable population.

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Abstract

The issues of air pollution, climate change, and global warming are becoming urgent and are the focus of a wide scientific and policy debate. The direct and indirect impact of these events on human society is considerable, affecting social systems, economies of nations and the physical and mental health of individuals. In this context, the concept of eco-anxiety is developing and gaining traction. The current studies highlighted that eco-anxiety is closely related to the distress generated by the pollution and climate change and that there is a higher prevalence of eco-anxiety among young people. Some studies have even suggested that this construct is specific to this age group. Individuals born in the middle of the digital era (Z generation) are the most affected by this ecological issue, yet they are usually unable to undertake substantial decisions that may involve a change in the negative trend of environmental doom. Given the heightened quantitative research and the heightened vulnerability of youth to psychological, physical, social, and neurological challenges, further studies on the eco-anxiety appears to be a primary objective of the current research.

In light of the dearth of empirical evidence, this contribution aimed to synthesize the main findings of a series of studies that were focused on (i) validating a tool to assess the characteristics of eco-anxiety in younger individuals, and (ii) defining the association between eco-anxiety and psychological (e.g., emotional regulation, mood, mentalization, and reflective function) and personological dimensions (e.g., personality styles, motivations).

The results indicated that a three-factor questionnaire could be used to assess the main features characterizing anxiety linked to climate change and pollution. Moreover, the results indicate that eco-anxiety is positively associated with emotional dysregulation, general anxiety and psychopathological symptomatology. Conversely it is negatively associated with mood, mentalization, and reflective function. These main findings will be discussed in an applicative perspective.



**REFRAMING DIAGNOSIS AND CLINICAL INTERVENTION IN PSYCHOSIS AND
NON-CLINICAL POPULATIONS**

Proposer

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Discussant

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Abstract

A growing body of research supports the assessment of subjective experiences within clinical paradigms to advance our understanding of mental health symptoms and full-blown mental disorders. Moreover, exploring subjective experiences, along with an in-depth evaluation of transdiagnostic markers of psychopathology, including mentalization and impaired interpersonal relationships, has the potential to improve early detection and intervention strategies across clinical and non-clinical populations. This symposium aims to bring together studies exploring how subjective experiences and theoretical frameworks shape mental ill-health and clinical interventions. Göksal et al. explore subjective narratives of members within an Incel online community. Their qualitative analysis reveals how collective identities are formed through shared emotional experiences and belief systems, highlighting avenues for targeted interventions. De Salve et al. investigate the interconnections between schizotypal traits, psychoticism, and mentalization. Their research corroborates the significant impact of these factors on individual distress, emphasizing the therapeutic potential of enhancing mentalization to mitigate symptoms and prevent severe psychiatric conditions. Lo Buglio et al. conduct a scoping review on the co-occurrence of clinical high risk for psychosis and borderline personality disorder. Their work supports a transdiagnostic clinical approach, focusing on the nuanced understanding of subjective experiences to refine early intervention strategies. Finally, Bassi et al. reassess psychoanalytic methods in treating psychosis through historical case studies. They highlight the importance of psychoanalytic insights into the subjective and



interpersonal dynamics of psychotic disorders, advocating for their integration into contemporary psychiatric practices.



Scoping review of clinical high risk for psychosis and borderline personality disorder.

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Abstract

Introduction: Clinical high risk for psychosis (CHR-P) and borderline personality disorder (BPD) often co-exist in clinical populations. This scoping review aims to systematically map existing research that simultaneously evaluates clinical high risk for psychosis (CHR-P) and borderline personality disorder (BPD) within clinical populations. *Methods:* PRISMA-ScR/JBI-compliant scoping review encompassing primary research studies—both cross-sectional and longitudinal studies—that used validated criteria/measures to assess both CHR-P and BPD, reporting on CHR-P/psychotic symptoms and personality disorder(s) in the title/abstract/keywords, detected in PubMed/Web of Science/(EBSCO)PsycINFO until 23/08/2023 (protocol: <https://osf.io/8mz7a>). *Results:* We included 33 studies, which were organized into four thematic categories: (i) BPD as a comorbidity in CHR-P youth (k = 20), focusing on early detection and intervention in psychosis; (ii) attenuated psychosis syndrome (APS) as a comorbidity among BPD inpatients (k = 2), emphasizing hospitalized adolescents/young adults admitted for non-psychotic mental disorders; (iii) mixed samples (k = 7), including details on early intervention services; (iv) transdiagnostic approaches (k = 4) also including the “clinical high at risk mental state” (CHARMS) criteria to identify a pluripotent risk state for developing



severe mental disorders. *Conclusion:* The scoping review identifies a variety of approaches to managing CHR-P and BPD in clinical settings, lacking a consistent treatment framework. Future research should prioritize: (i) examining referral pathways within early intervention clinics to ensure prompt treatment; (ii) improving early detection strategies in innovative settings like emergency departments; (iii) enhancing mental health literacy to support help-seeking behaviors; (iv) studying comorbid conditions as complex systems to enhance understanding and address early psychopathology; (v) assessing longitudinal risks associated with BPD; (vi) developing transdiagnostic treatment strategies; (vii) involving youth with lived experiences of comorbidity to explore their personal perspectives; (viii) assessing the burden of caregivers to develop interventions centered on family needs; (ix) broadening research efforts in regions like Africa and Asia that are less represented in current studies; and (x) analyzing the cost-effectiveness of early intervention programs to assess their potential for broader application internationally.



The psychoanalytic knowledge on psychosis in a nutshell: a scoping review of single case studies

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Abstract

Objective: For more than a century, patients with psychotic disorders have been regulars on the psychotherapy couch. Psychoanalysts have documented a series of narrative clinical cases that have shaped the psychoanalytic theory, research, and practice over the years. The importance of case study methods for investigating psychotherapy process and for bridging the research-practice gap has been increasingly recognized. This scoping review was aimed at mapping psychoanalytic contributions on the treatment of psychosis by reviewing narrative case studies of psychoanalysis or psychoanalytic psychotherapy of patients affected by psychotic disorders. *Methods:* A thorough search of journal articles was performed in PubMed, Web of Science, PsycInfo, Pep Web, to identify studies published from 1990-2024. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses for scoping review statement were followed. Study protocol has been registered. *Results:* This review included thirty-two articles, with a total of 37 case reports. The primary theoretical approach employed is “ego psychology”. A wide range of clinical-theoretical insights and recommendations emerge. Prominent among these are discussions on the applicability of psychoanalytic treatment for patients with psychotic disorders, which cover their analysability and the necessary modifications to therapeutic techniques, and speculations about the nature and progression of the illness. *Conclusion:* Our review indicates that psychoanalytic literature provides insight into the psychological dynamics and treatment of patients with psychotic disorders. Further analysis of this literature may help improve our understanding and offer more detailed and comprehensive descriptions of the intrapsychic and interpersonal dynamics of these patients. Such information could prove useful both clinical practice and research endeavours.



Navigating Distress Symptoms: Understanding the Role of Schizotypal Personality, Psychoticism, and Mentalization.

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Abstract

Introduction: Schizotypy denotes a constellation of personality traits characterized by aberrant perceptions, unconventional behaviors, and challenges in social interactions, spanning from subclinical expressions to clinical psychosis. Recent investigations highlight the predicament faced by individuals exhibiting schizotypal traits, elevated psychoticism, and diminished mentalization, often entwined with distress symptomatology. This study aims to evaluate the predictive capacity of schizotypal features, psychoticism, and mentalization concerning distress symptoms.

Methods: A cohort of 571 participants (40% male, 60% female), aged 18-65, was drawn from the general population. Data collection ensued through online channels utilizing the Qualtrics platform. Assessments comprised the Reflective Functioning Questionnaire, Personality Inventory for DSM-5, Symptom Checklist K9, and Schizotypal Personality Questionnaire-Brief. Ethical approval was obtained from the Catholic University of the Sacred Heart of Milan (protocol number: 13-24). Correlation and multiple linear regression analyses were required.

Results: Positive correlations emerged between schizotypal features and the global symptoms index ($r=.563$, $p<.01$), schizotypal features and psychoticism ($r=.534$, $p<.01$), and schizotypal features and uncertainty about mental states ($r=.207$, $p<.01$). Conversely, a negative correlation surfaced between schizotypal features and certainty about mental states ($r=-.241$, $p<.01$). Further, a multiple hierarchical regression analysis, adjusted for age and gender, elucidated the association between schizotypal features, psychoticism, mentalization, and distress symptoms. The final model revealed a significant proportion of variance in distress symptoms [adjusted $R^2=0.442$; $F(497)=133.307$; $p<.001$]. Schizotypal features ($\beta=.338$; $p<.001$), psychoticism ($\beta=.362$; $p<.001$), and uncertainty about mental states ($\beta=0.151$; $p<.001$) forecasted higher global symptoms index scores. Gender and age were deemed statistically insignificant and thus excluded from the model.

Discussion: Individuals grappling with schizotypal features, heightened psychoticism, and uncertainty about mental states confront distress symptomatology, underscoring its pivotal role in clinical assessment



and preemptive interventions. Enhancing mentalization holds promise in ameliorating social functioning, nurturing interpersonal relations, and assuaging distress symptoms such as social anxiety. Given the risk posed by schizotypal traits for evolving into psychotic disorders, fortifying mentalizing capacities in non-clinical cohorts may serve as a prophylactic measure, potentially mitigating the progression from schizotypal traits to severe psychotic manifestations.



The “Redpilled” Identity: A Thematic Analysis of an Incel Community’s Beliefs and Emotional Experiences

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Abstract

Introduction: Incel is a neologism to describe online communities of male users defined by an involuntary absence of sexual and romantic relationships. These groups are marked by a conspiratorial and misogynistic ideology, often resulting in verbal aggressions. The aim of this study is to qualitatively explore the emotional experience and beliefs prevalent within an Incel online community, shaping its collective identity. *Methods:* A thread (453 comments, 14,173 visits, and 105,665 characters) has been sampled from an Italian “redpill forum” and analysed by two independent raters by means of Thematic Analysis. *Results:* Four themes emerged: (i) “Non-persons (i.e. women) are not like us” reveals perceived gender inequalities and misogynistic beliefs; (ii) “Without experiences in adolescence you are ruined” reflects the belief that early romantic and sexual experiences are crucial for later relationship satisfaction; (iii) “I have no life” captures expressions of profound distress and life dissatisfaction; and; (iv) “Only ours is true suffering”, highlights a sense of unique victimhood within the community. *Discussion:* The incels’ group identity is shaped by gender role stress, particularly due to the threat of not fulfilling the socially constructed expectations of hegemonic masculinity. This led to suffering as the most observed emotional experience, also exacerbated by hopelessness regarding future intimate, romantic, and sexual experiences. Both the perceived subordinate masculine status and suffering are exploited to rationalize and perpetuate misogyny and degradation of women. The observed openness in discussing suffering and traumatic experiences could be a potential gateway for preventive interventions aimed at improving help-seeking behaviours.



**MALADAPTIVE DAYDREAMING: NEW PERSPECTIVE AND RESEARCH
DIRECTIONS**

Proposer

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Abstract

Daydreaming is a universal human phenomenon characterized by the deliberate diversion of attention from one's current situation and activity. Although the majority of individuals engage in this mental activity on a daily basis, others develop a pathological form of daydreaming. Maladaptive daydreaming (MD) is a proposed mental disorder characterized by excessive involvement in vivid and detailed fantasy activities that interferes with academic, interpersonal and daily functioning. More than twenty years after the seminal work of Eli Somer (2002), the literature on MD is continuing to advance our understanding of the various clinical implications.

In this symposium, the theme of daydreaming will be explored in relation to other adaptive and maladaptive functioning in order to trace possible boundaries of the clinical phenomenon, tracing overlaps and peculiarities of fantasy functioning, maladaptive fantasizing, coping abilities and emotional regulation. Specifically, Mancinelli et al. (University of Padua), investigates the mediating role of MD in the association between difficulties in emotion regulation, psychological distress and negative problem-solving orientation. Margherita et al. (University of Naples Federico II) classifies different dreaming patterns and their association with MD components, emotional dysregulation, and sleep disturbances. Renzi et al. (Sapienza University) investigates the associations between MD, eating disorders, obsessive-compulsive symptoms, and affect regulation capabilities, focusing the attention to the absorption mechanism underlying all these diseases. Results suggest a common maladaptive use of fantasy/thoughts



to regulate emotions, with different manifestations across disorders. Santoro et al. (University of Parma) explores the mutual relationships between MD and problematic online behaviors. Their findings show a close link between MD and different problematic online behaviors, suggesting that some individuals with MD may engage excessively in online activities to enhance their retreat into fantasy.

All these studies suggest the complexity of the phenomenon of MD and its topicality, especially in the youth population. These elements reinforce the need to investigate its functional and dysfunctional mechanisms in order to set up better clinical interventions.



Connections beyond diagnosis: exploring the intersection of Maladaptive Daydreaming, alexithymia, eating and obsessive-compulsive symptoms

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Abstract

Background: Maladaptive daydreaming (MD) is a recently defined clinical condition characterized by an excessively immersive utilization of fantasy and imagination. MDers exhibit increased engagement in imaginative activities, often involving detailed and vivid scenarios, which can significantly impact both professional and social life. The aim of the present study is to produce a contribution in the study of MD in general population, highlighting possible associations between the level of MD and eating disorders, obsessive-compulsive symptoms, and affect regulation capabilities. The hypothesis is that MD shares a functioning similar to those of eating and obsessive-compulsive disorders and low capabilities in emotional regulation.

Method: 571 participants (mean age=27.16 years; SD=10.21; 67.7% females; 33.7% males) completed an online survey between November 2023 and March 2024. The online protocol comprised: a socio-demographic questionnaire, the Maladaptive Daydreaming Questionnaire (MDQ), the 20-item Toronto Alexithymia Scale (TAS-20), the Eating Attitude Test (EAT-26), and the Obsessional Beliefs Questionnaire (OBQ-44).

Results: Data analysis showed that 29% of participants reported a score above the clinical cut-off for MD, as well as 20% for alexithymia and 19% for eating disorders. Moreover, several significant associations between MDQ and the dimensions investigated emerged. Specifically, MDQ score was positively related to TAS-20 total, difficulties in identified feeling and in describing feelings ($r=.343$; $r=.299$; $r=.411$ respectively; all $p<.001$). Significant associations also emerged with eating disorders symptoms ($r=.238$; $p<.001$) and with the four obsessive-compulsive symptoms scales albeit of weaker dimension (r range between .140 to .240; all $p<.001$). Age showed a weak negative association with MDQ ($r=-.186$; $p<.001$) whereas no significances on gender emerged.

Conclusions: Present findings showed that MD is a condition quite diffuse in general population especially in younger people. The positive significant associations emerged in the present study can sustain a



common functioning in which there is a maladaptive use of fantasy/thoughts to regulate emotions and the kind of fantasy defines the disorder: the recurring and intense use of fantasy and imagination for an “alternative life” in MD, on food and body image in eating disorders, and recurrent and intrusive thoughts in obsessive-compulsive symptoms. Further studies comparing these clinical populations are still needed.



Dreaming, maladaptive daydreaming, and emotional dysregulation: a latent profile analysis

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Abstract

Introduction: Maladaptive daydreaming is a condition characterized by an excessive engagement in fantasy that interferes with relational and social functioning of subjects. To date, MD has not yet been deepened in the fields of sleeping and dreaming. From a perspective that frames dreaming and conscious waking states in continuity as mind wandering, emotion regulation assumes a crucial role in evaluating more or less functional trajectories. This study aims to classify dreaming patterns testing the association with some components of maladaptive daydreaming. Secondly, this study aims to associate dreaming patterns with emotional dysregulation and sleep disturbances.

Methods: 315 young adults (mean age= 23.35), participated in this cross-sectional study. First, dream patterns were identified using Latent profile analysis, involving as factors the dream recall, nightmares, lucid dreams, problem-solving dreams, emotional intensity, tone of dreams, (Mannheim Dream Questionnaire). Second, dream patterns were associated with specific components of maladaptive daydreaming, involving the distress caused when reality interrupts daydreaming and the impact of daydreaming on daily functioning (some items of the Maladaptive Daydreaming Scale). Third, dream profiles were associated with some sleep disturbances (Italian Sleep Disorders Questionnaire), and emotional dysregulation (DERS-SF).

Results: The following dreaming patterns were found: sweet dreaming (21.9%), systematic dreaming (47.7%), and over-dreaming (30.4%). Over-dreaming profile and systematic dreaming profile were more associated with maladaptive daydreaming components than the sweet dreaming profile. Similar results were found for emotional dysregulation and non-restorative sleep. No difference between over-dreaming and systematic dreaming profiles emerged.

Discussion: The results suggest that dreaming profiles characterized by intense dreaming (over and systematic) and maladaptive daydreaming share a similar hyper-investment of thought through phantasy and imagery. Moreover, both profiles are associated with emotion dysregulation, leading us to consider these patterns as attempts to control emotional experience. These findings have some theoretical and



clinical implications, considering both dreaming and daydreaming along a continuum, from healthy to maladaptive strategies to process emotions.



Unveiling the link between maladaptive daydreaming and problematic online behaviors: a network analysis

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Abstract

Introduction: Maladaptive Daydreaming (MD) is suggested syndrome characterized by addictive immersion in fantasy activity, leading to significant impairments. Prior research has linked MD with adverse psychological outcomes. This study aimed to investigate the mutual relationships between MD and various Problematic Online Behaviors (POBs) through a correlation network approach. *Methods:* The sample of the study comprised 1209 adults (877 females, 72.5%), ranging in age 18 to 73 ($M = 30.59$; $SD = 12.26$), who were administered self-report measures assessing MD and POBs, including problematic online gambling, problematic online gaming, problematic cybersex, problematic social media use, problematic online shopping, and cyberchondria. Bivariate correlation coefficients were preliminarily calculated to examine the associations between the investigated variables. Then, regularized partial correlations between the investigated variables were computed and visualized through correlation network analysis. Case-dropping subset and nonparametric bootstraps with 5000 samples were estimated to test the stability of centrality measure and edge weights respectively. *Results:* Significant positive correlations were found between MD and POBs. Correlation network analysis showed that MD was positively associated with POBs except for problematic online gambling. The network model displayed satisfactory stability. *Discussion:* Results suggest that MD may be closely linked to excessive or otherwise maladaptive engagement in online activities. Excessive involvement in Internet activities may either sustain one's retreat into fantasy or foster it. Thus, clinical interventions should focus on the role of fantasy activity as a compensatory strategy for coping with psychosocial difficulties in individuals who exhibit POBs.



The role of Maladaptive Daydreaming in the association between Emotion Regulation Difficulties, Psychological symptoms, and Negative Problem-Solving orientation

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Abstract

Background: Maladaptive Daydreaming (MD) is described as excessive immersion in fantasy characterized by a persistent desire for fantasies and frequent experiences of presence, often augmented through stereotypical and repetitive movements. This phenomenon is increasingly being discussed with findings investigating the potential function of MD; however, somewhat contradicting evidence have emerged.

Objective: The aim of this study is to further the investigation of MD as an emotion regulation strategy among MDers. The pattern of associations among MD, anxiety, depression, stress symptoms, negative problem-solving orientation and dimensions of emotion regulation (ER) difficulties are assessed; the mediating role of MD in the relationship between the latter and the aforementioned symptom variables and negative problem-solving orientation is explored. The latter regards the pessimistic interpretation of problematic events and of problem-solving strategies. *Method:* N = 252 MDers aged 18-70 years (Mean age=30.63, SD=11.40, 84.1% female) participated in the study completing self-report measures. *Results:* Results showed some unexpected findings: MD significantly negatively correlated with depression, anxiety symptoms and negative problem-solving orientation yet not with stress symptoms; referring to ER difficulties, solely lack of emotional self-awareness significantly negatively associated with all symptom variables, while only difficulty pursuing goals when experiencing negative emotions and reduced trust in one's capacity to self-regulate significantly positively correlated with MD. Accordingly, three mediational models were performed: findings showed the mediating role of MD in mitigating the negative effect of difficulty pursuing goals when experiencing negative emotions on both anxiety and negative problem-solving orientation. Furthermore, MD also seems to mitigate the negative effect of reduced trust in one's capacity to self-regulate on negative problem-solving orientation. *Conclusions:* Overall, findings suggesting qualitative differences in ER and functional peculiarities among MDers. Nonetheless, findings provide support for the perspective of MD as emotion regulation strategy



impacting emotional processing and problem-solving attitudes. However, practitioners should be careful in differentiating MD's short-term benefits vs. long-term consequences and aim to integrate adaptive ER strategies for MDers during clinical practice. The study contributes to the understanding of MD's role as ER strategy but calls for further research to elucidate its complexities and for the careful evaluation of the role played by specific MD's fantasies.



**A BRAVE NEW WORLD OF PERSONALITY AND PSYCHOPATHOLOGY:
ADVANCEMENT IN RESEARCH IN TRANSDIAGNOSTIC DIMENSIONAL MODELS**

Proposer

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Discussant

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Abstract

Dimensional models of psychopathology, including personality dysfunctions, have been proposed, as an alternative to current categorical models. Recent advancements in psychotherapy treatments proposed to focus psychotherapy interventions on areas of dysfunctions cutting across a wide array of different diagnosis. Interestingly, transdiagnostic dimensions seemed to represent a promising field for developing new treatments in psychiatry and for integrating research findings between clinical psychology and neurosciences. Against this background, the symposium will cover different applications of dimensional approaches to psychopathology, including Research Domain Criteria (RDoC) as a tool for understanding depression, and the Hierarchical Taxonomy of Psychopathology (HiTOP) as a framework for improving our knowledge on personality dysfunction, non-suicidal self-injurious behaviors, and obsessive-compulsive spectrum disorders.



Can the PAI reflect the HiTOP framework? A further step in clinical translation towards an evidence-based psychopathological conceptualization

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Abstract

Introduction: The Hierarchical Taxonomy of Psychopathology (HiTOP) is a hierarchical and dimensional classification of psychopathology that aims to address the recognized shortcomings of traditional classifications such as DSM and ICD (i.e., reliability, validity, heterogeneity, comorbidity). HiTOP mapped psychopathological symptoms and traits into different levels of increasing heterogeneity, from narrow (i.e., symptoms and traits) to broad (i.e., superspectra) dimensions. Six broad spectra are currently recognized: Somatoform, Internalizing, Thought Disorder, Detachment, Disinhibited-Externalizing, and Antagonistic-Externalizing. The transition to evidence-based frameworks such as HiTOP requires the integration of widely used psychodiagnostic tools. The Personality Assessment Inventory (PAI) is a tool consistent with the HiTOP approach and thought to reflect the latent structure of HiTOP, although no studies to date have examined this hypothesis.

Methods: The PAI was administered to a large community and clinical sample (N = 3845; non-clinical = 3249; clinical = 596). Forbes's extended bass-ackwards hierarchical factor analytic approach was used to assess the joint structure of HiTOP. The PAI Clinical, Treatment, and Interpersonal scales and subscales were included in the model using principal component analysis.

Results: The hierarchical nested cluster analysis yielded six factors corresponding to the latent dimensions of HiTOP: Somatoform, Internalizing (Fear and Distress), Thought Dysfunction (Thought Disorder and Mania), Detachment, Disinhibited-Externalizing, and Antagonistic-Externalizing.



Discussion: The PAI proved to be suitable for mapping the latent dimensions of HiTOP, suggesting its applicability in clinical contexts and supporting the HiTOP consortium's calls for a transition to evidence-based psychopathology.



The latent structure of DSM-5 Obsessive-Compulsive Spectrum in the perspective of the Hierarchical Taxonomy of Psychopathology

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Abstract

Introduction: The Hierarchical Taxonomy of Psychopathology (HiTOP) represents a hierarchical model of psychopathology based on structural evidence. Interestingly, the placement of obsessive–compulsive and related disorders (OCRDs) within the HiTOP model still needs to be clarified, and structural and validation evidence for is limited and confined to obsessive-compulsive disorder (OCD).

Methods: To evaluate the latent structure of *DSM-5* OCRDs, a community-dwelling sample of adults ($N=1,011$; 71.8% female; mean age=30.07 years, $SD = 13.08$) were administered the Obsessive–Compulsive Spectrum Disorder Scales for *DSM-5*, the Brief Obsessive-Compulsive Scale (BOCS), as well as measures of theoretically-relevant external constructs (internalizing and thought disorder dimensions, negative urgency and related disinhibition traits, and dysfunctional personality indicators). Different structural models of OCRDs were tested in item-level weighted least square mean and variance adjusted confirmatory factor analyses.

Results: A bifactor model postulating a general spectrum factor, and five specific factors corresponding to obsessive–compulsive disorder (OCD), hair pulling disorder (HPD), skin-picking disorder (SPD), dysmorphic disorder (BDD), and hoarding disorder (HD) was provided with adequate fit index values and was the best fitting model. Both the general factor and specific factors showed relations with BOCS scale latent factor in structural equation modeling. Finally, the OCRDs general and specific factors yielded differential relationships with external criteria in multiple indicators multiple causes models.

Discussion: Consistent with recent HiTOP data suggesting that obsessive-compulsive spectrum could be considered as a component of the thought disorder dimensions (Forbes et al., 2021); rather, OCD, HPD, SPD, BD, and HD specific factors yielded different relationships with disinhibition constructs, internalizing, and thought disorder dimensions, and *DSM-5* Alternative Model of Personality Disorder Criterion A and dysfunctional personality domains self-reports. As a whole, our findings suggest that assessing both obsessive-compulsive latent disposition (i.e., the obsessive-compulsive spectrum general



factor) and specific manifestation of the obsessive-compulsive spectrum (i.e., the OCD, HPD, SPD, BD, and HD dimensions) in their differential relationships with external variables may represent a viable path for understanding how OCD, HPD, SPD, BD, and HD may be shaped as different construct stemming from a common latent disposition.



Non-suicidal self-injury in the perspective of the Hierarchical Taxonomy of Psychopathology

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Abstract

Introduction: The Hierarchical Taxonomy of Psychopathology (HiTOP) is an empirically derived classification system of psychopathology comprising transdiagnostic dimensions. Non-suicidal self-injury (NSSI) is self-inflicted, intentional harm to the surface of one's body to induce bleeding, bruising, or pain without suicidal intent. NSSI is prevalent in individuals in community settings and represents a significant public health concern. Notwithstanding its relevance, to the best of our knowledge, only one study examined the placement of NSSI within the HiTOP spectra.

Methods: A community-dwelling sample of adults ($N=567$; 67.0% female; mean age=26.47 years, $SD=9.80$) were administered the Deliberate Self Harm Inventory (DSHI), the Functional Assessment of Self-Mutilation (FASM), the *DSM-5* Level 2 Depression, the *DSM-5* Level 2 Anxiety, the *DSM-5* Level 2 Anger, the Eating Attitudes Test-26 (EAT-26), the Brief Obsessive-Compulsive Scale (BOCS), the Community Assessment of Psychic Experiences-Positive 15 (CAPE-P15), the Alcohol Use Disorders Identification Test (AUDIT), the Drug Use Disorders Identification Test (DUDIT), the *DSM-5* Severity of Dissociative Symptoms (DES-B), the Personality Diagnostic Questionnaire-4+, and Five Factor Model Rating Form (FFMRF).

Results: Different structural models of HiTOP spectra dimensions were tested in order to assess their multivariate association with NSSI frequency. In our samples, NSSI was associated with HiTOP Internalizing and Externalizing spectra in multiple indicators multiple causes models. Moreover, confirming and extending previous data, our structural models showed that NSSI seems to be common to many manifestations of mental disorder.

Discussion: As a whole, the present findings suggested the relevance of transdiagnostic dimensions in understanding NSSI and highlight the potential usefulness of dimensional approaches to psychopathology for predicting clinical outcomes related to self-injurious behaviors.



Early indicators of depression vulnerability: an RDoC psychophysiological perspective

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Abstract

Introduction: Depression is among the most burdensome conditions worldwide and is characterized by affective, cognitive, and somatic symptoms that significantly impair individuals' daily functioning. Yet, the mechanisms for this disorder remain unclear and prevention and intervention efforts are only moderately efficacious. Hence, a better understanding of the mechanisms underlying depression vulnerability might foster early identification and improve more targeted prevention. Considering that the categorical approach to mental disorders does not allow a clear identification of at-risk conditions, the dimensional approach provided by the Research Domain Criteria (RDoC) is useful in the exploration of vulnerability to psychopathology. *Methods:* In this talk, a series of psychophysiological studies exploring several RDoC domains in populations at-risk for depression (i.e., individuals with subclinical depression and with a familiar risk for the disorder) will be presented. *Results:* First, studies that explored the Positive and Negative Valence Systems will be described, suggesting that vulnerability for depression might be characterized by reduced processing of all emotional stimuli, as indexed by the late positive potential (LPP), an electrocortical measure reflecting motivated attention to affective stimuli. Given that depression is more than a disorder of affective dysregulation, studies showing that vulnerability for depression is also characterized by disturbances of the Arousal and Regulatory Systems (i.e., autonomic imbalances) and the Sensorimotor Systems (i.e., reduced actigraphy-based physical activity) will be discussed. *Discussion:* Finally, future directions for the application of psychophysiological research in reaching a more complete understanding of depression vulnerability and, ultimately, improving clinical utility, will be outlined.



**PSYCHOLOGICAL FUNCTIONING AND INDIVIDUAL AND INTERPERSONAL
WELLBEING**

Proposer

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Discussant

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Abstract

This symposium is organized by the Early CAREer REsearchers' network (E-CARE) of the Clinical and Dynamic Section of the Italian Association of Psychology (AIP). E-CARE brings together early career researchers with the aim of promoting the exchange of expertise and fostering collaboration at national and international level.

The symposium explores the role of different dimensions of psychological functioning such as mentalization, empathy and interpersonal guilt and their influence on psychopathological outcomes in children, Intimate Partner Violence, and career aspirations, with a focus on intergenerational transmission of trauma and its impact on individual and interpersonal wellbeing.

The first contribution by Di Giandomenico examines the mediating role of child mentalization in the relationship between the most at-risk parent cluster (characterized by high levels of childhood trauma, anxious and avoidant attachment, and prementalizing modes) and child psychopathological outcomes, shedding light on mechanisms involved in the intergenerational transmission of trauma.

The second contribution by Paradiso explores the mediating role of mentalization in the relationship between violence in the family of origin and perpetration of isolating behaviors towards the partner, supporting the intergenerational transmission of violence by delving into the psychological mechanisms involved and providing insights at the theoretical and clinical level.



The third contribution by Mazza, based on the Control-Mastery Theory, proposes the development of a series of instruments aimed at assessing interpersonal guilt in 6- and 10-year-old children, exploring the relationship between parent and child interpersonal guilt and the impact on child's behaviors and adjustment.

Finally, the fourth contribution by Pezzi and Cipriano examines the differences in empathy, personality traits, and psychopathology between students intending to pursue psychotherapy training and those who do not. The results suggest that students who intend to pursue psychotherapy training have higher levels of empathetic concern, conscientiousness and openness, providing evidence for the development of policies at universities and psychotherapy training institutes.



Violence in the Family of Origin, Intimate Partner Violence and Mentalization: A preliminary investigation

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Abstract

Introduction: A large body of research has highlighted an association between violence suffered in the family of origin (VFO) and perpetration of IPV. However, few studies have focused specifically on the perpetration of isolating behaviors, and other data are needed to understand the mechanisms involved in this association. In line with Fonagy's mentalizing model, the present study aims to investigate the association between VFO and the perpetration of isolating behaviors, exploring the mediating role of mentalization. *Methods:* A total of 663 Italian participants who were in a relationship filled out online self-report questionnaires. The results were evaluated through mediation analysis to assess the direct and indirect effects of VFO on perpetration of isolating behaviors. *Results:* A direct association was found between VFO and perpetration of isolating behaviors. Furthermore, an indirect effect was found between VFO and IPV, mediated by both the certainty and uncertainty dimensions of mentalization. *Discussion:* The results emerged highlight the mediating role of mentalization in the intergenerational transmission of violence from the family of origin to the couple relationship, providing useful data on a theoretical and clinical level.



"Wounded students": differences in empathy, personality traits, and psychopathology between psychology students with psychotherapy training aspiration and those without it

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Abstract

Introduction: The mental health of psychology students stands as a pivotal concern for institutional policies. Existing literature suggests that self-healing purposes might lead individuals to become psychotherapists, alongside other motives such as the desire to help others or understand human behaviors. There has been scant attention given to the psychological features that might differentiate psychology students aspiring to become psychotherapists from those who do not. Accordingly, this study aimed to assess the severity of clinical symptoms exhibited by psychology students and investigate differences in empathy, personality traits, and psychopathology between those intending to pursue psychotherapy training and those who do not. *Methods:* The study involved a large sample of students ($N = 1978$, 89.2% females) aged 18 to 30 years ($M = 22.72$, $SD = 2.59$), all of whom were enrolled in bachelor's or master's degree programs in psychology at Italian universities. Participants compiled self-report instruments assessing empathetic dispositions, personality traits, and clinical symptoms. The severity of clinical symptoms reported by psychology students intending to attend psychotherapy training ($n = 1309$) and those who do not ($n = 669$) was examined through descriptive statistics. A multivariate analysis of covariance was performed to investigate the group differences in the variable of interests, taking into account the effects of gender and age. *Results:* Both groups exhibited clinically relevant levels of somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, and paranoid ideation. Furthermore, higher levels of empathetic concern, conscientiousness and openness have been found among psychology students intending to attend psychotherapy training. *Discussion:* Our findings suggest that students may choose to enrol in a psychology program to better understand and deal with their own psychological vulnerabilities. Thus, universities and psychotherapy training institutes should enact policies aimed at fostering the well-being of students who may pursue a career as psychologists or psychotherapists. Also, psychotherapy training programs might include sessions aimed at helping students to leverage their



psychological dispositions, such as empathy, consciousness and openness, to improve their professional abilities.



Interpersonal guilt in childhood

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Abstract

Introduction: Control-Mastery Theory (CMT) assumes that, since their childhood, the overarching goal of human mental functioning is to understand and adapt to reality, and that human beings are intrinsically motivated to solve their problems and control their emotional and psychic life both consciously and unconsciously. Therefore, since the beginning of their life, human beings develop reliable knowledge about self, others, and the world, i.e. a system of beliefs. Beliefs developed to adapt to traumas are considered pathogenic when they associate the pursuit of an adaptive goal to dangers for the self or significant others. CMT has identified five broad classes of pathogenic beliefs supporting feelings of maladaptive shame and interpersonal guilt: Survivor Guilt, Separation/Disloyalty Guilt, Omnipotent Responsibility Guilt, Self-Hate Guilt, and Burdening Guilt beliefs. Maladaptive interpersonal guilt is associated with psychopathology. The Interpersonal Guilt Rating Scale-20 (IGRS-20), both in its clinician-report and in its self-report version, is an empirical tool aimed at assessing interpersonal guilt according to CMT (IGRS-20s). The aims of the present study are: i) to develop a version of the IGRS useful for measuring interpersonal guilt in 6- to 10-year-old children; ii) to investigate the relationships between parent and child guilt. *Methods:* To this aim, two further scales were created: a version of the IGRS that can be administered to 6- to 10-year-old children, and a version of the same scale that uses vignettes to assess the different kinds of guilt investigated by CMT. Both instruments were administered to children. In addition, parents assessed their children with the IGRS-20, the Child Behaviour Checklist (CBCL) and an informant version of the IGRS for children. *Results:* Factor analysis and correlation analysis have been carried out. The results showed that it was possible to distinguish between self-hate and other altruistic guilt. *Discussion:* Since interpersonal guilt, as it depends on pathogenic beliefs, develops in childhood, its early detection can have a high clinical relevance and can be helpful in the treatment of patients of this age group and their families; moreover, it can provide important insights about the relationships between parent's and children's guilt.

Cluster analysis of childhood trauma, attachment, and reflective functioning differentiates subgroups of parent couples: The role of adolescent mentalization in relation to child outcomes

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Abstract

Children of parents with childhood adversities tend to develop impaired behavioral health outcomes, suggesting the intergenerational effects of childhood trauma; however, the mechanisms by which this occurs in adolescence remain under investigation. Driven by mentalization theory, this study aims to identify clusters of parent couples with similar patterns of functioning based on childhood trauma (CTQ), attachment (ECR-R), and parental reflective functioning (PRFQ-A); the association with internalizing, externalizing (YSR), and borderline personality traits (BPFS); and the role of child mentalization (MZQ, RFQ).

161 mother-father-adolescent triads ($M=15.7\pm 1.47$) were recruited. Cluster analysis revealed two clusters of 74 and 87 mother-father couples, respectively, that differed in children's perceptions of parenting (PBI) and attachment (ECR-RC).

Mediation analyses revealed the mediating role of child mentalization in the association between the most at-risk parent cluster (characterized by high levels of childhood trauma, anxious and avoidant attachment, and prementalizing modes) and child psychopathological outcomes.

This study advances the understanding of the mechanisms contributing to the intergenerational transmission of trauma and suggests mentalization as a possible intervening factor. Study limitations, clinical implications, and future research directions are discussed.



Friday, Day 13th September 2024

THEMATIC SESSION

**“CLINICAL PSYCHOLOGY IN MEDICAL CONDITIONS:
ADVANCES AND PERSPECTIVES OF RESEARCH AND
INTERVENTIONS”**

Chair:

Caterina Grano

Sapienza University of Rome



Family Functioning and dyadic relationship in Multiple Sclerosis

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Abstract

Introduction: Multiple sclerosis (MS) is a chronic inflammatory and neurodegenerative disease often associated with cognitive impairment and psychological distress. MS can negatively impact the family functioning (FF) of people with MS (PwMS) and their dyadic relationships. In addition, psychological distress, alexithymia and a lack of social support can affect the quality of relationships. The aim of the present study was to assess the FF and the quality of dyadic relationships of PwMS and their partners. In addition, the relationships between alexithymia, psychological distress (anxiety and depressive symptoms), perceived social support, dyadic relationships and FF were investigated.

Methods: The couples, consisting of PwMS and their respective partners, were recruited from the Italian MS centers involved in the project. The following questionnaires were completed via a dedicated online platform: (1) the Brief Family Assessment Measure III (FAM-III); (2) the Hospital Anxiety and Depression Scale (HADS); (3) the Multidimensional Scale of Perceived Social Support (MSPSS); (4) the Toronto Alexithymia Scale (TAS-20); (5) and the Dyadic Adjustment Scale (DAS).

Results: The final sample comprised 28 couples (16 women and 12 men with MS and their partners) with a mean age of approximately 46 years. The data showed no correlation between the FAM-III scores of the MS patients and the partner, while there was a statistically significant correlation between the DAS scores ($r=.496$, $p<.007$).

The FAM-III scores of the patients correlated significantly with the DAS ($r=-.643$, $p<.01$), MSPSS ($r=-.624$, $p<.01$) and TAS-20 scores ($r=.424$, $p<.025$) as well as with the HADS-Depression scores ($r=.493$, $p<.008$) and MPSS scores ($r=-.447$, $p<.017$) of the partners. The partner's FAM-III scores correlated significantly with his/her level of anxiety (HADS-Anxiety $r=.558$, $p<.002$) and depression scores (HADS-Depression $r=.844$, $p<.01$), with the TAS-20 ($r=.466$, $p<.012$), MSPSS ($r=-.562$, $p<.002$) and DAS scores ($r=-.451$, $p<.016$).

Discussion: The results of this study show that the couples agree on the quality of the dyadic relationship, while there is no correlation in terms of perceived FF. The partners' psychological distress seems to be a



crucial factor influencing both patients' and partners' perceptions of FF, suggesting that special attention should be paid to this aspect in clinical practice.



Somatization of emotional experience in patients with temporomandibular disorders: the role of mentalized affectivity and interoceptive awareness

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Abstract

Introduction: Temporomandibular disorders (TMDs) are a set of clinical conditions involving the masticatory muscles, the temporomandibular joint, and related orofacial structures, which produce (even chronic) pain in the mouth and face. Research has largely investigated the psychological factors associated with TMDs, providing robust evidence of the tendency of TMD patients to experience psychological distress as somatic symptoms. Despite the extensive research conducted in this field, no study has yet explored the role of mentalized affectivity and interoceptive awareness in predicting somatic symptoms in TMD patients. The aim of this study was, therefore, to fill this gap. *Methods:* Fifty patients with TMDs completed standardized surveys, including: the Graded Chronic Pain Scale (GCPS-2.0), the Patient Health Questionnaire-15 (PHQ-15), the Multidimensional Assessment of Interoceptive Awareness (MAIA), and the Mentalized Affectivity Scale (MAS). One hierarchical multiple linear regression was run to determine the role of the factors that were significant at a 0.05 significance level in Pearson correlations in predicting somatic symptoms in TMD patients; a mediation analysis was then conducted, entering the eligible variables. *Results:* Somatic symptoms were uniquely predicted by the MAS “Expressing Emotions” subscale, and this relationship was mediated by the MAIA “Not-Worrying” and “Trusting” subscales. *Discussion:* These findings – albeit preliminary – show that patients with TMDs are inadequately conscious that their-own physical stimuli can be the somatic expressions of their-own emotions. As a result, these patients are susceptible to worry excessively when perceiving pain and experience their body as unsafe and untrustworthy: this may lead them to falsely attributing (even innocent) physical signs to physical illness. These results may have significant implications for clinical practice, guiding (in parallel to medical treatments) psychological intervention programs aimed at supporting TMD patients to express emotions and interpret correctly the signals originating from their body.



The Impact of Psychological Factors on Nociceptive Pain: A Comparative Analysis of Alexithymia, Defense Mechanisms, and Trauma Across Different Conditions

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Abstract

Background and Aims: To better comprehend the etiology of chronic pain (CP), IASP has proposed the label of Nociceptive Pain (NP) which encompasses conditions resulting from altered nociception without clear evidence of actual or threatened tissue damage. NP encompasses clinical conditions with common neurophysiologic mechanisms, such as fibromyalgia (FM), chronic headache (CH), and vulvodynia (VU). One possible mechanism underlying NP is Central Sensitivity (CS), defined as an increased responsiveness of nociceptive neurons in the central nervous system to normal or subthreshold inputs. Literature has linked CS to psychological factors, whose central role in CP conditions is recognized. However, the specific role of these factors in each chronic condition is still unclear, just as there is a lack of studies comparing psychological variables in patients with various CP both in isolation and in comorbidity. This study aims to compare the impact of psychological factors (traumatic experiences, defense mechanisms, and alexithymia) between different CP conditions, in particular: CH FM, VU, mixed diagnoses (MX; consisting of FM in comorbidity with CH and/or VU), and a control group (HC). *Methods:* 1006 women (n=195 CH, n=186 FM, n=193 VU, n=315 MX, n=117 HC) completed a self-administered online protocol. ANCOVA, MANCOVA, and Bonferroni post hoc tests were performed with age as a covariate. *Results:* Significant differences were found among the five groups in the variables examined: traumatic experiences ($F = 12.710$; $p < 0.001$), alexithymia ($F = 10.819$; $p < 0.001$), and neurotic defenses ($F = 10.991$; $p < 0.001$). Bonferroni post hoc tests showed that MX, compared with the other conditions, is more characterized by a childhood history of trauma (especially neglect and emotional abuse). In addition, both MX and FM differed from the other groups in significantly higher scores in both the inability to identify feelings and the use of neurotic defensive strategies. *Conclusions:* Traumatic experiences, particularly emotional neglect and physical threats may contribute to the development and worsening of CP conditions, especially in individuals with comorbidities. Moreover, FM and MIX show a greater tendency for neurotic defenses and greater alexithymia, underscoring the impact of emotional processing difficulties on the manifestation of CP.



The role of psychological flexibility in chronic pelvic pain: preliminary findings from the ACTonPAIN project.

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Abstract

Introduction: Chronic pelvic pain (CPP) is defined as pain lasting over 6 months in the pelvic region which cannot be explained by infection or other obvious local pathology. CPP is often associated with negative emotional, cognitive, behavioural and sexual consequences and is cause of disability, poor health-related quality of life and increased healthcare and medication utilization. Recent studies highlighted the role of psychological factors in the genesis and maintenance of different types of pelvic pain. In the field of chronic pain, there is a growing interest about the model of psychological flexibility (PF). The PF model is composed of 6 core processes: acceptance, defusion, contact with the present moment, self as a context, values and committed action. Evidence considers PF as a mental health protective factor: it is associated with adaptive behaviours and response to distress and better mental health outcomes. On the other hand, lower levels of PF (or psychological inflexibility) are related to more dysfunctional behaviours, psychopathology and poor mental health. Nevertheless, evidence on the role of PF in chronic pelvic pain is still scarce. Thus, the purpose of this study is to explore the role of psychological flexibility on pain and quality of life in patients suffering from CPP.

Methods: 114 women with CPP were enrolled in this study. Patients completed an online survey including a measure of psychological flexibility (MPFI), mood (DASS-21), pain intensity and pain interference (BPI and NRS). Bivariate correlations were run to assess the association of predictors on outcome measures.

Results: Bivariate correlations revealed significant association of pain interference with stress ($p < 0.002$) and anxiety ($p < 0.009$). Regarding psychological inflexibility subscale, fusion ($p < 0.0049$) and lack of contact with values ($p < 0.0027$) resulted associated with pain interference, while no associations were found on the composite score of psychological flexibility or psychological inflexibility. Discussion: This study confirmed the results of the existing literature on CPP, affirming the link between psychological factors and the condition. Interestingly, while no significant associations were identified between the composite score of psychological flexibility and pain interference or intensity, correlations were observed with specific components of the psychological flexibility model, such as fusion and values. Further



longitudinal studies, encompassing a larger participant pool, are warranted to delve deeper into these associations. Ultimately, these results underscore the need for tailored psychological interventions for CPP patients, potentially leveraging the enhancement of specific psychological flexibility subscales.

Alexithymia and Hypertension: Does Personality Matter? A Systematic Review and Meta-analysis.

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Abstract

Introduction: Personality characteristics, such as alexithymia, may lead to alterations in the autonomic nervous system functionality, predisposing individuals to an increased risk of hypertension (HTN). The present systematic review and meta-analysis was conducted to address the following objectives: 1) To quantify the presence of alexithymia in people with HTN; 2) To clarify if the prevalence and mean level of alexithymia are higher in people with HTN than in individuals without HTN; 3) To examine the possible influence of specific factors (i.e., sex, age, and year of article publication) on alexithymia.

Methods: A systematic review and meta-analysis was performed in line with the guidelines of the Preferred Reporting Items for Systematic Reviews and Meta-analysis Protocols (PRISMA). PubMed, PsycINFO and Scopus databases were systematically searched, using the following strings with Boolean operators: (“alexithymia” OR “alexithymic”) AND (“hypertension” OR “hypertensive”). Data were meta-analyzed with random-effects models.

Results: A total of 13 studies met the inclusion criteria. The overall prevalence of alexithymia in people with HTN was 32% based on data of 10 studies. The prevalence of alexithymia in people with and without HTN were obtained from 5 studies (26.3% vs 15.0%; pooling of odd ratios, 3.15 [95% CI, 1.14;8.74]), whereas the mean level of alexithymia in people with and without HTN was obtained from 7 studies Hedges g , 1.39 [95% CI, -0.39;3.16]). There was a significant association between alexithymia prevalence and year of article publication ($\hat{g} = -0.04$; 95% CI, -0.07; -0.01), whereas no significant relationship was detected between the former and both sex and age.

Discussion: Findings revealed a greater prevalence of alexithymia in people with HTN than those without HTN. These findings suggest that alexithymia may contribute to both the onset and persistence of HTN symptomatology. However, future research is needed to clarify this association. Psychological interventions might be implemented, focusing on improving the ability to identify emotions and on



increasing adaptive emotional regulation processes in individuals with HTN. In this way, the maintenance of treatment adherence and the quality of life of these patients could be enhanced.



The Psychological Facet of Hypertension: What are the Individual Differences?

*Marialaura Di Tella*¹, *Francesca Novello*², *Alberto Milan*², *Lorys Castelli*¹

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

² Department of Medical Sciences, University of Turin, Turin, Italy

Abstract

Introduction: Growing evidence is showing that psychological factors may play an important role in the onset and maintenance of Hypertension (HTN). Particularly, anxiety/depressive symptoms, acute stress, and specific personality characteristics (e.g., type-D personality and alexithymia) have been frequently reported in people with HTN. The main aim of the present study was to evaluate all those psychological factors in HTN patients comparing them to a group of healthy controls (HC). Methods: Fifty-one patients with HTN and 55 matched HC were enrolled in this cross-sectional case-control study. All participants completed a battery of questionnaires, assessing anxiety/depressive symptoms (Hospital Anxiety and Depression Scale), type-D personality (Type D Scale-14), alexithymia (Toronto Alexithymia Scale), and perceived stress (Perceived Stress Scale).

Results: Independent t-tests revealed the presence of significant differences between HTN patients and HC in anxiety (mean \pm SD: 6.61 ± 3.38 vs. 4.80 ± 3.01 ; $t(104) = 2.914$, $p = .002$) and depressive (mean \pm SD: 5.78 ± 3.81 vs. 4.15 ± 3.14 ; $t(104) = 2.425$, $p = .009$) symptoms, negative affectivity dimension of type-D personality (mean \pm SD: 12.73 ± 5.45 vs. 9.27 ± 5.81 ; $t(104) = 3.149$, $p = .001$), alexithymia (mean \pm SD: 48.61 ± 10.31 vs. 43.91 ± 11.02 ; $t(104) = 2.263$, $p = .013$), and perceived stress (mean \pm SD: 18.27 ± 6.69 vs. 13.11 ± 6.34 ; $t(104) = 4.083$, $p < .001$). Moreover, chi-square tests showed significant differences between the two groups in the presence of clinically relevant anxiety ($X^2 = 8.984$, $p = .003$) and depressive symptoms ($X^2 = 5.703$, $p = .017$), and alexithymic traits ($X^2 = 4.497$, $p = .034$).

Discussion: These findings have shown the presence of higher levels of anxiety/depressive symptoms, negative affectivity dimension of type-D personality, alexithymia, and perceived stress in HTN patients compared to HC. These psychological factors should be carefully evaluated in the management of HTN. Consideration of both physical and psychological aspects could allow clinicians to plan better-tailored treatments specific for each patient's needs.



Headache impact and self-efficacy: the relationship between pain management and emotions

Federica Guerra^{1,2}, *Dina Di Giacomo*²

¹ Research Fellow in Health and Environmental Sciences, University of L'Aquila, Italy; Postgraduate School of Clinical Psychology

² Department of Life, Health and Environmental Sciences, University of L'Aquila, Italy

Abstract

Background: Migraine is a common disabling primary headache disorder. It is the second most prevalent neurological disorder worldwide and is responsible for more disability than all other neurological disorders combined. episodic migraine is characterized by headaches that occur on fewer than 15 days per month. Before the onset of pain, prodromal symptoms can include a depressed mood, yawning, fatigue, and cravings for specific foods. Several different factors can increase risk of having a migraine and include, stress, emotion, low blood sugar, tobacco, skipped meals, stress, anxiety and depression. Depression, anxiety, bipolar disorder, sleep disorders, and epilepsy are more common in individuals with migraine than in the general population.

Objective. This study aimed to evaluate the relationship among impact of headache and pain self-efficacy and psychological dimensions in EM patients.

Design. We conducted an observational study in 71 outpatients aged 18-55 years (mean age 34.3; SD \pm 10.6) with EM.

Method. All patients have been enrolled at the Neurology and Stroke Unit, Headache Center. The measurement was composed of two standardized psychological self-assessments that measure the pain self-efficacy (PSE-Q) and emotional dimensions (DASS-21; depression, anxiety, and stress) and two questionnaires that measurement the disability of migraine (MIDAS; HIT-6).

Results. We performed a Pearson's correlation to investigate the relationship between migraine impacts and psychological dimensions. Pain self-efficacy (PSE-Q) showed a negatively correlation between MIDAS ($r=-0.337$; $p=0.004$), HIT-6 ($r=-0.674$; $p<.001$), depression, and stress (DASS-21) ($r=-0.280$; $p=0.018$); positively correlation showed between impact of migraine (HIT-6) and depression and stress ($r=0.433$; $p<.001$).

Conclusion. Our findings revealed that migraine impacts severely the quality of life of patients on daily life. The psychological dimensions play an important role in patients' behavioral ability to manage their quality



of life and the pain associated at the disease. In particular, the results showed that the self-perception of pain management is greater in patients with high headache disability; consequently, greater are also symptoms of depression and anxiety. Through an integrated, patient-centred approach, patient QoL could be improved, and healthcare costs decreased.



Friday, 13th September 2024

THEMATIC SESSION

**“CONTEMPORARY ISSUES, SOCIAL TRAUMAS AND SOCIAL
CONTEXTS”**

Chair:

Cecilia Giordano

University of Palermo



The post-earthquake in L'Aquila: exploring the key role of perceived urban quality and environmental well-being

*Enrico Perilli*¹

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

Abstract

This research explored the role of age in explaining individual differences in environmental well-being, also addressing the potential involvement of perceived urban quality. The study was conducted on 100 inhabitants (Mean age = 46.48; SD age = 17.43) of MAP (Moduli Abitativi) and CASE (Complessi Antisismici Sostenibili ed Ecocompatibili) projects built after the earthquake of 6 April 2009 in L'Aquila, Italy. This study is conducted 15 years after the earthquake of L'Aquila. Although the 2009 MAP and CASE projects solved the housing problem in an emergency situation, they lacked essential services such as churches, schools, pharmacies, post offices, supermarkets, social and sports centres, and limited public transport. Moreover, when these housing solutions were built, the social or spatial characteristics of the city and the relations between the centre and the periphery were not taken into account. Interestingly, CASE and MAP could be defined as 'perturbing' or 'non-places': places lacking in history, identity and social relations, but also spaces dedicated only to the rehabilitation of people, where services, sociability and social relations are lacking. Participants filled in a battery of questionnaires, including a short socio-demographic questionnaire, the Perceived Residential Environment Quality (PREQ), and the World Health Organization Quality of Life Brief (WHOQOL-Brief). Overall, results indicate that perceived urban quality mediated the association between age and environmental well-being ($B = 0.01$, $BootSE = 0.01$, $BootCI\ 95\ \% = [0.001, 0.044]$). In particular, results suggest that as age increases, perceived urban quality increases and people experience greater environmental well-being, confirming the involvement of perceived urban quality as a mediator in the relationship between age and environmental well-being. Overall, the study provided an innovative perspective on the critical situation of MAP and CASE projects, suggesting that the reorganisation of residential and urban environments should consider psychological features, which could provide general well-being after a long period from 6 April 2009.



Exploring the work experience of lg people in naples: a qualitative research trough the free association narrative interviews

Marina Lacatena¹, Ferdinando Ramaglia¹, Massimiliano Sommantico¹

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

Abstract

This study represents a qualitative deepening of a systematic review of the literature on the peculiarities of the work experience of LG people. The results of the review have indicated that the majority of LG participants involved in the studies suffer from the dominant heteronormativity and segregation policies and have experienced discrimination and micro-aggressions in the workplace, with important and recurring effects on psychological health (e.g., anxiety, depression), job satisfaction (e.g., sense of belonging to the organization, career expectations), and life satisfaction (e.g., perception of authenticity, work-family balance, couple relationship, etc.). It means that, despite an increase in the promotion of equal opportunities at work, there is still persistent discrimination against LG workers.

We present preliminary results from interviews conducted with three gay men and three lesbian women working in the city of Naples. In-depth interviews were conducted using the Free Association Narrative Interview (FANI) method. This methodology is based on the assumptions of free associations, defended subject, unconscious intersubjectivity, and reflexivity. The initial question in each interview was “What is your work history?” to which a further five follow-up questions were added. Each interview was conducted twice, an average of ten days apart, for a total of 28 interviews of approximately 1 hour each. The analysis of each transcript was carried out under the supervision of a psychoanalyst trained in the FANI method.

The analysis of the transcripts mostly confirmed the data collected in the previous systematic review. Outness, internalized sexual stigma and micro-aggressions reappeared as the most significant variables in the narratives of the interviewees and as the points in relation to which the subjects' defenses most strongly emerged. Connectedness to community, relational satisfaction and working in LG-sensitive and inclusive organizations reconfirmed themselves as the most significant protective factors in the interviewees' work experience.



Taken together, the results suggest the need for the implementation of interventions aimed at minimizing the effects of stigma and heterosexism on LG workers and promoting their well-being in work contexts.



A Networked Model of Ecological Systems Theory to discuss concerns in Italian bisexual+ and transgender people after the block of the “Zan Bill” by Senate.

Daniele Rucco¹, Greta Toffoli¹, Annalisa Anzani¹, Antonio Prunas¹

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

Abstract

Introduction: Transgender and bisexual+ individuals are two of the most marginalized groups within the LGBTQ+ community. This marginalization is bolstered by transnegativity and binegativity at structural levels. Consequently, concerns regarding their safety and legal status arise within these social groups. This study aimed to explore the concerns felt by Italian transgender and bisexual+ individuals following the block of the Zan Bill by the Senate, a bill against hate crimes based on sex, gender, sexual orientation, gender identity, and disability.

Methods: The study was conducted online from December 2021 to March 2022. A qualitative investigation of participants' answers to the following open-ended question was conducted: “What potential concerns rose in you or were reinforced as a result of the Zan Bill's block?”. The total sample included 201 Italian individuals (137 bisexual+ and 64 transgender). A Coding reliability thematic analysis of participants' responses was conducted.

Results: The blockage of the Zan bill, conceived as a form of structural stigma, has influenced the lives of transgender and bisexual+ individuals at individual, familial, organizational, and systemic–institutional levels. The authors generated three overarching themes, which can be divided into eight sub-themes: (1) concerns for personal safety, i.e., concerns related to expectations of discrimination, physical or psychological violence in various life circumstances, or decreased well-being; (2) concerns about the safety of loved ones or other LGBTQIA+ individuals, women+, and people with disabilities; and (3) concerns about the rule of law in Italy, i.e., concerns related to future sociopolitical scenarios in Italy for bisexual+ and transgender people rights.

Discussion: Themes have been discussed by adopting the networked model of ecological systems theory, an adaptation of Bronfenbrenner's ecological systems theory. The macro-theme of concerns for personal safety can be conceptualized at the microsystemic and mesosystemic levels, the theme concerning concerns for the safety of loved ones and other LGBTQIA+ individuals at the exosystemic level, and concerns for the rule of law in Italy at the macrosystemic level. In this context, the role of the



chronosystem is identified in altering social interactions among individuals over time and modulating their concerns.



**Unveiling Biases: Examining Clinical Approaches Toward Migrants to support
Ethnopsychology Services.**

Antonio Iudici¹, Jessica Neri²

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

Abstract

Introduction: The intricate nature of migration patterns worldwide has prompted a reassessment of psychological and social services and their users. This process has been exacerbated by various emergencies (health-related, humanitarian emergencies) that have occurred in recent years. The influx of migrants from diverse cultural backgrounds seeking access to clinical or social health services has diversified the demand for concurrent support. In 2017, the American Psychological Association published a set of guidelines meant to “provide psychologists with a framework from which to consider evolving parameters for the provision of multiculturally competent services”. In recent years, numerous investigations have honed in on elucidating the impact of racial stereotypes and biases within the medical sphere. As per these inquiries, cultural factors can significantly influence medical diagnoses, underscoring the importance of delving into cultural dynamics within the realm of psychological services. This premise consents to underline the need to explore in literature the potential biases among mental health professionals when they encounter individuals from diverse cultural backgrounds and their implications. This study aims to consolidate evidence concerning errors or preconceptions observed in clinical practices related to the delivery of social health services to individuals from varied cultural backgrounds.

Methods: We conducted a systematic literature review in accordance with the PRISMA (Preferred reporting items for systematic review and meta-analysis protocols) protocol. We wanted to provide a synopsis of the "primary sources," condensing the principal biases found in the literature that manifest during clinical interactions between migrants or culturally diverse users and mental health practitioners. The dataset considered started from 629 articles, and the articles selected and analyzed were 33.

Results: Findings reveal three primary forms of bias: activation of racial stereotypes, ethnocentrism, and micro-aggressions.

Discussion: Implications for the clinical setting were discussed, highlighting the importance of mental health professionals being cognizant of these biases to better navigate communication with users.



The forms of violence against women in contemporary society: the subjective experience of the professionals

Federica Facchin¹, Antonia Sorge¹

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

Abstract

Introduction: The World Health Organization identifies violence against women as a pressing public health issue, exacerbated by the pandemic and evolving contemporary challenges like technology-facilitated violence. The Istanbul Convention aimed at combating various forms of gender-based violence, but despite progress, withdrawal from Turkey in 2021 and emerging issues like revenge porn highlight the ongoing battle. The pandemic worsened intimate partner violence due to lockdowns, emphasizing the need for innovative support strategies. Additionally, pandemic-induced social inequalities, such as increased female unemployment, further compound the issue. Understanding and addressing these challenges through the subjective experiences of frontline workers is crucial in the fight against gender-based violence. Our project aims to explore the subjective experiences of professionals from various anti-violence centers, capturing their personal experiences and addressing new forms of violence in contemporary society.

Methods: Through a purposive sampling procedure, we recruited 20 professionals from various fields (such as gynecologists, psychologists, lawyers, social workers, forensic doctors) engaged in anti-violence centers. Online semi-structured interviews were conducted in accordance with the methodological framework of interpretative phenomenology. The video-recorded interviews were transcribed verbatim, removing any identifying details of the participants, and textual analyses were conducted, extracting main themes and subthemes.

Results: The extracted themes concern: the impact of the Covid-19 pandemic on gender-based violence, especially domestic violence; new forms of technology-mediated violence (including revenge porn); the specificity of the phenomenon in adolescence; the personal challenges faced by professionals, and management strategies, primarily focusing on the importance of teamwork.

Discussion: The results of this study indicate that our society is not only grappling with an increase in the phenomenon of gender-based violence but also with a proliferation of channels through which violence



can infiltrate, particularly technology. The results of our study can guide future research and provide best practice recommendations, including in the training of professionals.



Miners Mental Wellness: a Systematic Review.

Ruggero Andrisano Ruggieri¹, Sergio Miranda¹, João Santos Baptista², Oktay Şabbaz²

¹ Department of Human, Philosophical and Educational Science, University Of Salerno, Fisciano, Italy

² Mining Engineering Department, University of Porto, Rua Dr. Roberto Frias, s/n 4200-465 Porto, Portugal

³ Kutahya Dumlupinar University, DPU Tavsanlı, Kutahya/Turkiye

Abstract

Since the 1970s, a new concept of pathology because it is linked not only to a dimension but also to that which takes into account the influence psychological and social factors. This communication provides a systemic review of the application's conceptualization of minor mental illness and well-being. The preferred reporting item method for systematics and meta-analyses was applied to review articles. The results showed three main classes of well-being metals mining: hedonic, eudaimonic and a mixed model of two. The strengths and weaknesses of each model are through their operational implications. We have shown how these conceptualizations of mental well-being do not take into account the contextual and work factors which specifically seem to contribute to the mental state of minors.



Trauma, Self-Criticism and Life Meaning in a formally incarcerated sample: Preliminary results.

Valeria Saladino¹, Danilo Calaresi², Valeria Verrastro², Melissa D. Grady³

¹ Department of Health Sciences, Magna Graecia University of Catanzaro, Catanzaro, Italy

³ The Catholic University of America Washington, Washington, DC, U.S.A.

Abstract

The association between trauma and adverse psychological effects is well established, while mechanisms shaping meaning in life, especially in correctional settings, remain understudied. This research bridges this gap by investigating the connection between symptoms of post-traumatic stress disorder (PTSD), disturbances in self-organization (DSO), self-criticism (SC), presence of life meaning (PoLM)/search for life meaning (SfLM), in formally incarcerated individuals.

The study involved a sample of N=64 incarcerated individuals (100% men) aged 22-73 (M=42.88, SD=12.33) recruited from Italian correctional facilities. Participants completed the International Trauma Questionnaire (ITQ) to assess PTSD and DSO, the Inadequate Self Subscale of the Forms of Self-Criticizing/Attacking and Self-Reassuring Scale (FSCRS) to evaluate SC, and the Meaning in Life Questionnaire (MLQ) to assess PoLM and SfLM.

Correlation analysis highlighted significant links between trauma and self-criticism ($r=.52$, $p<.001$), trauma and SfLM ($r=.31$, $p<.01$), complex trauma and self-criticism ($r=.56$, $p<.001$), complex trauma and SfLM ($r=.31$, $p<.01$).

The current study provides preliminary insights into the complex interplay between trauma, self-criticism, and life meaning in correctional facility settings. Identifying self-criticism as a potential link between trauma and life meaning underscores the importance of addressing negative self-evaluations in interventions targeting meaning-making processes among individuals with a history of trauma.



The quality of interpersonal relationships moderates the association between PTSD symptoms in refugee children and their ability to remember traumatic events.

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

² School of Specialisation in Relational Systemic Psychotherapy, Milan Centre for Family Therapy (Milan), Milan, Italy

Abstract

Introduction: Understanding the association between posttraumatic symptomatology and memory is crucial in psychotherapy research regarding posttraumatic conditions, since recalling and reenacting the traumas represents a crucial step in elaborating them. However, literature shows that accessing traumatic memories is more difficult precisely for individuals with higher levels of traumatization, probably due to dissociative phenomena. The study aimed to investigate the relationship between level of posttraumatic symptoms and the number of traumatic memories, testing whether this association is influenced by the quality of interpersonal relationships. The hypothesis was that a higher resilience in interpersonal relations would reduce the activation of dissociative processes underlying the recall of traumatic events.

Methods: The study involved 133 Syrian children (Age: $M = 10.9$; $SD = 2.03$) refugee in Lebanon because of the war in their country. The children conducted a workshop in which, guided by a psychologist, they tried to recall their biographical memories by posing on a rope representing their lives a flower for each positive memory, or a stone for each negative memory (traumatic or nontraumatic). They also completed the Post Traumatic Stress Reaction checklist, that evaluates PTSD symptoms, and the Child and Youth Resilience Measure, that assesses resilience factors.

Results: The level of PTSD symptomatology correlated positively with the amount of negative traumatic memories ($r = .336$, $p < .001$). This correlation was moderated by the level of interpersonal resilience: the more children gave high scores on the family and peer resilience factors the more positive this association was, while in children with low family and peer resilience scores (-1 SD) the level of PTSD symptoms didn't predict the quantity of traumatic memories. Low interpersonal resilience, thus, seemed to negatively affect the ability to recall traumatic events in children with posttraumatic symptoms.

Discussion: The results suggest that professionals who offer PTSD treatments should pay special attention to children from backgrounds with lower interpersonal resilience. The promotion of this component of



resilience is a central and potential resource to be fostered where possible, to overcome dissociative factors that lead to non-remembering and thus obstructing the therapeutic work.



Friday, 13th September 2024

ROUND TABLES



NEW PERSPECTIVES IN PSYCHOLOGICAL ASSESSMENT

Proposer

*Lis Adriana*¹

¹ University of Padova

Participants

Aschieri Filippo, Catholic University of the Sacred Heart, Milan

Di Nuovo Santo, University of Catania

Lo Presti Alessandro, University of Campania "Luigi Vanvitelli"

Parolin Laura, University of Milan-Bicocca

Pignolo Claudia, University of Turin

Zennaro Alessandro, University of Turin

Abstract

The purpose of the round table is to present to the members of the clinical-dynamic section of AIP the landscape of psychological assessment at the national level, highlighting its challenges and opportunities. Topics will include the relationship between AIP and the publishers of assessment tests and the transparency of the procedures adopted by them, the issue of online assessment, the role of administration and interpretation of tests within the TPV, the availability of tests for AIP members, the teaching of tests, and the potential of growth within the field of psychological assessment.



**CLINICAL MODELS AND NEUROSCIENTIFIC PERSPECTIVES: MOVING BEYOND A
BRAINLESS PSYCHOLOGY AND A MINDLESS NEUROSCIENCE**

Proposer

Riccardo Williams¹, Andrea Scalabrini²

¹ Sapienza University of Rome

² University of Bergamo

Discussant

Mauro Cozzolino, University of Salerno

Participants

Riccardo Williams, Sapienza University of Rome

Andrea Scalabrini, University of Bergamo

Arianna Palmieri, University of Padua

Grazia Fernanda Spitoni, Sapienza University of Rome

Abstract

Psychodynamic theories and neuroscience are characterized by two distinct points of observation and languages about mental functioning. Is it possible to bridge the two?

In his original “Project for a Scientific Psychology”, Freud aimed at looking for a possible convergence between the basic laws of neurological functioning and his psychodynamic on the unconscious determinants of conscious processes as derived from his clinical observations. Some recent advances in affective neuroscience and neuropsychanalysis seem to follow the same road and respond to the same



double challenge: What kind of neuroscience does psychodynamic psychology require? What kind psychodynamic understanding do we need for neuroscience?

In this panel, we present some reflections concerning constructs and models of functioning that may create an area of convergence between psychoanalytic and neuroscientific languages. All these approaches serve the important function of moving beyond a brain-less psychodynamic psychology or a static and mind-less neuroscience.

In this panel, contributions that adopt such criteria of investigation are presented. Riccardo Williams, Marta Moselli and Alice Wisniewsky will present about “The role of rage in personality growth: insights from the neuroscience of motivation”. Mariagrazia Spitoni will present about “It is all about pleasure: the attachment pattern modulates the perception of physical pain”. Valentina Cimmino Picone, Johann Roland Kleinbub, Davide Ruffin and Arianna Palmieri will present about “Interpersonal physiology and reflective interventions in supporting caregivers”. Andrea Scalabrini will present about “The self and its organization: standing in the spaces between psychodynamic psychology and neuroscience”.

All contributions aim at developing a bridge between mind and brain both in an intra-psychic and interpsychic field. A neuropsychodynamic approach aims at preserving of a psychodynamic epistemology in the study of the relationship between mind, brain and body, underlining the individual's living environment, his affectivity, subjectivity and intersubjectivity. Moreover, this approach might be useful for a novel form of neuropsychodynamic informed psychotherapy.



THE NEGLECT: EMOTIONAL TRANSCURACY AND HIDDEN TRAUMA.

Proposer

*Antonello Colli*¹

¹ University of Urbino “Carlo Bo”

Discussant

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

Benedetto Farina, European University of Rome

Giuseppe Craparo, “Kore” University of Enna

Abstract

In spite of the lack of consensus and standardized definition of neglect construct, including its subtypes, neglect usually refers to the emotional or physical neglect experienced during childhood or in significant relationships, where an individual’s emotional, psychological, or material needs are unmet. The growing attention to neglect maltreatment derives from its association with an increased risk to develop a wide range of psychological and psychiatric disorders such as depression, eating disorders, anxiety disorders borderline personality disorder (Porter et al., 2020) etc. This type of trauma, often invisible, can have long-term effects on mental health and emotional development, leading to issues such as low self-esteem, difficulties in interpersonal relationships, depression, or anxiety.

In the round table, various perspectives on understanding neglect will be discussed, with a particular focus on attachment, mentalization, traumatic memories, and dissociation. Will be discussed data from empirical literature and also discussed clinical cases.



**EMERGING ETHICAL ISSUES IN PSYCHOLOGICAL RESEARCH. PROPOSALS FOR
REVISION OF THE AIP CODE OF ETHICS**

Proposer

*Gian Mauro Manzoni*¹

¹ eCampus University

Discussant

Gian Mauro Manzoni, eCampus University

Santo Di Nuovo, University of Messina

Caterina Lombardo, La Sapienza University of Rome

Gianluca Castelnuovo, Catholic University of the Sacred Heart, Milan, Italy

Claire Henson, British Psychological Association

Abstract

In the last decade, numerous changes regarding the orientations, methodologies, and tools of psychological research have occurred. These changes are associated with various ethical implications. For instance, the different applications of artificial intelligence in research raise issues related to the responsibility of researchers, the transparency and interpretability of data, and the authorship of publications. Another significant transformation is the growing emphasis on the principles of Open Science, which require a reflection on research practices to make them more transparent and collaborative. Data collection methods have also evolved, with a significant increase in research conducted through online digital channels, raising issues related to data security and confidentiality, as well as the procedures for obtaining valid consent. Other aspects that have garnered attention concern the protection of the decision-making rights of minor participants, the ethical implications of using



incentives, and the inclusion of traditionally underrepresented groups in research. Aware of the ongoing changes and their ethical implications, the AIP Ethics Commission has recently initiated a process of revision and updating of the Code of Ethics, so that it may continue to serve as a guiding tool for research, the training of psychologists, and relationships with the broader community, in the context of a constantly evolving landscape. This contribution aims to illustrate the main points of the update and revision of the Code of Ethics, within the framework of a shared and participatory process with the members of the section.



Friday, 13th September 2024

POSTER SESSION



Between genetic and social bonds: Exploring beliefs and attitudes toward parenthood following gamete donation in Italy

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

Abstract

Since the legalization of gamete donation in Italy in 2014, there has been a rise in families formed through Assisted Reproductive Technologies (ARTs) using donated gametes, known as donor-conceived (DC) families. In Western societies, where genetic continuity traditionally defines kinship, couples using donor conception may face the lack of societal acknowledgment and the negative impact of stigma on family well-being. As openness about donor conception is increasingly encouraged in DC families' social networks, research on the public perception of parenthood following gamete donation is needed.

This study aimed to explore knowledge, beliefs, and attitudes toward parenthood after gamete donation amongst the general population in Italy. 624 participants (Mean age: 39, DS = 14.8; women 62.3%) completed an online survey including a sociodemographic assessment and a questionnaire about their beliefs towards donor conception and parenthood after donation. Additionally, participants were presented with one of five possible vignettes describing different scenarios regarding heterosexual couples conceiving a child through various pathways (egg, sperm, double donation, non-donor ART, and spontaneous conception). After reading the vignette, participants evaluated the parental abilities of the hypothetical parents.

Participants showed limited knowledge of donor conception pathways, a preference for anonymous donation, and the belief that DC families are socially accepted in Italy. Kruskal-Wallis tests found differences in the vignettes' evaluation, with participants showing more concerns for parenting abilities and the risk of abuse toward the child in spontaneously conceiving couples compared to donor and non-donor ART couples. In turn, greater concerns were reported about the relationship's stability of gamete-recipient couples.

Our findings suggest that couples using donor ART may be perceived positively and more committed to parenthood, regardless of the perception of potential negative effects of genetic asymmetry within gamete-recipient couples and limited knowledge of parenthood following donation. Facing a societal lack of awareness of donor conception, parents in DC families may be challenged by finding themselves



legitimizing their family-building while continuously navigating the interplay between genetic and social parenting within their social contexts.



Mindfulness and environmental sustainability: an empirical investigation in various settings

Francesca Grosso^{1,2}, Francesca Rubinato¹, Sofia Colombo¹

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² Fondazione IRCCS Don Gnocchi Onlus, Milan, Italy

Abstract

Introduction: Despite recent progress in sustainable consumption research, effectively influencing consumer behavior towards sustainability remains a critical issue (Fischer et al., 2017). Further exploration of the connection between mindfulness and sustainable behaviors is needed to understand how mindfulness can promote sustainability in specific contexts (Manchanda et al., 2023). This study aims to investigate the relationship between mindfulness and positive attitudes towards environmental sustainability, both associatively and causally.

Methods: This study investigates the relationship between mindfulness and pro-environmental behaviors. It consists of two phases: Phase 1 is a correlational study examining the link between mindfulness traits and environmental sustainability disposition, while Phase 2 is an experimental study with a 2x2 design exploring the effects of mindfulness meditation and exposure to natural environments on pro-environmental behavior, specifically recycling bin usage. Participants are randomly assigned to four groups to investigate interactive effects between mindfulness and the environment. In natural settings, mindfulness groups meditate while control groups engage in neutral activities; afterward, all participants discuss using recyclable teacups. In artificial settings like university classrooms, the mixed waste bin is indoors, while the recycling bin is outdoors. In parks, bins are strategically placed. Data analysis will assess the impact of mindfulness on environmental attitudes and behaviors, aiming to inform the integration of mindfulness interventions for sustainability.

Results: Based on the preliminary data collected, a total of 36 individuals participated in the study, comprising 21 females and 15 males, aged between 20 and 35 years old. Based on the data collected to date, in the experimental group practicing meditation, 46% of the participants disposed of the cup in the recycling bin, while in the control group watching the video, 0% performed this action.

Discussion: Demonstrating a correlation between mindfulness and sustainable consumption behavior would significantly advance sustainability efforts. Achieving sustainable behavior may require changing



attentional practices to increase present-moment awareness or defaulting to sustainable choices. Implementing these changes will require significant cultural shifts and policy revisions.



Attitudes toward femicide in an Italian sample

*Sara Bui*¹

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Abstract

Introduction: In recent years the interest of public opinion and researchers about femicide has grown considerably, but there are few studies on the topic, and specifically no research has yet been conducted aimed at investigating the attitudes of the Italian population towards femicide. Attitudes toward femicide are being increasingly recognized as a central issue for comprehensively understanding this complex phenomenon. We hypothesized that older age groups would have more favorable attitudes toward femicide than would younger groups and different attitudes toward young or old man as author of femicide.

Methods: We conducted a survey of attitudes toward femicide in an Italian sample (> 100). We used the Italian version of the Modern Sexism Scale to measure the degree of sexism, and we built 12 scenarios to assess participant attitudes toward femicide. Scenarios differed according to the age of the couple, the motivation for the femicide and the premeditation of the femicide.

Results: Multivariate analysis will use to assess relationships between participant attitudes toward femicide as well as demographics, occupational, and personal factors.

Discussion: Our findings are the first research on attitudes toward femicide in Italy, and could offer useful ideas for preventing and oppose the phenomenon effectively.



Italian Validation of the International Trauma Questionnaire – Child and Adolescent Version (ITQ-CA)

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Abstract

Introduction: The World Health Organization (WHO), in the 11th version of the International Classification of Diseases (ICD-11), introduced - in the category of “Disorders specifically associated with stress” - a new trauma-related clinical manifestation that can emerge in children, adolescents, and adults: Complex Post-Traumatic Stress Disorder (CPTSD). The aim of the present study is the Italian validation of the International Trauma Questionnaire - Child and Adolescent Version (ITQ-CA), a self-report instrument to assess Post-Traumatic Stress Disorder (PTSD) and CPTSD in children and adolescents based on the diagnostic formulations of ICD-11. *Methods:* Following the back-translation and cultural adaptation procedure, the Italian version of the ITQ-CA is administered to a sample of Italian children and adolescents, aged 8 to 18 years, recruited nationwide through child maltreatment and abuse services, via convenience sampling later adapted into quota sampling. Persons diagnosed with intellectual disability and/or psychosis are excluded. Children and adolescents are asked to complete the Italian version of the ITQ-CA and the Psychiatric Self-Administration Scales for Children and Adolescents (SAFA) to measure criterion variables (anxiety and depression). Construct validity, content validity, criterion validity and reliability are analyzed. *Results:* Metric evidence of the capacity of the Italian version of the ITQ-CA to accurately measure the constructs of interest and produce stable and repeatable assessments over time is awaited. *Discussion:* The Italian validation of the ITQ-CA aids mental health professionals in deepening and recognizing the unique mental functioning of children and adolescents who have developed CPTSD as a result of exposure to an event or series of events of an extremely threatening or horrific nature, usually prolonged or repeated, increasing the efficacy of interventions, as this efficacy also depends on the accuracy of the diagnostic process. In addition, the Italian validation of the ITQ-CA aids researchers in advancing knowledge about the nature and dynamics of traumatic events and CPTSD, predictors, and course.

Psychological and behavioral consequences in orphans of intimate partner femicide

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Abstract

Introduction The death of the mother at the hands of the father- *Intimate Partner Femicide (IPF)*- represents for a child a particular type of trauma that may have devastating effects on all domains of development. In these cases, in a single act, the child or the adolescent loses both parents: the mother is dead and the father is either also dead, as in the case of homicide-suicide, or is a fugitive or in the custody of the police and eventually in jail. The literature concerning the impact of IPF on psychological and behavioral consequences in children and adolescents is scarce therefore it is of great importance to understand fully the psychological responses that accompany these traumatic events. The aim of the present study was twofold: a) investigating the psychological and behavioral consequences in orphans from IPF, and b) testing the role of gender as a possible individual risk factor, also in interaction with the presence (vs. no presence) of orphans during the fatal event, which represents a contextual risk factor, on the psychological and behavioral consequences.

Methods Semi-structured interviews were conducted with caregivers to obtain data regarding 62 children and adolescent orphans from IPF. Psychological and behavioral consequences were assessed using the Child Behaviour Checklist (CBCL). A 2x2 analysis of variance was performed on each scale of the CBCL, considering simultaneously the effect of orphans' gender and witnessing their mother's homicide, and controlling for children's age at the time of the murder.

Results Findings revealed the predominant effect of witnessing (vs. not witnessing) the fatal event on the reported symptoms in the “Anxious/Depressed”, “Withdrawn”, “Social Problems”, and “Thought Problems” scales, regardless of gender. Moreover, girls who witnessed their mother's homicide showed higher scores in the attention, aggressive, and rule-breaking problems scales compared to those who did not. Exclusive gender effect emerged in the “Somatic complaints” scale, with girls showing higher scores than boys regardless of their presence during the crime.

Discussion Understanding these consequences is crucial to implementing effective support programs and avoiding secondary victimization due to a system lacking in dealing with the needs of orphans.



A latent variable summarizing social competence and sociometric status in adolescence is associated with psychological flexibility improvements after an act-based group program

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Abstract

Introduction: Social competence (SC) and Social status (SS) are distinct yet related constructs, both linked to psychological well-being. SC-SS relationship is controversial and often studied via self-reports measures. Analyzing their interplay with multivariate methods in longitudinal frameworks could reveal potential markers of mental health promotion, especially in sensitive periods (e.g., adolescence). This study aimed to explore latent relationships between SC and SS measured via objective methods (i.e., observational and sociometric procedures), and to test the impact of this relationship on the effectiveness of a training targeting psychological flexibility and well-being in adolescence.

Methods: A sample of 154 adolescents underwent a 3-week Acceptance and Commitment Therapy (ACT) training. T-test compared pre-post training Psychological Inflexibility (PI) to assess training effectiveness. Pre-training SC was observed and coded in small groups via Group Process Analysis (16 coded behaviors). SS was evaluated via class-based peer nomination, delivering social impact and social preference indices. Partial Least Squares Correlation (PLSC) analysis was applied to 16 SC and 2 SS scores to identify SC-SS Latent Variables (LV, 1000 permutations, contribution threshold: 5.55). Multiple regression tested main effects and interaction between LV and (post-pre ACT) PI change.

Results: PI decreased significantly after training ($t=3.66$, $p<0.001$). PLSC identified one LV ($p=0.001$, Variance Explained=97.59%) composed of a pair of multivariate profiles: LVx exhibited negative loadings for specific SC behaviors (information seeker, initiator, feasibility tester, standard definer, networker); LVy showed negative load for the SS social impact index. A significant interaction between LVx and LVy on post-ACT PI changes was present ($p=0.14$, $R^2=0.102$), such that LVx loadings were positively associated with PI changes, while LVy loadings were negatively associated with PI changes.

Discussion: We identified a LV reflecting specific SC-SS associations and demonstrated its link with the effectiveness of an ACT-based training in adolescence. Specifically, reductions in some SC behaviors are specifically associated with controversial aspects of SS, and this association modulates PI changes after the training. Future studies are warranted to clinically validate these findings.



Measuring psychological inflexibility in university students: the Italian version of the Acceptance and Action Questionnaire for University Students (AAQ-US)

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Abstract

Introduction: Psychological Inflexibility (PI) has emerged as a useful construct for explaining a broad range of psychological problems and poor academic functioning in university students. However, measures of general PI are not sensitive enough to detect associations of PI with academic outcomes. To address this gap, the Acceptance and Action Questionnaire for University Students (AAQ-US) was developed. The AAQ-US measures PI in specific university contexts. This study focused on the adaptation into Italian and validation of the AAQ-US. *Methods:* Participants were two independent samples of Italian university students (Sample 1: N = 118, 67.8% females; M = 23.21yrs, SD = 5.16; Sample 2: N = 190, 72.1% females, M = 22.71yrs, SD = 3.62). In addition to the AAQ-US, participants completed measures of mental health outcomes and academic functioning. *Results:* Factor analysis supported the unidimensionality of the scale. Internal consistency was excellent. Higher AAQ-US scores were significantly related to higher general psychological inflexibility, anxiety, depression, and procrastination, and to lower life satisfaction, number of exams passed, and grade average, supporting the convergent and concurrent validity of the questionnaire. *Discussion:* The AAQ-US also proved incremental validity for predicting both academic and mental health outcomes, above and beyond measures of general psychological inflexibility, even though the effects were stronger for academic outcomes. Findings from this study showed that the Italian version of the AAQ-US is a valid and reliable questionnaire for measuring psychological inflexibility in university contexts.



Micro-indicators of social competence derived via network-based analysis and their association with social status and psychological well-being

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Abstract

Introduction: Social Competence (SC) enables individuals to successfully navigate relationships, and is positively associated with psychological well-being. On the other hand, social status (SS) refers to the position of a given individual within his social group (e.g., popular, rejected). Studies revealed that the SC-SS relationship may be controversial, and still unclear. Additionally, biases in self-reported measures of both SC and SS often undermine their measurement. This study aims to examine whether patterns of SC micro-indicators, identified via systematic observation, may differently relate with measures of psychological well-being (i.e., symptoms and cognition) according to SS sociometric categorization.

Methods: In a sample of 154 adolescents (113 females; mean age: 17 ± 1.3 years), SC was observed and coded in small groups via Group Process Analysis during a 20-minute unstructured task. SS was assessed via class-based standard sociometric procedures. To investigate associations between SC coded behaviors, a Network Analyses (NA) using an mgm model was implemented, and individual NA-based prototypicality scores (PS) were estimated. Associations between PS and cognitive and clinical outcomes were tested via correlation analyses, after splitting the sample into two SS categories (popular: N=70; rejected: N=84).

Results: Behaviors such as information provider, feasibility tester, active listener, harmonizer, standards definer, and participation encourager represented the highest centrality nodes in NA. The highest positive relationships emerged between information provider-active listener ($r=0.70$), feasibility tester-standards definer ($r=0.56$), and harmonizer-participation encourager ($r=0.65$). In the popular subgroup, PS were negatively associated with the Stroop Effect score ($\rho=-0.238$) and with the Youth Self-Report subscales for depression ($\rho=-0.279$) and anxiety ($\rho=-0.301$) ($p<0.05$). No significant correlations emerged in the rejected group.

Discussion: Results revealed the presence of specific associations between objective micro-indicators of SC and SS categories. SC micro-indicators were associated with higher cognitive control and lower symptoms only in the popular group. We might therefore speculate that SS might intervene in the



relationship between SC and psychological well-being by buffering cognitive and emotional resources in adolescence.



Development and validation of the Meaning-Making Dimensionality Index (MMDI)

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Abstract

Introduction: The dimensionality of meaning-making reflects the ability of the cognitive system to interpret environmental complexity through different dimensions of meaning. Low dimensionality implies an interpretation based on a few primary components, while higher dimensionality involves additional components. Different studies have shown that psychopathology as well as other forms of representation of reality can be interpreted as a function of the dimensionality of meaning-making. However, to date there is a lack of tools that can accurately and reliably assess such an aspect of human cognition; therefore, the aim of this study was to develop and validate the Meaning-Making Dimensionality Index (MMDI).

Methods: The MMDI is a semantic differential-based instrument that analyzes the incidence of the dimensions in the factorial space through which people represent objects with high and low affective content. A total of 223 participants completed the MMDI along with other scales. Correlations and Mann-Whitney U tests were performed for data analysis.

Results: The MMDI positively correlated with the Range and Differentiation of Emotional Experience Scale (RDEES), negatively with the Difficulties in Emotion Regulation Scale (IT-DERS-SF) and Barratt Impulsiveness Scale-11 (BIS-11), and positively with the Well-Being Index (WHO-5), establishing both convergent and criterion validity. No significant gender differences were found, but educational level differences were observed.

Discussion: The MMDI proved to be a valid instrument for detecting dimensionality of meaning-making, and the results showed that reduced dimensionality had a dysfunctional impact on the quality of regulation, and conversely, high dimensionality positively impacted overall levels of adjustment. The use of MMDI to study human cognitive processes represents a new and promising perspective that can capture the fundamental dynamics that can inform and complement both clinical research and psychological research in general.



Italian validation of the Transformative Utopian Impulse for Planetary Health Scale (TUIPHS-I) and its incremental validity in the relationship between ecological attitudes and behaviors

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Abstract

Introduction: The transformative utopian impulse for the health of the planet relates to people's propensity to create a better world. This specific form of meaning-making could help explain the attitude-behavior gap found in the literature about environmental issues. However, to date there are no validated instruments in the Italian context, which limits the possibility of conducting studies to investigate its impact. This study aimed to validate the Italian version of the Transformative Utopian Impulse for Planetary Health Scale (TUIPHS-I) and analyze its predictive validity in the relationship between environmental attitudes and behaviors.

Methods: A total of 700 participants completed the Transformative Utopian Impulse for Planetary Health Scale (TUIPHS-I), the New Ecological Paradigm - Revised (NEP-R) and the Pro-Environmental Behavior Scale (PEBS). The four-factor structure of the TUIPHS-I was checked through a confirmatory factor analysis (CFA) and a t-test was performed to investigate gender differences in the levels of the general dimension of the TUIPHS-I, as well as its sub-dimensions. Finally, a hierarchical multiple regression (HMR) model was carried out to test the incremental validity of TUIPHS-I on the relationship between NEP-R and PEBS.

Results: The TUIPHS-I showed a good fit for the four-factor structure and good internal consistency. The t-test showed that women had higher scores than men on both the TUIPHS-I and its sub-dimensions. Finally, TUIPHS-I was found to have incremental validity as contributing to a significant increase in the variance explained in the NEP-R and PEBS relationship.

Discussion: The study confirmed the validity of the TUIPHS-I in the Italian context and provides scholars with a reliable tool to investigate this construct. Furthermore, the results suggest the importance of considering people's meaning making, along with their attitudes, to design specific interventions for the promotion of pro-environmental behaviors.



What did I see in you? Development of an assessment tool for object relations dyads in TFP

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Abstract

Background: The crucial role of internalized interpersonal schemas in the etiology, maintenance, and treatment of personality disorders (PDs) has long been recognized. In the framework of Transference-Focused Psychotherapy (TFP), an evidence-based treatment for borderline personality disorder, such schemas are conceptualized as object relations dyads formed by a representation of the self and a representation of the other linked by an affect; when personality pathology is present, such dyads are split, extreme, pervasive, and oscillating. A crucial therapeutic strategy of TFP involves identifying the object relations dyads activated in the interaction between patient and therapist, which strongly influence transference and countertransference.

Objective: An assessment tool inquiring about the qualitative nature of object relations dyads is currently missing and could allow clinical and empirical advancement of TFP. Starting from a list of 51 OR dyads identified by TFP practitioners as clinically relevant, we will devise a clinician rating tool for OR dyads.

Methods: Twenty psychotherapy session transcripts will be rated with an object relations dyads grid and the Core Conflictual Relationship Method, a well-validated measure of interpersonal representations. For the dyads assessment, raters will identify the representations of self and others in each relational episode (RE) and translate them into standard items. Audio recordings will be used in conjunction with transcripts to help raters identify the affective valence of REs. Cronbach's alpha will allow for item reduction and organization of items into clusters. The CCRT will be rated on transcripts. The interrater agreement for both measures will be calculated using Cohen's K. Pearson's correlation between OR dyads and CCRT will provide an initial measure of concurrent validity.

Discussion: A rating tool for OR dyads, as conceptualized by the TFP approach, could provide clinicians and researchers with a detailed qualitative diagnosis of patients' inner worlds. From a research viewpoint, it could ensure further detail in the qualitative exploration of dysfunctional interpersonal dynamics and allow reliable detection of transferential dynamics. From a clinical perspective, it could help practitioners manage countertransference reactions and accurately evaluate the patient's progress during treatment.



Uncertainty in meaning-making: a driving simulator study

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Abstract

Uncertainty plays a fundamental role in the driving experience, constituting a key factor in road safety: in fact, drivers are asked to manage uncertainty on many occasions, such as predicting the behavior of other road actors, their speed, and braking times. One of the least explored aspects in the field of driving behaviors is the role of the driver's affective states. As affects are often automatic and unconscious, they are thought to influence procedural activities, such as driving. A recent psychological model of the socio-cognitive management of uncertainty, the semiotic dimensional model, proposes that affect-laden meanings in sense-making gain momentum when faced with uncertainty. This occurs as a result of affective meanings, which offer a simplified interpretation of reality and restore the feeling of being able to make sense of it after it has been altered by uncertainty.

To study the effects of uncertainty on the drivers' behavior, an experiment was conducted using a driving simulator: uncertainty was manipulated by exposing the participants to two different priming stimuli (control vs. experimental group).

A sample of 50 Italian drivers (age $M = 24.4$; $SD = 3.43$), recruited through a snowball procedure, completed the Positive and Negative Affect Schedule (PANAS) questionnaire; the driving experiment consisted of a training trial and an actual test. Finally, the participants compiled two questionnaires about their driving experience and experienced mental workload (NASA - TLX).

Out of the various driving measures provided by the simulator, the following were selected: forward speed, vehicle speed, acceleration pedal position, steering wheel angle, brake pedal position, and lateral speed, which were subjected to Explorative Factor Analysis (EFA) as mean and standard deviation.

The results obtained through ANOVA showed that drivers exposed to the prime without contextual information carried out a more variable driving behavior, suggesting that an induced uncertainty led to an attempt to adapt to an unpredictable environment. The findings are interpreted within the framework



of semiotic cultural psychology and have valuable practical implications, as the effectiveness of managing uncertainty can have relevant consequences on road safety and accident prevention.



Appearance-related Social Media Consciousness Scale: Preliminary Psychometric Properties in the Italian Context

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Abstract (350)

The use of photo-based social media platforms has become a central aspect of individuals' lives. Within the social media environment, individuals often visualize their online audience and engage in behaviors aimed at enhancing their physical attractiveness on these platforms. In this vein, a recent construct has been introduced, i.e. Appearance-related Social Media Consciousness (ASMC), defined as the extent to which individuals' thoughts and behaviors reflect ongoing awareness of whether they might look attractive to a social media audience. The objective of the present study was to validate a theory-based and psychometrically sound tool, i.e. Appearance-related Social Media Consciousness Scale (ASMCS), for assessing experiences of ASMC, as well as to explore preliminary associations between ASMC and mental health correlates within the Italian context. Psychometrically sound questionnaires were administered to assess body shame, body surveillance, public self-awareness, and eating disorder symptoms. A total of 752 ($F = 66.20\%$) Italian individuals agreed to participate in the study. Exploratory Factor Analysis ($N = 375$; $M_{\text{age}} = 33.74$; $SD = 14.75$) and Confirmatory Factor Analysis ($N = 377$; $M_{\text{age}} = 33.80$; $SD = 14.86$) were used to examine the factorial structure of the scale. The ASMCS showed high reliability ($\alpha = .94$) and a unidimensional structure in line with its original version. Strong factor loadings (range = .59-.82) and strong associations with body surveillance ($r = .56$) and body shame ($r = .57$) demonstrated convergent validity. The criterion validity of the ASMCS is confirmed by its greater predictive power in explaining the variance in eating disorder symptoms than that of public self-awareness. The preliminary findings support the use of this 13-item scale to assess ASMC among Italian individuals, indicating significant mental health implications in the social media context. The high reliability and validity of the ASMCS demonstrate its potential as a valuable tool for assessing ASMC. Additionally, the associations between ASMC and mental health correlates (i.e., body surveillance, body shame, eating disorder symptoms) emphasize the importance of considering ASMC for overall well-being



in the context of social media. Addressing ASMC could be crucial for preventing negative mental health outcomes related to body image.



Impact of autistic characteristics on adaptive behaviour in Autism Spectrum Disorder Level 1: an introductory study. Poster

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Abstract

Introduction: Autism Spectrum Disorder (ASD) is a neurodevelopmental condition that includes a wide range of functioning profiles. This variability is often described as circular rather than linear because individuals with autism can exhibit different combinations and degrees of symptoms across various domains, including social interaction, communication, and behavior. Some individuals may present with mild symptoms, allowing them to maintain a relatively high level of independent functioning. Conversely, others may experience more pronounced impairments that substantially affect their daily functioning and quality of life. These aspects are crucial in the therapeutic approach to patients. In our study, we want to find out which of the target symptoms of level one autism have the greatest impact on the adaptive behaviour and quality of life of these people.

Methods: We consider individuals over the age of 16 with ASD Level 1 and without intellectual disability. To assess empathy and flexibility, we use the Empathy Quotient (EQ) and Systemizing Questionnaire (SQ), respectively. The Autism Quotient (AQ) is used to determine the level of autism, while sensory issues are evaluated by administering the Glasgow Sensory Questionnaire (GSQ) to participants. We use the Adaptive Behavior Assessment System II (ABAS II) to evaluate adaptive behavior in natural contexts for young individuals, including settings such as home and school. The ABAS II is an assessment tool that evaluates adaptive behaviour in multiple domains, including Conceptual (CON), Social (SOC), and Practical (PRA).

Results: The objective is to identify consistent correlations between certain symptomatic characteristics and the adaptive profile of the subjects.



Conclusion: It provides valuable insights into an individual's functional abilities and areas for intervention. Identifying the specific characteristics of ASD that have the greatest impact on quality of life and psychological well-being can significantly enhance the effectiveness of interventions. By pinpointing these key characteristics, clinicians and caregivers can tailor interventions to address the most pressing needs of individuals with ASD, ultimately promoting greater overall wellness and clinical care.



Investigating and comparing Theory of Mind Functioning in ASD Level 1, ADHD, and Typically Developing Individuals

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Abstract

Introduction: Autism Spectrum Disorder (ASD) and Attention-Deficit/Hyperactivity Disorder (ADHD), while distinct diagnostic conditions, exhibit overlapping symptomatic characteristics, including deficits in executive functions and theory of mind (ToM). Theory of mind refers to the ability to understand and attribute mental states—such as beliefs, emotions, desires, intentions, and thoughts—to oneself and others. This involves recognizing that people's actions are influenced by these internal states. A well-functioning theory of mind enables individuals to empathize with others, interpret their behaviors, and predict their actions based on inferred mental states. This capacity is essential for navigating social relationships effectively, as it facilitates the interpretation of social cues and interactions. The objective of this study is to investigate and compare specific components of theory of mind among individuals with ASD, ADHD, and typically developing individuals.

Methods: We will evaluate a sample of 20 subjects with ASD lev.1 diagnosis; 20 subjects with ADHD diagnosis and 20 subjects with no diagnosis as control group (age 6-11 years) in Emotion Recognition task (NEPSY), Theory of Mind Part 1 and Part 2 (NEPSY), and the Eye Test (ET). Results: Our aim is to detect and identify significant differences in various aspects of Theory of Mind (TOM) between different diagnostic clusters and control subjects.

Conclusion: By gaining a deeper understanding of how theory of mind manifests in these disorders, clinicians can tailor more precise and impactful interventions and training programs.



The relationship between psychological distress and gut microbiota in patients with fibromyalgia: a comparative study with inflammatory bowel disease and healthy controls

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Abstract

Background: Fibromyalgia (FM) is a widespread rheumatic disorder, with increasing prevalence estimates and significant impacts on patients’ quality of life. The etiopathogenetic mechanisms of FM are still unclear, and to date, the treatment of FM is mainly based on symptom management. In recent years, the role of alteration of the gut-brain axis in the pathogenesis of FM has been hypothesized. Recent studies have shown an association between gut dysbiosis and FM symptoms. The human gut microbiome is involved in a bidirectional communication pathway with the central nervous system. It has been observed that the microbiota-gut-brain axis is involved in the production of microbial metabolites and immune mediators that trigger changes in neurotransmission, neuroinflammation, and behavior through the vagus nerve. Our ongoing study aims to compare the gut microbiome composition of patients with FM, patients with inflammatory bowel disease (IBD), and healthy controls to explore possible associations between the gut microbiota and psychological variables (perceived stress, anxiety and depressive symptoms, somatic symptoms, alexithymia). *Methods:* The study population included n=15 FM patients, n=20 IBD patients with quiescent symptoms, and n=18 controls. Perceived Stress Scale (PSS), Hospital Anxiety and Depression Scale (HADS), Patient Health Questionnaire-15 (PHQ-15), and Toronto Alexithymia Scale-20 (TAS-20) were used to assess psychological variables. The 16S rRNA gene sequencing of stool samples was used to assess the gut microbiome. *Results:* Within this sample, patients with IBD and FM met the criteria for intestinal dysbiosis. Specifically, actinobacteria were highly correlated with somatic symptoms and emotional distress. Alexithymia was not correlated with bacterial strains. *Conclusions:* Preliminary, results suggest that specific bacteria taxa (actinobacteria) are associated with somatic and emotional symptoms in patients. The presence of alterations in the gut microbiome in FM patients, comparable to



that observed in IBD patients, supports the paradigm that regulation of the gut-brain axis is affected in stress-related disorders such as FM. This observation opens the way for further studies needed to clarify the pathophysiology of FM, develop a comprehensive diagnostic assessment, and explore new treatment strategies.



Evaluating the efficacy of dynamic group psychotherapy for problem gambling: a qualitative study with transcripts from a brief cycle of online group psychotherapy sessions

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Abstract

Introduction: Problem gambling, exacerbated by the COVID-19 pandemic which limited access to traditional therapeutic interventions, necessitates innovative treatment approaches. This qualitative study examines the efficacy of dynamic group psychotherapy through online sessions, aiming to enhance standard gambling addiction treatments. It evaluates therapeutic factors and the group climate established through the online medium, assessing their impact on therapeutic relationships and member dynamics.

Methods: Conducted in collaboration between the University of Padua and a Northeast Italy Health Unit, the study enrolled individuals in ongoing gambling addiction treatments. Ten online group psychotherapy sessions utilized mediatory objects to promote therapeutic engagement and dialogue. The methodological framework relied on thematic analysis of session transcripts to explore emergent themes, participants dynamics, and therapeutic processes initiated by the facilitators and adopted by the group.

Results: The online setting fostered a cohesive, supportive group climate, with occasional disruptions that resolved rapidly, enhancing group intimacy. Participants valued the online modality for its flexibility and the safe interpersonal distance it offered, facilitating open sharing. Mediatory objects triggered reflective processes on cognitive styles and personal resources leading to cognitive schema adjustments and more adaptive thinking. The shared structuring of the intervention by the entire care team facilitated the activation of significant therapeutic processes, with the group taking an active role in its therapeutic journey.

Discussion: Findings suggest online group psychotherapy as an effective complement to in-person sessions in gambling addiction treatment, highlighting its potential to overcome accessibility barriers. The integration of mediatory objects in online settings enhanced patient engagement and therapeutic outcomes, supporting the broader acceptance of online psychotherapeutic models. This approach suggests a promising pathway to improve treatment access and adherence for problem gambling and beyond, addressing mental health challenges in the digital era.



The Buffering Effects of Right-Wing Authoritarianism on Future Anxiety: The Mediating Role of COVID-19-Related Demoralization and Perceived Risk

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Abstract

Introduction: In the last decade, the conceptualization of right-wing authoritarianism (RWA) has shifted from that of a personality dimension to that of a multidimensional attitudinal structure. When a group is confronted with societal threats, such as the COVID-19 pandemic, individuals tend to respond by increasing their exhibition of authoritarian practices to maintain collective security. Where a sense of control cannot be maintained, it can contribute to poor psychological outcomes such as negative future outlooks.

Method: A cross-sectional survey was administered to a community sample of 948 participants who were recruited via the Qualtrics survey software between October and November 2020 on the main social networks (e.g., Facebook). Subsequently, a snowball sampling recruitment procedure was activated. Participants were informed about the objectives of the study, benefits, risks, researchers' information, and anonymity of the survey. All questions had to be completed to avoid missing data. However, participants were also informed about their right to withdraw from the survey at any point they needed. RWA, demoralization, future anxiety, and perceived risk of COVID-19 were all assessed through validated self-report instruments.

Results: Statistical analyses showed that RWA was negatively correlated with demoralization and future anxiety, but not with perceived risk of COVID-19. Furthermore, demoralization and perceived risk of COVID-19 correlated positively with each other. Finally, future anxiety as an outcome had a significant negative association with RWA. Overall, higher levels of RWA were associated with lower levels of future anxiety, and demoralization showed to mediate an effect between RWA and future anxiety. As opposed



to demoralization, perceived risk of COVID-19 was not found to mediate between RWA and future anxiety.

Conclusions: Our results illuminate a potential pathway between RWA and the mitigation of maladaptive psychological outcomes in the face of societal threats such as the COVID-19 pandemic. RWA beliefs may act as a coping strategy that reduces anxiety about the future. To reduce uncertainty over the future, individuals are motivated to maintain and enhance their RWA beliefs that enhance the security within a group.



The relationship between sadism, alexithymia, and empathy

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Abstract

Introduction: Sadism is a personality trait characterized by the pleasure arising from the physical or emotional suffering of others. This trait is suspected to be associated with a diminished empathy, defined as the ability to experience and understand others' feelings without confusing themselves with others. Sadistic traits seem also to be associated with difficulty in recognising one's own emotions (i.e., alexithymia, a multidimensional construct, characterised by difficulty in identifying and describing feelings, and an externally oriented cognitive style). The aim of the present study was to further investigate the relationship between sadism, alexithymia, and empathy in a large sample of the general population.

Methods: Data were collected via an anonymous online survey. A total of 1548 participants (Mage = 36.94 ± 15.72; 67% female) met the inclusion criteria and formed the final sample. Participants were asked to provide socio-demographic information and complete questionnaires assessing sadistic trait (Short Sadistic Impulse Scale), empathy (Basic Empathy Scale), and alexithymia (Toronto Alexithymia Scale).

Results: Higher sadistic trait was significantly correlated with higher alexithymia ($r = 0.22, p < .01$). Conversely, empathy was significantly and negatively correlated with sadism ($r = -0.25, p < .01$). The mediation analysis revealed that sadism had both a direct ($b = -0.405, p < .001$) and an indirect ($b = -0.056, \text{BCa CI} [-0.084, -0.032]$) effect on empathy, with alexithymia being a significant mediator in the relationship between this trait and empathy.

Discussion: Little evidence is available regarding the relationship between sadistic trait and both empathy and alexithymia, and most research has focused on sexual sadism. Taken together, the results of this study show that people with sadistic trait may have significant differences in their socio-emotional abilities, particularly with difficulties in recognising and understanding their own feelings and those of others. Individual differences in the levels of alexithymia and empathy should be considered in the treatment of individuals who show sadistic trait in order to prevent socially dangerous behaviours.



Progetto Indipendenza: Developing and testing the short-term efficacy of a School-based primary Prevention Intervention for Problematic Social Network Sites Use among Adolescents

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Abstract

Introduction: Adolescents are at the most risk of developing Problematic Social Network Sites use (PSNSU), however there is a lack of prevention intervention targeted at PSNSU and its related well-known risk factors among adolescents. The present study aims to fill this gap by developing and testing the short-term efficacy of a school-based primary prevention intervention for PSNSU among adolescents aged 14-16 years old. *Methods:* A (quasi) experimental pre-posttest control group design was adopted. Eleven classes from one high school in Florence were randomly assigned to the experimental group (N classes=6; 76 participants, 56% males, $M_{age}=15.43\pm0.55$; 14-16 years old) and the (wait-list) control group (N classes= 5; 75 participants, 55% males, $M_{age}=15.61\pm0.68$; 14-16 years old). The experimental group completed self-report measures of SNSs use, PSNSU and related risk factors before (pre-test) and at the end of the intervention (post-test). The control group was administered the pre-test and post-test questionnaires but did not receive the intervention. The intervention consisted of five weekly sessions, each lasting two hours, delivered in class during school time. By adopting psychoeducational and interactive techniques, the following themes were addressed: (i) differences between problematic and regulated use of Social Networks, (ii) cognitive processes involved in PSNSU (e.g., metacognitions about SNSs) (iii) identifying and coping Fear of Missing Out; (iv) identifying and coping boredom proneness and (v) identifying and coping procrastination tendency. *Results:* The intervention was effective in improving correct knowledge about PSNSU and effective strategies to cope with its related risk factors (i.e., FoMo, boredom proneness and procrastination). After receiving the intervention, students in the experimental group reported a significant decrease in PSNSU mean scores and in the time spent using SNSs in the 15 minutes before going to sleep, and a reduction in compensatory motives to use SNSs (e.g., going online to escape real-life issue). *Discussion:* Overall, these results indicate that “Progetto Indipendenza” is a promising program for the prevention of PSNSU among adolescents.



The Role of Eco-anxiety in Pro-Environmental Behaviors: An Exploratory Study

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Abstract

Introduction: Climate change is the greatest global threat facing the world in the 21st century. Several studies have investigated the relationship between climate change and cognitive responses. Still, recently more importance has been given to emotional involvement, like eco-anxiety (i.e., the fear of environmental doom), and its role in motivating or undermining pro-environmental behaviors (PEBs). Indeed, research on how eco-anxiety relates to PEBs has yielded inconsistent results, with some studies suggesting that eco-anxiety and habitual worrying about climate change can be adaptive and support engagement in mitigation strategies, and yet, other studies have found no relationship or a negative relationship between eco-anxiety and PEBs. The present study aimed at evaluating how eco-anxiety can enhance the individual's green behaviors, taking into account the information that people hold about climate change and their perceived self-efficacy levels. **Methods:** 135 healthy subjects (68% F, 42% M; age = 26.34) were enrolled among students, teachers, and post-graduate scholars at the University of Florence through an online survey. The following self-reports were administered: the Climate Change Anxiety Scale (CCAS), the Pro-Environmental Behaviors Scale (PEBS), and the General Self-Efficacy Scale (GSE). A model with PEBS total scores as the outcome variable, information on climate change, CCAS cognitive impairment and functional impairment subscales, and GSE total scores as predictors was performed. Analysis was adjusted for gender and age. **Results:** The overall model was significant ($F=11.802$, $p<.001$) and explained 35.6% of PEBS total scores variance. CCAS cognitive impairment ($B=1.33$, $p<.001$, partial $\eta^2=.13$) and information on climate change ($B=3.93$, $p<.001$, partial $\eta^2=.10$) positively predicted PEBS total scores. **Discussion:** The present study supports the research suggesting eco-anxiety could be an adaptive response to climate change. As the actions of individuals contribute heavily to global warming, identifying factors that may predict environmentally relevant behaviors represents an important step towards improving eco-friendly behavior and reducing climate change impacts.



Blunted affective engagement and elaboration of pleasant stimuli in depression risk: insights from event-related potentials

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Abstract

Introduction: considering the detrimental impact of depression, improving its early identification, and developing strategies to prevent its onset have been highlighted as core priorities. A promising correlate of depression risk is blunted emotional processing. The elaboration of affective stimuli includes multiple stages (i.e., cue evaluation and engagement, anticipation, elaboration); however, how each stage relates to depression vulnerability is still unclear. Methods: this study investigated emotional processing in a sample of individuals with a heightened risk of developing depression, characterized by a family history of the condition ($n = 19$), and a control group of individuals without such vulnerability ($n = 15$). An S1-S2 paradigm, a task in which an emotional image (S2) is preceded by a cue (S1) anticipating its valence, was employed during an electroencephalographic (EEG) recording. Three Event-Related Potentials (ERPs) reflecting different stages of emotional processing were assessed: the Cue-P300 (reflecting cue-evaluation and affective engagement), the Stimulus Preceding Negativity (SPN; reflecting outcome anticipation), and the Late Positive Potential (LPP; reflecting affective processing). Results: both groups showed larger Cue-P300 and LPP amplitude to emotional (pleasant and unpleasant) vs. neutral images. Nonetheless, reduced Cue-P300 and LPP to pleasant images emerged in the group with familial risk relative to controls. Instead, no differences in the SPN amplitude were found. Discussion: these findings suggest that familial risk for depression might be characterized by blunted affective engagement and elaboration, rather than the anticipation, of pleasant stimuli. Psychophysiological assessment, including ERPs, might improve the early identification of depression vulnerability and guide the design of preventive clinical interventions.



Digital Interventions for Psychiatric and Psychological Services (DIPPS): Planning and Validation of a Digital Platform for Mental Health

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Abstract

Mental health represents a long-lasting challenge with significant human and economic costs. Relying on informatics and statistical methodologies, recent advancements in digital technology offer promising solutions to support mental health professionals in their daily activities, under the telemedicine approach.

The DIPPS project aims to build a digital multichannel platform (usable from PC, tablet, mobile) integrating various functions supporting clinicians and patients from the assessment and monitoring of mental health, up to the evaluation of the efficacy of treatments.

The platform is mainly built from a cognitive-behavioral perspective and is currently targeted for people experiencing symptoms related to mood, anxiety, eating behaviors, personality traits, and patients at the early stages of psychosis (i.e., ultra-high risk of psychosis, first episode of psychosis). Several functions for clinicians and patients have been implemented, including: the online administration and scoring of a selection of psychometrically sound, standardized, well-validated and freely accessible assessments tools for each area of psychological difficulties; a conversational chat tool providing cognitive-behavioral diaries and self-help psychoeducational resources; gamification functions to promote treatment adherence; and a built-in prediction system to identify the early-warning signs of a potential worsening in mental health and support the clinical decision making – by using data from digitalized assessment tools.

This system is suitable for use in public mental health services, general hospitals, and in the private practice of psychologists and psychotherapists.

The DIPPS platform enables the digital remote management of mental health with useful implications. The clinical implications regard the support in the diagnostic process, tailoring a highly individualized treatment, the enhancement of prevention, increase treatment adherence, the optimization of the cost-resources ratio, fostering the collaboration within the enlarged multiprofessional network, and reduce drop-out rates, with an improvement of the overall services' quality and patients' satisfaction with reduced



access to mental health services (e.g., psychiatric units). The research implications consist in deepening our clinical knowledge of complex mental health issues and fostering multicentric studies at the national and international level. Further developments, functions, and future collaboration of clinical centers are possible and warmly welcomed.



Adapting to change: exploring well-being factors among Italian prison police in different work contexts

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Abstract

Introduction: The organizational and management process of the Italian penitentiary administration has been undergoing change for ages, following a series of circulars issued to comply with European principles. In this changing scenario, the activity of the prison police is not limited within the jail context, but an increasing number of prison police officers find themselves carrying out their activities outside the prison, at the territorial offices of competence. This process involves several revisits in the management of daily work and operational routine, which is closely associated with the construct of well-being. Therefore, the purpose of this study is to understand what factors influence the well-being of prison police in different work contexts, such as the prison and the territorial offices in charge.

Methods: Through a self-report assessment, responses were collected from 60 subjects, divided according to type of work activity (N = 35 prison police officers working in the office of the Provveditorate of a region in northern Italy; N = 25 officers carrying out their work in prison). The study involved a comparative analysis of the two groups with respect to constructs associated with well-being, such as hypo-mentalization (RFQ_U), perception of stress (PSS), perception of loneliness (UCLA), and emotional burnout (MBI_EE). Hierarchical multiple regression analysis was used for this purpose using SPSS software.

Results: The results pointed that on the stress perception scale, officers working inside the prison have lower average stress levels than officers who are placed in offices. The regression model explains 44.1% of the variance [$F(1, 49) = 25.055, p < .001$]. Moreover, there are significant differences between the mean levels of hypo-mentalization and between the mean levels of perceived loneliness.

Discussion: it is possible to hypothesize that the results are related to the perception of one's role within an organizational culture. In fact, within the prison there is a lot of cooperation and corporativism among prison officers, cohesive by the expected social responsibility, while the perception of one's role as an officer performing office work is more fragmented and unstructured.



“Becoming their pancreas”: a qualitative study on parents’ experiences of children and adolescents with type 1 diabetes

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Abstract

Type 1 diabetes is one of the most prevalent endocrine diseases among children worldwide, with an incidence steadily increasing on a global scale. The diagnosis of diabetes significantly impacts family functioning and the psychological well-being of the parent, due to the challenges posed by disease management that extend beyond basic caregiving and parenting responsibilities. This qualitative research study aims at exploring the lived experience of parents with children and adolescents affected by type 1 diabetes, focusing on the daily management of the disease and the psychological and emotional challenges associated with this experience. 25 parents of children and adolescents with type 1 diabetes were recruited within an Italian association called “Associazione Giovani Diabetici Umbria” and in-depth interviewed. The interviews were analyzed through a deductive thematic analysis, as described by Braun & Clarke (2007), aimed at extracting thematic cores emerging from parents' testimonies. Four core themes emerged: a) The parents care between fight and control b) “Becoming their pancreas”: from guilt to reparation; c) To silence the anguish; d) What kind of separation? The findings shed light on the complex experiences and emotions of parents. The illness emerged as an enemy to combat, determining a representation of their parental experience as a daily fight characterized by a constant alarmism and control. The sense of guilt emerged as an important affective experience, configuring the reparative desire to replace the roles becoming their children. This emotionally loaded situation configured in parents a tendency to establish with their children a relationship characterized by fusional aspects in which separation aspects seemed to be difficult to elaborate. A tendency to “cover” their anguish and pain emerged as the prominent coping strategy used by parents. The results may provide interesting clinical implications and suggested important insights for the development of targeted support interventions aimed at improving the quality of life for parents of children and adolescents with type 1 diabetes. The need for professionals to increase the emotional competences and emotion regulation skills of these parents emerged, as well as the need to work on the elaboration of the experience of separation from their children.



Care needs of youth and young adults: the experimental project proposed by Regione Piemonte and the operative response of the Comunità "AL Centro" of Acqui Terme

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Abstract

Given the great attention to the individual, family and social risk factors underlying behavioral and conduct disorders, it is increasingly possible to develop targeted and effective interventions. The Deliberazione della Giunta Regionale del Piemonte (DGR n. 29-8556; 2019) proposed an experimental project with a duration of three years aimed at the care of minors and young adults aged 17/21, with a continuation up to the age of 23 for those who are subject to penal measures and have committed offenses as minors. These individuals have significant social and health problems, with impairments in personal and social functioning that cannot be directly classified within a psychopathological framework, but are characterized by a wide range of complex conditions and comorbidities. In view of the rigid requirements for taking charge by the local care service (NPI, psychiatry, SERD), the aim is to promote continuity of care for minors and young adults. In January 2023, the Comunità "AL Centro" was founded in Acqui Terme (AL) in response to these needs. Given the experimental nature of the project, a qualitative analysis was carried out starting from the patients' medical records, to reflect on the characteristics of the sample studied and the progress of the community pathway. The aim of this first work, which is a prerequisite for a larger research, is to disseminate the characteristics of the project proposed by the DGR and the response of the Comunità "AL Centro". We believe that it is useful to spread the considerations that have emerged as an operational reference point in such a complex context.

**Disentangling the Paranoid Dance: Narcissistic States and Daily Interpersonal Dynamics
Through a Network Lens**

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Abstract

Recent empirical literature has suggested that pathological narcissism is related to paranoid presentations. However, the existing studies have focused only on cross-sectional methodology without investigating how paranoid tendencies may present in narcissists' daily life. On the other hand, the network approach has recently emerged in psychopathology, proposing that psychopathology may be conceptualized as complex and dynamic network systems where symptoms are mutually interacting components over time. Building on these premises, the current study aimed to explore the dynamic associations between narcissistic states, paranoid states, and perception of the other using an Ecological Momentary Assessment methodology (EMA).

A sample of 82 participants (females: $N = 66$; 80.5%) with a mean age of 23.4 years old ($SD = \pm 2.81$) responded to smartphone prompts 4 times a day for 7 days. Participants were required to identify the most significant distressing interpersonal interaction since their previous report and then assess their current paranoid states, narcissistic states, and momentary agentic/communal perceptions of the other person. Using multilevel vector autoregressive modeling (mlVAR), we examined different time-frame complementary network models (i.e., contemporaneous, temporal, and between-subject models). The contemporaneous model indicated that state vulnerability was related to higher paranoid states at the same time and that state vulnerability was related to a perception of the other as colder and more submissive, which, in turn, was positively related to paranoid states. According to the temporal model, state vulnerability predicted higher state paranoia toward the other at the next prompt, whereas grandiose states were related to inertia in staying grandiose. Surprisingly, the between-subject model showed that individuals experiencing higher grandiose and vulnerable states experienced more paranoia on average during the 7 days. Additional analyses assessing the perception of the other as hostile confirmed previous associations.

Our findings emphasize the relevance of considering the complex interplay between narcissistic states and paranoid states in daily interpersonal situations, supporting a network perspective across different time scales, which may be informative for future clinical interventions.



**Immediate in-hospital postpartum screening with Edinburgh Postnatal Depression Scale
EPDS: a rapid review and operational guidance for health professionals**

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Abstract

Although there is a lack of specific validation of the EPDS for immediate in-hospital postpartum depression screening and the authors of the instrument have on several occasions expressed that it is too soon to administer the scale in the first 4-5 days after delivery, numerous researchers and health professionals continue to use the Edinburgh Postnatal Depression Scale before postpartum hospital discharge. This narrative review identifies recent research that used the EPDS immediately after giving birth and notes the critical issues and strengths reported by the researchers within the manuscripts taken into consideration. Literature in English published from January 2020 to April 2024 was included. Searches in PubMed, PsychInfo and Google Scholar used the terms: immediate, immediately and EPDS. The identified studies report that EPDS administered at early postpartum is not reliably able to differentiate between diagnosable postpartum depression and adjustment disorder. Furthermore, the same studies considered in this rapid review report contradictory results on the ability of the instrument - when administered immediately after giving birth - to identify women who develop depression 6-8 weeks postpartum. Further doubts remain about the appropriateness of the instrument when administered on the second/third post-delivery day as women must respond to how they feel in reference to the past 7 days. The EPDS was originally designed to screen women at risk of postpartum depression in the outpatient setting and not to predict the development of depression in the postnatal period when administered during hospitalization shortly after delivery. More research is required to determine the clinical utility of the EPDS in the immediate postpartum period and the ability of the instrument to reliably predict the subsequent presence of a possible postnatal maternal depressive condition.



The effectiveness of psychological counselling in higher education: a systematic review

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Abstract

Introduction: Psychological distress is increasingly prevalent among university student populations and demand for university counselling services have increased over the last decade. As the literature on this topic is currently sparse and fragmented, the aim of this review was to summarize the available evidence on psychological counselling in higher education by: (i) identifying the main outcomes that have been reported; (ii) providing a qualitative synthesis on whether the interventions were effective.

Method: A systematic search of the PsycInfo, PubMed and Scopus databases was conducted. PRISMA guidelines were followed, and the initial search identified 1277 potentially relevant papers. The Quality Assessment Tool for Quantitative Studies (QATQS) was used to assess the methodological quality of the included studies.

Results: A total of 42 studies were identified as eligible and included in the current review. The results provide evidence of the effectiveness of psychological counselling for university students, identifying benefits in terms of global functioning and some symptoms, particularly with reference to depression and anxiety. Improvements in GPAs and academic distress, but not in retention, were also found at post-intervention. Importantly, students who experienced a greater change in psychological outcomes over the course of counselling reported greater improvements in academic functioning. Online counselling also proved to be effective, while the data remained inconclusive on whether attending more sessions may lead to more improvement. The methodological quality of the included studies was generally moderate.

Conclusions: Overall, the results suggested the need to continue investing in psychological counselling as a means to promote university students' mental health and academic success. Expanding this research field and employing more robust designs is crucial in order to better inform clinical practice and maximize benefits. Research into moderators and/or predictors of counselling outcomes, as well as process analyses aimed at understanding the underlying mechanisms of change, may be promising avenues for enhancing the current evidence base and tailor interventions to the specific needs of students.



In the tangle of suicide related outcome: MEntal states related to Suicidal Ideation Scale (MESIS)

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Abstract

Introduction: In the field of prevention and treatment of clinical conditions associated with the risk of suicide, the need for effective diagnostic screening is stressed. Specifically, suicidal ideation is the most reliable predictor for the development of suicidal behavior. However, there is a gap in the assessment of the facets of suicidal ideation due to the heterogeneity of the construct and the difficulty in operationalizing the associated dimensions. Our study proposes a multidimensional conceptualization of suicidal ideation and a tool for assessing the severity and mental states associated with thoughts related to suicide: MEntal states related to Suicidal Ideation Scale (MESIS).

Methods: The study was conducted on a non-clinical sample divided into two groups, sample 1 (N=510) with a mean age of 28.30 years (SD=11.66) and sample 2 (N=488) with a mean age of 28.09 years (SD=11.67). A self-report survey including mental states related to Suicide Ideation Scale (MESIS) was administered. Preliminary and exploratory analyses were conducted on the structure of the factors on the sample 1. Parallel analyses were then carried out to identify the optimal number of factors for extraction and two main components (PCA). Finally, we performed the confirmation factor (CFA) analysis on sample 2 using indices that estimate the adaptive goodness of the model (CFI, RMSEA) and the internal consistency of each subscale.

Results: The results of the analysis confirmed a total pool of 37 elements and a three-factor structure (Section I) and a four-factor structure (Section II). The first section assesses generic/passive ideation; generic/death ideation; and specific ideation. The second section investigates suicidal mental states related to (1) escape; (2) relationship; (3) impact; (4) revenge. Model adaptation indices (RMSEA; CFI) of the confirmatory factor analysis confirmed the structure, and Cronbach alphas (ranged .74 to .96) indicate good internal consistency.

Discussion: The nomological network behind MESIS conceptualizes suicidal ideation as a multi-faceted dimension and assess the gravity by investigating the frequency and intensity of thoughts related to



suicide. It also allows doctors and researchers to deepen the beliefs or mental states associated with suicidal ideation, contributing to the assessment and treatment of suicide related outcomes.



Evidence-Based Assessment for Psychotherapy with Adolescents: a Protocol Study

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Abstract

Introduction: To the best of our knowledge, there are no brief assessment instruments that can be used to monitor affective reactions that can influence the therapeutic process in adolescence. Our aim is to develop and validate two evidence-based self-report questionnaires – namely, the Relationship In-Session for adolescent Patient questionnaire (RISP) and the Relationship In-Session for Therapist (RIST) questionnaire – that allow assessing these emotional experiences as quantifiable dimensions, regardless of the therapeutic approach and model applied.

Methods: The protocol study is structured in 6 phases. (1) Generation of a pool of items assessing the emotional experiences – both positive and negative – of the adolescent patients towards their therapists and of the therapists towards the patients in a psychotherapy session. (2) Selection of an initial pool of items for the RIST questionnaire by a group of expert psychotherapists of adolescents. (3) Selection of an initial pool of items for the RISP questionnaire in two steps: first, a group of expert psychotherapists of adolescents will rate each item by means of quality and importance; second, a group of adolescent patients will rate each item by means of clarity and frequency of the described experiences. (4) Statistical analysis of the questionnaires. (5) Study on patient-therapist couples at the end of the same therapy session. The patient will fill in the RISP, the Real Relationship Inventory-Patient form (Kelley et al. 2010), the Session Evaluation Scale (SES) (Hill & Kellems, 2002), and the Working Alliance Inventory (WAI) (Horvath et al, 1989). The therapist will fill in the RIST, the Real Relationship Inventory-therapist form (Kelley et al. 2010), the WAI, the SES, the Children's Global Assessment Scale (C-GAS) (Shaffer et al., 1983), the Clinical Global Impressions (CGI) (Guy et al. 1976), and will provide a diagnostic definition of the patient's symptomatology according to the DSM-5-TR (American Psychiatric Association, 2022) criteria. (6) Development and validation of the RISP and RIST questionnaires.

Discussion: Evidence indicates that the patient-therapist relationship influences therapy outcomes in adolescence. It is useful to develop brief assessment instruments that can be used to observe the patient and therapist's emotional experiences within the therapeutic framework.

The use of virtual reality in a pilot study: siblings in pediatric oncohematology

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Abstract

Introduction: Children affected by oncohematological diseases often undergo to painful and fearful medical procedures. During the last years, multimodal pain management approach has been developed, suggesting different pharmacological and non-pharmacological interventions; among them, immersive VR has emerged to be one of the most promising tools for painful and stressful medical procedures. Indeed, it is used in many areas of healthcare; in adults some studies suggest that using the technology can offer an enjoyable experience, but few reports affirm that can help in alleviating symptoms such as pain and anxiety, inducing positive emotions for pediatric patients in the hospital.

Sometimes, even bone marrow donor siblings undergo painful procedures. In fact, the aim of this pilot study is to assess the anxiety, pain perception and fear related to them and promote distraction and relaxation during a blood sampling and venous access procedure using VR.

Methods: The subjects were two siblings (50% male) aged 11 and 8 years old, recruited at the Pediatric Onco-Hematology Clinic, University of Padua.

They filled in RCMAS-2 to assess their anxiety one week before the procedures. The fear and the pain were measured through the Children's Fear Scale and Wong-Baker scale just before and right after a blood sampling and venous access procedure. The experience with the VR took place before and during the procedure and it was set up based on their preferences.

Results: Regarding anxiety symptoms, the results showed clinical scores in the physiological scale ($T = 68$) and in the defensiveness one ($T=64$). The fear felt before the procedures stood at 2 and 1 (Likert scale from 0 to 4); instead, the idea of pain is stood at 4 which indicated the statement "it hurts a little more" (scale from 0 to 10, with a two points interval) in the male subject. Following the procedure which took place through immersive videos on YouTube VR, the fear stood at level 0 for both, and the pain perceived at level 2 ("it only hurts a little") and 8 ("it hurts a lot").



Discussion: The use of VR seems promising to favor the reduction of fear in children with clinical levels of anxiety. It would be beneficial support programs that offer distraction and relaxation through immersive experiences for sibling donors. Based on these results, it could be useful to include patients with oncohematological diseases in future research.



Deciphering the Nexus: Narcissism's Role in Eating Disorders and Treatment

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Abstract

Introduction: The interplay between narcissism and eating disorders (ED) represents a critical area of investigation that is still relatively unexplored within the scientific literature. Given the intricate psychological profiles that characterize individuals with conditions such as Anorexia Nervosa (AN), Bulimia Nervosa (BN), and Vigorexia, it is relevant to deepen the nexus with narcissistic features. Narcissism, comprising both core traits (such as entitlement and grandiosity) and defensive mechanisms aimed at protecting self-esteem, intersects profoundly with the pathogenesis and perpetuation of EDs. This intricate relationship suggests that narcissistic characteristics may not only predispose individuals to the emergence and development of EDs but also influence their trajectory and severity. This systematic review aims to shed light on the associations between narcissistic traits and EDs, focusing on how core and defensive aspects of narcissism manifest within clinical populations.

Methods: Adhering to PRISMA guidelines and registered with PROSPERO (CRD42023473517), the review conducted a comprehensive literature search across multiple databases including Google Scholar, Scopus, PubMed, Web of Science, and PsycINFO in October 2023. Out of 103 studies initially assessed, 16 were ultimately included based on strict eligibility criteria. These criteria targeted original quantitative research conducted in English on adolescents and/or adults diagnosed with AN or BN, according to DSM or ICD standards. The methodological quality of these selected studies was meticulously evaluated using the Downs and Black checklist, ensuring the reliability and validity of the findings. *Results:* The analysis revealed distinct narcissistic dimensions that are significantly prevalent or pronounced among ED populations. Specifically, narcissistic grandiosity showed a stronger association with AN and Vigorexia, whereas vulnerability and defensive entitlement were more prominently linked to BN. This distinction underscores the nuanced role that narcissism plays, varying with the particular pathology and symptomatology of the ED in question.

Discussion: The findings highlighted the importance of recognizing and incorporating the multifaceted manifestations of narcissism into clinical practice to improve treatment outcomes within ED frameworks.



Virtual Running Protocol To Target The Acute Urge To Be Physically Active In Anorexia Nervosa: A Case Series Study

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Abstract

Introduction: Anorexia Nervosa (AN) is a severe and complex eating disorder. While patients often turn to compulsive exercise as means for weight control, starvation intensifies the urge to move, leading to increased restlessness. Despite advancements in AN, interventions often overlook the crucial role of drive for activity in reinforcing the eating disorder. Our case series study aimed to test feasibility and effectiveness of a Virtual Reality (VR) Running protocol to target the acute urge to be physically active

Methods: Two female inpatients with severe AN, aged 23 and 26 years old respectively, participated in a 4-week VR Running protocol, involving from four to six sessions of simulated jogging in a VR environment, aiming to reduce the state acute urge to move. Pre- and post-intervention assessments were also conducted to evaluate psychopathological and trait- and addictive physical activity measures

Results: Although treatment outcomes were only partially achieved and there was little change observed in clinical parameters such as weight and body-mass index, notable reductions in the acute urge for physical activity were observed after each VR session. Subjective scores also indicated a decreasing trend in the urge to move during sessions. Additionally, reliable and clinically relevant changes were observed in interoceptive deficits and emotional regulation. One patient also reported a decrease in both trait- and addictive physical activity at the end of the protocol and rehabilitation program



Discussion: This study represents a first attempt to develop a structured VR running protocol targeting the acute urge to be physically active in severe AN, and integrating such interventions into a rehabilitation program for eating disorders. Future research involving longer exposures and controlled clinical trials is necessary to refine the VR-based protocol and evaluate its clinical and therapeutic efficacy.



How We (Do Not) Trust: Defensive Profiles of The Three Epistemic Stances.

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Abstract

Introduction: In contemporary research, epistemic trust and its disruptions have surfaced as pivotal elements in enriching our understanding of complex psychological dynamics. However, the interplay between defense mechanisms and epistemic trust remains a relatively unexplored territory. This study aims to advance our understanding of this interaction by developing narrative defensive profiles of the three epistemic stances, that is, epistemic trust (ET), mistrust (EM), and credulity (EC).

Methods: A sample of 416 Italian participants (60.6% females and 39.4% males; Mage = 29.4, SDage = 10.8, range 18-70 years) completed an online survey which included two self-report questionnaires: Epistemic Trust, Mistrust, and Credulity Questionnaire and Defense Mechanisms Rating Scale-Self-Report-30.

Results: While ET was primarily associated with mature defense mechanisms, the results showed a positive correlation between epistemic disruptions (EM and EC) and both immature and neurotic defense mechanisms, as well as a negative association with overall defensive functioning. Multiple regression analyses identified three distinct defensive profiles corresponding to each epistemic stance. These findings enhance our understanding of the specific differences between EM and EC, both of which are associated with psychopathological outcomes.

Discussion: As far as we are aware, this is the first study that presents the development of defensive narrative profiles based on the three epistemic stances. This study's findings highlight the importance of evaluating epistemic trust, mistrust, and credulity in research and clinical settings. Results may be important for clinical assessment, providing an understanding of the three epistemic stances, aiding clinicians in the development of tailored interventions.



Appetitive traits and Emotional Regulation: a general population study.

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Abstract

Introduction: Appetitive traits refer to persistent predispositions and behavioral tendencies towards food and eating opportunities. Emotion regulation is a multifaceted process involving stages of regulation both preceding and following regulatory implementation. Enjoyment of food emphasizes pleasure over necessity. The aim of this study is to evaluate how food approach behaviors vary in relation to emotional regulation strategies.

Methods: A total sample of 560 participants (18-67 years) from the general population were asked to fill in demographic and physical data, the Adult Eating Behavior Questionnaire (AEBQ) and the Difficulties in Emotion Regulation Scale (DERS) via an online anonymous survey. The sample was divided by emotional regulation level: high emotional regulation level ($z > 2$) and normal emotional regulation level ($z < 2$). *Results:* The results showed a statistically significant correlation between the appetitive trait of enjoyment of food and emotional regulation levels. The group of subjects with low scores on the DERS scale exhibits a higher score in the trait of enjoyment of food. The results indicate a statistically significant difference; individuals with high scores on the DERS scale have higher scores for emotional overeating traits compared to those with low scores in emotional dysregulation.

Conclusion: Different levels of emotional regulation lead to different approaches to food enjoyment. Individuals with higher levels of emotional dysregulation seem to exhibit greater tendencies towards overeating traits. This can be explained by the fact that different appetitive traits may vary based on emotional regulation. As the level of emotional dysregulation increases, there is a corresponding increase in the propensity for overeating.



Assessing State Intolerance of Uncertainty: a Pilot Study.

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Abstract

Introduction: Recent endeavours explored situation-specific Intolerance of Uncertainty (IU), albeit primarily with a nosological approach. To date, there is no tool to detect changes in IU over time, nor a classification of everyday uncertainty contexts. The present study aimed to develop a state IU scale sensitive to transitional, stress-related, or clinical change. Objectives: 1) select items from an extended pool; 2) assess the scale's association with uncertainty distress; 3) evaluate the scale's sensitivity to situational features.

Methods: A 3-wave longitudinal study was conducted, with each wave occurring 3 weeks apart. A total of 204 psychology students responded to an online survey at T1. Of these, 78 and 50 were present at T2 and T3, respectively. The item set was developed from existing IU scales, and IU in a recently experienced situation was probed with self-reported narration. Uncertainty distress was assessed at all time points. Item selection was carried out with Exploratory Graph Analysis, and linear models were performed to achieve the research goals. A LIWC analyses of uncertainty emerging from students' narratives was conducted.

Results: Participants experienced uncertainty in relationships and academic areas. High attrition was mitigated using imputation of missing values after checking for missingness completely at random. Exploratory Graph Analysis yielded 3 clusters of 4 items each, capturing prospective IU, inhibitory IU and uncertainty discomfort. The State-IU scale at T1 predicted uncertainty distress at T2. There was no significant overall change across time in IU, while at an intra-individual level participants differed in baseline IU levels (random intercept) and degree of change (random slope). With the same number of words, individuals with high levels of IU used fewer words related to negative emotions.

Discussion: This study enabled a preliminary selection of 12 items for the IU state scale, which predicted distress reported by participants regarding the narrated uncertainty situation. There was no evidence of a change over time across participants, while significant variation at the individual level in IU scores was supported, suggesting that this tool might prove useful in detecting changes in IU. When recalling



experiences of uncertainty, individuals high in IU might struggle with disclosure of affect and negative emotions.



**Anxiety, Depression and dysfunctional eating in individuals with different levels of education:
a general population study.**

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Abstract

Introduction: Emotional eating is defined as the tendency to eat in response to negative emotions. Emotions can influence how we perceive food consumption. Elevated food intake or restriction during emotional and psychological states might adversely affect human health, as anxiety and depression symptoms. In the literature, it has been suggested that a higher level of education is associated with lower levels of anxiety and depression. The aim of this study is to infer that anxious and depressive symptomatology can be reflected in opposite dysfunctional eating behaviors, as restrictive and uncontrolled eating.

Methods: A total sample of 560 participants (18-67 years) from the general population were asked to fill in demographic and physical data, the Adult Eating Behavior Questionnaire, the Depression Anxiety and Stress Scale via an online anonymous survey. The sample was divided by educational level: low educational attainment (elementary school, middle school, high school) and high educational attainment (bachelor's degree, master's degree, doctorate, or postgraduate degree).

Results: The results showed statistically significant differences in anxiety levels between low and high educational attainment, with higher anxiety levels in lower education group. Statistically significant differences in depression levels were found between individuals with high and low educational attainment, with the latter group exhibiting higher anxiety levels. No statistically significant differences were found in stress level. Using emotional eating (AEBQ questionnaire) as a covariate in the model: no differences were found between the two groups. The trait emotional over-eating used as a covariate nullifies the differences between groups in anxiety levels. The trait emotional under-eating used as a covariate nullifies the differences between groups in depression levels.

Conclusion: The differences in anxious and depressive symptomatology are explained by patterns of disordered eating behaviors in groups of individuals with different levels of education. Anxious



individuals respond with overeating behaviors, while those with depression tend to exhibit under eating behaviors, regardless of their level of education.



Parental bonding and eating disorders risk: a path analysis on the role of self-esteem, perfectionism and body shame.

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Abstract

Introduction: The relationship between perceived parental care and overprotection, body shame, low self-esteem, and vulnerability to eating disorders is well known, especially in adolescents. It has been shown that perfectionism, both adaptive and maladaptive, can be a risk factor for eating disorders. However, the functioning of perfectionism among individual vulnerability factors in the risk of eating disorders needs to be clarified. Based on these assumptions, the purpose of this study was to provide a preliminary understanding of the relationship between perfectionism and some of the major risk factors for the onset of eating disorders in a sample of adolescents. It was hypothesized that the relationship between maternal and paternal care and overprotection and the risk of eating disorders is mediated by self-esteem, perfectionism, and body shame.

Methods: This study involved 1010 adolescents (Range=13-18, Mage=15.43, SDage=1.37; F=549, 54%) from Italian secondary schools. Participants completed self-report questionnaires assessing parental bonding, self-esteem, perfectionism, body shame, and eating disorder risk. A path analysis was performed.

Results: Model fit indices were satisfactory (RMSEA=0.06; SRMR=0.026; CFI=0.982; TLI=0.903). Indirect pathways were observed, connecting maternal care, overprotection, and paternal care with eating disorder risk via self-esteem, maladaptive perfectionism, and body shame. Gender invariance of the model was assessed, and a significant disparity emerged ($\chi^2=42.81$, $p=.01$).

Discussion: The association between parental bonding and eating disorder risk is mediated by various aspects of individual vulnerability. Gender differences emerged: gender subgroup demonstrated significant indirect paths from paternal care. Maternal care was significant only for females, while maternal overprotection only for males. Adaptive perfectionism is not significant in any pathway. This may suggest that adaptive perfectionism, characterized by the ability to set high standards and maintain flexibility, does not appear to play either a directly or indirectly role in predisposing individuals to eating



disorders. Maladaptive perfectionism, on the other hand, which is defined by exaggerated standards and persistent dissatisfaction with performance and aesthetics, intensifies this tendency by making people more likely to see perceived flaws or failures as proof of their own inadequacy.



**Exploring neural mechanisms underpinning sensorimotor integration: the role of high
borderline personality traits.**

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Abstract

Introduction: Interpersonal coordination processes rely upon the ability to anticipate and adapt to one's own and other actions during social interactions. Such a mutual adaptive process strengthens interpersonal synchrony to emerge through the modulation of interpersonal patterns, such as integrating self and other actions at the representational level. Recent findings have revealed that individuals with traits related to borderline personality disorder (BPD) show impairments during adaptive interactions of interpersonal coordination. However, more research is needed to explore the neural mechanisms underlying this association. The present study aims to fill this gap by testing how BPD traits modulate mu-rhythm suppression as a sign of shared representational levels of self and others' actions during different conditions. *Method:* We employed a synchronized finger-tapping task and measured EEG from N = 50 participants who interacted with a virtual partner (VP) with varying degrees of temporal adaptation during bidirectional conditions or with no interaction partner in the individual condition. The perceptions of synchrony and cooperation were rated after each interaction. BPD traits were assessed using the Personality Assessment Inventory Borderline Features Scale. *Results:* Mu rhythm suppression at 9-13 Hz was found over the sensorimotor areas across all the conditions. However, higher levels of BPD traits were associated with a reduced mu suppression at the 10 Hz component as a sign of impaired sensorimotor integration of self and others' actions. Then, at increasing levels of VP adaptivity, lower perceptions of synchrony and cooperation were found, while unexpectedly higher BPD traits were associated with higher cooperation. *Discussion:* These findings suggest that the presence of pathological individual dimensions could be related to a reduced mechanism underlying the ability to integrate self and other actions as a proxy of the mirror system. Overall, this might reflect the reduced mentalization of individuals with high BPD traits, giving insight into how to modulate individualized clinical interventions within synchronized therapeutic relationships.



The affective-motivational foundation of Conscientiousness

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Abstract

Introduction: The Big Five personality trait Conscientiousness - described by the propensity to be self-controlled, responsible to others, orderly, hardworking and rule-following - is known to lack a direct affective foundation, which became clear in early correlational studies with Affective Neuroscience Personality Scales. The lack of this correlation, which is rooted in evolutionary theory, is attributed to the recent emergence of Conscientiousness in the phylogenetic history of mammals, particularly humans. Conscientiousness may be represented in the most recent neocortical expansion and regulates "raw" affects in a top-down manner. The aim of this study is to investigate whether Conscientiousness can be described by the influence of the basic bottom-up emotional systems, i.e., SEEKING, ANGER, FEAR, CARE, LUST, SADNESS, and PLAY, proposed by the Affective Neuroscience approach, via the mediating role of the motivational systems, i.e., the Fight-Flight-Freeze (FFFS), the Behavioral Approach System (BAS) and the Behavioral Inhibition System (BIS) proposed by the Reinforcement Sensitivity Theory. *Methods & Data Analysis:* A sample of 497 individuals (60.2% female; Mean Age = 31.8 years, SD = 14.2 years) was assessed using the Affective Neuroscience Personality Scales Short Form, the Reinforcement Sensitivity Theory Personality Questionnaire, and Big Five Inventory-2. To examine the relationship between basic emotional systems and the Conscientiousness trait, a multiple mediation model was implemented with BIS and BAS as mediators. *Results:* Some significant indirect effects were observed using BIS as mediator factor in the relationship between SADNESS and Conscientiousness ($\beta = -0.29$; $p < .001$), and between FEAR and Conscientiousness ($\beta = -0.16$; $p < .001$). Furthermore, significant indirect effects were identified with BAS as mediator factor between SEEK and Conscientiousness ($\beta = 0.10$; $p < .001$), and PLAY and Conscientiousness ($\beta = 0.06$; $p < .001$). *Discussion:* Our results are consistent with the hypothesis that Conscientiousness is motivated and maintained by both positive and negative affectivity, and serves the dual purpose of avoiding stress and seeking for pleasurable states. This study has the merit of examining aspects of personality anchored in an updated and innovative approach involving the basic bottom-up emotional and motivational systems.



The role of expectations and cognitive biases in the ageing trajectory.

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Abstract

According to the ‘stereotype embodiment theory’, ageing stereotypes are embodied when they are internalized from the surrounding culture, leading to self-definitions that, in turn, influence functioning. From a Bayesian brain perspective, expectations (priors) and sensory evidence (likelihood) are thought to be fused in a way that generates the best guess regarding the state of the world (posterior), thus producing perception. Ageing research offers an opportunity to probe this suggestion, as the amount of information accumulated in the priors increases throughout one’s lifetime, tipping the balance to a state where perception is increasingly dominated by predictions that are resistant to evidence-based updating. In predictive coding, this overlaps with the theory of active inference, whereby corrective actions are initiated to match ‘stubborn predictions’ that are resistant to change and cannot be updated, so to minimize ‘free energy’ (i.e., uncertainty). Here, we propose an integrated framework wherein the self-fulfilling prophecy created by negative ageing stereotypes could be explained in the light of active inference processes. Specifically, ageing stereotypes could be enacted and perpetuated through confirmatory actions that favor uninformed decisions and maladaptive behavior. Unfolding the link between Bayesian theories of the mind and ageing may provide a new key to the interpretation of the mechanisms due to which we age, which may pave the way for the development of treatments to promote ‘healthy ageing’.

Characteristics of university students asking help to psychological counselling services at the University of Campania Luigi Vanvitelli.

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Abstract

Introduction: Several studies have indicated that university students are at risk of developing mental health problems, particularly following the impact of the COVID-19 pandemic, with a concurrent higher demand for psychological help at university counseling services (UCS).

The present study aimed to report the Vanvitelli’s UCS use rates from 2018 to 2023 and to provide a brief overview of characteristics of university students seeking psychological help (SH).

Methods: Data regarding the frequency demand for UCS, SH students’ sociodemographic characteristics, type of university course attended, academic standing (i.e., whether all exams within the prescribed period had been passed) were obtained using an online survey at the first contact, before the beginning of counselling intervention. Data were collected from September 2018 to December 2023.

Results: Over a 6-year period, $n=639$ university students contacted the UCS. Among them, $n=503$ (70.2% f, mean age: 24.07 ± 4.02 , 33.4% off-course, more than 40% attended Medicine courses) underwent psychological counselling intervention, totaling $n=1832$ interviews provided ($n=77$, 15.3 % dropped out). The number of SH students who contacted the UCS ($\chi^2=84.814$, $p<.0001$) and received psychological counselling ($\chi^2=25.161$, $p<.0001$) significantly differed over time increasing by about 288% (contacts/counselling interventions: 2018 $n=49/24$; 2019 $n=64/62$; 2020 $n=82/77$; 2021 $n=112/112$; 2022 $n=142/109$; 2023 $n=190/119$), with the highest number of interviews delivered after the COVID-19 pandemic. Differences were found across years in the type of course attended by SH students (significant increase of students from Law, Economics, Engineering, and Architecture courses, $\chi^2=54.323$, $p<.0001$) and in dropout rates ($\chi^2=24.427$, $p<.0001$), significantly increasing especially in 2023 (adjusted standardized residual = 3.7).

Discussion: The significantly higher demand for psychological help confirms the increased psychological distress in university students reported in recent years. The possible role played by the interventions delivered through online modalities, as well as the emergence of new psychological needs and the



widespread mental health literacy, especially after the COVID-19 pandemic, warrants further study. Overall, these findings highlight the need for timely interventions to meet the needs of students.



Aging with chronic illness: The role of Self-Perceptions of Aging in Self-Care Maintenance A preliminary study.

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Abstract

The significant rise in the population of Italian elders poses major challenges for public health, especially in terms of managing chronic diseases. Research has indicated the critical role of elderly patients' self-care maintenance behaviors in reducing the burden of disease and the associated healthcare costs, and in enhancing their quality of life.

In recent years, international literature has also shown that having a positive view of one's own aging process (Self-Perceptions of Aging) can be essential in promoting self-care practices, predisposing individuals to actively shape their aging process, with positive effects on psychological well-being.

Grounded in the theoretical frameworks of the Life-Span Perspective and the Common Sense Model of Illness Representation, this preliminary study is aimed to explore the effect of Self-Perceptions of Aging and Illness Representation on self-care maintenance behaviors and psychological well-being in an Italian sample of older individuals with chronic disease diagnosis, testing the mediating effect of patients' engagement in healthy ageing promotion.

To this end, a cross-sectional observational study was conducted on an Italian sample of 80 elderly patients (aged ≥ 60 years) with chronic disease, recruited in primary care settings. The data collection method involved the administration of a self-report questionnaire composed of instruments to measure Self-Perceptions of Aging (Awareness of Age-Related Changes Scale; AARC Scale), Illness Representation (Brief-IPQR), Engagement in Healthy Ageing Promotion Scale (EHAP-S), Self-Care behaviors (Self-Care Maintenance Scale), psychological well-being (Warwick-Edinburgh Mental Wellbeing Scale), and psychological distress (Kessler Psychological Distress Scale, K10). Statistical analyses were performed using SPSS software, employing descriptive and correlational analyses between the variables of interest.

Preliminary results suggest that positive perceptions of aging and less negative representations of illness are associated with self-care maintenance behaviors and enhanced psychological well-being among elderly individuals with chronic diseases.



These data can offer significant insights to guide clinical practice for older patients with chronic conditions, suggesting the importance of integrating the assessment of psychological factors related to aging into interventions targeted at this population



Deviant behaviors and violence in young people after COVID-19: sign of the times or consequence of the pandemic?

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Abstract

Overview: Adolescence is a critical stage of development marked by significant physical, emotional, and social changes. National data highlight a rise in deviant and aggressive behaviors among Italian youths since the COVID-19 pandemic outbreak. These behaviors can have lasting negative effects at the individual and the societal level. The proposed project aims to address this emergent concern investigating factors implied in juvenile deviance and developing a targeted prevention program for Italian adolescents: the Youth Participatory Action Research (YPAR) program. The project is currently ongoing, in line with the workplan submitted for national Ministry approval (MUR) and European funds allocation (NextGenerationEU). PRIN 2022: Prot. 2022E9YKYZ.

Method: The project involves interdisciplinary research units from the Universities of Florence, Bologna, and Siena, coordinating via periodical meetings. A multi-method approach was elected. A survey was created to assess juvenile deviance and its correlates using: the Deviant Behaviors Variety Scale (DBVS), the COVID-19 Student Stress Scale (CSSS), the Mental Health Continuum-Short Form (MHC-SF), the Brief Sensation Seeking Scale (BSSS), the Basic Empathy Scale (BES), and the Multidimensional Scale of Perceived Social Support (MSPS). Relevant data from official statistic sources (ISTAT) and local Police records will be collected. The YPAR will comprise focus groups, collaborative risk analysis, solution development, and dissemination strategies. Participant observations and assessment of effectiveness and impact will be employed.

Preliminary Results: Sample locations for data collection were extracted based on randomization and size estimation processes, including: 12 high schools, 19 undergraduate courses and 17 aggregation centers (e.g. gyms). To date, the above-mentioned survey has been administered to a sample of undergraduate students ($n = 243$; $F = 73\%$, $M_{age}: 24.34 \pm 7.21$). Since the data collection is currently ongoing, results will be presented, discussed, and updated subsequently.

Discussion: The YPAR holds potential for several implications, enhancing youngsters' resources and proactive social roles, promoting inclusion, reducing risk behaviors, and preventing post-pandemic escalation of juvenile deviance.



An Analysis of the Narratives of Inmates: An exploratory study on Subjectivity

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Abstract

Introduction: The global impact of violence yields critical results, as it is the fourth leading cause of death for individuals aged 15 to 44. Research conducted in the penitentiary context up to now has focused on exploring various dimensions, such as assessing the risk of violence and recidivism, placing a focus on understanding the factors that determine violent behaviors; the prison conditions of inmates, sometimes crucial for violent incidents in prison. In recent years, there has been a considerable increase in interest in qualitative investigations applied to the prison environment. However, a largely unexplored aspect concerns the subjective experience of prisoners and the level of awareness related to deviant behavior. Building on these premises, the objective of this exploratory study was to investigate the narrative capacity of the criminal experience through the administration of a semi-structured Criminal History Interview.

Methods: The qualitative and exploratory research was conducted by administering the Criminal History Interview (Velotti et al., 2023) to a sample of n=13 subjects. The interviews were audio-recorded and subsequently transcribed to facilitate the analysis of elementary contexts carried out using T-Lab software.

Results: The analyses led to the identification of four factors and three clusters. Interpretation resulted in defining the cluster labels as Risk, Uncertainty, Deviant Family Context, and Process, respectively. The factors represented were Crime Context, Relational Difficulties, and Ambivalence.

Discussion: Our preliminary findings regarding the analysis of inmates' narratives and their awareness of deviant behavior emphasize several aspects underlying the narrative of criminal experience. Specifically, issues have emerged regarding the relational difficulties related to a project of shared life outside prison; the fear of recidivism related to the implementation of deviant behaviors fueled by the return to the social context in which they originated; Finally, the distress related to the bureaucratic process full of uncertainty towards an indefinite future.



The Role of Cognitive Flexibility on Higher Level Executive Functions in Mild Cognitive Impairment and Healthy Older Adults

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Abstract

Mild Cognitive Impairment (MCI) is a preclinical condition between healthy and pathological aging, which is characterized by impairments in executive functions (EFs), including cognitive flexibility. According to Diamond’s model, cognitive flexibility is a core executive function, along with working memory and inhibition, but it requires the development of these last EFs to reach its full potential. In this model, planning and fluid intelligence are considered higher-level EFs. Given its central role in enabling individuals to adapt their daily life behavior efficiently, the goal is to gain valuable insight into the functionality of cognitive flexibility in a pre-clinical form of cognitive decline. This study aims to investigate the role of cognitive flexibility and its components, set-shifting and switching, in MCI. The hypotheses are as follows: (i) healthy participants are expected to perform better than those with MCI on cognitive flexibility and higher-level EFs tasks, taking into account the mediating role of global cognitive functioning; (ii) cognitive flexibility can predict performance on higher-level EFs (i.e., planning and fluid intelligence) tasks differently in healthy individuals and those diagnosed with MCI.

Ninety participants were selected and divided into a healthy control group (N=45; mean age 64.1 ± 6.80 ; 66.6% female) and an MCI group (N=45; mean age 65.2 ± 8.14 ; 40% female). Cognitive flexibility, fluid intelligence, planning, and global cognitive functioning of all participants were assessed using standardized tasks.

Results indicated that individuals with MCI showed greater impairment in global cognitive functioning and EFs performance. Furthermore, the study confirms the predictive role of cognitive flexibility for higher EFs in individuals with MCI and only partially in healthy older adults.



Fluid Intelligence in Parkinson's Disease and Mild Cognitive Impairment

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Abstract

Fluid intelligence (Gf) is the ability to perceive relationships between different stimuli and to derive associations. Gf involves many processes, including making inferences, creating hypotheses, and transforming information, that enable the use of diverse strategies to solve problems in novel contexts. This ability reaches its peak during adolescence and declines from early adulthood. This study aims to assess the Gf decline in healthy older individuals (HC) and different forms of pathological aging, such as Parkinson's disease (PD) and Mild Cognitive Impairment (MCI).

Eighty-one participants were divided into three groups: 27 individuals diagnosed with MCI (mean age: 69.1 ± 7), 27 participants with PD (mean age: 70.1 ± 9.4), and 27 HC (mean age: 69 ± 8.4). Raven's Standard Progressive Matrices (RSPM) were used to assess Gf.

ANOVA showed significant differences in the RSPM ($F=7.3$, $p<.001$): individuals with PD exhibited a poorer performance (mean: 28.5 ± 12.1) than HC (mean: 39.3 ± 10.7 , $p=0.001$) and individuals with MCI (mean: 36.2 ± 9.1 , $p=0.03$), while there was no significant difference between participants with MCI and HC.

The diminished Gf performance in the group with PD could be attributed to a greater brain disruption in this group compared to the others. Gf is associated with several areas, including basal ganglia, striatum, caudate, and their connections to the prefrontal cortex. Although the impairment of frontal networks in healthy aging and MCI is well-documented, these results suggest that these areas are more impaired in PD. In PD, the alterations of fronto-striatal circuits are characterized by an imbalance of dopamine, which is involved in the development of cognitive symptoms, including poor Gf. In conclusion, evaluating Gf can potentially highlight cognitive decline in pathological aging.



Friday, 13th September 2024

SYMPOSIUM SESSION



EXPLORING THE COMPLEX SCENARIOS OF PARENTHOOD IN THE PERINATAL PERIOD

Proposer

Renata Tambelli¹

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Discussant

Cristina Riva Crugnola¹

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

Abstract

The symposium titled "Exploring the Complex Scenarios of Parenthood in the Perinatal Period" delves into the multifaceted experiences of parenthood during the perinatal phase, scrutinizing the challenges, opportunities, and ramifications for caregivers and newborns alike. Our endeavor is to dissect the available support systems for parents in this critical juncture, encompassing healthcare provisions, social networks, educational schemes, and various forms of assistance. By offering a comprehensive examination of this pivotal life stage, our aim is to foster a deeper comprehension and bolster support for individuals navigating through this transitional period. Ultimately, our collective exploration not only enhances insight into the unique journeys of parents and infants but also facilitates the formulation of policies and initiatives geared towards enhancing the well-being of families and communities on a broader scale.

The symposium features diverse research endeavors shedding light on distinct aspects of perinatal parenthood.

F. Baldoni's research on perinatal grandparents unveils the evolving roles of grandparents as caregivers in contemporary society, expanding beyond traditional educational roles to encompass significant caregiving responsibilities for newborn grandchildren.



M.R. Infurna, E. Bevacqua, G. Costanzo, G. Falgares, C. Guarneri, J. Sottile, A. Maiorana, F. Giannone, project targets the early identification of women at risk for perinatal depressive symptoms, emphasizing the importance of timely psychological interventions to evaluate efficacy and mitigate adverse outcomes.

E. Neri, A. Provera, and F. Agostini's study on paternal infant-directed speech highlights potential disparities between paternal and maternal communication with premature infants, influenced by the severity of prematurity and parental distress levels.

C. Trumello, C. Candelori, and A. Babore's study illuminates the often-overlooked challenges faced by fathers following preterm birth, underscoring the prevalence of depression and anxiety in this demographic and advocating for increased support and awareness.

In amalgamating these diverse perspectives and insights, the symposium aspires to catalyze dialogue, innovation, and action towards fostering a more supportive and conducive environment for the holistic development of parents, newborns, and families alike during the perinatal period.



When a parent is born - Screening, prevention, and early treatment of psychological distress during the perinatal period

Maria Rita Infurna¹, Eleonora Bevacqua¹, Giulia Costanzo¹, Giorgio Falgares¹, Claudia Guarneri¹, Jada Sottile¹, Antonio Maiorana², Francesca Giannone

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² HCU Obstetrics and Gynecology, ARNAS Civico Di Cristina-Benfratelli Hospital, Palermo, Italy

Abstract

Introduction: The perinatal period may represent a particularly challenging time. Studies have highlighted an association between several perinatal risk conditions (e.g., childhood maltreatment, poor social support, antenatal attachment, stress levels) and depressive symptoms. However, psychosocial risk conditions are rarely assessed in routine care settings, and consequently, early interventions are not implemented.

Thus, this project aims at 1) detection of the psychosocial risk conditions that may favor the onset of perinatal depression; 2) identifying women at high-risk for perinatal depressive symptoms to realize early psychological interventions and evaluate their efficacy. The project follows a longitudinal approach, from pregnancy to 6 months after childbirth.

Methods: Since October 2023 we have been carrying on the project “When a parent is born -Information, screening, prevention and early treatment of psychological distress in pregnancy and post-partum depression”, with the active involvement of the Obstetrics and Gynecology Unit of the Civic Hospital of Palermo. To date, more than 200 pregnant women have completed the screening protocol and responded to the following self-report instruments: CTQ-SF (childhood maltreatment); MSSS (maternal social support); MAAS (prenatal attachment); RF (reflective functioning); and EPDS and PAMA (perinatal psychological distress). Based on the above, we have implemented an exploratory study (participants 128 Italian pregnant women, Mage = 33.4; SD = 6.10) to examine how emotional abuse and neglect experiences may favor the occurrence of psychological distress in pregnant women, and whether prenatal attachment might explain this association.

Results: Pearson correlations revealed a positive association between childhood neglect and perinatal psychological distress, as well as a negative association between childhood neglect and prenatal attachment scores. No significant correlations were found for emotional abuse. Perinatal psychological



distress was negatively associated with prenatal attachment. Mediation analyses showed significant associations between childhood neglect and the dimensions of perinatal affectivity and prenatal maternal attachment. Prenatal maternal attachment mediated the relationship between neglect and perinatal psychological distress.

Conclusions: The transition to motherhood is a sensitive period, particularly for women who have experienced abuse and neglect during childhood. These experiences may negatively impact the woman's disposition to emotionally and behaviorally engage in the formation of a bond with her unborn baby. These results may have important prevention and clinical implications and thus should warrant further exploration.

Paternal infant directed speech to 3 months old premature infant: an exploratory study on the influence of severe prematurity and parental symptomatology

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Abstract

Introduction: Literature on perinatal period showed a recent increased interest on paternal figure, exploring the characteristics of early father-infant interactions. However, little is known on paternal Infant-Directed Speech (IDS), especially in contexts of high vulnerability as preterm birth or perinatal symptomatology. This study is aimed to describe functional and morpho-syntactic features of paternal IDS at 3 months, in comparison to maternal one. We also considered the influence of birth status [premature infants-PT: Extremely Low Birth Weight-ELBW (<1000 gr), Very Low Birth Weight-VLBW (1000-1500 gr); full-term infants-FT] and post-partum symptomatology (depression; parenting distress).

Methods: Seventy-one fathers, mothers, and their 3 months infants (24 FT, 22 ELBW, 25 VLBW) were recruited for the study. 3 minutes of parent-infant free play were video recorded: lexical, syntactic, and functional features of interaction were analyzed by CHILDES software. Depressive symptoms and parenting stress were assessed using the Edinburgh Postnatal Depression Scale (EPDS) and the Parenting Stress Index Short Form (PSI-SF).

Results: Paternal speech was characterized by minor verbosity ($F(3,129)=7.50$; $p=.006$) and lexical variability ($F(3,129)=7.10$; $p=.009$) compared to maternal IDS, while no differences emerged among birth status groups ($p>.05$). When we considered the interaction between parental role and birth status, differences were found on descriptions and questions ($F(6,260)=14$, $p=.001$; $F(6,260)=7.50$, $p=.007$, respectively): only in FT dyads, fathers had significant lower scores than mothers.

Analyses on perinatal symptomatology showed that higher paternal PSI scores was associated with more complex morpho-syntactic features (Types: $r=0.25$; $p=.03$; Tokens: $r=0.26$; $p=.02$; Mean Length of Utterance: $r=0.24$; $p=.04$), while higher maternal EPDS scores correlated with less affect-salient speech ($r=-0.42$, $p<.001$), more descriptions ($r=0.25$, $p=.03$) and questions ($r=0.30$, $p=.01$),

Discussion: The present study suggests that paternal IDS could differ from to maternal one and be sensitive to level of parenting distress. Despite preliminary, these results could contribute to better understand



strengths and vulnerability of paternal communications, confirming the need of involving both parents in infant care from the early stages of development, especially in vulnerable conditions



Mothers and fathers facing preterm birth: Reflections on qualitative and quantitative data

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Abstract

Introduction: Preterm birth is a significant event impacting both child and parents emotionally. While previous research predominantly focused on maternal experiences, recent studies involving fathers suggest their equal importance in influencing infants’ outcomes. Both mothers and fathers of premature infants often exhibit elevated levels of depression and anxiety compared to parents of full-term infants. However, existing research has largely relied on self-report questionnaires, lacking depth in exploring qualitative aspects of the preterm birth experience. This study aims to comprehensively investigate fathers’ and mothers’ psychological reactions to preterm birth.

Methods: Sixty-four parents of preterm infants admitted to a Neonatal Intensive Care Unit (NICU) participated in this study. Levels of anxiety and depression were assessed respectively using the State Trait Anxiety Inventory and Edinburgh Postnatal Depression Scale, respectively. Additionally, responses to the Clinical Interview for Parents of High-Risk Infants (CLIP) were analyzed.

Results: Two-thirds of mothers and one-third of fathers exhibited depressive symptoms above the risk threshold. While most parents reported intermediate state anxiety levels, clinically significant anxiety was present in 31% of mothers and 19% of fathers. Qualitative analysis of interviews revealed that NICU environment, communication with staff, infant appearance, and unpreparedness for parental role were significant stressors for fathers.

Discussion: This study underscores the importance of recognizing the experiences of both mothers and fathers in the NICU setting. It elucidates the stressful role fathers assume following preterm birth, often accompanied by depression and anxiety. Timely support for both parents post-childbirth and during NICU hospitalization is crucial to mitigate potential challenges in parent-infant relationships and child development



Perinatal grandparents: the caregiver experience

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Abstract

Introduction: In the contemporary nuclear family, the function of grandparents, like that of fathers, has significantly changed compared to that carried out in the patriarchal family structure of the past. Today grandmothers and grandfathers not only carry out educational tasks, but increasingly take care of newborn grandchildren as caregivers. They change diapers, dress, undress, feed, wash, pick up, console, put to sleep and take them to nursery. In many cases they are a stable source of protection and security over time, working alongside parents as attachment figures.

Hypothesis: As in the case of fathers, these functions seem to modify grandparents not only from a psychological and emotional point of view, but also neuroendocrinological and epigenetic.

Results and conclusions: Functional MRI research has demonstrated structural changes in the central nervous systems of 50 grandmothers, but not yet in those of grandfathers. Neuroendocrine changes, however, have been widely described in fathers who care for a newborn as a caregiver, even in non-biological or homosexual ones. Very little has yet been written about these aspects in grandfathers, but they will be an important topic for future studies. The report addresses these issues by delving into the results of contemporary research.



BETWEEN PATIENT'S SELF-DETERMINATION AND PHYSICIAN'S RESPONSIBILITY: THE CONTRIBUTION OF CLINICAL PSYCHOLOGY IN A DIFFICULT BALANCE

Proposer

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Discussant

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Abstract

The 219th Italian law of 2017 slowly became an application reality and set the stage for an attempted balancing act—not always easy or not always possible—between the patient's decision-making space and the physician's responsibility. This frame of reference can be observed in different clinical contexts that show the challenges and complexities of balancing two inalienable clinical principles, in which people (patients, families, and healthcare professionals) and their socio-psychological realities are then involved. Through four contributions, this symposium aims to:

1. explore healthcare professionals' moral distress (with Giulia Lamiani's contribution), where, among the causes of moral distress, there are patients' preferences and desires, which are not always feasible;
2. see how respecting the value of self-determination can result in potentially "endless" care in the context of infertility, where the decision-making pattern and emotional impact on the patient or couple must be carefully observed (contribution by Federica Bonazza and colleagues);
3. delve into the topic of organ and tissue removal, which is based on self-determination and the necessary respect for the donative will of the patient who remains in possession of his or her body and the decisions that affect it even after death (contribution by Michela di Trani);



4. reflect on the impact that artificial intelligence can have on the care pathways of the sick, potentially providing support and help, but perhaps also governing physician and patient decisions, in a space that remains to be considered (contribution by Carlo Clerici and Lidia Borghi).



Exploring causes of moral distress among Italian healthcare professionals: Theoretical reflections and practical implications

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Abstract

Introduction: Despite the growing interest in ‘moral distress’ (MD), there is currently no consensus on its definition. Morley et al. (2020) broadly defined moral distress as the psychological distress that is causally related to a moral event. They suggested that moral distress could be divided into sub-categories based on its causes: moral constraint-distress, moral conflict-distress, moral uncertainty-distress, moral dilemma-distress, and moral tension-distress. The aim of this study was to determine whether the sub-categories of MD identified by Morley et al. apply to the situations of MD as described by a sample of Italian healthcare professionals (HPs).

Method: As a part of a larger study, we recruited a convenience sample of 20 multidisciplinary HPs (11 physicians, 7 nurses, 1 obstetrician, 1 physiotherapist; 15 females; mean age = 50.26; SD = 8.19) from a public hospital in Milan. During semi-structured interviews, HPs were asked to describe a morally distressing situation. Using a top-down approach, we coded the morally distressing situations using the MD sub-categories proposed by Morley et al. When new sub-categories were detected, these were analyzed and coded through thematic content analysis.

Results: 79 morally distressing situations were described. These were caused by moral constraint (n=29), moral conflict (n=20), moral uncertainty (n=3), moral tension (n=2), moral conflict and constraint (n=4), moral constraint and tension (n=2), moral constraint and dilemma (n=1), and moral dilemma and conflict (n=1). Some situations were triggered by new causes not included in Morely’s sub-categories, such as violation of professional norms (n=5), violation of professional values (n=7), lack of competence (n=3) and inner conflict (n=2).

Discussion: Findings suggest that Morley’s sub-categories of MD need to be revised as are not exhaustive. Moreover, in many situations, a combination of more causes was detected. Based on these findings we argue that defining MD by using its possible causes may confound the concept and, at the same time,



risk to be not exhaustive. We call for a more phenomenological definition of MD which transcends specific causes. Finally, given that many causes are not preventable, on-call ethical and psychological consultations could be offered to help clinicians manage the emerging moral distress.



Towards a culture of organ donation and transplantation: general population and healthcare workers point of views

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Abstract

Introduction: The "Law on organ donation and transplantation," 91/1999, establishes the fundamental principles of the Italian donation and transplant system. In particular, it stipulates that the donation of organs and tissues is permissible only when there is "informed and explicit consent" expressed by the donor (living) or their family. This consent must be given freely, voluntarily, and based on sufficient information about the procedure and its implications. The same law also provides for silent silence, which however has never been applied.

Method: This symposium contribution will present data from two research studies aimed at understanding the perceptions surrounding organ donation within the general population and among healthcare workers in critical areas. To achieve this, 200 individuals aged between 20 and 30 from the general population and 100 healthcare workers were interviewed using a single-question interview. The textual data were then analyzed following the Emotional Text Mining methodology to identify emerging collective representations.

Results: From the narratives of people in the general population, 4 clusters emerge which concern the theme of Altruistic choice, the Need for information, the Sacredness of the body, and the Bloody imagery of donation and transplantation. From the healthcare workers' narratives, 6 clusters emerge relating to the Need for hope, the Need for team support, to Prepare the family, the Taboo of death, the Relationship with the hospital institution and the Organizational response to COVID-19.

Conclusion: Themes of death and bodily integrity appear to present barriers to organ donation, which can be overcome through accurate information that promotes an altruistic mindset. In instances where the family makes the decision, the relationship with medical staff emerges as crucial for facilitating the donation process. However, healthcare workers may not always feel equipped with the necessary skills and may require additional support and training to navigate the complexities of organ donation. These



findings underscore the importance of ongoing education, support systems, and institutional frameworks to enhance organ donation rates and ensure ethical and effective practices within the healthcare system.



Patient-centered medicine in the era of artificial intelligence: what are the possible implications and risks?

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Abstract

Introduction: Artificial intelligence (AI) is rapidly transforming the healthcare setting, offering new opportunities to improve diagnosis, treatment, disease management, and decision processes. However, the integration of AI in care pathways also raises challenges for the doctor-patient relationship that require in-depth reflections. This study explores the potential impact of AI on the model of patient-centred medicine, focusing on its role in the decision-making process and the ethical implications of its use.

Methods: This study is based on a narrative review of existing literature on the use of AI in healthcare, with a particular focus on implications for the doctor-patient relationship and ethical considerations. Several scientific databases were consulted to identify relevant articles published in the last 10 years. Data were qualitatively analyzed to identify key themes, implications for clinical practice, potential risks, and possible solutions.

Results: Preliminary analysis suggests that AI has the potential to significantly improve care pathways by providing decision support to doctors, personalizing treatments, and enhancing the patient experience. However, various challenges also emerge, including a potential loss of decision-making autonomy for doctors and patients, a risk of AI paternalism, a change in communication and doctor-patient relationship, and a shift in responsibility attribution in decision-making processes.

Discussion: The integration of AI into care pathways represents a significant opportunity to improve patient outcomes, but also raises important questions for the patient-centered medicine model. While AI can serve as a valuable decision support tool, it is essential that it be integrated within a collaborative and patient-centered approach to preserve patient autonomy and self-determination. Further research is needed to fully understand the impact of AI on care pathways and develop best practices for its ethical



use, for improving healthcare professionals' training, and integrate AI within the model of patient-centered medicine



End of assisted reproductive technology treatment: lived experience of couples

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Abstract

Introduction: One of the most complex phases of the Medically Assisted Reproduction (MAR) treatment is the end of the treatment. In the MAR context, there is not a clearly defined biological endpoint, and this absence makes the decision to end MAR treatment extremely difficult to make. In accordance with these premises, this contribution aims to investigate the lived experiences of couples ending MAR treatment, focusing on the decision-making process and the decision's meaning.

Methods: The sample involved couples who have completed the MAR treatment. Participants were asked for socio-demographic data by linking to an online questionnaire developed on the Qualtrics platform. The interviews were semi-structured and involved both members of the couple. Content analysis was conducted to identify areas and sub-areas related to the end of MAR treatment.

Results: Two couples were involved in the interviews. The findings provide an illustration of the experience related to the end of treatment. The resulting coding system considers five areas: the MAR pathway and the associated clinical and psychological difficulties; the emotional implications of the end of treatment; the decision-making process leading to the end of treatment; the doctor-patient relationship and communication; and the prospects for the future of the individuals and the couple.

Discussion: Findings explored the phenomenon of the end of MAR treatment and the decision-making process related to it. This contribution highlights the need for participants to give meaning to MAR treatment discontinuation. The end of treatment could occur in clinical and relational contexts that pose complexities in the process of elaborating the end. The general awareness regarding the end of treatment is promising and supports the potential uptake of promoting psychological well-being at this complex phase.



**TOWARDS A PERSONALIZED TREATMENT FOR DISORDERED EATING:
EXPLORING THE ROLE OF INDIVIDUAL DIFFERENCES**

Proposer

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Discussant

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Abstract

In recent years, there has been a significant increase in disordered eating, highlighting the need for effective intervention programs. The heterogeneous nature of these disorders, characterized by varying patterns of problematic food intake and symptom presentations, poses challenges for achieving satisfactory management of this symptomatology. Therefore, building upon these assumptions, gaining a deeper understanding of which personal dimensions may modulate the severity of this condition may help clinicians in developing targeted interventions based on the personal needs of the individual.

Based on these assumptions, the present symposium seeks to identify personal variables implicated in the severity of disordered eating in different populations. We propose calling upon clinicians and researchers to develop insights into this complex phenomenon and to stimulate reflection on how to develop sound clinical interventions to foster a healthy body-related image. This session will also aim to fill practical and theoretical gaps by collecting contributions exploring the management of disordered eating.

In particular, the first speech the undersigned aims to present a work that highlights how some variables, such as self-compassion and internalized weight bias, can have an impact on eating disorders.

In the second work, Drs Muzi and Tavoloni conducted work on Personality organization and symptomatic change in eating disorders.



In the third work, Dr. Silvestri aims to investigate the predictors of post-bariatric outcomes, while in the last work, Prof. Cella will present an app for emotional regulation aimed at preventing obesity in childhood.

The relationship between Trait Emotional Intelligence and Eating Disorders: the mediating role of Self-Compassion and Weight Bias Internalization

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Abstract

Introduction: Trait Emotional Intelligence (EI) is the ability to understand, regulate and communicate one's emotions in an adaptive manner. EI influences the way of managing stressful situations, favoring in the individual the tendency towards self-compassion (SC), which consists of an attitude of kindness, acceptance, and care towards oneself and towards one's failures. SC, precisely because it promotes self-acceptance and is linked to emotional regulation, seems to reduce Weight Bias Internalization (WBI) which consists in the self-attribution of stigmatizing stereotypes relating to one's weight. Research has shown that WBI is associated with unhealthy behaviors, poor psychological well-being, and eating disorders (ED), and it has been hypothesized that it may mediate the relationship between SC and ED. The aim of this study is to examine whether the association between ED and EI is mediated by SC and WBI.

Methods: 534 women aged between 18 and 41 years old ($M = 25.17$; $SD = 5.27$); 292 with clinical diagnosis of EDs and 242 with self-reported unhealthy eating habits were recruited via advertisements on social media platforms and filled an electronic survey.

Results: SEM with latent variables was used to test a model with EI as predictor variable, SC as first mediator, WBI as second mediator and ED as outcome. The model showed good fit indices: $\chi^2(48) = 271.39$, $p < .001$; $CFI = .96$, $RMSEA = .09$ (90% CI = .08 – .10), $SRMR = .05$. Significant paths were found from EI to SC ($\beta = .66$), WBI ($\beta = -.21$) and ED ($\beta = -.11$). Significant paths were found from SC to WBI ($\beta = -.46$) and ED ($\beta = -.16$) and from WBI to ED ($\beta = .53$). We evaluated possible differences using multi-group analyses across the two groups. A constrained model with the paths of the hypothesized model set equal across the two groups, $\chi^2(102) = 321.66$, $p < .001$, $CFI = .96$, was compared to an unconstrained model with all paths allowed to vary across the two groups, $\chi^2(96) = 301.56$, $p < .001$, $CFI = .96$. The fit indices of the unconstrained model significantly differ from the constrained model, indicating structural differences across the two groups, $\Delta\chi^2(6) = 17.74$, $p < .01$, $\Delta CFI < .001$.



Conclusion: Women with EI tend to have higher SC and lower WBI, ED prevention and treatment programs focused on SC should focus more on aspects related to EI and WBI to help women adopt more eating behaviors healthy.



Use of serious games and co-design in the prevention of childhood obesity: ERA, the Emotion Regulation App

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Abstract

Childhood obesity remains a significant challenge for global health, with both short- and long-term biological, psychological, and social implications. Despite the availability of detailed treatment guidelines, the efficacy of actual intervention programs is doubtful, as evidence has shown insufficient progress in relying on dietary treatments as a primary strategy. Technology-based approaches (e.g., smartphone applications) have emerged as valuable tools for facing childhood obesity.

Serious games seem to positively affect obesity-related outcomes (e.g., improvement of weight-related parameters, physical activity, or dietary behaviour and knowledge), as they encourage more active learning to maintain children's adherence to the intervention.

This proposal aims to target childhood obesity by addressing factors contributing to unhealthy eating behaviours, such as difficulties in emotion regulation, through the development of the Emotion Regulation App (ERA).

It is hypothesized that helping children develop adequate emotional regulation could impact positive, healthy behaviours, such as eating attitudes, weight loss, appropriate physical activity, and well-being, fostering emotion regulation capacities, self-efficacy, decision-making skills, and autonomy.

The ERA co-design process involved ten focus groups with four groups of 6-10 y.o. children, facilitated by a licensed psychologist and two research assistants, ensuring comprehensive input and meticulous documentation, with all produced materials photographed and archived for qualitative analysis based on thematic analysis methodology.

Grounded in psychodynamic principles, ERA will be a tablet app featuring narrative and interactive activities. The protagonist, Fiddle, will embark on a galactic journey to reclaim lost and uncontrolled emotions.



Key features of ERA include missions across six planets representing different emotions, educational tasks to enhance emotion recognition, understanding, and management, and various characters, including personified emotions and a galaxy guardian promoting mental metabolism.

This is an interesting way to use new electronic technologies to promote children's self-awareness and well-being. Also, such intervention challenges the face-to-face treatment, supporting interventions in participants' natural environment and overcoming geographical and organizational barriers, such as transportation and missed school days, that impact access and attrition and lead to flexible program access, real-time data collection, and intervention. Furthermore, confirming these hypotheses would deepen our understanding of the underlying constructs and mechanisms involved in developing and maintaining childhood obesity.

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Psychological profiles of patients with severe obesity: An investigation of its outcome predictors pre and post bariatric surgery

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Abstract

Introduction: According to the WHO obesity, is the cause for more than 70% of early deaths all around the world. Obesity is significantly associated with decreased life expectancy of about 5–20 years depending on its severity and presence of other comorbidities. Bariatric surgery is considered the most effective long-term treatment for severe obesity and the only intervention that provides short-term and long-term weight loss and significant improvement of comorbid conditions in people with severe obesity.

Method: This is a naturalistic retrospective study with a follow-up. Potential candidates for bariatric surgery were initially assessed in the University Hospital of Messina and referred to the surgery unit. All patients who underwent these assessments from September 2021 to September 2022 were then called up for another round of assessment almost 1 year after completing the surgery. Out of all the 97 patients contacted, 34 agreed to fill out the questionnaires again online. The following hypotheses were central to the theme of the work: bariatric surgery is an effective intervention for patients suffering from severe obesity and offers substantial weight loss after surgery; considering the prevalence of mood symptoms as a result or concomitant of body-image and/or physical concerns in these patients, following a successful surgery, i.e., substantial loss of weight, mood or other ego-dystonic symptoms decrease in patients.

Results: The findings showed that in the sample with a follow-up, comparisons between pre and post-surgery revealed significant changes in some of the measures such as the BMI (decreased after the intervention) and the BUT_PSDI (increased after the intervention). The established effectiveness of bariatric surgery in reducing BMI after surgery. In the context of the current study, the prediction analysis



revealed that the only variable that could predict the BMI after the surgery was the value of the BMI before the intervention, in line with previous findings, which could explain 44 percent of variations in the BMI values post-surgery. This emphasizes that, at least in the current sample, none of the administered tests, i.e., psychological characteristics were able to explain any variation in the “success of the surgery”, defined as the decrease in BMI in this context. These results should indeed be considered exploratory as the values of BDI after the surgery are on average below a clinical threshold for the diagnosis of depression.

Conclusions: Although the results suggested a mild effect of the bariatric surgery on the psychological profile of patients, the regression analysis yielded some insights about the patients after the surgery, most importantly the independence of pre-intervention BMI values and post-intervention body image complications, emphasizing the role of psychological help to address these issues. More extensive investigations taking advantage of a wide range of psychological and cognitive examinations can potentially provide more insight regarding the treatment outcome and psychological states of the patients undergoing a significant change in their lives.



Personality organization and symptomatic change in eating disorders: A longitudinal study

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Abstract

Introduction: Both clinical and empirical literature has shown that the psychodynamic concept of personality organization, along with its dimensions (identity, defense mechanisms, and reality testing), may be a key predictor of the quality of the therapeutic relationship and therapy outcome. However, to date, studies on clinical samples with eating disorders (EDs) are still scarce. This study aimed at exploring, through a multi-informant and longitudinal perspective, the predictive value of personality organization's dimensions and overall level of personality organization in determining long-term outcomes of a psychodynamic-oriented residential intervention for ED patients.

Methods: At the start of a residential treatment for EDs, a national sample of 91 cisgender female patients with a DSM-5-TR diagnosis of anorexia nervosa and bulimia nervosa was evaluated using the Psychodiagnostic Chart-2 (PDC-2)—a clinician-rated tool derived from the Psychodynamic Diagnostic Manual (PDM-2). Patients were also asked to fulfill self-report questionnaires on eating symptoms (Eating Disorder Inventory, EDI-3) at treatment intake, discharge, 6-month and 12-month follow-up.

Results: Results showed the overall long-term effectiveness of the residential treatment in terms of therapeutic change in ED-specific psychopathology at both 6-month and 12-month follow-up. Further on, even when controlling for DSM-5-TR ED diagnoses, higher levels of identity integration, reality testing, and overall levels of personality organization were found to predict a decrease in ED-specific psychopathology at 12-month follow-up, but not at 6-month follow-up. DSM-5-TR ED categories did not impact on symptomatic change.

Discussion: These findings suggest that personality organization's features may play a central role in ED patients' therapeutic changes, especially in a long-term perspective. Then, personality-based research in this clinical population has the potential to inform effective treatment strategies by targeting relevant individual factors.



CLINICAL FORENSIC PSYCHOLOGY: UPDATES

Proposer

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Discussant

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Abstract

The work of the clinician in the forensic field is becoming increasingly challenging. New perspectives, new scenarios, and new challenges are presenting themselves more and more frequently, and there is a need for scientifically defined and accepted guidance. There is a growing demand for an accurate and scientific forensic evaluation, both in legal and medico-legal areas. This is frequently linked to the request of a psychodiagnostic assessment, which also needs strong and reliability paradigms.

To illustrate new scenarios of applications of the forensic expertise, Monaro and colleagues will present the need to investigate the psychological consequences of digital crimes, in a time where the Metaverse is becoming a new place to perpetrate crimes against digital characters who represent, however, real people. Furthermore, artificial Intelligence, as well as representing the field in which new types of offences develop, can be an important aid in forensic evaluation. Bosco et al. will present a novel version of the Implicit Association Test aimed at evaluating Socially Desirable Responding, defined as the tendency to provide an overly positive self-description, highly detectable in nowadays psychological assessments, starting from the evaluation for personnel selection up to the legal claim for damages. Beyond the conscious and intentional quest to present oneself as more desirable, on the one hand, or more of a victim in order to gain an advantage, some individuals exhibit a tendency to perceive themselves as perpetual victims in their interactions with others. They interpret other actions as intentionally harmful



and react accordingly. Fontanesi and colleagues will present the Italian validation of the Interpersonal Victimhood Scale, demonstrating a link between this specific tendency and dark triad traits and paranoid thinking. Therefore, it can be concluded that psychodiagnostic evaluation is an additional investigative tool that can be used to support forensic evaluation when carried out according to a rigorous scientific method. In the context of the test assessment, Procaccia will present a study using the Criterion Based Content Analysis to evaluate the credibility of child testimonies in cases of sexual abuse, linking it with age and PTSD symptoms.



Tendency for Interpersonal Victimhood Scale: Italian validation and its application in the forensic context.

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Abstract

The Tendency for Interpersonal Victimhood (TIV, Gabay et al., 2020) describes individuals' propensity to perceive themselves as perpetual victims in their interactions. This tendency often manifests as a pattern of interpreting others' actions as intentionally harmful or malicious, leading to feelings of resentment and need of recognition, showing lack of empathy, moral elitism and rumination. Studies showed that TIV is a characteristic personality trait of violent extremists, offenders, incels, vigilantes and bullies, and has a strong relationship with dark triad traits and paranoid thinking. The present study aims to present the validation of the Tendency for Interpersonal Victimhood Scale (TIV-S) in the Italian population and to discuss its potential application in the forensic context.

One thousand, three hundred thirty Italian adults (aged 18-70, $M=32.5$, 56% females) were administered with the Italian version of the TIV-S; the Dark Tetrad short version (DT); the Frustration Discomfort Scale (FDS) and the Ruminative Response Scale (RRS). Exploratory factor analysis was performed to investigate the factor structure of the questionnaire. Cronbach's alfa has been performed to assess internal consistency. Pearson bivariate correlation analysis have been used to assess the relationship between the study variables.

The explorative factors analysis confirmed the 4 factors model of the original version (namely: Need for Recognition-NFR, Lack of Empathy-LF, Moral Elitism-ME and Rumination-R), accounting for the 64% of variance. Internal consistency for the total score is .92 (ranging from .85 to .90 for each factor). Positive significant bivariate correlations have been found between TIV-s total score and each subscale and RRS (in particular, with R $r=.426$, $p<.01$), with DT total score ($r=.375$, $p<.01$) and with FDS ($r=.436$, $p<.01$).

This study contributes to the validation of the Italian version of the TIV-S and it appears to be a suitable tool for research and clinical purposes in the forensic context, both in the evaluation and treatment



settings, due to the high correlations with DT and frustration, typical aspects of violent offenders. Possible applications of the construct in the forensic context will be discussed.



Crimes in Metaverse: new frontiers in forensic psychology and legal challenges.

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Abstract

This work aims to initiate a debate among the community of forensic experts on the new challenges presented by the Metaverse, emphasizing the complexities it introduces to the legal system and forensic psychology practice. Starting with a definition of the Metaverse, the presentation will overview crimes facilitated by this digital environment. Illustrative examples include sexual threats (e.g., the distribution of pornographic materials) and sexual harassment: while the former has long been recognized in the digital domain, the latter has, until now, been predominantly regarded as a crime confined to the physical world. However, the Metaverse ineluctably introduces a change of perspective. Unlike traditional internet environments, it incorporates a heightened sense of presence and embodiment, mirroring real-life experiences more closely and, possibly, amplifying the psychological impact of cybercrimes. In January 2024, the first recorded instance of virtual rape in the Metaverse occurred when a young girl's digital avatar was sexually attacked by a group of adult men in an immersive video game. This marks a pivotal moment, underlining the pressing need to reconceptualize how legal systems address crimes that traverse both physical and digital boundaries. Additionally, it highlights the urgency for forensic psychology to investigate the psychological consequences faced by victims of digital crimes, paving the way for groundbreaking research avenues. This exploration not only broadens the understanding of virtual crimes but also catalyses a crucial dialogue on reshaping legal and psychological approaches to safeguard individuals in an increasingly digitalized world.

Forensic assessment of statement validity in child sexual abuse cases in function of age and PTSD.

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Abstract

Introduction: Children's testimony about experiences of sexual abuse remains the most central factor determining the substantiation of related allegations, but in many cases, evaluators are unable to distinguish between true and false reports of child sexual abuse. One of the most popular tools for assessing the credibility of child witness testimony in sexual offence trials is Criterion Based Content Analysis (CBCA). Some studies have supported the reliability of CBCA in discriminating confirmed from non-confirmed allegations (Roma, Martini, Sabatello, Tatarelli, & Ferracuti, 2011), while others found small differences in the score obtained by the very likely than the doubtful groups (Hershkowitz, 1999). The present study aims to verify the efficacy of CBCA in discriminating through true or false allegation in an Italian sample and to explore age and PTSD impact in CBCA's scoring.

Method: 79 children's allegation of sexual abuse were analyzed through CBCA by two independent judges (inter-judge accord=0,84). Children were aged between 4-16 years old (means age=10,38; SD=3,69), 32 were male and 47 female; 43% were victims of sexual harassment and 57 % of sexual abuse; 58% showed PTSD symptoms; 48 were confirmed and 31 non-confirmed following the judgment in court. T test, correlational analysis and hierarchical regression were conducted. Results: Results suggested that true allegation obtained total score higher than non-confirmed ones, but age and PTSD effect were found. Specifically, older age predicts the global logical structure of the allegation and the attribution of mental states, while younger age predicts the frequency of unusual, superfluous, and misunderstood details. PTSD predicts poorer contextual embedding and doubt about one's allegation, higher frequency of unexpected events and unusual details.

Discussion: Our results suggest using specific accuracy in collecting children's statements that take into account the specificities related to the age and psychological state of the child witness that could impact on their credibility.



Detecting Socially Desirable Responding: New Insights

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Abstract

A key assumption of self-report questionnaires, the most widely used in the field of psychological assessment, is that respondents accurately report relevant information and engage in providing honest answers. Nevertheless, in some evaluation contexts, such as in cases of child custody, weapon eligibility and personnel selection, it is clear that the person being evaluated may benefit from presenting themselves, voluntarily or involuntarily, in a favourable light.

The tendency to provide overly positive self-descriptions is known as socially desirable responding (SDR) and is one of the most pervasive sources of bias in the field of psychological assessment, having enormous social and economic costs, especially in high-stakes evaluative contexts. Nevertheless, despite its impact, the research is quite scarce, and the tools for evaluating it are mainly self-reports, both standalone questionnaires and validity scales embedded in personality questionnaires. Nonetheless, such measures have been questioned for several reasons, including length, outdated formulation, low reliability, and high transparency. Meanwhile, research has shown how certain behavioural indicators, including response time, appear to be very useful in detecting socially desirable response style.

The purpose of the present simulation study was twofold: a) assessing whether a novel variant of the Implicit Association Test (IAT), the SDR-IAT, might be useful and could be used as an indicator to distinguish between honest individuals and those who try to distort their responses; b) updating the current knowledge regarding self-report questionnaires aimed at measuring SDR, evaluating which scales and which items appear to be more accurate in identifying SDR. Participants were recruited and randomly assigned to two experimental groups: in the first group, participants completed some personality questionnaires in a honest manner, and then performed the SDR-IAT; participants of the second group completed a personality questionnaire with the instruction of responding in a SD manner, and then completed the SDR-IAT.

Findings in this exploratory study provide new insights regarding the effectiveness of new methods in assessing SDR, especially useful in high stakes contexts.



THE COMPLEXITY OF BECOMING A PARENT: CURRENT RESEARCH PERSPECTIVES

Proposer

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Discussant

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Abstract

During the journey to parenthood, parents may encounter some problems that, in many cases, affect all areas of the couple's life, the health of the parents and the fetus, and the quality of the future relationship with the child.

Infertility is considered a serious setback for the couple. When faced with an infertility problem, most couples go through a series of emotional changes that can have very negative effects on both the relationship and the partners. Experiences of depression and anxiety are among the most common responses to this condition. Intimate partner violence (IPV) is a public health problem that affects millions of women worldwide. Sexual violence during pregnancy is of particular concern because of the potential adverse effects on maternal and fetal health. Perinatal affective disorders and/or physical illness have a significant impact on parental mental health and are linked to negative outcomes for the parent-fetus relationship.

The purpose of the symposium is to highlight the complexity of prenatal research and intervention.

Four topics have been chosen to discuss current research perspectives in the perinatal period, providing valuable insights for improving parental assessment and intervention in different settings.

In the first contribution, Tacchino and Abate will focus on the narratives of infertile couples to explore emerging themes and their latent dimensions. In the second contribution Paradiso and colleagues will present a systematic review of studies investigating factors associated with IPV during pregnancy. In the third contribution Fontana and colleagues will focus on the interconnections of prenatal maternal



attachment, couple dynamics, and alexithymia with perinatal affective disorders. In the last contribution, Della Vedova and colleagues will present the results of emotional health screening in pregnant women with autoimmune rheumatic diseases.



Reports from the front: a study on Infertility Couples Narratives

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Abstract

Introduction: Infertility rate is constantly increasing, compromising the quality of life of about 15% of couples in reproductive age. Diagnoses occur at the end of an invasive process and treatments have significant emotional, physical, economic, and time costs. Research has highlighted high levels of anxiety, depression and distress in this population. However, these conclusions have been drawn through self-report questionnaires, while in this field narratological instruments are not widespread, dated or not validated. The present research aims to elicit the narratives of infertile couples, to explore their emerging themes and their latent dimensions.

Methods: We recruited 90 participants (45 couples), undergoing ART. We administrated the Infertility History Interview, a semi-structured interview grounded on the Indiana Illness Psychiatric Interview; interviews were audio-recorded and transcribed verbatim. The analysis of the text corpus of the 90 transcripts was performed, using T-Lab Plus, through the thematic analysis of elementary contexts.

Results: Analyses revealed that participants' discourse was polarized around 4 clusters (semantic groups) and 3 factors (latent dimensions). Specifically, clusters have been labeled, through a clinical psychologists and researchers' focus group, as: Family, ART, Coping and Life Cycle. Factors were interpreted as Narration, whose poles were Critical Event and Expected Evolution; Process, between Action and Desire; and Realization, between Emotional Dealing and Familiar Relationships.

Discussion: These preliminary results suggest salient areas of infertile couples' experiences. When discussing the theme of family, they seem to refer to a sense of fulfillment in family relationships, to the dimension of desire, and to an expected evolution. Narratives about ART contain references to the actions that need to be implemented, to a critical event, and to the establishment of new family relationships as the goal of the treatment. When talking about coping, participants refer to the strategies to deal with the emotions stemming from the inability to realize their desire for parenthood. Lastly, in



the discourse about the couple life cycle there is an underlying reference to the expected evolution, to the management of emotions in the construction of the relationship, and to the dyad's before developing the project of a child.



Factors associated with Intimate Partner Violence during Pregnancy: A Systematic Review

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Abstract

Introduction: Intimate Partner Violence (IPV) is a form of violence that women may experience during pregnancy and is linked to negative effects on their own physical and mental health and that of their unborn child. This systematic review aims to examine and systematize studies that investigate factors associated with IPV during pregnancy. *Methods:* The systematic review was conducted following the Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA) statement and was carried out through EBSCO (Databases: APA PsycInfo, CINAHL Complete, Family Studies Abstracts, Gender Studies Database Sociology Source Ultimate, and Violence & Abuse Abstracts). *Results:* Being exposed to IPV during pregnancy is associated with negative maternal outcomes such as postpartum depression, anxiety, post-traumatic stress disorders, obstetric complications, detrimental adult-infant interaction, low social support, and delay in access to health care services. *Discussion:* These findings suggest exploring IPV during pregnancy on a multidimensional level, which may help in the development of interventions aimed at preventing IPV during pregnancy and its consequences.



Screening for perinatal mood difficulties in women with rheumatological disease

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Abstract

Screening for perinatal mental health in women has become routine clinical practice in some countries (eg, England, Australia, Sweden, USA), including in some regions in Italy. Rarely, however, has it been used with women with pre-existing rheumatological conditions. This population could have specific worries concerning their physical illness, as well as more general concerns that can affect all women regardless of any pre-existing physical conditions.

This study therefore reports on findings from routine emotional health screening in women with autoimmune rheumatic diseases being monitored by an Italian public hospital.

A total of 71 women presenting to the public hospital in Brescia (Lombardia) with autoimmune rheumatic diseases consented to participate in the study. Each woman was screened with 2-3 different emotional health measures during their regular clinic visits, both during pregnancy and postpartum.

The measures used included the well-established Edinburgh Depression Scale (to screen for possible depression); the UK and Lombardia recommended Whooley and GAD questions (to screen for possible depression or anxiety), and a more recently validated measure, the MGMQ (to screen for distress). These screening measures differ in that the first two make the assumption that frequency of mood symptoms is directly related to the level of distress an individual experiences, and that this then determines whether she has a need to be assessed further. The MGMQ, however, does not make such assumptions, but



instead directly asks a woman the level of impact of her worries, why she might be feeling this way, and also whether she would like to talk with a health professional about how she is feeling.

To date each of the screening instruments has produced similar rates of screen positive women during pregnancy. This percentage was higher than that expected in the general population, though the screen-positive concordance between the screening instruments was not high. Data will be reported on these measures, which can have useful implications for Italian health services involved with providing support to women (and their partners) with rheumatological diseases during pregnancy or postpartum, and the specific issues such women face during this important life transition.

Interconnections of Maternal Prenatal Attachment, Couple Dynamics, and Alexithymia with Perinatal Affective Disorders: A Network Analysis Perspective

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Abstract

Background: Perinatal affective disorders significantly impact maternal mental health and are linked to adverse outcomes for both mother and child. Effective couple functioning provides crucial emotional support and stress mitigation during pregnancy, which is essential for managing the psychological challenges associated with the perinatal period. Additionally, alexithymia plays a pivotal role in maternal well-being. Notably, low quality of maternal prenatal attachment is associated with perinatal affective difficulties, highlighting the critical influence of maternal mental health on the early emotional bonds between mother and fetus.

Methods: This study employed network analysis on data collected from 382 women during the perinatal period. Key dimensions analyzed included perinatal affective difficulties (PAMA), alexithymia (IAS-20), quality of maternal prenatal attachment (MAAS), and dyadic couple dynamics (DAS). Centrality measures such as betweenness, closeness, and expected influence were calculated to determine the influence of these variables within the network.

Results: Perinatal affective difficulties exhibited high centrality, indicating significant influence across the network. Alexithymia was associated with negative impacts on couple dynamics and prenatal attachment quality. Variables associated with couple dynamics displayed potential buffering effects against the negative impacts of affective disorders. The quality of maternal prenatal attachment emerged as a key moderator in the network, strongly linking to improved maternal emotional states.

Discussion: The findings emphasize the importance of supporting couple dynamics and addressing alexithymia as strategic approaches to managing perinatal affective disorders. Interventions that



strengthen couple relationships, enhance maternal prenatal attachment, and improve emotional awareness are likely to be effective in improving psychological outcomes. These interventions can help build a supportive environment that enhances coping mechanisms during the perinatal period, fostering better maternal and child health outcomes.



**BETWEEN HARMONY AND DISSONANCE: WHICH FACTORS INFLUENCE
CHANGE IN PSYCHODYNAMIC TREATMENT?**

Proposer

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Discussant

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Abstract

The symposium "Between Harmony and Dissonance: Which Factors Influence Change in Psychodynamic Treatment?" explores the critical roles of harmony and dissonance within the context of psychotherapy from multiple perspectives. Four innovative studies collectively examine the emotional, cognitive, and interpersonal processes inherent in psychodynamic treatment settings, shedding light on interactions between therapists and patients while focusing on the complex dynamics that characterize and influence therapeutic relationships and outcomes.

The first study, "Assessing the Attunement in Psychodynamic Music Therapy: A Longitudinal Investigation of Emotional Resonance within the Therapist-Patient Dyad" authored by Chiara Rossi and Osmano Oasi from the Catholic University of Milan, investigates the role of music therapy as a medium for fostering emotional attunement among elderly residents in healthcare facilities. This study specifically underlying mechanisms that facilitate moments of synchrony and harmony within the therapist-patient dyad during treatments based on psychodynamically oriented music therapy.

The second study, "Dynamical System Modeling of Self's Nonlinear Change during Psychotherapy" by Lorenzo Antichi, from the University of Florence, introduces a novel mixed-method approach to understanding the dynamic and self-organizing nature of the Self during psychodynamic psychotherapy. This study applies dynamic system theory to psychotherapy, revealing the complex and nonlinear patterns of change within individuals undergoing treatment.



The third study, "Dissociative States and Experiences of Disconnection in Therapeutic Relationship," proposed by Andrea Scalabrini, Rosy Esposito, and Clara Mucci, from the University of Bergamo, examines the impact of dissociative states and traumatic experiences on the therapeutic dyad. This research highlights how complex PTSD and dissociative phenomena affect both the client and therapist, influencing the therapeutic process and outcomes.

Lastly, the symposium concludes with the study titled "Beyond the Treatment: Dropout from Psychotherapy among Individuals with Personality Disorders" by Francesca De Salve, from the Catholic University of Milan. This systematic review focuses on the predictors of dropout among clients with personality disorders, identifying factors that contribute to dissonance and premature termination of therapy and suggesting interventions to enhance retention and engagement.

By delving into the intricate relationship between harmony, dissonance, and factors that influence changes in psychodynamic treatment, this symposium exposes how these contrasting forces can be artfully balanced to forge deeper connections and catalyze meaningful change. Together, these studies provide valuable insights into the importance of recognizing and harnessing moments of emotional and cognitive resonance within the therapeutic relationship, as well as addressing the disruptions that may impede progress.



Assessing the Attunement in Psychodynamic Music Therapy: A Longitudinal Investigation of Emotional Resonance within the Therapist-Patient Dyad

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Abstract

Introduction: Music therapy, particularly improvisational approaches, catalyzes a dynamic co-creation between the music therapist and the patient, fostering emotional and behavioral attunement. This bidirectional tuning process, mediated through musical elements, allows for nuanced modulation and regulation of the therapeutic relationship. When attunement is successful, it manifests as synchrony in non-verbal behaviors, emotional expressions, and physiological responses, thereby enhancing mutual understanding and intersubjectivity. This study aims to assess the impact of psychodynamic music therapy on emotional attunement and intersubjectivity among elderly patients residing in the healthcare facility R.S.A. Piccolo Cottolengo di Don Orione in Milan.

Methods: A longitudinal mixed-method study has been conducted, analyzing both quantitative and qualitative data. Twenty-five cognitively able patients over 65 years of age (Minimental > 19) participated. The intervention consisted of weekly 30-minute music therapy sessions over one month. A comprehensive psychological test battery was administered at the baseline (T0) and conclusion (T3) of the treatment, encompassing the Minimental State Examination, Barthel Index, and Geriatric Depression Scale.

Facial expressions, along with emotional and intersubjective dimensions, were captured on video and analyzed using FaceReader 4 software. The therapist administered the non-verbal Self-Assessment Manikin questionnaire and a semi-structured clinical interview to investigate psychological well-being effects and participants' perceptions of the intervention. Data were analyzed using the dyad as the unit of analysis and longitudinal model for measuring bidirectional effects on emotions and attunement.

Results: Video analysis revealed clear instances of synchrony and emotional attunement between the therapists and participants, affirming the capacity of music therapy to foster non-verbal communication and connection. The primary emotional dimensions that resonated between dyads included happiness, activation, nostalgia, and sadness. Furthermore, qualitative interviews unveiled participants' personal



narratives and experiences, elucidating the profound impact of music therapy on their emotional and psychological states from their own perspectives.

Discussion: The process of co-creation and attunement in music therapy could lead to stronger therapeutic relationships enhancing intersubjectivity. This study underscores the pivotal role of synchrony and attunement within psychodynamic therapeutic frameworks, suggesting that such methodologies may enhance emotional resonance, intersubjectivity, and therapeutic outcomes.



Dissociative States And Experiences Of Disconnection In Therapeutic Relationship

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Abstract

Introduction: Our work starts from the assumption that a traumatic dimension, together with dissociative phenomena, impacts the life of individuals and determines the subsequent development of one's self. Dissociative states disrupt the usual link between symbolic and subsymbolic communication, which results in a disconnection between higher cortical (symbolic) and lower subcortical (subsymbolic) implicit self-systems. Indeed, the peculiarity of dissociation is mind–body disconnection and can be considered as a disorder of integration between different self-levels. Do dissociative states and experiences of disconnection intervene in therapeutic dyadic relationship and in its-transference-countertransference matrix? This is the focus of our investigation.

Methods: Investigating 60 therapist-patient dyads we will focus on how complex PTSD featured by disorder of self-organization (DSO), as different from merely PTSD symptoms, is mainly characterized by a lack of sense of self-clarity, lack of interoceptive awareness (i.e., mind-body integration) and dissociative functioning.

Results: Therefore, we will show how therapists in dealing with complex forms of trauma might be more prone to experience primitive and negative forms of countertransference and feeling of disconnection, such as mind-wandering, absorption in one's own mental activity and depersonalization, during the therapeutic relationship affected by the dissociative processing of the patient. Moreover, we will also consider the dissociative features of the therapist in the relational process that might manifest in experiences of amnesic discontinuity during the session and between sessions.

Discussion: In conclusion, these data will support the idea that the cumulative and complex trauma fragmenting the self of the patient influence also the therapist's sense of connection at different levels informing the therapeutic relationship.



Dynamical system modeling of Self's nonlinear change during psychotherapy

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Abstract

Introduction: In a novel approach, this pilot single-case study aims to codify a new mixed method to model the nonlinear change of the Self during psychodynamic psychotherapy and evaluate its feasibility. Adopting the dynamic system theory (DST) as a framework, the Self is hypothesized to be a dynamic, self-organized, complex structure composed of interrelated components.

Methods: A psychodynamic psychotherapist recruited a patient. Then, the patient answered three questions in the Narrative Assessment Interview (NAI) about how she described herself, how she perceived others described her, and what she would like to change. The content analysis of the transcribed audio-recorded interview has extracted two idiographic ad-hoc items. Then, she downloaded the SEMA3 app to respond weekly to the Self Questionnaire composed of 11 items loading on two scales: Self-Satisfaction (SS) and Self-Knowledge and Regulation (SKR). Time series analysis (TSA) has been performed to plot the SS, SKR, and the two ad-hoc items, depicting their phase diagrams, detecting significant trends, estimating autoregressive processes, and assessing stationarity. Dynamical modeling reconstructed each phase space and the whole Self-system. In addition, recurrence quantification analysis (RQA) and approximative entropy (ApEn) calculation were performed to detect each series' recursiveness and determinism. Cross RQA and cointegration have been used to investigate the causality between the series.

Results: The mixed method highlighted the Self's dynamics of the patient. However, completing a questionnaire every week can be expensive, increasing the likelihood of missing data or dropping out. TSA showed that the Self is an autoregressive process. SS and SKR were not stationary. Furthermore, the ApEn level was low, while RQA showed a high level of determinism in each series and a low level of divergence. In addition, cross-RQA and cointegration unveiled that SS and SKR influenced each other over time.

Discussion: This study showed that the Self can be framed as a dynamic system that resists the perturbations of therapy by trying to return to its equilibrium point. Future studies should compare individual dynamics to highlight whether Self-Systems show similar changes.



Beyond the Treatment: Dropout from Psychotherapy among Individuals with Personality Disorders. A Systematic Review

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Abstract

Introduction: Dropout in psychotherapy is a widely examined phenomenon due to its significant impact on mental health treatment. Research explores diverse factors contributing to dropout, including client characteristics, therapist dynamics, and treatment-related aspects. Dropout rates in psychotherapy are notably linked to type of personality disorder diagnoses, therapeutic alliance levels, and symptomatology. Understanding and mitigating dropout is essential for optimizing treatment efficacy and enhancing mental health care delivery. For this reason, this systematic review aims to identify predictive variables influencing psychotherapy dropout among individuals with personality disorders.

Methods: Electronic databases (PsycINFO, PubMed, Scopus, Cochrane Central Register of Controlled Trials, APA Psycarticles) were queried for articles concerning personality disorder patients who dropped out of cognitive-behavioral, psychodynamic, or systemic psychotherapies.

Out of 108 articles potentially eligible after applying inclusion criteria and conducting quality evaluation, 34 were included in the review. The search targeted studies examining personality disorder patients who discontinued cognitive-behavioral, psychodynamic, or systemic psychotherapies. Inclusion criteria encompassed English peer-reviewed articles published between 2013 and 2024, investigating predictors of dropout in individuals with personality disorders. Studies utilizing DSM-5/ICD-11 criteria or structured personality assessments were eligible. Non-English, non-peer-reviewed, or studies not addressing dropout or personality disorders were excluded. Article screening was conducted using Rayyan, ensuring blinded review. The review protocol adhered to PRISMA guidelines and was registered on PROSPERO (CRD42024509283).

Results: Individuals with personality disorders exhibit heightened dropout likelihood when presenting childhood trauma history, rigid perfectionism, suspiciousness, emotional dysregulation, somatic anxiousness, compulsive symptoms, and avoidant behaviors. Specific personality disorder types and comorbidities (alcohol/substance abuse, anorexia nervosa, anxiety, depressive disorders) elevate dropout risk, notably BPD, NPD, and histrionic personality disorder. Lower dropout rates correlate with strong



therapeutic alliance, positive relationships, and treatment motivation. Protective factors include metacognition, mindfulness, and reflective functioning.

Discussion: Tailoring interventions based on these predictors can enhance treatment engagement and reduce premature termination among individuals with personality disorders. Integrating protective factors like mentalization, metacognition, and mindfulness may further mitigate dropout rates and emphasize the value of personalized and cost-effective approaches to therapy in public contexts.



THE DIGITAL PERSON: PSYCHOLOGICAL AND SEXOLOGICAL HEALTH IN THE DIGITAL ERA

Proposer

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Discussant

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Abstract

The problematic use of internet regards many aspects of human behavior and it plays a role in the development and maintenance of psychopathological conditions. In many cases the problematic use of internet can be considered a risk factor for psychiatric conditions in an era where the image of self on social networks is representative of own personality. Among these conditions there is cyberbullying. It represents an important example of online aggressive behavior which is more and more involving young victims and perpetrators. This is related to two main factors: firstly, the amount of online hate material is rapidly increasing, and the risk for young people to be exposed to hateful online material is increasing; secondly, young people are becoming one of the preferred target for online recruitment by organized hate groups and individuals. The results of a survey, of one of our presentations, conducted on a sample of young help-seekers on online hate behavior and clinical and personality correlates will be presented.

Moreover, the relationship between use or misuse of internet and personality influences the sexual behavior. In this regard, online dating modulates the expression of sexuality and mating strategies. For the use of dating app will be presented the results on the relationship between hypersexuality and depression in the dating app users, with a further focus on the interplay of dating app usage, coping strategies, and depression.

Finally, a metanalysis presentation will be focused on a comprehensive picture of the use of metaverse as a tool for sexuality, and of the possible benefits of such technologies for people with disabilities.



Impact of Maladaptive Coping Strategies on Depression: The Moderating Role of Dating Apps Use

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Abstract

Maladaptive coping, such as avoidant behaviours, are negative strategies to handle stress and adverse life events. Recent literature has increasingly recognized the potential for these strategies to exacerbate mental health issues, notably depression. The global surge in depression, described as the leading cause of disability worldwide by the World Health Organization, has prompted investigations into various contributing factors, including technology use. Dating apps (DAs), which have revolutionized the way people initiate and terminate relationships, are recently studied to determine their psychological impacts. While they offer unprecedented access to social connections, studies suggest a complex relationship with mental health. Some studies showed the presence of feelings of validation and increased self-esteem, while other reported experiences of decline in mental well-being, with stress, anxiety, and depression symptoms.

Thus, the present study aims to investigate the interplay of dating app usage, coping strategies, and depression.

The study sample, composed by 1114 males and 1468 females (age = 32.7 ± 11.26 years), was divided in two groups, according to self-reporting usage of DAs: Users (N=751, 29.1%) and non-users (N=1831, 70.9%). Study measures were the Patient Health Questionnaire for Depression and the Brief-COPE Inventory for coping strategies. A moderation analysis with maladaptive coping as predictor, use of DAs as moderator and depression as dependent variable demonstrated a significant positive association between maladaptive coping strategies and depressive symptoms ($\beta=0.363$, $p<.001$), which was moderated by DAs use ($\beta_{\text{interaction}}=0.118$, $p = .004$). The model accounted for 15.49% of the variance in depression scores ($R^2 = .1549$), with a significant overall fit ($F(3, 2578) = 157.6$, $p < .001$).

For what concern the moderation effect, maladaptive coping strategies appear to be associated with higher levels of depression, and this effect is moderated by DA use. While DAs users presented slightly lower depression scores at lower levels of avoidant coping, they experienced a significant increase in



depression as maladaptive coping strategies rise, compared to non-users. The interaction effect is statistically significant and practically suggests that interventions aimed at reducing maladaptive coping might be especially beneficial for DAs users in terms of their impact on depression.



Metaverse and sexual health: which are the advantages and which the risks for people with disabilities? A narrative review

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Abstract

Metaverse is the implementation of an Internet-based hypothetical meta-universe, which should facilitate an immersive experience in meeting people, working, shopping and other leisure activities. Immersive reality makes it possible to feel involved in a virtual environment using the mechanism of the “embodied simulations”, i.e., the capacity to evoke a sense of presence in a specific reality, whether real or imagined. The growing interest in the metaverse suggests exploring how this new kind of communicative space could be used to provide and guarantee sexual entertainment and/or education for people with disabilities. Through a thematic analysis, we aimed to define the theoretical framework and analyze scientific literature on this subject. Our purpose is to provide a comprehensive picture of the use of metaverse as a tool for sexuality, and of the possible benefits of such technologies for people with disabilities. To this end, we have also discussed a major topic, related to the Sexual Assistants, examining how their possible application can be implemented within the context of augmented reality. Our study further explores the importance of the metaverse in sexual education. Finally, we addressed the issue of cyber security as well as possible threats and negative consequences linked to metaverse misuse.



**Online hate, traumatic life events, personality profiles, clinical and psychological dimensions:
a study conducted on a sample of young people help-seekers**

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Abstract

Introduction: In addition to cyberbullying, cyberhate represents an important example of online aggressive behaviour which is more and more involving young victims and perpetrators for two main factors: firstly, the risk for young people to be exposed to the hateful online material is increasing; secondly, young people are becoming one of the preferred targets for online recruitment by organized hate groups. Young people are particularly vulnerable to cyber-aggression, not only because of the time spent online but also because most of them have fewer psychological resources than the majority of adults to cope with cyber-aggression.

The present observational study aims to evaluate 1) cyberhate behaviors in a sample of young people help seekers and 2) their relationship with personality profiles, and clinical and psychological dimensions.

Methods: Young people seeking help from the services for young users and young general population were provided with a QR-Code. The QR-Code allowed access to a digitalized assessment battery, including questions about previous traumatic events, attitudes, and online behaviours. Psychopathological symptoms, dispositional empathy, and maladaptive personality traits were also investigated (Symptom Checklist-90, Interpersonal Reactivity Index, and Dark Triad Dirty Dozen).

Results: To date, from preliminary data analysis, 66 young subjects (73% women; 27% men; mean age: 21.7 years) participated in this study. Mental health specialists assist 33% of the sample. No statistically significant differences between clinical and no clinical population for cyberhate behaviors were found. The 22.7% of the sample reported at least one traumatic life event, including bullying (26.7%); lifetime traumatic events significantly correlated with cyberhate behaviours acted ($\chi^2= 10.25$; $p= 0.001$) and suffered ($\chi^2=7.719$; $p= 0.005$). Subjects who engage in hateful behaviours reported higher levels of anxious symptoms and aggression, while subjects who suffer it reported paranoid ideation and psychoticism. No significant differences in terms of personality and empathy were found.



Discussion: The preliminary results of the present study suggest that individuals who engage in cyberhate behaviors can present lifetime trauma according to the social neuroscience model that emphasizes the role of previous traumatic events on the development of mental suffering or dysfunctional behaviors.



Exploring an emerging type of violence: Unraveling the traumatic impact of Cyber Dating Abuse through the mediating role of Emotion Dysregulation

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Abstract

Introduction: Cyber Dating Abuse (CDA) entails the distressing experience of a partner employing controlling and harassing behaviors via modern technology. It encompasses a range of abusive actions in digital interactions, such as routine monitoring of the partner or ex-partner on social media, sending offensive comments, issuing threats through messages, sharing humiliating or harmful content aimed at the partner, and unauthorized access to the partner's passwords for spying. Emerging literature suggests a link between this form of violence and post-traumatic stress disorder (PTSD), although research in this area remains limited. Additionally, while emotion dysregulation has been identified as mediating the relationship between face-to-face Intimate Partner Violence and PTSD, research investigating this connection in the context of CDA is lacking. Therefore, this study aims to explore the relationship between CDA and PTSD, considering the mediating role of emotion dysregulation. *Methods:* A cross-sectional study involving 329 participants was conducted, with participants completing several questionnaires through the Qualtrics Platform. *Results:* The results confirmed that emotion dysregulation acts as a mediator between CDA and PTSD. This study highlights the prevalence of Cyber Dating Abuse (CDA) and its detrimental impact on victims, including trauma and emotional dysregulation. *Discussion:* The findings emphasize a significant association between CDA and PTSD, with emotion dysregulation playing a mediating role. Clinical interventions should prioritize addressing both CDA and emotion regulation to alleviate PTSD symptoms in affected individuals.



**EXPLORING THE PSYCHOSOCIAL IMPLICATIONS OF ILLNESS: FROM ONCOLOGY
TO PSYCHOSOMATICS ACROSS DIFFERENT LIFE STAGES**

Proposer

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Discussant

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Abstract

Facing illnesses is a challenging task throughout life. This symposium considers two broad categories that can be seen as polar opposites: from oncological diseases to psychosomatic illnesses, to observe their psychosocial implications. It is crucial to study the psychological functioning of children, adolescents, adults, and parents coping with illnesses, to develop a differentiated approach for each. The symposium aims to explore potential protective and risk factors linked to psychological symptoms, focusing on specific psychological constructs such as internalizing symptoms, emotional regulation, body image, and parental burnout, which may be central for each disease.

Oncohematological diseases have a detrimental effect on the mental well-being of both pediatric and adult patients, as well as their caregivers. The existing literature extensively covers this topic, examining not only the patients but also their caregivers due to the familial nature of the disease. Psychosomatic illness is characterized by symptoms that may not be fully clarified from a medical point of view. While considerable research has been directed towards adolescents' internalizing symptoms, family functioning, and dynamics, the emotional functioning of adolescents and their parents has received less attention.

The first three studies in this symposium aim to investigate the psychological correlates of oncological illness across different life stages. The first one explores the use of coping strategies by pediatric patients with diabetes and cancer, examining potential associations with anxiety levels in both children and their mothers. The second research focuses on parents of children with cancer, attempting to identify



dimensions of parental burnout and their possible associations with the parental role. The third work investigates the impact of body image on various psychological dimensions of women with breast cancer who have undergone surgery. The last study, study will explore emotional functioning in a group of adolescents with psychosomatic disorders and their mothers, examining constructs of reflective functioning, emotional regulation, and awareness in relation to increasing the risk of psychosomatic disorders.

Understanding the psychological, emotional, and behavioral factors that help children and adult patients adjust to illness can provide crucial insights to improve the effectiveness of psychological assessments and interventions in healthcare.



Examining coping strategies and their relation with anxiety: implications for children diagnosed with cancer or type 1 diabetes and their caregivers

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Abstract

Introduction: The onset of chronic illnesses during childhood presents a challenging circumstance for both pediatric patients and their caregivers. Within this context, coping strategies assume a critical role in navigating the various stressors associated with the illness. While extensive research has delved into the coping mechanisms employed by parents of children with chronic conditions, there exists a notable gap in understanding the coping strategies utilized by children themselves and their potential correlation with their and their parents' anxiety levels. This study aims to explore the coping strategies employed by pediatric patients diagnosed with cancer and type 1 diabetes (T1D), as well as their respective caregivers, and to examine potential associations with anxiety levels, in comparison to a control group comprising healthy children and caregivers.

Methods: A total of 61 control children, 33 children with cancer, and 56 children with T1D, aged 7 to 15 years, were recruited alongside their mothers. Each participant completed an ad hoc survey and standardized questionnaires.

Results: The analysis revealed no significant discrepancies in coping strategies utilized by children across the various groups. All children reported lower adoption of distraction and support-seeking strategies compared to the other coping mechanisms. However, upon investigating the relationship between coping strategies and anxiety, distinctive patterns of interaction emerged between children's coping mechanisms and both their own anxiety levels and those of their mothers. Among others, within the group of children diagnosed with cancer, distraction strategies were found to have an immunizing effect on their anxiety.



In the same group, greater adoption of problem-focused or avoidant coping by the children was linked to greater levels of anxiety in their caregivers.

Discussion: This study underscores the significance of adopting an illness-specific approach to gain deeper insights into this domain and to develop targeted interventions aimed at enhancing the psychological well-being of these vulnerable populations.



Parental burnout and psychological well-being in parents of pediatric patients under treatment for oncohematological diseases

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Abstract

Introduction: Parental burnout is a corollary of different symptoms such as global exhaustion of the role of parent, emotional detachment from children and loss of self-perception as a good parent. Parental chronic oppressive stress affects parental psychological health. This study aims to: identify the possible dimensions of Parental Burnout in parents of children with cancer and the possible associations with parental role; screen their dysfunctional psychological symptoms.

Methods: Sample consisted of 119 parents, including 79 mothers and 40 fathers recruited at the Pediatric Onco-Hematology Clinic, University of Padua. The average age was 40.5 years (SD = 7.15; range 22-54) and they mostly were married or cohabitants (80.3%). They filled in questionnaires on their Parental Burnout and a socio-demographic questionnaire. Some of them (N=76) filled in also GAD7 and CESD to screen their psychological well-being.

Results: A Varimax factor analysis found that the best model explained 58.2% of the variance with four identified factors: Emotional Distancing (Var: 26.71; N=4, $\alpha=0.6$), Parental Overload (Var: 17.31; N=6; $\alpha=0.80$), Parental Ineffectiveness (Var: 8.08; N=6, $\alpha=.075$) and Personal Derealization (Var: 6.79; N=5 $\alpha=0.86$). The significance of the t-test for independent samples ($t_{117}=3.28$, $p<.05$) highlighted higher average scores for mothers (Mean = 2.59; SD=0.82) than for fathers (Mean = 2.07; SD=0.64) exclusively regarding to Parental Overload. Paired t-tests on parental couple differences ($t_{23}=-1.86$, $p<.05$) showed that fathers reported higher scores in Personal Derealization (Mean=1.84; SD=0.49) than their partners (Mean=1.62; SD=0.46). Significant levels of depression were reached by 38% of the parents, anxiety by 46%. An independent samples t-test ($t_{74}=2.88$; $p=0.03$) found that mothers reported significantly higher depression symptoms (Mean = 16.80; SD=7.93) than fathers (Mean = 12.25; SD=5.45).

Discussion: Anxiety and depression symptoms were more evident in parents of children with cancer. Mothers developed higher level of depression and were more occupied in caring of children than fathers;



this attitude could have effects on a lower perception of available resources, with an increase of parental overload. On the other hand, fathers were more concerned about their potential personal derealization. Preventive support programs should be set up basing on these results.

Exploring emotional functioning in adolescents and their mothers: implications for pediatric psychosomatic disorders

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Abstract

Psychosomatic symptoms are defined as clinical manifestations that may or may not be explained by a medical condition. Between twenty and thirty-five percent of children and adolescents experience psychosomatic symptoms. Literature highlights a poorly defined etiology. While much research has focused on the role of adolescents' internalizing symptoms, family functioning, and dynamics, less attention has been given to the emotional functioning of adolescents and their parents. This pilot study aims to bridge this gap by investigating the role of specific parental and adolescent variables, including reflective functioning, emotional regulation, and awareness in increasing the risk of having psychosomatic disorders. These were assessed through self and informant reports in a clinical group (CG) consisting of 36 mothers (mean age = 47.21; SD = 5.80) and adolescents (69.4% female; mean age = 12.94; SD = 0.86) with psychosomatic disorders, hospitalized in two different Italian hospitals, and in a healthy control group (HG) comprising 36 mothers (mean age = 44.78; SD = 4.06) and adolescents (52.8% female; mean age = 13; SD = 1.69) recruited from the general population and randomly selected from a larger database. The results of Mann-Whitney analysis showed that adolescents of the CG reported higher scores of internalizing symptoms (CBCL-Int) ($U = 264.50$; $p < .001$) and lower scores of reflective functioning (RFQ-Y) ($U = 517.02$; $p < .001$) than HG. Mothers of CG referred lower scores of parental reflective functioning (PRF) than mothers of HG. Two different logistic regression models were separately conducted for adolescents' and mothers' features. These analyses showed that higher CBCL Somatic Symptoms ($OR = 1.63$; 95% CI = 1.17 – 2.26; $\beta = .486$; $p < .01$) and lower RFQ ($OR = .330$; 95% CI = 129 – 845; $\beta = -1.11$; $p < .01$) scores in adolescents increase the risk of psychosomatic disorders. Regarding maternal dimensions, greater uncertainty about the children's mental states (PRF-CM) ($OR = .445$; 95%



CI = 262 – .756; $\beta = -0.81$; $p < .01$), it seems to elevate the odds ratio of being part of the CG. These findings emphasize the need to assess not just symptoms, parenting, and family dynamics but also the reflective functioning of both adolescents and their mothers. This approach aids in understanding disorder vulnerabilities and designing more tailored preventive interventions.



The influence of body image before and after surgery in women with breast cancer

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Abstract

Introduction: Breast cancer is the most common neoplasm worldwide occurring predominantly in the female population and is one of the leading causes of cancer death in women. Surgeries can cause different psychophysical effects and can affect the body image of women with breast cancer in different ways, contributing to the development of a negative self-perception. In this regard, it becomes very important to study the impact of body image on the different psychological dimensions of patients.

Methods: N=72 women undergoing breast cancer surgery were assessed at a preoperative screening (T1) with the Body Uneasiness Test (BUT) and after surgery (T2) with the Symptom Checklist-90 Revised (SCL-90-R), re-administering the BUT. Spearman's correlation was used to investigate the relationship between age, preoperative body perception and postoperative psychological symptoms and body image change. To predict post-surgical psychological symptomatology, two separate multiple regression models were used to assess preoperative body image and its change after surgery, controlling for covariates (i.e., education; type of surgery).

Results: Anxiety in relation to body perception scores emerged as the most frequently experienced psychological symptomatology after surgery. Body avoidance before the intervention was significantly associated with the psychological symptoms of somatisation, anxiety, depression and hostility after the intervention (SOM β =.453, p =.0001; DEP β =.507, p =.0001; AX β =.459, p =.0001; HOS β =.410, p =.0001). In contrast, between the pre- and post-intervention periods, it was increased weight phobia that was statistically associated with higher levels of the four psychological symptoms considered (somatisation, anxiety, depression and hostility) at T2

Conclusions: The present work highlights that higher levels of body avoidance and weight phobia were significantly associated with the primary psychological dimensions assessed. These findings become important from a bio-psycho-social perspective in which interventions can be structured to be



individualised on the basis of the person and possible risk or protective factors of women with breast cancer.



**DEFENSE MECHANISMS, PERSONALITY, AND MENTAL HEALTH: RESEARCH
ADVANCE AND CLINICAL IMPLICATIONS**

Proposer

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Discussant

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Abstract

The concept of defense mechanisms defines automatic psychological mechanisms that mediate the individual's reaction to emotional conflicts and to internal or external stressors (Perry, 2014; Lingiardi & Madeddu, 2023). In recent years defense mechanisms have been also integrated into the broader concept of emotional regulation as an essential aspect of adaptation (Braunstein, et al., 2017; Di Giuseppe & Lingiardi, 2023; Rice & Hoffman, 2014).

In this symposium we will discuss the role of defense mechanisms in physical and mental illness, supporting the need of a deeper understanding of defensive functioning in a broader range of clinical conditions.

In the first presentation, Dr. Orlando Silvestro will examine defense mechanisms in patient with inflammatory bowel diseases. He will show results of a systematic review analyzing the impact of psychological factors that affect mental health and quality of life of patients with IBDs, underling the role of defense mechanisms.

In the second presentation, Dr. Flavia Fiorentino will describe results of a systematic review and meta-analysis examining defense mechanisms in individuals with depressive disorders. She will address the limited generalizability of studies on defense mechanisms in depression by comparing depressive individuals with non-clinical controls and examining changes throughout psychological interventions.

In the third presentation, Dr. Gabriele Lo Buglio will show the network structure of defense mechanisms assessed in a large sample of individuals with severe symptoms of depression and anxiety, with particular



attention to the most central defenses (i.e., nodes) and relevant connections (i.e., edges) supporting the conceptualization of defense mechanisms as a complex system.

In the last presentation, Prof. Fabio Madeddu will offers a theoretical discussion on the use of fantasy as a defense mechanism, investigating the role of fantasy in relation to both narcissistic and schizoid functioning. Preliminary empirical data from a nonclinical sample will be also used to investigate the link between maladaptive personality traits and different measures of fantasy.

In conclusion, we will debate on the relevance of assessing defensive vulnerability in clinical practice in order to target effective personalized psychological interventions.



Defensive functioning in individuals with depressive disorders: A systematic review and meta-analysis

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Abstract

Introduction: This systematic review and meta-analysis aimed to address the limited generalizability of studies on defense mechanisms in depression by comparing depressive individuals with non-clinical controls (aim a) and examining changes throughout psychological interventions (aim b) (PROSPERO CRD42023442620).

Methods: Following PRISMA 2020 guidelines, we searched PubMed/Web of Science/(EBSCO)PsycINFO until 13/04/2023 for studies assessing defense mechanisms with measures based on the hierarchical model in patients with depressive disorders compared to non-clinical controls or throughout psychological intervention. We examined mature defenses/non-mature (neurotic/immature) defenses/overall defensive functioning (ODF) conducting random-effect meta-analyses with standardized mean difference (SMD) as the outcome measure metric. We also performed meta-regression/sub-group/sensitivity analyses. Study quality was appraised using the Newcastle-Ottawa Scale (NOS) and GRADE (Grading of Recommendations, Assessment, Development and Evaluations) was employed to assess the certainty of evidence for aim b outcomes.

Results: 18 studies were included (mean NOS score = 5.56). Our findings show that depressive individuals used significantly more non-mature defenses than non-clinical controls (SMD = 0.74; k = 13) while non-clinical controls did not significantly differ in the use of mature defenses compared to depressive patients (SMD = 0.33; k = 14). Significant moderators included publication year/NOS score/geographical distribution/mean age for non-mature defenses, and NOS score/geographical distribution for mature defenses. Finally, only ODF showed a significant increase throughout psychological interventions (SMD = 0.55; k = 2) (GRADE=very low).



Discussion: Individuals with depressive disorders show a high use of non-mature defenses that could be assessed and targeted in psychological interventions, especially in younger patients. However, the quality of many studies was medium/sub-optimal, and longitudinal studies were scarce, underscoring the need for further research.



The use of fantasy as a defense mechanism: Comparing narcissistic and schizoid phenomena

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Abstract

Withdrawal into fantasy can be a way to avoid conflicts and difficulties in real life and, as such, can represent a defense mechanism, which is traditionally traced back to schizoid/autistic phenomena. At the same time, fantasies of power, success, and ideal love are included among the criteria for Narcissistic Personality Disorder and represent a central feature of narcissistic pathology when assessed dimensionally. Clinically, grandiose fantasies are believed to compensate for deeper feelings of inadequacy and vulnerability, indicating that they may as well serve defensive purposes. To date, similarities and differences between autistic/schizoid and grandiose fantasies fall short of theoretical coordinates and have not been investigated empirically, nor has the relative role of schizoid and narcissistic traits been addressed in these defenses. The present contribution offers a theoretical discussion on the topic, investigating the role of fantasy in relation to both narcissistic and schizoid functioning. Preliminary empirical data from a nonclinical sample will be also used to investigate the link between maladaptive personality traits and different measures of fantasy. The assessment of fantasy in daily life with an intensive longitudinal design will allow detecting both trait-level and state-level dynamic processes. A specific focus will be on the relative contribution of narcissistic (both grandiose and vulnerable) and schizoid traits in the prediction of fantasy, and on the possibility to empirically discriminate between autistic/schizoid fantasy and fantasies with an explicitly grandiose content. Clinical and research implications will be discussed.



Defense mechanisms and inflammatory bowel diseases: a narrative review

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Abstract

Introduction: The inflammatory bowel diseases (IBDs) represent a group of chronic, non-infectious, relapsing disorders of the gastrointestinal tract of unknown aetiology, driven by an inappropriate immune response in genetically susceptible hosts. Mainly, IBDs include Crohn's disease (CD) and ulcerative colitis (UC). IBDs affect more than 6.8 million people worldwide, representing a serious medical, psychological and social burden. Valuable research highlighted that psychological factors may impact onset, course and maintenance of IBDs. Defense mechanisms reflect unconscious operations which protect the Self from acknowledging feelings and thoughts due to internal conflicts and external stressors. The purpose of this narrative review was to investigate the impact of defense mechanisms in patients suffering from IBDs.

Methods: In line with PRISMA guidelines, a systematic search was conducted to select studies considering defense mechanisms in patients with IBDs. Inclusion criteria were English language, diagnosis of CD or UC and use of validate instruments to assess defense mechanisms. We conducted a narrative synthesis to analyse the influence of defense mechanisms in IBDs.

Results: six studies were eligible, comprising 664 patients. Immature defense mechanisms were commonly used by patients with IBDs, affecting psychological and physical health. Particularly, patients with IBDs in active phase of disease reported more use of autistic fantasy. Patients with CD showed higher tendency to use immature defense, such as lack of recognition of the threat, consumption, pseudo-altruism and turning against objects style than patients with UC. Significant associations emerged among defense mechanisms, perceived Health-related Quality of Life and psychological distress.

Discussion: This narrative review represents an interesting attempt to study the influence of defense mechanisms in the management of IBDs. Our results suggest that immature defense mechanisms may negatively impact the management of IBDs, leading to low HR-QoL and increasing risk of



psychopathological distress. For these reasons an integrated approach based on defense mechanisms evaluation may support adequate treatment and psychological wellbeing in patients with IBDs.



Defense mechanisms in individuals with depressive and anxiety symptoms: A network analysis

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Abstract

Introduction: Defense mechanisms are crucial in understanding depression and anxiety. However, the interplay among defenses in individuals with depressive and anxiety symptoms is understudied. This study aimed at estimating the network structure of defense mechanisms in people with depressive and anxiety symptoms, focusing on identifying most central defenses (nodes) and significant connections (edges).

Methods: Using the Symptom Checklist-90, we enrolled 655 participants experiencing depressive and anxiety symptoms during the first wave of the COVID-2019 Pandemic in Italy. Defense mechanisms were evaluated using the DMRS-SR-30, from which a network structure was derived. *Results:* The results revealed a main component consisting of 16 defense mechanisms. Self-assertion emerged as the most central node, connected positively and negatively with mature and immature defenses, respectively. Among the immature defenses, passive aggression showed the highest connectivity. Some mature defenses, such as humor, affiliation, and sublimation, were not connected to other nodes. Acting out was isolated, with its only significant edge being a positive connection to help-rejecting complaining.

Conclusion: This study pioneers the conceptualization of defense mechanisms as a complex network and suggests that not all mechanisms within the same cluster (e.g., mature defenses) serve equivalent functions. Central defenses like self-assertion and passive aggression could be valuable focal points for therapeutic interventions.



**THE COMPLEX INTERPLAY OF PROLONGED GRIEF AND DEPRESSION: TOWARD
A COMPREHENSIVE PERSPECTIVE**

Proposer

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Discussant

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Abstract

The death of a loved one, while a common normal experience, is nonetheless an upsetting and disruptive experience. Some bereaved reported symptoms of a chronic grief reaction called prolonged grief (PG), even though the inconsistency of the reported prevalence across the studies stood out. Among those who reported symptoms of PG, more than half also experienced depression, even though more research is still needed. Since Freud's seminal work "Mourning and melancholia", indeed, the complex interplay between grief and depression has received a lot of attention in the literature. This symposium will focus on the contribution of clinical and dynamic psychology in its understanding across various settings. The first presentation (Franceschini et al.) will dwell on the prevalence and correlates of PG disorder symptoms severity in a large sample of Italian adults. The second contribution (Sideli et al.) will focus on the experience of prolonged/traumatic grief among different causes of death as well as the preliminary results of the Italian validation of the TGI-SR +. The third contribution (Marchetti) will investigate the multifaceted dynamics of depression among a large cohort of adolescents. The fourth presentation (Lai et al.) will present the results of a systematic review of prognostic awareness in cancer patients as well as its relationships with depression and anticipatory grief.



Adolescent depression and complexity: An overview of network analysis studies

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Abstract

Introduction: Adolescence represents a developmental period of elevated susceptibility to depression, especially first episodes that frequently recur later in life. Rates of depression surge 6-fold from mid-adolescence (age 15) to early adulthood (age 18), after which prevalence rates level out and stabilize across adulthood. Yet, it is essential to recognize that depression, with its multifaceted nature, defies simple categorization. This complexity extends to both the disorder itself and the numerous factors contributing to its emergence, such as vulnerability factors. Therefore, this overview aims to highlight the innovative potential of a multivariate approach, specifically network analysis, in unraveling and comprehending the intricate dynamics of depression among adolescents.

Methods: In the initial two studies, large cohorts of adolescents ($n = 1409$ and $n = 1059$, respectively) underwent assessments utilizing established metrics to gauge depressive symptoms. These data were then subjected to Pairwise Markov Random Field analysis. The aim was to probe the internal configuration of depressive manifestations within the adolescent demographic. Subsequently, the third study tracked a cohort of approximately 470 adolescents over a 9-month period. Throughout this duration, participants provided data pertaining to key cognitive risk factors associated with depression, as outlined in prominent theories on depressive vulnerability. Employing structural network analysis, researchers delved into the cross-theoretical integration of these risk factors, exploring their longitudinal dynamics and stability over time.

Results: In the first two studies, self-hatred/worthlessness, loneliness, sadness, and pessimism were the most central symptoms across two large, independent samples. Central symptoms were also predictive of low life satisfaction. In the subsequent investigation, the third study, a noteworthy synergy across various theoretical frameworks was observed, with negative automatic thoughts assuming a central position. Additionally, robust indications of temporal stability were uncovered, further underscoring the enduring influence of these cognitive patterns over time.

Discussion: In conclusion, this series of studies showed that adolescent depression is a complex, multi-level phenomenon, which requires statistically and theoretically complex models for its understanding.



To be aware or not to be aware of the prognosis in the terminal stage of cancer? A systematic review of the associations between prognostic awareness with depression, anxiety, and quality of life

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Abstract

Introduction: Prognostic awareness plays an important role at different stages of cancer, as it psychologically influences how the patient and his or her family cope with the illness. In fact, studies in the literature have shown discordant results regarding the impact of prognostic awareness on depression, anxiety, and quality of life. In this regard, the present systematic review aimed to investigate the associations between prognostic awareness and depression, anxiety, and quality of life in cancer patients, differentiating between studies that recruiting patients at an early stage of disease, studies that recruiting patients at an advanced stage, and studies that recruiting patients in the terminal phase of life.

Methods: The systematic review was registered on PROSPERO and adheres to the PRISMA guidelines. The literature search was conducted on PubMed, PsycInfo, PsycArticles, and Web of Science and identified 38.931 studies, of which, following the criteria for inclusion, 49 were included.

Results: The main result showed that associations between prognostic awareness and depression, anxiety and quality of life varied according to cancer stage. There were very few favourable associations between the variables in studies with early stage and advanced stage patients (0% and 11%, respectively), while there were more than half as many in studies that analysed these variables in a sample of end-stage cancer patients (53%). Specifically, in end-stage cancer the associations seemed to be favourable when patients were in hospice care, had a median survival time of less than 60 days, and a median age greater than 65 years.

Discussion: These results suggest that psychological interventions for patients should consider the impact that prognostic awareness might have at different stages of cancer, considering the great significance that these variables might have not only on the patient's depression, anxiety, and quality of life, but also on the entire family of the terminally ill patient.



Prevalence and correlates of prolonged grief disorder symptom severity among Italian adults

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Abstract

Introduction: In 2022, Prolonged Grief Disorder (PGD) was added to the Diagnostic and Statistical Manual of Mental Disorders, fifth edition, text revision (DSM-5-TR). Empirical research indicated that it affects about 10 percent of the bereaved, even though there is still a lack of study in the Italian context. This study sought to investigate the prevalence and correlates of Prolonged Grief Disorder (PGD) symptom severity in a large sample of Italian adults.

Method: A sample of 1,603 bereaved (62.1% females, mean age = 29.39 ± 13.27 years) completed self-reported data on PGD, suicidal ideation, depression, anxiety, and stress. Descriptive characteristics and bereavement-related information were also collected.

Results: Among participants who lost a close person for at least 12 months, the frequency of potential PGD and severe suicidal ideation within the sample was 7.7% (n = 104) and 0.7% (n = 9), respectively. The PGD diagnosis was distinct from depression (phi = 0.25), anxiety (phi = 0.19), and stress (phi = 0.26). The severity of grief symptoms was related to older age, female gender, lower educational background, a shorter time since loss, being the main caregiver, and more suicidal ideation. Grief severity also varied by kinship, cause of death, and place of residence. Bereaved who lost a grandparent for old age living in a small or medium city scored lower.

Conclusion: Our findings indicate that PGD occurs among a significant minority of Italian people who are bereaved and represents a distinct diagnosis. Some demographic and loss-related characteristics of the bereaved seem to increase the risk of onset of the disorder. These findings may be useful for preventing and treating PGD.

**Prolonged grief, post-traumatic stress, and depression in response to adult bereavement:
preliminary data on the Italian TGI-SR+**

*Lucia Sideli¹, Gaia Cuzzocrea¹, Cristiana Caneglias¹, Lina Rita Crimi¹, Ilaria Attinà¹, Chiara Cozzolino¹,
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Abstract

Introduction: The Traumatic Grief Inventory-Self Report plus (TGI-SR+) is a 22-item self-report instrument developed by Boelen et al. (Lenferink et al., 2021) to assess PGD in community samples. This presentation aims to present the Italian validation of the TGI-SR + and to discuss the experience of prolonged/ traumatic loss across different populations.

Methods: A first convenience general population sample (n =308, 88% female) was used to assess the psychometric properties of the Italian TGI-SR+. Internal reliability and validity were tested using Cronbach's alpha and Confirmative Factor Analysis (CFA). Convergent validity with measures of depression, anxiety, and stress was also tested. A second convenience sample of caregivers of patients who died of cancer disease (n = 83, 69% female) was used to investigate risk and protective factors for Prolonged Grief Disorder.

Results: Internal validity of the Italian TGI-SR+ was tested and compared using different unidimensional and bidimensional models for DSM-5-TR and for ICD-11 PGD criteria. The results showed a better fit for the unidimensional models. The TGI-SR+ showed moderate correlations with measures of depression, anxiety and stress symptoms, as well as with attachment insecurity. Female, widowed, unemployed, and individuals who lost their loved ones for unnatural causes reported more severe PGD symptoms, than individuals who lost their loved ones because of natural causes, including oncological diseases.

Discussion: The findings suggest that the Italian TGI-SR+ is a reliable and valid measure to improve the assessment of prolonged grief disorders. Preliminary analyses also underline the role of psychological and social factors in shaping the risk for PGD.



Friday, 13th September 2024

THEMATIC SESSION

**“NEW EVIDENCE ON GAMING, INTERNET AND
SMARTPHONE USE”**

Chair:

Daniela Marchetti

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



A multiple indicators multiple causes (MIMIC) model approach to investigate predictors of problematic gaming, smartphone and internet use

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Abstract

Introduction: Problematic Internet use (PIU) is a pathological form of normal modern behaviors whose worldwide occurrence is increasing over time, and that has been consistently linked to functional and psychological impairments. Scholars have previously distinguished between a general behavioral pattern of smartphone/internet overuse (i.e., general PIU) from a problematic engagement in a particular type of internet/electronic activity, such as gaming (i.e., specific PIU). To date, the potential correlates of PIU are still under-investigated, especially while considering three specific modern behaviors (i.e., problematic gaming, smartphone, and internet use) at the same time.

Methods: The study sample was composed of 1191 Italian young adults, aged 23.25 ± 3.07 years, 44.4% of whom was female. All participants were at least casual gamers (i.e., they played at least few times per year with mobile, PC or console games), and filled out a battery of questionnaires investigating problematic gaming (IGDS9-SF), smartphone (SAS-SV) and internet use (GPIUS2), and several potential risk and protective factors (i.e., psychological distress, emotion dysregulation, dissociative tendencies, attachment insecurity, social support, basic psychological needs' satisfaction, loneliness, and self-esteem). We tested for the potential predictors of generalized and specific PIU -as indexed through a latent factor composed by the IGDS9-SF, SAS-SV and GPIUS2 total scores- with a multiple indicators multiple causes (MIMIC) model.

Results: The observed variables of generalized and specific PIU had medium-to-large factorial weights with the latent factor, which was named "problematic internet use". Analyses evidenced that greater emotion dysregulation, loneliness, dissociative tendencies, and psychological distress significantly predicted PIU, with small to medium effects. The independent variables explained up to 35.6% of the variance in the latent factor.

Discussion: Our findings suggest that individuals may engage in generalized and specific PIU behaviours as a dysfunctional coping strategy to escape from negative emotions, real-life worries and feelings of loneliness.



Mental health practitioners and welfare services should target these factors while planning preventive strategies and providing treatments to problematic internet users.



Social media use, orthorexia, alexithymia and perfectionism: an observational study

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Abstract

Introduction: Orthorexia is defined as a fixation on healthy nutrition, potentially accompanied by psychological, physical, and social impairments. This condition is often associated with significant dietary restrictions, medical conditions related to malnutrition, emotional instability, and social isolation. 16.5% of Internet users aged 16-64 years consider Instagram to be their most beloved platform, and it is important to better understand the effects that social media use can have on mental well-being. In the present study, we analyzed the links between social media use, particularly Instagram, symptoms of orthorexia nervosa, perfectionism, and alexithymia.

Method: We conducted an online survey of social media users (N=84) and assessed their social media use, symptoms of orthorexia nervosa using the TOS and I-DOS questionnaires, levels of alexithymia through the TAS-20 questionnaire, and perfectionism through the MPS questionnaire, which assesses three dimensions: Self-Directed Perfectionism (MPSSO), Socially Prescribed Perfectionism (MPSSP), Hetero-Directed Perfectionism (MPSOO).

Results: In our observational study, we found a statistically significant finding about positive correlations between age and the two orthorexia scales (OrNe $p=0.005$ and I-DOS $p=0.004$), negative correlations between age and self-directed perfectionism ($p=0.038$), and time spent on social. In addition, negative correlations are shown between BMI and gender ($p=0.034$) and between BMI and self-directed perfectionism ($p=0.046$). BMI correlates positively with the OrNe scale ($p=0.032$). Both scales related to orthorexia (OrNe and I-DOS) correlate positively with the social scale of perfectionism (MPSSP) and the total scale of the TAS-20. Positive correlations are also found between the perfectionism subscales (MPSSO and MPSSP) and alexithymia.

Conclusion: These findings may also have clinical implications for the development and recovery of eating disorders.



Obsessive-compulsive symptoms and Fear of Missing Out as pathways from Alexithymia to Problematic Social Media Use: Findings in a large community sample

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Abstract

Introduction: Much research has demonstrated a relationship between alexithymia (AL) and obsessive-compulsive symptoms (OS). The difficulty in identifying and regulating one's emotions may foster a poor ability to represent one's emotions, increase the tendency to concentrate on certain thoughts and facilitate the emission of compulsive behaviors. Furthermore, it seems that Fear of Missing Out (FOMO) pushes people with OCD to spend more time on social media, encouraging problematic use (PUS). For this reason, the purpose of this study is to verify the association between AL, OS, FOMO, and PUS.

Method: A total of 1116 participants, aged between 18 and 30 ($M = 23.14$, $SD = 3.32$), completed a protocol including the Toronto Alexithymia Scale-20, Fear of Missing Out scale, Bergen Social Media Addiction Scale, and Symptom Checklist-90 (Obsession-Compulsion subscale).

Results: Structural equation modeling (SEM) with latent variables was employed to test a model with AL as the predictor, OS and FOMO as mediators, and PUS as the outcome. Acceptable fit indices were found: $\chi^2(48) = 330.49$; $p < .001$, $CFI = .95$, $RMSEA = .07$ (90% CI = .07 – .08), $SRMR = .04$. Significant paths were found from AL to OS ($\beta = .71$; $p < .001$), FOMO ($\beta = .38$; $p < .001$), and PUS ($\beta = .13$; $p < .001$), and from OS to FOMO ($\beta = .78$; $p < .001$) and PUS ($\beta = .20$; $p < .001$), as well as from FOMO to PUS ($\beta = .48$; $p < .001$). Indirect associations were found from AL to FOMO and PUS via OS, and from AL and OS to PUS via FOMO.

Conclusions: This study suggests that targeting the antecedents of FOMO and OS may help foster a healthy use of social media.



Dissociation in gaming: Exploring the role of the avatar through an experimental design

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Abstract

Numerous articles have explored the connection between gaming and dissociation as a clinical manifestation, but experimental studies confirming this link are still lacking. Although certain types of games, such as Massively Multiplayer Online Role-Playing games (MMORPGs), are more strongly associated with dissociative escape strategies, no study has ever directly compared the dissociative effects of a game involving the presence of an avatar to those of a game without an avatar. This study aims to fill this gap. 87 participants (48.3%men, $M_{age} = 27.6 \pm 0.71$ years) were randomly divided into two separate groups: one to play a game involving the avatar stimulus (G1) and the other to play a game without avatars (G2). Dissociation was measured using a state measure both before and after exposure to 25 minutes of gameplay.

In accordance with the literature, in both groups, post-game state dissociation levels increase ($F_{(1,85)} = 0.2, p = .87, \eta^2 = .15$). However, contrary to the initial hypothesis, which predicted that the state dissociation of those assigned to G1 would increase more than the state dissociation of those assigned to G2, no significant differences were found between the avatar and non-avatar groups in terms of increased dissociation. These results indicate that the dissociative potential of games is not influenced by the presence of avatar stimuli. Rather, it is more likely that the extended engagement in the game itself, which shifts the player's attention from their physical body to the virtual environment, is responsible for the observed increase in state dissociation. Additionally, analysis of differences between in-life players and non-players revealed that participants who are players exhibited less sensitivity to game exposure (there is less increase in post-test state dissociation), indicating a possible tolerance phenomenon ($F_{(1,85)} = 9.14, p = .003; \eta^2 = .097$). In conclusion, while dissociation is confirmed as an important factor in understanding gaming behaviors, the presence of avatar stimuli does not appear to have a significant impact on dissociative effects. It's worth noting that the study only used a non-clinical sample, and further research is required with clinical samples and longer gaming sessions. The bond between players and their avatars, which is stronger in problematic players, may indeed be relevant to this investigation.



Problematic social media use and gaming behavior in adolescence: a comparison

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Abstract

Adolescents' use of social media and gaming platforms has become increasingly common in recent years. Even when these behaviors stem from a desire to form and maintain social relationships and to have fun, their excessive engagement can lead to Social Media Addiction (SMA) and Internet Gaming Disorder (IGD). Both conditions are characterized by a persistent desire for engagement, negative symptoms when usage is disrupted, and a loss of control over one's behavior. The specific patterns through which psychological distress impact these behavioral addictions are still being studied.

This study aims to investigate the different role of individual factors in predicting SMA and IGD. A total of 330 adolescents (123 M) aged 16-19 were administered the Bergen Social Media Addiction Scale (BSMAS), the Internet Gaming Disorder Scale-Short Form (IGDS-SF), the Depression Anxiety Stress Scale, the UCLA Loneliness Scale, and the Short Almost Perfect Scale.

Participants were categorized as recreational or dysfunctional social media and internet gaming users based on cut-off scores obtained from the BSMAS and IGDS-SF. To investigate significant differences in means among the study variables between recreational and dysfunctional groups, two t-tests for independent samples were conducted.

Results showed that about 30% of participants were classified as dysfunctional SM users, most of them women, and 4,5% as dysfunctional gamers, with a majority being men. Interestingly, only 3% of the sample fell into both dysfunctional groups. Furthermore, both problematic SM users and gamers reported higher levels of depression and loneliness compared to their corresponding recreational groups. Finally, dysfunctional gamers showed lower standards of functional perfectionism compared to recreational gamers, while dysfunctional SM users reported higher levels of maladaptive perfectionism than recreational ones. Only dysfunctional SM users reported higher levels of anxiety and stress.

In summary, our study showed that depression and loneliness are significant risk factors for both SMA and IGD, while functional and dysfunctional perfectionism differently predict the two addictions in adolescence.



**The relationship between use of social media and risk of eating disorders among adolescents:
the role of social support and social anxiety about one's appearance**

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Abstract

Introduction: There is an alarming relationship between the use of social media and dysfunctional eating behavior, as well as the development of problems related to the perception of one's body image. These behaviors also seem to be exacerbated by online social comparison. For this reason, research has been interested in exploring the impact that social networks have especially on adolescents, as this population group is particularly exposed to risks. Currently, studies in the literature focus particularly on the negative outcomes of social network use, without considering the motivations that drive young adolescents to use them. Therefore, the present study aims to investigate the relationship between social media use and eating disorders by analyzing the factors underlying this relationship. Psychological variables such as social support, emotional intelligence, and social anxiety about one's appearance are examined. In addition, social media use is not analyzed quantitatively but qualitatively.

Methods: An online data collection was conducted and is still ongoing. The current sample includes 388 subjects (n=192 females; n=191 males; n=3 no binary; n=2 other). The instruments used are the Eating Attitude Test (EAT-26), Body Esteem Scale (BES), Social Appearance Anxiety Scale (SAAS), Motivation for use Social Media (MUSM), Multidimensional Scale of Perceived Social Support (MSPSS), Trait Emotional Intelligence Questionnaire – Adolescent Short Form (TEIQue-ASF). Statistical analyses were performed using SPSS (version 25.0) for Windows.

Results: Preliminary results show a positive correlation between the risk of dysfunctional eating behavior and social anxiety about one's appearance. In addition, a positive correlation emerges with scales of the MUSM: the use of social networks for being connected with others, gaining popularity, and improving one's appearance. Concerning perceived social support, there is a negative relationship between both the risk of eating behavior and appearance-related social use. Regarding trait emotional intelligence there is a positive correlation between body esteem scale and perceived social support, while there is a negative correlation between the risk of dysfunctional eating behavior and social anxiety about one's appearance. Furthermore, there is a negative correlation



between the scales of the MUSM. Self-evaluation and thus esteem for one's appearance have a positive relationship with social support and a negative relationship with social anxiety about appearance.

Discussion: Preliminary results, therefore, show that it is not only the use of social networks that aggravates dysfunctional eating behavior and anxiety about one's appearance, but also the absence of social support.



Problematic Use of New Technologies in Adolescents: Preliminary Data from a Preventive Intervention Focused on Mobile Phone Use

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Abstract

Introduction: The widespread use of technology is now an essential part of daily life. Mobile phones are central to various online activities like accessing the Internet, playing games, trading, gambling, and shopping. Excessive smartphone and uncontrolled use can lead to addiction, especially among young people. Technology addiction is characterized by excessive and compulsive use of devices, poorly controlled preoccupations, urges, or related behaviors that cause impairment and distress. Despite the risks associated with the use of new technologies, preventive interventions for adolescents are lacking. The present study aimed to develop and evaluate a preventive intervention by using the metacognitive model applied to addictive behaviors as theoretical frame, and the conceptual change model as educational approach. The overall goal was to reduce problematic use of smartphone.

Methods: To evaluate changes in problematic use of smartphone as a function of the intervention, an experimental design was defined with two randomized groups (Training vs. No Training) and two measurements (pre-test and post-test sessions). The intervention activities include 5 sessions, developed based on an integrated work between health workers of the National Health Drugs Service and University researchers. The Italian version of the Mobile Phone Problem Use Scale (MPPUS-10) was administered as a pre- and post-measure to assess the hypothesized change on problematic use of smartphone.

Results: A pilot study was conducted with 18 high school students (15 males, Mage = 16.36; SD = 1.09). Preliminary analyses indicated that there was a decrease in problematic smartphone use from before (M = 24.5, SD = 9.59) to after (M = 18.33, SD = 7.11) the intervention activities ($t = 2.88, p = .015$, Cohen's $d = .83$). Other 120 high school students will be involved in the experimental research project.

Discussion: Preliminary data suggest encouraging results regarding the usefulness of interventions based on the metacognitive model and the conceptual change model in reducing problematic smartphone use among adolescents.



The role of PID-5 Brief Form personality domains in predicting sexting behaviors in a sample of Italian emerging adults

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Abstract

Introduction: sexting refers to a behavior characterized by the exchange of sexually explicit contents, also called “sexts” (such as videos, pictures, and text messages), via smartphone or Internet. Particularly prevalent in adolescents and young adults, sexting can occur in different forms such as normal behavior to risky and aggressive behavior. Recent studies have investigated the role of individual personality traits as predictors of different kinds of sexting. However, few studies have explored pathological personality traits on the different kinds of sexting in emerging adulthood. *Aim:* the main goal of this study was to investigate in a sample of Italian emerging adults the extent to which the five personality trait domains measured with the PID-5 Brief Form (Negative Affectivity, Detachment, Antagonism, Disinhibition and Psychoticism) predict, controlling for age and sex, different kinds of sexting behaviors: aggravated sexting (sharing sexts of someone else without permission; sexting under pressure), risky sexting (sexting during substance use and with strangers; sexting for emotion regulation). *Methods:* The sample included 876 Italian young adults (69.1% females) aged 18 to 29 years ($M_{age}=23.8$; $SD_{age}=2.56$) recruited through snowball sampling and who have completed an online survey. Participants were asked to complete the Personality Inventory for Diagnostic and Statistical Manual of Mental Disorders–5 Brief Form (PID-5-BF) and the Sexting Behaviors Questionnaire (SBQ). *Results:* Poisson regression analyses showed that the two forms of aggravated sexting (i.e., sharing sexts without permission, sexting under pressure) were positively predicted by Detachment (OR=1.08, $p=.002$; OR=1.06, $p=.03$), Antagonism (OR=1.08, $p=.002$; OR=1.12, $p<.001$) and Disinhibition (OR=1.08, $p=.002$; OR=1.10, $p=.001$). Risky sexting during substance uses and with strangers was negatively predicted by Negative Affectivity (OR=0.94, $p=.03$) and positively predicted by Antagonism (OR=1.09, $p=.004$) and Disinhibition (OR=1.12, $p<.001$). Risky sexting for emotion regulation was positively predicted by Antagonism (OR=1.09, $p=.003$), Disinhibition (OR=1.09, $p=.002$) and age (OR=1.01, $p=.03$). *Discussion:* This work provides a broader understanding about the association between personality domains and sexting, showing that only some



PID-5 personality trait domains predicted different sexting behaviors. These results have implications for further research and the implementation of preventive interventions targeting young adults.



Friday, Day 13th September 2024

THEMATIC SESSION

**“RESEARCH AND INTERVENTION IN HEALTHCARE
SETTINGS”**

Chair:

Piero Porcelli

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



Promoting engagement and self-care in prevention: the meanings that mediate participation in oncological screenings

Maria Luisa Martino¹, Daniela Lemmo¹, Marcella Bianchi¹, Anna Rosa Donizzetti¹, Daniela Caso¹

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Abstract

Strating from the effectiveness of cancer screening in providing timely diagnoses and early treatments, citizen participation still remains very low, particularly in Southern Italy. The present study aims to explore the meanings that mediate the relationship between the subject and active participation in oncological screening - mammography, cervical and colorectal - in the context of public health. A semi-structured narrative interview was constructed ad hoc. 101 audio-recorded interviews were collected, conducted with users who participate in oncological screening at the public services (ASL) of the Campania Region: 61.39% users of mammographic screening, 23.76% users of cervical screening, 14.85% users of colorectal screening.

The interviews were transcribed verbatim and analyzed with a quali-quantitative methodology throught the TLab software. A cluster analysis and multiple correspondence analysis were conducted. The results show 5 thematic clusters: The sensorial and emotional cost of prevention; Prevention as a cure for the hereditary risk of death; The individual's internal demand for health; The times and places of prevention; The concreteness of prevention. The multiple correspondence analysis highlights two factors: From the risk of cancer diagnosis To preventive measures and From external healthcare To internal self-care setting.

The results of the present study, connected to the meanings that orient and organize the subjects who participate in oncological screenings, shed light on how to construct better strategies for promoting well-being aimed at supporting the subjective motivation for a demand for care of one's health and engagement in cancer prevention practices provided by the public health service.



Active, Disengaged, and Dysregulated Patterns of Coping Strategies: Impact on Workers' Psychopathological Risk in the Healthcare Setting

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Abstract

Introduction: In the last decades, there has been a growing concern about the need to promote psychological well-being among healthcare professionals, with tailored attention being given to nursing professionals. They are indeed increasingly pressured to achieve gold standards of care with fewer resources. Understanding the ways nurses deal with the growing stress and demands in their daily work life and its impact on their psychological health conditions is thus crucial. Therefore, based on the Demands Resources and Individual Effects Model (DRIVE)-Nursing Version, the present study has a twofold objective: 1. to identify specific patterns of coping strategies (Problem-Focused; Seek-Advice; Self-Blame; Wishful-Thinking; Escape/Avoidance) adopted by nurses to deal with perceived stress; 2. to explore potential differences in psychopathological symptoms (Anxiety, Phobic-Anxiety, Obsessive-Compulsive, Somatization, Depression, Interpersonal-Sensitivity, Hostility, Psychoticism, Paranoid-Ideation) according to the emerged patterns.

Methods: Overall, 265 nurses completed the Ways of Coping Checklist-Revised and the Symptom Checklist-90-Revised. Non-hierarchical k-means cluster analysis was employed to derive patterns of coping. MANOVAs (for means/standard deviations) and Cross-tabulations/Chi-Square analyses (for frequencies/percentages of nurses reporting clinically relevant levels of symptoms) were used to test differences in psychopathological profiles according to the emerged patterns.

Results: Three stable patterns of coping were identified and labelled as Active-Solution-Oriented, Passive-Disengaged, and Dysregulated-Emotion-focused. Nurses belonging to Dysregulated-Emotion-focused group emerged to be at noteworthy higher risk for psychopathological suffering (e.g., 48.8% reported clinically relevant levels of Psychoticism, 41.4% of Somatization and Interpersonal Sensitivity, 37.9% of Paranoid Ideation, 29.3% of Depression and Obsessive-Compulsive symptoms) – followed by nurses



belonging to Passive-Disengaged group (e.g., 17.2% reported clinically relevant levels of Paranoid Ideation, 15.6% of Anxiety and Somatization, 14.8% of Interpersonal Sensitivity) – in comparison with nurses belonging to Active-Solution-Oriented group (e.g., 9.4% reported clinically relevant levels of Paranoid Ideation, 8.2% of Depression, 7.1% of Somatization).

Discussion: Tailored interventions should be offered routinely to the nursing professionals - and to the whole healthcare staff - and should aim at preventing the escalation of psychological suffering by fostering workers' awareness of their latent coping patterns, as well as by supporting active approaches and emotional regulation strategies for stress management.



Communicating adverse events in surgery: a preliminary analysis of the state of the art

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Abstract

Introduction: Adverse events (AE) can have serious physical and psychological consequences for the patient and their families, especially in the surgical setting. High-quality healthcare in the medical setting not only means limit the occurrence of AE but also to transparently disclose them when they do happen.

In this study, we aimed to synthesize the existing literature on how AE are communicated in surgery. The focus was on the frequency and quality of error disclosure, as well as the connections to the safety culture within the healthcare institution and the well-being of the workers involved, both professionally and personally.

Methods: A systematic search of four electronic databases (PubMed, PsycINFO, CINAHL and Web of Science) was performed. Additional sources, such as grey literature, were screened and weekly search alerts were set up. All methodological steps were conducted by two independent reviewers, with a third reviewer to adjudicate.

Results: Of the 2672 retrieved records, 119 full-texts studies were evaluated and 18 articles focusing explicitly on disclosure of surgical AE were included.

The studies included emphasize that the disclosure process is crucial in defining the potential psychological consequences of errors or AE on healthcare providers and the system as a whole. The process of disclosing errors and AE has a psychological impact at several levels, influencing professional



and personal well-being of the healthcare worker. Disclosure processes depend on different factors, such as years of work experience, feelings of solidarity among colleagues and between juniors and seniors professionals, as well as the presence of effective reporting mechanisms.

Discussion: Communication of AE contributes to a good patient-physician alliance and to the well-being of patients and their families as well as of the surgical staff. Finally, it positively impacts on the safety culture in healthcare institutions.

Our results show that the awareness of the medical equipe about the importance of the disclosure process of AE is increasing but a lack of uniformity in the reporting process, necessitating enhancements has become evident. We call for training programs to improve surgical staff's verbal and non-verbal interaction with patients in critical clinical situations and standardized disclosure processes that help to establish a transparent safety culture.



Cognitive training in physical rehabilitation: effects of consolidation of cognitive skills on the outcome of the intervention

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Abstract

Introduction: In the field of post-traumatic physical rehabilitation, increasing attention has been given to the study of learning processes to understand whether their manipulation can influence the progress and speed of patients' recovery. There appears to be a bidirectional relationship between cognitive skills and physical activity; cognitive skills, especially in terms of executive functions, could influence engagement in physical activity and general tendency toward a healthier lifestyle.

Moreover, cognitive skills could influence motor learning abilities, for example some studies found a significant association between episodic memory and attention and motor learning faculties, emphasizing greater rapidity in the movement acquisition phase.

In addition, implementing cognitive skills could have a beneficial effect on the recovery of physical performance through the effect on other important psychological domains, such as self-esteem, self-efficacy and motivation, which would increase treatment adherence.

Given this background, the proposed research project aims to evaluate what kind of relationship exists between enhancement of cognitive skills and outcome of physical rehabilitation.

Methods: The sample, consisting of patient undergoing a physical rehabilitation program at Universo Salute Opera Don Uva, completed a series of self-report questionnaires (WHOQOL-BREF, physical well-being scale of WHOQOL) and are assessed for cognitive ability (RBANS, FAB). Then, patients are assigned by randomized procedure to the experimental group, which does cognitive training with physical rehabilitation, or to the control group, which does only physical rehabilitation. Assessments are repeated at T0, T1, and 3-month follow-up.

Results: Considering the high use of cognitive training in clinical practice, in patients who have carried out the training sessions it is expected that cognitive skills will be found to be implemented compared the



baseline. In addition, it is expected that a strengthening of cognitive skills can have a positive impact on the physical rehabilitation. Preliminary results are presented.

Discussions: If results will show more satisfactory recovery following the intervention of physical rehabilitation combined with cognitive training, we might ask what moderators operate in this relationship and what applications it might have in clinical practice.

Comparison of psychological treatment outcomes between oncological and non-oncological patients in hospital FPG settings

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Abstract

Introduction: Clinical psychology interventions-related outcome assessment in hospital settings aims to establish care and treatment needs. The CORE (Clinical Outcome For Routine Evaluation) system is a tool series assessing psychological outcomes. In particular, CORE-OM (Outcomes Measure) is a 34-item questionnaire investigating various domains, i.e., Well-being, Problems, Functioning, and Risk. Each statement is rated on a 5-point Likert scale ranging from 0 (Not at all) to 4 (Most or all the time). The tool showed satisfactory reliability and convergent validity in factor analyses.

Methods: Data regard the administration of CORE-OM to 636 patients who were hospitalised at the Gemelli Hospital of the Fondazione Policlinico Agostino Gemelli IRCCS. The sample was divided in two groups, i.e., non-oncological and oncological from different oncology departments. We investigated possible differences in their response to psychological intervention provided in the hospital during 1-3 months for a total of eight sessions.

Results: All 636 patients (mean age 35 years with a maximum of 65) were administered the CORE-OM while hospitalised. Of these, those 417 with breast cancer scored at baseline 10.97 (mild severity), and 9.1 after the 8th psychological treatment session (mild, non-clinical); 23 gynaecological oncology patients scored 21.4 (moderate-to-severe) and 14.8 after 8 encounters (mild); 33 patients hospitalised for cancer



at general medical departments scored 15.62 at baseline (moderate) and 8.78 after the 8th session (mild, non-clinical). The non-oncological sample of 105 patients with irritable bowel disease, Crohn's or ulcerative colitis scored 14.26 at baseline (mild) and 7.48 after the 8th session (mild, non-clinical). Between-groups differences were not significant.

Discussion: Despite lack of significant differences between oncological and non-oncological patients, the subgroup with breast cancer was the resistant to improvement after eight psychotherapy sessions. The CORE-OM showed high internal consistency and validity.



Association between cognitive functioning and microbiota-gut-brain axis mediators

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Abstract

Increasing evidence links the gut microbiota (GM) to cognitive impairment (CI) and suggests that its manipulation may provide a potential avenue to enhance cognition. To date, most of the information on the effect of GM on cognition is derived from animal studies and points to a modulatory effect of bacteria via circulating mediators belonging to the microbiota-gut-brain axis (MGBA). Therefore, we aim to evaluate the association between cognitive functioning and GM, MGBA mediators and amyloid cascade markers in cognitively unimpaired subjects (CU), patients with CI due to AD (CI-AD) and not due to AD (CI-NAD). The study included 34 CI-AD (mean age=70.8±6.0), 38 CI-NAD (mean age=69.8±7.4), and 13 CU (mean age=69.6±7.0). Cognitive performance was assessed using validated neuropsychological tests, and global z scores were computed for memory, visuo-constructional, executive, and language domains. Faecal GM composition was inferred using 16S rRNA gene sequencing and QIIME 2. A panel of MGBA mediators in the blood was assessed, including bacterial products (i.e., lipopolysaccharide, LPS), cell adhesion molecules indicative of endothelial dysfunction, vascular change (i.e., P-Selectin), infection response, and inflammatory cytokines. We compared cognitive domains between CU, CI-NAD and CI-AD groups using ANOVA and tested the association of cognitive domains with genera, MGB mediators, and amyloid cascade markers using Spearman's Rank Correlation.



The CI-NAD and CI-AD groups scored lower than the CU group in all cognitive domains ($p < 0.017$). Cognitive domains were associated with GM, endothelial dysfunction, inflammation and infection response in both groups ($\rho > 0.313$, $p < 0.038$) and with amyloid cascade markers only in the CI-AD group ($\rho > 0.332$, $p < 0.028$). Better memory performance was related to lower abundance of *Dialister* for CI-AD ($\rho = -0.411$, $p = 0.008$) and *Bifibacterium*, *[Eubacterium]_coprostanoligenes_group* and *Collinsella* for CI-NAD ($\rho > 0.425$, $p = 0.004$). Higher scores in the visuo-constructional domain were associated with lower levels of LPS only in CI-AD ($\rho = -0.436$, $p = 0.011$), and higher scores in the executive and language domains were associated with lower levels of P-Selectin only in CI-NAD ($\rho > 0.467$, $p < 0.005$). These findings confirm that MGBA alterations may mediate the association between gut dysbiosis and cognitive impairment, suggesting distinct underlying mechanisms according to the presence/absence of AD pathology.



**Vicarious Post-Traumatic Growth in health care professionals working in oncological settings:
a qualitative research**

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Abstract

Introduction: Over the past two decades, scientific research has systematically investigated the profound positive changes that can result from facing with traumatic or highly challenging events, calling this process Post-traumatic Growth. Professionals working in health care and illness settings are repeatedly exposed to highly distressing and disturbing material, but a limited amount of research in this population has focused on the positive changes resulting from exposure to secondary traumatic stress, i.e., Vicarious Post-Traumatic Growth (VPTG). This study aims to explore VPTG in health care workers working in illness settings.

Methods: An online questionnaire was completed by 35 health care workers (nurses, physicians, psychologists, physiotherapists) narrating their experience of growth related to exposure to suffering and illness during their work. Data were analysed implementing the Thematic Analysis as theorized by Braun & Clarke.

Results: Three themes emerged from collected narratives: 1) The growth path, which was consistent with the domains of Post-Traumatic Growth described in the literature and included a) Relating with others, b) New life perspective, c) Life appreciation, d) Spiritual/religious growth, and e) Personal strength. Additionally; 2) Barriers and Facilitator, inherent to the identification by caregivers of different elements that can facilitate or hinder the process of VPTG; 3) feeling closed with the power of suffering people, highlighting the impact of relationships with patients on the growth process.

Discussion: Findings suggest that health care professionals working in illness settings develop Vicarious Post-Traumatic Growth as a result of facing their patients' suffering and potential death, which leads to a re-evaluation of one's existential issues.



Friday, 13th September 2024

ROUND TABLE



CLINICAL PSYCHOLOGY IN HEALTH CONTEXTS: UNIVERSITIES, PROFESSIONAL BODIES, HEALTHCARE INSTITUTIONS

Proponents

Laura Parolin, University of Milan-Bicocca

Discussant

Silvia Casale, University of Florence

Piero Porcelli, University "G. d'Annunzio" of Chieti-Pescara

Participants

Cecilia Giordano, University of Palermo

Daniela Palomba, University of Padua

Laura Parolin, University of Milan-Bicocca

Tommaso Maniscalco, Technical Table for Mental Health of the Ministry of Health

Abstract

Last year, the AIP Congress - Section of Clinical and Dynamic Psychology - hosted a roundtable titled "Clinical Psychology in Mental Health: Perspectives and Challenges," which analyzed the initial positive results of collaborative initiatives between universities and professional bodies (CNOP, the "PsyCare" project linked to the "psychological bonus," and ENPAP, the "Living Better" project) aimed at promoting the dissemination and access to structured and scientifically supported psychological therapies across the country. These efforts followed the path laid out by the Consensus Conference on psychological therapies for anxiety and depression (Italian National Institute of Health, ISS, 1/2022), in line with other international models such as Improving Access to Psychotherapy (IAPT).



This roundtable aims to rekindle the growing interest in the debate within clinical and dynamic psychology in dialogue with representatives of healthcare institutions, focusing on two important aspects:

- a) Offering a concrete and well-defined perspective on the commitment of clinical psychologists, who are capable of effectively applying recognized protocols within healthcare contexts, by initiating guided experimentation.
- b) Presenting the proposals of the network of University Clinical Services, now widespread in most universities, with the development of innovative projects offering diagnostic and therapeutic pathways (PDT) that span across various clinical-psychotherapeutic models. This approach also paves the way for potential proposals for collaborative care activities between Health Services and services aimed at the general population.



Saturday, 14th September 2024

SYMPOSIUM SESSION



**THE EFFECTIVENESS OF UNIVERSITY COUNSELING IN PROMOTING STUDENTS'
PSYCHOLOGICAL WELL-BEING**

Proposer

*Anna Maria Speranza*¹

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

Discussant

*Osmano Oasi*¹

¹ Department of Psychology, Catholic University of Milan

Abstract

The mental health of university students is an issue of growing concern for institutions. University students, who generally fall into the developmental phase of emerging adulthood, often present various forms of psychological distress. These are often related to feelings of confusion, inadequacy and disorientation that characterize this stage of life. University counseling centers represent an increasingly popular and extremely useful resource for responding to students' requests for support. The effectiveness of university counseling has been demonstrated in relation to many aspects, such as decreasing previous symptoms, improving academic satisfaction and outcomes, reducing university drop-out rates. Understanding which process and outcome variables underlie the effectiveness of counseling is a key research aim in order to tailor interventions to the specific needs of students. This panel gathers studies that have investigated the effectiveness of university counseling interventions in different Italian universities, taking into consideration diverse variables and forms of intervention. The first contribution by Franchini et al. highlighted the effectiveness of a psychodynamic counseling intervention in improving well-being, reducing depressive symptoms, and increasing students' ability to mentalize their emotions. The second contribution by Marchetti et al. provided further evidence to support the effectiveness of counseling not only regarding the improvement of psychological well-being but also in relation to academic engagement. The third study by Esposito et al. focused on the effectiveness of group counseling in enhancing academic performance through increased reflective functioning, well-being and academic engagement. Finally, the study by Bruno et al. further demonstrated the effectiveness of both individual and group counseling by also analyzing the role of some intervening variables, such as problems reported



at intake, gender, age, and kind of intervention. The results of the present works will be argued, and the clinical implications discussed with the aim of advancing researchers and clinicians' understanding of the effectiveness of university counseling.



Preliminary data from two sites of the M-SCPA project: A survey on psychological counseling with university students

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² Department of Cultures, Education and Society, University of Calabria, Cosenza, Italy

Abstract

Background: The M-SCPA (Monitoring of University Psychological Counseling Services) is a national project aimed at 1) monitoring psychological and academic problems of university students, and 2) evaluating the effectiveness of a brief psychological intervention.

Method: Inclusion criteria were university students aged >18 years-old, voluntary participation, signing informed consent, undergoing a minimum of 3 out of a maximum of 5 sessions of psychological counseling. The protocol was based on a naturalistic observational, longitudinal study of students assessed at baseline (T0), post-intervention (T1), and follow-up (2 to 6 months after post-intervention). Participants were assessed on an ad-hoc questionnaire (sociodemographic data), psychological problems (Clinical Outcomes in Routine Evaluation - Outcome Measure, CORE-OM), SInAPSi Academic Engagement Scale, SAES), and an ad-hoc questionnaire on client satisfaction.

Results: Data of participants from two university sites involved in the M-SCPA project (University of Calabria and University of Chieti) are reported. Students were recruited from January to July 2024.

Discussion: Between-group (comparison between the two University sites) and within-subject (comparison of scores from baseline to follow-up) analysis are performed with the aims of: 1) comparing psychological and academic problems showed by students referred in the two sites at baseline, and 2) evaluating the effectiveness of psychological counseling immediately after the end of the intervention period (T1) and at a longer period post-intervention (T2) as compared to the baseline condition (T0). Although preliminary, this study enabled a significant survey for identifying quantitative indicators of psychological counseling interventions in Italian universities.



Keeping emotions in mind: the effectiveness of university counseling in promoting students' mentalized affectivity

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

Abstract

Introduction: Mentalized affectivity, intended as individuals' ability to identify, process, and express emotions by reading them through the lens of autobiographical memory, is a pivotal aspect of change in psychological interventions. Several studies pointed out the effectiveness of university counseling in improving students' well-being but most of them focused only on the assessment of symptomatic measures. Since university students' difficulties are often embedded in feelings of uncertainty and confusion proper of the developmental stage of "emerging adulthood", evaluating changes in their ability to mentalize emotions could enrich our knowledge of the effectiveness of this form of intervention. The present study aims to investigate the usefulness of a university counseling intervention in improving psychological well-being, decreasing depressive symptoms, and enhancing mentalized affectivity.

Methods: The sample included 252 students of Sapienza University of Rome, of whom 111 underwent university counseling and 141 constituted the control group. Students were asked to complete the following questionnaires: Clinical Outcome in Routine Evaluation-Outcome Measure; Beck Depression Inventory-II; Brief-Mentalized Affectivity Scale. Each questionnaire was administered at a pre-test (T0) and at a post-test (T1), which students in the experimental group completed at the end of the intervention, while those in the control group completed at the same time as the other group, but without any intervention.

Results: The results of repeated-measures ANOVAs showed a significant improvement in global well-being and depression in the students who had received counseling and not in those in the control group. Similarly, students in the experimental group showed a significant increase in their ability to identify, process and express their emotions, whereas those in the control group did not.

Discussion: Our results shed light on the usefulness of university counseling not only in reducing intake symptoms but also in improving a process of mentalizing one's own emotions. A greater emphasis on how university counseling exerts its efficacy beyond symptom reduction could be particularly important in tailoring interventions to the specific problems of university students.



Promoting well-being, reflective functioning and academic engagement through university group counselling: a naturalistic study on outcome and process

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

Abstract

Introduction: In the last few years, the number of students seeking for help at university counselling services highly increased and university counselling groups proved to be very effective in promoting psychological well-being through the role of group therapeutic factors, such as group cohesion, and low levels of group conflict and avoidance.

Methods: The present study aims to evaluate, through both process and outcome measures, the efficacy of 4 counselling groups (N= 25; F= 12; M= 13) provided by the SInAPSi Centre of University of Naples Federico II during the academic year 2022/23 and addressed to underachieving university students. Specifically, students participated in the nine weekly sessions Narrative Mediation Path counselling group aimed at improving mentalization, psychological well-being and academic engagement in order to have an impact on the students' academic performance. The following questionnaires were administered in the pre-test, post-test and follow up to evaluate the outcomes: RFQ for the evaluation of reflective functioning, USEI for measuring academic engagement, PGWB-I for analyzing psychological well-being, and the API for measuring the students' academic performance. Therapeutic process was evaluated in terms of group climate with the GCQ and group session impact with the GSRS at the end of every session. Descriptive and inferential analyses were performed for evaluating outcomes and process.

Results: Preliminary results showed that three of the four groups significantly improved in terms of psychological well-being, but the only group that improved in the other outcomes, despite the emergence of conflictual dimensions in some sessions, also presented a more positive process, both in terms of group climate and of an overall positive impact of each session.

Discussion: This study confirmed the strictly association between good outcomes, positive group climate and session impact but it also highlighted that outcome does not depend only on a high level of cohesion between group members but even on the presence of conflictual dimensions when the latter can be elaborated during the therapeutic process.



Uncovering Effectiveness: SAP-CP's Psychological Interventions for Padova University

Students

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

³ Department of Developmental and Social Psychology, University of Padua, Padua, Italy.

Abstract

The SAP-CP Service offers diagnostic assessment and psychological consultation to Padova University students experiencing psychological issues. These interventions may be followed by short- and medium-term individual or group sessions, employing cognitive-behavioural or psychodynamic approaches. In this study we evaluated the effectiveness of psychological interventions delivered at the SAP-CP Service during 2022-2023. Data from a sample of 279 students (66% female; mean age=23.3±2.33 years) who underwent a minimum of 4 sessions and completed pre- and post-intervention measures were analysed. Specifically, they all completed the Generalized Anxiety Disorder Assessment-7, the Patient Health Questionnaire-9, and the Work and Social Adjustment Scale. Sixty-eight percent of undergraduates received an individual psychological intervention, while the remaining 32% received a group intervention. The mean number of sessions was 14.64±7.71.

We conducted a forward stepwise model selection procedure and the best model (R²=0.51) included predictors such as phase (PRE/POST), measure, self-referred problem at the intake, and number of sessions. We found a significant reduction in scores from PRE to POST across all measures (all ps<.001). The number of sessions did not significantly affect total scores; furthermore, an interaction effect between the number of sessions and the intervention phase was observed, suggesting a consistent reduction in scores with increasing sessions. ($\chi^2(1)=10.27$, p=.001). This effect was independent of the type of measure administered. Overall, the reduction in total scores between PRE and POST was about 30% of the initial score. Additionally, there was a significant effect on total scores, regardless of the phase, based on the self-referred problem ($\chi^2(1)=10.33$, p=0.035). Precisely, students reporting emotional issues scored significantly higher compared to those who did not specify their problem. Age, sex, and type of intervention (individual vs. group) did not show a specific effect on the main trend.



In conclusion, the effectiveness of SAP-CP's psychological interventions is demonstrated by a notable reduction in pre- vs. post-intervention scores. This outcome is noteworthy given student diversity and intervention variabilities. Moreover, individual and group interventions show similar efficacy, supporting their enhancement to optimize service efficiency.



**CONTROVERSIAL TOPICS AND CURRENT DEVELOPMENTS IN RESEARCH ON
BEHAVIOURAL ADDICTIONS**

Proposer

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² Psychological, Pedagogical, Exercise and Training Sciences, University of Palermo, Palermo, Italy

Discussant

*Valentina Boursier*¹

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Abstract

The field of addictive behaviors has been challenged by the emergence of non-substance-related compulsive behaviors, also called behavioural addictions. The overarching aims of this symposium are to provide insights on common and specific psychological risk factors and processes across established and potential behavioral addictions, and discuss strategies to identify genuinely addictive behaviors without overpathologizing harmonious passions.

The first contribution investigated differences across patients suffering from different types of addiction (substances, alcohol, gambling, love) in metacognitive functioning levels and their associations with emotion dysregulation. The study highlights that differences in the facets of these variables may account for the specificities of these addictive behaviors. By adopting a longitudinal design, the second contribution highlights that maladaptive daydreaming may constitute a dysfunctional mechanism that accounts for the relationship between low self-concept integration (i.e., dissociation and self-concept clarity) and problematic social networking sites use. The third contribution examined the link between ADHD and technological addiction in a clinical sample through a virtual reality (VR) neuropsychological test designed to assess different subtypes of adult attentional processes. Finally, by highlighting the tendency to overpathologize everyday behaviors, the fourth contribution will address the risk of not considering the underlying primary motivations behind these behaviors and their functions as coping mechanisms for specific sources of distress.



These topics will be discussed to grasp relevant implications in assessment and treatment, which may allow clinicians to take into account the specificities and common aspects that characterize behavioural addictions.



Neuropsychological profiles of individuals with ADHD and externalising technoaddicted behaviors

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Abstract

Introduction: Attention deficit hyperactivity disorder (ADHD) manifests itself through a wide range of symptoms, which can include attention problems, hyperactivity and behavioural impulsivity. Constant stimulus seeking, difficulty regulating attention and impulsivity can make people with ADHD more susceptible to overstimulation and problematic use of technology. Individuals with ADHD often show increased novelty seeking and lower tolerance for boredom, factors that may predispose them to overuse of stimulating technologies. Furthermore, instant gratification and the highly interactive and variable nature of the digital environment may intensify stimulus-seeking behaviour in individuals with ADHD, increasing the risk of developing dependence on such technologies.

The purpose of this study is to examine the application of virtual reality in the psychological diagnosis of outpatient executive assessment.

Methods: The patients were recruited from the outpatient clinic for Neurodevelopmental Disorders in Adults at the Psychiatry Unit of the University Hospital of Messina. A BAARS-IV screening test was administered to confirm the diagnosis of ADHD and a technological addiction behaviour test (IAT) was also used. Subsequently, each patient was evaluated with the Nesplora Aquarium, a virtual reality (VR) neuropsychological test designed to assess different subtypes of adult attentional processes and working memory. The diagnostic evaluation is performed at a T0 entry and a T1, 3 months after pharmacological monitoring, with Nesplora Aquarium and IAT re-tests.

Results: The results of the test-retest comparison show an improvement in the cognitive profiles of 'attention', 'inhibitory control' and 'working memory'. This result also correlates with a decrease in transversal symptoms. On the re-test of the IAT, a reduction in the total score was observed.

Discussion: The results show an improvement in attentional processes with less need to use the smartphone and greater participation in everyday social contexts.



The relationship between ADHD and technological addiction underlines the importance of developing cognitive therapeutic strategies in the patient's population.



How can low Self-Concept Unity affect Problematic Social Networking Site Use? The role of Maladaptive Daydreaming

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Abstract

Introduction: Social networking sites (SNSs) may be particularly appealing for individuals with low self-concept integration, because they provide the opportunity to explore different facets of the identity and gain social recognition. Yet, this opportunity can lead to Problematic SNSs use (PSNSU) in some circumstances, and a possible underlying mechanisms may be maladaptive daydreaming (MD). Low self-concept integration may lead individuals to escape into fantasies in which they can positively represent themselves. In turn, these fantasies might foster a problematic engagement in SNSs, where individuals can present parts of their ideal selves. Therefore, we hypothesized that MD may constitute a dysfunctional mechanism that accounts for the relationship between low self-concept integration and PSNSU.

Methods: 227 participants (79.4%F; $M_{age} = 20.80 \pm 3.94$) were recruited and data was collected at two different times through psychometrically sound self-report measures. At T0 we evaluated two facets of self-concept integration (i.e., self-concept clarity (SCC) and the dissociation proneness), MD and the time spent on SNSs; six months later (T1) PSNSU was detected. Structural Equation Modeling was performed, and the distribution of product coefficients (P) was used to test the indirect effects.

Results: The model produced good fit indices ($\chi^2 = 83.006$, $df = 38$, $p < .001$; $\chi^2/df = 2.18$, $RMSEA = 0.072$ (90% C.I. = 0.051 - 0.093), $CFI = 0.961$, $SRMR = 0.069$) and accounted for 35.80% of the variance in PSNSU. Controlling for the time spent on SNSs, the results supported the hypothesized indirect relationships between SCC and dissociation (T0) and PSNSU (T1) mediated by MD ($\beta = 0.11$, $p = .027$, $P = 10.11$, $p < .05$ and $\beta = 0.16$, $p = .013$, $P = 13.58$, $p < .05$, respectively).

Discussion: Overall, a less stable sense of self, both in terms of dissociation proneness and a low SCC, appears to favor involvement in vivid and complex fantasies which, in turn, find a container in the world of SNSs leading over time to problematic use. Interventions to encourage adaptive coping strategies among people who tend to resort to MD to cope with an unclear sense of self might help reduce the risk of PSNSU.



Grasping shared psychopathological factors across addiction types: focus on metacognitive functioning and emotion dysregulation

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Abstract

Introduction: Despite behavioral addictions and addictions to substance frequently co-occur, share neurobiological basis, and show common symptoms, the investigation of psychological variables accounting for these similarities is still scarce. Psychopathological models mostly argued that addictions may develop and maintain because of poor metacognitive functioning (i.e., mentalization) and consequent emotion dysregulation. The illustrated study aims to investigate differences across patients suffering from different types of addiction in metacognitive functioning levels and their associations with emotion dysregulation.

Methods: We recruited patients suffering from addiction to substance (n=28), to alcohol (n=48), to gambling (n=40) and to love (n=29). We administrated adapted versions of the Indiana Illness Psychiatric Interview. Transcripts were coded with the Metacognitive Assessment Scale. In addition, patients fulfilled the Difficulties in Emotion Regulation Scale 18 items. A multivariate analysis of variance was performed to identify significance differences in metacognitive functioning and emotion dysregulation across groups.

Results: Analyses revealed that some facets of metacognitive functioning discriminated between groups. Also, general levels of emotion dysregulation did not differ across types of addiction whereas lack of awareness of emotions and poor emotion regulation self-efficacy was significantly higher in some groups of patients. Lastly, the patterns of associations between metacognitive functioning and emotion dysregulation were generally similar across groups.

Discussion: These preliminary results suggest that despite impairments in metacognitive functioning and consequent emotion dysregulation may be a common psychopathological process across addictions, differences in the facets of these variables may account for the specificities of these conditions. This



study suggests the utility of adopting a multidimensional perspective in clinical assessment of individuals suffering from addictions to better tailor psychological interventions.



Pathologizing Normal Behaviors as Behavioral Addictions: Implications and Challenges

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Abstract

A contemporary tendency to pathologize appetitive behaviors has arisen concurrently with the increasing attention towards behavioral addictions, prompting apprehensions regarding appropriate diagnosis and the risk of overpathologization of such behaviors. We reviewed the processes involved in pathologizing everyday activities and analyzed the implications of this phenomenon. We identified two primary forms of pathologization: (1) the creation of "new" behavioral addictions and (2) the lowering of thresholds for defining addictive behaviors. The former entails categorizing certain appetitive activities as addictive, often based solely on excessive engagement and questionable diagnostic criteria, without considering the underlying primary motivations behind these behaviors and their functions as coping mechanisms for specific sources of distress. An example is love addiction, which has been developed without considering other relevant conditions like dependent personality disorder or separation anxiety disorder. The latter form involves lowering the thresholds for classifying behaviors as addictive, particularly evident in already existing nosographic classifications such as gaming disorder and compulsive sexual behavior. Accordingly, there is evidence that this approach may fail to adequately distinguish between pathological and non-pathological behavior, potentially leading to overdiagnosis. Pathologization of normal behaviors raises significant concerns, including stigmatization of individuals who engage in these behaviors and the introduction of flawed psychopathological concepts. Collaborative discussions and critical evaluation of existing frameworks are crucial for enhancing diagnostic precision and mitigating potential harms. Addressing these challenges necessitates a deeper understanding of addictive behaviors and a cautious approach to diagnostic assessment. Efforts to depathologize normal behaviors are necessary, and research must ensure that behavioral addiction encompasses only behaviors causing significant impairment.



**APPLICATION OF CBT-BASED PROTOCOLS AND TECHNIQUES TO
PSYCHOLOGICAL WELL-BEING PROMOTION AND RISK FOR PSYCHOPATHOLOGY
PREVENTION IN REAL-LIFE SCENARIOS: PROMISES AND PITFALLS**

Proposer

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Discussant

*Annamaria Petito*¹

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Abstract

Promotion of psychological well-being is a crucial challenge in many fields of clinical psychology, spanning from sensitive periods (e.g., adolescence), to medical conditions, to psychotherapy. Promoting personal attributes and resources, indeed, would give individuals the chance to contrast risk factors for any psychopathological condition. This chance would also allow individuals to actively modify their risk trajectory, either in the direction of avoiding/delaying the onset of overt psychopathology, or of softening the negative consequences (e.g., symptom severity, real-life functioning) of psychopathology.

In this context, Cognitive Behavioral Therapy (CBT)-based interventions have proven efficacy and seem to be especially suitable in their application to scientific research. Nonetheless, how they should be administered and evaluated to achieve the best balance between reliable research findings and effective clinical practice is unclear. This symposium is aimed at elucidating promises and pitfalls of CBT-based interventions in different fields of psychological well-being promotion, across four contributions in which speakers will accomplish the aim with reference to different fields of interventions. First, Prof. Antonucci will show findings about the efficacy of a CBT intervention based on the Acceptance and Commitment Therapy (ACT) approach in a naturalistic cohort of adolescents recruited in high schools. Prof. Pietrabissa will describe the development of the RinasciMENTE program, an Internet-based self-help intervention for managing psychological distress within the broader Italian population, whose feasibility and effectiveness were evaluated in a randomized controlled clinical trial (RCT). Prof. Landi



will focus on the effectiveness of the e-READY for MS program, an ACT online group program designed to enhance resilience among patients with Multiple Sclerosis. Then, Prof. Salvatore will show how to fruitfully insert mindful and metacognitive approaches within an intersubjective framework for the benefit of both patient and therapist.

Through the proposed symposium, we wish to spread knowledge and discuss with the audience the good clinical and research practices of CBT-based approaches to promote psychological well-being and potentially prevent psychopathology, in a virtuous cycle between scientific findings and real-world clinical experience



Predictors of psychological flexibility levels subsequent to an Acceptance and Commitment Therapy (ACT) training in adolescents: a machine learning study

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Abstract

Introduction: Psychological flexibility (PF) is the ability to contact the present moment and adapt behaviors according to chosen values. PF has been positively associated with psychological well-being, and negatively associated with anxiety and depressive symptoms. Acceptance and Commitment Therapy (ACT) interventions have proven efficacy in increasing PF in clinical samples. However, their clinical prevention relevance in sensitive non-clinical samples (e.g., adolescents) remains unclear. We aimed at predicting post-ACT levels of PF in adolescents via machine learning (ML) based on several psychological predictors, and to test its clinical relevance for follow-up symptom severity.

Methods: We recruited 103 non-psychiatric first-year students at UNIBA (discovery sample), and 28 non-psychiatric last-year high school students at Massafra (TA) (validation sample). They underwent a pre-ACT psychological assessment involving cognition, attachment, self-esteem, environmental stressors, bullying, and interpersonal reactivity. Then, they underwent a small-group ACT training, according to the DNA-V protocol (6 meetings). Pre- and Post- ACT PF was measured via the MPFI questionnaire. We trained a ML algorithm predicting higher vs. lower post-ACT PF on the discovery sample based on 114 variables from the pre-ACT assessment within a double cycle, nested cross-validation design. The validation sample served to test the algorithm's generalizability. Associations between algorithmic decision scores and symptom severity variation (post- minus pre- ACT), measured via SCL90, were conducted (pFDR<0.05).

Results: The algorithm predicted post-ACT PF with 71.7% Balanced Accuracy (BAC; p=0.001) in the discovery sample. Generalizability was excellent in the validation sample (71.4% BAC). The most relevant



variables for predictions were prosocial behavior and non-planned impulsivity. Predicted PF covaried with change in several symptom scales (all pFDR<0.05).

Discussion: We generated a ML algorithm predicting post-ACT PF, and identified specific predictors of such PF levels which could be potentially targeted to promote psychological well-being in adolescence. The algorithm resulted clinically relevant for prevention purposes within the non-psychiatric range of the scales considered, as its decisions were significantly associated with symptom variations between post- and pre-ACT.



The RinasciMENTE Project: An Internet-Based Self-Help Program to Manage Psychological Distress Within the Wider Italian Population

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Abstract

Introduction: Internet-based self-help interventions have the potential to help people address their emotional needs at relatively low costs. However, to improve end-user adherence and satisfaction with treatment and promote the effectiveness of the program, the system must meet their needs by providing appropriate strategies and optimal functions.

To this end, this research aims to 1) explore the experiences that Italians have with available psychological support services, their needs and attitudes, as well as possible barriers to online psychological interventions; 2) evaluate the usability of the RinasciMENTE platform; and 3) test the feasibility and effectiveness of the RinasciMENTE program in increasing the emotional health of a representative sample from the Italian community.

Methods: To achieve the goals mentioned above, 1) a sample of 1024 Italians (F = 69.8%; mean age = 41.3; SD = 15.3) was asked to complete an online ad hoc survey. Following, 2) the think-aloud test method, the system usability scale, and an ad hoc semi-structured interview were used to determine the overall system usability of the system in a balanced gender-age sample of 10 individuals. Quantitative data was analyzed using descriptive statistics and qualitative data was analyzed for content using thematic analysis. 3) A randomized controlled trial (RCT) is currently underway to evaluate the effects of the RinasciMENTE program with those of a waiting list control group. A minimum of 128 individuals with mild or below-the-threshold psychological symptoms are enrolled in the study. After undergoing baseline screening, individuals are randomized to either the control condition or the experimental group. Participants in the program work through eight weekly CBT modules over the course of two months. At the end of the intervention and twelve months later, the impact of the RinasciMENTE program on selected primary and secondary psychological outcomes is assessed.



Results: The results showed that 1) psychological support is provided mainly in person (69.0%), while online interventions are mostly used in extra-European countries (57%) and 44% of the total sample was interested in Internet-based psychological intervention. The main recognized advantages of psychological support provided through the Internet were reduction in geographical distances, economic reasons, and dropping of the waiting list, while identified disadvantages were problems with technology, low motivation of users, and privacy/security reasons. 2) The participants in the second study were mostly satisfied with the usability of the program. However, older users (≥ 45 years) encountered more problems, compared to their younger counterparts. Moreover, the analysis of the interviews revealed three central themes: general thoughts about the platform, weaknesses of the platform and difficulties encountered while navigating and completing tasks, and strengths of the platform. Regarding the third study, 3) it is anticipated that the psychological functioning of the participants will improve and they will gain the confidence and abilities needed to deal with their emotional problems.

Discussion: These data 1) made it possible to improve the knowledge regarding the views and attitudes that Italians have about online psychological interventions, and shed light on how to increase the uptake of digital health. They also 2) allowed the identification of potential usability problems with the system, and improvements were made before the RinasciMENTE program started to be tested under real-world conditions. The results of the RCT will provide valuable information and contribute to the implementation of self-help CBT programs among the Italian population.



A pilot online Acceptance and Commitment Therapy study in people with multiple sclerosis

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Abstract

Introduction: Multiple Sclerosis (MS) presents unique challenges that may impair quality of life (QoL) and psychological well-being. Online interventions promise wide accessibility but present challenges in patient adherence. This pilot study examines the feasibility and effectiveness of "e-READY for MS," an online Acceptance and Commitment Therapy (ACT) program aimed at enhancing resilience in people with MS. *Methods:* Fifty-two MS patients (85% female, $M_{age}=49.28$ years, $M_{time\ since\ diagnosis}=68.12$ months) were randomized to the intervention ($n=27$) or a waitlist control (WLC) ($n=25$). Primary (resilience) and secondary (physical and mental QoL, distress, psychological flexibility) outcomes were assessed at pre- and post-intervention, and 12-week follow-up. 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:* No significant time \times group effects were found in the per-protocol sample. However, In participants completing ≥ 3 of 8 modules (intervention=7, WLC=8), significant effects emerged for mental QoL [$F(1,13)=4.64$, $p=0.04$, $d=0.24$], depression [$F(1,13)=5.17$, $p=0.02$, $d=0.31$], and the psychological flexibility sub-process acceptance [$F(1,13)=4.06$, $p=0.05$, $d=0.21$]. Gains were sustained at follow-up. Despite the e-READY for MS intervention being well-received in terms of usability, participant adherence to the study was notably low; only 30% of the intervention group and 40% of the WLC completed three modules. Secondary analyses revealed module completion was significantly associated with gender (female more likely than male, $r=-0.41$, $p<0.05$), time post-diagnosis ($r=0.40$, $p<0.05$), income difficulties ($r=-0.50$, $p<0.05$), and psychological flexibility sub-processes—specifically, present moment awareness ($r=0.41$, $p<0.05$) and committed action ($r=0.46$, $p<0.05$). *Discussion:* The e-READY for MS online intervention demonstrated benefit for improving mental health in MS, contingent on participant engagement. Further research should investigate predictors of adherence and program engagement and tailor interventions to individuals' characteristics in order to identify patients most likely to benefit from online care. This study underscores the potential of online ACT interventions to expand access to resilience-building resources for individuals with MS.



Improving psychotherapists' efficacy and quality of the therapeutic relationship through the integration of mindfulness, metacognition, body techniques and intersubjectively oriented supervision

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Abstract

Some therapists are more effective than others. This effect is not related to the characteristics of patients, nor to the combinations that are created between patient and therapist (Wampold et al., 2017), but to "therapists effects" (TE), i.e., the specific contribution to therapy outcome attributable to the therapist (Lutz & Barkham, 2015). Numerous data suggest that TE explains 5-9% of treatment outcome; a value significantly greater than the percentage attributable to theoretical models of reference or the therapeutic alliance (Wampold & Imel, 2015). Indeed, it seems that excessive entrenchment of the therapist in his or her own model of reference - for example, CBT- is a typical reaction of the therapist at times when he or she is "under pressure" (Muran & Eubanks, 2020), and reduces the effectiveness of the intervention. TE largely depends on personal characteristics of the therapist. One of these seems to be the variable ability to promote a good therapeutic alliance (Muran & Eubanks, 2020). However, the latter may in turn depend on other therapists' personal characteristics, including *empathy* (Elliott et al., 2011). Empathy in turn seems to be subsumed in the therapist's so-called *facilitative interpersonal skills* (FIS) (e.g., empathy, verbal fluency, emotional expression, persuasiveness, hopefulness; Anderson & Hill, 2017). An additional, rather abstract factor related to TE is presence (Hayes & Vinca, 2017): the state in which the therapist is in parallel awareness of "being here," "being open," "being now," and "being with and for the client." In our talk, we will describe an aspect that we hypothesize underlies these different personal characteristics of the therapist, and a series of strategies aimed at enhancing this aspect, and increasing therapist efficacy and the quality of the therapeutic relationship: 1) group supervision; 2) mindfulness associated with the principle of *mushin* (not-mind); 3) peculiar body practices. Specifically, through a series of video examples of group supervision, we will show how equipping the CBT therapist with the ability to understand the



intersubjective dynamics that take shape in the therapeutic relationship, and with meditative and bodily resources, can foster a significant increase in the effectiveness of clinical intervention



UPGRADING THE RORSCHACH: RESEARCH AND ADVANCES – 7TH EDITION

Proposer

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Discussant

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Abstract

This symposium aims to provide a seventh 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 study on the influence of the administration format (in presence vs. online) on R-PAS results. Camelio et al. then present the results of a study focusing on emotional activation through the color indices of the Rorschach utilizing eye-tracking and transcranial direct current stimulation (tDCS) targeted at the dorsolateral prefrontal cortex (dlPFC) in a sample of healthy individuals. Orlandi et al. then continue by highlighting the similarities and differences between the information provided by semi-structured interviews and R-PAS in assessing headaches, restrictive eating disorders (REDs), and nonsuicidal self-injuries (NSSIs). Finally, Lorenzoni et al. will describe the results of an eye-tracking study linking free viewing observation of facial expression patterns with R-PAS results. 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.



A Comparison between Online and In-Person R-PAS Administration Results during COVID-19

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Abstract

The COVID-19 pandemic has required a shift in mental health service delivery, enhancing a transition to online modes, including psychological assessment. Although several guidelines for teleassessment had already been established prior to the pandemic, COVID-19 outbreak led to the widespread of virtual assessment delivery. However, several challenges persist in ensuring equivalence between online and in-person psychological assessments. The Rorschach test, as a performance-based projective task entails several issues in virtual administration due to its visual and interpersonal nature. This study compares data from traditional in-person Rorschach R-PAS administration (Aschieri et al., 2023) with those obtained with a via-app remote administration (Ales et al., 2023), by comparing data from two separate studies, conducted in Italy during the pandemic period. Several differences emerged between the two administration modes across several Rorschach variables. The in-person sample exhibited more pathological features but also greater reactivity to stimuli. Findings highlight the complexity of remote assessment, encouraging the need for further studies to investigate new potential solution for the R-PAS remote administration.



Mind's Eye on Color: Exploring Emotional Arousal in Rorschach's Inkblots via tDCS and Eye-Tracking

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Abstract

Introduction: The Rorschach test is widely used as a performance-based measure to assess mental functioning. Although indices specifically related to color responses on the Rorschach may provide valid indicators of emotional processing, their correlation with emotional brain regions remains unexplored. This study aims to investigate emotional arousal through the color indices of the Rorschach test utilizing eye-tracking and transcranial direct current stimulation (tDCS) targeted at the dorsolateral prefrontal cortex (dlPFC) in a sample of 20 healthy individuals.

Methods: The research paradigm involved two experimental sessions three weeks apart. Participants completed the Rorschach test and six cognitive tasks (Visual search, SART, AUT, Emostroop, Visual task, presented in randomized order) with and without transcranial stimulation. More specifically, the Rorschach test and cognitive tasks were presented on a computer screen in each experimental session, three weeks apart, once in the dlPFC-targeted stimulation condition and once in the sham condition. Emotional arousal was assessed for all participants in each experimental session using eye-tracking.

Results: The statistical analyses revealed that the Rorschach scores obtained in the stimulation condition were not similar to those obtained in the sham conditions.

Discussion: We propose that the effect of tDCS over the right dlPFC may affect automatic emotion regulation abilities by modulating frontal-limbic connectivity. This neural pattern may ultimately affect color response production at the Rorschach test.



Look at my body, it tells of suffering. Comprehending psychiatric pathology in patients who suffer from headaches, restrictive eating disorders (REDs), or nonsuicidal self-injuries (NSSIs)

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Abstract

Introduction: Adolescence is a period of somatic and psychic transformations that reorganize one's identity, passing through the attempted factual realization of expectations about the adult self. A profound change in perception of one's body can lead to dissatisfaction, sometimes resulting in a concrete attack on one's body. Recently, adolescent distress has increasingly been expressed in the form of Restrictive Eating Disorders (REDs) and nonsuicidal self-injuries (NSSIs).

Previous work describes how adolescents dissatisfied with their bodies are more likely to have depressive symptoms and low social functioning. Therefore, the present research aims to describe the three different diagnostic categories by means of several instruments and characterize the core of those diseases, highlighting similarities and differences.

Methods: Sixty adolescents were recruited and divided into three groups: 20 patients suffering from headaches, 20 presenting REDs, and 20 showing NSSI behaviors. We collected data from the Kiddie Schedule for Affective Disorders and Schizophrenia (K-SADS-PL-DSM-5), the SCID-5-Personality Disorders, the Social and Occupational Functioning Assessment Scale (SOFAS), the Children Global Assessment Scale (CGAS), the Clinical Global Impression – Severity (CGI-S), the WISC-IV or WAIS-IV, and the Rorschach test according to the R-PAS method.

Results: Data show that the NSSI group had more depression, social anxiety, and borderline personality traits than the headache group. The NSSI group showed worse functioning and higher severity of the symptoms than the other groups and lower performance on the working memory task than the headache group. R-PAS revealed that the headache group had significantly higher PHR/GPHR index standard scores than others. REDs had lower W% scores than headaches and lower Dd% scores than the other groups. The RED group also had significantly lower scores on the CBlend index and higher on the C index than the NSSI one. The RED group had significantly higher scores on the NPH/SumH index than the NSSI group. The NSSI group had significantly higher scores on the PER index than the others.



Discussion: This study stimulates further investigation of which personality traits drive these patients to attack the body through different modalities. It also helps clinicians tailor the best prevention and intervention programs to promote patients' outcomes.

Critical Content in the Rorschach Performance Assessment System: an eye tracking study in trauma-exposed individuals

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Abstract

Introduction: Rorschach responses contents reflect what one thinks about the world and its meaning. Specifically, Critical Contents (CritCont) represent what one usually censors or inhibits in social interactions. This study aimed to examine the response process underlying CritCont by analysing eye movements, which represent an automatic bio-behavioral measure. Additionally, the experimental procedure replicates previous studies on eye tracking and PTSD.

Methods: Sixty adult participants were recruited and asked to complete the International Trauma Exposure Measure (ITEM) to assess the number and level of traumatic experiences in their past. Subsequently, the Rorschach Performance Assessment System (R-PAS) was administered. Lastly, all participants engaged in three experimental tasks while their eye movements were recorded using an eye tracking device. Each task involved 30 matrices, each consisting of 16 images displayed for six seconds. These images, taken from the Karolinska Directed Emotional Faces database (KDEF), depicted faces with either a neutral facial expression or one expressing sadness, fear, or anger. These emotions were selected for their propensity to evoke arousal in individuals with trauma history and (even mild) PTSD symptoms.

Results: It is hypothesized that individuals with a history of traumatic experiences, as measured by the ITEM, should be more aroused by faces depicting negative emotions, resulting in increased attention on such images compared to neutrals. Furthermore, these individuals should exhibit lower ability in censoring dramatic contents at the Rorschach.

Discussion: Clinical implications of results will be discussed, focusing on the hypothesis that individuals spending a greater percentage of time fixating on faces expressing negative emotions will also exhibit a higher percentage of CritCont at the Rorschach.



MIND MATTERS: PSYCHOLOGICAL PERSPECTIVES ON CARDIOVASCULAR HEALTH

Proposer

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Discussant

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Abstract

Cardiovascular diseases (CVDs) remain a leading cause of mortality globally, posing significant challenges to healthcare systems worldwide. Also, psychological factors play a crucial role in the development, progression, and prognosis of CVDs. These factors interact with physiological processes to impact cardiovascular health. Psychocardiology seeks to unravel the intricate relationship between psychological states and cardiovascular disease processes, while also striving to develop effective interventions to promote holistic recovery in cardiovascular patients. As highlighted in the recent Guidelines for the management of CVDs of the American College of Cardiology and American Heart Association, there is an urgent need for the inclusion of a patient-reported perspective in healthcare, that is, the subjective health-related perceptions and representations of patients. As awareness grows regarding the substantial influence of psychological factors on cardiovascular health, there is a rising interest in exploring interventions that seamlessly integrate psychological principles into routine cardiovascular care protocols. While various approaches have been proposed, further research is needed to evaluate their effectiveness and feasibility in diverse clinical settings. Given these premises, the present symposium aims to bridge the gap between psychology and cardiology by examining the latest research findings and clinical insights in psychocardiology. The symposium will comprise a systematic review by Graziano et al., to understand the employment of clinical interviews for psychological assessment of CVD patient. Also, a qualitative study by Subach et al. on Care Managers' perception of their role and functions in blended collaborative



care with heart failure elderly patients will be presented. Additionally, Cruciani et al. will discuss data on the association between heart failure patients' psychological distress and their health – but not functional – status. Lastly, a protocol of a randomized controlled clinical trial designed to evaluate the effectiveness of Emotional Skills Training and Relaxation Training in CVD patients will be described by Severo et al. Through collaborative discussion and knowledge exchange, we seek to advance our understanding of the complex relationship between psychological factors and cardiovascular health, ultimately enhancing the care and well-being of CVD patients.

Emotional Skills Training and Relaxation Training in Patients with Cardiovascular Disease (ESTCARDIO) - A randomized controlled clinical trial

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Abstract

Introduction: Inhibition of anger and hostility expression was associated with hypertension and coronary heart disease. Moreover, Type D (Distressed) personality, characterized by a tendency to experience negative emotions and inhibited behavior and emotional expression, was found to be associated with a 92% increased risk of developing adverse cardiac events, increased risk of death, and worse quality of life. Recent studies highlighted the usefulness of psychological interventions focusing on emotional regulation and relaxation in patients with cardiovascular disorders.

Purpose: This proposal describes the protocol of a randomized controlled clinical trial designed to evaluate the effectiveness of Emotional Skills Training and Relaxation Training in improving emotion regulation of anger, anxiety and sadness and adherence to medical treatment in patients with cardiovascular disorders.

Method: The first phase of the study (t0) involves the screening of psychological variables such as anxiety (STAI; HADS-A), depression (BDI-II; HADS-D), anger (STAXI), aggression (AQ), emotional regulation (ERQ), type D personality (DS14), alexithymic traits (TAS-20), disease-related quality of life (HeartQoL), and medical treatment adherence (MMAS). In the second phase (t1), patients will be randomly assigned to either the control group or the experimental group. The experimental group will undergo the intervention and participate in 4 sessions of Emotional Skills Training based on Gross and John's theory of emotions and 4 sessions based on Jacobson's progressive muscle relaxation. The control group will follow only traditional medical treatment and will be placed on a waiting list. Both groups will be reevaluated at subsequent follow-ups at three months (t2) and 6 months after the end of treatment (t3).



Expected results: it is expected that patients in the experimental group will show an improvement in emotional regulation strategies and a significant reduction in anxiety-depressive symptoms. In addition, it is expected that the intervention will be effective in increasing levels of adherence to pharmacological therapy and medical prescriptions.

Discussion: The results of this study could have important clinical implications, showing the usefulness of integrating psychological interventions into the comprehensive care of patients with cardiovascular disease.



**Purposes, protocols and best practices for conducting clinical interviews in psychocardiology:
a review**

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Abstract

Introduction: Clinical interviews, a key assessment tool in psychology, enable clinicians to gather relevant information and ensure reliable evaluations in clinical and research settings. While several protocols exist for clinical interviews across different purposes, in cardiological settings a more targeted assessment is needed to address patient-specific issues. This review aims to understand how clinical interviews have been utilized in the literature for psychological assessment of patient with cardiovascular disease, specifically delineating purposes, protocols, common best practices and related clinical implications in this particular setting.

Methods: Scopus, PubMed, PsycINFO and Open Access Theses and Dissertations were systematically searched for primary studies meeting specific criteria, including participants with a cardiovascular disease, psychological assessment through clinical interviews, adult subjects, and publication in English. No date limitations were imposed. Studies were screened through title and abstract and successively selected through full-text analysis. Quality assessment of included studies was conducted and relevant information for each study was gathered and narratively synthesized. Screening, inclusion and data extraction were performed by two independent assessors, with interrater reliability regularly calculated.

Results: A total of 524 records were identified from databases and evaluated for inclusion. Preliminary study findings highlighted that clinical interviews in cardiological settings serve various purposes, yet often utilizes protocols and procedures not specifically designed for cardiological patients. Characteristics unique to these patients are typically examined through associated questionnaires specifically developed for this purpose.

Conclusions: The present findings highlight how clinical interviews in cardiological setting usually serve a general assessment purpose similar to other medical settings. Development of interview protocols tailored for psychological assessment of patients with cardiovascular diseases should be evaluated in terms of feasibility and clinical implementation.



Psychological distress in heart failure patients is associated with health status, but not functional status.

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Abstract

Introduction: Heart failure (HF) is a prevalent condition characterized by the heart's inability to supply a suitable volume of blood required for the metabolic needs of the body. The risk to HF is approximated at one in five for a 40-year-old individual in Europe and North America, with an increasing prevalence of 2–3% estimated in both Europe and the United States. There is a clear correlation between HF and psychological distress, with the latter being strongly associated with enhanced risks of rehospitalization and mortality, the severity of physical symptoms, and the patients' quality of life. Although psychological factors, including health status perception, are considered better predictors of psychological distress in people with HF than functional status variables, literature on the topic is lacking. This cross-sectional study aimed to explore the potential associations between psychological distress, health status, and functional status in HF.

Methods: A total of 123 non-hospitalized outpatients diagnosed with HF were included in the study. The New York Heart Association classification was used to assess functional status, while health status was measured using the Kansas City Cardiomyopathy Questionnaire (KCCQ). Psychological distress was evaluated using the Hospital Anxiety and Depression Scale. One-way ANOVA and the General Linear Model were the statistical operations used.

Results: Significant associations were found between psychological distress and health status, as measured by the KCCQ Total Symptom Score, Overall Summary Score, Quality of Life and Symptom Burden subscales. However, functional status did not show a significant association with psychological distress.

Discussion: The results highlight that health status, rather than functional status, may be a more important predictor of psychological distress in patients with HF. In addition, reading the results suggests the importance of considering health status and psychological distress in the management of HF to improve



the overall well-being and quality of life of patients, indicating the need for further research and interventions targeting patient-reported health status.



Care managers' perspective on their role in blended collaborative care among heart failure elderly multimorbid patients

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Abstract

Introduction: Person-centered approaches based on Chronic Care Model incorporating mainly trained nurses as Care Managers (CMs) to coordinate treatment plans are widely acknowledged for their positive impact on patients' outcomes in different settings. The European ESCAPE project (Horizon 2020) introduced the Blended Collaborative Care (BCC) specifically to enhance quality of life of elderly heart failure (HF) patients with multimorbidity, including mental distress. Within the project, CMs play a pivotal role in implementing individual care plans by integrating patients' healthcare needs and preferences through a proactive, shared-decision approach. Also, CMs enhance patients' self-management and utilization of informal support services. Despite evident advantages, models involving CMs are still underutilized in Italy and across the EU, with their role poorly defined in the local healthcare policies. The current study aims to explore CMs' perception of their role and functions in a frame of ESCAPE BCC in Italy and Denmark.

Method: An exploratory, descriptive qualitative approach was utilised. CMs were recruited at Bellaria Hospital, Bologna, Italy and Odense University Hospital, Odense, Denmark. Semi-structured interviews were conducted between August 2023 and December 2024. Data were analysed using descriptive thematic analysis with an inductive approach and constructivist epistemology. All CMs were recruited and trained to perform care management in a frame of ESCAPE BCC.

Results: A total of 6 CMs were interviewed across Italy ($N=4$) and Denmark ($N=2$). The study findings highlight the unique role of the CM within the ESCAPE BCC intervention in supporting older HF multimorbid patients. A comprehensive understanding and clarification of the CM's responsibilities and functions, especially in chronic cardiac illnesses, are essential for their effective integration into local healthcare settings.

Discussion: The findings contribute to a deeper understanding and further effective implementation of CM figure in managing care for elderly multimorbid HF patients. Also it informs regarding potential initiatives in improving the management of complex treatment plans for this demographic. CM role



clarification and adaptation are crucial for optimization of healthcare delivery strategies, especially in addressing complexities of multimorbidity among older HF patients.



**MENTALIZATION AND REFLECTIVE FUNCTION AS PROTECTIVE FACTORS IN
CRITICAL CONTEXTS**

Proposer

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Discussant

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Abstract

The introduction of the concept of mentalization in psychological science by Fonagy and colleagues has opened new perspectives for the understanding of psychopathology, psychotherapy, and development. Mentalizing is defined as an “imaginative mental activity, namely, perceiving and interpreting human behavior in terms of intentional mental states (e.g., needs, desires, feelings, beliefs, goals, and reasons)” (Fonagy et al., 2007, p. 288). This includes both the interpretation of others’ behaviors in terms of mental states, and the awareness of one’s own mental states, as well as the ability to differentiate one’s own and others’ mental states, and to distinguish mental states from external reality. The full capacity for mentalization is a developmental achievement related to the quality of the early interactions between infants and caregivers and is assumed to depend on the development of a symbolic representational system for mental states (Fonagy et al., 2007). Reflective Function (RF) is the operationalization of the mental processes that underpin the capacity to mentalize and provides an empirically grounded framework for understanding this complex human ability. The symposium examines the protective role of mentalization in promoting mental health at different ages and in different settings, such as clinical or forensic. Four topics were chosen to discuss the most recent trends and efforts to understand the role of mentalizing in promoting individual and family well-being.

Pajardi and colleagues will present a systematic review aimed at summarizing the literature on the role of parental RF and parents’ mentalization within conflictual separation and divorces within forensic



assessment. Procaccia will illustrate a study aimed to explore the role of mentalization on mediating the effect of maternal PTSD and depression on children's adjustment in case of domestic violence. Locati and colleagues will present a study on a sample of Italian adolescents which investigate the relationship between epistemic trust, mistrust, and credulity, mentalization, and psychopathology, in adolescence. Finally, Passeggia and colleagues' study aims to analyze, using a network analysis, the association between RF, psychological distress, academic engagement, and intention to drop-out in a sample of Italian University students recruited during the re-opening of university after Covid-19 lockdown



Parental reflective functioning within conflictual separation and divorce: A review and some suggestions for future research

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Abstract

Introduction: Parental reflective function represents the parents' capacity to reflect and mentalize their children's experience, and imagine their thoughts, feelings, desires, and intentions (Fonagy et al., 1995). It represents a specific facet of mentalization (i.e. the capacity to perceive and interpret our own and others' behaviors in terms of intentional mental states), a capacity which unfolds within our close relationships and that can be affected by the changes within the same relationships. The aim of this work is to investigate through a systematic review, the role of parental reflective functioning and parents' mentalization within forensic evaluation of child dispute in conflictual separation and divorces. This function is becoming of particular interest in forensic evaluations as it is explicitly requested to the expert by some judges in the evaluation of parental competence.

Methods: Following the PRISMA guidelines, research was conducted on PubMed, PsycInfo and PsycArticles by using the following keywords: mentalization OR parental reflective functioning AND separation OR divorce. The selected articles had to be written in English and had to include data and measures for the assessment of mentalization or parental reflective functioning. Articles from 2004 to 2024 were selected, then reviewed by two authors separately before being included in the present work.

Results: Our results enlighten the important influence of parental reflective functioning and mentalization when facing conflictual separation and divorce, specifically in relation to the impact of the event on children's wellbeing.

Discussion: Our results point toward the necessity to use and further develop specific interventions focused on the development of parents' mentalization within conflictual separations and to implement measures and methodologies to assess mentalization in forensic evaluation. Further implications will be discussed.



Mentalization and epistemic trust, mistrust, and credulity in psychopathological risk in adolescence

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Abstract

Introduction: In recent years, research has increasingly interested into the complex interconnections between epistemic trust, mentalizing abilities, and psychopathology. Mentalization (RF), is a crucial ability allowing individuals to interpret actions as caused by intentional mental states. Epistemic trust (ET) is defined as the ability to evaluate social information as accurate, reliable, relevant, and potentially notably absent in some mental disorders, in contrast to Epistemic Mistrust and Credulity. Research shows that mental disorders adolescent patterns may entail mentalizing impairments for internalizing and externalizing problems, more information are need between about the interactive role in psychopathological pathways in specific developmental disorders.

Methods: The present cross-sectional study, involve 482 Italian nonclinical adolescents (Mage=15.60, SDage=2.05; 278 females – 57.68%; 204 males), were assessed with self-report measures in mentalization (RFQY), epistemic trust (ETMCQ-A), emotional dysregulation (DERS) and psychopathology (YSR).

Results: A network analysis was conducted to explore the associations between mentalization, ET, dysregulation and psychopathological disorders. Results reveal a protective dynamic between mentalization and dysregulation, aggressive behaviour, attention problems and social problems. A risky relationship is between mentalization and anxiety. ET has a negative association with attention problems and withdrawal/depression. Epistemic Mistrust is positively associated with dysregulation, withdrawal, somatic complaints and aggressive behaviour. Credulity is positively associated with dysregulation and attention problems, while negatively associated with withdrawal.

Discussion: Overall, findings suggest that mentalization plays a broader protective role than ET in contrast to the development of psychopathology problems. Nevertheless, a greater propensity to reflection is associated with anxious problems. Epistemic mistrust appears to be connected to different types of disorders that lead adolescents to either attack or withdraw from relationships with others, whereas



credulity promotes an unregulated search for others that can interfere with attentional focus. Epistemic mistrust and Credulity may be considered to key element in sustain or maintain adolescent disorders.



The relationship between reflective functioning, psychological distress, academic engagement and intention to drop-out in a sample of university students: a network analysis

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Abstract

Introduction: Mentalizing refers to the human ability to interpret one's own and others' behaviour as based on intentional mental states. This construct, operationalized as Reflective Functioning (RF), may be conceived as a psycho-social competence associated with psychological well-being and good outcome treatment. In university context, some studies demonstrated that the students' psychological well-being may be related to genuine RF; other studies showed that students psychological health could be related to Academic Engagement (AE). Nevertheless, no study has evaluated the association between RF, AE, psychological well-being and intention to dropout in the university context. In fact, to date, the relationship between RF, AE and intention to dropout was only theorized by Fonagy.

Methods: This study aims to analyze, using a network analysis, the association between the aforementioned variables in a sample of Italian university students recruited during the a.a. 2022-23, specifically during re-opening of university after Covid-19 lockdown. Participants (N= 355; F= 69%; M= 31%; MeanAge= 23.01; SD= 3.044) were recruited online, by sharing a link including a set of questionnaires to measure RF (RFQ-8), AE (SAES), intention to drop-out and psychological distress (DASS-21).

Results: Results showed that the negative association between RF and psychological distress, here defined as characterized by anxiety, depression, and stress, is confirmed also in the university context. Moreover, RF is negatively associated to dropout intention, but not associated to any dimension of AE. Finally, AE showed to be a protective factor for psychological well-being, as AE is negatively associated to anxiety, depression, and stress.

Discussion: The findings of this study suggested that both AE and RF could act as protective factor for psychological distress and its manifestations also in the university context. Therefore, these findings may have some clinical implications and may suggest that interventions focused on both AE and RF promotion could prevent psychological distress of university students.



**EVOLUTION OF PSYCHOLOGICAL STUDIES ON DISTRESS AND ANXIETY IN
HEALTH AND DISEASE CONTEXT**

Proposer

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Discussant

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Abstract

Many studies highlight an increase on psychological distress and anxiety levels, especially after the Covid-19 pandemic. According to the World Health Organization (WHO), mental disorders continue to rise, significantly impacting the psychophysical health of the population. The symposium aims to provide an update on studies in this area, offering a multifactorial analysis of distress and anxiety, focusing on mind-body relationship. It also suggests new trials aimed at preventing and reducing psychological distress and anxiety in health and disease contexts.

The University of Salerno's group will present a study aimed to examine the impact on heart rate variability (HRV) of a single session of BWM-T (Brain Waves Modulation-Technique) compared to a psychoeducation session. The results suggest that BWM-T may have a positive effect on heart rate variability, promoting greater flexibility and adaptability of the cardiovascular system, as well as more efficient activation of the parasympathetic nervous system.

The University of "La Sapienza" will present a study aimed to investigate the effects of attachment and emotional regulation on the inter-brain (IBS) and cardiac synchronization of an Experimenter-Participant dyad, in a group of participants exposed to a stressful stimulus. This would suggest that processes of electrophysiological co-regulation may be an important means of regulating the affect associated with exposure to stressors.



The University of Florence will present a study aimed at assessing psychological distress across different stages of oncohematological illness and investigating potential protective and risk factors. This suggests that psychosomatic syndromes are a risk factor for the development of psychological distress during the chemotherapy, whereas meaning in life showed to be a protective factor.

The University of Verona will present a study aimed to systematically map the existing literature about e-Health multimodal (i.e., both physical and psychosocial components) interventions targeting older adults with Chronic non-cancer pain (CNCP). The results of the review support the potential that e-health tools have in improving pain and physical and psychosocial variables in older people with different CNCPs.



Exploring the Use of e-Health Multimodal Interventions for Chronic Pain in Older Adults

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Abstract

Introduction: Chronic non-cancer pain (CNCP) is one of the most prevalent health issues among older people and is often associated with physical, psychological, and social impairments. Adopting a bio-psycho-social framework is recommended by international clinical guidelines to understand and manage the complex experience of chronic pain most effectively. In recent years, especially following the COVID-19 pandemic, there has been a substantial increase in the use of e-health in the context of pain management, with promising effectiveness and feasibility results. However, it is still an under-researched area in the older population.

Objective: To systematically map the existing literature about e-Health multimodal (i.e., both physical and psychosocial components) interventions targeting older adults with CNCP.

Methods: Four electronic databases (PubMed, Cochrane CENTRAL, Web of Science, PsycINFO) were searched up to August 2023. The review was carried out following the Joanna Briggs Institute methodology and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews (PRISMA-ScR) reporting guideline.

Results: In total, nine articles were included. They were mainly pilot/feasibility randomized controlled trials and were recently published. Most of the studies proposed self-management interventions, most of which were specifically designed for older adults and involved using multiple e-Health tools, with higher adoption of web-based programs and video-consulting and only one virtual reality system. Signals of effectiveness of the evaluated interventions emerged in the main targeted bio-psycho-social variables, and participants overall provided positive feedback in terms of engagement and satisfaction. Nevertheless, several research gaps were found and deeply discussed.

Discussion: Globally, the results of our review support the potential that e-health tools have in improving pain and physical and psychosocial variables in older people with different CNCPs. However, with the literature on this topic appearing to be poor, very recent, and highly heterogeneous, robust conclusions cannot be drawn, and further investigation is needed.



The influence of a stress task on inter-brain and cardiac synchronization: an hyperscanning study

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Abstract

Introduction: Exposure to stress has important repercussions at the neurobiological level, activating both the central and autonomic systems. In this context, several studies have shown that activation of electroencephalographic (EEG) signals and heart rate, following stressful stimuli, is influenced by psychological dimensions such as attachment style and emotional regulation. However, much of the literature has focused on studying the individual, despite recent evidence suggesting that it is necessary to study the electrophysiological activations of multiple individuals simultaneously to understand relevant socio-relational elements. Therefore, using the hyperscanning technique, the present study aimed to investigate the effects of attachment and emotional regulation on the inter-brain (IBS) and cardiac synchronization of an Experimenter-Participant dyad, in a group of participants exposed to a stressful stimulus.

Methods: A total of twenty participants between the ages of 20 and 30 years were recruited. Before the start of the experiment, questionnaires were administered to each participant. Next, the participant would establish direct eye contact with the Experimenter, both before exposure to the stressful stimulus and afterward. Throughout the experiment, the EEG and cardiac activity of the Participant-Experimenter dyads were recorded.

Results: Analyses showed that Participant-Experimenter dyads composed of participants with high levels of emotional dysregulation showed lower inter-cerebral synchronization in specific bands and localized in specific brain areas, compared with participants with low levels of emotional dysregulation. In addition, insecure attachment dimensions had an influence on IBS and heart rate, during the stressful stimulus. These differences were maintained after exposure to the stressful stimulus.

Discussion: This would suggest that social interaction, through processes of electrophysiological co-regulation, may be an important means of regulating the affect associated with exposure to stressors. In



addition, such co-regulation could be influenced by psychological variables. These findings suggest interesting both theoretical and clinical implications.

The Brain Wave Modulation Technique's impact on Heart Rate Variability: first evidences to stress management

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Abstract

Introduction: Many studies highlight an increase in levels of psychological distress that significantly impact the health of the population, emphasizing how particularly young individuals are exposed to various specific threats to their mental health. Research has identified several neurophysiological parameters that can be used as indicators of the level of stress to which a person is subjected. Among these, from the literature, it emerges that heart rate variability (HRV) is a reliable psychophysiological index for stress detection: low HRV is associated with a condition of stress, while high HRV indicates good stress management or recovery from it. Several studies that have assessed psychological variables such as perceived distress, emotional regulation and anxiety have already demonstrated the effectiveness of Brain Wave Modulation-Technique (BWM-T) particularly on distress management. The BWM-T allows that brain waves with fast and intense frequencies (beta waves) are replaced by the slower waves brain waves with a higher amplitude that are typical of relaxation and deep sleep, resulting in a generalized state of psychophysical well-being. This study aims to examine the impact on heart rate variability (HRV) of a single session of BWM-T compared to a psychoeducation session.

Methods: The sample consists of 80 university students randomly divided into experimental and control groups. The experimental group undergoes the BWM-T session, while the control group undergoes the psychoeducation session. For both groups, pre- and post-session tests were administered to evaluate psychological distress. Heart Rate Variability (HRV) was assessed using biofeedback technology, the PANAS (Positive and Negative Affect Schedule) is used to assess emotional regulation; the STAI-Y (State-Trait Anxiety Inventory) to assess state and trait anxiety, and the Stress Thermometer to detect perceived stress.

Results: The results showed a statistically significant difference in heart rate variability between the two groups. A significant increase was observed in the experimental group in three parameters: SDNN, High Frequency (HF) and in LF /HF ratio (Low Frequency/High Frequency).



Discussion: These results suggest that BWM-T may have a positive effect on heart rate variability, promoting greater flexibility and adaptability of the cardiovascular system, as well as more efficient activation of the parasympathetic nervous system.



The psychosocial distress in oncohematological patients during different stages of the illness: protective and risk factors

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Abstract

Introduction: hematological cancers have a deeper impact on mental health than solid tumours due to their unpredictable illness trajectories. The studies on the psychological distress of oncohematological patients are scarce, cross-sectional, and mostly referred to the classical taxonomy (i.e. DSM-5). This study aimed at assessing psychological distress across different stages of oncohematological illness and investigating potential protective and risk factors.

Methods: Forty-two patients were recruited from the Haematology Unit of the Santa Chiara Hospital (Pisa). After the evaluation of psychosomatic syndromes via the Diagnostic Criteria for Psychosomatic Research- Revised (DCPR-R), patients were also assessed via self-report tools: Mental Pain Questionnaire – MPQ, assessing mental pain; Symptom Questionnaire for anxiety - SQ-ANX and for depression - SQ-DEP; Psychosocial Index for psychosocial distress - PSI-PD; Impact Event Scale-Revised as a measure of post-traumatic symptoms - IES-R; Schedule for Meaning in Life Evaluation – SMILE assessing the meaning in life). The self-report instruments were proposed two weeks after the diagnosis of blood cancer (T0), at the beginning of chemotherapy (T1), three months later (T2).

Results: The majority of the sample was male, married, had an average age of 56,16 ($\pm 15,99$) years and a diagnosis of multiple myeloma. The most prevalent DCPR-R syndromes were: allostatic overload (21%), demoralization (21%), alexithymia (17%). The number of psychosomatic syndromes at T0 predicted the variability of PSI-PD ($R^2=0,181$, $\beta=0,74$, $p=0,012$) and IES-R at T1 ($R^2=0,269$, $\beta=0,820$, $p=0,001$), and IES-R at T2 ($R^2=0,284$, $\beta=0,65$, $p=0,002$), whereas SQ-ANX ($R^2=0,573$, $p=0,000$), SQ-DEP ($R^2=0,52$, $p=0,000$), MPQ ($R^2=0,397$, $p=$) at T1 were predicted positively by the number of DCPR-R and negatively



by the SMILE both measured at T0. The SMILE at T0 predicted SQ-ANX ($R^2=0,562$, $\beta= -0,23$, $p=0,000$), SQ-DEP ($R^2=0,379$, $\beta= -0,19$, $p=0,001$), MPQ ($R^2=0,321$, $\beta= -0,10$, $p=0,003$) measured at T2.

Discussion and conclusions: psychosomatic syndromes are a risk factor for the development of psychological distress during the chemotherapy, whereas meaning in life showed to be a protective factor.



**BEYOND TRAUMA AND DISTRESS: VITAL AND ELABORATIVE PROCESSES IN
HEALTH PROFESSIONALS WORKING IN ILLNESS CONTEXTS**

Proposer

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Discussant

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Abstract

In previous decades, a vast body of literature has delved into the traumatic experiences and distress faced by health professionals working with individuals afflicted by both mental and somatic serious illnesses. Specifically, evidence suggests that encountering individuals undergoing potential trauma due to their disease condition and treatments can exacerbate distress and lead to emotional dysregulation. Particularly in cases of mental and somatic diseases, abundant evidence indicates that continual exposure to suffering can result in vicarious trauma, impacting both the professional and personal well-being of healthcare providers.

Conversely, less attention has been given to the vital and elaborative processes that physicians, nurses, and other healthcare professionals employ to cope with vicarious trauma and distress. The present proposal seeks to foster discussion on theoretical and empirical approaches to studying the growth, coping, and elaborative processes encountered by healthcare providers in their daily professional interactions with patients' suffering.

Four research groups will participate in the symposium: a group from Florence will present a theoretical and methodological exploration of autobiographical narrative as a self-elaboration process in healthcare providers. A second group (Padua) will explore the role and functions of experts by experience (ESPs), i.e. former users of mental health services who, at the end of a training course



aimed at developing self-awareness and specific skills in the elaboration of their own autobiographical narratives of severe mental distress, become practitioners, able to help new users in crisis. This process of elaborating narratives will be explored and discussed during the symposium.

A group from Milan will discuss a research study on the role of coping strategies in mediating moral distress experienced by health professionals working in oncological settings. Lastly, the group from Salerno will present a systematic review of vicarious post-traumatic growth in healthcare providers working in illness contexts.

The invited discussant will facilitate a discussion on the presented studies by comparing and analysing different approaches to studying the vital and elaborative processes involved in the experience of caring for individuals suffering from mental and physical serious illnesses.



Coping with moral distress: A qualitative study exploring the strategies used by healthcare professionals

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Abstract

Introduction: Moral distress is a specific type of stress related to the moral dimension of clinical practice. Literature shows that moral distress is associated with depressive symptoms, job resignation and burnout. However, few studies have explored the psychological factors that can modulate moral distress. The aim of this qualitative study was to explore the range of strategies employed by healthcare professionals (HPs) to cope with moral distress.

Methods: Using a snowball sampling technique, a purposeful sample of interdisciplinary HPs working in a large public hospital in Milan (Italy) was recruited. Semi-structured interviews were conducted. HPs were asked to recall morally distressing situations and how they coped in their aftermath. The interviews were audio-recorded, transcribed and analyzed through content analysis to identify strategies used to cope with moral distress.

Results: We interviewed 20 HPs (11 physicians, 7 nurses, 1 midwife and 1 physiotherapist; 15 females; mean age = 50.26; SD = 8.19). We identified 105 thoughts and behaviors used to cope with moral distress which were organized into 8 strategies: 1) reframing the situation, 2) trying to modify the situation, 3) limiting own involvement, 4) tolerating the situation, 5) meeting and sharing with colleagues, 6) rejecting and withdrawing from the situation, 7) searching for alternative actions, and 8) venting. Typically, HPs used more than one strategy (mean=4.1; SD=1.14) and recounted learning and adapting strategies over time.

Discussion: Our findings suggest that strategies used to cope with moral distress seemed partially distinct from those used for emotional distress. Future research is needed to explore possible distinctions or overlap between general coping and moral coping. In the future, identifying strategies associated with low levels of moral distress could guide the implementation of preventive interventions for HPs.



Telling to understand: the narrative paradigm and the experience with illness

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Abstract

Introduction: Working in contact with illness is a stressful experience for health professionals that necessitates a form of protection that is not merely defensive but such as to allow a greater awareness of the processes enacted within this professional activity. Clinical practice, when it is based on an important use of language, and research in the socio-cognitive field have long identified storytelling as one of the avenues that can foster this self-awareness. This paper aims to explore what theoretical and empirical foundations underlie the narrative paradigm and under what conditions telling about one's experiences with illness can have beneficial effects on the self.

Methods: The various clinical methods based on storytelling assume that communicating one's emotional experiences to a listener can, under certain conditions, benefit the storyteller. On the other hand, research on recollection narration has shown that recounting the same event several times in writing or orally leads to memory changes. Both of these sources of data have in common the transformation from thought processes to linguistic processes and the hypothesis that recounting in the present may promote the processing of recollection of events that occurred in the past.

Results: One of the research and intervention trends that emerged in recent decades that valued the contribution of narrative in medicine was narrative medicine (NBM). However, paradoxically, this theoretical and practical orientation has made insufficient use of the models offered by narrative psychology. This showed, according to Vygotsky's original hypotheses, how storytelling involves a transformation of memories, thoughts, and emotions into language. Thought from egocentric becomes social and the storyteller becomes more aware of it. However, this transformation is not always beneficial or useful for the storyteller. It can be so provided if the narration takes place within a dialogic context in which the listener knows, or is enabled to, interact empathically with the narrator through appropriate verbal and nonverbal exchanges. In this case, the narrative becomes richer, more structured and in-depth in terms of the account of lived experience.



Discussion: Working with narratives together with health care personnel can be an effective way to improve the relationship with the patient and provide an important tool for working with oneself. In this regard, experiences from narrative medicine, appropriately integrated with those from narrative psychology, present themselves as a very useful approach. It will be necessary, however, to try to make the operational implications of this approach compatible with a hospital context that is very often in difficulty in finding appropriate space and time for their full implementation.



Vicarious Post-Traumatic Growth in professionals working in illness contexts: a systematic review

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Abstract

Introduction: Over the last twenty years, there has been a focused exploration within scientific research on the notable positive transformations that individuals can experience in response to traumatic or highly challenging events. This phenomenon has been termed "Posttraumatic Growth". Professionals operating in healthcare and illness-related environments often encounter distressing and emotionally taxing material. However, scant attention has been given to exploring the potential positive outcomes stemming from exposure to secondary traumatic stress in this population, known as Vicarious Post-Traumatic Growth (VPTG). This paper seeks to review existing studies on VPTG among healthcare workers operating in settings related to illness.

Methods: A systematic search of PubMed, ScienceDirect, Scopus, and WebOfScience databases was conducted to identify all relevant research studies focusing on Vicarious Post-traumatic Growth in medical healthcare. The search targeted titles, abstracts, and keywords containing terms such as 'Vicarious posttraumatic growth', 'Secondary trauma and posttraumatic growth', or 'Secondary posttraumatic growth'.

Results: Out of 1712 titles screened, 17 research articles meeting the inclusion criteria were identified. These included 13 quantitative studies, 2 qualitative studies, 1 mixed-method study, and 1 intervention study. Quantitative research primarily assessed VPTG using the Post-traumatic Growth Inventory. However, there was variability among the screened studies concerning participant demographics, measurement instruments, and data analysis techniques. Several studies explored the relationship between secondary traumatic stress and VPTG, yielding mixed findings.

Discussion: There is a clear need for expanded research into VPTG among healthcare workers to inform interventions aimed at enhancing well-being and mitigating levels of secondary traumatic stress among clinicians. The findings of this review offer practical insights and avenues for both future research and clinical intervention.



Overcoming one's own severe psychological disease and turning it into help for others.

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Abstract

Introduction: For mental health professionals, the process of elaborating one's own experiences is considered a necessary requirement as it is at the basis of the guarantee of professionalism. This presentation focuses on a very specific case of professionalism: that of experts by experience (EbE), i.e. former users of mental health services who, at the end of a training course aimed at developing self-awareness and specific skills in the elaboration of their own autobiographical narratives of severe mental distress, become operators, able to help new users in crisis. The process of elaborating narratives will be explored and critically discussed.

Method: A systematic search of the international literature on courses to become an Expert by Experience allowed for a mapping of the training courses activated and the skills considered necessary in various contexts around the globe, in order to transform one's personal experience into a professional role.

Results: The skills reported in the various studies include: stigma management, the ability to share one's experience in a safe and professional manner, self-management and strategies for maintaining one's well-being and countering relapse, active listening and communication skills, knowledge about the functioning of mental health services and the collaborative approach in team work. The training courses to become Experts by Experience active in different countries around the world seem to be characterised by very different objectives and skills for the elaboration of personal experience. The length and in-depth study of the various topics are also very variable. Italy is only at the beginning of this adventure and has adopted a German training model (Ex-In), in the absence of a local tradition capable of adapting training to the specificity of Italian Mental Health Services and their *modus operandi*.

Discussion: The analysis makes it possible to highlight how, at the base, there are different ways of conceptualising the figure of the EBE and his possible integration in health care teams. The pressing invitation of the World Health Organisation to make services participatory and to build them in full and active collaboration with users, implies a twofold effort: on the one hand, it is necessary to understand what the basic skills are, in order to develop awareness of one's own history and make it useful to others;



on the other hand, a second challenge is addressed to services, which are called upon to rethink their modes of intervention. The inclusion of ESPs can be extremely advantageous in this sense: within the space of the team, experiential knowledge can help to promote the reflexivity of professionals and a radical rethinking of established practices in the direction of bringing them closer to the real needs of patients.



PARENTHOOD EXPERIENCE IN CHALLENGING CONDITIONS

Proposer

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Discussant

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Abstract

The transition to parenthood is a challenging process marked by the interaction of multiple psychosocial factors. Parents may undergo contrasting emotional experiences from the period of waiting through the process of growing the child, with the risk of a negative impact on individual and relational well-being. This scenario becomes more difficult when non-normative conditions and uncontrollable events occur. These might include unfavorable and adverse health conditions (e.g., infertility or a medical diagnosis), but also extraordinary environmental and social situations (e.g., a pandemic or a geographically close war). This symposium examines the parenting experience occurring under complex clinical and social circumstances. The contributions are presented in a chronological timeline, beginning with conception and ending with hereditary issues. Starting from the desire to have a child, a first contribution by Bonazza et al. involves patients undergoing Medically Assisted Reproduction (MAR) treatment, exploring individual (e.g., anxiety, depression, stress) and relational psychological well-being (e.g., sexuality, couple conflict), and identifying profiles of patients based on their emotional experiences related to MAR treatment performing a cluster analysis. Subsequently, the contribution of Caffieri et al. studies a sample of women in the perinatal period straddling the end of the pandemic and the outbreak of the Russian-Ukrainian war, exploring the predictors of worry about the future, the psychological response to collective crises, and the related relational dimensions. Then, Babore et al. investigate the practical and emotional impact of cancer on parental function in adults with underage children. The study focuses on the psychological well-being, the quality of the parent-child interaction, and the children's psychological adjustment. Finally, the single-case study of Vagnini et al. explores the themes of motherhood and



heredity in both symbolic and genetic dimensions. The research centers on a woman diagnosed with BRCA-associated hereditary breast cancer, delving into her family experiences, the decision-making process regarding her health, and the emotional feelings related to the cross-generational transmission of the cancer risk and the parenthood journey through pregnancy and child development.



The transition to parenthood through Medically Assisted Reproduction

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Abstract

Introduction: The diagnosis of infertility and Assisted Reproductive Technology (ART) treatment can lead to emotional, social, sexual, and relational challenges that negatively impact the well-being of each partner and the couple's relationship. The aim of this study was to assess individual and relation wellbeing and delineate the psychological profile of patients undergoing ART treatment.

Methods: A sample of 101 heterosexual couples (N=202) undergoing ART treatment at the Center for Assisted Reproduction of the ASST “Spedali Civili” in Brescia was recruited. Participants completed questionnaires that assess individual psychological wellbeing (Hospital Anxiety and Depression Scale, Partnership Questionnaire), relational wellbeing (Adaptation Questionnaire Interpersonal, Experiences in Close Relationships), parental self-efficacy (The Perceived Collective Family Efficacy Scale), and the experience related to infertility (Fertility Problem Inventory). They filled out a questionnaire addressing socio-demographic and fertility data.

Results: Findings reveal significant gender differences in the psychological well-being related to infertility. Women report higher levels of anxiety, social concern, and fear of abandonment, suggesting a predominant impact on their individual well-being. Conversely, men exhibit higher levels of conflict and concerns related to sexuality, indicating a greater influence on couple well-being for this group. Furthermore, the results highlighted that the nature of the infertility diagnosis is a determinant of psychological well-being in terms of depression and stress for women only. Those with a diagnosis of idiopathic infertility show higher levels of depression than women with a diagnosis of infertility exclusively of their own making. Whereas if the diagnosis involves the couple, women report higher levels of stress than in cases where the diagnosis only involves the partner. The cluster analysis profiles of women and men showed significant differences over resources and risk factors.

Discussion: The results highlighted individual and relational challenges associated with the transition to parenthood under infertility conditions. Specific groups of patients were found to be at higher risk for psychological symptoms, revealing areas of potential distress that should be considered for implementation of best practice points.



Birthing parenthood and world crises: worry about the future and the role of environmental factors in women in the perinatal period.

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Abstract

Introduction: In recent years, the perception of an uncertain future for the planet and humans led by the fear of the COVID-19 pandemic, as well as, the worries about climate change and wars emerged as possible “collective risks” which increased worries during the perinatal period, impacting maternal well-being.

As a part of wider research on the psychological health of perinatal women during “collective crises”, the current study aims to explore the predictors of the worry about the future in women in the perinatal period at a specific moment, hence, at the end of the pandemic health emergency, and after the onset of the Russian-Ukrainian war.

Methods: A total of 200 women, of which 125 pregnant women and 75 women during postpartum, participated in the cross-sectional study. The association between the worry about the future, psychological response to collective crises such as COVID-19, and the Russian-Ukrainian war, along with relational aspects such as attachment to the partner, loneliness, and closeness to significant others were tested. The online survey comprised: the Impact for Event Scale-Revised (IES-R) adapted for COVID-19 and war, the Experience in Close Relationship Scale - Short Form (ECR-S), the UCLA-Loneliness 3 Scale, and the Inclusion of the Others in Self (IOS) scale adapted for people and events.

Bivariate correlations and linear regression analyses were used to explore the association between the worry about the future and its predictors in perinatal women.

Results: Significant associations between worry about the future, closeness to collective events, loneliness, and variables related to the relationship with the partner emerged. In particular, regression analyses showed that higher levels of COVID-19-related post-traumatic impact, higher perception of closeness to the war, and anxious attachment to the partner were associated with higher worry about the future in pregnant and postpartum women.



Discussion: The results suggest that the psychological response to “collective crises” played an important role in predicting the worry about the future in pregnant and postpartum women. These findings shed light on the necessity to deepen the interrelations between collective, intrapersonal, and interpersonal factors that influence worries during perinatal experience and their implications for perinatal anxiety.



Psychological perspectives on BRCA-associated breast cancer and motherhood: A single-case exploring health decision-making and parenthood through cross-generational symbolic and hereditary dimensions

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Abstract

Introduction: Pathogenic germline mutations in the BRCA 1/2 genes increase the possibility of developing breast and/or ovarian cancer, passing the risk down to future generations. The disease and its treatments impact, anatomically and functionally, areas of the body that culturally symbolize femininity and motherhood and are often perceived by women as a threat to their identity. Further, women deal with a range of other issues, such as managing the risk of cancer, telling family and partners about their status, and making hasty decisions about protecting their fertility in case of loss of reproductive potential after therapies. This can significantly affect their family life planning and increase their emotional burden. This study takes an idiographic life-course approach and investigates the psychological dimensions surrounding BRCA2-associated breast cancer in an Italian woman. We investigated family relations and the experiences of cancer management and parenthood to better comprehend the woman's emotional state as well as individual and couple adjustment.

Methods: We designed a qualitative single-case study. The participant is Adele, a businesswoman in her forties with a husband and two underage sons. The primary data gathering method was narrative inquiry with in-depth interviews concerning the family history, the disease, the treatments, but also feelings linked to symbolic and genetic inheritance, and finally the parenthood journey through pregnancy and child development. We also administered the Family Genogram to explore family boundaries, communication styles, and elements that cross generations, with a particular focus on BRCA mutation. The interview transcripts were analyzed using a hermeneutic-phenomenological method and a thematic analysis.

Results: We extracted five core themes. Adele's troubled emotionality emerged meaningfully in reference to past memories as well as her current sense of guilt towards her children. She emphasizes the value of healthy and good family ties and her husband's crucial assistance in health issues and family management and communications over time.



Discussion: An inherited health risk marks the generations. Acceptance and forgiveness, as well as maintaining strong family bonds, are key to making well-informed health-related decisions and not feeling like failed parents for the fate reserved for the children.



Navigating parenthood and cancer: challenges and implications

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Abstract

Introduction: Receiving a cancer diagnosis is a profoundly challenging experience, evoking a multitude of emotions such as fear, anxiety, and uncertainty. Notably, a significant proportion (14%–25%) of cancer patients are parents of minor children (Inhestern et al., 2021). For these individuals, the emotional burden extends beyond themselves to include concerns about their children’s well-being and future. Cancer may disrupt the parental role, encompassing both practical caregiving tasks and emotional support (Muriel et al., 2012). Parents may encounter difficulties fulfilling their typical caregiving responsibilities, not only for physical limitations associated with treatment or emotional distress stemming from the diagnosis but also for parenting-related issues. Exploring the impact of cancer on parental function is crucial for designing psychosocial support that acknowledges the dual responsibilities of parents as caregivers and patients.

Methods: Participants comprised 411 adults (mean age = 45.29 years; SD = 8.03) with cancer and having underage children (i.e., <18 years). They filled in the following tools: the Parenting Concerns Questionnaire (PCQ), to measure the practical and the emotional impact of illness on child, and concerns about coparent; the Strengths and Difficulties Questionnaire (SDQ) to assess parents’ perceptions of their children’s psychological adjustment; and the Parent-Child Dysfunctional Interaction (PCDI), subscale of the Parenting Stress Index.

Results: Parents with cancer reported significant practical and emotional impact on their parental role. The children’s emotional problems scale (SDQ) showed the highest correlations with all PCQ subscales. Furthermore, our findings suggest that a cancer diagnosis in parents can affect the quality of the parent-child relationship and the psychological adjustment of their children.

Discussion: A cancer diagnosis in parents may disrupt their capacity to effectively fulfill caregiving responsibilities and may particularly impact children’s emotional well-being. These findings underscore the necessity of support and interventions addressing the emotional needs of both parents and their underage children facing with parental cancer.

CLINICAL PSYCHOLOGY IN THE HOSPITAL: INTERVENTIONS AT DIFFERENT STAGES OF THE LIFE CYCLE

Proposer

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Discussant

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Abstract

The implementation of clinical psychology in hospital settings is increasing significantly, as is the number of psychologists employed in different hospital departments. In the hospital, clinical psychologists often work with patients who not only vary in medical pathology but also in age group, from pediatric to elderly. These aspects make the work of the hospital clinical psychologist complex, and this professional is often required to have multiple skills that enable him or her to act in these different fields and age groups.

This symposium will present studies conducted in various Italian hospitals on patients of different age groups to describe some of the clinical psychological assessment and therapeutic intervention protocols that can be implemented in this setting.

The first contribution (Carola, Nicolais) investigated the psycho-bio-physiological factors implicated in the modulation of irritable bowel syndrome and migraine in children (enrolled in the Pediatric Unit of the Sant'Andrea Hospital in Rome). Specifically, the authors aimed to identify biological (inflammatory markers) and psycho-physiological (heart rate variability) alterations mediating the association between medical conditions and potentially stressful socio-relational environments in this sample.

The second contribution investigated (Carletto, Merola, Oliva, Giovinazzo, Testa, Cacciato, Benedetto, Cosma) the psychological factors associated with perceived pain in adult women with endometriosis (enrolled at the Sant'Anna University Gynecological Hospital in Turin) and assessed the feasibility and



symptom remission capacity of implementing a mindfulness- and compassion-based intervention in that sample.

The third contribution (Perlini, De Lucia) illustrated the results of a study investigating older adults' experiences and views (attending an Italian Pain Therapy Center) about adopting e-health solutions for chronic non-cancer pain management in everyday life.

The primary objective of the fourth study (Morabito, Fossati, Vegni) was to evaluate the trend in the request for psychological consultancy within hospital departments (ASST Santi Paolo e Carlo - Milan) in the post-pandemic period. The secondary objective was to describe the patient's needs, expressed in the request for psychological support, based on the hospital ward in which the patient was admitted and his age.



The psychological consultation in the hospital: Anatomico-physiology of the patient's first contact with clinical psychology

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Abstract

Background. During the 2020-2021 pandemic period, there has been an increase in anxiety and depression, as well as emergency room admissions for emotional distress issues. The psychology operating units of Lombardy's ASSTs responded to the health emergency caused by COVID-19 by offering various psychological interventions to hospital staff, hospitalized patients, and their relatives. This experience has given centrality to the figure of the psychologist and enhanced the role of hospital psychology in inpatient wards, raising awareness of the functional support of psychological counseling in the hospital among healthcare professionals and patients.

The primary objective of the study was to assess the trend of psychological counseling (aka VePs - visit and opinion) required within hospital wards in the post-pandemic period 2022-2024. The secondary objective was to describe the patient's needs, as expressed in the request for psychological support, according to the inpatient ward in which the patient was admitted, and to their age.

Methods. VePs completed between January 2022 and April 2024 at the San Paolo and San Carlo hospital hubs in the Milan area (including 900 beds) were retrospectively collected through the Galileo hospital database. For each consultation, the requesting department, month, and type of service were noted through the Excel software. Later, a content analysis was carried out on the first interview with patients.

Results. The analysis is currently ongoing. Comparing preliminary data, in the first quarter of 2023 there was an increase of requests for psychological counseling of 42% compared to those of the first quarter of 2022. Looking at the same period, in 2024 requests increased by 15% compared to 2023. The departments with the highest demand (more than 50 requests over the first months) were Oncology, Obstetrics and Specialized Rehabilitation.

Discussion. Preliminary results of the study seem to confirm an increasing trend of requests for psychological counseling in some hospital departments. From an initial reading of the phenomenon, it appears that COVID-19 has raised awareness of the attitude of healthcare staff (physicians, nurses, etc.)



regarding the benefit of psychological intervention to patients, encouraging them to request it during hospitalization.



Health needs, adverse event exposure and psychological symptoms of women with endometriosis and preliminary results of the effects of a mindfulness and compassion-based intervention

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Abstract

Endometriosis is a gynecological disease that affects approximately 6–10% of all women in reproductive age. Chronic pain is recognized as a common denominator (80% of patients) of endometriosis, and exposure to stressful and/or traumatic events, associated with symptoms of depression, anxiety, PTSD and pain catastrophizing, appears to have an impact on pain perception. Mindfulness-based interventions have shown beneficial effects for the reduction of perceived pain and associated psychological symptoms in chronic pain conditions.

The study aimed at investigating psychological factors associated with perceived pain levels in a sample of women affected by endometriosis, enrolled at the Regional Reference Center for endometriosis at the Sant'Anna Gynecological University Hospital of A.O.U. "Città della Salute e della Scienza di Torino", Italy. Also, the aim was to evaluate the feasibility and effects of a mindfulness and compassion-based intervention (MBI).

The clinical assessment was performed during routine gynecological visits through self-administered questionnaires about anxiety, depression, stress, PTSD symptoms, levels of perceived and catastrophizing pain and exposure to adverse events. Afterwards, women were invited to participate at a MBI, which consists of 6 group meetings of 2 hours each.

Preliminary results (n=120) showed that 78% of the sample presented with chronic pain symptoms. The main health need was pain in 77.5% and infertility for 22.5%. Symptoms of depression were present in 46.6%, while anxiety symptoms were reported by over three quarters of the sample (76.6%). Clinically relevant levels of pain catastrophizing and post-traumatic symptoms were found in 25% and 25.8%,



respectively. The median number of stressful/traumatic events to which the women had been exposed in their lives was 3, with physical abuse in 12%, sexual abuse in 5.8%, emotional neglect in 28% and physical neglect in 3.3%. Preliminary analysis of the MBI effects showed a significant reduction of depressive symptoms ($p=0.006$) and of pain catastrophizing levels ($p=0.007$). The perception of pain intensity levels and anxiety symptoms did not show a significant reduction.

Investigating the complex interplay between pain perception and psychological factors could inform effective interventions to improve quality of life of women affected by endometriosis.



Older adults' views and experiences with e-Health in coping with chronic pain: a qualitative exploration among the Italian old population

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Abstract

Introduction: Chronic non-cancer pain (CNCP) is a significant health problem for older adults, with negative consequences in terms of individual functioning and quality of life. e-Health solutions to support pain self-management have recently been implemented in the older population with promising results, but several barriers remain. To date, only a few qualitative research, none of which are in Mediterranean countries, have investigated the older adults' experiences and views in relation to the adoption of e-Health solutions for CNCP management in everyday life, as well as the potentiality and barriers to using such solutions for health and pain-related purposes.

Methods: We adopted a multimodal approach, i.e. semi-structured interviews and self-reported questionnaires, in order to explore the above aspects in older adults (age range: 65-80 years; any type of CNCP) attending an Italian Pain Therapy Center. We utilized thematic analysis to examine the emerged qualitative data.

Results: In general, interviewees indicated adopting a range of strategies to cope with pain, but they also displayed an attitude characterized by resignation to their CNCP. Almost 70% of the participants stated that they utilized digital devices for pain management and health-related purposes, which involved basic organizing activities. Concerning the potential useful function to be incorporated in e-Health tools, the analysis of the interviewee's opinions provided the following four themes: "Specific pain self-management skills; ii) "Support in organizing various health-related aspects"; iii) "Sharing experiences with others"; "Increasing pain-related personal knowledge". The following themes about opinions on potential barriers to using these tools emerged: "Computer illiteracy"; ii) "Negative effects/risks"; iii) "Impersonal interaction"; iv) "Physical limitations".

Discussion: A perceived dearth of digital skills frequently coexists with the poor adoption of e-Health solutions. Thus, it would be crucial to take steps to improve older adults' digital literacy through focused



educational interventions and increase their pain management self-efficacy before implementing new e-Health solutions.



Functional somatic symptoms and exposure to stressful environments in children: an integrative psychological, physiological and biological study

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Abstract

Introduction: There is large evidence that childhood exposure to stressful socio-relational environments is associated with increased rates of functional somatic symptoms (FSS), that is physical symptoms that cannot be fully explained by organic pathology. The association between

childhood adverse experiences and FSS - especially, unexplained irritable bowel syndrome (IBS) and migraine symptoms (M) - has been largely documented in adults. In contrast, this association has been much less investigated in school-aged children. To fill this gap, we aimed to investigate whether GSI and M were associated with different stress experiences and/or psychological susceptibility, in children and adolescents. In addition, we wanted to test whether the association between organic symptomatology and stressful socio-relational environments is mediated by biological/physiological alterations. We particularly hypothesized a modulatory/associative role for coagulatory factors, inflammation markers

Methods: The children/adolescents were recruited at the Pediatric Clinical Unit of the Sant'Andrea University Hospital in Rome. Patients were medically evaluated for IBS and M symptoms and those suspected of having a psychosomatic origin of symptoms were enrolled in the current study. The psychological investigation includes an initial interview with the child/adolescent followed by self-report questionnaires on psychosomatic symptoms and the relationship quality with caregivers. Heart rate variability (HRV) is monitored while administering a semi-projective test to explore the child's attachment patterns. Finally, blood was collected and levels of coagulation and inflammation markers were analyzed.

Results: Preliminary results showed high levels of anxious symptoms in both IBS and M patients. Alteration of the bonding attachment relationship with the caregivers was also observed. Interestingly, such alteration was associated with a specific HRV pattern. Finally, a preliminary analysis of coagulation and inflammation markers in both groups showed changes in their levels in these groups.

Discussion: Our results started to shed light on the possible psychological and socio-relation alterations associated with IBS and M in pediatric patients. The biological mechanisms by which stress and trauma in children "translate" into somatic changes are currently unknown, and therefore our results on



biological and psychophysiological alteration in IBS and M children would be useful in designing intervention protocols that can mitigate the long-term effects of stress in the future



A QUESTION OF IDENTITIES? MENTAL HEALTH, GENDER DISPARITIES AND MINORITIES

Proposer

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Discussant

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Abstract

The present symposium is organized by the Early CAREER RESEARCHERS' network (E-CARE) of the Italian Association of Psychology. E-CARE involves researchers at the first stage of their career and promotes opportunities for learning, networking, interdisciplinarity and internationalization, creating spaces for discussion and comparison between professionals on important topics of interest to the scientific community.

In line with our goals, this symposium illustrates various facets associated with the mental health and identity among young adults in the Italian context, stimulating reflections on behavioral, social and psychological issues, associated with gender disparities, LGBTQ+ community and social media use.

Therefore, Cavazzoni, Bordianu & Fasola focus on an analysis of gender bias in academia, highlighting persistent disparities in including women in professional positions and in several aspects of the academic work, which impact on their perception of quality of life and work-life balance.

Based on gender issues, Gemignani explores the role of stigma related to family acceptance or rejection and its influence on mental health among LGBTQ+ community, underlining the importance of family support in developing mental issues. In the same line, Santoniccolo illustrates a systematic review on the role of minority stress in eating disorder among sexual and gender minorities (SGMs). According to the



review of the literature, this correlation could be mediated by body shame and gender-related pressures, that increase the risk for developing eating issues among SGMs.

Finally, Giordano and Calaresi explore factors influencing body image and identity, highlighting a complex relation between social support, problematic social media use and Muscle dysmorphia (MD).



Social Support, Social Media Use, and Muscle Dysmorphia: A Mediation Analysis

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Abstract

Introduction: Muscle dysmorphia (MD) is considered a psychological condition characterized by the fear of being excessively thin and weak and can result in maladaptive practices such as of disordered eating behaviors, overtraining, social or occupational impairment, and even the use of anabolic-androgenic steroids. While previous research has identified various psychological factors contributing to the development and maintenance of MD, the roles of perceived social support (PSS) and problematic social media use (PSMU), remain unclear. The aim of this study was thus to verify the potential mediating role PSMU in the relationship between PSS and MD.

Methods: The sample consisted of 1067 individuals (67.9% women) aged 18-29 years. Participants were asked to complete the following validated self-report measures: Multidimensional Scale of Perceived Social Support, Bergen Social Media Addiction Scale, Muscle Dysmorphic Disorder Inventory. Structural equation modeling with latent variables was conducted to test the following model: PSS as predictor, PSMU as mediator, MD as outcome.

Results: The proposed model revealed good fit indices: $\chi^2(180) = 990.868$, $p < .001$; CFI = .96; TLI = .95; SRMR = .06; RMSEA = .05. Negative paths were highlighted from PSS to PSMU ($\beta = -.23$) and from PSS to MD ($\beta = -.34$). Furthermore, a positive path from PSMU to MD was found ($\beta = .46$). Finally, PSS was found to be indirectly linked to MD through PSMU ($\beta = -.11$).

Discussion: The findings emphasize the need for comprehensive assessment and intervention strategies that consider the influence of social factors, particularly PSS and PSMU, on the development and maintenance of MD. Healthcare professionals working with individuals at risk for or diagnosed with MD could consider interventions aimed at enhancing social support networks and promoting healthier patterns of social media use. Interventions could include psychoeducation on the potential negative impact of excessive social media use, as well as skills training in building and maintaining supportive relationships offline.



Gender disparities in Italian academia: findings from an explorative study among early-career researchers

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Abstract

Despite significant progress in mitigating gender bias in academia over recent decades, research continues to highlight its persistent and systematic presence within Italian and European institutions. In 2010, women constituted 59% of all graduates in Europe, but only 20% held professorial positions – a figure that rose to 28% by 2020. These disparities extend beyond the realm of full professorship, permeating all aspects of academic work, including publication rates, citation metrics, patent applications, and prestigious scientific awards. In the Italian context, although women outnumber men among university graduates, their career advancement remains slower, highlighting how the gender gap widens with career advancement. Following a well-known pattern, as academic roles ascend, female representation declines – illustrated by a decreasing percentage of women from fellows to full professors. The present study attempts to explore the structural, systemic, and personal factors contributing to these disparities, advocating for further research and exploration. More specifically, this exploratory work employed a questionnaire administered to around 800 early career researchers (Ph.D. students, post-doc researchers, and fixed-term researchers) from different academic institutions in Italy, to gain insight into their perception of daily life within academia, their experiences of discrimination, quality of life and work-life balance. Findings revealed gender and socioeconomic status as pivotal determinants of divergent perceptions regarding discrimination, quality of life, and the difficulty of reconciling work and private life. The study offers significant insights for developing interventions to support the well-being of university staff, reduce gender discrimination, and foster greater awareness of these issues.



The role of minority stress in disordered eating: a systematic review

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Abstract

Introduction: Sexual and gender minorities (SGMs) appear to be at a heightened risk of disordered eating compared to heterosexual and cisgender people, a disparity which may be caused by exposure to minority-specific stressors, such as discrimination and violence. The objective of this systematic review is to summarize available evidence on the role of minority stress in disordered eating, highlighting SGM-specific aspects.

Methods: Following PRISMA guidelines, scientific search engines (EBSCO, PUBMED, Web of Science) were screened up to January 2024, including English-language original research papers containing analyses of the relationship between minority stress and disordered eating. 2416 records were gathered for screening. After application of inclusion and exclusion criteria, 65 reports were retrieved. Thematic analysis was conducted regarding 4 research questions: effects of minority stress on disordered eating, possible mediating factors, specificities of SGMs and differences between identity categories.

Results: 30 studies were included. Several aspects of minority stress are reliably associated with higher odds of disordered eating and eating pathology, including specific forms such as binge eating, overeating, fasting and food addiction. The relationship between minority stressors and disordered eating was mediated by aspects such as shame, body shame, or negative affect. SGMs show several specificities, such as the presence of a role of LGBTQIA+ communities and additional gender-related pressures. Among SGMs, bisexual people and gender minorities appeared to feature comparatively higher risks, and gender-related factors shape paths leading to disordered eating risk.

Discussion: Minority stress appears to be an important predictor of disordered eating, making SGM people's health particularly at risk. Institutional and organizational anti-discrimination policies are needed and may help prevent impacts on psychological and physical health. Clinical interventions may benefit from exploring and incorporating how minority stressors affect SGM people and their psychological characteristics, such as shame and emotional regulation. Further research is needed on mediating characteristics, intersectional aspects, the role of communities, and underrepresented and understudied identities.



Mental Health of LGBTQ+ Young Adults in Italy: Navigating the Experiences of Different Identity Intersections in terms of Family Acceptance

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Abstract

Introduction: LGBTQ+ young adults experience severe forms of stigma that are associated with negative mental health outcomes. Filtered through the lens of intersectionality, the general objective of this cross-sectional study was to examine the associations between LGBTQ+ youths' experiences of family acceptance or rejection and their psychological well-being.

Methods: In total, $N=249$ LGBTQ+ participants, aged from 18 to 30 years, completed an online survey that comprised a socio-demographic questionnaire, the Parental Acceptance Rejection Questionnaire (PARQ), the Parental Acceptance and Rejection of Sexual Orientation Scale (PARSOS), the Generalized Anxiety Disorder-7 (GAD-7), and the Patient Health Questionnaire-9 (PHQ-9).

Results: The findings confirmed that a higher perception of parental rejection was connected to lower levels of mental health of LGBTQ+ individuals. LGBTQ+ young adults with multiple minority statuses (e.g., belonging to multiple minority groups for the sexual orientation and gender identity) were at greater risk of parental rejection and negative mental health outcomes.

Discussion: The importance of naming different identity intersections, as well as recognizing their experiences in terms of family acceptance and mental health, is discussed in terms of the potential implications for the clinical and social fields in Italy.



**TAKING CARE OF THE HEALERS: PSYCHOLOGICAL WELLBEING OF
HEALTHCARE WORKERS**

Proposer

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Discussant

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Abstract

The COVID-19 pandemic shed light on healthcare workers' psychological conditions, reducing mental health stigma in clinical workplaces. The literature indicates that healthcare workers face a heightened risk of experiencing both short- and long-term psychological consequences, including an elevated risk of suicide. This underscores the critical importance of closely monitoring their mental health and instituting targeted interventions to safeguard their well-being. Recognizing the significance of this issue, efforts to mitigate burnout and psychological symptoms among healthcare professionals have emerged as a critical healthcare policy goal globally. In hospitals, both individual and group interventions could be delivered. Individual-focused interventions include monitoring their mental health and implementing a counseling service to reduce the psychological distress that healthcare professionals experience. On the other hand, stress management training, Balint groups, and focus groups could be delivered in clinical settings to identify healthcare workers' needs and improve their resources and skills. Moreover, clinical supervision, delivered both in an individual and a group setting, could increase the healthcare workers' knowledge and ensure emotional support. Making efforts to implement interventions for healthcare workers' well-being may also improve routine medical care.



Doctor-Patient Relationship: Insights from Qualitative Analysis of Healthcare Professionals' Experiences

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Abstract

Background: The COVID-19 pandemic has posed unprecedented challenges for healthcare workers globally, prompting a concerted focus on their psychological well-being. In response, we conducted the "Healthcare Workers' Well-being" longitudinal project from May 2020 to July 2021, engaging a cohort of 1055 healthcare professionals. Findings highlighted subclinical distress levels during the pandemic, underscoring the pervasive impact of stress on well-being rather than manifesting as overt psychopathological symptoms.

Methods: Building upon this foundation, we undertook qualitative research in November 2022. A focus group convened with five oncologists from IRCCS Ospedale San Raffaele in Milan, employing semi-structured interviews to delve into their nuanced experiences within doctor-patient relationships.

Results: Analysis of the focus group discussions revealed five salient themes: 1) Patient awareness regarding their illness, 2) The necessity for a solid therapeutic alliance, 3) The delicate balance between instilling hope and preserving transparency in patient communications, 4) The physicians' desire to provide human connection to patients, and 5) Challenges in communicating with patients.

Despite emphasizing the importance of doctor-patient relationships, physicians identified several multifaced barriers to effective patient engagement, including patient-related variables, institutional intricacies, lack of specialized training, and apprehensions surrounding emotional entanglement.

Conclusion: The focus group proved instrumental in understanding both physicians' and patients' needs and challenges, facilitating the identification of necessary tools and knowledge to enhance patient engagement and care relationships. These insights have significant implications for the psychological well-being of both healthcare professionals and patients, underscoring the importance of tailored interventions to improve patient and physician care experiences.



Balint Groups as a Support Strategy in Pediatric Cardiology Nursing: Analysis of Burnout and Interaction with Parents

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Abstract

Introduction: This study aimed to explore the psychosocial challenges faced by nurses in pediatric cardiology, specifically focusing on their interactions with patients' parents and experiences with burnout, and to evaluate the possible perceived benefits of Balint Groups.

Methods: Two focus groups were conducted by a psychologist (EC) and a patient representative (GC), comprising nursing staff from pediatric cardiology department, with a unique composition of 13 and 6 members respectively. The groups were held online on Microsoft Teams and were structured around a series of thematic areas, including interactions with parents, burnout identification and management and considerations on Balint Groups. In addition, Wooclap was utilized to allow for anonymous polls and open ended questions. The initial transcript generated from Microsoft Teams was corrected and analyzed, and together with the Wooclap results they were analysed by following thematic analysis indications.

Results: Participants detailed difficulties in confronting parents with negative news, managing opposition to medication or medical practices in general, and dealing with parents' anger and frustration during stressful situations like prolonged hospitalization of the child. Nurses employed listening to understand parents' concerns and signaled particularly stressed parents to the coordinator and psychologist. There was a noted use of personal resources, alongside an awareness of the need for further training and support. Out of the combined 19 unique attendees, 12 responded to the burnout experience question, with 5 indicating they had experienced burnout. The most popular frequency for meetings was monthly, as indicated by 9 out of 16 respondents across both groups.



Discussion: The evidence from the focus groups points to significant psychosocial stressors for nursing staff, including intricate parent interactions and burnout. The preference for monthly Balint Group meetings highlights a need for regular, structured support. The feedback provided by participants offers a vital insight into how Balint Groups can be tailored to address the specific challenges faced by nurses in pediatric cardiology, potentially leading to improved well-being for staff and enhanced patient care outcomes.



Consequences of the COVID-19 pandemic on mental health and the use of online therapy

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Abstract

Introduction: Mental health professionals faced increased demand for psychological treatment interventions during the COVID-19 pandemic, experiencing work overload and a higher likelihood of emotional distress linked to burn-out. Most therapies were transferred online during lockdown, utilizing various technological tools that often became integral to current therapeutic practice.

This study aims to explore the impact of the pandemic on mental health professionals' psychological and occupational distress, including their perceptions of changes in clinical work methods, the advantages, and limitations of online therapy. The study also aims to evaluate and compare levels of burnout among mental health professionals post-COVID-19, based on whether they offer online therapy.

Method: Semi-structured interviews were conducted with 20 therapists (psychiatrists, psychotherapists, psychologists); 91 mental health professionals completed an online survey. A mixed-methods approach was adopted: the qualitative phase captured phenomena in their complexity, while the quantitative phase included socio-demographic surveys and self-assessment questionnaires about burnout and perceptions of online therapy.

Results: Analysis of interview texts revealed recurring themes. Regarding mental distress, themes emerged such as burn-out, isolation, changes in sleep patterns, feelings of uncertainty. Concerning the use of online therapy, its utility was acknowledged, but in-person modalities with patients were preferred. Professionals maintained online interviews for patients with debilitating physical illnesses or in medical deserts in peripheral or rural areas.

Analysis of questionnaire results showed no significant differences in burn-out scores among mental health professionals between those who offered online therapy and those who did not.

Discussion: To protect individual mental health, it is crucial to anticipate interventions for psychological support and provide early attention and care to vulnerable individuals. This allows for designing resources



for rapid, personalized access to mental health services and ensuring continuous, long-term mental care even in challenging circumstances.

The findings of this study will inform the implementation of action plans or follow-ups in the event of new pandemics and conceptualize new models of remote psychological care.



Identifying the risk factors for emotional distress among healthcare providers involved in adverse events: a seemingly unrelated regressions analysis

Isolde Martina Busch¹, Mariangela Mazzi¹, Fiammetta Cosci², Loretta Berti¹, Veronica Marinelli³, Francesca Moretti¹, Olga Maggioni¹, Albert W. Wu⁴, Michela Rimondini¹

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Abstract

Introduction: The second victim phenomenon, which occurs when healthcare providers are involved in an adverse event (AE) and experience emotional distress, is a complex issue. Despite the importance of this concept for our healthcare system, only a few studies have been conducted on Italian healthcare providers so far. As part of the larger validation study of the WITHSTAND-PSY Questionnaire (WS-PSY-Q), we aimed to screen individuals who were affected by an adverse event for emotional distress, as well as to identify potential risk factors for anxiety and depression.

Methods: Two hundred eighty-four participants responded to the anonymous online survey, which included the WS-PSY-Q, the Beck Depression Inventory-II (BDI-II) and the State-Trait Anxiety Inventory (STAI-Y). Within the validation study, BDI-II and STAI-Y served as instruments to assess concurrent validity. Descriptive analyses as well as seemingly unrelated regression (SUR) models, jointly estimating anxiety and depression, were conducted using Stata (Version 18).

Results: Fifty-nine percent of the 284 participants screened positive for anxiety (WS-PSY-Q anxiety subscale ≥ 16), 37% for depression (WS-PSY-Q depression subscale ≥ 22), and 35% exhibited comorbid anxiety and depression. The final SUR model indicated that symptoms of anxiety after the AE, measured by the WS-PSY-Q anxiety subscale, could be predicted by pre-event anxiety ($p < 0.01$), the request for psychological help ($p < 0.05$), perceived responsibility ($p < 0.01$), the severity of the consequences of the AE ($p < 0.05$), and a punitive workplace climate ($p < 0.05$). Predicting variables for post-event depressive symptoms, as measured by the WS-PSY-Q depression subscale, included pre-event depression ($p < 0.01$),



perceived responsibility ($p < 0.01$), the severity of the consequences of the event ($p < 0.01$), a punitive or neutral workplace climate ($p < 0.05$), and seeking for psychological help ($p < 0.01$).

Discussion: Our study contributes to the increasing knowledge about the mental health challenges faced by healthcare providers in Italy following adverse events. We identified several risk factors for second victims' emotional distress at the individual and the system level. Our findings suggest the need to implement preventive mental health strategies for healthcare staff, monitor their symptoms after adverse events, and foster a strong safety culture.



Saturday, 14th September 2024

THEMATIC SESSION

“EATING DISORDERS AND EATING BEHAVIORS”

Chair:

Laura Salerno

University of Palermo



From food addiction to binge eating behaviors: the mediating role of negative feelings and emotional eating

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Abstract

Background. Food addiction (FA) is commonly associated with overeating and uncontrolled eating behaviors. However, there is still limited research on the pathway from FA to these behaviors. Existing literature suggests that FA can trigger both cognitions and negative emotions (e.g., guilt and lack of control), as well as emotional eating (EE) – an intense urge to eat as a coping mechanism for negative emotional states like anxiety, anger, and sadness. These negative emotions and EE often precede binge eating behaviors. Despite the extensive study of FA, no research has examined the impact of this psychological process. Therefore, this study aims to address this gap by conducting sequential mediation analysis.

Methods. A total of 212 participants (79 M and 133 F; Mage = 38.71, SD = 12.75) with BMIs ranging from 31.77 to 40.23 (M = 35.33, SD = 6.19) were recruited from the general population. They were assessed using the modified Yale Food Addiction Scale 2.0 (mYFAS2.0), the Emotional Eating Scale (EES), the Feelings/Cognitive subscale of the Binge Eating Scale (FC-BES), and the Uncontrolled Eating subscale (UE) of the Three Factor Eating Questionnaire Revised 18 (TFEQ-R-18). Sequential mediation analysis (5,000 bootstrap) with observed variables was conducted.

Results. The relationship between mYFAS2.0 and FC-BES was found to be statistically significant ($p < .001$), which was further associated with the Emotional Eating Scale (EES) ($p < .001$). Additionally, the EES was a significant predictor of the UE subscale. The total explained variance (R^2) was 0.682.

Discussions. These results emphasize – once again – the crucial role of feelings/cognitions in predicting maladaptive coping strategies such as emotional eating. Furthermore, emotional eating could initiate maladaptive behaviors associated with excessive food intake, originating from food addiction.



Recognizing the pivotal role of emotions may assist clinicians in developing targeted psychological interventions.



Exploring Eating Disorders and Body Dissatisfaction in Military Populations: A Preliminary Study in Italy

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Abstract

Background: Eating disorders and body dissatisfaction are subjects of study across various subgroups, including military populations and veterans (Forbush et al., 2017). However, these categories have not yet been extensively explored in the literature within the Italian context, with only a limited number of studies evaluating eating disorders in the military. Given that body dissatisfaction stands out as one of the most robust risk factors for eating disorders, particularly prevalent in military populations, our study aims to assess the presence of body dissatisfaction and eating disorders within the military. Additionally, we investigate the potential relationship between eating disorders and state-trait anxiety, both state and trait components.

Method: We conducted a study using two separate samples: sample "A" consisting of 1689 subjects belonging to the general population and a sample "B" consisting of 477 subjects affiliated with the Law/Police Enforcement and Military Departments (the military sample). Data were collected from the Italian population through an online platform (Google Form), accessible from any Internet-connected device. Measures used in the study include the Eating Attitude Test- EAT-26 (Garner et al., 1982), the Body Uneasiness Test (BUT) (Cuzzolaro et al., 2006) and the Spielberger State-Trait Anxiety Inventory (STAI) (Spielberger, 1983).

Results: Preliminary findings indicate significant differences between the sample A (general population) and sample B (military sample), with intriguing distinctions observed regarding eating disorders and body dissatisfaction between men and women in both samples.

Discussion: Body dissatisfaction emerges as a robust risk factor for eating disorders, with the highest morbidity and mortality among mental health illnesses (Stice, Shaw, & Marti, 2007). It is associated with weight gain, obesity, increased binge eating, decreased physical activity, and adverse mental health outcomes (Neumark-Sztainer et al., 2006). This study explores body dissatisfaction in the military population in Italy, an aspect not yet addressed in the literature (Carr-Nangle et al., 1994). Limited studies have evaluated eating disorders in the military, and prevalence estimates vary widely due to self-report



surveys (Reger et al., 2009). Stigma around mental health issues in the military may influence responses, impacting the accuracy of prevalence estimates (Hoge et al., 2004). While military populations are typically healthier, evidence suggests an increasing number of recruits are overweight, mirroring rising rates in the general population (Bray et al., 2018). The Italian context remains relatively unexplored. Our study fills this gap by shedding light on the prevalence of eating disorders and body dissatisfaction within the Italian military.



A network model of psychological determinants of sustainable and healthy eating behaviors and intentions

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Abstract

Background: The promotion of sustainable and healthy eating is gaining more and more attention nowadays, as non-healthy diets are associated with several environmental and health-related problems, such as obesity and non-communicable diseases. However, it is still unclear how the transition from the intention to engage in more sustainable eating behaviors to the actual behaviors takes place, and which psychological factors play a role in this relation. Based on an extended version of the Theory of Planned Behavior (E-TPB), the present study is aimed at exploring the relation between the intention to engage in sustainable and healthy eating behaviors, predictors of the intention, sustainable and healthy eating behaviors and possible psychological determinants including psychological well-being, dysfunctional eating styles and distress, through a network analysis.

Methods: 192 participants from the general population (mean age: 30.08 ± 9.72 ; 71.4% females) completed an online survey including a questionnaire on TPB and E-TPB predictors of the intention, the Sustainable and Healthy Dietary Behaviors (SHDB) questionnaire, the Psychological Well-Being Scale (PWBs), the Dutch Eating Behavior Questionnaire (DEBQ) and the Depression and Anxiety Stress Scale (DASS-21).

Results: Within the estimated network model, the items with the highest strength centrality – that is, items that were core to the model – were PWB-self-acceptance (strength: 2.2), intention (strength: 1.2), PWB-personal growth (strength: 0.7) and the E-TPB predictor of the intention habits (strength: 0.6). The individual edges with the highest weights in the network – that is, the strongest associations between the items – were the positive edges connecting the variables intention and E-TPB-affect (weight: 0.44) and SHDB-food choices and intention (weight: 0.22).

Conclusions: Based on a novel methodology, the findings of the present study highlight the association between clinical psychological variables, such as holding positive attitudes toward oneself and being able to grow and expand as a person, and sustainable eating behaviors, as well as the importance of the emotional valence attributed to these behaviors. The promotion of PWB might therefore be clinically useful to encourage more sustainable eating behaviors, and at the same time engaging in such behaviors



might increase PWB, supporting the important contribution that clinical psychology might give to the sustainable eating research field.



Longitudinal Assessment of Quality of Life using electronic patient-reported outcome (ePRO) monitoring in inpatients with anxiety, depression and eating disorders

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Abstract

The assessment of Quality of Life (QoL) in psychiatric patients is an important indicator of the impacts of the treatment. It signifies the overall success of the adopted psychiatric interventions. This analysis aims to evaluate the effect of multimodal inpatient therapy that was performed at the ward for Psychosomatic Medicine at the University Clinic for Psychiatry II, Medical University of Innsbruck, on the QoL of almost 350 patients presenting with anxiety, depression, and eating disorders. By monitoring ePRO from the point of admission to the discharge from the hospital, the study attempts to clarify the direct contributions of psychiatric inpatient treatments on patient's QoL. Among other instruments, we employed the WHOQOL-BREF, a globally recognised self-reported measure of QoL, to assess the QoL of the patients. Data were collected as part of the routine electronic patient-reported outcome (ePRO) assessment, which is performed weekly on the ward for Psychosomatic Medicine for all inpatients. The initial findings demonstrated QoL improvements post-treatment, highlighting the effectiveness of multimodal treatment protocols and demonstrating the usefulness of ePRO monitoring in surveilling patients' QoL trajectories in longitudinal assessments.



Examining the relationship between cognitive flexibility and orthorexia nervosa: a 8 structural equation model

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² Department of Experimental Medicine, Sapienza University of Rome, Rome, Italy

Abstract

Introduction: Cognitive flexibility, operationalized as the ability to consider different available alternatives in various scenarios, the willingness to act flexibly and adapt to the situation, and one's self-efficacy in being flexible, has been recognized as a psychological correlate in Feeding and Eating Disorders. However, evidence investigating its association with Orthorexia Nervosa (ON), a proposed clinical entity characterized by a pathological obsession with healthy eating, is lacking to date. This study aimed to fill this knowledge gap. *Methods:* A total of 401 participants (Mage = 33.40, SD = 9.16; 66.8% females) completed the Cognitive Flexibility Scale (CFS) and the Orthorexia Nervosa Inventory (ONI) assessing cognitive flexibility and orthorexic tendencies, respectively. A structural equation modelling approach was employed to examine the association between these constructs. *Results:* After accounting for theory-based covariates, structural equation modelling revealed that cognitive flexibility was negatively associated with emotional distress resulting from violations of orthorexic dietary rules ($\beta = -0.279$, $p < .001$). More specifically, participants with higher scores of cognitive flexibility reported lower emotional distress stemming from ON tendencies. On the other hand, cognitive flexibility was not significantly associated with orthorexic behaviours ($\beta = 0.044$, $p = .509$) and ON-related physical impairment ($\beta = -0.124$, $p = .083$). *Discussion:* These findings suggest that improving cognitive flexibility could play a central role in reducing the distress caused by orthorexic symptoms. This insight could lead to the development of more effective therapeutic approaches tailored to address pathological healthy eating.

The association of childhood traumatic experiences with binge eating: a path analysis of the mediating role of narcissistic vulnerability, emotion regulation difficulties and dissociation in a sample

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Abstract

Introduction: A history of maltreatment is consistently observed in individuals with eating disorders. Emotional and physical trauma and abuse have been linked with binge eating, and the contribution of several constructs to this relationship has been suggested. Namely, narcissistic vulnerability, emotion dysregulation and dissociative experiences have been shown to affect binge eating severity and propensity either independently or in association each other and with childhood trauma. Therefore, our study aims to verify within a single path analysis model the direct and indirect impact of this complete set of variables on binge eating.

Methods: Exposure to emotional, physical and sexual traumatic experiences during childhood, narcissistic vulnerability, emotion regulation difficulties, dissociative states and binge eating were assessed with self-report questionnaires in an Italian sample of 434 adolescents (age: $M = 13.91$, $SD = 1.71$; females: $N = 216$, 49.9%).

Results: Indices of fit for our model were satisfactory ($\chi^2(54) = 1630.45$, $p < .001$; $RMSEA = 0.065$; $SRMR = 0.040$; $CFI = 0.982$; $TLI = 0.939$). Gender invariance of the model was tested but no difference between male and female subsamples emerged ($\chi^2_{diff}(24) = 24.16$, $p = 0.452$). An indirect path linked emotional abuse but no other forms of trauma with binge eating through narcissistic vulnerability, emotion regulation difficulties and dissociation, explaining 30% of the variance of binge eating.

Discussion: Emotional abuse appears to be a significant risk factor for binge eating among adolescents, and the findings of the present study provide support for the intermediary role of personality structure fragility and the ensuing emotional dysregulation and dissociative tendencies in this relationship. Since our analyses tested a specific pathway which was invariant for males and females and was not significant for other types of traumata, future studies should explore similar models further to better understand the mechanisms through which gender and different forms of childhood maltreatment affect binge eating.



Saturday, 14th September 2024

THEMATIC SESSION

**“ADOLESCENTS' AND YOUNG ADULTS' EXPERIENCES AND
CHALLENGES”**

Chair:

Elisa Del Vecchio

University of Perugia



Exploring the Role of Psychological Individual Functioning in the Representations of Gender-Based Violence in Adolescence: A Cross-Sectional Study

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

Abstract

Introduction: Gender-based violence (GBV) is a public health issue that can assume multiple forms, moving from psychological to physical violence, to lack of consent, and the more recent trends related to the consumption and exchange of online content. The literature has extensively focused on risk factors, such as adverse childhood experiences or a history of previous victimization, and on resilience factors, like secure attachment, in relation to perpetrating or being a victim of GBV. Few studies, however, have focused on perceptions of GBV in adolescence. Thus, the individual psychological variables, such as deficits in emotion regulation, mentalizing, or epistemic trust that might play a role in representations of GBV in adolescence remain unclear. Analyzing perceptions connected to GBV to prevent it is, therefore, an important issue to address to inform society, educational institutions, and mental health services towards a common base of knowledge and good practices.

Method: A cross-sectional study was conducted to identify core processes related to individual functioning, such as difficulties in emotion regulation, deficits in mentalizing, and epistemic mistrust, that may affect recognition and critical evaluation of GBV. $N = 300$ adolescents (aged 15 to 18 y.o.) were recruited and completed an online battery of self-report questionnaires.

Results: It is expected that higher levels of emotion dysregulation, lack of mentalizing, and high epistemic mistrust will significantly affect individual perception of GBV. Particular attention will also be paid to the recent forms of violence, such as revenge pornography or controlling behavior in the digital age.

Conclusion: The results will be discussed both in reference to the current state of scientific literature on the subject and from the perspective of empirical implications. Investigating GBV representations and highlighting the specific role of specific psychological variables is essential in designing awareness-raising and prevention interventions to enhance adolescents' awareness and well-being.



Minors involved in juvenile court proceedings. Recurring factors: research in Piemonte and Valle d'Aosta

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Abstract

Introduction: From the perspectives of prevention, protection, and safeguarding, further investigation into the conditions of fragility and/or risk that may impact the developmental process of minors is necessary. The aim of this study is to collect data on minors involved in the protection system and investigate potential risk and protective factors, as well as their potential interactions.

Methods: The sample comprises 240 minors involved in proceedings of the Juvenile Court of Piemonte and Valle d'Aosta. The proceedings, defined and definitive for the period 2019-2021, concern cases of adoptability and loss of parental responsibility. We established a set of variables based on the ecological theoretical model, which considers different levels of investigation and intervention: individual, family, and social. Additionally, variables related to the quality of assuming responsibility from a predominantly social-health perspective, as well as variables related to legal responsibility procedures, were included.

Results: The number and complexity of the studied variables enabled the identification of interesting aspects related to biopsychosocial stress conditions and the care of the involved minors. Descriptive analysis revealed recurring factors affecting the family context, such as socioeconomic disadvantage, experiences of maltreatment and/or abuse by one or both parents, psychopathological aspects, and conflictual couple relationships. Among the aspects identified in minors, neglect emerges as the most common form of maltreatment, and emotional functioning is the most impaired. Maltreatment experiences of parents correlate with similar experiences of minors, which in turn correlate with difficulties on cognitive, affective, and behavioral levels.

Discussion: For monitoring and planning purposes, those involved in care could benefit from knowledge of specific factors influencing the developmental trajectory and protection of minors. The data obtained can provide important insights and comparisons for the subsequent planning of preventive measures to be implemented in the area under consideration.



Understanding the Risk of Pathological Social Withdrawal in Adolescents: the role of Anti-mattering, Shame, and Emptiness

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

Abstract

Pathological Social Withdrawal (PSW) consists of complete withdrawal from social interactions which typically begins in early adolescence and leads to considerable functional impairment and various adverse symptoms. Clinical evidence revealed that the experiences of shame and emptiness are particularly relevant among socially withdrawn adolescents. Shame implies a global negative self-evaluation driven by the fear of not meeting social expectations and norms, emptiness is associated with feelings of dissatisfaction or emotional detachment, and may manifest as a sense of lacking fulfilment or personal accomplishment. Recent studies highlighted a significant association between shame and anti-mattering, defined as the fear of not mattering to others. In our hypothesis, anti-mattering may contribute significantly to the risk of developing PSW through both feelings of shame and emptiness. Therefore, the aim of the present study was to verify this hypothesis by testing a structural equation model (SEM). A self-report questionnaire was administered to a sample of 762 Italian adolescents (54.6% females; Mage = 15.67 ± 1.48). Results from structural equation modeling (fit indices: $\chi^2 = 2593.718$, $df = 962$, $p < 0.001$; RMSEA = 0.047; CFI = 0.92; TLI = 0.92; SRMR = 0.048) showed that the fear of not mattering to others (anti-mattering) predicted increased shame and emptiness, which in turn predicted a higher risk of developing PSW in adolescents. This study revealed that adolescents who feel insignificant and unimportant to others are more prone to feel shame and emptiness. These negative emotions, in turn, are associated with a higher risk of developing PSW. Our results could support the hypothesis that the tendency to PSW may serve as a dysfunctional coping strategy aimed at avoiding the fear of not being relevant in social relationships, and managing the emotional states of shame and emptiness deriving from it. Overall, our study contributes to the growing body of research on the risk of PSW by elucidating the role of anti-mattering, shame, and emptiness in its development. These findings may help clinicians and researchers to develop and implement more effective interventions to prevent the risk of developing PSW in adolescence.



Emotional dysregulation and the obsession with healthy eating: preliminary results of a psychoeducational intervention in adolescents.

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Abstract

Introduction: Emotional regulation processes are always the focus of studies exploring eating styles. Emotional regulation represents the set of strategies and behavioural patterns that the individual implements to manage emotions. Alexithymia is defined as a disorder of emotional regulation in which a deactivating or avoidant strategy predominates, caused by the difficulty of cognitive and symbolic processing of emotional experience. Few studies in the literature explore the monitoring and emotional regulation abilities in subjects with orthorexic tendencies, characterised by an obsession with healthy eating. Alexithymia and suppressive emotional regulation strategies seem to be associated with a tendency towards restrictive dietary rules as a coping strategy to feel in control.

The aim of the present study is to evaluate in a group of adolescents the effectiveness of a psychoeducational intervention in improving metacognitive emotional regulation skills and reducing pathological concerns about healthy eating.

Methods: The sample consists of 65 students, predominantly female (61%), attending the second year of a school in the city of Foggia. Almost half of the sample exceeded the cut-off of alexithymia (44%). The subjects completed a battery of tests to assess alexithymia (TAS-20), emotional regulation strategies (ERQ) and orthorexic tendencies (TOS).

Results: In line with the observational results, subjects with greater difficulties in recognising and discerning emotions appear to show more concerns about healthy characteristics of food. Difficulties in emotional regulation are associated with suppressive strategies ($r=0.59$; $p<0.005$). A significant difference in measures of orthorexia was observed following the psychoeducation intervention, with a decrease in scores at post-intervention follow-up ($p<0.05$).

Discussions: The present study suggests that there is a correlation between emotional regulation factors and restrictive eating styles, similar to what is observed in other eating disorders. Psycho-educational interventions appear to have a moderate impact in reducing certain food choices.

The role of the Intolerance of Uncertainty and Non-pathological Worry on Italian Young Adults' Mental Health: An Exploratory Study with Serial Mediation Models

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Abstract

The complexity of the developmental tasks of the transition to adulthood, already exacerbated by economic and social difficulties, has more recently been compounded by collective traumatic events such as the pandemic and war. This set of factors has fostered an increasingly anxious representation of the future, experiences of uncertainty and pervasive worries in young adults. These factors are capable of affecting young adults' mental health and, in the Italian context, it represents an emergency.

The relationship between Dark Future Time Perspective (or Future Anxiety), a construct recently introduced in Italy, and several negative mental health outcomes is reported in the literature, although the effect of possible mediating variables on it has not been investigated yet. In order to shed new light on this 'malaise-causing' relationship, the present study explores the joint mediating effect of Intolerance of Uncertainty and Non-pathological Worry in the relationship between Future Anxiety and Psychological Distress in a group of 302 young Italian adults (18 - 30 years; $M = 21.9$; $SD = 2.6$).

Findings of the three serial mediation models conducted reveal a significant and positive direct effect of Future Anxiety on Intolerance of Uncertainty and Non-pathological Worry, as well as on self-reported levels of Stress and Depression. In all mediation models, Intolerance of Uncertainty and Non-pathological Worry positively mediate the relationship between Future Anxiety and Psychological Distress. The combined effect of the two mediators highlights how young adults with greater Future Anxiety experience more Intolerance of Uncertainty, which positively affects their Non-pathological Worry levels, thus exacerbating psychological distress. This serial relationship is particularly visible in the Anxiety model where the joint effect of mediators on the investigated relationship generates a fully-mediated serial model. Subsequent sensitivity analyses confirmed these results. Finally, the results indicate that female participants experienced more Stress, Anxiety and Depression in relation to Future Anxiety than the male counterpart.

The exploration of the relationships among the variables selected for the present study and its results open up to new trajectories for the understanding of the sources of youth distress and contribute to the design of targeted intervention projects.

Profiling the contribution of cognition and personality to psychosis proneness course in young adults via individual environmental loadings

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Abstract

Background. Transient Psychotic-Like Experiences (PLEs) occur in about 15% of the healthy population lifetime and decrease from childhood onwards. PLEs persistency is associated with a fourfold increased risk of psychosis onset from early adolescence to young adulthood. Neurodevelopmental changes in this time window - together or subsequent to environmental stressors - may shape dysfunctional patterns of personality and cognitive functioning. Therefore, we aimed at investigating how time series of data-driven cognitive and personality subtypes of cognitive and personality functioning, identified over adolescence, may influence the individual load of environmental risk (e-risk) on adult PLEs.

Methods. A sample of 666 participants recruited by the IMAGEN consortium was assessed across Baseline (BL: 13-15 years), Follow-Up (FU) 1 (16-17 years), FU2 (18-20 years) and FU3 (21-24 years). K-means clustering was separately applied to cognitive and personality data collected at BL and FU2. The cumulative e-risk load on PLEs levels at FU3 was modeled via Random Forest Regression (RFR), including 41 sum predictors, evaluating substance use and stressful life events across FU1, FU2, and FU3. ANOVA and correlation analyses tested the association of clustering assignments and prototypicality, respectively, with RFR e-risk individual predictions.

Results. At both BL and FU2, two cognitive subtypes grouped individuals based on good vs. poor decision-making. Three personality subtypes separated “easy-going”, “impulsive explorers”, and “self-focused” individuals. The RFR-based calculator of longitudinal e-risk predicted FU3 PLEs with 81% accuracy. At BL and FU2, only the main effect of personality subtype assignment on PLEs e-risk load was significant



($p < 0.001$). The e-risk load on adult PLEs was also negatively associated with individual prototypicality for the easy-going subtype at BL ($\rho = -0.154$; $p = 0.02$) and positively for the self-focused subtype at FU2 ($\rho = 0.31$; $p < 0.001$).

Discussion. Our data-driven behavioral subtyping at different adolescence stages revealed a differential role of specific personality patterns in contributing to the longitudinal life stressors- and substance use-related burden on adult PLEs. Personality functioning may be a potential target of early intervention aimed at softening the environmental contribution to subthreshold symptoms' severity.



Separation anxiety in adolescence: a developmental challenge in the family triad

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Abstract

Symptoms of separation anxiety in adolescence are not only a clinical psychopathological aspect but also an evolutive one, in the challenge of separation-individuation. Several studies suggest that the ways in which adolescents and their parents navigate changes and developmental tasks have substantial implications for growth processes and psychophysical and social well-being. Specifically, research has highlighted how parental separation anxiety could dramatically influences adolescent development. There are few studies investigating these processes considering the family. Our research aims to investigate how this construct is articulated within the triad: adolescent, mother, and father. Specifically, we employed network analysis including the general psychological adjustment of adolescents, their separation anxiety, maternal and paternal separation anxiety, and their general anxiety. We also considered the adolescents' age and gender, presence of other siblings, and family situation. We analyzed data on 685 triads (286 males, 396 females, 2 not specified, 1 missing). Results indicate a positive and significant relationship between adolescents' psychological difficulties (SDQ_tds_a) and mothers' general anxiety (GAD-7), and a positive and significant relationship between separation anxiety (SCAS) and mothers' separation anxiety (ASA_M_TOT). Regarding the fathers, there is only a significant positive relationship between the separation anxiety of the mother and that of the father. Also, we found that the increasing separation anxiety of the father also leads to higher general anxiety in fathers. Family situation (whether parents are separated, married, or divorced), parents' educational level and occupation, the age of adolescents, and the presence of other children show no relationship with the variables. On the other hand, the data suggest a gender effect, with female adolescents displaying higher levels of separation anxiety and psychological difficulties compared to males. Further analyses using mixed-effects models suggest that this gender difference becomes clear at subclinical levels of SCAS and SDQ but tends to disappear when the levels of SCAS and SDQ reach clinical relevance. It is crucial to study psychological processes within the family triad rather than solely focusing on the dyad.



The Impact of Inclusive Educational Practices on LGBTQI+ Youth's Mental Health: Insights from a European Cross-National Study

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Abstract

Introduction: Extensive research has consistently shown disparities in the well-being of LGBTQI+ youth compared to their heterosexual and cisgender counterparts. Much of this research has focused on the adverse experiences faced by LGBTQI+ youth at school as key contributors to these disparities. Consequently, there has been a growing interest in examining school-based strategies designed to alleviate these inequities. However, our understanding of the impact of such policies in the European context remains limited. This study addresses this knowledge gap by exploring the impact of inclusive educational strategies on the well-being of LGBTQI+ students across thirteen European countries.

Method: Data from 16,150 LGBTQI+ students ($M_{age} = 15.89$; $SD = 1.61$) were collected through an online survey conducted in Austria, Belgium, Croatia, France, Greece, Ireland, Italy, Latvia, Netherlands, Slovenia, Spain, Portugal, and the UK. The survey encompassed a range of psychological well-being measures, including depression (PHQ-2), anxiety (GAD-2), suicidal ideation (SBQ-revised), self-esteem (Rosenberg, 1989), resilience (Smith et al., 2008), and non-suicidal self-injury (Prinstein et al., 2008). Participants also reported on perceived teacher support (De Clercq et al., 2014), representation of LGBTQI+ issues in the classroom, and availability of comprehensive sexual education.

Results: Multilevel regression analyses, controlling for age, sexual orientation, gender identity, and immigration status, show that teacher support and positive representation of LGBTQI+ issues in the classroom had a protective effect on all well-being outcomes. Inclusive sexual education was associated with lower levels of depression and anxiety and higher levels of self-esteem. Conversely, a negative representation of LGBTQI+ issues in the classroom was linked to higher levels of depression, anxiety, suicidality, self-harm, and lower levels of resilience.

Discussion: Our findings underscore the importance of creating inclusive and supportive educational environments for LGBTQI+ youth to promote their well-being. This study offers valuable insights that can



inform further research, policy, and intervention efforts providing a deeper understanding of how cultural and societal norms shape the experiences of LGBTQI+ students within European educational contexts.



Saturday, 14th September 2024

ROUND TABLES



**THE BIO-PSYCHO-SOCIAL MODEL IN THE THIRD MILLENNIUM: NEW
CHALLENGES AND OPPORTUNITIES IN CLINICAL PSYCHOSOMATIC**

Proposer

*Silvana Grandi*¹

¹ Alma Mater Studiorum Bologna

Participants

Lorys Castelli, University of Turin

Annunziata Romeo, University of Catania

Lillybeth Fontanesi, "G. D'Annunzio" University of Chieti-Pescara

Maria Francesca Freda, University of Naples Federico II

Adriano Schimmenti, Kore University of Enna

Abstract

This round table will explore the evolution and application of the bio-psycho-social model in the context of clinical psychosomatic, with a particular focus on emerging challenges and opportunities. The bio-psycho-social model, originally proposed by Engel, has significantly impacted modern psychosomatic practice and education. However, recent critiques have raised questions about the model and its sensitivity to the patient's subjective experience.

This round table aims to provide a platform for critically discussing the bio-psycho-social model, improving patient-centered care and offering more effective and personalized treatments in the context of clinical psychosomatic. By addressing these critiques, the discussion will pave the way for exploring new precision methodologies and personalized therapeutic approaches.



**GUIDELINES FOR THE DIAGNOSIS AND TREATMENT OF MILD AND SEVERE
COGNITIVE DECLINE IN THE ELDERLY**

Proposer

*Maria Casagrande*¹

¹ Sapienza University of Rome

Discussant

Maria Catena Quattropani, University of Catania

Participants

Nicoletta Locuratolo, Higher Institute of Health

Abstract

In 2019, the population of individuals aged 60 years and older reached one billion, and it is projected to reach 1.4 billion by 2030 and 2.1 billion by 2050. The process of aging is conceptualized as a multifactorial phenomenon, characterized by a progressive decline in functional capacity and an increase in comorbidities that are proportional to advancing age. Nevertheless, the World Health Organization (WHO) has developed the concept of "healthy aging," which entails a process of enhancement and preservation of the functional capacities that contribute to the well-being of the elderly. This process has implications for not only older individuals and their families, but also for society. It is essential that healthcare systems provide timely support and resources for the management of age-related conditions. Nevertheless, impediments such as elevated healthcare costs, delayed diagnosis, and the lack of efficacious treatments can impede societies and individuals from achieving this collective objective. The effective and reliable diagnosis of physiological cognitive decline and mild cognitive impairment (MCI), which often represents a transitional phase between physiological aging and the pathological condition of dementia, is essential for the development of effective interventions. However, one of the challenges



researchers face when studying MCI is the lack of consensus regarding diagnostic standards. The prevalence of MCI is estimated to vary significantly. A recent literature review reports a prevalence of MCI between 1.2 percent and 87 percent. It is unclear whether these significant discrepancies are due to methodological factors (such as differences in study population or assessment tools and procedures) or constraints associated with the definition and operationalization of MCI criteria. It is of great importance to determine the prevalence of MCI in order to inform clinical practice, research, and public health systems. In light of the considerable number of individuals affected by dementia and cognitive disorders, as well as the substantial economic burden these conditions impose, it is crucial to prioritize an effective public health response. The early detection of cognitive decline enables the rapid implementation of interventions that can counteract or slow disease progression. A priority response is the establishment of reliable guidelines that consider the multidimensional nature of healthy and pathological aging, considering that cognitive decline is often associated with a range of psychological, psychosocial, and behavioral issues, including anxiety, depression, loneliness, and sleep disorders



PERSONALITY, IDENTITY, GENDER.

Chair

*Fabio Madeddu*¹

¹ University of Milan-Bicocca

Discussant

Piero Porcelli, University of Chieti - Pescara

Participants

Andrea Fossati, Vita-Salute San Raffaele University

Vittorio Lingiardi, La Sapienza University of Rome

Alessandra Santona, University of Milan-Bicocca

Abstract

Personality, identity, and gender: terms and concepts that are often controversial but frequently intertwined. The concept of personality has long been traditionally linked to psychology and psychopathology. Although there are various aspects still to be defined and explored, it is a widely addressed topic in clinical and dynamic disciplines. However, the concepts of identity and gender often challenge attempts at personological definitions, due to their broad connections with anthropological, sociological, and cultural studies. Personality and identity are overlapping but distinct constructs. Personality refers to an individual's thoughts, emotions, and behaviors, and is crucial for everyday psychological functioning. Identity, on the other hand, involves defining oneself as both unique and similar to others within a social context, and is a component of personality that operates on multiple levels. Regarding gender, social role theories of development assume that gender differences arise primarily from perceived gender roles, gender socialization, and socio-structural power differentials. This aspect influences the issue of gender differences in the study of personality and other theoretical aspects.



Building on these reflections, the meeting aims to provide an opportunity to discuss the current state of affairs concerning these dimensions, exploring differences, mutual influences, and connections.



WORKING GROUP ON PERINATALITY: RESEARCH, CLINICAL PRACTICE, AND INTERVENTION

Chair

*Renata Tambelli*¹

¹ La Sapienza University of Rome

Discussant

Claudia Mazzeschi, University of Perugia

Participants

Cristina Riva Crugnola, University of Milan-Bicocca

Elena Trombini, University of Bologna

Francesca Agostini, University of Bologna

Alessandra Babore, University of Chieti-Pescara

Carla Candelori, University of Chieti-Pescara

Emanuela Saita, Catholic University of the Sacred Heart, Milan

Abstract

This symposium is organized to explore a highly relevant topic: bridging the gap between research data and clinical interventions in perinatal care. The working group of the Clinical and Dynamic Psychology section aims to creatively use ongoing research projects to develop new health promotion and prevention pathways, focusing on well-being during pregnancy and the first thousand days of a child's life.

During the symposium, several funded projects will be presented and discussed, illustrating the state of the art in perinatal research. The scheduled presentations will be given by:



- Cristina Riva Crugnola (University of Milan-Bicocca)
- Elena Trombini and Francesca Agostini (University of Bologna)
- Alessandra Babore and Carla Candelori (University of Chieti-Pescara)
- Emanuela Saita (Catholic University of the Sacred Heart, Milan)

The session will be introduced and chaired by Renata Tambelli (University of Rome La Sapienza), with comments from Claudia Mazzeschi (University of Perugia) as the discussant.

In addition to the scheduled presentations, free contributions from the group members will be encouraged, shedding light on the current national landscape of activities in this field. Furthermore, initiatives to be undertaken in the coming year at various university locations will be discussed, aimed at strengthening the synergy between research and clinical practice.

This symposium provides a valuable opportunity to reflect on how research can positively influence clinical practice and generate new perspectives for maternal and infant well-being.



Saturday, 14th September 2024

POSTER SESSION



The role of erotic fantasies in the context of psychopathology, personality and defensive functioning. A study on a clinical sample.

Davide Guarino¹, Bianca Sofia Chiabrando¹, Guido Giovanardi¹, Yuri Guarino², Tommaso B. Jannini², Cinzia Niolu²

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: While sexuality is historically a crucial theme in psychological research, erotic fantasies are still an underexplored field. And yet, psychodynamic approach and clinical experience suggest that erotic imagination is deeply connected to other psycho(patho)logical processes. For this reason, this study aimed to explore the relationship between erotic fantasies and other psychodynamic dimensions such as mentalized affectivity, trauma, defense mechanisms, personality and hypersexuality.

Methods: A total of 151 individuals aged 18 to 65 with psychiatric diagnoses were recruited from the Psychiatry and Clinical Psychology Unit at the Fondazione Policlinico di Roma Tor Vergata. The control group comprised 506 participants, also aged between 18 and 65. Both groups completed a comprehensive survey consisting of several self-report measures: Brief-Mentalized Affectivity Scale (B-MAS), Traumatic Experience Checklist (TEC), Defense Mechanisms Rating Scales - Self-Report - 30 (DMRS-SR-30), Personality Inventory for DSM-5 - Short Form (PID-5-SF), Hypersexual Behavior Inventory (HBI), Sexual Desire and Erotic Fantasies Questionnaire (SDEF).

Results: The findings underpin the hypothesis that erotic fantasies share a deep connection with other psychological processes. Moreover, gender differences in erotic preferences resulted in continuity with the recent literature. High levels of hypersexuality showed negative associations with greater scores in emotions processing and defensive functioning, emphasizing the idea that this condition is related with an impaired psychological functioning. Multiple regression analyses displayed an association between trauma, personality and hypersexuality, suggesting potential mediation effects among these variables.

Discussion: This study highlights the specific differences between sexual fantasies and behaviours, dimensions that frequently overlap. From the results, it is possible to hypothesize that psychological processes and erotic fantasies are strongly intertwined, continuously influencing each other.



Hypersexuality emerged as a key factor in our analysis, showing significant associations with defensive functioning and mentalized affectivity. The current study suggests that the assessment of erotic fantasies may have several implications for clinical purposes.

Changes in HRV in the Peripartum Predict Mothers' Depressive Symptoms 18 Months after Childbirth

Marta Spinoni¹, Claudio Singh Solorzano², Silvia Faraglia¹, Caterina Grano¹

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²Laboratory of Alzheimer's Neuroimaging and Epidemiology, IRCCS Istituto Centro San Giovanni di Dio Fatebenefratelli, 25125, Brescia, Italy

Abstract

Introduction: In the peripartum period, low vagally-mediated Heart Rate Variability (vmHRV) has been linked to higher depressive symptoms. No previous studies investigate whether vmHRV recovery following delivery may increase women's vulnerability to postpartum depressive symptomatology.

Objective: The present research aimed to explore the interaction between depressive symptoms during pregnancy and changes in vagally-mediated HRV from pregnancy to 1-month postpartum as predictors of postpartum depressive symptomatology assessed at 18 months postpartum.

Method: This longitudinal study included 90 pregnant women. During the second or third pregnancy trimester (T1), women completed a sociodemographic checklist, the Edinburgh Postnatal Depression Scale (EDPS), and provided a time-domain HRV index (rMSSD) using a smartphone application. One month after giving birth, another rMSSD measurement was taken, and at 18 months postpartum the EDPS was re-administrated. rMSSD changes between 1-month postpartum and prepartum values were computed, with higher differences between postpartum and prepartum rMSSD values indicating an improvement in vagally-mediated HRV. A moderation analysis was conducted to examine the interaction between prepartum depressive symptoms and the changes in HRV on postpartum depressive symptoms at 18 months, adjusting for age, education, and BMI.

Results: Prepartum depressive symptoms and rMSSD changes significantly predicted 18-month postpartum depressive symptoms ($b = 0.608$, $p < 0.001$ and $b = -3.097$, $p = 0.004$, respectively). Additionally, peripartum rMSSD-changes significantly moderated this association ($b = -0.454$, $p = 0.038$): prepartum depressive symptoms predicted higher 18-month postpartum depression only in women with less recovery of rMSSD from pre- to one-month postpartum.

Conclusions: Women experiencing lower adaptive restoration of parasympathetic activity following childbirth may be at risk of persistent or exacerbated long-term depressive symptomatology. Findings



raise the potential for improved identification of at-risk women and exploration of preventive interventions (i.e. HRV-biofeedback and vagus nerve stimulation), aimed at facilitating the recovery of mvHRV and, consequently, mitigating postpartum depressive symptomatology.



Proposition of a dissociative vs. (pain) hypersensitive subtype of patients at risk of suicide

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⁷ Department of Signal Theory and Communication, Universidad Carlos III, Madrid

Abstract

Introduction: The hypothesis of a diminished pain sensitivity trait as one key contributor to suicidal behavior is recurring across most contemporary theoretical frameworks of suicide. In Joiner's Interpersonal-Psychological Theory, increased pain tolerance, alongside fearlessness about death, is thought to specifically contribute to the acquiring of a capability for suicide.

Methods: A critical overview of clinical and neurobiological theoretical, meta-analytical and empirical contributions has been performed, after targeted and in-depth research on electronic databases, leading to the proposition of two different subtypes of patients at risk of suicide.

Results: Pain insensitivity as a trait does not seem to effectively distinguish suicide attempters from ideators, and literature does not always suggest such a linear relationship between suicide risk and pain perception. On one hand, building upon Orbach's insights into dissociation, interoception, and pain sensitivity, and incorporating recent meta-analytical and neurobiological research, the presence of a *dissociative subtype* of individuals at risk of suicide is hypothesized. As possessing higher dissociative traits, some individuals may encounter frequent disruptions in conscious appraisal of pain and disconnections between the processing of interoceptive stimuli and subjective emotional experience, which expose them to a higher risk of suicide attempting. On the other hand, some lines of evidence suggest an opposite pattern of associations between a greater suicide risk and heightened sensitivity to both physical and psychological pain, at least among individuals characterized by chronic inflammation, like depressed



patients and people living with chronic pain syndromes. Such findings converge in the hypothesis of a *hypersensitive subtype*, marked by chronic inflammatory processes, heightened interoceptive vigilance, sensitivity to both physical and psychological pain, and increased suicidal ideation.

Discussion: These hypotheses align with neuroimaging studies on post-traumatic stress disorder, which delineate dissociative versus hyperaroused stress-response patterns, and resonate with neuropsychanalytic perspectives. Moreover, these notions share similarities with recent alternative clustering models of suicidal behavior.



Examining the Psychological Roots of paranoid thinking: An Empirical Investigation

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Abstract

Introduction: The origin of paranoid thinking has been posited in negative childhood experiences and their developmental effects on the individual's psychological functioning, yet little empirical research has been conducted on this topic. Since paranoid thinking has also been linked with severe psychopathology and maladaptive behaviors, it is crucial to better understand how it develops and its associated mental processes. Accordingly, the current study examines the role played by child maltreatment, defense mechanisms, attachment styles, and mentalization failures in paranoid thinking.

Methods: A sample of 461 participants (319 females, 69.2 %) aged between 18 and 69 years old ($M = 30.50$; $DS = 10.98$) was administered measures assessing child maltreatment, defense mechanisms, adult attachment, mentalization failures, and paranoid thinking. An exploratory data analytic approach was used to examine the relationships among the investigated variables, including multiple mediation analyses, multiple correspondence analysis, and correlation network analysis.

Results: All the different data-analytic approaches converged in showing that paranoid thinking is associated with childhood experiences of emotional abuse, primitive defense mechanisms (e.g., projection and splitting), low levels of secure attachment, and uncertainty about mental states.

Discussion: The study suggests that the development of paranoid thinking is linked to childhood experiences of emotional maltreatment and humiliation that affect the individual's capacity of processing the internal and interpersonal experiences with an adequate sense of safety and positive expectations. This might have significant implications for clinical practice, since therapeutic intervention on individuals with paranoid thinking should also take into account the interplay between childhood relational trauma, attachment insecurity, primitive defenses, and failures in mentalizing in their psychological functioning.



Exploring Emotion Regulation processes in university students with Specific Learning Disorder

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Abstract

Background: Emotion Regulation (ER) has been defined as intrinsic and extrinsic processes involved in the monitoring, assessing and changing emotional reactions in order to achieve personal goals. The effective use of ER strategies has been linked to psychological well-being. Moreover, ER appears associated with executive functions. Given the presence of executive functions difficulties in individuals with Specific Learning Disorder (SLD), they might be at risk for difficulties in emotion regulation. However, only few studies have focused on ER in SLD subjects. In the present study, we aimed at exploring ER in university students with SLD, focusing in particular on the difference between males and females.

Methods: We enrolled 87 university students between 18 and 31 years (mean age = 21,48; DS = 2,57) 42 with a diagnosis of SLD and 45 typical developing peers (TD). Students with SLD were recruited from the Specific Learning and Disabilities Service of the University. TD students were invited to participate via email through the university's mailing list and through the campus website's homepage. They responded to an online survey that included the DERS for emotional regulation and questions about demographic data.

Results: The Univariate Anova reported significant differences between university students with and without SLD in DERS Total score and in 3 subscales (Nonacceptance, Strategies and Clarity). In particular we found higher scores in SLD students compared to control group. Regarding the differences between female and male, SLD female obtained lower scores in DERS Total, Goals, Impulse and Clarity compared to SLD males; whereas in the TD group we found only one difference in the Goals scale (higher scores in males).

Discussion: This study contributes to a more in-depth description of the psychological profile of university students with SLD. First, we found more difficulties in ER in SLD students compared to TD controls; second being female seems to be a risk factor for a worse ER profile only in the presence of SLD. Our



results highlighted the importance of assessing and supporting SLD subjects throughout their lifespan in order to minimize the impact of ER on the overall well-being.



The role of place attachment in the association between eco-emotions and sustainable behaviours: an Italian cross-sectional study

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Abstract

Environmental issues are currently receiving a lot of attention due to the urgent need to change our habits in order to protect the planet. The issue of climate change carries great significance in present-day society, chiefly because of the rapid and substantial rise in greenhouse gas levels and the relentless growth in emissions. Consequently, our planet's temperature has escalated by one degree since the conclusion of the 19th century. The current critical scenario has prompted researchers to ascertain the primary predictors and individual characteristics that prompt individuals to engage in pro-environmental behaviours (PEBs). Previous research has analysed various psychological aspects linked to pro-environmental behaviours. This includes personality traits, social norms, beliefs, and emotions. This study examines the relationships between eco-emotions (such as eco-depression, eco-anxiety, and eco-anger) and PEBs, addressing the involvement of place attachment. 150 individuals (M = 35.69; SD = 15.51; 62% F) participated in this study who were requested to complete: 1) the place-attachment scale, which evaluated their level of attachment to their respective places of residence, 2) the eco-emotions scale, a comprehensive measure assessing the level of anxiety (eco-anxiety), depression (eco-depression), and anger (eco-anger) in relation to the ongoing environmental crisis, and 3) the pro-environment scale to evaluate their individual involvement in pro-environmental behaviours such as recycling, reuse, and various equivalent endeavours. Statistical analysis indicated that place attachment moderated the relationship between eco-anxiety (B = -0.16, SE = 0.07, 95% CI [-0.286, 0.029]), eco-depression (B = -0.24, SE = 0.07, 95% CI [-0.368, 0.102]), and eco-anger (B = -0.21, SE = 0.06, 95% CI [-0.333, 0.079]), and PEBs. This means that the presence of place attachment weakens the impact of these negative emotions on individuals' willingness to engage in environmental actions. This study, through a new perspective that includes both the individual and the environment, highlights that place attachment can trigger the emotions in relation to PEBs.



Do not touch my smartphone! The mediating role of need for touch in the association between narcissism and smartphone addiction

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Abstract

Smartphone usage has rapidly increased worldwide over the past decade. The “We Are Social Digital Report” of 2020 revealed that the global number of mobile phone users reached 5.19 billion; 70% of these are smartphone users. The daily use of smartphones has increased rapidly worldwide to such an extent that people use these to share information, hobbies, or interests and establish and maintain social relationships. Now for modern people, smartphones have become more than just a device but an object of obsession for many, potentially leading to an enhancement of the compulsive and disregulated use of smartphone (also known as smartphone addiction). However, the phenomenon of object addiction can go beyond the problem of the object itself, varying according to psychological characteristics. In particular, specific personality traits seem to be more prone to developing technological addictions. For instance, previous research indicated that narcissism plays a critical role in technological addictions. However, the mechanisms involved in this association remain under-explored. The current research aimed to address the relationship between narcissism and smartphone addiction, also exploring the potential involvement of need for touch, which reflects the need to touch objects and desiring haptic information through the hands. 300 individuals ($M = 20.99$, $SD = 3.12$, 50% F) were requested to complete a short battery of questionnaire entailing the Narcissistic Personality Inventory-13 (NPI-13), the Need for Touch Scale (NTS), and Smartphone Addiction Scale-Short Version (SAS-SV). Results revealed that need for touch plays a mediating role in the association between narcissism and smartphone addiction ($B = 0.03$, $SE = 0.01$, 95% CI [0.006, 0.048]), providing an essential contribution to explain the complexity of the interplay between narcissism and the compulsive and unregulated use of smartphone. Notably, the phenomenon of need for touch is often explored in marketing psychology. However, results stressed the idea that it should be further considered in the context of clinical psychology. Moreover, these findings imply that in order to comprehend and effectively address smartphone addiction, it is crucial to consider not only personality dispositions but also individuals' need to haptically engage with their smartphones.



Investigating mindset streams in cognitive networks about high schoolers' and experts' STEM attitudes

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Abstract

Behavioral Forma Mentis Networks (BFMNs) serve as cognitive representations of memory recall patterns between concepts, elucidating associative and affective dimensions (Stella et al., 2019). In this study, we employ "mindset streams" to evaluate the bridging mechanisms between target concepts within concept maps. Leveraging BFMNs, which capture associative and affective dimensions of memory, mindset streams are defined as subgraphs induced by shortest paths between two target concepts, quantifying semantic content, valence coherence/conflict, and semantic relevance.

We examine mindset streams between "math" or "physics" and key motivational factors ("fun," "work," "failure") in BFMNs representing perceptions of 159 students and 59 experts in Science, Technology, Engineering, and Mathematics (STEM). Statistical comparisons against configuration models reveal distinct patterns: high schoolers bridge "physics" and "fun" through valence-conflicting associations, contrasting domain knowledge with positive experiences, unlike researchers who connect them through positive, science-related associations. Similar trends are observed for "maths" and "fun." Both groups link "maths" and "physics" to "work" predominantly via positive career-related terms.

Students' mindset streams for "failure" and "math" or "physics" are characterized by negative associations, reflecting test anxiety, while researchers integrate them into richer, more positive contexts, portraying failure as integral to STEM learning. These findings are discussed in light of pertinent psychology literature, indicating avenues for future research.



Contrasting gender gaps and discrimination in Italian academia: insights from an exploratory study at the University of Milano-Bicocca

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

Abstract

Despite the progress made in recent years, achieving gender equality within academia remains a major challenge. Existing literature demonstrates how women's careers progress more slowly than men's, resulting in significant under-representation of women in senior academic positions and disparities in salaries and contracts. This phenomenon transcends disciplinary boundaries, impacting fields traditionally associated with a female majority, such as psychology, the human sciences, and education. Moreover, gender segregation persists in academic literature, evident in disparities in scientific productivity and citation indices. Using a framework informed by gender studies and critical psychology, the present study explores how gender inequalities are perceived, counteracted or (in)voluntarily perpetuated within the daily work of research and teaching within a department of the University of Milano-Bicocca. More specifically, employing a systematic analysis of academic curricula, lecturer demographics, and course material, supplemented by self-report questionnaires and focus-group discussions (FGDs), the study examined awareness and perceptions of gender gaps within the Italian academy. Through this mixed-method approach, data were triangulated to delineate a complex and multifaceted picture of the structural gender biases still prevalent in the Italian academic landscape. Our findings contribute to ongoing efforts to address gender inequality in academic environments and systematically mitigate gender discrimination. By shedding light on the specific challenges faced within our institution, we aim to inform targeted interventions and policies aimed at fostering a more equitable and inclusive academic environment.



Digital ostracism: a qualitative study on the specific characteristics of ghosting and phubbing

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Abstract

Introduction: The terms "Phubbing" and "Ghosting" are currently used to define two forms of digital ostracism (i.e., ostracism enacted through digital technologies). These phenomena are part of the wider problematic use of digital technologies, which has been identified as one of its main determinants. Phubbing refers to neglecting someone in social situations by checking one's smartphone, while ghosting consists of unilaterally cutting off contact with a partner and ignoring his/her attempts to communicate. Previous research has primarily focused on the perspective of passive recipients (i.e., victims), overlooking the perspective of those who engage in phubbing and ghosting (i.e., perpetrators). Moreover, few studies have examined the individual and clinical factors that contribute to engaging in these behaviours and the consequences experienced by perpetrators. This qualitative study (as part of a larger study, funded by the European Union – Next Generation EU) aims to gain a better understanding of how adults perceive phubbing and ghosting, with a particular focus on the perpetrator's perspective.

Methods: Focus groups, differentiated for ghosting and phubbing, were conducted with 41 Italian young adults (21 subjects for phubbing and 20 subjects for ghosting; aged 18–30 years), recruited through snowball sampling, flyers, and social media platforms. Sociodemographic information and details about participants' use of smartphone, social media, and dating app were collected through a short questionnaire administered at the beginning of each focus group. The transcripts of the focus group interviews were examined using thematic analysis to identify key themes.

Results: Several themes emerged from the analyses, including a) relational and contextual factors influencing phubbing and ghosting behaviours; b) individual psychological aspects contributing to phubbing and ghosting; c) reasons for perpetrators' actions; and d) emotional responses from perpetrators' perspectives. Specific characteristics of phubbing and ghosting are discussed.

Discussion: The findings highlight the cognitive and emotional aspects involved in digital ostracism, specifically phubbing and ghosting. The study suggests relevant implications for future research and interventions targeting problematic digital technology use, with a focus on phubbing and ghosting.



Activism and mental health: the experience of Brigata Basaglia

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Abstract

The experience of social clinics is still quite poorly investigated, even if the social clinics seem to be spaces in which psychologists and social workers try to build and implement both reflections and clinical practices from a political approach to mental health. Especially in this historical moment in which psychological difficulties increase and people feel constantly unsafe and exposed to a profound sense of instability: the changing climate, cost of living, job insecurity, and the inability of politics to address the needs of people in these turbulent times underline the importance of re-considering the role of communitarian activism to heal mental health issues.

The research work is focused on an explorative case study that investigates the experience and the political and clinical backgrounds of activists from Brigata Basaglia.

Brigata Basaglia is a social clinic based in Milan, Florence, and Pavia and it is composed of psychologists, psychotherapists, physicians, social workers, and activists. The work of Brigata Basaglia is inspired not only by the experience of Franco Basaglia and his colleagues but is also driven by the idea that mental health is a political and communitarian issue and it is profoundly influenced by the socio-economic system we, as a society, live in.

Semi-structured interviews were administered to 15 key-informant activists (with an age range from 24 to over 70 years, mainly women) to deepen the values and the perceptions activists have about the mental health needs of the population and the lack of psychological interventions from the Italian National Healthcare system. It also has the objective of collecting data about the impact of activism on the wellbeing of social workers. The interviews were transcribed and codified through qualitative thematic analysis.

The present work discusses the perceptions that activists have on mental health problems in Italy and opens the discussion about the role of activism in enhancing awareness about psychological issues both in the communities and in the institutions and how a political perspective on mental health could have an impact on clinical interventions and social workers' wellbeing.



UFDA – District Functional Unit for Adolescents 2022: a pilot project in Italy to detect mental health strengths and difficulties among youths

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² Digital Health Lab, Centre for Digital Health and Wellbeing, Fondazione Bruno Kessler, Trento, Italy

Abstract

Introduction: The COVID-19 pandemic took a toll on young people's mental health, exacerbating the already increasing rates of psychological distress rates worldwide. The Italian Veneto region funded a specialized unit for youth (UFDA) within Child and Adolescent Mental Health services (CAMHs), aimed to address the transition issues between CAMHs and adult mental health services resulting in high drop-out rates and discontinuation of care. This study examines the profile of patients seeking help, explores the agreement between caregivers and patients regarding their difficulties, assesses the effectiveness of interventions offered by the UFDA of AULSS6 based on follow-up questionnaire data.

Methods: The study involved 255 youths aged 12 to 24 years (mean age = 14.4 years) and 170 caregivers. Pre- and follow-up assessments were conducted using both the self and informant report versions of the Strengths and Difficulties Questionnaire (SDQ). Patient profiling was based on the anamnestic data collected by the case manager and an initial participation survey completed by the patient upon entry.

Results: The majority of patients were Italian females, with half of the sample attending high school. Many reported feelings of loneliness, a diminished quality of life, and intrusive suicidal or self-harm thoughts. The study found high rates of parent referrals and self-referrals, with varied distress duration and severity. SDQ data showed significant improvements in all scales except for the Prosocial Behavior scale. The agreement between caregivers and patients was moderate to low, with caregivers generally reporting fewer difficulties.

Conclusions: This study highlights the importance of youth-centered services in addressing the mental health needs of youth in distress, which can fill the treatment gap and ease the transition to adult services in the aftermath of the COVID-19 pandemic. The UFDA can serve as a template that could be replicated in other regions or countries facing similar mental health challenges among youth.



**Exploring Psychometric Potentials: Network Analysis of the Personality Inventory for DSM-5–
Brief Form (PID-5-BF) Toward Version Refinement**

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Abstract

The Personality Inventory for DSM-5 (PID-5) is a psychological assessment tool designed to explore personality traits according to the DSM-5. Comprising 220 items organized into 25 facets and 5 overarching domains—Negative Affectivity, Detachment, Disinhibition, Antagonism, and Psychoticism—the PID-5 offers a nuanced exploration of personality pathology. Its abbreviated version, the Personality Inventory for DSM-5-Brief Form (PID-5-BF), distills this complexity into 25 items, retaining the core dimensions of personality pathology. However, concerns regarding the structure and reliability of the PID-5-BF have been raised. To address these challenges, an analysis was conducted using network analysis to examine the interrelations between the PID-5-BF domains and items. Network analysis is a method used to explore the complex interplay between variables by representing them as nodes (e.g., domains and items) and their connections as edges (e.g., associations). This approach allows for the identification of central domains and items within the network, providing insights into the underlying structure of the instrument. The primary objective of this study is to propose a more precise and improved version of the PID-5-BF through the study and network analysis, emphasizing stronger correlations between items and domains. Using the Jasp software, the factorial structure and correlations between items and domains in the PID-5-BF were investigated. The findings shed light on the network properties of the instrument and offer valuable insights into its psychometric characteristics. By uncovering the intricate relationships between domains and items, the study contributes to a deeper understanding of the PID-5-BF and its utility in assessing personality pathology.



**The Multidisciplinary Approach in Day-Hospital Setting for Patients with Spinal Cord Injury:
the importance of psychological treatment**

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Abstract

Introduction: The rehabilitation project in Day-Hospital (DH) setting for outpatients with Spinal Cord Injury (SCI) involves interdisciplinary and multidisciplinary rehabilitation approaches. The rehabilitation team is composed of several healthcare specialists working together to optimize possible positive outcomes. Psychological treatment can significantly affect the functional recovery of patients with SCI.

Materials and Methods: 140 patients with SCI (109 males; mean age $46,46 \pm 17,73$) have been recruited at the S. Lucia Foundation Spinal Centre in DH setting between 2018 and 2023. Among patients recruited, 51.7% of the sample had a traumatic, 48.3% non-traumatic aetiology. At admission and discharge, all subjects underwent an assessment of functional status with the American Spinal Injury Association Impairment Scale (AIS), and the Spinal Cord Independence Measure (SCIM). Enrolled subjects were classified according to the severity of neurological disability: AIS A (23,5%), AIS B (6,0%), AIS C (14,1%), and AIS D (56,4%). Only 61.4% of patients underwent psychological treatment with State-Trait Anxiety Inventory, the CBA- Depression Questionnaire (QD), the Eysenck Personality Questionnaire (EPQ), the Rosenberg Self-esteem Scale and the Toronto Alexithymia Scale (TAS) 20. The two groups were homogeneous in age, sex, and AIS grade.

Results: Significant differences in the SCIM self-care scale between groups ($F = 6.7$; $p = 0.011$) were found: patients who underwent psychological treatment showed higher scores at discharge compared to patients who received no psychological treatment. This is particularly true for patients with tetraplegia who showed greater self-care at discharge ($F=4.32$; $p= 0.043$). Patients who underwent psychological treatment exhibited significantly better self-care outcomes ($F=3.87$; $p= 0.049$), increased self-esteem ($F=4.02$; $p=0.036$), and reduced alexithymia ($F=3.62$; $p=0.046$) at discharge compared to admission.



Discussion: A multidisciplinary approach for patients with SCI remains an essential need in neurorehabilitation, especially in DH setting. Integrating psychological interventions into Day-Hospital rehabilitation protocols could lead to more positive outcomes, such as enhanced self-care abilities, improved self-esteem, and reduced alexithymia. This study highlights the importance of a multidisciplinary approach encompassing also psychological, emotional, and social rehabilitation.



Harmonizing Heart in depression: Exploring the effect of relational music therapy on the psychophysiological health in depression.

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Abstract

Music therapy is frequently offered as non-pharmacological treatment to reduce anxiety and depressive symptoms. Findings of a Meta-Analysis Cochrane indicate that music therapy provides short-term beneficial effects for people with depression. Music therapy added to treatment as usual (TAU) seems to improve depressive symptoms compared with TAU alone. Additionally, music therapy plus TAU is not associated with more or fewer adverse events than TAU alone. Music therapy also shows efficacy in decreasing anxiety levels and improving functioning of depressed individuals. Nonetheless, it has been highlighted the needs for future trials based on adequate design to consolidate these findings. At this purpose, the aim of this study is to examine whether relationally orientated music therapy (MTR) administered in an multisensory controlled setting helps reduce symptoms of depression and improve other health-psychophysiological-related outcomes in a sample of patients with a diagnosis of Major Depressive Disorder. Specifically, attention will be given to investigating emotional and autonomic response (i.e., Heart Rate Variability). 15 adults with depression will be compared with 15 healthy control. All participants will receive 4 session of MTR and 2 section of pink noise over a period of 6 weeks. A blind assessor will measure outcomes before testing, after noise and after musicotherapy. Our results underlined both improvement in autonomic and emotional outcomes ($p < .05$). Specifically, change in resting autonomic response was underlined after MTR, suggesting that musicotherapy improve parasympathetic response. Moreover, an improvement in emotional response and psychological symptomatology was showed in patient both in healthy control and MDD. This study aims to fill a gap in knowledge as to whether a structured musicotherapy intervention applied to people with depression could prepare and predispose depressed patients to access their psychopathological schemes and facilitates in addition to TAU a better therapeutic outcome improving brain-body interaction. For the first time MTR will be objectively investigated, and it is expected that the results will provide new insights



into these processes from subjective, behavioral and psychophysiological prospective. Furthermore, findings are expected to reveal whether music related emotional experience, measured via self-report, behavioral task and autonomic response, can be utilized in assessing a depressive patient improvement in therapy. The sample are in grooving and we hope that in the future will be sufficient for generalizing its findings to clinical practice as well as to further music therapy research.



Beyond Survival: Enhancing Psycho-Physical Health in Breast Cancer Survivors through a Physical Activity-Based Multidisciplinary Intervention. A Longitudinal Diary Study of Women's Experiences

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Abstract

Introduction: Physical activity (PA) for breast cancer survivors (BCSs) is a key element for cancer prevention, enhancing psycho-physical health, and improving survival. Further, during PA, the muscles produce irisin, a myokine with beneficial effects on health, including an anticancer action by inhibiting tumor cell proliferation. However, no studies have measured the relationship between psychological health and irisin in BCSs, as well as how women experienced involvement in PA interventions or their motivation, despite the fact that adherence to the recommended exercises is strongly linked to the subjective belief that they have sufficient resources and that PA has an effective outcome.

We structured an 8-week personalized, moderate-intensity, multidisciplinary PA-based intervention. Women trained twice a week for 40 minutes on a cycle ergometer and were supported by a team of experts. The objective was twofold. First, to study the increase in psycho-physical well-being of BCSs, starting with the hypothesis of a positive correlation between emotional tone and salivary irisin. Second, capturing the women's ongoing experience as it was lived using the diary technique method. Specifically, the present pilot study focuses on the psychological process underlying adherence to the proposed intervention and examines longitudinally the diaries of the first 4 BCSs who completed the program.

Methods: BCSs at the end of adjuvant therapies, suitable for PA, and with sedentary behavior were recruited through a convenience sampling strategy. At the end of each of the 17 trainings, women compiled a diary to elaborate on their motivations, the issues or adverse events they encountered, and their positive feelings. In-depth textual analysis was performed in order to identify reliable person-level information and indicators of within-person psychological change over time.

Results: Initially, the opportunity to connect with peers and develop a sense of belonging motivated the participants; nevertheless, what kept them engaged was the desire to take care of themselves and overcome their physical and mental limits. After cancer, a strong body and a resilient mindset were viewed as a measure of redemption.



Discussion: This research contributes to understanding how to support, motivate, and engage BCSs to take part in PA-based interventions.



Adolescents' body awareness and internalizing and externalizing problems: The mediating role of epistemic trust, mistrust, credulity and emotional dysregulation

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Abstract

Objective: Body awareness is acquiring relevance within the clinical context, representing an important dimension for both physical and psychological health. However, to date, only few studies have investigated the association between body awareness and other psychological constructs relevant to adolescents' mental health. As such, this study aimed to explore how a protective factor, such as epistemic trust, along with risk factors, such as mistrust, credulity, and emotion dysregulation might play a role in the association between body awareness and internalizing and externalizing problems among Italian adolescents.

Methods: In the mainframe of the LOOK@ME project, N = 115 adolescents aged between 11 and 13 years (Mage = 12; SD = 0.26; 52.2% males) completed an online survey, including socio-demographic data, the Body Perception Questionnaire, the Short Form of the Strength and Difficulties Questionnaire, and the Short Form of the Difficulties in Emotion Regulation Scale. Two mediational models were performed; age and gender were included as covariates. In both models, body awareness was considered as an independent variable while epistemic trust, mistrust and credulity as mediator. In the first model the dependent variable was internalizing problems, while in the second model the dependent variable was externalizing problems.

Results: Both mediational models showed that body awareness had a positive effect on epistemic mistrust and emotional dysregulation, but no direct effect on internalizing and externalizing problems. However, the first mediation model showed that body awareness was positively indirectly associated with internalizing problems through both epistemic mistrust and emotional dysregulation. As regards externalizing problems, only emotional dysregulation mediated the positive indirect effect of body awareness.

Conclusions: This exploratory study suggests that to increased body awareness, epistemic mistrust and particularly emotional dysregulation, represent critical factors contributing to both internalizing and



externalizing problems among adolescents. Effective interventions should consider these mediating factors to better understand and guide more tailored approaches to reduce internalizing and externalizing symptoms in adolescents.



A Meta-Analysis of Decision-Making Process in Parkinson's Disease

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Abstract

Introduction: Parkinson's disease (PD) is a neurodegenerative disorder that affects 2-3% of the elderly population and is characterized by the loss of dopamine-producing neurons in the substantia nigra. The most commonly described symptoms affect the motor system, but there is increasing awareness of non-motor symptoms, such as decision-making (DM) impairment. In this context, impairment in DM, which may be characteristic of patients with PD, would affect daily activities due to the difficulty in choosing between various alternatives.

Method: According to the PRISMA statement, the present meta-analysis critically examined the difference in DM performance, taking into account its many characteristics, between patients with a diagnosis of Parkinson's disease and healthy controls.

Results: Thirty-one studies met the eligibility criteria and were included in the quantitative synthesis. The results highlighted that decision-making in ambiguous and risky situations is impaired in individuals diagnosed with PD compared to healthy individuals. From the analysis of studies, it is clear that Parkinson's disease (PD) can lead people to prefer disadvantageous and riskier options, probably because an impulsive response may have prevented patients with PD from learning from feedback and, consequently, from using rational strategies. The meta-analysis highlights that those differences depend on pharmacological treatment: only patients in the ON phase show an impaired decision-making compared to healthy controls.

Discussion: While both decision-making under risk and ambiguity can be impaired in patients with Parkinson's disease, the underlying neural mechanisms may vary between the two. Understanding these differences is crucial for developing targeted interventions to improve decision-making abilities and enhance the quality of life for individuals living with Parkinson's disease. It would also be important to monitor drug treatment during the later stages of the disease with the aim of preventing drug abuse and treating cognitive symptoms associated with dopaminergic drugs.



Spirituality and Psychosomatic Well-being: a Reflection from the Perspective of the Polyvagal Theory

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Abstract

Spiritual and religious practices stand among the oldest forms of interventions aimed at alleviating suffering and promoting well-being. Numerous scientific pieces of evidence recognize the positive effects of spiritual practices on psychosomatic health. In particular, the Polyvagal Theory empirically explores the interconnection between emotional states, behaviors, and neural functions, aiding in understanding the contributions of religious rituals and spiritual practices to emotional and autonomic nervous system (ANS) regulation. An integrated view of the mind-body relationship and the significance of the spiritual dimension emerge as fundamental to promote psychosomatic well-being in everyday life and psychotherapy. Spiritual practices stimulate the regulation of the ANS and favor a sympatho-vagal balance, especially of the ventral vagus system, guaranteeing functional rhythms of Heart Rate Variability (HRV). HRV balance coincides with an increase in physiological flexibility, as well as a greater ability to respond elastically and ductilely to disorders. Interoceptive sensitivity and heart rate monitoring play an important role. Literature suggests that in psychotherapy, encouraging conscious awareness of mind-body phenomena plays a central role in patient care: it promotes processes of reinterpretation of proprioceptive and exteroceptive environments, improves emotional regulation, and resilience. From an analytical standpoint, the underlying symbolism of religious rituals, emphasizing the act of incorporating the divine within oneself. The spirituality is capable of fostering vital momentum for practitioners and providing psychic conditions deeply rooted in the human soul. Symbols, metaphors, myths, and active imagination serve as gateways to explore a profound meaning of experience and give consciousness a sense of meaning in existence. Practices and a sense of belonging are involved and fuel the dialectic of conscious/unconscious dimensions. In clinical care, it would be appropriate to focus on the bidirectional mind-body relationship. One could reflect on the implementation of such non-pharmacological interventions not only to improve outcomes but also on health economic outcomes and clinical sustainability.



Reflective functioning and emotional intelligence: protective factors for quality of life in a sample of teachers. A quasi-experimental study

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Abstract

Introduction: Teaching is considered a high-risk profession due to the high impact of occupational risk factors on teachers' mental health. Good mentalisation skills lead to a consistent understanding of the mood and behaviour of both self and others while high levels of EI are associated with greater mental health and psychological well-being. The aim of this study was to evaluate the effectiveness of an intervention aimed at enhancing the ability to recognise one's own and others' emotional states, one's own mental states and those of others, such as feelings, desires, thoughts and beliefs in relation to the perception of one's own quality of life.

Methods: In a sample of 107 teachers (F=93% - M=7%) from pre-school (25%), primary (46%) and secondary schools (29%), quality of life, emotional intelligence and mentalisation were assessed. The study design is quasi-experimental, without control group and with time series (baseline, training and post-test). The intervention consists of 5 meetings: phase 1 meeting, pre-test, small group 'I confront myself with you'; phase 2 'Emotions run through bodies'; phase 3 'In the face of the other my emotions'; phase 4 'Black on white I relive my emotions'; phase 5 'Me, the other and the environment' and post-test.

Results: In the analysis of the mean scores at baseline: the EI (M=122.7 SD=9.4), WHOQOL (M=93 DS=8.6), RFQ (RFQ_u M=2.7 - DS=1.2 ; RFQ_c M=8.5 - DS=3.8). In the post-test: EI (M=127.02 - SD=12.7), WHOQOL (M=94.7 DS=11.01), RFQ (RFQ_u M=2.7 - DS=1.2 ; RFQ_c M=9.6 - DS=4.1).

Discussion: The results showed that the mentalisation and EI-based intervention programme for teachers can positively influence the work context in terms of reducing levels of negative emotions and feelings of alienation towards students or work activities. Clinical work based on EI and mentalisation can strengthen individual-environment bonds by creating effective relational bonds between colleagues, improving students' curiosity about their own and others' thoughts and feelings, and facilitating the ability to think, symbolise and mentalise emotions.

Exploring Sentiment and Meme Usage in Two Self-Harm E-Communities: A Comparative Analysis

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Abstract

Background: Self-Harm is a growing public health concern with some evidence indicating an increase of the prevalence rates after the Covid-19 pandemic. Self-harm e-communities are gaining high prominence among people that engage in this behaviour and there has been an increase in studies focusing on this environment due to its inherently unobtrusive and naturalistic qualities.

Objective: In this regard, the goal of this study is to explore the differences between two popular self-harm e-communities on Reddit by conducting a sentiment analysis. Moreover, one of the communities were found to express their experiences and feelings using memes, and in this regard, this study aims to analyse the content and thematic areas of the memes.

Method: 211 and 199 posts were sourced for a period of three months from two self-harm e-communities ([/r/SelfHarm\(SH\)](#) and [/r/MadeOfStyrofoam\(MoS\)](#)) using a Python API Wrapper- PRAW. Posts were included only if they contained one of 5 keywords owing to the inclusion criteria of the larger project that this study belongs to. Following this, a sentiment analysis was conducted on Python, and a qualitative content analysis of the memes were carried out.

Results: SH had a statistically larger negative sentiment than MoS ($U = 23808, p = 0.019$) and consequently a significantly lower overall sentiment than MoS ($U = 17429, p = 0.003$). While there were no statistical differences between the two groups on the positive and neutral subscales of the sentiment analysis, the differences among the negative and overall values were attributed to the meme usage found solely in MoS. Preliminary codes from the content analysis indicated that meme usage on MoS conveyed themes such as urges to self-harm, relapse, and self-deprecation.

Conclusion: Therefore, although the textual accounts on MoS might have a higher overall sentiment, an in-depth analysis of the memes indicates that these members use memes to communicate the challenging and negative aspects of their experience. Therefore, the findings from this study indicates that future



research on self-harm e-communities must take a more nuanced approach as different communities have different methods to communicate their experiences and a “one size fits all” approach may not be appropriate.



Psychological correlates of functional somatic symptoms: a clinical intervention protocol in a pediatric unit

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Abstract

Introduction: Functional somatic symptoms (FSS) -physical disorders without an organic cause that may vary widely in severity- are theorized to be a stress response, and their prevalence is significant in the child population. Early relational experiences play a key role in development, so a non-optimal caregiving environment exposes the child to a significant risk of developing psychopathological symptoms and medical problems. The association between stress exposure and FSS is well known, and more specifically, the association between adverse childhood experiences (ACEs) and unexplained gastrointestinal symptoms (GSI) and migraine (M). The study aims to explore the psychological symptoms, assess caregiver bonding and attachment patterns of children with GSI and M. Based on the previous literature, we hypothesize a modulatory/associative role for attachment relationship quality.

Methods: The study was conducted at the Pediatric Unit of Sant'Andrea Hospital (Rome), with patients aged 6 to 18. Psychological investigation takes place on an outpatient basis for patients with irritable bowel syndrome (IBS) and on a day-hospital basis for those with migraine (M). The protocol includes a clinical interview with the parents and self-report questionnaires. Simultaneously, an initial interview with the child is conducted, followed by self-report questionnaires on psychosomatic symptoms and the relationship quality with caregivers and assessment of child's attachment patterns by administering a semiprojective test.

Results: Preliminary data indicate significant levels in the internalizing dimension, particularly in the area related to somatic complaints and anxiety-depression in both IBS and M patients. Discrepancies are found between the representations that the child and parent have of the symptom, with the parent tending to underestimate it. These data are in addition to dysfunctional attachment profiles characterized by patterns leaning towards anxiety-avoidance dimensions.



Discussion: The relationship between ACEs and the development of FSS is poorly studied in children. Examining the quality of the caregiver relationship in the clinical population can help to understand the role of FSS as a possible stress response and may contribute to the development of clinical psychological assessment and support protocols in pediatric settings.



Use of routine outcome monitoring in online psychotherapies: effectiveness and longitudinal evaluation of videoconferencing treatments. A protocol study

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Abstract

Introduction: Despite the increasing popularity of videoconferencing psychotherapies (VPs), there is still a substantial lack of studies to monitor the patient symptoms change and the course of the therapeutic process across sessions. The aims of this study are: to use routine outcome monitoring (ROM) to examine the trend of change of process and outcome in VP by both clinicians' and patients' perspectives. *Methods:* 160 psychotherapists working in an Italian agency that provides VP were recruited for this study. Each clinician, after being trained on the use of the digital platform developed for data collection, can recruit up to 5 patients as participants. The baseline assessment includes demographic data, the Clinical Outcomes in Routine Evaluation Outcome Measure (CORE-OM), the Inventory of Interpersonal Problems (IIP-32), the Attachment Style Questionnaire (ASQ), the Credibility Expectation Questionnaire (CEQ), the Cooper – Norcross Inventory of Preferences (C-NIP) and Satisfaction With Life Scale (SWLS) for patients. Clinicians fill out the General Assessment of Functioning (GAF), Teletherapy Intervention Scale (TIS) and Cooper – Norcross Inventory of Preferences-Therapist version (C-NIP-T) for clinicians. Monitoring assessment will take place each session for the first four therapy sessions, every two sessions for the next four sessions, and every four sessions until the end of treatment. Patients fill out the CORE-10 and Working Alliance Inventory (WAI-P) in ROM, whereas clinicians fill out the GAF, TIS and Working Alliance Inventory – Therapist version (WAI-T). Endpoint assessment will require both patient and therapist side to fill the baseline questionnaires. *Results:* Preliminary results concerning the recruitment of therapists, enrolment of patients and the adherence to the research protocol will be presented. *Discussion:* The current study may provide support on the usefulness of providing ROM in online psychotherapies in the Italian context. Moreover, challenges related to the use of a research strategy in clinical practice will be discussed.



The role of psychological distress and maternal-fetal attachment in the relationship between couple conflict and clinical aspects of labor

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Abstract

Introduction: The role played by the quality of the couple relationship on the outcomes of birth is well known. In particular, couple conflict is linked to a more challenging childbirth, such as more complicated labor experience. Although this link is evident, less is known about possible mediators of this relationship. Therefore, this study aims to build upon previous evidence by examining the serial mediating role of maternal psychological distress and maternal-fetal attachment on the relationships between couple conflict and labor experience.

Methods: A longitudinal design was carried out on 161 pregnant women ($M_{\text{age}} = 31.63 \pm 4.88$). At weeks 31–32 of gestation, women filled out the Romance Qualities Scale, the Beck Depression Inventory, the State Anxiety Inventory, and the Prenatal Attachment Inventory. The day of childbirth, hospital healthcare staff registered the clinical data of labor (duration of labor, administration of oxytocin and epidural analgesia in hours). To verify the hypothesized model a Structural Equation Modeling was performed. The indirect effects were tested using the bootstrapping method with 5,000 bootstrap samples.

Results: The assessed structural model produced adequate fit to the data [$\chi^2 = 20.084$, $df = 13$, $p = 0.093$; $RMSEA = 0.058$ (90% C.I. = 0.010–0.106), $CFI = 0.985$, $SRMR = 0.029$] and the variables in the model accounted for 47% of the variance in labor experience. Couple conflict affects the experience of labor only indirectly, both through the serial mediating role of psychological distress and maternal-fetal attachment ($\beta = 0.04$; 95% CI: [0.002-0.046]) and through the mediation of psychological distress ($\beta = 0.10$; 95% CI: [0.011-0.098]).

Discussion: Overall, the results showed that the couple's conflict during pregnancy has negative outcomes, indirectly influencing the experience of labor. Specifically, the presence of conflict favors the psychological distress of women which, in turn, adversely affects their ability to bond with the fetus. All this implies that the experience of childbirth is lived by the women more negatively, going to influence



their experience of labor. Therefore, these findings have important clinical implications for potential couple interventions during pregnancy that may favor a less complicated labor experience.



Cardiovascular diseases and psychological factors: Insights from a cardiac surgery patient cohort

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Abstract

Introduction: The association between psychological and stress factors and the development and progression of cardiovascular diseases (CVD) is widely documented in the literature. Personality characteristics, anxiety, depression, and perceived stress, exposure to traumatic events in adulthood or early life, may have a role in the onset of CVD as well as in the convalescence and rehabilitation process after adverse cardiovascular events or a cardiac surgery. An ineffective parasympathetic modulation of the heart, indicated by low heart rate variability (HRV), is a common factor shared between CVD and these psychological variables. The present study aims to evaluate whether high incidence of anxiety-depressive symptoms, stress, and the presence of adverse childhood experiences (ACE), along with reduced HRV, can be found in patients with CVD who require cardiac surgery.

Methods: The study is conducted in the cardiac surgery unit at Sant'Andrea Hospital (Rome) in a population of patients awaiting cardiac surgery. The protocol includes an initial clinical interview and screening by self-report questionnaires on anxiety and depressive symptomatology, perceived stress, and coping strategies in the preoperative phase. Two months after the intervention, the same indicators are explored again at follow-up. Contextually, attachment style, the presence of ACE, and posttraumatic stress or growth are examined. Resting HRV is measured at the patient's admission, on the seventh postoperative day, and during the follow-up.

Results: Self-report data indicate high levels of perceived stress and average levels of anxiety-depressive symptoms in the preoperative phase. Significant gender differences are found: women show higher levels of depression and perceived stress than men. In addition, most patients experienced significant stressful events in the previous year. Among coping strategies, the passive/negative coping strategy appears to be the most used in this population.



Discussion: These preliminary findings illustrate how stress perception and exposure to recent stressful events may influence CVD. Ultimately, our data can contribute to the development of a clinical psychological support protocol within a cardiac surgical course that could consider gender differences and include interventions aimed at improving parasympathetic functioning.



Does personality affect the cognitive decline in aging? A systematic review

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Abstract

Cognitive decline is a natural consequence of aging, but several genetic, environmental, and psychological factors can influence its trajectories. Among the most enduring factors, the Big Five personality traits – defined as relatively stable tendencies to think, behave, and react to the environment – can influence the risk of developing dementia and mild cognitive impairment (MCI) – a preclinical form of cognitive decline - directly (e.g., by physiological correlates) and indirectly (e.g., healthy or risky behaviors). Despite the great number of studies focusing on the relationship between personality and cognitive decline, an updated systematic synthesis of the results, including a broader range of study designs, is still lacking.

This systematic review aims to summarize the findings of studies investigating three key areas: (i) differences in personality traits between groups of healthy individuals and those with MCI, (ii) the impact of personality traits on the risk for both MCI and dementia, and (iii) changes in personality traits among individuals progressing from normal cognition to MCI.

The results indicated that Neuroticism is a significant risk factor for MCI and dementia. Conversely, Conscientiousness and Openness are found to offer protection against dementia and moderate cognitive decline. These findings suggest a pivotal role of personality structure in shaping long-term cognitive outcomes and may be useful in planning psychological interventions to prevent or delay cognitive decline.



Stress, anxiety, and depression in healthcare workers: An effective intervention protocol in a hospital setting

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Abstract

Introduction: Literature highlights the significant impact that numerous risk factors have on the high-stress level of healthcare workers. The 'Incontriamoci' counseling service at the Sant'Andrea Hospital (Rome) was operationally launched in January 2023, recognizing its important value in the mental health of hospital staff, to improve their quality of life, job satisfaction, and consequently, the quality of care provided. We aimed to investigate the psychological health status of the workers and the impact of our protocol on them.

Methods: The clinical service consists of four clinical interviews, typically held every week. One month after the last interview a follow-up meeting is provided, with the possibility for the user to undertake psychotherapy if a critical condition is detected. The protocol involves the administration of self-report questionnaires (K-10, PSS, RQ, BRCS, IIP-32) to assess workers coping strategies, anxiety, depression, perceived stress, adult attachment styles, and the presence of relational and social adaptation difficulties. All the symptoms are evaluated both at the beginning of the clinical pathway and at the follow-up.

Results: Collected data take into account factors such as occupational category, gender, average age, and seniority referring to all the professionals accessing the service. Overall, the analysis of the symptomatology during the years 2023-2024 shows that the majority of the sample assessed at the beginning of the clinical pathway presented high levels of depressive and anxious symptoms, perceived stress, and moderate to poor resilience skills. Following treatment, we observed a slight reduction in anxiety symptoms and stress levels, together with a significant reduction in depressive symptoms. Our results underline the effectiveness of the intervention and the reduction of symptoms within the time frame of the protocol (70%), with only 25% of users needing further psychological intervention.

Discussion: The reduction of symptoms and the positive feedback from workers at the end of the program prove the need to support them psychologically in the work context. Our data demonstrate the effectiveness of a protocol that could also be adapted in different hospital settings.



Preliminary results supporting an intervention program for internalizing symptoms in a non-clinical sample of Italian children: The role of emotional awareness

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Abstract

Internalizing symptoms such as anxiety and depression are among the most common clinical problems in childhood. Several studies have shown that children with anxiety and/or depression symptoms have lower emotional awareness, which can affect their quality of life.

Scientific research emphasizes the importance of using programs to improve internalizing symptoms, especially in children whose psychopathology is less differentiated than in the older age groups. One of the most effective programs is Super Skills for Life (SSL), developed for school-age children with strategies that address risk factors for internalizing symptoms. Several studies have examined emotional awareness as a predictor of symptom reduction before and after psychological intervention. This study aimed to provide preliminary evidence on the effects of SSL on internalizing symptoms in a non-clinical sample of Italian schoolchildren by investigating the role of emotional awareness as a protective factor promoting the expected reduction in symptoms after the intervention.

Participants were 112 Italian schoolchildren (50.9% male) aged 8-10 years ($M = 9.42$ years, $SD = 0.55$) who completed the Strengths and Difficulties Questionnaire (SDQ) and the Emotional Awareness Questionnaire (EAQ) and were assessed before and after the intervention. For all analyzes, only children who scored above the reference cut-off in the Emotional Symptoms subscale before the intervention were included ($N = 53$; 56.9% female). Results showed a statistically significant reduction in mean scores for Emotional Symptoms ($F = 10.96$, $\eta^2 = .10$, $p \leq .001$) and Relationship Problems with Peers ($F = 16.36$, $\eta^2 = .14$, $p \leq .001$) between pre and post-intervention. No gender differences were found.

To examine the role of emotional awareness in reducing internalizing symptoms from pre- to post-intervention, a stepwise linear regression was conducted by entering the pre-intervention outcome variable (step 1), sex (step 2), and the EAQ (step 3). Results showed that higher baseline levels of verbal sharing ability predicted lower levels of emotional symptoms post-intervention ($b = -1.85$, $p \leq .01$), while the ability to differentiate emotions predicted lower levels of peer problems ($b = -1.56$, $p \leq .01$). In



conclusion, the results contribute to support SSL as a useful program to reduce initial internalizing symptoms and to consider emotional awareness as a protective factor.



Exploring psychological functioning in Italian male inmates across crimes committed: A case-control study

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Abstract

When assigning specific treatment and clinical paths inside prisons, often inmates are allocated to treatments based on their index offense. Thus, it is crucial to consider a comprehensive overview of their functioning to build an adequate and targeted approach. The current study aims to validate the just-explained rationale in an Italian inmate sample (Spoleto, PG). A global psychological functioning exploration of personality traits (Personality Assessment Inventory, PAI), attachment (Attachment Style Questionnaire; ASQ), self-esteem (Rosenberg Self-Esteem Scale; RSE), and dissociative experiences (Brief Dissociative Experiences Scale; DES-B) was run on a sample of 50 male prisoners (M=45,76; SD=9,88, 22-67 years old). Participants were divided into three different categories according to the crime committed, namely offenses against persons (n=21), drug offenses (n=16), and offenses linked with organized crime (n=13). Finally, a matched control group from the general population was recruited (data collection ongoing, aim to select 50 participants matched for socio-demographic characteristics) to compare the three groups with the normative population. Given the small sample size, the three groups' global functioning differences were analyzed with the non-parametric Kruskal-Wallis test. Comparing the three inmate groups, significant differences emerged on the RSE, in two subscales of the ASQ (*confidence* and *discomfort with closeness*) and a few PAI subscales (clinical subscales: *borderline features*; treatment subscales: *suicidal ideation*, *verbal aggression*; interpersonal subscales: *warmth*). The inmates linked with organized crime showed the lowest scores on the ASQ and the warmth scale of PAI, whereas they reported the highest scores on the suicidal ideation, verbal aggression, and borderline features scales of PAI. Lastly, the inmates linked with drug offenses presented the lowest scores on the RSE. Finally, careful attention and consideration were given to the validity scale scores, as they provide a potential interpretation for clinical purposes. We expect that the comparison with a control group from the general population will further strengthen our findings. The current study analyzes important underpinnings for a general understanding of personal functioning characteristics in prisoners. Consequently, this work may



offer insights and indications on informing professionals about best practices in delineating appropriate treatment and clinical paths within prisons.



The Assessment of Persistent Complex Bereavement Disorder its associations with adult attachment

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Abstract

Introduction: Persistent Complex Bereavement Disorder (PCBD) is a grief disorder found in the Conditions for Further Study section of the DSM-5. PCBD is currently not a formal disorder but was created for the purpose of encouraging research into the condition. Currently, there is an increasing interest in the development of measures to evaluate these conditions and in understanding PCBD risk factors. A promising scale is represented by the Persistent Complex Bereavement Inventory (PCBI). In the present poster we aim to investigate the psychometric proprieties of PCBI and evaluate the associations between PCBI and adult attachment style among community dwelling adults.

Methods: We recruited a sample of 266 bereaved participants in the last two years. Participants were administered the PCBI and the Attachment Style Questionnaire (ASQ). We performed confirmative factor analysis and a bifactor model to test the factor structure of PCBI. Moreover, we carried out regression analysis to evaluate the association between PCBI and ASQ.

Results: Confirmative factor analysis supported a three-factor model (core grief, reactive distress, and social/identity disruption) identified in the original version of the scales. However, the bifactor model suggested the scale structure is unidimensional. Considering the relationships between ASQ scales and PCBI, we found that Discomfort with Closeness and Preoccupation with Relationships play a relevant role in the PCBD.

Discussion: The Italian version of PCBI showed adequate psychometric properties. Moreover, our data suggested that disorganized attachment style represent a factor to be taken into account in the development PCBD.



Metabolomic evaluation of psychosurgical synergy on the restoration of body image and psychophysical well-being after breast cancer

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Abstract

Introduction: The diagnosis and treatment of breast cancer can worsen women's psychophysical well-being, with consequent repercussions on their quality of life. Mastectomy with breast reconstruction appears to have significant effects on psychosocial aspects. In fact, women show distress, anxiety, depression, and lack of hope for the future, especially between the preliminary diagnosis and the reconstruction surgery. In addition, the psychological and emotional impact concomitant to the course of treatment can be influenced by the perception of one's body image and aspects related to sexuality. This psychological distress is often correlated with neurophysiological changes, such as increased cortisol and inflammatory response, which are relevant in the development, progression, and therapeutic outcome of breast cancer. The main objective of study is to verify the effects of a psychological-clinical intervention supported by the technique of expressive writing on the post-operative course in terms of mental and physical health in patients undergoing post-oncological breast reconstruction.

Method: Patients will be randomly divided into two groups. The experimental group will consist of patients undergoing breast reconstruction using autologous tissue and patients undergoing reconstruction with implants. This group will receive a psychological-clinical intervention supported by expressive writing, with ten interviews interspersed with three days of writing. The control group will also consist of patients with breast reconstruction using autologous tissue and patients with implants, but they will not receive any psychological-clinical intervention. To verify the effectiveness of the psychological-clinical intervention, the patients will undergo a psychological assessment and salivary cortisol measurement at different stages of the treatment, including pre-surgery, post-surgery psychological-clinical intervention and two follow-ups.

Results: Patients undergoing psycho-clinical intervention improve their psychological, emotional, and social well-being in the phase following surgical treatment, with an improvement in the inflammatory profile.

Discussion: This study will prompt an innovative multidisciplinary view of the psychophysical well-being of women involved in the post-oncological reconstructive care pathway. Patients' health will be pursued



through the integration of the reconstructed breast part that will be evaluated on a general phenotypic level considering both psychological and biological aspects.



Unified Protocol for Transdiagnostic Treatment of Emotional Disorders Assessment Instruments: Longitudinal Measurement Invariance of the OASIS, ODSIS, and PES Self-Reports.

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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. A crucial part of the success of the program is keeping ongoing records of emotional experience week by week. To this aim, weekly monitoring measures including the Overall Anxiety Severity and Impairment Scale (OASIS), Overall Depression Severity and Impairment Scale (ODSIS) and Positive Emotion Scale (PES) are completed by patients throughout the UP protocol. These measures are five-item questionnaire, that capture frequency and intensity of anxiety and depression symptoms, behavioral avoidance, and functional impairment associated with both anxiety and depression symptoms. Against this background, the present study aimed at evaluating measurement invariance of OASIS, ODSIS and PES on a weekly administration over one month.

Methods: The baseline sample was composed of 779 Italian community-dwelling adult (70.2% female; mean age=31.82 years) participants; 70 (9%) participants (64.3% female; mean age=38.55 years) completed the measure once a week for four weeks (i.e., participants were assessed at baseline, after every 7 days – i.e., after 7, 14, 21, and 28 days from the baseline assessment). Participants completed the Italian translation of the OASIS, ODSIS, and PES.

Results: Weighted least square mean and variance adjusted (WLSMV) confirmatory factor analysis (CFA) supported the unidimensional factor structure of the OASIS (CFI =.977, TLI =0.995), ODSIS (CFI =.978, TLI =0.996), and PES (CFI =.945, TLI =0.932) scales at the baseline assessment ($N=779$). WLSMV CFA longitudinal measurement invariance ($n=70$) was supported for the OASIS (scalar against configural models: DIFFTEST $\chi^2(60)=46.28$, $p>.80$), ODSIS (scalar against configural models:



DIFFTEST $\chi^2(52)=42.57, p>.80$), and PES (scalar against configural models: DIFFTEST $\chi^2(72)=61.36, p>.80$) scales.

Discussion: As a whole, our findings supported the possibility to rely on the OASIS, ODSIS, and PES scales to monitor the evolution of anxious and depressive symptoms, as well as positive emotions throughout the UP treatment.



Assessing the associations among *DSM-5* AMPD Criterion A, mentalization, and adult attachment dimensions in psychotherapy adult participants

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Abstract

Introduction: Mentalizing is rooted in attachment theory and represents an important aspect of *DSM-5* Alternative Model of Personality Disorders (AMPD) Criterion A. However, to the best of our knowledge, no previous study examined the associations among AMPD Criterion A, mentalizing measures, adult attachment in clinical participants. Against this background, the present study aims at assessing the relationships between multi-method measures of AMPD Criterion A, different components of mentalization (i.e., social cognition and theory of mind), and adult attachment dimensions.

Methods: The sample included 142 adult psychotherapy participants; 85 (59.9%) participants were female and 57 (40.1%) were male; participants' mean age was 33.67 years, *SD*=13.28 years. Participants were administered the Structured Clinical Interview for the *DSM-5* Alternative Model for Personality Disorders Module I (SCID-5-AMPD), the Level of Personality Functioning Scale-Self Report (LPFS-SR), the Movie for the Assessment of Social Cognition (MASC), the Reading the Mind in the Eyes Test (RMET), and the Attachment Style Questionnaire (ASQ).

Results: SCID-5-AMPD domain scores (median Spearman *r* value=.19, all *ps*<.05), and LPFS-SR domain scores (median Spearman *r* value=.19, all *ps*<.05) were significantly associated with MASC Hypermentalizing scores. Rather, the RMET total score was associated with SCID-5-AMPD Module I Empathy (Spearman *r* value=-.19, *p*<.05), and Intimacy (Spearman *r* value=-.19, *p*<.05) scores, as well as with LPFS-SR Empathy (Spearman *r* value=-.25, *p*<.01), and Intimacy (Spearman *r* value=-.21, *p*<.05) scores. SCID-5-AMPD personality functioning domain scores (median Spearman *r* value=-.37, all *ps*<.001), and LPFS-SR scores (median Spearman *r* value=-.46, all *ps*<.001) were associated with ASQ Confidence scores; notably, ASQ Discomfort with Closeness scores were uniquely and positively associated with MASC Hypermentalizing score, Spearman *r* value=-.17, *p*<.05. When the effect of ASQ Discomfort with Closeness was held constant in non-parametric partial correlation analyses, the associations between SCID-5-AMPD domain scores and MASC Hypermentalizing scores dropped to



nonsignificance; rather, the association between MASC Hypermentalizing scores and LPFS-SR Empathy (Spearman r value=.18, $p<.05$), and Intimacy (Spearman r value=.21, $p<.05$) remained significant.

Discussion: Our findings suggest the mentalizing and adult attachment dimensions may represent relevant aspects for mapping AMPD Criterion A self and interpersonal functioning, at least among psychotherapy participants.



The relationships between *ICD-11* and *DSM-5* Section III personality disorder models: A study in a sample of psychotherapy adult participants

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Abstract

Introduction: The *International Classification of Diseases* (11th ed.; *ICD-11*) classifies personality disorders (PD) according to severity, followed by the possibility of coding one or more domain specifiers that contribute to the individual expression of personality dysfunction. Interestingly, the *ICD-11* and *DSM-5* Alternative Model of Personality Disorders (AMPD) approaches to PDs are comparable overall with respect to both severity and trait descriptors (except for the trait domain of Psychoticism). To the best of our knowledge, no previous studies attempted at assessing the associations between *ICD-11* and *DSM-5* AMPD measures of impairment in personality functioning and dysfunctional personality domains in clinical participants.

Methods: The sample included 738 adult psychotherapy participants; 464 (62.9%) participants were female; participants' mean age was 33.35 years, $SD=13.03$ years. Participants were administered the Standardized Assessment of Severity of Personality Disorder (SASPD), the Personality Inventory for *ICD-11* (PiCD), the Level of Personality Functioning Scale-Brief Form (LPFS-BF), and the Personality Inventory for *DSM-5* (PID-5).

Results: The factor structure of the SASPD and PiCD-11 were found to be consistent with previous data. The SASPD total score was significantly and positively associated with PiCD Negative Affectivity ($r=.62$, $p<.001$), Detachment ($r=.52$, $p<.001$), Dissocial ($r=.50$, $p<.001$), and Disinhibition ($r=.49$, $p<.001$) domains. The SASPD total score showed positive and significant association with the LPFS-BF total score ($r=.68$, $p<.001$). The PiCD Negative Affectivity, Detachment, Dissocial, and Disinhibition domains were significantly associated with PID-5 Negative Affectivity ($r=.74$, $p<.001$), Detachment ($r=.70$, $p<.001$), Antagonism ($r=.74$, $p<.001$), and Disinhibition ($r=.83$, $p<.001$) domains, respectively. Interestingly, PiCD Anankastia domain showed a large and negative association with PID-5 Disinhibition domain, $r=-.65$, $p<.001$.



Discussion: Our findings were consistent with previous attempts at creating bridges between measures of the *ICD-11* and *DSM-5* AMPD and seemed to support the possibility to rely on the SAPD and PiCD in clinical settings.



The relationships between sexual fantasies, dysfunctional personality traits, and psychopathology dimensions: A study in a sample of community-dwelling adults

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Abstract

Introduction: Sexual fantasizing refers to the deliberate act of imagining elaborated sexual scenarios. Sexual fantasies represent a relevant component of sexual experience and play a relevant role on the cycle of sexual desire. Given that certain sexual fantasies can pose a problem for some individuals, the availability of psychometrically sound measures of sexual fantasies represents a relevant aspect. Although the link between sexual fantasies and personality traits has raised attention, the number of studies focused on their relationships is still low. Starting from these considerations, the present study aimed at: (a) assessing the factor structure and the reliability of the Sexual Fantasy Questionnaire-Revised-Short Form (SFQ-R-SF), and (b) evaluating the relationships between the SFQ-R-SF scales and dysfunctional personality domains and psychopathology (i.e., alcohol use, depression, anxiety, anger, dissociation, psychotic, and obsessive-compulsive).

Methods: The sample was composed of 440 Italian community-dwelling adult participants (66.8% female, 31.1% male, 2.1% nonbinary; mean age=28.82 years, $SD=9.72$ years). Participants were administered the SFQ-R-SF, the Personality Inventory for *DSM-5*-Brief Form+ Modified, and self-report measures of alcohol use, depression, anxiety, anger, dissociation, psychotic, and obsessive-compulsive.

Results: Confirmatory item response model (IRT) showed adequate fit index values for the five-dimension model of the SFQ-R-SF items, while omega coefficient suggested that sexual fantasies may be reliably assessed using a short self-report instrument. Multiple regression results suggested that sexual fantasies were significantly associated with selected dysfunctional personality domains. Moreover, only bodily functions sexual fantasies were not significantly related to self-reports of alcohol misuse, anxiety, depression, anger, dissociative experiences, obsessive-compulsive phenomena, and psychotic-like experiences in community-dwelling adults.

Discussion: As a whole, our findings suggested that dysfunctional personality domains, namely, antagonism and psychoticism, as well as selected non-personality disorder psychiatric conditions, namely, alcohol



misuse and anxiety, may prove useful to evaluate the risk for increasing frequency of sexual fantasies and acting out of problem sexual behaviors.



Temperament and personality traits in the experience of chronic pain: a cross-sectional study of differences among subjects with Fibromyalgia, Headache, Vulvodynia and overlapping conditions.

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Abstract

Background: Chronic Pain (CP) is characterized by persistent or recurrent pain lasting more than 3 months. It represents a major health issue worldwide, significantly affecting psychological burden and quality of life.

Objective: This study aims to compare different chronic pain conditions-Chronic Headache (CH), Fibromyalgia (FM), and Vulvodynia (VU) and complex conditions with regard to temperament (sensory processing sensitivity-SPS) and personality.

Method: A self-report survey was fulfilled by 1144 women by the mean of Highly Sensitive Person (HSP) scale to evaluate temperament, and the Personality Inventory for DSM-5 Short Form (PID-5-SF) for personality.

Results: Significant differences were found among groups. Individuals in the complex CP exhibited higher scores in the LST domain compared to other groups ($F = 40.600$; $p < 0.001$), indicating a heightened ability to perceive stimuli. Additionally, complex and FM cohorts showed elevated scores in personality such as Psychoticism ($F = 10.900$; $p < 0.001$) and Detachment ($F = 6.684$; $p < 0.001$) compared to healthy controls.

A comparable pattern of the relationship between temperamental and personality traits is analysed in each clinical condition. LST shows positive correlations with the domains of psychoticism, detachment, and negative affectivity in all conditions except CH, where there is no significant association with psychoticism. The EOE is consistently positively correlated with the domains of psychoticism, detachment, negative affectivity, and antagonism in all clinical conditions. In addition, EOE appears to be associated with the Disinhibition domain in the VU ($r = 0.265$; $p < 0.001$) and complex CP ($r = 0.169$; $p = 0.001$).



Conclusions: Ease of arousal and low sensory threshold seem to be the most involved hereditary traits with respect to differences among syndromes. Psychotic tendencies, detachment and negative affectivity were identified as differential personological domains, almost identifying characteristic traits for the different chronic pain syndromes.



Parental Perspectives on Climate Change: a Qualitative Text Analysis to Explore Emotions and Changes Needed

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Abstract

In recent decades, growing scientific evidence has placed climate change at the center of global concerns, recognized as one of humanity's most urgent and complex challenges. This environmental crisis has significant consequences on various aspects of society, including family dynamics and parenting. Research has increasingly highlighted the crucial role of parents in shaping their children's perceptions and behaviors toward the environment and climate change. However, while the focus has been on the environmental and socioeconomic implications of climate change, there is a dearth of studies exploring in detail how this global challenge affects family dynamics and children's well-being. This study aims to examine parents' thoughts about what changes are needed and emotions related to climate change, exploring how this challenge affects parenting in the current context. A sample of parents (N = 100, 73% mother, mean age = 43,26 years, SD = 5,32) of third, fourth, and fifth graders and a sample of parents (N = 100, 73% mother, mean age = 49,33 years, SD = 5,17) of high school adolescents were recruited to participate in this research between November 2023 and March 2024. Participants were asked to answer open-ended questions about the emotions that the issue of climate change aroused in them as parents and what change they think is needed concerning the environmental/climate issue. The responses were analyzed from a content perspective, using T-LAB text analysis software, to extrapolate occurrences and co-occurrences and analyze those related to keyword groups (word associations) to identify recurring themes and prevailing emotions. The results indicate a growing concern among parents about the environmental impact on their children's future, with the emergence of emotions such as worry, anxiety, fear, sadness, and anger. Regarding needed changes, the results indicate an increased focus on respect, awareness, limitation, reduction, education, consumerism, habit, and nature. These results provide valuable insight into parents' thoughts and emotions about the environmental challenge, thereby informing policies and programs designed to support families in addressing this important issue.



Beyond the Classroom: A Longitudinal Assessment of the Efficacy of Psychological Counseling Service at the University of Chieti

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Abstract

Introduction: The University Psychological Counseling (UPC) plays a role in promoting student well-being in academic settings. Counseling services aim to promote improvements in overall well-being by providing a supportive environment for students to address personal, academic, and emotional challenges. Following COVID-19, research highlighted a greater prevalence of depressive and anxiety symptoms within the university community; furthermore, students reporting suicidal ideation doubled in 2020. The present longitudinal study aimed to assess the effectiveness of the psychological counseling service at the University of Chieti, exploring the impact of the risk condition at baseline on the maintenance of long-term benefits.

Methods: Our sample (N=144) consisted of university students with an average age of 22.57 (SD=2.45) years-old who underwent 3 to 5 counseling sessions at our UPC service provided by professional psychologists. The Clinical Outcomes in Routine Evaluation - Outcome Measure (CORE-OM) was assessed at three different time points: at the first counseling session (T0), at the end of counseling sessions (T1), and at 3-month follow-up (T2).

Results: A statistically significant difference between baseline (T0) and the end of counseling sessions (T1) assessment in all subscales of the CORE-OM (e.g., CORE-OM total score: $t= 13.68$; $p= <.001$) was found, indicative of an improvement in students' psychological well-being. This significant difference was also found between baseline and 3-month follow-up (T2) (e.g., CORE-OM total score: $t= 9.96$; $p= <.001$). No statistically significant difference was found between the post-intervention assessment (T1) and the follow-up assessment (T2), suggesting the persistence of the positive outcomes. To further investigate the long-term benefits of psychological counseling, we compared students who displayed risky behaviours at baseline with those who did not. It was found that the subgroup of at-risk students reported statistically significantly higher scores on all subscales of the CORE-OM, as compared to the students who were not at risk.



Discussion: The results highlight the beneficial role of psychological counseling in promoting student's well-being. Students not at risk of self-harming behaviour seem to better maintain the long-term benefits of psychological counseling, while students at risk require a more structured treatment approach to ensure lasting improvement.



Longitudinal Examination of Lockdown and Pandemic Coping Strategies as Predictors of Psychological Symptoms in a group of Italian Children and Adolescents

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Abstract

The COVID-19 pandemic and lockdown restrictions profoundly affected the mental health of children and adolescents globally. Children and adolescents often exhibit coping behaviors in response to emergency situations. While existing literature has elucidated the relationship between exposure to emergencies and coping strategies, this study aimed to address a gap by investigating the predictive role of coping behaviors on internalizing, externalizing, and sleep symptoms among Italian children and adolescents over a three-year period following the onset of the pandemic.

A larger longitudinal study was conducted from the initial wave of infection (March 2020) to the conclusion of the pandemic (May 2023). The current study included a cohort of Italian parents (N = 935) of children and adolescents aged 3 to 18 years who reported on their children's psychological symptoms and coping strategies 5 weeks after lockdown (T1), 8 weeks after lockdown (T2), one year later during the second wave of infection (T3) and at the end of the pandemic (T4) after three years. Assessment measures included the Impact Scale of COVID-19 and lockdown on children and adolescents to assess children's and adolescents' psychological symptoms and the Coping Inventory for Children and Adolescents during the Pandemic and Lockdown to assess three domains of coping mechanisms, i.e., task-, emotion- and avoidance-oriented coping strategies.

A hierarchical regression analysis was conducted to examine the coping strategies as predictors for symptoms over three years of the pandemic, after systematically controlling for sex and age. The results showed that avoidance strategies were stable predictors of increases in anxiety ($b = .21, p < .001$), mood ($b = .20, p < .01$), and sleep-related symptoms ($b = .26, p < .001$) at T3. In addition, avoidance strategies also predicted persistent behavioural difficulties ($b = .31, p < .05$) at T4. Conversely, emotion-focused coping strategies only predicted the increase in anxiety ($b = .20, p < .05$) at T3.



Overall, our findings highlight the different effects of coping strategies on psychological symptoms in the different phases of the pandemic and point out the need for targeted interventions to promote mental resilience in Italian children and adolescents during and after crises.



Externalizing and internalizing symptoms in the interaction with internet addiction in adolescence

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Abstract

Internet Addiction (IA) has not been included yet in DSM-5 as a disorder but is recognized as a relevant behavioral addiction – involving human-machine interaction – associated with mental health problems. Recent studies in adolescents suggested IA's significant and positive correlation with both externalizing (especially in boys) and internalizing (especially in girls) symptoms.

Research on IA emphasized adolescents' self-reports perspective, lacking studies focused on parental one. In addition, even if adolescents' externalizing and internalizing symptoms often do-occur, little is known about whether their co-occurrence confers an incremental risk for IA.

This study aimed to investigate unique and interactive associations of externalizing and internalizing symptoms with IA in female and male no-clinical adolescents, from a parental perspective.

Through an online-survey, 150 Italian parents ($M = 47.10$, $SD = 5.29$, 32-61 years old) of 150 adolescents ($M = 13.31$, $SD = 1.34$, age range 12-15 years; 56.7% males) completed the Parent Young Diagnostic Questionnaire (PYDQ) to evaluate Internet Addiction (IA) and Strengths and Difficulties Questionnaire (SDQ-P) to evaluate adolescent's externalizing and internalizing symptoms.

To test sex differences, t-test for independent samples was run. Females showed significantly higher levels of internalizing symptoms. Correlational analyses showed significant and positive associations between externalizing and internalizing symptoms, and between them and IA – across sex. Linear regression reported that, when controlling for the shared variance between externalizing and internalizing symptoms, only the unique variance in externalizing symptoms significantly predicted IA in both male and female adolescents. The interaction effect was not significant, suggesting that co-occurring externalizing and internalizing symptoms may not increase exponentially the risk of IA.

This study underlined the importance of the informant's perspective on adolescent's mental health, indicating that parent-rated externalizing symptoms seem more important than internalizing symptoms



as risk factors for IA in adolescents. Future research should adopt a multi-informant method, exploring the interaction among the outlined measures from both adolescents' and parental perspectives.

Development and Validation of the Italian Parental Mediation Scale (I-PMS): A Tool to Assess Parents' Strategies for Healthier and Safer Digital Media Use in Children and Preadolescents

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Abstract

Parental mediation strategies refer to the interpersonal communication strategies employed by parents to maximize opportunities and mitigate risks and negative consequences associated with children's screen media use. Research has highlighted mixed results concerning how different parental mediation strategies can affect children's screen media use. However, there is no consensus on a clear conceptualization of parental mediation and related strategies, as well as the operationalization of the construct can vary depending on the cultural context. Although the role played by parental mediation in children's screen media use needs to be addressed, construction and validation of a comprehensive measure of parental mediation strategies within the Italian context is still lacking. Therefore, the aim of the present study is to develop and validate the Italian Parental Mediation Scale (I-PMS) to measure parental mediation strategies. A sample of 458 Italian parents (85,2% females) of children aged 6 to 13 years participated in the study. Exploratory Factor Analysis (EFA) (Study 1) conducted on sample of 229 parents revealed a five-factor structure of the scale (18 items) representing five parental mediation strategies: parent's enabling mediation, child's enabling mediation, time restriction mediation, technical restriction mediation, and interaction restriction mediation (fit indices: RMSEA = 0.029; CFI = 0.99; TLI = 0.98; SRMR = 0.022). Confirmatory Factor Analysis (CFA) (Study 2) conducted on a sample of 229 parents supported the five-factor structure of the Study 1 (fit indices: RMSEA = 0.062; CFI = 0.93; TLI = 0.92; SRMR = 0.065). Significant correlations of the I-PMS with the Child-Parent Relationship Scale – Short Form (CPRS-SF), the Problematic Screen Media Use Measure (PMUM), and the Television Mediation Scale (TMS) indicated good convergent and concurrent validity. This study demonstrates that the I-PMS is a valid and reliable instrument to assess parental mediation strategies within the Italian context. In conclusion, the use of I-PMS can help identify which strategies could be more effective in promoting a healthy and less risky use of screen media in children and adolescents, further enlarging research in this field and prevention programmes.



Active and passive sexting among adolescents. A latent growth profile analysis with longitudinal data

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Abstract

Introduction: Given the increase of digital technologies (DTs), the dynamics of social interactions and intimate relationships have changed to adapt to virtual communications. The term 'sexting' refers to the act of exchanging sexually explicit content, such as photos, videos and messages via DTs, and these behaviors became common among adolescents. Sexting encompasses a wide range of practices, motivations, attitudes, and behaviours, and has been differentiated between active sexting (i.e., sending of sexually explicit messages, videos or photos) and passive sexting (i.e., receipt of sexually explicit messages, videos or photos). This longitudinal study aims to examine the trend of sexting behaviors over six months and the role of some predictive factors. *Methods:* Four hundred and three adolescents (age range: 13-18 years) were recruited from high schools in Naples and Palermo through convenience sampling. Participants filled out measures of active and passive sexting, emotion dysregulation, self-esteem and intensity of social media use. Data were examined using the latent growth profile analysis with Mplus software. *Results:* We found two different classes of sexting trajectories for both passive and active sexting. The first class, for both passive and active sexting, shows a low baseline level of sexting and a small initial increase and subsequent decrease, whereas the second class is characterised by a higher baseline level of sexting and an almost linear increase. The more active 'passive sexting class', i.e. having received more sexting, is associated with heavy social media use and a lower age. The more active 'active sexting class' showed a higher average age and difficulties in emotional regulation. *Discussion:* Our findings suggest that high social media intensity may be a risk factor for receiving sexual content online. Difficulties in emotional regulation may be a predictor of active sexting behavior, and more research attention should be paid to the relationship between emotional balance and virtual sexual behaviour among adolescents.



Attachment representations in adolescents and new addictions risk: the mediator role of emotional regulation

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Abstract

Introduction: The term “New addictions” encompasses the use of modern technologies (smartphone, internet, social network, gaming) which have gained significant prevalence in the current social world. These trends have garnered considerable attention, especially among young individuals. Adolescence represents a period of heightened vulnerability to the development of addictions, due to the presence of poor inhibitory control, motivational aspects, and high levels of impulsivity. Moreover, the drive for autonomy in this developmental phase increases the risk of the occurrence of dangerous behaviors due to a still in progress self-regulation process. Starting from these premises, this study hypothesized a twist between attachment representations, influencing adolescents’ autonomy, and emotional self-regulation in influencing behaviors included in the frame of new addictions.

Methods: A large sample of adolescents (n=418) completed the Behavioural Addictions Questionnaire (BAQ), the Emotional Dysregulation Questionnaire (DERS), and the Adult Attachment Style Questionnaire (ASQ). Linear regressions were carried out for each of the nine behaviors detected by the BAQ (sex, internet, gaming, physical exercise, smartphone, gambling, shopping, food, work), including DERS and ASQ scores as predictors. A path model analyzed the complex interaction between BAQ, ASQ, and DERS.

Results: A significant predictive role of attachment representations was reported in the BAQ scales, with a higher effect size for behaviors involving new technologies (i.e., internet, gaming, smartphone; all adjusted $R^2 > 0.30$). DERS subscales did not significantly influence the BAQ trend. However, the path model reported a significant role of emotional dysregulation as a moderator of the relationship between attachment representations and the risk of addictions.

Discussion: Attachment representations should be considered as risk factors for the development of behavioral addiction in adolescents. However, according to these results, clinical psychologists must consider also self-regulation in an integrated model of internalized and externalized factors affecting risky behaviors in young individuals. Without overpathologizing common and widespread behaviors,



the relationship between attachment representation and emotional self-regulation should be included in the clinical evaluation of adolescents.



Mental health benefits of a brief online mindfulness intervention for university students: a randomised controlled trial

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Abstract

Introduction: Mindfulness has been shown to be an effective intervention to improve the mental health of various populations. The objective of this study is to evaluate the effects of a brief online mindfulness intervention on and anxiety, depression and rumination in university students.

Method: The sample consisted of 486 participants including 205 (42%) university students in the experimental group and 281 (58%) in the control group. For 28 days, the experimental group practiced mindfulness meditation once a week during regular class hours and followed a daily practice program. The control group was involved in regular class activities without practicing mindfulness. The outcomes were assessed at pre and post intervention using well-validated measures of mindfulness (Five-Facet Mindfulness Questionnaire; FFMQ), anxiety (State-Trait Anxiety Inventory; STAI-Y), depression (Beck Depression Inventory; BDI), and rumination (Ruminative Response Scale; RRS). The data was analysed using mixed model ANCOVA while controlling for baseline mindfulness levels as co-variate.

Results: Our results demonstrated the effectiveness of a brief online mindfulness intervention in reducing anxiety, depression, and rumination of university students. Moreover, the initial trait mindfulness predicted the effectiveness of the brief mindfulness intervention at individual level, and was inversely linked to anxiety, depression, and rumination.

Discussion: Our findings have the potential to make a significant contribution to the field of public health by providing valuable insights into the impact of a brief online mindfulness intervention for the mental health of university students.



A new tool for the assessment of financial capability

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Abstract

The ability to handle money and understand financial activities, known as financial capability, allow people to align their needs and interests with their values. As a continuum, it ranges from a refined understanding and management of finances to an inability typically associated with dementia and/or mental illness.

So, it seems necessary to have a financial capacity assessment tool that, along with legal and medico-legal evaluations, can be used by the clinician to determine a person's financial capability.

A new self-report questionnaire for the assessment of financial capabilities was implemented and administered by cognitive disorders and dementia care center in-patients and psychiatric treatment facility in-patients. Filling in the new instrument took 30 minutes and it consisted of five basic areas (daily and common financial skills; comprehension of scheduled expenses and management of contingencies; knowledge of how to analyze insurance/financial/investment plans; knowledge of basic legal and financial concepts) and two optional areas on donations or testamentary capacity. Cognitive and neuropsychological questionnaires and a projective instrument for the assessment of personality characteristics were also administered. Results showed that participants of both the cognitive disorders/dementia and psychiatric groups had a marginal or no competency at all in the tasks related to the financial capability, linked to a more or less severe cognitive impairment, showing a good capacity of the new tool to evaluate the construct on which it is based. The new tool has therefore proved to be more user-friendly, up-to-date and faster than the existing ones, and preliminary results will be presented in order to provide confirmation of this.



The benefits of Insight Dialogue (ID) practices for mental health: psychological well-being, self-compassion and mindfulness

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Abstract

Introduction: Insight Dialogue (ID) is a structured practice of dialogic meditation. Its aim is to promote a mindful attitude, while extending the paradigm of individual meditation to a dyadic setting. ID practices can be carried out in different contexts, such as in meditation retreats. The purpose of this study is to examine the effects of ID practices carried out in retreat contexts in promoting psychological well-being, self-compassion and mindfulness.

Methods: The sample consisted of 100 adult participants (mean age=55.69; SD=11.54) recruited at five ID retreats conducted in various locations across North America. Participants completed a battery of questionnaires, including the Scales of Psychological Well-Being (SPWB), the Self-Compassion Scale (SCS), and the Five Facet Mindfulness Questionnaire (FFMQ). Measures were administered before and after each retreat.

Results: Using a series of repeated measures ANOVAs, we compared RPWB, SCS, and FFMQ scores at time 1 (before ID withdrawal) and time 2 (after ID withdrawal). The results obtained showed significant effects of ID practice, with improvements between pre- and post-treatment in psychological well-being, self-compassion and mindfulness skills.

Discussion: Effectiveness studies had not yet been conducted on the effects of ID, an innovative interpersonal mindfulness practice with the aim of bringing the qualities typically cultivated in individual practices into a relational setting. This is the first experimental study aimed at measuring its effects on well-being. Our results, although not definitive, are encouraging in indicating ID as a potentially effective practice in promoting psychological well-being, self-compassion and mindfulness.



The mediating role of adult attachment insecure style on the relationship between mentalization and adverse childhood experiences in a sample of community dwelling adults

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Abstract

Introduction: Adverse Childhood Experiences (ACEs) refer to any stressful or potentially traumatic event that happen before age 18. Early neglect and an early emotional environment seem to impair the normal acquisition of the understanding of the self and others (mentalization) and have an impact on the child's sense of safety and stability in their environment, in particular on the attachment relationship that persists into adulthood. Up to now, few studies have evaluated the associations between ACEs, attachment and mentalization in adult community samples. The present poster aims to evaluate the associations among ACEs, adult attachment style in peer relationships and mentalization in a sample of Italian community-dwelling adults. We hypothesized that adult attachment style would mediate the relationship between ACEs and mentalizing.

Methods: Four – hundred three participants were administered the Childhood Abuse and Trauma Scale (CATS), the Attachment Style Questionnaire (ASQ), and the Mentalization Questionnaire (MZQ). We performed a hierarchical regression analysis to examine if the CATS total score was a significant predictor of the MZQ total score. Next, we considered if the CATS total score was a significant predictor of each insecure attachment scale and we performed hierarchical multiple regressions to select the ASQ scales that predicted the MZQ total scores. Finally, we carried out mediation analyses considering the ASQ scale scores as the mediator, the MZQ total score as the dependent variable and CATS total score as independent variable.

Results: Our regression models showed significant associations between ACEs, mentalization and adult insecure attachment style. Moreover, insecure attachment styles Discomfort with Closeness and Need for Approval fully mediated the observed associations between ACEs and mentalization deficit.

Discussion. These findings suggest that ACEs impact on mentalization ability via its effect on avoidant and preoccupied adult attachment style and that an adult insecure attachment style in individuals who experienced early adverse events could impair mentalization ability. Furthermore, they highlight the



importance of the development of a secure attachment relationship in the therapeutic context to encourage the understanding of the other's mind in order to find one's own mind represented within it.



Latent classes of psychotic-like experiences and their association with PTSD/cPTSD symptoms

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Abstract

Background: Psychotic-like Experiences (PLE) represent a heterogeneous group of subclinical phenomena that have been associated with traumatic and dissociative symptoms. However, an open question is whether the phenotypic heterogeneity of PLEs could be differentially associated with dissociative or traumatic symptoms. In this study we aim to examine potential latent classes among individuals endorsing PLEs and to assess the specificity of dissociative and post-traumatic symptoms for each class.

Methods: We conducted a cross-sectional study on 1010 high school students (49.85% female, mean age=18.07, sd=0.65). PLEs, PTSD, Complex PTSD (cPTSD) and dissociative symptoms were assessed using the Prodromal Questionnaire-16 items (PQ-16), the International Trauma Questionnaire (ITQ) and the Dissociative Experience scale – Taxon (DES-T).

We conducted a series of latent class analyses (LCA) on PQ-16 items, defining the optimal class number by Bayesian Information Criteria (BIC). Class membership was determined based on posterior LC probability. Subsequently, we fitted a series of regression analyses on the PQ-16 total score, with ITQ-corePTSD (i.e. re-experiencing, avoidance and hyperarousal), ITQ-DSO (i.e. emotional dysregulation, negative self-concept and disturbance in relationships), and DES-T as independent variables, separately for each latent class.

Results: The 3-latent class solution had the lowest BIC and was thus retained for subsequent analysis. Class 1 (n=664; 66.67%) had low overall PLEs; class 2 (n=290; 29.12%) had medium severity interpersonal anxiety/paranoia and class 3 (N=42; 4.16%) had high overall PLEs. The regression analyses showed that corePTSD score was associated to PQ-16 total score in classes 1 and 2 (b=0.18 [0.14, 0.22] and b= 0.22 [0.14, 0.29]) but not in class 3 (b=0.17 [-0.18, 0.52]); DSO symptoms were associated with PQ-16 total score in all of the three classes (class 1 b=0.2 [0.15, 0.25]; class 2 b=0.22 [0.15, 0.29]; class 3 b=0.33 [0.06, 0.61]). DES-T score was associated with PQ-16 in classes 1 and 2 only (b=0.87 [0.62, 1.12] and b=0.78 [0.40, 1.16]).



Discussion: With this study, we highlighted three latent classes of PLEs that are differentially associated with PTSD/cPTSD and dissociative symptoms. These results could help provide a more detailed clinical profile of traumatized individuals endorsing PLEs, which could help provide individualized psychological treatments.



Saturday, 14th September 2024

SYMPOSIUM SESSION



**ON THE PATH OF PSYCHOPATHOLOGY IN THE 21ST CENTURY:
METODOLOGICAL AND CLINICAL TURNPOINTS**

Proposer

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Discussant

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Abstract

Mental disease is the result of a complex interaction among biological, psychological, social, and cultural factors. The differential role of these factors depends on several circumstances. Currently, humanity is witnessing environmental upheaval that until not long time ago was unexpected. The loss of an environment, before felt to be safe, is having an impact on mental health. The outcomes of climate change on mental health range from stress to anxiety, depression and suicidal fantasies. These new forms of disease have grown substantially over the past decades and are now a full-fledged area of clinical psychology. However, in developing the goals of these new studies, one of the main methodological challenge derives from the limited availability of validated tools in this field. The aim of this symposium is to present data related to these new forms of distress in order to study emerging psychopathologies influenced by new environmental, social-cultural and technological phenomena that are currently prevalent. In this regard, four different speakers will present their works and results reporting: 1) the impact of eco-concern on sustainable eating and disordered eating symptoms (University of Palermo), 2) how emotion dysregulation, depression and anxiety influence the experience of solastalgia (Sapienza University of Rome), 3) the association of CCA with symptoms of anxiety and depression, exploring the effect of knowledge about climate change and of individualism vs collectivism attitude, (University of Perugia) and 4) a new measure exploring suicidal fantasies (Sapienza University of Rome).



How emotion dysregulation impacts on solastalgia? The moderation role of depression and anxiety

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Abstract

Introduction: Climate change not only impacts the environment but also has significant effects on both physical and mental well-being. In recent years, there has been an emergence of clinical syndromes related to climate change, termed as eco-psychopathologies. Research on eco-psychopathology primarily relies on qualitative analysis. However, there is currently a lack of a standardized definition and diagnostic criteria for eco-psychopathology, and comprehensive data on its prevalence in the population is scarce. Among the constructs studied in the literature, Solastalgia emerges, describing an emotional experience associated with the loss or threat of loss of one's familiar environment or land. It is a form of psychological distress which has recently seen the development of a measurement tool in its English version. Currently, this construct is still largely unexplored. The aim of this study is to explore the construct of Solastalgia through the role of moderator of the depression anxiety.

Methods: A self-report questionnaire including the Solastalgia scale, the Difficulties in Emotion Regulation scale, the Depression Anxiety Stress Scales Short Version was administered to a sample of n=657 subjects. Subsequently, a moderation analyses were conducted using the IBM SPSS Statistics 27.0.1 processing software.

Results: The results of the moderation analysis showed a significant effect of emotion regulation on solastalgia and that this effect is influenced by the level of depression and anxiety.

Discussion: Preliminary results of the moderation analysis would suggest that the effect of emotion regulation on solastalgia was influenced by the level of depression and anxiety. In other words, the strength and direction of the relationship between emotion regulation and solastalgia vary depending on the degree of depression and anxiety perceived by an individual. This suggests that the relationship between emotion regulation and solastalgia is not uniform but also depends on the presence and intensity of the depression and anxiety in the individuals involved.



The relationship between eco-anxiety, sustainable eating and dysfunctional eating: A cross-cultural survey

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Abstract

Introduction: Anxiety experienced in response to climate change is a serious global health threat. Recently, eco-concern has been defined as the emotional distress caused by the ecological crisis. However, the impact of eco-concern on sustainable eating and disordered eating (e.g., dietary restraint, eating concern, weight concern, and shape concern) is still unknown. The aim of this study is to explore the characteristics of eco-disordered eating in the general adult population and its associations with eating disorder symptoms. It is hypothesized that subjects with higher perceptions of the negative consequences of climate change will report a worsening of eating habits and greater risk of developing disordered eating behaviors. *Methods:* In this cross-sectional study, 326 participants ($M_{age} \pm SD = 31,07 \pm 13.69$; 65% female) were recruited in Italy ($n = 215$) and Germany ($n = 111$) through online advertisements, institutional university pages, and social media. For the purposes of this study, participants filled in the Climate change worry scale, the Eating-related eco-concern questionnaire, the Eating Disorder Examination Questionnaire, and ad hoc items on eating triggers. *Results:* Italian participants show higher worries ($p < .05$) about climate change than German ones. Higher levels of worries about climate change were related to higher eating disorders symptoms. *Conclusions:* The current results suggest that the relationship between eco-anxiety and sustainable eating may be a risk factor of disordered eating. However, cross-cultural differences seem to play a role on these relationships.



Climate change anxiety in emerging adults: risk and concurrent factors

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Abstract

Climate change anxiety is a negative response associated with concerns about climate change that includes cognitive, emotional, and behavioral responses. Recent literature suggests that emerging adults have negative thoughts and perceptions about climate change, experiencing a sense of helplessness, anger, and frustration, generating higher levels of CCA in its two components, cognitive-emotional (CEI) and functional impairment (FI). However, little is known about CCA's relationship with psychopathology in terms of anxiety and depression, and about the role of some risk factors such as knowledge of the phenomenon and cultural orientation. This study aims to explore climate change anxiety (CCA) in Italian emerging adults, to investigate the association of CCA with symptoms of anxiety and depression, and to explore the effect of knowledge of climate change and individualism vs collectivism attitude. 347 Italian emerging adults ($M=22.85\pm 2.77$; 70.60% girls), were administered the Climate Change Anxiety Scale, Horizontal & Vertical Individualism & Collectivism Scale, General Anxiety Disorder Scale, Patient Health Questionnaire, Strengths and Difficulties Questionnaire, and some questions about climate change knowledge. The results showed that CCA in emerging adults affects daily activities and interpersonal relationships, such as having fun with family and friends. Higher levels of CEI were found in girls than in boys ($t=-2.01$; $p<.01$). Climate change knowledge ($R^2=0.135$; $p<.001$) and cultural aspects ($R^2=0.028$; $p<.01$) predict CCA. The two components of CCA are associated with internalizing symptoms (CEI: $r=.35$, $p<.001$; FI: $r=.27$; $p<.001$), with symptoms of anxiety (CEI: $r=.29$, $p<.001$; FI: $r=.24$; $p<.001$), and of depression (CEI: $r=.36$; $p<.001$; FI: $r=.33$, $p<.001$). The results showed that greater knowledge of climate change and a sense of community, increase the level of CCA. The latter is higher in females who have a more pro-ecological worldview than males. Moreover, CCA is associated with internalizing symptoms, anxiety, and depression, showing that CCA is not only associated with concern about climate change but also reflects a sense of helplessness and negativity toward the future, which is characteristic of depression. In conclusion, this study identifies some risks and concurrent factors of CCA in emerging adults. Clinical implications are discussed.



Staying close to suicide: an explorative study on narratives of treated suicide patients

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Abstract

Introduction: The current century is characterized by a clinical attention to the process of screening and suicide risk assessment. The turning point is the use of qualitative tools, such as clinical interviews. The literature review highlights that in the wide range of clinical interviews currently available, there is a gap on exploration oriented to the understanding of awareness and the integration of suicidal experiences into the narratives of the personal history of patients. The purpose of the study is to present a semi-structured clinical interview for the assessment of suicidal awareness and to discuss issues emerging from patient narratives through a multi-method study.

Methods: We administered the Suicide related Outcome Personal History Interview (SOPHI) to a sample of psychiatric patients with a history of suicidal ideations and/or behaviors (n=20). The transcripts of the interviews were investigated through a qualitative text analysis using Tlab software and analyzed using a Psychodynamic analysis of narrations for multiple levels of interpretation.

Results: Four thematic groups and three latent factors emerged which highlighted specific aspects underlying the development of suicidal thoughts and behaviour. Specifically, the results suggest that truth, path, and processing are processes underlying the narrative of the subjective experience of suicide. Overall, the findings highlight the role of suicide awareness in the experience of psychiatric patients, suggesting careful evaluation and discussing potential targeted interventions.

Discussion: Our preliminary findings suggest the traumatic nature of suicide intervening as an event that disrupts the continuity of personal history, affecting the sense of self exposed to experiences of loss and failure. The importance of rehabilitation and the elaboration of experiences for the process of creating sense and integration in the narrative plot emerges.



In the path of psychopathology and suicide experience of the 21st century, we emphasize the importance of investigating patient narratives and assessing awareness and integration of suicidal experiences for risk assessment and implementation of treatment and prevention interventions.



THE ROLE OF PERSONAL EXPECTATIONS IN PHYSICAL AND MENTAL WELLBEING

Proposer

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Discussant

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Abstract

The abstracts discuss psychological aspects and treatment outcomes across different medical conditions. Eleonora Volpato, exploring Functional Gastrointestinal Disorders (FGIDs), social phobia, agoraphobia, and emotional regulation issues prevail, highlights the importance of addressing maladaptive coping mechanisms for comprehensive treatment.

Cesare Cavalera focused on in-patients' and psychiatrists' treatment expectations in a psychiatric facility and examined the interplay between patients' guilt and shame tendencies, psychiatrists' treatment expectations, and treatment outcomes, suggesting guilt and shame proneness as potential mediators.

Pierre Gilbert Rossini and colleagues study highlighted that in Anorexia Nervosa (AN), neurobiological investigations reveal distinct neural responses, particularly regarding body mistrust and mindfulness-based interventions, indicating decreased engagement with internal cues in AN patients.

Lastly, Ilenia Pasini explored fibromyalgia (FM) patients' illness experiences and care expectations highlighting a significantly influence treatment outcomes in an integrated psychotherapeutic intervention, emphasizing the need for person-centered interventions considering patients' beliefs and experiences. Together, these studies emphasize addressing psychological factors in illness management and advocate for tailored, holistic approaches to enhance treatment outcomes across various medical conditions.

Together, these studies emphasize addressing psychological factors in illness management and advocate for tailored, holistic approaches to enhance treatment outcomes across various medical conditions.



Furtherly These findings stress the significance of addressing psychological factors and personal expectations for improved treatment outcomes



Mindfulness-Based Techniques to explore body mistrust in Anorexia Nervosa patients: a resting-state EEG study.

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Abstract

Anorexia Nervosa (AN) is a persistent eating disorder known for its profound impact on physical health and psychological well-being, constituting a significant burden of illness (APA, 2022). Fundamental to its pathology are distortions in body image and a highly critical self-perception. The notion of body mistrust, encompassing negative expectations that individuals with AN hold about their bodies, sheds light on the dysregulation of internal cues and the heightened sensitivity or avoidance behaviors observed in these individuals (Teaford et al., 2012; Kaye et al., 2013). EEG investigations in AN reveal heightened theta and alpha rhythms in specific brain regions, with alpha synchronization linked to internally-focused attention, akin to meditation practices (Lomas et al., 2015; Deolindo et al., 2020; Fell et al., 2010). In this observational study, twenty AN patients and 20 controls receive two recorded mindfulness-based interventions (MBIs) - loving-kindness and self-contact. EEG, heart rate, and breathing are monitored before, during, and after listening to the audio interventions. Clinical assessments include self-reported measures for dissociation, traumatic events, anxiety, depression, and autonomic activity. Preliminary data indicate significant differences in alpha activity between AN patients and controls, particularly in response to "self-touch" practices, suggesting potential insights into body perception in AN. The observed alpha desynchronization in AN patients may indicate a shift towards external focus, potentially signalling decreased engagement with complex stimuli, particularly relevant for individuals with AN. Findings from this neurobiological study highlight the value of the alpha synchronization index in assessing the impact of mindfulness practices in both AN patients and controls. Furthermore, fluctuations in alpha power seem to reflect aspects of the body mistrust construct, indicating both hypersensitivity to bodily signals and a tendency to disengage from internal cues, particularly noticeable when AN patients focus on their bodies, anticipating discomfort



Cultivating Insights into Functional Gastrointestinal Disorders (FGID): A Cross-National Study

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Abstract

Introduction: Irritable Bowel Syndrome (IBS) and Functional Dyspepsia (FD) are common Functional Gastrointestinal Disorders (FGIDs) with profound effects on quality of life and healthcare utilization. Stemming from disruptions in GI functioning, they result in persistent gastrointestinal symptoms exacerbated by maladaptive behaviours and psychosocial factors. Despite their impact, research on the psychosocial experiences associated with FGIDs, particularly IBS and FD, is limited. This study aims to explore the correlation between FGIDs and social anxiety, agoraphobia, guilt, shame, loneliness, and emotional regulation, as well as differences between IBS and FD in psychosocial experiences.

Methods: A correlational study involving Italian and American samples of individuals with FGIDs was conducted from February 2024. Socio-demographic and clinical data were collected, and psychological assessments were administered, including the Italian Social Phobia Inventory, Agoraphobia Severity Assessment Scale, Lubben Social Network Scale – 6, Personal Feelings Questionnaire, Emotion Regulation Questionnaire, and State Shame & Guilt Scale.

Results: 458 persons with FGIDs (7.86% male) aged 25 to 40 were recruited. Diagnoses included IBS-M (25.7%), IBS-D (17.9%), IBS-C (13.6%), Unspecified Functional Intestinal Disorder (4.2%), Functional Abdominal Bloating/Distension (3.3%), FD (2.2%), and Functional Nausea and Vomiting (0.2%). High prevalence of social phobia (62.3%) and agoraphobia (74.5%), along with social isolation (57%), was observed. Contrary to expectations, cognitive reappraisal was more prevalent than expressive suppression. Shame was common, especially related to gastrointestinal symptoms, while guilt was low.

Discussion: Findings suggest interconnected cycles of social phobia, agoraphobia, isolation, shame, and guilt in FGIDs, influenced by emotional regulation. Understanding these factors is crucial for comprehensive treatment, emphasizing the need to address emotional regulation and maladaptive coping mechanisms to alleviate psychological distress and symptom exacerbation.



Comprehensive treatment approaches for FGIDs should prioritize addressing emotional regulation skills and targeting maladaptive coping mechanisms to break the cycle of psychological distress and symptom exacerbation.



Illness behavior model, care expectations and psychological treatment outcome in patients with fibromyalgia: clinical reports

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Abstract

Introduction: Fibromyalgia (FM) is characterized by a heterogeneous set of complex symptomatology, with patients reporting very often chronic, widespread pain. The unclear pathogenesis of FM exposes patients to a long and complex diagnostic process, contributing to patients' feelings of being invisible and not believed, both by medical staff and family or friends' networks. FM patients are often left alone in dealing with symptoms and the related impact, with a significant effect on disease management and the expectations of care.

Our presentation aims to illustrate how the illness behavior model and care expectations can impact psychological treatment outcomes after the clinical application of an INTEGRated Psychotherapeutic InterventiOn (INTEGRO) in patients with FM.

Methods: Quantitative and qualitative clinical data of two patients selected to participate in the INTEGRO protocol will be displayed, focusing on their FM experience, the role of patients' naïf theories related to illness and care expectations, and the implications that all these aspects had on treatment outcomes.

Results: Both patients showed a reduction in FM burden and an increase in pain management self-efficacy. Nevertheless, symptom management and so daily co-habit with that chronic medical condition proved to be strongly influenced by the patient's illness experience and symptom interpretations (according to the predominance of medical or psychological explanations).

Discussion: To contribute to creating a more person-centered intervention and to promote more favorable outcomes in patients affected by chronic illness, it is essential to explore the relationship between biopsychosocial maintenance factors, patients' perception, and naïf core beliefs in the management of symptoms together with the application of a clear intervention protocol.



Investigating Treatment Expectations within Psychiatric Residential Care

Cesare Cavalera¹, Giacomo Minazzi¹

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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 located 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 has been adopted using self- and hetero-administered measures involving patients and referring psychiatrists. 37 male in-patients (were enrolled for the present study. Baseline variables (well-being, clinical and social impairment, required care burden, guilt and shame bias) were measured every 3 months through an accelerated longitudinal multi-cohort design. The design has been proposed to in-patients divided as follows: patients admitted less than one month (admissions), patients admitted 1 to 6 months, patients admitted 6 to 12 months and subjects admitted longer than 12 months. During the first measurement, psychiatrists' expectations of the treatment outcome are investigated in addition to the baseline variables. Follow-up are conducted at 3, 6 and 9 months after the first administration.

Results: Significant correlations between in-patients' and psychiatrists' baseline expectations and treatment outcome at follow-up at 3-, 6- and 9-months were found. Guilt and shame proneness scores shown by the patients were considered as possible mediators between treatment outcome and expectations assessed at baseline.

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



WHAT'S GOING ON ABOUT "PROBLEMATIC ONLINE BEHAVIORS"? ANNUAL UPDATE ON NEW CONCEPTUALIZATIONS, RESEARCH, AND CLINICAL ASSESSMENT

Proposer

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Discussant

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Abstract

The relevance of web-related digital activities in the general population has been recently met with increasing interest in examining specific dysfunctional and/or psychopathological online behaviors, including problematic social media/social networking sites (SNSs) use.

General consensus exists about the need for carefully assessing maladaptive Internet-related behaviors and psychological underlining functioning, investigating the quality of Internet use in order to identify profiles of problematic users, as well as dysfunctional mechanisms specifically associated with problematic engagement in online activities. Heterogeneities and inconsistencies within the findings associated with the positive/negative effects of online experiences on mental health are claiming scientific attention. Furthermore, despite the great number of investigations on problematic Internet-related patterns, conceptual and methodological issues still remain debated, and new trends in prevention programs and psychological treatment addressing problematic online behaviors need to be explored. Therefore, due to increasing interest and continuous advancement in this field of research, the topic is permanently open: it has been traditionally discussed among national and international researchers, and constantly needs to be updated.

Four contributions, based on recent research on several online behaviors from different Italian contexts, will be presented and discussed deepening conceptual, methodological, and clinical issues on problematic



online behaviors: Casale et al. (University of Florence), Pezzi et al. (University of Parma), Gioia & Boursier (University of Naples), Giordano et al. (University of Palermo).



Investigating Treatment Expectations within Psychiatric Residential Care

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Abstract

In the last decades, teens' social networking sites (SNSs) use has dramatically increased, facilitating interactions with friends and feeding the adolescents' needs. However, younger individuals may be more vulnerable than other age groups to experiencing problematic social networking. Indeed, scholar research increasingly highlighted the need to explore the underlying mechanisms of problematic use of SNSs. In this regard, psychological variables including emotional dysregulation, general distress, experiences of shame, and specific motivations for online activities (e.g., escapism) have been described as risk factors for problematic social networking. Conversely, other variables potentially involved in problematic social networking, such as emptiness, boredom, emotional autonomy, and self-concept clarity need further exploration. Following a person-centered approach, the present study aimed at identifying different profiles of SNSs users. The present study examined social networking sites users aged 18–24 years based on their problematic social networking, SNSs-related behaviors and motivations, and their relations with potential psychological risk and protective factors, such as emotional dysregulation, distress symptoms, emptiness, boredom, shame, self-concept clarity, and emotional autonomy. The sample included 774 Italian adolescents (57% females; Mage = 15.74 ± 1.62 years). Four different profiles of adolescents characterized by unique patterns of problematic social networking were identified through the latent profile analysis (LPA): (1) non-problematic SNSs users, (2) at-risk SNSs users, (3) problematic SNSs users, and (4) defended SNSs users (ntp=218; AIC=39125.44; BIC=39988.37; SSABIC=39296.00; entropy=.97; LMP-LRT $p < .05$; BLRT $p < .05$). Significant differences were observed among profiles on several auxiliary variables, with problematic internet users displaying higher levels of psychological distress, emotion dysregulation, experiences of emptiness and boredom, and internalized shame, as well as lower levels of psychological needs, such as self-concept clarity and emotional autonomy. The so-called defended SNSs users showed very low levels in all the variables exploring SNSs-related behaviors and motivations, and psychological risk and protective factors. Likely, this profile consists of those participant adolescents who defensively avoided thinking about the psychological and emotional experiences related to their SNSs use. Further implications will be discussed.



The role of dissociative experiences in the link between psychological distress and technological addictions evaluated through the Assessment of Criteria for Specific Internet-use Disorders (ACSID-11)

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Abstract

Introduction: The importance of a comprehensive screening across different technological addictions was emphasized as some evidence suggests that they often co-occur. Recently, the Assessment of Criteria for Specific Internet-use Disorders (ACSID-11) was developed to study the frequency and intensity of symptoms of various technological addictions (problematic social networking sites use, gaming disorder, problematic pornography use, online gambling, online compulsive shopping). Among the possible risk factors that can favor technological addictions, psychological distress and dissociative experiences seem to play a key role. Therefore, in this study we: (i) explored the main psychometric characteristics of the Italian version of the ACSID-11 and, (ii) tested the mediating role of dissociative experiences in the relationship between psychological distress and both frequency and intensity of symptoms of different technological addictions.

Methods: To date, 1028 participants ($F = 76.26\%$; $M_{age} = 41.02 \pm 14.83$) completed the ACSID-11 and well-known measures of anxiety, depression, and dissociation. Different Confirmatory Factor Analysis (CFA) were performed to confirm the factorial structure of the ACSID-11 and Structural Equation Modeling (SEM) were conducted to test the hypothesized theoretical model on different technological addictions.

Results: CFAs supported the proposed four-factor solution of ACSID-11 (i.e., Impaired Control, Increased Priority, Continuation/Escalation, and Functional Impairment). SEM produced good fit indices ($\chi^2 = 238.154$, $df = 110$, $p < .001$; $RMSEA = 0.039$ (90% C.I. = 0.032 - 0.045), $CFI = 0.987$, $SRMR = 0.035$) and revealed that the dimension of Absorption and Imaginative Involvement of dissociation partially mediate the associations between depression and both frequency ($\beta = 0.194$; 95% CI: [0.008, 0.670]) and severity ($\beta = 0.190$; 95% CI: [0.005, 0.708]) of Problematic SNSs use symptoms. Similar results were found for the other technological addictions.



Discussion: Overall, the Italian version of the ACSID-11 results to be a useful instrument for studying technological addictions with the same items and improving comparability. Moreover, these findings extend the results of previous studies by showing that symptoms of technological addictions (both in terms of frequency and intensity) might evolve as a consequence of a dissociative experience for individuals who experience psychological distress.



(Un)lonely alone or together? Differences in adult attachment, childhood trauma and social media usages between young adults' solitary profiles

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Abstract

Introduction: Previous research showed that loneliness and aloneness, representing subjective and objective solitary experiences respectively, are associated with different patterns of social media use. Adopting a person-centered approach, this study aimed to identify distinct profiles of solitary experiences among young adults and investigate the differences between these profiles in patterns of social media use – i.e., active, passive, problematic and anxious use of social media – as well as potential risk factors of solitary experiences such as childhood trauma and insecure attachment attitudes.

Methods: The sample of the study comprised 1487 young adults (68.1% females; 1.3% non-binary or fluid), aged 18 to 30 ($M = 23.88$, $SD = 3.49$), who completed self-report instruments assessing the variables of interest. A latent profile analysis was performed to identify profiles based on loneliness and aloneness. Then, differences between profiles were examined through a multivariate analysis of variance.

Results: Results revealed five profiles: “socially connected” (low aloneness, low loneliness), “lonely alone” (high aloneness, high loneliness), “mildly solitary” (medium levels of aloneness and loneliness), “unlonely alone” (high aloneness, low loneliness), and “lonely together” (low aloneness, high loneliness). Members of the profiles characterized by greater loneliness (i.e., “lonely alone”, “lonely together”) exhibited higher levels of childhood trauma, attachment anxiety, and problematic social media use compared to members of profiles characterized by low levels loneliness (i.e., “socially connected”, “unlonely alone”). Also, members of “lonely alone” profile showed higher levels of these variables than members of “lonely together” profile, higher levels of attachment avoidance than members of “socially connected” and “unlonely alone” profiles, and highest levels of anxious social media use than other participants.



Discussion: Our findings support the need for conceptualizing loneliness and aloneness as different types of solitary experience. Moreover, the observed differences between profiles suggest that childhood trauma and attachment attitudes might foster loneliness, and that young adults might engage in maladaptive use of social media to cope with solitary experiences.



Diagnostic complexity and intervention trajectories in a psychotherapy service for PSU. A case-study report

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Abstract

Introduction: Although previous research suggests that problematic smartphone use (PSU) is related to functional impairment, concerns have been suggested about the risk of overpathologizing everyday life habits. Consequently, an increasing interest has now been reached on the importance of better assessing the clinical characteristics of problematic smartphone users over and above specific indicators of smartphone use. Based on these premises, the primary aim of the current case study was to trace the treatment outcomes of four patients enrolled in a psychotherapy service in Palermo, specifically designed for Problematic Smartphone Use (PSU) in adolescents and pre-adolescents (aged 11- 18) and funded by “CON IL SUD” Foundation.

Methods: This longitudinal case study examines four patients with the same baseline score on some PSU indicator (i.e., Time spent on the device, Smartphone Addiction, and Social Media Addiction) and longitudinally compares them on their functional impairment (i.e., boredom, difficulties in emotion regulation, and adolescents’ psychopathology) after at least 6 months of treatment.

Results: The study highlights different treatment outcomes that are understandable based on more general indicators of functional impairment and specific psychological difficulties.

Conclusion: The study suggests the helpfulness of a multidimensional evaluation approach and idiographic examination of the therapeutic trajectories of adolescent patients referred to specialized services for the treatment of PSU.



THE KEY ROLE OF CLINICAL PSYCHOLOGY IN HEALTH SETTINGS

Proposer

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Discussant

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Abstract

This Symposium underlines the key role of clinical psychology in patients evaluated for the second level assessment and the long term treatment of chronic disease. The contributions offer a deep understanding of psychopathological dimension in health settings, accordingly to the body-mind processes. It is recognized that age-related disorders represent a major health concern and that chronic conditions may influence health-related quality of life, leading to patients' psychological distress. It is well known psychological features can condition people behavior, possibly impacting compliance, adherence and conditioning the management of such chronic illness. Moreover, on the other side, even young adults may develop illness strongly related to high morbidity and mortality. Four contributions highlighting advances and perspectives in various chronic illness, burdened from psychopathological symptoms, will be presented.

The first contribution shows the impact of psychological features in patients suffering from acromegaly (Silvestro O. et al.); the second contribution explores the feasibility of a mindfulness-based intervention for Functional Seizures patients (Ciacchini R. et al.); the third contribution highlights the crucial mediating role of defense mechanisms in psychotherapy (Di Giuseppe M.); the fourth contribution aims to inform tailored psychological interventions specific to the needs of healthcare workers (Conversano C. et al.).



Anxiety, depression, alexithymia and acromegaly

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Abstract

Objectives: scientific literature highlights risk factors linked to the onset of psychopathology in different medical pathological contexts. It is known Acromegaly is a rare condition, particularly interesting with regard to the associated clinical psychological features. This research aimed at understanding the main psychopathological outcomes related to Acromegaly, with particular reference to anxiety, depression and alexithymia.

Methods: In January 2024, in line with PRISMA guidelines, a systematic search was conducted in order to detect studies considering anxiety, depression and alexithymia in patients suffering from Acromegaly.

Results: Fifty-five studies were eligible. Anxiety and depression were significantly present in patients with acromegaly, with prevalence rates variable on the basis of disease status and psycho-diagnostic instruments. Any of the included studies reported alexithymia in patients with acromegaly. No significant difference was found regarding anxiety and depressive symptoms in patients with Acromegaly in comparison with patients suffering from different pituitary diseases and chronic conditions. Anxiety and depression were associated with lower perceived HR-QoL, presence of comorbidity, joint issues, delayed diagnosis, disease duration and body image concerns.

Conclusions: Anxiety and depression may be encountered in patients with Acromegaly, impacting HR-QoL and the course of the disease. This systematic review suggests that a deeper evaluation of clinical psychological features in patients suffering from Acromegaly is needed. Particularly, the early detection of clinical psychological symptoms may lead to multi-integrate interventions promoting individuals well-being and a better HR-QoL



What truly empowers our healthcare professionals? A correlational study on burnout, stress, and resilience in hospital settings

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Abstract

Amidst the enduring impact of the global COVID-19 crisis, healthcare professionals are under heightened scrutiny, confronting unprecedented challenges. Within this context, burnout and compassion fatigue, syndromes arising from chronic stress exposure, present significant risks to healthcare workers. Their repercussions encompass personal struggles such as substance abuse and strained relationships, as well as professional challenges including decreased patient satisfaction, compromised quality of care, and even the potential for medical errors, which could result in costly malpractice suits for both caregivers and hospitals. The present study aims to investigate the expressions and relationship of the following psychological variables, stress (PSS), anxiety (STAI Y1,2), burnout (MBI), resilience (RS-14), compassion (SCS), mindfulness (MAAS; FFMQ), and self-efficacy (OCSE) among Italian healthcare professionals working in the assistance sector. Utilizing an online survey, data were collected from Italian healthcare professionals including nurses, doctors, and technicians, actively engaged in the provision of assistance services. The results of this cross-sectional study will be presented. Understanding these complex relationships is crucial for identifying areas of deficiency, understanding the needs of healthcare professionals, and thereby enabling the creation of tailored interventions aimed at improving their resilience and mental well-being.



The contribution of a mindfulness-based stress reduction intervention (MBSR) in chronic conditions: a pilot study with patients suffering from functional seizures (PNES)

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Abstract

Background and aims: Psychogenic Non-Epileptic Seizures (PNES) or Functional Seizures (FS) are recognized as a form of Functional Neurological Disorder (FND) wherein individuals experience episodic paroxysmal manifestations that appear as motor, sensory, autonomic, cognitive alterations, not caused by concurrent epileptiform activity. FS patients present comorbidities with psychiatric disorders and often have a history of trauma. The treatment of FS is multifaceted, primarily focusing on psychological therapies. In this context, mindfulness practice offers a promising, non-pharmacological approach; given that stress is a significant trigger for FS episodes, mindfulness's proven efficacy in reducing stress might help decrease the frequency and intensity of seizures. It can also increase body awareness, potentially helping individuals become more aware of pre-seizure signs. Aim of this pilot study is to assess the feasibility of a mindfulness-based intervention (MBSR) for a group of FS patients.

Methods: A group of nine patients (n=9) agreed to participate in a structured MBSR protocol. To evaluate the intervention's effectiveness, participants were administered psychological assessments and qualitative measures both before and after the MBSR. Measurements included sleep quality (PSQI), depression and anxiety levels (BDI-II, STAI Y), perceived stress (PSS), interoceptive awareness (MAIA), dissociative experiences (DES-II) and meteorosensitivity (METEO-Q).

Results: results will be presented.

Conclusions: Clinical trials and more extensive research studies are needed to rigorously evaluate the efficacy of MBSR for FS, including its potential to reduce seizure frequency, improve quality of life, and decrease reliance on healthcare resources.



The mediating role of defense mechanisms in psychotherapy

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Abstract

Objectives: In response to internal conflicts and stressful external situations, the individuals automatically activate their defense mechanisms, also known as implicit emotional regulation processes. Research has shown that immature defense mechanisms are highly used by patients with depressive disorders, while adaptive defenses are associated with psychological well-being and good therapeutic outcome.

Methods: In the present study we analyzed 28 patients with a diagnosis of Major Depression undergoing psychotherapeutic treatment. Depressive symptoms and defense mechanisms were assessed at the beginning and end of treatment using the Hamilton Depression Rating Scale (HDRS) and the Defense Mechanisms Rating Scale Q-sort (DMRS-Q), respectively.

Results: T-tests analyses showed decrease in immature defenses and increase in mature defenses at the end of the treatment. Mediation analyses showed that the direct effect of psychotherapy on the reduction of depressive symptoms was further increased by the mediating effect of mature defenses.

Discussion: Analyzing defense mechanisms in psychotherapy with depressed patients is important to understand the maladaptive ways of responding to the experienced distress, which foster the maintenance of depressive symptoms. Defense mechanisms highest in the hierarchy can effectively help the process of change in psychotherapy. Converting maladaptive defensive strategies into adaptive ways of coping with distress can promote symptom reduction and hinder possible relapses.



CLINICAL AND SOCIO-HEALTH EMERGENCY PSYCHOLOGY

Proposer

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Discussant

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Abstract

In a rapidly evolving world, characterized by increasing complexity of threats to health and public safety, the need for an effective and compassionate response to emergencies is more evident than ever. Health crises, natural disasters, serious accidents, and social emergencies pose challenges that require not only an immediate and technical response but also special attention to the psychological and emotional needs of those involved.

Emergency Psychology deals with clinical and social interventions in emergency contexts such as disasters and natural calamities, emergency/urgency situations, and socio-health contexts, focusing on both rescuers and direct recipients of the intervention, as well as on new social emergencies. Interventions in these contexts are carried out on subjects who are mostly not pathological or suffering from specific disorders, but are healthy individuals experiencing a range of reactions causing psychological distress, defined as a normal response to exposure to an exceptional event that threatens the sense of continuity of existence.

This symposium aims to explore and understand the psychological dynamics underlying emergency situations, as well as to develop effective strategies and interventions to support affected individuals in their process of adaptation and individual and community recovery.

Contributions within the symposium aim to highlight: the psychological dynamics involved in socio-health emergency situations, with particular attention to the impact of the event on the formation of



personal identity and individual and collective perceptions of safety and social justice; deepen the understanding of deviant behavior among adolescents in socio-health emergency contexts, exploring the influences of social, cultural, and ideological contexts in shaping behavior and conception of the future; illustrate effective psychological strategies and interventions to support adolescents affected by socio-health emergencies in their process of adaptation, recovery, and building a positive vision of the future; explore the role of healthcare and social workers in addressing socio-health emergencies, with particular attention to managing their own psychological well-being and supporting victims, including adolescents, in the healing and rehabilitation process.

The ultimate goal is to promote interdisciplinary exchange of knowledge and practices among healthcare professionals, clinical psychologists, educators, and other professionals involved in mental health care and promotion during socio-health emergencies



The psychological support for mafia victims in emergency situations

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Abstract

Introduction: This intervention falls within the framework of urban security applied to emergency contexts characterized by collective mafia trauma.

Method: It aims, from an interdisciplinary perspective, to explore and understand the psychological dynamics of the traumatic impact of the mafia, as well as to illustrate effective post-traumatic psychological strategies and interventions to support direct mafia victims in their process of adaptation, recovery, and liberation from victim status.

Results: The contribution will provide knowledge of a psychological support service for mafia victims, outlining its functioning and interdisciplinary operational practices, while also addressing levels of suffering not only at the individual but also at the family and community levels.

Discussion: Lastly, attention will be given to potential traumatic experiences and psychological distress among operators working in contact with mafia phenomena and its multiple and repeated victimization.



Trusting tomorrow: Analyzing adolescent confidence and its impact on self-development and social behavior

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Abstract

Introduction: The social impact and role of deviant attitudes among adolescents represent a crucial issue in the development of personal identity within the current scenario of social emergency. This study aimed to explore perceptions, representations, and attitudes toward daily life experiences related to civic sense, coexistence, and social justice. The primary objective was to investigate the role of social and cultural context, ideologies, and judgments in shaping self-development during adolescence and, consequently, adolescents' attitudes in daily life, adherence to social norms, and their conception of the future. The study hypothesized that the level of trust and investment in the future may be positively correlated with dimensions such as the sense of community, perceived well-being, presence of meaning in life, perceived social support, and social responsibility.

Method: To achieve this goal an "exploratory-narrative" questionnaire, comprising graphic vignettes and open and closed questions was utilized. The semi-structured instrument includes standardized questionnaires aimed at exploring: the presence of cultural models, social support, perceived well-being, sense of community, justification of the system, sense of power, familism, presence of meaning in life, social responsibility and social desirability. The analyzed sample comprises 726 adolescents with an average age of 17 years, from three high schools in the Palermo and neighboring area. ANOVA was used to identify relationships and differences among the psychosocial variables under examination.

Results: The main results indicated that the majority of the sample expressed confidence in the future (82.4 %) and individuals with low income exhibit more distrust than those with high income ($p=0.004$). ANOVA correlations also reveal strong significance between trust in the future and perceived social support ($p<0.001$) and sense of community ($p<0.001$), in line with the literature regarding the importance of the sociocultural environment in which one is born and raised for self-development and future



prospects. However, contrary to expectations, social responsibility is not significantly correlated with trust in the future ($p=0.73$) exacerbating the current social emergency, confirmed by disinterest in political action (34.8%).

Discussion: These findings underscore the urgency of implementing interventions to promote more conscious and proactive behavior in adolescents. Future research could further explore the role of social responsibility in the current social emergency scenario, to facilitate psychoeducational interventions within the school institution, prevent deviant behaviors, and foster positive and resilient visions of the future among adolescents.

The body in “emergency”: psychological adaptation to the diagnosis of chronic and acute illness and the sudden loss bereavement process in individuals in the emergency systems

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Abstract

Introduction: Emergencies represent events that may threaten or actually damage the safety of the persons or property involved. Consequently, the concept of an emergency focuses more on the perception of threat than on the manifestation of actual damage. The outcomes of an emergency are not limited to those directly involved in the traumatic event, but also extend to those who experience the threat in various forms, with impacts on their physical and mental integrity.

This study aims to assess the psychological impact of stressful events such as sudden bereavement and the diagnosis of chronic or acute illness in individuals who required emergency medical assistance.

Method: The sample comprises 1285 individuals, of whom 634 suffered a sudden bereavement (34% men and 66% women, with a mean age of 42.27 years and SD=14.02) and 651 were diagnosed with a chronic or acute illness (36% men and 64% women, with a mean age of 41.57 years and SD=14.2). Results: The analysis showed that there were no statistically significant differences in symptoms and in all the IES variables, with the exception of hyperarousal ($p < 0.005$), which was significant in the second group. This result is of clinical interest, considering the psychological and physical impact of adjusting to a new life that includes the management of a chronic or acute illness diagnosis.

Discussion: Although the processes governing reactions to sudden bereavement and the diagnosis of chronic or acute illness are not yet fully understood, the literature offers several analyses aimed at identifying factors that may contribute to the development of psychological problems after such events. Identifying these risks may allow screening already during access to the emergency system, in order to identify dysfunctional patterns and provide the necessary support. In general, those who experience such stressful situations may feel trapped in a cycle of symptoms that dominate their lives, making it difficult to concentrate on other things, maintain interpersonal relationships and participate in leisure activities. If these symptoms persist over time, they can have a significant impact on a person's quality of life and general functioning, becoming chronic.



What mafia do we have in mind? A qualitative study in a sample of ordinary people

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Abstract

Introduction: In a scenario of deep social crisis, characterized by political tensions, economic inequalities, feelings of distrust towards institutions, and profound existential and social malaise, exploring the meanings and dynamics by which people make sense of and interpret problems of living together is a major challenge for psychology. As part of a wider project entitled “The Mafia of Everyday Life”, this study conceives the Mafia a way of thinking, making meaning and acting social experience and aims to investigate its representations among ordinary people.

Method: The study involved 587 participants from different social backgrounds, spanning ages 18 to 76 years (mean age: 35.83; SD: 15.647), who were asked to tell what the Mafia is. A thematic analysis of elementary contexts and a Lexical Correspondence Analysis (LCA) were applied to the corpus of the responses collected and implemented using the T-LAB software (version T-Lab Plus 2020). The thematic analysis allowed the identification of three different ways of representing the mafia: a criminal organization, a cultural system and or a substitute for the State.

Results: The results of LCA allowed for the identification of the main factorial dimensions organizing the (dis)similarity in the collected discourses. The first dimension opposes two different ways of representing the Mafia: on one hand, the Mafia as a "mentality," namely as a complex of attitudes, beliefs, and thought patterns characterizing a certain group of people, on the other hand, the mafia as a "criminal organization." The second dimension opposes two different focuses of discourse: on one hand, the ways and forms through which the Mafia acts (e.g. intimidation and corruption), and on the other the mentality and emotions it feeds on (e.g. omertà and fear).

Discussion: Overall, these findings highlight the complex and multifaceted nature of the Mafia's influence. By exploring how individuals perceive and interpret the Mafia within their cultural context, this study provides valuable insights for understanding the broader social, cultural and political dynamics at play in contexts marked by social crisis and institutional distrust.



**MENTALIZING AND EVIDENCE-BASED APPROACHES: CONNECTING THEORY
AND PRACTICE**

Proposer

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Abstract

Mentalization, the capacity to understand and interpret behavior through the lens of intentional mental states, is recognized as a crucial component in psychology and psychotherapy, as it aids in understanding the underlying motives, feelings, and thoughts driving human actions. It plays a central role in fostering reflective thinking, emotional regulation, and effective communication in therapeutic contexts. Despite its importance, significant gaps exist in the literature concerning its practical applications across various psychological domains. This symposium addresses these gaps by bringing together diverse research focused on mentalization-based approaches, emphasizing the need for evidence-based practices to guide therapy, training, and health outcomes. (1) Boldrini et al. assess psychotherapy training programs in Italy, identifying a need for more rigorous evidence-based standards. This study reveals that many programs fall short of robust scientific grounding, raising concerns about the quality of training for future therapists. This connects with the findings from the other studies, reinforcing the idea that evidence-based approaches are crucial for both training and therapeutic practices. This study's implications align with (2) Pandolfi et al. exploration of therapists' adherence to Mentalization-Based Treatment (MBT) techniques and their impact on patients' reflective function. Results reveal that MBT can lead to positive changes in patients' reflective function, suggesting that adherence to MBT can significantly enhance



patients' mentalization abilities, offering a pathway to improve therapeutic outcomes. This finding is in line with (3) Del Guerra et al.'s exploration of maladaptive personality traits in adolescents, where emotional dysregulation and epistemic trust are key factors. This network analysis underlines the importance of addressing these traits through mentalization-based interventions. (4) Bassi et al.'s study extends this focus by examining mentalized affectivity—the ability to mentalize or reflect on one's thoughts and emotions, leading to a reinterpretation of emotions' meaning—in reducing diabetes distress among adults. This study suggests that effective emotional expressing and processing can significantly reduce diabetes distress.



The relationship between maladaptive personality traits, epistemic trust, mistrust, credulity and emotional dysregulation among Italian adolescents: A network analysis approach

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Abstract

Objective: To date, few studies have used a multi-dimensional approach to investigate maladaptive personality traits in relation to other psychological constructs of adolescents' mental health. This gap is addressed by the current study, which relies on a network analysis approach to evaluate the mutual association characterizing maladaptive personality traits, considering emotional (dys)regulation and epistemic trust, mistrust and credulity among Italian adolescents.

Methods: In the mainframe of TEEN-TOK project, N = 1069 adolescents (60.5% female) aged between 13 and 19 years (Mage = 16; SD = 1.23) completed an online survey comprising the Personality Inventory for DSM Short Form, the Epistemic Trust, Mistrust, and Credulity Questionnaire, the Difficulties in Emotion Regulation Scale, and socio-demographic data. A network analysis was run, in which age was also taken into consideration.

Results: The network analysis results showed the centrality of mistrust and emotional dysregulation in relation to negative affectivity, detachment and psychoticism. Additionally, negative affectivity has connections with credulity, while antagonism is associated only with disinhibition and psychoticism. Disinhibition, in turn, is linked to both credulity and emotional dysregulation. Moreover, as adolescents grow older, the link between age and emotional dysregulation indicates that shifts in emotional regulation may occur, potentially influencing negative affectivity, detachment, or psychoticism.

Conclusions: These results emphasize the importance of addressing mistrust, credulity and emotion dysregulation as regard maladaptive personality traits in adolescents. In terms of clinical implications, it should be fundamental to implement effective psychological interventions that consider these interconnected dimensions to provide tailored mental health support. By incorporating a multi-faceted



approach, clinicians can better understand the complexities of adolescents' mental health and design more effective treatment plans to support their well-being.



The Evidence-Based Status of Psychotherapy Training Programs in Italy

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Abstract

Introduction: There are approximately 380 private institutes in Italy offering paid psychotherapy training programs that qualify students for registration with the psychotherapists' registry. These institutes have been approved by relevant authorities and committees over the span of forty years, during various historical periods. The Italian Code of Ethics for Psychologists states: "Psychologists employ methodologies for which they can indicate scientific sources and references." The purpose of this study is to assess if and how the methodologies taught in the statutes of Italian psychotherapy training programs meet evidence-based indicators grounded on currently available scientific references. *Methods:* Websites of 382 Italian training institutes were screened, and the theoretical models and methodologies offered were extracted. Utilizing a Delphi consensus method, evidence-based indicators were developed to evaluate whether the efficacy of the taught methodologies are supported, for at least one clinical population, by: 0) no evidence, no peer-reviewed scientific articles with any experimental design; 1) very low evidence, at least five case reports; 2) low evidence, at least one randomized controlled trial (RCT) or cohort study; 3) moderate evidence, at least one meta-analysis or network meta-analysis of RCTs; 4) high evidence, at least one umbrella review or at least one international guideline for the administration of psychosocial treatments. Major bibliometric search engines of peer-reviewed journals and key international guidelines were consulted to apply the designed evidence-based indicators. *Results:* 72% of psychotherapy training institutes in Italy meet the criteria from high to moderate evidence, 12% low evidence, 10% very low evidence, and 6% no evidence. Institutes teaching methodologies rated as "low evidence" or below were contacted to provide additional information to correct any potential errors in our data extraction or in the application of the indicators – this consultation is ongoing, and the reported results may be subject to minor changes. *Discussion:* Over a third of psychotherapy training institutes in Italy teach psychotherapeutic intervention methodologies not supported by scientific evidence according to very broad evidence-based indicators (i.e., evidence referred to at least one clinical population, no evidence grading was considered).



The role of mentalized affectivity and reflective functioning in adult experiencing type 1 diabetes distress: An exploratory study

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Abstract

Recent studies have shown that mentalization-based interventions can reduce diabetes distress and promote psychological well-being, although so far only among adolescents with type 1 diabetes. This cross-sectional study expands on this research by exploring the relationship between diabetes distress, reflective functioning, and mentalized affectivity in a clinical sample of 115 adults (73% males, Mage = 41.55, SD = 12.38) with type 1 diabetes who experience diabetes distress. Participants completed an online survey comprising the Reflective Functioning Questionnaire, which includes the dimensions of certainty and uncertainty about mental states, the Brief-Mentalized Affectivity Scale, consisting of three dimensions namely identifying, expressing and processing emotions, and the Problem area in Diabetes-Short Form. A multiple linear model was computed relying on the stepwise method in order to identify the model better accounting for diabetes distress. The final model showed significant associations between diabetes distress and the mentalized affectivity and reflective functioning dimensions. Identifying emotions ($\beta = 0.30$) and uncertainty about mental states ($\beta = -0.20$) were positively associated with diabetes distress. Conversely expressing ($\beta = -0.31$) and processing ($\beta = -0.18$) emotions were negatively associated with diabetes distress. The overall model fit was statistically significant ($F(5,109) = 7.60, p < 0.001, f^2 = 0.35$), explaining 26% of the total variance in diabetes distress. These results underscore the complex relationship between mentalized affectivity and diabetes distress in adults with type 1 diabetes. The findings suggest that interventions promoting emotional expression and processing, while addressing uncertainty about mental states, could be beneficial in reducing diabetes distress. Further research is needed to explore the effectiveness and long-term outcomes of such mentalization-based interventions in promoting psychological well-being and managing diabetes distress.



Exploring the relationship between clinicians' adherence and competence in Mentalization-Based-Treatment and in-session changes of patients' reflective function

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Abstract

Introduction: Previous studies have hypothesized that mentalization, defined as the human capacity to understand the actions of others and one's own behavior in terms of intentional mental states, may be a common factor in different psychotherapeutic approaches. Moreover, some research has highlighted a relationship between specific therapist interventions and changes in patients' Reflective Function (RF), considered the empirical operationalization of mentalization. At the same time, however, further studies are still needed to shed light on which therapeutic interventions lead to changes in patients' mentalization. Mentalization-Based Treatment (MBT) is a spectrum of psychosocial interventions that focus on improving patients' capacity to mentalize, initially developed for borderline personality disorder and now applied to a wide range of psychopathological conditions. This research aims to investigate the relationship between clinicians' adherence and competence in MBT techniques and changes in patient's RF in individual sessions, regardless of whether the clinician's approach was dynamic, cognitive-behavioral, or MBT.

Our hypotheses were: (1) Clinicians not trained in MBT would use techniques recommended by the MBT treatment model (2) MBT clinicians would show higher adherence and competence to MBT compared to non-MBT therapists (3) Adherence scores would be associated with higher RF scores, regardless of the clinician's theoretical model.

Method: 133 transcripts of audio-recorded psychotherapy sessions with adult patients (N=45) were assessed both at a macro- and micro-analytic level by using the Mentalization Based Treatment-Adherence and Competence Scale (MBT-ACS), and Reflective Functioning Scale (RFS) by three different raters, blindly.

Results: ANOVA indicated that non-MBT clinicians adopted techniques indicated by the manual, whereas MBT-trained therapists showed higher treatment adherence scores compared to non-MBT therapists. A



significant association was observed between specific MBT techniques and increased RF, although not all items on the MBT-ACS contributed equally.

Discussion: clinicians with different theoretical orientations use of MBT techniques in their clinical practice, and greater adherence to them is significantly associated with higher RF scores. Further studies on different and wider samples are necessary, however our results partially confirm the transdiagnostic nature of mentalization across different theoretical models. Furthermore, not all MBT techniques have the same impact on increasing RF. Clinical implications will be discussed



MENTAL HEALTH AND MIGRATION: RESEARCH AND CLINICAL DEVELOPMENTS

Proposer

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Abstract

Worldwide, institutional data reports more than a hundred million people as asylum seekers, refugees or migrants for war, displacement, poverty, and other potentially traumatic experiences (UNHCR, 2022), with the number increasing due to the recent conflict in Ukraine and Israel (UNHCR, 2023). The impact of these experiences on the mental health of people forced to leave their native countries is detrimental, indeed they show high levels of social and mental health issues once arrive in the host Country (Blackmore et al., 2020). Europe, and particularly Italy, have a long tradition of welcoming asylum seekers, refugees, and Unaccompanied Minors (UM) from the Middle East and Northern Africa, having also developed specific norms to offer social-health care services to these populations, e.g. directive 2013/33/EU. Therefore, researchers and professionals are constantly called to update their knowledge of clinical needs and resources for intervention in different populations of migrants, aiming at proposing interventions more and more tailored and culturally sensitive.

This symposium aims at collecting contributions reporting recent research and clinical innovations in the field of mental health of different populations of migrants.

First, Muzi and colleagues from the University of Genoa frame the international situation of preferences and needs of migrants with low language proficiency in host countries, through a systematic review focusing on interventions to overcome language barriers in accessing mental healthcare, which highlights the lack of Italian studies addressing the topic. As a proper response to this scarcity, the other contributions are studies in the Italian context: Specifically, De Leo and colleagues from Milan Catholic



University of Sacred Heart (CUSH) present a qualitative study detecting the needs, risks, and protective factors for the mental health of Ukrainian refugees escaping from the conflict with Russia. Gennari and Accordini, again from Milan CUSH, focus on perceptions, knowledge, propensity, and obstacles to access social healthcare services by different groups of migrants with a Muslim background, highlighting a need for information in adults and more awareness in adolescents. Lastly, Polito and colleagues from the University of Calabria focus on youths, reporting results of an innovative application of Narrative Therapy with Unaccompanied Minors.



Low Language Proficiency Migrants in Mental Health Setting: A Systematic Review of Interventions and Outcomes for Overcoming Language Barriers

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Abstract

Introduction: Worldwide, more than 100 million people are forced to leave their home countries due to severe adversities (UNHCR, 2022), becoming asylum seekers, refugees, or migrants. In EU, they often qualify as Third-Country Nationals (TCNs), who can show low language proficiency in the host countries. Due to pre-migration traumatic experiences and post-migration difficulties, these people often show high rates of Post Traumatic Stress Disorder, depression, and anxiety (Blackmore et al., 2020) which affect post-migration adaptation, calling for intervention to promote access to mental healthcare for migrants. Specifically, the literature widely recognizes language barriers as one of the major obstacles for TCNs willing to access mental healthcare services (Blackmore et al., 2020). However, although several interventions have been developed to reduce the effect of language barriers on mental healthcare accessibility, a gold-standard model of intervention has not been defined. Therefore, this systematic review aims to report the state-of-the-art literature on interventions addressing language barriers in TCNs' access to mental healthcare services, as part of the project "Mental Health 4 All" funded by the Asylum, Migration, and Integration Fund of the European Union (Krystallidou et al., 2024).

Method: The latest PRISMA guidelines were followed (Page et al., 2020). Contributions were searched in the academic databases PsychINFO, CINAHL, Pubmed, and Scopus. Of 9844 selected, after duplicate removal, 6345 were title-based screened by two independent investigators with a third as a supervisor. They also screened the full texts of contributions remaining after this first screening (n = 658) for final selection, data extraction and quality assessment.

Results: A total of 22 contributions were reviewed (14 qualitative, six quantitative, and two mixed-method). Where services adopted bilingual staff and/or professional interpreters, the coverage rates of



care and clients' treatment adherence and adaptation to the host country increased, and TCNs' symptoms decreased. Qualitatively, perceptions of professionals and clients only partially converge, i.e., both preferred in-person modality, with bilingual staff and professional interpreters, reporting the need for a culturally sensitive approach, while only clients preferred ad-hoc family interpreters.

Discussion: In conclusion, limitations (e.g., no Italian studies) and future directions of work and research in the field are discussed.



**Understanding and Addressing the Needs and Challenges of Ukrainian Refugees in Italy:
Perspectives from Operators and Refugees Amid Mental Health Risks and Opportunities**

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Abstract

Introduction: The outbreak of conflict in Ukraine has had a profound impact on the mental health of Ukrainian refugees seeking refuge in various European countries. Following Russia's invasion of Ukraine in February 2022, over 6 million Ukrainians have been forced to leave their homes in search of safety abroad (UNHCR, 2023). Italy has emerged as one of the main host countries for Ukrainian refugees, activating a vast support network that goes beyond the traditional reception system, involving families, volunteer associations, and representatives of civil society, accommodating approximately 187,150 individuals so far (UNHCR, 2023). This migration flow, primarily composed of women, children (including unaccompanied minors), and individuals with specific needs, presents particular challenges related to mental health. The sudden flight, traumas endured in their country of origin, and separation from family ties have exposed refugees to serious risks to their psychological well-being, emphasizing the urgency of understanding and meeting their specific needs.

Method: This qualitative study adopting an idiographic approach seek to explore the main challenges and needs of Ukrainian refugees hosted in Italian reception centers, involving both formal and informal reception operators, as well as the refugees themselves. Through 28 semi-structured interviews with operators and 15 in-depth interviews with refugees, supported by pictorial stimuli to delve into their experience, the study provides a detailed overview of their needs and resources.

Results: The results identify vulnerability linked to a perpetual sense of suspension due to the inability to return home, along with anxiety stemming from family separation and the particularly vulnerable condition of minors, which is reflected in their challenges with school integration. A positive relationship with operators emerges as a key protective factor for refugees' mental health.

Discussion: This research represents a significant contribution to comprehending the challenges and requirements faced by Ukrainian refugees in Italy. Furthermore, it aims to advocate for targeted support strategies aimed at enhancing their quality of life and mental health. These initiatives should ease job



search efforts and foster the development of networks within their fellow nationals' community, as well as facilitate access to psychological support.



Exploring Perceptions of Social and Healthcare Services Among Muslim Migrants: A Gender and Generational Analysis

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Abstract

Introduction: The available data regarding immigrants' utilization of social and healthcare services in Italy is scant, yet emerging research indicates that foreign nationals face myriad hurdles when attempting to access such vital provisions. This obstacle is particularly pronounced in the realm of preventative initiatives and social support programs. Building upon these foundational insights, the contribution delves into the representations and lived experiences within social and healthcare services, with a specific focus on issues surrounding accessibility and the portrayal thereof among migrant populations.

Method: Six focused group discussions were meticulously conducted, centering on the nuanced themes of knowledge acquisition, representation, and engagement with local socio-healthcare services. These discussions engaged a diverse cohort of 45 participants, strategically divided into three groups comprising adolescent and adult females, and three groups comprising adolescent and adult males hailing from Pakistan, Morocco, and Egypt, all of whom are legal residents in the Lombardy region of Italy.

Through this narrative approach, the aim was to unearth the array of emotions and sentiments intertwined with their service encounters. Furthermore, the discussions aimed to unveil participants' perceptions of the services accessed, soliciting both commendations and critiques.

Each discussion was meticulously transcribed, and subsequent content analysis was conducted to extract and dissect the salient thematic threads. This analytical process not only served to elucidate significant findings but also facilitated a comparative examination of the insights gleaned across gender and age demographics.

Results: The findings underscore a fundamental yet limited grasp of socio-healthcare services among the adult participants in the study. Their experiences predominantly revolve around interactions with primary care physicians and educational institutions



In contrast, adolescents exhibit a somewhat heightened awareness of socio-healthcare services, likely influenced by their exposure within the school environment. However, their actual engagement with these services remains scant. Participants generally express appreciation for the services encountered.

Discussion: The findings underscore a critical need for heightened promotion and dissemination of information regarding specialized socio-assistance services available within the local community. Moreover, it calls for the identification and implementation of strategic approaches to better engage immigrants, facilitating their access to these essential services.



Unaccompanied Migrant Children (UMC): preliminary data on the use of Drama Therapy and Narrative Therapy Groups to mend identity fractures.

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Abstract

Introduction: Narrative Therapy proves particularly beneficial for those forced to confront traumatic and destabilizing situations: by reshaping their stories, individuals gain the opportunity to see painful parts of themselves and their experiences in new light, thus modifying them while acquiring new skills and learning to better manage their emotions and difficult situations.

Method: Three reception centers in Calabria were selected, where a 9-session program was developed for groups of 10 Unaccompanied Migrant Children (UMC). At the end of the final session, a questionnaire named "Questionnaire for the evaluation of therapeutic activities" was administered to analyze identity contents and the migratory process. At the beginning and end of each session, users completed a tool to identify perception of their well-being (Questionnaire for psychosocial well-being).

Results: On average, 72% of participants had a more positive perception of their well-being at the end of individual sessions. Furthermore, at the end of the program, 54% of participants reported having a greater understanding of their culture of origin thanks to the therapeutic groups, and 65% felt they had gained knowledge about themselves, their abilities, and skills useful for living their integration and social inclusion journey in a more serene manner.

Discussion: The use of Drama Therapy and Narrative Therapy Groups proved particularly useful in improving the psychological well-being perception of UMC within reception centers, fostering conflict mediation and the expression of their emotions.



INTERVENTION MODELS TO CONTRAST DISCRIMINATION AGAINST LGBT+ PEOPLE

Proposer

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Abstract

Nowadays, although numerous strides have been made in both research and the law, LGBT+ people continue to experience, sometimes daily, discrimination starting from the access to services (i.e., public, private, health and social) to the utilisation of them once in the social-health system. The APA, WHO, EU and many other national and supranational organisations are emphasizing the importance of always paying attention to research from a non-discriminatory perspective that can generate intervention models and best practices.

The first contribution, presented by Serri and colleagues, is focused on a research project titled QueerIS. The Project aims is to assess environmental, relational, and individual variables that prevent LGBTQ+ Italians from accessing health and social care services, but also create guidelines and interventions to prevent discrimination from the health and social providers.

The second contribution, presented by Urone and colleagues, underlines the needs of transgender and gender non-conforming people with the personal beliefs, clinical approaches and representation of psychotherapists. The authors highlight the centrality of a systemic and person-centred approach.

The third contribution, presented by Ioverno and colleagues, presents the result of a research, with 79 participants, and where the aim was to investigate the minority stress model among Nonbinary and Trans



people. The Authors highlight how nonbinary people can perceive themselves as vulnerable to aggression due to the disseminated context and to the cultural invisibility of NB gender identity.

The fourth contribution, presented by Fusco and colleagues, discusses the importance of having adapted and validated tools with LGBTQ+ people and the lack of questionnaires or tests. The results presented by the Authors concern the preliminary validation data of the Dyadic Adjustment Scale with for lesbian and gay people.



Dyadic adjustment in same-sex couples: a preliminary validation of the dyadic adjustment scale in Italian lesbian and gay individuals

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Abstract

The quality of the couple's relationship is deeply connected to the overall family functioning and well-being. In the psychological literature, it has been assessed by evaluating patterns of interaction between partners and their internal representations of the relationship. In this context, the number of international studies on the psychological functioning of same-sex couples has increased over the last decades, often underlying the similarities with heterosexual ones. Nevertheless, few instruments have been developed for, validated, and normed on LGBTQ+ populations.

The present study investigates the psychometric properties and factorial structure of the Italian Dyadic Adjustment Scale (DAS) in a sample of 225 Italian lesbians (66.2%) and gay men (33.8%) aged 20-59 years ($M = 30$, $DS = 8$) in a committed relationship for over a year. Participants were recruited via social networks and LGBTQ+ associations. They completed an online survey, including a sociodemographic assessment and a battery of standardized questionnaires, such as the Gay and Lesbian Relationship Satisfaction Scale (GLRSS) and the Measure of Internalized Sexual Stigma for Lesbians and Gay Men (MISS-LG).

We performed an Exploratory Factor Analysis, which did not seem to support the original four-factor structure, especially regarding the Dyadic Satisfaction subscale. In line with previous research, the factor concerning Dyadic Satisfaction appeared to be the least accurately defined by the items composing this subscale. Correlations with the GLRSS showed evidence of the construct validity of the DAS when evaluating same-sex relationships. Lastly, age, same-sex civil unions, and relationship duration appeared to have an effect on participants' relationship quality and dyadic adjustment.



These findings seem to confirm that, although the original four-factor structure is not replicated, the DAS can generally be regarded as an appropriate assessment tool for evaluating the relationship quality in same-sex couples, both from a clinical and a research perspective. By shedding light on the specificities of same-sex couples' dynamics, our study highlights the relevance of having instruments tailored and validated for the LGBTQ+ population in order to better understand their unique experiences and ensure accurate and sensitive measurement of psychological constructs.



Exploring Minority Stress among Nonbinary and Trans (Men and Women) People

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Abstract

Introduction: Research has shown that nonbinary people are more at risk of compromised mental health compared to cisgender and trans people, due to their higher social marginalization and invisibility. Notably, several studies have highlighted that nonbinary people experience high levels of minority stress throughout their daily lives. This is primarily due to the lack of recognition of their gender identities across different social contexts, exposing them to multiple experiences of discrimination and victimization. *Method:* The present study aimed at investigating different aspects of minority stress among 79 trans and nonbinary (TNB) people (14 trans men, 47 trans women, and 18 nonbinary) ranging from 14 to 58 years ($M = 27.1$; $SD = 9$). Between January 2021 and December 2023, participants sought access to the "6 come sei" service, a university psychological service providing an affirmative approach to gender affirmation pathways, where they underwent a comprehensive battery of assessments. For this study, data were drawn from two subscales of the Gender Minority Stress and Resilience Measure (GMSR), focusing on internalized transphobia and non-affirmation of gender identity, as well as one subscale of the Daily Heterosexist Experiences Questionnaire (DHEQ), assessing vigilance stemming from fear of discrimination. A series of T-test analyses were conducted to verify differences among trans (men and women), and nonbinary people. *Results:* Nonbinary people ($M = 1.6$; $DS = 1.5$) were more vigilant compared to trans men and women ($M = 0.9$; $SD = 0.9$) and showed higher levels of internalized transphobia (nonbinary: $M = 19.7$; $SD = 14.3$; trans man and women: $M = 13.4$; $SD = 8.9$) and non-affirmation ($M = 20.1$; $SD = 8.6$; trans man and women: $M = 14.2$; $SD = 8.6$). *Discussion:* Nonbinary people might perceive themselves as particularly vulnerable to gender identity-related aggressions, non-affirmation, and internalized stigma due to their gender expression that does not conform to traditional male/female binaries, and due to the cultural invisibility of nonbinary gender identity. This sense of



vulnerability could lead to a constant feeling of vigilance, with the need to always be aware of one's behavior and presentation to reduce the risk of discrimination or violence



QUEERIS. A Research Project on Queer Intimacies and Services

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Abstract

Although a significant transformation in personal life has occurred in the last decades, queer forms of intimacies – including conjugality, sexuality, parenthood, and care – are still subject to prejudice and discrimination. In Italy, despite the recent recognition of same-sex couples, heteronormativity continues to be hegemonic, influencing the daily life and intimate projects of individuals falling outside the heteronorm. Discrimination against LGBTQ+ individuals persists in every area of life, including health and social care services (European Union Agency for Fundamental Rights, 2019).

In addition, existing laws and policies in the country do not provide equal opportunities for LGBTQ+ intimate relationships and do not counter discrimination based on sexual orientation and gender identity. Starting from these premises, the research project QueerIS will focus on the social practices that challenge and constrain LGBTQ+ intimate relationships. Specifically, the research aims to evaluate individual, relational, and situational factors limiting the access to health and social care services of LGBTQ+ Italian individuals. Research will explore the experiences of LGBTQ+ individuals, focusing on difficulties, sense of trust and coping strategies influencing access to health and social care services, as well as on the factors related to behaviour and to intention to seek support. Moreover, attitudes toward LGBTQ+ intimate relationships among health and social care professionals will be explored. The results will make it possible to identify the obstacles and the difficulties LGBTQ+ individuals need to face within health and social care services, as well as the resources and strategies they use to deal with them. The research will provide the basis for the development of guidelines for creating health and social care services that address the specific needs of individuals in queer intimacies. The findings will also support the development and promotion of specific intervention strategies aimed at fostering health and social care professionals in providing non-discriminatory services.



Navigating transgender patients needs: representation, beliefs and clinical approaches among psychotherapists

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Abstract

Introduction: Transgender and gender non-conforming (TGNC) individuals are frequently addressed as a part of the general category of sexual minorities. The experience of gender transition, eventually followed by gender reassignment surgery (GRS), presents multifaceted and peculiar issues concerning psychosocial adjustment. Research studies have investigated the attitudes of professionals about homosexuality and bisexuality. In contrast, the attitudes of healthcare professionals towards transgenderism remain poorly investigated in the Italian context. Achieving better knowledge and trying to understand good practices could offer new perspectives that may help in eliminating TGNC marginalization and may improve the quality of psychological care for gender-diverse individuals.

Methods: This study aimed to explore psychotherapists' experiences with TGNC patients in order to increase awareness regarding transgender individuals' needs. Semi-structured interviews were conducted with 6 psychotherapists experienced in treating TGNC patients. Interview transcripts were analysed using Interpretative Phenomenological Analysis (IPA), a qualitative research method that allows a comprehensive investigation of subjective experiences to understand social cognition.

Results: Preliminary data analysis showed that the psychologist's awareness of TGNC individuals' needs of psychologists could be synthesized in four main ways: recognising one's affections toward the patient (Self-monitoring); promoting the activation of inclusion processes (Visibility); encouraging multidisciplinary equipe work (Networking); promoting active involvement of significant others – such as family and other relevant social contexts (Social Support).

Discussion: Research data deepened our understanding of attitudes, beliefs, representations, and clinical-theoretical and socio-cultural aspects related to the psychological care of TGNC individuals. Different approaches and intervention models, as well as the potential underlying processes of change, are discussed from a preventive perspective. Through the promotion of a collaborative, multidimensional



and biopsychosocial approach it is possible to treat TGNC patients. The findings of this study could allow psychotherapists and healthcare professionals to promote a systemic approach to managing TGNC patient's needs.



**EXPLORING CLINICAL ASSESSMENT AND TREATMENT THROUGH THE
PSYCHODYNAMIC DIAGNOSTIC MANUAL (PDM) FRAMEWORK**

Proposer

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Abstract

The Psychodynamic Diagnostic Manual (PDM) intends to promote a diagnostic approach that considers not only symptoms, but also idiographic, subjective characteristics and psychological functioning across different life stages. Accordingly, the PDM approach supports clinicians in their efforts to understand the depth and surface of their patients' emotional, cognitive, interpersonal, and social patterns; make "clinically meaningful" and empirically grounded diagnoses; take developmental perspectives into account; and integrate other branches of knowledge and theoretical traditions into their diagnostic process. The main goal of this panel is to present findings from four studies that adopt the PDM framework, employing various assessment tools and methodologies. These findings evidence how the manual enhances the integration of the diagnostic process with clinical practice and empirical research. The first study, by Tironi et al., focuses on children and adolescents with Somatic Symptom Disorders (SSD). Utilizing the PDM diagnostic framework, the study analyzes profiles of mental functioning and defense mechanisms, providing a broader understanding of this often underrepresented condition, enhancing tailored treatment interventions. Furthermore, the second study by Tracchegiani examines the importance of assessing dyadic and family relational patterns in the child diagnostic assessment,



particularly exploring the mother-child relationships. Adopting a PDM oriented approach, the study explores how maternal mental functioning during pregnancy influences the quality of the mother-child relationship at 6 months, specifically focusing on mother's attachment state of mind, reflective functioning (RF) and defense mechanisms. From a more clinical viewpoint, the third study by Quintigliano and Fortunato. focuses on selective mutism, exploring two cases from the clinicians' perspective, and investigating the key dimensions of psychological functioning, including defense mechanisms, mental functioning capacities, and personality styles or types. Lastly, the fourth study by Mirabella et al., through a single case study on binge eating, aims at describing and discussing the clinical value of a diagnostic assessment within the PDM framework. Capturing the complexity of binge eating pathology, this study offers valuable implications for assessment and treatment interventions.



Mental functioning and defense mechanisms with a developmental stance: a pilot study with children and adolescents with Somatic Symptom Disorders

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Abstract

Introduction: Children and adolescents with Somatic Symptom Disorders (SSD) often go unnoticed in developmental clinical and research settings due to undetected symptoms. However, the literature confirms that SSD in childhood and adolescence predicts severe mental illness later in life, impacting emotional and psychosocial adjustment. Analysis of specificities in their mental functioning and defense mechanisms is important to provide a better understanding and tailored interventions. Referring to the Psychodynamic Diagnostic Manual (PDM-2) diagnostic framework, this study aimed to investigate mental functioning, defense mechanisms and their relationships along development, comparing children and adolescents with SSD.

Method: 50 participants with SSD (8-15 y.o.; $M_{age} = 12.1$, $SD = 1.97$; 34% children; 54% girls) were assessed with the Child Attachment Interview (CAI). The Psychodynamic Diagnostic Chart for Children and Adolescents (PDC-C/A) of the PDM-2 was used to evaluate mental functioning on CAI transcripts, while the Defense Mechanisms Rating Scale (DMRS) to detect defenses. Parents assessed psychological symptoms using the Child Behavior Checklist (CBCL).

Results: From a developmental perspective, compared to children, adolescents with SSD exhibited improved mental functioning and morality assessed with PDC-C/A, with a medium effect size. Adolescents displayed less acting out and idealization, but increased repression and self-observation defense mechanisms with medium to large effect sizes. Examining the relationship between mental functioning and defenses, controlling for age, SSD showed negative significant correlations between PDC-C/A regulation and affective processes and primitive defense mechanisms of action and disavowal (acting, denial), and of neurotic (repression). Negative significant correlations also existed between identity and internal experience capacity (self-observing and self-esteem) of the PDC-C/A and internalizing symptoms, while a mild predictive effect.



Discussion: Looking at SSD in their developmental process, results confirm that psychobiological maturation allows improved mental functioning. Analysis of defenses highlights that children with SSD tend to use more externally directed defenses, while adolescents employ more internalized defenses to cope with their symptoms. Finally, during developmental stages in SSD, mental functioning appears to be related to immature and neurotic defense mechanisms as well as less internalizing symptoms. Clinical and research implications will be discussed.



Unveiling the silence: using the PDM lens to assess selective mutism in childhood

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Abstract

Introduction: In current diagnostic classifications (ICD-11, DSM-5-TR, PDM-2), selective mutism is listed above anxiety disorders, with a prevalence ranging from 1-2%. It is characterized by a consistent inability to speak in certain situations while speaking adequately in others. Despite its relatively low prevalence, mutism symptoms often co-occur with other disorders, so it is not so rare in clinical practice. However, mutism can profoundly impact on psychosocial and academic functioning during childhood, underscoring the need for a deeper understanding of its underlying factors.

Methods: This study presents two cases involving a 9-year-old girl and a 12-year-old girl who sought therapy for mutism symptoms and underwent psychodynamic assessment and therapy. The Psychodynamic Diagnostic Manual (PDM) approach was used alongside other empirically validated measures to assess personality, general mental functioning, and emotional and behavioral difficulties, in addition to defining symptoms.

Results: This comprehensive approach provided insights into the different characteristics of the two cases, revealing significant differences in underlying mental functioning and personality despite their comparable symptomatic presentations. These differences shed light on the individual significance of this specific symptom for each patient and offer different perspectives on the underlying factors contributing to their silence. Moreover, these findings give a nuanced understanding of symptomatology within the context of individual child functioning and relational dynamics.

Discussion: By shifting focus from symptomatology to a holistic understanding of patient functioning, this study underscores the value of a clinical case study approach in empirical research. It is also a new perspective on mutism, suggesting that there may be heterogeneous factors at work in mutism beyond its association with anxiety.



The impact of maternal mental functioning during pregnancy on the mother-child relationship at 6 months: A Psychodynamic Diagnostic Manual (PDM-2)-oriented investigation

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Abstract

Introduction: Section IV (Infancy and Early Childhood; IEC-03) of the Psychodynamic Diagnostic Manual (PDM-2) emphasizes the importance of assessing dyadic and family relational patterns for an appropriate diagnostic assessment in infancy and early childhood (Axis IV; Pattern and relational disorders). Recognizing mother-child relational dynamics as key for child development, clinicians adopting a PDM-2-oriented approach must consider the mother's childhood relational experiences as they enter the relationship with her child. In this vein, attachment theory predicts that the mother's secure attachment state of mind and high reflective functioning (RF) during pregnancy protect the quality of later mother-child relationships. Similarly, mothers who adaptively defend themselves from the stress of recalling their past attachment experiences are more likely to be attuned and sensitive to their child's cues. Yet, no studies have used the PDM-2 framework to investigate how maternal mental functioning during pregnancy influences the quality of the mother-child relationship at 6 months.

Methods: This longitudinal study recruited a non-clinical community sample of 68 cisgender heterosexual mothers ($M = 35.83$; $SD = 4.32$) to explore the contribution of their attachment mental state (measured with the Adult Attachment Interview; AAI), RF, and defense mechanisms (both coded from AAI transcripts) during the third trimester of pregnancy on the quality of mother-child relationship when the child was 6 months. Participants were recruited through maternity care services and observed during 20 minutes of free play interaction, coded with the Axis IV of the PDC-IEC of the PDM-2.

Results: Mediation analyses showed that greater mothers' AAI coherence of mind was associated with higher levels of RF, which, in turn, resulted in better quality of mother-child relationship. Also, preliminary analyses indicated that greater coherence of mind was associated with better quality of mother-child relationship through higher levels of maternal defenses.

Discussion: The results identified maternal attachment mental state, RF, and defenses as key aspects of mental functioning that need to be kept into account to support mother-child relationship. Also,



although not originally designed for the parenting context, the PDM-2 framework may be vital to informing the diagnostic process with pregnant women.



Behind the scenes of Binge Eating Disorder: A clinical case study through the lens of the Psychodynamic Diagnostic Manual

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Abstract

Introduction: Binge eating disorder (BED) is characterized by recurrent binge eating behaviors involving the consumption of a large amount of food and a feeling of loss of control during the overeating episode. Patients with BED experience difficulty regulating affects and emotions, identity diffusion, immature defense mechanisms, and impairments in distinguishing between mental and somatic states. Although BED has only recently achieved diagnostic visibility, individuals with binge eating behaviors experience significant functional impairment, decreased quality of life, and increased risk of physical and psychiatric comorbidities. *Methods:* The present study aims at discussing, within the framework of the Psychodynamic Diagnostic Manual (PDM), the clinical case of a 25-year-old patient diagnosed with BED according to DSM-5-TR criteria, admitted to a specialized residential treatment. Attachment patterns were evaluated at intake through the Adult Attachment Interview (AAI) and reflective functioning and defense mechanisms were assessed using the Reflective Functioning Scale (RFS) and the Defense Mechanisms Rating Scale (DMRS) applied to the AAI transcripts. Personality patterns were assessed after the first month of treatment and at discharge, using the Shedler-Westen Assessment Procedure-200 (SWAP-200) applied to the Clinical Diagnostic Interview (CDI). At the same time points, the patient also completed the Eating Disorder Inventory (EDI-3), the Identity and Eating Disorders (IDEA) the Brief Mentalized Affectivity Scale (BMAS), the Multidimensional Assessment of Interoceptive Awareness (MAIA) and the Outcome Questionnaire (OQ-45). Furthermore the Comparative Psychotherapy Process Scale (CPPS) was used to evaluate the psychotherapy process. *Results:* Insecure-preoccupied and unresolved attachment patterns, along with low reflective functioning and immature defenses emerged. More importantly, changes were observed in the psychotherapy process, personality patterns and symptomatic impairment during and after treatment. *Discussion:* The findings underline the clinical value of a multidimensional approach within the PDM framework that promotes a comprehension that goes beyond the symptoms,



but rather explores the full range of the patient's functioning, including the emotional, cognitive, interpersonal, and social patterns, providing valuable implications for assessment and treatment interventions.



UNRAVELING THE ROLE OF ECO-ANXIETY: FROM PRO-ENVIRONMENTAL BEHAVIORS AND ORTHOREXIA NERVOSA RISK IN THE GENERAL POPULATION TO MENTAL HEALTH PROFESSIONAL PERSPECTIVES

Proposer

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Discussant

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Abstract

In recent years, the escalating concerns about environmental degradation and climate change have led to an increased interest in the psychological ramifications of these pressing global issues. One such psychological phenomenon that has gained significant attention is eco-anxiety, which refers to the distress and anxiety individuals experience due to their apprehensions and worries about environmental loss and consequences of climate change. Eco-anxiety is best thought to exist on a spectrum, nonetheless intense debates in the clinical psychology field have centered around the difficulty in avoiding pathologizing a rational response to a real threat to human well-being while at the same time acknowledging new mental health risks associated with climate change events. Indeed, novel psychometric instruments are being developed to capture this complex construct and new research areas examining the relationships with psychological distress and poor mental health outcomes on the one hand, and pro-environmental behaviors on the other, are rapidly developing.

The proposed symposium brings together presentations on novel data on eco-anxiety through various perspectives, including the framework of Semiotic-Cultural Psychology Theory in relation to pro-environmental behaviors as well as Personality theory in relation to mentalizing abilities. An exploration of eco-anxiety knowledge and understanding from the perspective of mental health professionals will also be presented. Finally, a novel measure of eating-related eco-concern (EREC) undergoing preliminary



validation in the Italian population will be discussed, followed by a network analysis, a novel statistical methodology, revealing the links between EREC, climate change worry, and orthorexia nervosa symptomatology, with important implications for the prevention of eating disorders exacerbated by climate change worries.



Exploring the Role of Eco-Anxiety dimensions as mediators in Pro-Environmental Behavior Adoption Across Cultural Worldviews

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Abstract

Introduction: Eco-anxiety is a widely recognised psychological construct in the study of individuals' emotional responses to the impacts of climate change. The adoption of pro-environmental behaviours is considered an effective coping strategy for those who manifest the effects of eco-anxiety, such as affective symptoms, rumination, behavioural symptoms, and anxiety about personal impact. However, little is known about how individuals' pro-environmental behaviours may be shaped by their cultural worldviews and which dimensions of eco-anxiety are most prevalent in this relationship. The aim of this preliminary study was to adopt the perspective of Semiotic-Cultural Psychology Theory (SCPT) to analyse the relationship between cultural representations and pro-environmental behaviours (PEBs), through the effect of eco-anxiety symptoms as mediators.

Methods: Responses from 404 participants were collected through an online survey that included the Hogg Eco-Anxiety Scale, the View of Context (VOC) questionnaire, and self-reported pro-environmental behaviours. To map cultural worldviews, responses to the VOC questionnaire were subjected to a combination of multiple correspondence analysis and cluster analysis. According to the SCPT framework, each cluster is interpreted as a marker of a cultural worldview underlying the way in which the responses of a cluster of respondents are combined. These analyses were carried out using SPAD v5.5 software. The additional data collected were analysed using the multiple regression model, with the addition of analyses of the interactions between the independent variables and the moderators. The software used to carry out these analyses was PROCESS Procedure for SPSS version 4.2.

Results: The results showed that cultural representations were significantly associated with PEBs. Specifically, two cultural representations were significantly positively associated with PEBs. Furthermore, eco-anxiety symptoms partially mediated this relationship, with personal impact anxiety showing the strongest mediating effect.



Discussion: These findings suggest that cultural representations influence PEBs through the filter of eco-anxiety symptoms. Individuals with different cultural representations may respond differently to PEBs because of their eco-anxiety. Understanding this relationship is crucial for developing effective interventions to promote environmental policies and awareness campaigns that consider these cultural differences and their impact on eco-anxiety and sustainable behaviour.



Clinicians' current opinion on eco-anxiety. Growing interest from the couch

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Abstract

Introduction: The literature emphasizes an indirect negative effect of environmental degradation on mental health. Although clinical interventions aimed at alleviating the catastrophic anxieties that interfere with the functioning of those most sensitive to environmental issues are now flourishing worldwide, there is still little work that evaluates the subjective experience of the phenomenon of environmental anxiety (i.e., eco-anxiety) in clinical settings, and no clear evidence about the relationship between personality functioning characteristics and the severity of eco-anxious experiences. Therefore, the suitability of eco-anxiety as a relevant construct for psychological assessment and treatment is an issue that has yet to be explored.

Objectives: The present work aimed to 1) clarify the knowledge and scientific understanding of mental health providers on the topic of eco-anxiety, and 2) delve deeper into the relationship between eco-anxiety and personality functioning, focusing on the individual resilience capacities that accompany mentalizing skills, which are supposedly expressed in proactive management of the emotional activation caused by eco-anxiety (through mentalized affectivity) and in relying on the resources of an extended community (through epistemic trust), according to the participant's defensive profile.

Methods: For these purposes, an online survey in Italian and English was administered to mental health professionals - psychologists, psychotherapists and psychiatrists of different theoretical orientations - who were asked to answer a series of questions about the incursions of environmental issues in their clinical practice as well as their personal experiences, followed by the completion of four self-report questionnaires (HEAS-13, B-MAS, ETMCQ, DMRS-SR-30). A qualitative semi-structured interview on the lived experience of eco-anxiety and the implications of environmental concerns for the field of psychopathology was then administered to a subset of participants.

Expected results: Preliminary results are expected to show different views on the role that eco-anxiety may play in clinical contexts, depending on the theoretical background of the respondents and their socio-demographic parameters (in particular, greater variability is expected based on geographic origin, gender, and age). Regarding self-report measures, epistemic trust is expected to correlate with eco-anxiety scores



such that trust distortions (i.e., mistrust and credulity) are associated with minimum and maximum eco-anxiety scores. Mentalized affectivity and personal defensive profile are expected to intervene as mediators in the relationship between epistemic trust and eco-anxiety.

Discussion: Implications for the implementation of newly informed research paradigms in the field of personality and psychotherapy research are discussed.



Preliminary psychometric properties of the Italian version of the Eating-Related Eco-concern questionnaire

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Abstract

Introduction: Urgent calls for research on the relationship between climate change concerns and risk of eating disorders (ED) have been made. This study aimed to validate an Italian version of the Eating-Related Eco-Concern questionnaire (EREC), a one-factor, 10-item measure for the assessment of eating behaviors related to eco-concern, while considering its possible relationship to both ED risk, as in the original study, and orthorexia nervosa risk.

Methods: Using a cross-sectional design, participants were recruited through snow-balling and social network platforms. 663 adults aged 37 ± 12 years (85% females, 43% with a university degree, 68% employed) completed the EREC and measures of worry about climate change (CCWS), orthorexia (EHQ-21), and disordered eating (EDE-Q), together with questions on dietary habits and motivations, and past experience of climate change events. Validity based on internal structure was assessed via confirmatory factor analysis. To assess internal consistency reliability, we calculated McDonald's ω , Cronbach's α , and corrected item-total correlations. Validity based on relations with other variables was evaluated by computing correlations with the criterion measures. Known-group validity was tested by examining differences in EREC scores between groups based on diet motivations and climate change events using ANOVA.

Results: A one-factor model in which the error variances of two pairs of items were allowed to correlate showed acceptable fit to the data. Internal consistency was adequate. EREC scores correlated positively and strongly with CCWS scores, and weakly to moderately with EHQ subscale and total scores. Correlations with BMI and EDE-Q were not significant, except for a small negative association with EDE-Q shape concerns. Participants who followed their diet for pro-environmental and/or ethical reasons reported significantly and substantially higher EREC scores than participants with other dietary reasons. Participants with personal experiences of extreme climate events showed significantly slightly higher EREC scores than participants with no such experience.



Discussion: The Italian EREC appears to be a valid and reliable tool for the screening of eating-related concerns and behaviors related to climate change. Ecological concerns may represent a healthy adaptive response, however careful clinical consideration is warranted as it may represent a new pathway to rigid and unhealthy eating patterns.

This project was funded under the National Recovery and Resilience Plan (NRRP), Project title “ON Foods - Research and innovation network on food and nutrition Sustainability, Safety and Security – Working ON Foods”.



Is there a relationship between eating-related eco-concerns, dysfunctional eating behaviors and psychological distress? Results from a pilot study with network analysis

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Abstract

Introduction: The impact of climate change on people's mental health has emerged in the literature, showing that extreme climatic events or their anticipation can cause a specific kind of psychological distress called "eco-emotions". Authors suggested that eco-emotions may also increase the risk of developing eating disorders (EDs) and a new scale to measure this risk has been devised, called Eating-Related Eco-Concern (EREC). While EREC has been shown not to coincide with any specific ED diagnosis, its association with orthorexia nervosa remains unexplored. The current pilot study aimed to delve into the possible connections between EREC, climate change worry, orthorexia nervosa symptoms, ED symptoms, and psychological distress by using network analysis procedures.

Methods: People from the general population were recruited through a battery of online self-report questionnaires including EREC, Climate Change Worry Scale (CCWS), Depression Anxiety and Stress Scale (DASS-21), Eating Disorder Examination Questionnaire (EDE-Q) for ED symptoms, and Eating Habits Questionnaire (EHQ) for orthorexia nervosa symptoms.

Results: The final sample included $n=100$ people (females=73, males=25, non-binary=1, other gender identities=1) with a mean age of 31.62 ± 10.96 years. Bootstrap analyses produced adequate results for strength centrality and edge stability of the network. Network analysis showed that the DASS-21 subscales and EREC were the items with the highest strength centrality. Positive associations were also found between EREC and CCWS, EREC and EHQ-orthorexia nervosa symptoms, and CCWS and EDE-Q-ED symptoms. Conversely, negative associations resulted between EREC and DASS-21 anxiety and EREC and DASS-21 depression.

Discussion: Results from this pilot study using network analysis show how the EREC construct holds clinical relevance as it can represent a new risk factor for orthorexia nervosa. Indeed, even though no direct link between EREC and ED symptoms assessed through the EDE-Q emerged, findings also showed that EREC in the presence of climate change worry might increase risk of orthorexia nervosa in



the general population. However, future studies with bigger sample sizes and a longitudinal design are needed to further confirm this link.



DISTRESS AND MENTAL HEALTH OF COLLEGE STUDENTS: PREVENTIVE FACTORS AND EARLY IDENTIFICATION OF PSYCHOLOGICAL NEEDS

Proposer

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Discussant

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Abstract

One of the issues receiving more and more attention on the international agenda is the mental health and mental health needs of university students. Even before the Covid-19 pandemic, there was evidence of significant impairment in the mental health of college students, but after the pandemic, the epidemiological data is even more alarming, with worrying levels of depression, anxiety, suicidal tendencies and substance abuse, among others. Therefore, the provision of psychological interventions for university students worldwide has become an important issue with significant implications for university health services and mental health policy in general. Internationally, more and more universities have psychological services for their students, although these are mostly first-level services offering interventions aimed at listening, support and needs assessment. The demand for these services is increasing and the question at international level is whether it is possible to cope with this increasing demand with the resources available to the university. It seems necessary to think about new forms of psychological support for students. On the other hand, it is known that not all those who need psychological support actually make use of it. On an international level, treatment rates for mental health problems among university students remain low, with studies indicating that only 16–30% of students in need receive treatment. In particular, questioning the severity of one's mental health symptoms or denying the symptoms is a common theme that prevents students from seeking professional help. Furthermore, psychological services for university students are not uniformly distributed. So, as clinical psychologists concerned with student mental health, it is imperative that we ask ourselves if and how it



is possible to identify student need, even among those whose needs are not so broad as to formulate a specific demand for psychological or psychotherapeutic care. And, in parallel, to invest in preventive measures aimed, on the one hand, at reducing the factors that can exacerbate mental health problems and, on the other, at strengthening students' ability to classify some of the problems they experience as psychological and in need of intervention.



The mental health of university students who do or do not seek psychological support: do those in need actually seek help?

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Abstract

Introduction: While mental health problems and impairments were already evident before the outbreak of the Covid-19 pandemic, the pandemic and associated restrictions appear to have exacerbated mental health problems, with worrying data emerging internationally about anxiety, depression, suicidal thoughts, substance abuse and more. The provision of psychological services for students currently appears to be increasing, but not all students who would need them are seeking psychological clinical intervention. Therefore, we aimed to examine whether there are significant differences in the mental health of university students who do or do not seek psychological support.

Methods: Between 2018 and 2024, we recruited a sample of 584 university students who sought psychological support and 183 who did not. We administered a sociodemographic questionnaire and the following tests: TAS-20, BDI -21, STAI -Y, SHSS. We conducted independent-samples t-tests to determine any differences between groups.

Results: Students who sought psychological support had higher scores for depression ($t=6.674$; $p<.001$), state anxiety ($t=7.207$; $p<.001$), trait anxiety ($t=5.243$; $p<.001$), and suicide risk ($t=3.575$; $p<.001$). In addition, students who expressed interest in psychological support services showed more depression ($t=-2.219$; $p<.014$), state anxiety ($t=-1.931$; $p<.028$) and trait anxiety ($t=2.484$; $p<.006$) and higher suicide risk ($t=2.614$; $p<.004$) than students who did not. However, 14.2% of students who did not seek mental health services have severe state and trait anxiety, 9.3% have severe depression, and 3.3% have suicidal ideation. Similarly, 8.8% of students who express no interest in a psychological pathway also show severe state and trait anxiety and 5.0% severe depression.

Discussion: The fact that mental health impairment appears to be greater among students who use or want to use a psychological service seems to be a protective element when it comes to whether those who actually need it have access to the tools available to protect students' mental health. However, mental health problems are also found in the sample of those who have neither used nor intend to do. This



leaves open the question of how the need can be intercepted if it is not recognized, symbolized and mentalized by the people themselves who live this need.



Risk and protective factors for psychological distress among university students. Some implications on psychological prevention

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Abstract

Introduction: Before the pandemic, university students' mental health was poorly considered, except for what concerns disability and issues related to discrimination. The lockdown caused a sudden change in the population's habits and free movements. Consequently, mental health problems, including anxiety, fear, depressive symptoms, loneliness, and sleep problems, increased to some degree also in student's population. Several studies underlying in young adult some unknown preexistent psychological fragility due to an absence of resilient protective factor to traumatic experience. The wellbeing of university students has become an important public health concern. In a large international survey of 14,000 students across 19 universities in 8 countries, 35% of students met the diagnostic criteria for at least one common mental health condition. University students report higher levels of depression than the general population age matched peers. Whilst suicide rates are lower for students than for the general population, rates are increasing 15% increase since 2009. Experiencing mental health issues is associated with poor academic achievements and increased study drop-out rates, with a 210% increase in the last four years. There is increasing pressure on universities to improve psychological support services offered to students. However, the absence of evidence on modifiable risk factors prevents services from accessing resources and address growing demand.

Methods: scientific literature revision

Results: The narrative summary reported female as a particularly high-risk group. Adverse childhood experiences significantly predicted suicide-related outcomes but were non-significant for depression. Cognitive vulnerability factors (negative rumination, perceived burdensomeness, and thwarted belongingness) were significant predictors of depression and for increased suicidal risk. As interpersonal risk factors, two key were identified: parental depression and poor social support. Academic pressures, financial stress and experiences of sexual harassment whilst at university may trigger or exacerbate a range of mental health difficulties, suggesting that student life in itself can be a causal factor.



Discussion: These data evidence the importance to understanding risk factors that underpin student psychological health, interventions can be targeted and modified to meet students' needs based on their presenting problem and level of risk. Critically, early recognition of at-risk students presents an opportunity to prevent the emergence of psychological crises by intervention in the university experience.



University students' mental health profile and psychological counselling intervention in Italy: A systematic literature review

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Abstract

Introduction: The aim of the present contribution was to comprehensively review the existing literature concerning the prevalence of main psychological problems and psychopathological disorders among Italian university students seeking for psychological help in university counseling services (UCSs) and the effectiveness of student counselling interventions.

Methods: A systematic search was conducted on PubMed, PsychInfo, PsycArticles, PsycCRITIQUES, Web of Science, and Scopus following the PRISMA guidelines. Articles were selected based on the predetermined eligibility criteria. Study quality was assessed using a modified Newcastle-Ottawa Scale. 36 studies fulfilling the eligibility criteria were included.

Results: Students attending UCS were found to have moderate to high psychological distress (rates ranging from approximately 63.2% to 92.7%), to show a number of psychopathological symptoms, to have poor general psychological functioning and adjustment, depressive and anxiety symptoms (rates approximately 9-30% up to 48.9% and 11.2% -36%, respectively). Studies (n=21) testing the effectiveness of counselling intervention showed that treatment was helpful in improving students' mental health, regardless of the specific theoretical or technical approach employed. Of the 36 studies examined, 14 were of low methodological quality.

Conclusions: The high levels of psychological problems and psychopathological symptoms found in Italian youths attending UCS, confirming university students as a vulnerable population, support the need of mental-health promotion activities. Psychological counselling treatments seem to be an effective first-line service for university students experiencing psychological problems. Limitations in the examined studies' design (e.g., heterogeneity in studies outcomes and measures, small sample size, self-reported data etc.) should be addressed in future research to obtain a more comprehensive picture on the topic under investigation.



University students in the balance between academic psychological stress and distress: A concept analysis

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Abstract

Introduction: Two main interpretive models – developmental and psychopathological – have traditionally been used in addressing the health needs of university students. These models have led to students seeking help being approached with two different types of interventions: counselling for current and targeted emotional crises and psychotherapy for general mental disorders. However, a large proportion of students do not fall into these “classic” categories, so counseling may not be sufficient for them. At the same time, they do not exhibit clear psychopathological manifestations that require a psychotherapeutic approach. Furthermore, another portion of students do not seek help even though they suffer from significant psychological distress, such as students who lie about their academic careers. What seems to be increasingly emerging is a pattern of negative reactions to the academic context related to difficulties in coping with academic stressors. The aim of this contribution is to present an alternative model for interpreting students’ health needs based on the emerging construct of “psychological academic distress” (APD) in order to clarify the factors that determine the transition from academic stress – due to the demands of university commitment – to academic-related emotional difficulties. However, as APD is currently used without a clear conceptual basis, we sought to undertake a conceptual analysis of the construct to uncover the patterns that contribute to its development.

Method: Based on the concept analysis method of Walker and Avant (1995), a systematic search was conducted in the PsycInfo, PubMed and Scopus databases. Attributes, antecedents, contributing factors and consequences of APD were identified and the empirical references were analyzed.

Results: A content analysis of the reviewed literature revealed that APD is mainly characterized by anxiety and depressive states, often accompanied by somatic symptoms. The main antecedents of APD are perceptions of high expectations from parents, feeling inadequately treated by teachers, perceived lack of peer engagement and social isolation, difficulties in self-regulating learning and low academic self-efficacy. Insecure attachment, dysfunctional coping, and low family support were found to be significant



psychological risk factors. The consequences of APD were poor academic performance, dropout, and poorer mental health.

Conclusion: Conceptual clarification of APD may lead to a better understanding of the current health needs of university students as well as to better focused psychological interventions and prevention strategies.



Saturday, 14th September 2024

THEMATIC SESSION

“SEXUALITY, COUPLE WELL-BEING AND CHALLENGES”

Chair:

Igor Marchetti

University of Trieste



“In health and sickness”: the psychological distress of partners of women with a diagnosis of Endometriosis. The Project PRENDOTE.

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Abstract

Background: The mental health of partners of women with Endometriosis has been poorly investigated. We aimed to explore the psychological distress of partners of women with Endometriosis - as compared with partners of healthy women - and investigate its relationship with sociodemographic, clinical, and relational factors.

Method: Fourteen partners of women with a diagnosis of endometriosis (P-EN) and 31 partners of healthy women (P-CG) participated in the study. They completed a sociodemographic and clinical form and reported the impact of Endometriosis on their own lives. Moreover, they completed a battery of instruments to assess psychological distress (CORE-10), material and emotional burden due to caregiving (Zarit Burden Interview; ZBI), and romantic attachment style (Experience in Close Relationship-12 item version; ECR-12). Statistical analyses included the Mann-Whitney U test, chi-squared test, Pearson and Spearman correlation, and stepwise linear regression.

Results: A mild burden due to caregiving was reported by 25% of the P-EN group. When compared to P-CG, the P-EN reported a higher CORE-10 score ($p = 0.029$). In addition, the P-EN group showed a higher frequency of both psychological distress (75% vs 35.5%; $\chi^2 5.43$; $p = 0.20$) and individual chronic diseases (28.6% vs 6.5%; $\chi^2 4.08$; $p = 0.043$) than the P-CG. Psychological distress was significantly associated with endometriosis' impact on their work-life ($r = 0.68$) and financial status ($r = 0.69$), as well as with ECR-12 anxiety ($r = 0.42$). Interestingly, psychological distress was not associated with sociodemographic data and their physical condition, nor with ECR-12 avoidance score. Finally, ECR-12 Anxiety had a positive effect on the CORE-10 score ($\beta 0.48$; $p < 0.001$), independently of the belonging group (Adjusted $R^2 = 0.37$; $p < 0.001$).

Discussion: Partners of women with Endometriosis reported psychological distress, significantly associated with insecure attachment style and the perceived impact of the women's disease on their own lives. This population should be targeted by the multidisciplinary team to reduce the psychological impact of the



women's diagnosis in their lives. Significant attention should be paid to the relational factors that may contribute to the onset and maintenance of psychological distress.



ART Outcomes and Psychological Health Conditions among Infertile Couples after 4 Years: A Prospective Study

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Abstract

Introduction: Infertility literature has well-demonstrated the psychological burden of long-term Assisted Reproductive Technologies treatments and repeated failures, but there is a lack of studies following infertile couples over time, starting from the beginning of the infertility/treatment path, so allowing a greater understanding of the different outcomes infertile couples may go through (i.e., Parenthood after Successful Treatments, PST; Parenthood by Adoption, PA; Childless still Pursuing Treatments, CPT; Childless Quitting Treatments, CQT) and, accordingly, exploring the different impact on their psychological health. The present prospective study aims at assessing and comparing psychological health conditions reported by male and female partners of infertile couples at two-time points (T1-beginning of medical treatments; T2-after four years), grouping them by the outcome.

Methods: Participants were 108 couples out of 115 couples undergoing infertility treatments recruited in 2018 (T1) available for the follow-up and grouped by the outcome in 2022 (T2). Frequencies and percentages of clinical levels of psychopathological symptoms, assessed by the SCL-90-R, were compared by outcome groups and according to sex, both at T1 and T2, and between T1 and T2.

Results: Findings at T1 showed no significant differences in both men and women of the prospective outcome groups regarding psychological health conditions. Differently, at T2, men and women Childless and Pursuing Treatments (CPT) were more likely to report clinically relevant symptoms of anxiety and depression than couples who achieved Parenthood after Successful Treatments (PST) or by Adoption (PA). Significantly higher frequencies and percentages of, respectively, paranoid ideation and hostility in male partners, and of obsessive-compulsive disorder in female partners were found in CPT couples if compared with the other study groups. Moreover, findings between T1 and T2 showed a significant increase in clinical levels of psychopathological symptoms in both members of CPT couples, while a significant reduction in frequencies of psychopathological symptoms emerged only in PST and PA men.



Frequencies of clinical levels of Somatization significantly increased between T1 and T2 in women of all prospective outcome groups.

Conclusions: Findings are discussed and can be used to develop tailored evidence-based counselling interventions to promote psychological health/prevent disease escalation during and after infertility treatments.



Parenting and Medically Assisted Reproduction: Navigating the Depths of Couplehood Amidst Fears and Desires

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Abstract

Introduction: The research presented delved into the intricacies and implications of accessing parenthood through Medically Assisted Procreation (MAP). It aimed to achieve two primary objectives:

To delineate the psychological landscape of couples embarking on the journey of MAP, examining both the reservoirs of strength and potential pitfalls. This exploration included a nuanced examination of intergenerational dynamics and the dynamics within the couple relationship.

To dissect the nuances and significance surrounding the pursuit of parenthood in MAP scenarios, shedding light on the specific elements intertwined with the nature of the couple's bond and their perceptions of parental efficacy.

Method: The research unfolded through a meticulous exploration of clinical cases stemming from an Assisted Reproduction Centre within the ASST of Brescia. This study stands out as a multifaceted qualitative inquiry, delving into the depths of human experience.

Eighteen carefully selected couples embarked on this journey at the onset of their treatment at the Centre. Their narratives were captured within the confines of a concise yet profound clinical counselling regimen, spanning two to three sessions. This process, guided by the principles of collaborative assessment, was graciously provided to the couples by adept psychologists and psychotherapists.

The assessment protocol, semi-standardized in nature, encompassed two pivotal components:

- a) Unstructured clinical dialogues, fostering rapport-building and uncovering nuanced themes and challenges.
- b) The Generational Clinical Interview (Cigoli, Tamanza, 2009), administered in tandem, illuminating both present and ancestral perspectives.



Data analysis ensued with a bottom-up approach, where the raw transcripts of these poignant exchanges were meticulously scrutinized. A cadre of impartial researchers engaged in a rigorous content analysis, endeavouring to unearth the rich tapestry of nuanced meanings embedded within.

Results: The collaborative efforts among researchers yielded the crystallization of cohesive categories concerning the focal themes of counselling: the intricate tapestry of parenthood representation, encompassing its myriad meanings, fears, and desires; the profound decision-making process surrounding parenthood, rooted in diverse motivations and expectations; the nuanced journey of Medically Assisted Procreation, laden with its own layers of significance; and the dynamic relationship with the healthcare realm, oscillating between perceptions of redemptive support and emotional detachment.

Discussion: These discerned meanings offer a comprehensive map of the challenges and motivational, representational, and relational resources encountered by couples embarking on the Medically Assisted Procreation journey. Such insights are invaluable for tailoring bespoke interventions aimed at providing nuanced clinical support and guidance throughout the healthcare trajectory.



Nemesis as a relational process in romantic relationships: the role of forgiveness and the vengeance

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Abstract

Introduction Relational transgressions, such as infidelity, are a common experience in romantic relationships with some studies which point the range between 25% and 69% as the rate of the phenomenon. One of the most common reasons for infidelity is related to dissatisfaction with one's partner; in turn, relational transgressions could lead to two different answers. From one side, we have a gut-level answer guided by impulsivity that leads to the vengeance behaviors; on the other side a motivation oriented to the mentalization that leads to the forgiveness behaviour. However, the two behaviors are deeply intertwined. The present study named Nemesis has the goal to evaluate relational transgressions (specifically infidelity) and the following behaviors acted by the respondents. *Methods:* We designed the present study to understand if the probability and plausibility of hypothetical scenarios of betrayal in romantic relationships have an effect on vengeance and forgiveness behaviors; again, we evaluated if the motivational and temperamental dimensions contributed to the inclination to act forgiving or vindictive behaviors. 908 Italian participants completed the survey (28,1% males; mean age=27,65 years). *Results:* Results showed that the probability and the plausibility of the proposed scenarios have an effect on the vengeance behaviors (respectively, $F=3,15$; $p<.05$ and $F=7,95$; $p<.001$); but not on the forgiveness. Besides, the uncertainty of mental states and the impulsiveness contributed to explain the inclination for vengeance ($F=12$; $p<.000$) while the certainty of mental states has an impact on the forgiveness ($F=7,82$; $p<.001$). *Discussion* Results imply that forgiveness and vengeance are two distinct facets in the understanding of relational transgressions, such as infidelity. In particular, vengeance is activated by the difficulty to acknowledge mental states and promotes a gut-level answer which has a noxious effect on mental health. The Nemesis study, which is ongoing, opens to the reflection on the motivational and individual variables which could be included in the intervention programs for couples, providing evidence about the necessity to see the relational maintenance not as a dichotomic process.



Exploring the Psychological Impact of Miscarriage: Shame and Coping Strategy

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Abstract

Introduction: Multiple studies highlighted the psychological effects of miscarriage, which can be experienced as a traumatic event like a loss, exiting in depression, anxiety, and PTSD. However, limited research has delved into its psychological effects on women's life and relationships. Women experienced miscarriage rarely share their experiences for various reasons, including biases about its frequency, leading to a tendency to grieve alone. For these reasons, it is important to offer specific and customized support treatments. For guidance on how to set up these treatments this study aims to explore the predominant emotions associated with miscarriage, particularly differentiating between guilt and shame, the relationship between lack of disclosure and subsequent emotional distress, and the role of meaning-making capability and couple support as protective factors.

Methods: Through a web-based survey we collected data from fifty-six Italian women who had experienced miscarriage, recruited via social media, investigating on emotional responses, cultural significance, and disclosure behavior about miscarriage. Self-report measures on guilt, shame, coping strategies, grief, psychological well-being, and meaning making were also administered. In addition, thirty participants were administered a narrative projection test, the Thurston Cradock Test of Shame, and a semi-structured interview to qualitatively explore the women's experiences. The responses were coded using interpretive phenomenological analysis.

Results: Women with miscarriage experiences often felt a sense of shame rather than guilt. Shame was closely associated to the fear of social judgment and the stigma surrounding miscarriage, resulting in reluctance to share their experience. This heightened emotional distress. The analyses indicated that women with lower ability of making sense of their loss and lower satisfaction from their couple relationship or weaker dyadic coping strategies tended to exhibit more distress symptoms.

Discussion: The results showed specific psychological impact of miscarriage and emphasizes the need for tailored support interventions which should promote the validation and transformation of shame, engage the women's partners to enhance shared coping strategies, provide opportunities to activate individually and with significant others functional meaning making processes.



The effects of perceived violence on fathers' mood after the end of a conflictual relationship with their partner

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Abstract

Intimate partner violence refers to behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviour (WHO, 2010).

Traditionally, the role of the aggressor has been attributed to men and that of the victim to women, but the reverse is also true, albeit to a lesser extent. Some factors associated with the risk of victimisation and perpetration of violence are conflict or dissatisfaction in the relationship and economic stress (Heise L. et Altr, 2002). In situations of conflictual separation, violence may be perpetrated by both partners due to power dynamics, narcissistic wounds and the belief that they have been harmed; in this context, men may also be victims of violence. The aim of our study was to examine the impact on fathers' mood state of remaining in a conflictual relationship with their ex-partner.

359 subjects were recruited through Facebook groups of separated fathers and completed self-report questionnaires via Google Form: anamnestic questionnaire, CTS-2, POMS, PSI-SF, WFC. The results show the presence of negative moods such as depression, anger, tension, confusion, despondency. It is also found that low conflict leads to a significant improvement in mood states. The presence of positive relationships with the family of origin is a moderator of the relationship between conflictuality and mood states.

These findings inform us of the need to pay more attention to the male gender and to personalise and refine existing psychological and social interventions in high-conflict situations from both a systemic and individual perspective.



Romantic relations, sexuality and intimacy among young adults and adolescents with autism spectrum disorder, severe mental illness, intellectual disability and Down Syndrome: rights, challenges and critical issues

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Abstract

Although sexual health and well-being have increasingly been acknowledged as essential components of overall well-being, individuals diagnosed with autism spectrum disorder, severe mental illness (schizophrenic spectrum disorders and psychosis), as well as people with intellectual disability and Down syndrome, especially adolescents and young adults, frequently encounter stigma and discrimination. These challenges, compounded by the unique nature of their clinical condition, can significantly affect their self-esteem, hinder their capacity to cultivate meaningful relationships, and impede their ability to express their sexuality. Prioritizing the perspectives of young people, electronic databases were consulted and a review of recent scientific literature (2017-2023) on the issues of sexuality, intimacy and romantic relations of this segment of the population was carried out. This study revealed that young individuals with severe mental illness, intellectual disability, Down syndrome, and ASD experience significantly poorer sexual and reproductive health compared to the general population. This disparity increases vulnerability to gender-based violence, risky sexual behavior, and exploitation, compounded by self-stigmatization, social isolation, and cognitive deficits inherent in these conditions.

Despite advancements in treatment and understanding, societal misconceptions often result in a lack of appropriate sex education and reproductive choices for these individuals, leaving them vulnerable to victimization. Comprehensive education and support are essential to address these challenges and improve the overall well-being of individuals.



Validation and psychometric properties of the Italian version of the Sexual System Functioning Scale (SSFS)

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Abstract

Introduction: The sexual behavioral system is a neurobehavioral system that motivates individuals to achieve sexual pleasure and reproductive success through sexual interaction. The primary sexual system strategy is typically to approach, seduce, and engage the desired partner in sexual intercourse, which also involves a steady increase in physical and emotional intimacy. Repeated failures to achieve the goal of the system may result in hyperactivation or deactivation of sexual behaviors, comparable to the secondary strategies observed in the attachment behavioral system. The hyperactivation strategy is characterized by strong sexual desire and the need to achieve sexual gratification through impulsive and invasive sexual behaviors, whereas deactivation is associated with suppressing sexual needs and rejecting sex as a source of pleasure. In the present study, we examined the psychometric properties (reliability and validity) of an Italian adaptation of the Sexual System Functioning Scale (SSFS), a self-report measure developed by Birnbaum et al. (2014) to assess individual differences in hyperactivation and deactivation of the sexual system.

Methods: Participants. For the present study, 386 healthy volunteers (208 females; age range: 18-45; M = 30.5 years; SD = 5.05) were recruited. Measures. The following measures were used: the developed Italian version of the Sexual System Functioning Scale (SSFS), assessing individual differences in hyperactivation and deactivation of the Sexual system; the Sexual Behavioral System Subgoals scale (SBSS) and the revised Sociosexual Orientation Inventory (SOI-R), assessing other sex-related constructs.

Results: Results indicated an adequate fit to the expected two-factor model, and the measure proved to be reliable and had good convergent validity, allowing the quantification of individual differences in sexual system hyperactivation and deactivation.



Discussion: Previous evidence has shown that increased secondary strategies of the sexual system are associated with negative affectivity and lower psychological well-being, representing a risk factor for developing emotional and interpersonal problems. Therefore, the SSFS could be a valuable tool to integrate into psychotherapeutic assessment in clinical contexts.



The influence of perfectionism on sexual desire: examining the mediating role of avoidance and psychosomatic symptoms among Italians

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Abstract

Recent research shows a rise in perfectionistic behaviors, especially among younger generations, due in part to growing pressure to perform. This is consistent with a culture that prioritizes appearance and performance over substance and pleasure, potentially impacting sexuality across all demographics. High perfectionism correlates with avoidance behavior in relationships and affects their quality. There is also a significant association between perfectionism and psychosomatic symptoms. This study aims to investigate avoidance behavior and psychosomatic symptoms as potential mediators between perfectionism and desire.

The study collected data via an online questionnaire that was distributed via various social platforms using a snowball method. Participants aged 18-65 and residing in Italy were randomly recruited. The sample comprised 324 people. Socio-demographic variables included age and sexual identity. Statistical analyses included descriptive statistics, correlations, linear regression and mediation models to assess the relationships between perfectionism, avoidance, somatization and sexual desire.

The results show significant correlations between all variables. Sexual desire correlates negatively with perfectionism, avoidance and somatization. Perfectionism is negatively associated with sexual desire and positively associated with avoidance and somatization. Relationship avoidance and somatization are also negatively associated with sexual desire. Mediation analyses show that relationship avoidance and somatization partially mediate the relationship between perfectionism and sexual desire. Control variables, age and gender show significant correlations with sexual desire.

This study contributes to the understanding of the interplay between perfectionism, sexual desire, avoidance and somatization in the Italian context. Given societal trends, it was expected that these factors could increasingly inhibit genuine desire despite the focus on high performance. Perfectionists who



struggle with shame and pressure to perform may exhibit avoidance behaviors, further dampening sexual desire and psychosomatic symptoms.



Saturday, 14th September 2024

THEMATIC SESSION

“NEW FRONTIERS IN CLINICAL INTERVENTIONS”

Chair:

Riccardo Williams

La Sapienza University of Rome



Short- and medium-term effect of a virtual reality-based intervention on the psychological health of informal caregivers of persons with Alzheimer's disease

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Abstract

Virtual reality (VR) is emerging as a useful tool for improving knowledge, empathy and self-efficacy in educational programmes. Our study aims to test the short- and medium-term effect of virtual reality (VR)-based empathy training integrated into an online psycho-education programme and aimed at informal caregivers (iCGs) of people with mild-to-moderate Alzheimer's disease. 60 iCGs were randomized in a 6-week psychoeducational program (control arm) or in the same psychoeducational program integrated with VR (experimental arm). VR consisted of 360-degree videos and lets caregivers experience dementia symptoms from the patient's perspective. Before and after the intervention and again after 2 months, iCGs completed validate scales to assess burden (ZBI), perceived stress (PSS), anxiety (STAI-Y1&2) and perceived self-efficacy for caregiving tasks (RSCSE). Pre-post differences were tested with paired t-tests. Linear mixed models were used to test the interventions effects. 27 iCGs assigned to the control arm (age mean= 56; female:82%; children:63%) and 29 to experimental arm (age mean=54; female:79%; children:68%) concluded the intervention. The VR-based intervention decreased score of ZBI ($t_{(28)}=2.154$; $p=0.040$; Cohen's $d=0.400$), PPS ($t_{(28)}=2.177$, $p=0.038$; Cohen's $d=0.404$), STAI-Y ($t_{(18)}=2.400$, $p=0.23$, Cohen's $d=0.446$) and increase two domains of RSCS: responding to disruptive patient behaviors (RSCSE-RDB: $t(28)=-2.358$, $p=0.026$; Cohen's $d=0.438$), and controlling upsetting thoughts (RSCSE-CUT: $t(28)=-2.126$, $p=0.042$; Cohen's $d=0.395$). In the control arm, changes due to intervention did not reach statistical significance. According mixed models, both interventions have a positive short-term effect, significantly reducing scores of ZBI (experimental arm; $p=0.026$; control arm $p=0.038$), PSS (experimental arm; $p=0.036$) and STAI-Y (experimental arm; $p=0.017$). In the experimental arm, levels of caregiver burden ($p=0.026$), perceived stress ($p<0.001$) and self-efficacy



($p = 0.006$) were maintained even after two months. These preliminary results support the feasibility and short- to medium-term effectiveness of the VR-based psycho-education intervention.



DigiRescueMe PsyTool: A tool for detecting the mental health of mine workers

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Abstract

In the mining industry, the mental health of workers not only causes internal problems but also often causes accidents.

The focus of this investigation is the mental health measurement models present in the literature with specific reference to the mining industry in order to create an effective detection tool. A software system has been realized which is based on a questionnaire bringing together the items from the various models and which allows detecting and analysing both the RESILIENCE FACTORS (such as SPIRITUALITY, OPTIMISM, etc.) and the SOURCES OF RISK (such as RESPECT FOR SAFETY, WORKLOAD, RELATIONSHIPS, WORK-LIFE BALANCE, etc.), then preparing, in real time both on a single worker and on work groups, a balance sheet on mental health.

It is hoped that, after a validation phase, this tool can be used to monitor the mental health status of workers, report risk situations for the workers themselves or for the company and suggest where to intervene in a preventive manner with training or with direct actions.

Acknowledgment

These studies are part of the work package O1 – Development of Standardised Rescue Curriculum – of the project 2021-1-TR01-KA220-VET-000028090 named DiGiRescueMe, Standardization and Digitalization of Rescue Education in Mining, funded by the ERASMUS+ programme of the European Union. For many fruitful discussions, special thanks are addressed to colleagues from the partner institutions: Kutahya Dumlupinar Universitesi, Turkiye (DPU), Akademia Gorniczo-Hutnicza Im. Stanislaw Staszica W Krakowie, Poland (AGH), Universidade Do Porto, Portugal (Uporto) and Nurettin Çarmıklı Madencilik Mesleki ve Teknik Anadolu Lisesi, Turkiye (BalVET).



Moving Forward from COVID-19: Exploring Diverse Formats of Analytical Psychodrama and Comparing Clinical Outcomes between Online and In-Person Sessions

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Abstract

Introduction: Amid the COVID-19 pandemic, the psychological support service of the University of Bologna (SAP, Chief – Professor Silvana Grandi) provided remote psychological therapy to students. Among the interventions implemented, the Analytical Psychodrama via videoconferencing (VAP) has shown promise in reducing psychological issues and enhancing emotional competence in young adults. Following the COVID-19 emergency, the service reinstated In-Person Analytical Psychodrama (IPAP) with a shorter format of 24 sessions instead of 38. This study aims to compare the outcomes of 38-session VAP interventions with 24-session IPAP interventions to understand the impact of analytical psychodrama (AP) format on clinical outcomes.

Methods: 36 young adults (M = 25%) with anxiety-depressive problems took part in 38 weekly group sessions of VAP (N = 22) and 24 weekly group sessions of IPAP (N = 14). The Clinical Outcomes in Routine Evaluation – Outcome Measure (CORE-OM), the Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF), the Toronto Alexithymia Scale (TAS-20), the Interpersonal Reactivity Index (IRI) and the Group Climate Questionnaire (GCQ) were used to assess clinical outcomes, emotional competence and group climate at baseline (T1) and after treatment (T2). A Repeated Measure ANOVA was conducted to compare T1 and T2 scores, considering the AP format as between-subjects factor.

Results: Patients showed significantly different scores between T1 and T2 ($p < .001$), indicating improvements across all dimensions of the CORE-OM (except for the Risk subscale); in the Well-being and Self-control dimensions, and in the Global Score of the TEIQue-SF; TAS-20 global score; Personal Distress dimension of the IRI; and the Engagement and Conflict dimensions of the GCQ. Despite the distinct settings and durations associated with VAP and IPAP, no significant differences emerged between T1 and T2 based on the format of the AP.

Discussion: The findings support the feasibility of implementing AP across different formats (online vs. in-person; brief vs. extended), suggesting the potential for diversified interventions tailored to specific patient profiles and needs, while ensuring effectiveness in clinical practice.



Online Psychological Intervention for Adolescents and Young Adults with Diabetes: A Systematic Review

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Abstract

Background: Online psychological treatment is effective for chronic diseases. E-health interventions have been shown to reduce depressive symptoms and diabetes distress in adult patients with diabetes. However, outcomes for adolescents and young adults are heterogeneous, with various intervention formats reported in literature. Online platforms are valuable tools for engaging young populations, but it remains unclear which intervention formats are most predictive of positive psychological outcomes, especially considering that some studies include age groups between adolescents and young adults. *Aim:* This research aims to identify the efficacy of psychological intervention for adolescents and young adults with diabetes. *Method:* In accordance with PRISMA guidelines this systematic review on scientific databases This systematic review followed PRISMA guidelines and included searches of major databases: EBSCO (APA PsycArticles, APA PsycInfo; Psychology and Behavioral Sciences Collection; MEDLINE), Pubmed, and Scopus. The research was based on the following keywords: web-mediated and synonymous; psychological intervention and synonymous; diabetes (type 1 or type 2) and synonymous; adolescence and synonymous; young adults and synonymous. Studies were selected based on predefined inclusion criteria, specifically: web-mediated interventions targeting adolescents and young adults with diabetes, intervention guided by psychologists or facilitators. *Results:* Eleven articles were included in the review. Finding suggests that the main outcome considered in literature are diabetes-distress, depression, quality of life, self-efficacy and self-management. Most studies also involve medical outcomes, mostly based on HbA1c measures. Some studies also considered psychosocial outcomes such as family conflict and communication with care providers. Overall, findings suggests that telehealth interventions appear to be as effective as in-person treatment among adolescents and young adults with diabetes. The involvement of peer groups or caregiver may further enhance the efficacy of interventions. *Conclusion:* This review provides insights into the design of online psychological interventions for adolescents and young adults with diabetes. It underscores the efficacy of web-based interventions within this population and the significance of social support and caregiver involvement in improving psychosocial outcomes,



while also highlighting the need for further research to develop interventions tailored to the specific needs of different age groups.



Do you want to dance with me? How artistic creative activities regulate the emotions? A preliminary study

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Abstract

Emotion regulation is the ability to exert control over one's own emotional state. It may involve behaviors such as rethinking a challenging situation to reduce negative emotion, in this way the individual adapts to daily life and has been shown that this ability influences a number of mental health conditions (Karkou et al., 2022). Furthermore, artistic creative activities have been shown to modulate emotions (rapidly changing reactions to events in the external or internal environment), influence the moods (more generalized, less intense states of feeling lasting longer periods), and affect the mental health (Fancourt et al., 2019).

The present research aims to verify this hypothesis in dancer performers. Specifically, 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). 244 individuals completed questionnaires aimed to assess variables of interest: 25 of them were Professionals (G1), 80 were Amateurs (G2) and 139 did not practice any artistic activity (G3). Results showed that Amateurs are those who present better emotional regulation for all Ders factors ($p < 0.01$), but Professionals handled their emotions better than those who did not practice any creative activity.

Finally, results of BF showed a high levels of extroversion and agreeement for G1 and G2, but the Professional showed a higher levels of Openess to Experience ($p < 0.01$).

Artistic creative activities and dance appear to affect our emotion. Amateurs benefit from dance without developing dependence on success and audiences and probably use dance as a pleasure and not as a form of avoidance of negative emotions. Further researches could be useful to investigate other form of arts and more varied and larger sample.



Cognitive Behavior Therapy and headache: a systematic review of clinical effectiveness

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Abstract

Over a lifetime, headache disorders are common to many people, but often, for some, they significantly interfere with daily life. The literature highlights the association between headache, migraine, and psychiatric comorbidities such as anxiety disorders and depression over time.

Cognitive Behavioural Therapy (CBT) is considered the gold-standard therapeutic treatment for people with migraine and has shown comparable effects to pharmacotherapy. Cognitive Behavioural Therapy aims to teach patients how to use coping strategies to manage pain resulting from headache when it occurs, for prevention and to alleviate related disability and/or symptoms that occur in comorbidities, such as anxiety and depressive symptoms.

The objective of this systematic review is to evaluate the effectiveness of CBT in the treatment of migraine and on anxiety symptoms, depressive symptoms, cognitive variables (memory, attention, executive function) and quality of life related to headache. The review was conducted following the Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA) checklist. 3 databases (Scopus, Pubmed, and Web of Sciences) were used, and from a total of 663 articles, 11 published studies were eligible for this systematic review. All studies included adults who suffered from migraine.

In our study, cognitive behavioural therapy was shown to be effective in reducing headache-related disability. CBT interventions were found to be useful in reducing the clinical symptomatology of headache in terms of intensity and frequency and in reducing medication use by promoting the implementation of proactive coping strategies.

The aim of the present study is to provide an up-to-date and detailed review of the literature to evaluate the clinical effectiveness of CBT interventions in headache patients, particularly for effects related to cephalic impairment, migraine-related depressive and anxiety symptoms, effects on patients' quality of life, and effects on cognitive variables.



Adverse effects of exposure to dysfunctional parenting styles on self-esteem are mediated by psychological flexibility and can be mitigated by acceptance and commitment therapy (ACT) interventions

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Abstract

Introduction: Exposure to dysfunctional parenting styles characterized by neglect, indifference, emotional and physical abuse, or excessive control is an important vulnerability factor for individuals' self-esteem. Recent studies report that dysfunctional parenting styles can affect individual psychological flexibility, a crucial function for maintaining an adequate level of self-esteem. Therefore, in this study, we investigated the hypothesis that psychological flexibility acts as a mediator of the relationship between dysfunctional parenting styles and self-esteem. Also in this light, we evaluated the effects of an Acceptance and Commitment Therapy (ACT) intervention aimed at improving psychological flexibility, with possible effects on self-esteem.

Methods: We recruited a discovery sample of 111 adolescents (range 13-19 years) and an independent replication sample of 84 young adults (range 20-22 years). Through retrospective questionnaires, we investigated the exposure to dysfunctional parenting styles during childhood and adolescence (Measure of Parental Style Questionnaire -MOPS) and self-esteem (Multidimensional Test of Self-Esteem -TMA- and Self-Esteem Rating Scale -SERS). All participants underwent a six-meeting ACT intervention. Psychological flexibility was assessed with the Multidimensional Psychological Flexibility Inventory (MPFI), before and after ACT. Data analysis was performed using Pearson's correlation, mediation analysis, and repeated-measures ANOVA ($p < 0.05$).

Results: Results in the discovery sample confirm that greater exposure to dysfunctional parenting styles is associated with lower self-esteem ($r: -0.47$ $p < 0.001$) and lower psychological flexibility ($r: -0.46$ $p < 0.001$) and that individuals with greater psychological flexibility have higher self-esteem ($r: 0.5$ $p < 0.001$).



Psychological flexibility partially mediated the relationship between exposure to dysfunctional parenting styles and self-esteem (direct effect $Z: -3.4, p=0.04$; indirect effect $Z: -3.4, p=0.002$ - 37% of total effect explained; total effect $Z: -5.7, p<0.001$). After ACT, participants increase psychological flexibility ($F_{110}=11.4, p<0.001$) and self-esteem ($F_{110}=5, p=0.028$). Investigations in the replication sample confirmed all the results obtained.

Discussion: Our results support the hypothesis that the association between parenting styles and self-esteem may be partly attributable to the effect that parenting styles have on psychological flexibility and, consequently, on the latter's ability to support individuals' self-esteem functions. Furthermore, they suggest the feasibility of clinical interventions to support adolescents or young adults who have been exposed to adversity in parenting relationships.



Sunday, 15th September 2024

SYMPOSIUM SESSION



EMOTIONS AND PARENTHOOD ACROSS THE LIFESPAN: PROTECTIVE AND RISK FACTORS

Proposer

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Discussant

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Abstract

Parenthood is a process that arises from the reworking of one's own childhood experiences, from the desire to become parents, and from fantasies of encountering another to care for. As evident from this definition, parenthood involves numerous individual and relational challenges. But how do these challenges change over time? The present symposium delves into the complex dynamics of parenthood and emotional experiences throughout various stages of life. The various contributions will allow us to explore the journey of parenthood, from the initial desires of couples to become parents to navigating the complexities of raising adolescents.

Several studies representing recent efforts in this regard will be presented in this symposium. Specifically: a) a systematic review of the literature investigating narrative tools used with infertile couples; b) a study exploring associations between emotional regulation strategies used by women experiencing infertility and their levels of depression, anxiety, and stress; c) a study on parent emotional regulation and its associations with child emotional-behavioral functioning and the mother-child relationship during toddlerhood; and d) a study highlighting how dimensions of anxious attachment to mother and father could contribute in a different and unique way to adolescents' emotional regulation.

The symposium begins by examining the profound emotional processes underlying the desire to become parents, as well as the emotional challenges that arise when encountering difficulties in becoming parents,



such as infertility. Contributions within the symposium shed light on the dynamic interplay between parents' emotions and encountering the emotions of the Other/child across toddlerhood and adolescence. A multidimensional perspective is adopted, integrating insights from developmental psychology, clinical practice, and family dynamics. By examining parenthood and emotions through various lenses, the symposium offers a nuanced understanding of the challenges and rewards inherent in the journey of parenthood. Starting as a platform for scholars, clinicians, and researchers, the symposium aims to deepen our understanding of parenthood while fostering avenues for supporting families in their emotional journey.



Infertility Narratives Measures: a Systematic Review of Literature

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Abstract

Introduction: Current knowledge on infertility psychological correlates is mainly based on studies which have employed self-report questionnaires. Narratological instruments are not widespread in this area of interest, being either dated or created ad hoc for specific research and not validated. The aim of this systematic review was to identify qualitative instruments, used to assess psychological aspects related to the infertility experience in ART patients, reporting the characteristics of the study (i.e., authors, year, and country), of the recruited sample (sample size and status), the administered interview name and type (structured, semi-structured or narratological) and the evaluated areas.

Methods: We searched on six databases (PsycINFO, PsycARTICLES, MEDLINE, PubMed, Scopus and Web of Science) studies published from 01/01/2014 until 30/01/2024. The filter consisted of two main concepts, namely infertility and qualitative studies.

Results: We identified 17.636 records, which were subsequently examined for eligibility. After the duplicates were removed, 6.418 studies were screened basing on their title and abstract. The main inclusion criteria were related to the qualitative investigation of at least one aspect involved in the infertility experience on a clinical sample, to the qualitative research methods adopted (clinical interviews) and to the original character of the contribution. After the inspection of the full text of these articles, a consensus among authors resulted in retaining about 50 of them.

Discussion: Most of the studies, exploring infertility narratives involved samples of reduced size. Moreover, most of them elicited narratives about social implications of infertility, such as the perceived value of children and parenthood, or related to ART procedures, such as their expected effectiveness, physical and emotional burden, time, costs, and potential risks. These results support the need of a new tool for the assessment of subjective experiences, when faced with the diagnosis of infertility and ART treatments.



What's the role of anger and role reversal toward both parents in determining internalizing problems and maladaptive emotion regulation of adolescents? An interview-based study.

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Abstract

Introduction: The insecure-preoccupied attachment pattern is a recognized risk factor for adolescents' greater use of the emotion regulation strategy Expressive Suppression ([ES]; Girme et al., 2021) and more internalizing problems (Madigan et al., 2016). However, current literature has not yet disentangled the role of specific dimensions typical of the insecure-preoccupied pattern (i.e., involving anger toward parents and role reversal) in these outcomes, nor differences in their role according to the parental figure. Therefore, this study aims to investigate the relationships between adolescents' anger and role reversal toward mother and father, their use of ES and levels of internalizing problems, also exploring the assumptions for the role of ES as a possible mediator.

Method: The study involved 133 community adolescents (34% males, Mage = 15.7 years), assessed in attachment with the Friends and Family Interview, in ES with the Emotion Regulation Questionnaire for Children and Adolescents, and internalizing problems with the Youth Self-Report.

Results: Data were not normally distributed, so non-parametric analyses were performed. Analyses revealed that anger toward both parents was positively associated with and predicted higher use of expressive suppression ($p_{\text{mother}} = .003$, $p_{\text{father}} = .014$) and higher levels of internalizing problems ($p_{\text{mother}} = .002$, $p_{\text{father}} = .006$). Also, only role reversal toward the father was associated with and predicted both higher use of ES ($p = .030$) and internalizing problems ($p = .017$).

Discussion: Results support that both aspects of preoccupied attachment are related to adolescents' higher use of ES and internalizing problems, showing differences according to the parental figure to whom the defensive strategy is directed. Moreover, assumptions for a model testing the role of ES as a possible mediator in the relationship between attachment anger and role-reversal and internalizing problems were satisfied, calling for future investigation. Clinically, this study highlights the added value of a dimensional approach in narrowing the impact of different dimensions of attachment representations with different parental figures on adolescents' symptoms and emotion regulation strategies.



Parent emotional regulation during toddlerhood

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Abstract

Introduction: Several studies have highlighted the importance of parents' emotion regulation abilities and the impact they can have on their children. While many studies have investigated parents' individual emotion regulation abilities, recently, the importance of viewing emotion regulation abilities not only as an individual construct but also within an interpersonal context has been emphasized by numerous authors. Tools have emerged to assess emotion regulation in romantic relationships, in the relationship with colleagues in the workplace, and in parent-child relationships.

This study examined differences and similarities between parents' individual emotional regulation abilities and their relational context with their child.

Methods: A sample of $N = 80$ mothers of children aged between 2 and 5 years completed a battery of self-report questionnaires regarding the quality of the relationship with their child, the toddler's emotional and behavioral functioning, and mothers' emotional regulation abilities (both at individual level and during interaction with the child).

Results: The results showed significant associations between maladaptive emotion regulation abilities during interactions with the child and greater children's Internalizing and Externalizing. Additionally, parent emotional regulation mediated the relationship between interactive quality with the child and the child's emotional and behavioral functioning.

Discussion: The findings underscore the importance of considering both individual and interpersonal aspects of emotion regulation in the mother-child relationship. One key implication of these findings is the need for interventions aimed at enhancing parental emotion regulation skills within the context of parent-child interactions. By providing mothers with strategies to regulate their emotions effectively during interactions, interventions may help mitigate the risk of negative emotional-behavioral outcomes in children. Furthermore, the mediating role of parent emotional regulation in the relationship between interactive quality with the child and the child's emotional and behavioral functioning suggests that



improving parent-child interaction dynamics may indirectly influence child outcomes through changes in parental emotion regulation.



Desire and Challenges of Motherhood: The Experience of Infertility and the Role of Emotion Regulation Strategies

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Abstract

Introduction: According to a recent report by WHO (2023), approximately 17.5% of the global adult population encounter infertility. This underscores the pressing demand to enhance accessibility to affordable, top-tier fertility services for individuals requiring assistance. Several studies have demonstrated that this condition primarily impacts women, who may experience psychological stress, anxiety, and depression (Foroudifard et al., 2020). Given the psychological challenges often experienced by women dealing with infertility, understanding the role of emotion regulation strategies becomes fundamental. The strategies women use to regulate their emotions in response to this adversity can significantly impact their psychological adjustment. This study aims to (1) analyze depression, anxiety, and specific stress related to infertility in females experiencing infertility, and (2) examine the relationship between emotion regulation strategies and emotional problems in terms of anxiety, depression, and specific infertility-related stress. Specifically, the study seeks to investigate whether emotion regulation strategies can predict these psychological difficulties.

Methods: Participants were recruited through an online survey. A total of 398 females experiencing infertility agreed to participate and completed all questionnaires. The mean age of participants was 35.61 years (SD = 4.29; range = 22–47 years).

Results: We found that 10.8% of participants reported severe levels of anxiety, while 2.5% reported severe levels of depression. Regarding infertility stress levels, 4.8% exhibited high levels requiring clinical attention. Regression analyses concerning emotion regulation strategies revealed that lack of acceptance was the strongest predictor of anxiety levels and infertility stress, while difficulty engaging in goal-directed behavior was the strongest predictor of depression levels.

Discussion: This study highlights the importance of emotion regulation in the context of infertility, underscoring its association with psychological difficulties (anxiety, depression, and infertility stress).



Recognizing and addressing emotion regulation strategies can thus offer valuable insights for interventions aimed at supporting women experiencing infertility.



**PROBLEMATIC SOCIAL MEDIA USE AMONG ITALIAN MID-ADOLESCENTS:
INSIGHTS, FINDINGS AND CHALLENGES FROM THE SMART PROJECT)**

Proposer

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Discussant

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Abstract

Adolescence is a phase of challenges during which cognitive, emotional, and social changes take place. One aspect clearly tied to psychological wellbeing of adolescents is social connection and interaction, especially with peers. Social media (SM) use constitutes a large portion of mid-adolescents' daily lives as a way of peer interaction. However, this widespread adoption of SM has brought interest in understanding whether it is improving or harming individuals' mental health. A significant percentage of adolescents experience intense or problematic social media use (PSMU), an aetiologically complex behaviour potentially associated with psychological distress. This symposium aims to present the SMART project and its first results. Among other goals, the purpose of the SMART project is to advance knowledge on PSMU in adolescence. For such reason, nearly 1300 Italian mid-adolescents aged 14-18 years old were recruited.

The first contribution introduces to the SMART project. The overall structure of the SMART project along with its aims, methodologies and results will be described. Moreover, findings on PSMU in Italian mid-adolescents will be presented. Finally, strengths and difficulties encountered during the first year of the project will be critically discussed. The second contribution describes the PSMU in the sample and addresses some of the potential intrapersonal risk and protective factors for it. Variables such as self-control and self-esteem will be investigated. The third contribution explores the possible mediating and moderating mechanisms linking perceived parental phubbing and adolescents' PSMU. Specifically, the



role of internalizing symptoms and parent-adolescent attachment will be explored. The last contribution presents the results of a systematic review of the literature about interventions targeting PSMU in mid-adolescence. Additionally, it explores insights drawn from the SMART project's co-creation strategies (i.e., focus groups with mid-adolescents about strategies to encourage better use of social media and reduce PSMU).



Intra-individual determinants of problematic social media use (PSMU) among Italian mid-adolescents: results from a three-level hierarchical linear model

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Abstract

Introduction: Social Media Use is one of the most popular leisure activities among individuals of all ages. Despite a large part of the population shows non-problematic behaviour, a small percentage of it develops a problematic social media use (PSMU), which has been consistently linked to negative mental health outcomes and impairments in daily functioning. To date, there is an increasing interest to explore and assess the potential intra-individual risk and protective factors of PSMU especially among high-risk age groups, such as mid-adolescents.

Methods: As part of a larger longitudinal study (i.e., the SMART Project, funded by the European Union – Next Generation EU), we recruited a total of 1368 mid-adolescents (mean age: 16.46 ± 1.26 years; females, $n = 778$, 56.9%) who filled out the Bergen Social Media Addiction Scale (BSMAS), together with well-known measures of intra-individual risk (e.g., psychological distress and emotional dysregulation) and protective (e.g., self-esteem and self-control) factors of PSMU. We tested for the predictors of the BSMAS through a three-level hierarchical linear model, with participants nested in 80 classes, nested in 11 different high schools (located in northern, central, and southern Italy), while controlling for age and sex.

Results: We found that girls reported greater levels in the dependent variable (i.e., the BSMAS total score), while controlling for all other predictors in the model. Greater levels of emotion dysregulation, fear of missing out, preference for online social interactions, passive social media use, and psychological distress significantly and positively predicted BSMAS. On the contrary, higher self-esteem and self-control were associated with lower levels of the dependent variable.

Discussion: Our findings shed light on the predictors of a problematic social media use among mid-adolescents. In the future, ad-hoc preventive and treatment interventions may target some of the identified predictors to reduce the incidence of PSMU and the burden among those who display this maladaptive behaviour.



Toward the co-creation of the SMART intervention: insights from the systematic review of psychosocial interventions targeting PSMU in mid-adolescents.

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Abstract

Introduction: Social media (SM) use has rapidly increased in adolescents' daily lives, raising concerns about the development of problematic social media use (PSMU). Some psychosocial interventions and models have recently been developed to reduce PSMU, however, interventions targeting PSMU in mid-adolescents are needed. To fill this gap, the SMART project (funded by the European Union – NextGenerationEU) aims to co-design an unguided self-help app to promote awareness and functional SM use. The presentation will focus on a systematic review aimed at describing existing psychosocial interventions addressing PSMU in mid-adolescence and at informing the SMART intervention. The SMART intervention's co-creation process will also be presented. *Methods:* Pubmed, Web of Science, PsycINFO, and Scopus have been systematically searched for psychosocial interventions for preventing/reducing PSMU in mid-adolescents (i.e., 14-18 years), limiting the search to peer-reviewed articles published in English after 2014. Interventions that focus on PSMU in general and/or on a specific SM platform have been included, while articles that only focus exclusively on internet use, smartphone use, and gaming have been excluded. *Results:* The electronic literature search yielded 14537 records in total, of which, after removing duplicates, 7490 records have been analyzed by title and abstract on the basis of specific inclusion/exclusion criteria. More than 350 full-text articles are being screened. After the screening process is finalized (including an additional manual screening of the references in the relevant reviews), the included interventions will be described through a summary of their main characteristics, theoretical psychosocial contents together with a summary of their main results, limits, and gaps. *Discussion:* An overview of the state-of-the-art psychosocial interventions targeting PSMU in mid-adolescents will be provided, along with a discussion of the needs and gaps in this growing field of research. In light of the findings, the co-creation process of the SMART intervention will be described, and its preliminary contents will be explored.



**Perceived parental phubbing and problematic social media use among Italian mid-adolescents:
A moderated mediation model.**

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Abstract

Introduction: Previous studies have shown that perceived parental phubbing (i.e., parents' behavior of engaging with a phone instead of paying attention to their children in proximity) was associated with mid-adolescents' problematic social media use (PSMU). However, less is known about the possible mediating and moderating mechanisms linking perceived parental phubbing and mid-adolescents' PSMU. Therefore, the present cross-sectional study, as part of a larger longitudinal study (i.e., the SMART Project, funded by the European Union – NextGenerationEU), aims to examine the mediating role of internalizing symptoms as well as the moderating role of parent-adolescent attachment in the relationship between perceived parental phubbing and mid-adolescents' PSMU. *Methods:* One thousand three hundred sixty-eight adolescents ($M_{\text{age}} \pm SD = 16.46 \pm 1.26$; 56.9% females) filled out the Parental Phubbing Scale (PPS), the Bergen Social Media Addiction Scale (BSMAS), the Social Emotional Distress Scale-Secondary (SEDS-S), and the Inventory of Parent and Peer Attachment-revised (IPPA-R). Mediating and moderating models were estimated using Mplus Version 7. *Results:* Both perceived mothers' ($\beta = .20, p < .001$) and fathers' phubbing ($\beta = .15, p < .001$) had a direct effect on adolescents' PSMU, yet both these associations were mediated by adolescents' internalizing symptoms. Moreover, the association between perceived parental phubbing and adolescents' PSMU was moderated by parent-adolescent attachment. *Discussion:* The findings of this study highlight the role of parents in the development of adolescents' PSMU and may inform intervention programs targeting mid-adolescents' PSMU even considering the role of perceived parental phubbing.



Problematic Social Media Use in Italian Adolescents: prevalence and correlates

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Abstract

To date, the conceptualization of Problematic Social Media Use (PSMU) is still debated. Moreover, previous research has also investigated several potential intra- and inter-personal psychological predictors of PSMU. Despite such efforts, the mechanisms underlying the development and maintenance of PSMU are still under-investigated. Thus, the current contribution aims at describing *SMART* objectives, project development and challenges encountered, and the findings about PSMU in Italian mid-adolescents. *SMART* is a two-year multicentric project funded by the European Union–NextGenerationEU, developed to: 1-enhance the knowledge on PSMU, and specifically to: identify risk/protective factors of PSMU; explore the adolescents' unique experiences and perspectives on PSMU; longitudinally analyse the within- and between-person potential maintenance factors and PSMU; 2-co-design an unguided self-help app to promote both awareness and functional SM use; 3-test its feasibility, acceptability, provide preliminary findings on the effectiveness and adapt the self-help app. Participants were 1368 adolescents (56.9% female) aged 14 to 18 years ($M=16.46$, $SD=1.26$) who completed the Bergen Social Media Addiction Scale (BSMAS), the Fear of Missing Out Scale (FoMO) and the Preference for online Social interaction (POSI) scale. The frequency estimates showed that most adolescents did not report having received psychological/psychiatric treatment in the last six months and that they were born in Italy (94.8%). 16.9% of adolescents were at risk of PSMU, with BSMAS scores above the threshold, and were predominantly female (23.3%). The most common SM used by at-risk youth was Tik-Tok (70.3%), and they spent 5 hours per day on Facebook. Examination of the simple correlations revealed that BSMAS was positively correlated with FoMO and POSI in both males and females. The results of the regression analysis showed that the relationship between BSMAS and FoMO was bidirectional, with BSMAS ($b = 0.71$, $p < .001$) predicting FoMO and FoMO ($b = 0.26$, $p < .001$) predicting BSMAS when systematically controlling for sex, age, and POSI.

Our results provide preliminary estimates of the prevalence of PSMU among Italian adolescents according to relevant socio-demographic characteristics and parameters of SM use. Furthermore, they



suggest the need for further longitudinal studies to confirm the direction of the association between FoMO and PSMU.



**EMPIRICAL EVIDENCE ON WOMEN'S BODY IMAGE ACROSS DIFFERENT
CONTEXTS**

Proposer

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Discussant

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Abstract

Body image is a multidimensional construct characterized by individuals' perceptions and evaluations of their physical appearance. This perception can be either positive, leading to appreciation of functionality and well-being, or negative, manifesting as dissatisfaction with the body and its related clinical issues (e.g., eating disorders). Body image appears to have a significant impact on women's psychologically well-being in different contexts (e.g., leisure time, healthy behaviors, social media, clinical conditions)..

Specifically, according to previous studies that have suggested yoga as a protective factor against the development of Eating Disorders, Silvia Cerea will provide data on the potential of a short yoga-based intervention to enhance intuitive eating practices and reduce the risk of developing eating disorders in young women, by comparing the yoga group with the control group.

Cristian Di Gesto will describe the associations between positive attitudes towards breastfeeding, breastfeeding intentions, and functionality appreciation among women who have given birth within the past 1 to 3 months, contributing to the increasing empirical interest in the role of positive body image in the context of breastfeeding.

Giulia Rosa Policardo will present preliminary results on the predictive role of a new construct that has emerged in recent literature on social media influences and body image evaluation, specifically appearance-related social media consciousness on body surveillance and psychological distress among women.



Lastly, Marta Spinoni will describe the role of body functionality appreciation in the association between dyspareunia and sexual distress among a group of women with endometriosis, while controlling for factors such as age, hormonal therapy, stage of endometriosis, and BMI.

Overall, these contributions collectively expand understanding of the complex interplay between body image, physical and mental health, and social influences in women's experiences, with implications for the development of targeted prevention and intervention programs to support positive body image and overall well-being in diverse populations.



The impact of a yoga-based intervention in promoting intuitive eating practices and in reducing the risk of developing eating disorders in young women: preliminary results

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Abstract

Yoga provides opportunities for integrating the mind and body, fostering connection and promoting the development of interoceptive skills (Cook-Cottone, 2020). Due to these features, recent studies have highlighted that yoga may act as a protective factor against the development of Eating Disorders (EDs; Cook-Cottone, 2020). The aim of this preliminary study was to investigate the impact of a yoga-based intervention in enhancing intuitive eating practices and reducing the risk of developing EDs in young women.

Fifty-two young women (age: $M=22.40$, $SD=1.30$) were randomly assigned to two groups: the yoga group ($n = 26$) and the control group ($n = 26$). Participants in the yoga group attended five yoga sessions (once per week, 1-hour each session). The control group received no intervention but had the opportunity to participate in a yoga workshop at the end of the intervention period (at T1). All participants completed questionnaires assessing the risk of developing EDs (i.e., Eating Disorder Risk Composite Score, EDRC, of the Eating Disorder Inventory-3) and intuitive eating practices (i.e., Intuitive Eating Scale-2, IES-2) at baseline (T0) and after the yoga-based intervention (T1).

Repeated measures Analyses of Variance (ANOVAs) revealed a significant Group (yoga group vs. control group) \times Time (T0 vs. T1) interaction effect on the EDRC ($p = .05$), indicating a greater decrease in the risk of EDs among women undergoing the yoga-based intervention compared to the control group at T1. Regarding the IES-2, a main effect of Time emerged ($p = .02$): both groups increased their ability to eat intuitively from T0 to T1 (yoga group: T0 = 3.24; T1 = 3.44; control group: T0 = 3.59; T1 = 3.64).

Results of this preliminary investigation highlight the potential of a short yoga-based intervention in mitigating the risk of developing EDs among young women. Additionally, intuitive eating practices increased in both groups, indicating the potential impact of the yoga-based intervention in promoting the ability to listen to and honor the body's natural hunger and fullness cues. It is possible that participation



in a research study about yoga encouraged participants in the control group to become more attuned to their bodies.



The Role of Appearance-Related Social Media Consciousness on Body Image and Mental Health in Italian Women

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Abstract

A new construct has emerged in the recent literature on Social Media influences and body image evaluation: Appearance-related Social Media Consciousness (ASMC). This construct describes the tendency for a woman's thoughts and behaviours to reflect an ongoing awareness of whether she might appear attractive to an online audience. Physical appearance is central to many photo-based social media platforms, potentially making users increasingly aware of the importance of conforming to suggested standards of beauty. This awareness may trigger ongoing processes of self-monitoring and body surveillance that may have implications for overall mental health. The aim of the present exploratory study is to examine the potential predictive role of ASMC on body surveillance and psychological distress.

A diverse cohort of women across age groups ($N = 415$; $M_{age} = 30.94$; $SD = 12.62$) self-reported their frequency of ASMC experiences using an online questionnaire. In addition, they reported their overall level of social media-induced body image pressure, measured by the Media Influence Subscale of the Sociocultural Attitudes Towards Appearance Questionnaire-4, as well as their level of body surveillance, a subscale of the Objectified Body Consciousness Scale, and psychological distress, measured by the Depression Anxiety Stress Scale-21. The data were analysed using descriptive and correlational analysis. To understand the predictive contribution of ASMC on body surveillance and psychological distress, two regression models were employed. In these models, age and social media pressure were included in the first step as control variables. ASMC was introduced at the second step, and not only improved the models but also showed the strongest predictive contribution. The model with body surveillance as the criterion variable demonstrated that the predictors (age, social media pressure, and ASMC) explained 35% of the variance. The model assessing psychological distress explained 18% of the variance. These findings underscore the need for tailored interventions that specifically address the impact of appearance-related social media consciousness, enhancing resilience among women against the pressures of social media on body image and psychological distress.



Investigating the mediation role of functionality appreciation in the relation between breastfeeding attitudes and breastfeeding intentions.

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Abstract

Introduction: Breastfeeding is important for infant health, reducing a number of infections, preventing childhood obesity. Moreover, it is also related to more health for the mothers. Mothers' adherence to guidelines for exclusive breastfeeding up to 6 months varies largely with many women initiating complementary breastfeeding before this period. Women's attitudes and body image influence breastfeeding decisions, with a positive body image linked to longer breastfeeding duration.

Objective: This study aimed to contribute to the growing empirical interest on the role of positive body image in the realm of breastfeeding. While many studies on breastfeeding and body image have focused on negative facets of body image and operated under the assumption that poor body image may hinder breastfeeding, studies on positive body image are scarce. We explore how a positive dimension of body image (functionality appreciation) play a mediating role between positive attitudes toward breastfeeding and its related intentions.

Method: A total of 305 women who had given birth within the past 1 to 3 months ($M=34.11$ years) participated in the study. Women completed a questionnaire measuring breastfeeding attitudes, functionality appreciation, mothers' breastfeeding intentions, previous breastfeeding experience, in addition to BMI, sociodemographic and obstetric characteristics. The mediation model was used to examine both the direct and indirect effects of attitudes toward breastfeeding and breastfeeding intentions through functionality appreciation.

Results: Results showed significant associations between positive attitudes towards breastfeeding, breastfeeding intentions, and functionality appreciation. Positive attitudes toward breastfeeding were observed to foster breastfeeding intentions directly and indirectly, through functionality appreciation. Finally, previous breastfeeding experience was positively associated with breastfeeding intentions.

Discussion: This study marks the initial endeavor to evaluate the significance of functionality appreciation in postpartum women, highlighting potential effective pathways that link breastfeeding attitudes to breastfeeding intentions. Interventions targeted at boosting postpartum women's favorable attitudes



toward breastfeeding, with an emphasis on fostering greater awareness and appreciation of body functions, may potentially raise breastfeeding rates.



Functionality appreciation mediates the relationship between dyspareunia and sexual distress in women with endometriosis

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Abstract

Introduction: Evidence indicates that women with endometriosis frequently experience heightened levels of sexual dysfunction. One of the most frequent pain manifestations in this population is dyspareunia (i.e., pain during intercourse), which negatively impacts sexual activity, and contributes to increased sexual distress. The presence of pain may also alter a woman's relationship with her body, making it more discomforting and inhibiting positive body image, another factor that has been associated with sexual well-being.

Objective: The present research aimed to investigate the role of one aspect of positive body image (i.e., body functionality appreciation) in the association between dyspareunia and sexual distress, controlling for age, hormonal therapy, stage of endometriosis, and BMI.

Method: A total of 296 women ($M_{age}=35.2$, $SD=7.6$) with endometriosis were recruited through online patient associations and from the Endometriosis and Chronic Pelvic Pain Outpatient clinic of Policlinico Umberto I (Rome). Data were collected using a socio-demographic checklist, a Visual Analog Scale (VAS) to measure dyspareunia severity, the Female Sexual Distress Scale (FSDS), and the Functionality Appreciation Scale (FAS). A mediation model was conducted, with the VAS as the independent variable, the FAS as the mediator, and the FSDS as the outcome. Covariates included age, hormonal therapy, stage of endometriosis, and BMI.

Results: Within our sample, women reported elevated percentages of dyspareunia (62.2%) and sexual distress (78.5%). Findings indicated that dyspareunia significantly predicted sexual distress ($\beta=0.37$, 95% bootstrap CI [1.239, 2.205]) and that the FAS partially mediated this relationship ($\beta=0.03$, 95% bootstrap CI [0.012, 0.256]). Specifically, higher levels of dyspareunia were negatively associated with scores on FAS ($\beta=-0.161$, 95% bootstrap CI [-0.526, -0.092]) which, in turn, were negatively correlated with FSDS ($\beta=-0.180$, 95% bootstrap CI [-0.685, -0.183]).



Conclusions: The severity of dyspareunia may interfere with the perception of the body as functional, potentially exacerbating sexual distress. Practical applications may include incorporating interventions to enhance body functionality appreciation in treatment plans for women with endometriosis experiencing sexual dysfunction and distress. Future research could also explore the efficacy of interventions focusing on improving body image perception and promoting a positive relationship with one's body in ameliorating sexual distress in individuals with endometriosis.



EXPLORING THE COMPLEXITIES OF CLINICAL PRACTICE: THE IMPACT OF CLINICIAN VARIABLES AND DIMENSIONS OF THE THERAPEUTIC RELATIONSHIP ON THE PROCESS

Proposer

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Discussant

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Abstract

What explains the efficacy/effectiveness of psychotherapies? What are the active ingredients of psychological interventions that can promote patient change? Research in psychotherapy has always strived to answer these crucial questions. Today it is well established that relational factors, particularly the therapeutic alliance, are predictive of treatment success, but the complex dynamics with clinician-promoted intervention strategies are still unclear. More recently, models that focus on the impact of therapist variables are receiving particular attention, but further studies are needed to understand their implications on the therapeutic process in clinical practice.

The four contributions presented in this symposium fall electively within this area of research. Using multi-method and multi-informant approaches, these studies seek to explore the effect of clinicians' and relational aspects influencing the therapeutic process.

The first contribution by Liotti examines the individual characteristics of therapists who shape their clinical practice, highlighting the link between their personal experiences and professional orientations, as well as styles of intervention in psychotherapy. The second contribution by Boldrini, Barsanti, De Vettor, Di Martino, Soldati, and Boldrini offers a multidisciplinary perspective on the topic of therapeutic guidance and patient autonomy, highlighting the ethical and practical challenges that arise when balancing



therapeutic neutrality with directive guidance. The third contribution by Di Giuseppe, Békés, and Aafjes-van Doorn focuses on the role of the therapist's defense mechanisms in influencing changes in the patient's defensive functioning, revealing a crucial interaction that evolves during psychoanalytic treatments. Finally, the fourth contribution by Tanzilli, Fiorentino, Cerasti and Gualco adopts the network analysis method to examine the structure of interactions between therapeutic alliance, therapist responsiveness and depth of content processing that emerge in psychotherapy sessions, highlighting the complexity of variables that influence the process.

Together, these contributions provide a comprehensive picture of therapeutic dynamics and the inherent complexities of clinical practice, inviting reflection and debate on how to improve psychotherapeutic training and practice.



Can psychotherapists' guidance affect patients' personal autonomy? A consensual qualitative research study

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Abstract

Introduction: This multidisciplinary research project aims to explore the beliefs, attitudes, and experiences of psychotherapists from diverse theoretical orientations regarding therapeutic guidance (i.e., advice, suggestions, recommendations) and the impact on patients' personal autonomy. It incorporates perspectives from clinical practice as well as deontological and moral philosophy. *Methods:* We interviewed a sample of 40 Italian psychotherapists (21 F; 19 M; mean age: 52.93; mean years of experience: 19.55) using a semi-structured interview format with 10 questions. The consensual qualitative research (CQR) method was employed to analyze the interview transcripts. *Results:* Analysis yielded five superordinate domains: i) "type of patient requests," illuminating the kinds of requests patients make to therapists; ii) "emotions disclosed by the therapist," revealing therapists' responses to their own emotional activation; iii) "neutrality of the therapists" and iv) "directiveness of interventions," which span a spectrum from neutral to directive approaches for safety or therapeutic strategy reasons; and v) "therapists' view of personal autonomy," examining therapists' perspectives on the nature of patient autonomy within psychotherapy. *Discussion:* Striking a balance between therapeutic neutrality and directiveness proves more complex in practice than theory. While autonomy is upheld as a critical aim in psychotherapy, opinions diverge on the balance between independence and interdependence within concepts of autonomy. Clinicians often customize their level of directiveness to meet patient needs—particularly when therapeutic guidance's benefits overshadow risks to autonomy, especially in urgent situations or with specific patient characteristics. The study underlines the significance of interdisciplinary dialogue in understanding and navigating the ethical terrain of therapeutic guidance.



The role of therapists' defense mechanisms in promoting changes in patients' defenses in psychoanalysis

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Abstract

Aims: Psychotherapy research has widely demonstrated the relationship between patient's defense mechanisms and several aspects of the treatment, while less is known about the role of therapist's defenses in promoting changes in patient's defensive functioning. The present study focused on therapist's defense mechanisms and their relationship to changes in the patients defensive functioning assessed throughout the treatment.

Methods: We analyzed four early and four late sessions of 27 psychoanalytic treatments and assessed therapist and patient defense mechanisms using the Defense Mechanisms Rating Scales (DMRS). For each session, we qualitatively analyzed the sequence of defenses consequently activated within the therapeutic pair.

Results: Patients' defensive functioning significantly improved at the end of the treatment, while therapists' defensive functioning remained stable in the range of high-neurotic and mature defenses. Qualitative analyses showed that in the initial phases of the treatment patients tended to awkwardly follow therapists' defenses, while towards the end of the treatment, patients seemed to personalize their defense style with higher use of adaptive defenses.

Discussion: These findings suggested the relevant role of therapist's defense mechanisms in promoting changes in patient defensive functioning in psychotherapy. The impact of indirectly serving as an adaptive model of defensive functioning for the patient is something that the therapist should be aware of and could be improved in psychotherapy training programs



“Through the looking glass: exploring therapists subjectivity”

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Abstract

Introduction: Psychotherapists are constantly confronted with the personal traumatic experiences, emotional struggles, complex intimate relationships, and other relevant, often deeply moving issues of their patients. What is it, then, that motivates one to choose this profession? And what are the therapists' personal characteristics that shape their practice and make them effective — and for whom? Literature shows that the effectiveness of psychological intervention is largely associated with characteristics that, although professionally developed, probably stem from personal experiences and dispositions. Our presentation will explore, through two literature reviews, inter-individual differences regarding a wide array of variables characterizing the subjectivity of the therapist.

Methods: We conducted two narrative reviews, compiling data from empirical studies. For the first, we focused on personal factors (e.g., personality traits) influencing therapists' theoretical orientation, personal style, and effectiveness. The second review investigated what motivates people to pursue a career as a psychotherapist, and what life events therapists consider as pivotal in their choice to enter the profession. Both reviews employed methodical searches of the published literature in the PsycINFO Record and Medline (PubMed) databases. Only peer-reviewed articles were included, based on the following criteria: 1) published between January 1980 and May 2024, and 2) written in the English language.

Results: The first review highlighted that different therapists' personal characteristics, such as personality traits, are correlated with different theoretical orientations as well as personal style and effectiveness. The second review revealed that personal adversity, often encompassing early relational traumas, is a common factor motivating individuals to become psychotherapists, supporting the “wounded healer” archetype. However, other relevant motivations to this career choice include desires for personal growth, professional achievement, and altruistic goals such as aiding others' well-being.

Discussion: Our findings underscore the complexity of factors influencing therapists' professional identities and interactions with patients. Understanding the interplay between personal experiences and



professional orientations can enhance therapeutic training and practice, making it crucial for psychotherapists to reflect on how their personal histories and inherent traits can influence their professional capabilities and preferences, and play a pivotal role in the process of building or repairing the therapeutic alliance with their patients.



Therapeutic process as a complex system: a network analysis working alliance, therapist responsiveness and depth of elaboration

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Abstract

Background: The present work stems from an effort to apply complex systems theories in the field of psychotherapy research by capturing the opportunity to look at the therapeutic process holistically. The goal of this study is to identify and emphasize the interconnectedness of the elements underlying the dynamics that develop between clinician and patient and to shed light on the processes that promote patient changes. Given the complex nature of the process in psychotherapy, this empirical investigation aimed to explore the network structure involving the dimensions of working alliance (i.e., bond, task, and goal), therapist responsiveness and depth of elaboration in psychotherapy sessions.

Methods: 77 therapist-patient dyads completed the Patient's Experience of Attunement and Responsiveness, the Working Alliance Inventory-Short Form and the Depth Scale of the Session Evaluation Questionnaire. We applied network analysis to examine interconnections between variables, calculated centrality metrics, and assessed the robustness of estimates by evaluating the accuracy of edge weights and the stability of centrality indices through the correlation stability coefficient (CS).

Results: The most central therapist node was the task, while the most central patient node was the goal. The patient nodes were closely interconnected with each other. Several interconnections also emerged among the therapist nodes. The bond (therapist) was connected to the bond (patient), and the task (patient) was connected to the task (therapist). Depth showed a range of interconnections in both the patient and the therapist, but in the group of therapists this variable closely correlated only to therapist responsiveness. The CS was .36.

Discussion: Our results seem to show that the depth of content elaboration that emerges in psychotherapy sessions is closely related to the responsiveness of the therapist, especially in the clinician group. In addition, clinician responsiveness is associated with both task and bond in both the patient and therapist groups. These two alliance dimensions are crucial because they enable mutual interaction between



clinicians and patients, supporting evidence on the exquisitely intersubjective nature of clinical exchange and the impact of relational variables on successful psychotherapies.



ASSESSMENT AND RISK FACTORS IN PARENTING

Proposer

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Discussant

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Abstract

Research has consistently shown that child maladjustment can be linked to a number of factors, including low parental reflective functioning and emotional recognition skills. In addition, other conditions, such as maternal substance use disorder and maternal persistent somatization, can in turn lead to dysfunctional personal and interpersonal functioning, which is a potential risk factor for the parent-child relationship. It is worth noting that parental burnout can also undermine parenting. For this reason, it is important to assess, identify, and intervene early the above-mentioned risk factors that may affect child development. In this context, Mazza et al. will illustrate how VR scenarios can be a novel and promising tool to improve emotional recognition, empathic responsiveness and mentalization skills in parents. Indeed, VR provides a unique opportunity to observe and experience a child's perspective during parental conflict, which is often overlooked and not considered detrimental to a child's development and growth. The work of Porreca and colleagues will explore the assessment of parenting quality in mothers with substance use disorders and its associations with parental cognitive functioning and psychopathological symptoms. Filippi and colleagues will discuss the influence of maternal persistent somatization on the mother-child relationship, both reviewing the existing literature and presenting findings from an investigation of the quality of early mother-child interaction in mothers with and without a history of persistent somatization. Their findings provide thoughtful insights into the role of persistent somatization in early maternal care.



Finally, Facchino et al. discuss whether family functioning plays a moderating role in the relationship between job burnout and parental burnout.



Assessing quality of parenting during stressful contexts in mothers with Substance Use Disorder: implications of cognitive functioning and psychopathological symptoms.

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Abstract

Introduction: Mothers with substance use disorder (SUD) often struggle with difficulties in parenting practices and their children are at increased risk for undesired developmental outcomes. Quality of parenting has been linked to the presence of neuropsychological deficits and psychological distress in this population, especially in low-stress situations. Nevertheless, recent neurobiological data point out the need to consider these aspects also during stressful situations, given the complex interaction between substance misuse and stress circuits, which can be linked to less optimal behavioral responses during mother-child interactions and to an increased risk of relapses in substance use. Despite this, no previous research investigated quality of parenting during stressful situations in mothers with SUD, also considering the role of cognitive functioning and psychopathological symptoms. The present study aimed to investigate quality of parenting in mothers with SUD during stressful contexts (separation-reunion) and its association with cognitive functioning and psychopathological symptoms.

Methods: 40 mothers with children aged 1-5 years old in residential treatment for SUD were assessed with respect to quality of parenting during stressful contexts, cognitive functioning, and psychopathology. Quality of parenting behaviors and of mother-child interactions was assessed during videotaped episodes of separations and reunions (EAS; Biringen, 2008), cognitive functioning through neuropsychological tasks (ENB-2; Mondini et al., 2003), psychopathology through self-report measures (SCL-90-R; Derogatis, 1975).

Results: The mothers presented low levels of maternal sensitivity during separations and reunions. Quality of parenting resulted associated to several psychopathological symptoms as depression ($r=-.405$, $p=.019$), anxiety ($r=-.452$, $p=.008$), paranoid ideation ($r=-.624$, $p=.001$), and global distress ($r=-.595$, $p=.001$), but not to cognitive functioning ($p>.05$), controlling both for maternal and child age.

Discussion: The management of stressful contexts might represent a particular challenge for parenting in the context of SUD. The presence of psychopathological symptoms might account for quality of parental



responses during these situations. These results could orient and inform assessment and treatment. Clinical implications of the findings are addressed.



Worker-parents: the moderating role of family functioning in the relationship between job burnout and parental burnout

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Abstract

Job burnout (JB) is a condition that emerges when individuals experience prolonged exposure to job demands without adequate resources to cope with them.

When the concept of burnout is applied to the field of parenting, it is referred to as Parental Burnout (PB), a state of chronic stress related to one’s parental role.

JB and PB share core definitional dimensions and predict similar negative consequences. However, the literature supports the independence of the constructs in question, and the conditions under which this occurs are still under investigation.

A crucial aspect of the antecedents that influence PB is family functioning. Based on Olson’s Circumplex Model, the family system can be balanced or unbalanced, through the combinations resulting from the levels of cohesion, flexibility, rigidity, chaoticism, enmeshing, and disengagement.

This study examines whether family functioning plays a moderating role in the relationship between JB and PB. A sample of 309 parents ($M=42.18$; $SD=7.28$) of children aged 0-18 completed an online questionnaire that assesses socio-demographic characteristics, job burnout (MBI), parental burnout (PBI), and family functioning (FACES-IV). Results indicated a significant moderating effect of family functioning on the relationship between JB and PB. Specifically, JB had no effect on PB in highly balanced families. Given that modern families often face work-family conflicts, and that work overload can often lead to stress spilling over into the family environment, these findings shed light on the potential protective role of a positive family climate, which may mitigate the potential consequences of work burnout on parenting. These findings have implications for identifying protective factors in worker-parents at risk for burnout, thereby informing prevention and treatment strategies.



Maternal persistent somatization and dyadic intersubjectivity

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Abstract

Several studies highlighted the central role of affective processes in the establishment and maintenance of persistent somatization, that in turn can lead to dysfunctions in personal and interpersonal functioning, representing a potential risk factor for the parent-child relationship. However, the influence of maternal persistent somatization on the mother-child relationship – one of the most important environmental and interpersonal contexts affecting child’s development – is rarely taken into consideration in both research and clinical settings. Study 1. Given the emerging evidence of disorder-specific deviations in parenting and interaction patterns, we aimed at systematically reviewing the available literature on parenting in the context of maternal persistent somatization. We identified emotional difficulties in mothers with persistent somatization similar to those reported in adults with somatization disorders, and lower quality of parenting behaviors in mothers with persistent somatization when compared with organically ill or healthy mothers. Study 2. Based on Study 1, we aimed at exploring the quality of early mother-infant interaction in mothers with and without a history of persistent somatization. The study involved 42 mothers and their children. History of persistent somatization was assessed administering the DCPR-R ISS. Coping styles and emotion dysregulation were investigated through the COPE-NVI and the DERS, respectively. Mother-infant interactions were observed when children were 4 and 12 months old and rated with the Emotional Availability Scales (EAS). We found a predictive effect of maternal persistent somatization on maternal structuring at 4 months. At 12 months, we found significant differences between mother with and without a history of persistent somatization in terms of maternal structuring as well as child’s responsivity and involvement; however, when we tested the predictive effect of maternal somatization through linear regression models also controlling for the avoidance strategies subscale of the COPE-NVI and the DERS, these associations did not survive. We found instead a significant predictive effect of emotion dysregulation on maternal structuring behaviors. The findings provide thoughtful insights on the role of persistent somatization in early maternal caregiving.



On the side of the child: Impact of an immersive virtual reality (VR) experience on parental reflective functioning and empathy

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Abstract

Introduction: Research has shown that virtual reality (VR) scenarios may be a novel and promising tool for improving perspective taking. In this study, we used a VR scenario to promote perspective taking in parents.

Methods: The sample consisted of 60 parents, 43 mothers and 17 fathers, with a mean age of 41.62 years. Parents were randomly assigned to either the experimental (VR) group (n=30) or the control group (n=30). They participated in two rounds of questionnaire administration at two different time points: baseline (T0) and follow-up (T1). Participants in the VR group were immersed in a VR scenario immediately prior to completing their questionnaires at T1. The customized virtual scenario was implemented to run in the Meta Quest 2 headset and in this immersive environment parents are placed in the virtual shoes of their child and witness a conflictual conversation between two adult avatars representing the parents. Measures administered at T0 were: i) demographic questionnaire; ii) Adverse Childhood Experiences (ACE); iii) Marlowe- Crowne Social Desirability Scale (MCSDS); and iv) Dyadic Adjustment Scale (DAS). Measures administered at both T0 and T1 were: i) Basic Empathy Scale (BES); ii) Interpersonal Reactivity Index (IRI); iii) Mentalization Questionnaire (MZQ); and iv) Parental Reflective Functioning Questionnaire (PRFQ). A VR questionnaire was also administered to the experimental group at T1.



Results: The two groups were homogeneous in terms of number of adverse childhood experiences, tendency to respond in socially desirable ways, and dyadic adjustment. Multiple linear regression models were used to estimate the difference-in-differences (DiD) effect for the variables of empathy and parental reflective functioning. No statistically significant differences were observed between the experimental and control groups at the two time points for the BES, IRI, MZQ, and PRFQ. However, a trend towards improvement was observed in the VR group from T0 to T1.

Discussion: This study has shown that VR scenarios can be a novel and promising tool for improving emotional recognition, empathic responsiveness and mentalization skills. VR provides a unique opportunity to observe and experience a child's perspective during parental conflict, which is often overlooked and not considered detrimental to a child's development and growth.



MIND READING AND PSYCHOPATHOLOGY: THE ROLE OF METACOGNITION AND MENTALIZATION

Proposer

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Discussant

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Abstract

In recent years, research in psychotherapy has been focusing on the study of psychopathological variables that can underlie various psychopathological conditions in order to identify the main factor of change on which to focus treatment.

The ability of human beings to reflect on their own and others' mental states is considered by several authors to be a crucial factor for good personality functioning and, consequently, for adequate and coherent self-development and the building of positive interpersonal relationships. This ability has often been termed mentalization or metacognition, and an impairment of it is considered an underlying psychopathological variable in borderline personality disorder and personality pathology more generally. Recently, an impairment in the understanding of mental states also seems to emerge in other psychopathological pictures such as Eating Disorders.

Therefore, the purpose of this symposium is to illustrate the role of mentalization or metacognition in different psychopathological frameworks.

Aloi et al. present a naturalistic study in which, using a latent profile analysis study they highlight the role of metacognition as an underlying transdiagnostic factor in Eating Disorders. Colli and Gullo investigate the relationship between patients' mentalizing problems and their personality through latent profile analysis study. Pontillo and Vicari present a review that highlights the role of difficulties in mentalization



in precipitating severe psychiatric disorders during adolescence, from anxiety and depressive disorders to psychosis. Lastly, Carcione et al. present the results of the CLIMAMITHE study, a randomised clinical trial that evaluated the clinical and neurobiological changes following one year of Metacognitive Interpersonal Therapy (IMI) compared to Structured Clinical Management in a sample of patients with prevalent Borderline Personality Disorder.



Metacognitive Interpersonal Therapy in Borderline Personality Disorder: clinical and neuroimaging outcomes from the CLIMAMITHE Study - a Randomized Clinical Trial

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Abstract

Introduction: One of the core features in Borderline Personality Disorders (BPD) is an impairment in mentalizing or metacognition. The study CLIMAMITHE illustrates a randomized clinical trial assessing the clinical and neurobiological changes following 1 year of Metacognitive Interpersonal Therapy (MIT) compared with Structured Clinical Management (SCM) in a BPD sample.

Methods: 112 patients were screened and 76 BPD patients were randomly allocated to the treatments. A group of healthy controls (HC) was included as reference. BPD patients underwent a multidimensional clinical assessment covering several psychological aspects: emotion regulation assessed with the Difficulties in Emotion Regulation Scale (DERS) (primary outcome); level of psychopathology, depression, anger, impulsiveness, level of functioning, and a detailed assessment of metacognitive functions with the Metacognition Assessment Interview. Clinical assessment will be done at the baseline, after 6, 12 (end of treatment). Patients also underwent structural and functional MRI at baseline and after



12 months to assess amygdala activation in response to emotional stimuli. Plasma oxytocin values were also extracted as possible biological markers.

Results: The TMI group included 39 patients with BPD and was compared with the SCM group consisting of 39 patients with BPD. The results showed improvements in both treatment conditions in several dimensions. In particular, after 12 months, DERS scores decreased in both conditions, while TMI appears to be more able to reduce general personality pathology, as shown by a significant reduction of criteria at SCID II. The fMRI study showed a significant reduction in amygdala activity similar for both treatment groups. Furthermore, structural brain imaging scans seem to indicate an increase in connectivity in the TMI group, which correlates significantly with the increase in metacognition. Finally, a significant modulation in oxytocin levels was observed following both interventions.

Discussion: The results of the present project could be helpful to clarify how psychotherapy act on BPD and to improve our knowledge of the pathophysiology underlying the disease. The results on the clinical variables are promising and demonstrate the effectiveness of TMI for the treatment of DBP and personality disorders more generally.



A latent profile analysis of mentalizing problematics in adult patients

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Abstract

Although there are several theoretical and clinical models for the understanding of personality disorders (PDs), there is widespread agreement that individuals need to understand internal mental states to form stable and coherent self-representations, and that they must understand others' mental states to form and maintain interpersonal relationships (Bateman & Fonagy, 2016, 2019; Dimaggio et al., 2007). In this context different authors have stated that mentalization may have a crucial role in the development of personality pathology and developed the hypothesis that patients with PDs may be characterized by several problematics in mentalization (see e.g., Beeney et al., 2015) and by the presence of nonmentalizing modalities of thought (see e.g., Bateman et al., 2013), and have suggested the hypothesis that each PD may be characterized by specific problematics in mentalization (Semerari et al., 2014).

The aim of this study was to investigate the relationship between patients' mentalizing problematics and their personality; specifically, it aimed to identify clusters of individuals characterized by specific patterns of mentalizing imbalances and to analyze the relationship between these and diagnosis of personality disorder (PD), emotion dysregulation, interpersonal reactivity but also predictive validity in relation to treatment response. Methods: Four hundred therapeutic dyads were recruited. A part of these (n = 183) only completed clinician-report measures, Mentalization Imbalances Scale, and Modes of Mentalization Scale, while others (n = 217) also completed patients' self-report measures, which were Reflective Functioning Questionnaire, Difficulties in Emotion Regulation Scale, and Interpersonal Reactivity Index.

Results: A latent profile analysis enlightened the presence of four clusters with problematics in the dimensions of mentalization, indicated by cluster names: (1) Affective self- automatic profile (ASA-P) (with higher percentage of PDs); (2) External profile (E-P) (with lower percentage

of PDs); (3) Others-automatic-affective profile (OAA-P); (4) Cognitive-self-automatic profile (CSA-P). Multivariate analysis of variances confirmed that the four clusters differed in relation to the quality of mentalization, emotional dysregulation and interpersonal reactivity, with higher levels of



nonmentalization modes, uncertainty about mental states and emotion dysregulation in ASA-P, higher levels of good mentalization in E-P, lower impulsivity in CSA-P, and greater empathic concern in OAA-P.



Exploring Mentalization and Developmental Psychopathology: Implications for Severe Psychiatric Disorders in Adolescence

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Abstract

Introduction: Mentalization, also known as reflective functioning, refers to the human capacity to understand oneself and others in terms of intentional mental states, such as feelings, desires, wishes, attitudes, and goals. It is a transdiagnostic and transtheoretical concept implicated in a broad spectrum of psychological difficulties and disorders.

In recent years, there has been a consistent increase in studies focusing on common mental disorders and problems across the lifespan using a mentalizing approach to psychopathology. The objective of this narrative review is to provide an updated overview of the literature concerning mentalization and developmental psychopathology. Indeed, impairments in mentalizing during childhood and adolescence have been associated with various cognitive and socioemotional difficulties, including attentional and effortful control, academic achievement, emotion regulation, interpersonal challenges, and internalizing and externalizing problems.

Methods: An online search was conducted using PubMed and PsycInfo.

Results: Our findings highlight the critical role of mentalization deficits in precipitating severe psychiatric disorders during adolescence, spanning from anxiety and depressive disorders to psychotic episodes.

Conclusions: Our results support the clinical implications of mentalization deficits and the exploration of potential therapeutic approaches rooted in the Mentalization-Based Treatment approach for adolescents with severe mood and anxiety disorders, as well as those at clinical risk for psychosis



Metacognition as a transdiagnostic factor across eating disorders: A latent profile analysis study

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Abstract

Background: Metacognition is a crucial aspect of understanding and attributing mental states, playing a key role in the psychopathology of eating disorders (EDs). This study aims to explore the diverse clinical profiles of metacognition among patients with EDs using latent profile analysis (LPA).

Method: A total of 395 patients with a DSM-5 diagnosis of ED (116 AN-R, 30 AN/BP, 100 BN, 149 BED) participated in this study. They completed self-report measures assessing metacognition, eating psychopathology, depression, emotional dysregulation, personality traits, and childhood adversities. LPA and Welch ANOVAs were conducted to identify profiles based on metacognition scores and examine psychological differences between them. Logistic regression models were employed to explore associations between personal characteristics and different profiles.

Results: A 3-class solution had a good fit to the data, revealing profiles of high functioning (HF), intermediate functioning (IF), and low functioning (LF) based on levels of metacognitive impairments. Participants in the IF group were older and had a higher BMI than those in the HF and LF groups. Individuals with BN were largely categorized into HF and LF profiles, whereas participants with BED were mainly included in the IF profile. Participants in the LF group reported an impaired psychological profile, with high levels of depression, emotional dysregulation, childhood adversity, and personality dysfunction. Logistic regression analyses showed significant associations between metacognitive profiles and emotional and neglect abuse, emotion dysregulation, and detachment.

Conclusions: This exploratory study unveils distinct metacognitive profiles in EDs, providing a foundation for future research and targeted interventions. In this light, metacognitive interpersonal therapy could be a valid and effective treatment for EDs, as suggested by the initial promising results for these patients.



NARCISSISM ACROSS THE LIFECYCLE: DEVELOPMENTAL PATHWAYS, SELF-DISRUPTIVE BEHAVIORS, POST-TRAUMATIC MANIFESTATIONS, AND MALIGNANT VARIANTS OF THE NARCISSISTIC REALM

Proposer

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Discussant

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Abstract

Current research on narcissism builds upon several decades of clinical investigations, clinical research, and personality psychology studies. The growing interest in narcissism is currently associated with different unanswered questions in the literature, including developmental trajectories leading to narcissistic features, the role of traumatic experiences, the risk for self-disruptive/suicidal behaviors, as well as variation in the phenotypic expression of narcissism. Against this background, the symposium will cover different topics in the narcissistic realm, ranging from developmental issues, self-harming behaviors in clinical adolescents and adults, to post-traumatic reactions across different expressions of narcissism.



Two-wave stability of grandiose and vulnerable narcissism during adolescence: the mediating role of empathy

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Abstract

Introduction: Emerging evidence suggests that narcissistic traits influence socio-affective development from the onset of adolescence. These traits are typically divided into two primary domains: narcissistic grandiosity (NG) and narcissistic vulnerability (NV). This investigation aims to examine the progression of NG and NV throughout adolescence and to determine how empathetic responses may influence the stability of these narcissistic traits.

Method: The study employed a longitudinal prospective design, including 156 adolescents (47.5% females). Pathological narcissism was assessed using the Pathological Narcissism Inventory (PNI), and empathy was measured through the Interpersonal Reactivity Index (IRI). Measurements were taken at baseline and again at a 24-month follow-up.

Results: NV displayed a pattern of mean-level increase, though with a small effect size, while NG traits remained more stable over the study period. Empathy domains mediated the developmental trajectories differently; the fantasy domain of empathy partially mediated the stability of NG, and the personal distress domain of empathy partially mediated the mild increase in NV.

Discussion: The study's findings suggest that grandiose fantasies and a heightened reaction to others' distress are pivotal in shaping the developmental trajectories of narcissistic traits during adolescence. These empathetic mechanisms are central to understanding how narcissistic traits evolve and persist through adolescent development, providing potential targets for interventions.



Predicting suicide attempts in NSSI patients: the role of suicidal motivations as an expression of borderline and narcissistic functioning.

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Abstract

Background: Although nosographically distinguished from suicidality, NSSI is one of the strongest predictor of suicidal conducts. This relationship has been interpreted as caused by a common state of mind characterized by a negative attitude toward life underlying both the spiral of NSSI and suicide attempts.

To date, no specific hypothesis has been made as to the features that distinguish the states of mind of suicidal NSSI from only-ideators NSSI patients.

In this study we propose that the peculiar motivations sustaining the suicidal process and their possible relations with single pathological personality functioning may help predict suicidal conducts in NSSI patients.

Methods: A clinical sample of 88 adolescents diagnosed with NSSI were administered with the Columbia Suicide Severity Rating Scale (CSSRS), the Motivational Interview for Suicidality in Adolescence (MISA) and the SCID 5 for Personality Disorders. ANOVA and correlations were performed to analyze the associations between CSSRS variables and motivations as well as personality disorders.

Results: All NSSI adolescents presented significant associations with suicidal ideation and conducts. The potential lethality and intensity of suicidal ideation was in particular associated with the increase in frequency of NSSI and lethality of suicidal attempts. Only the BPD and HPD were significantly associated with suicidal conducts. Motivations related to denial of the consequence of suicide and attempts at controlling and manipulating the relationships predicted suicidal conducts.

Clinicians involved in the management of suicidal risk in adolescence should consider that narcissistic features may play a key role in precipitating the suicidal crisis in BPD patients diagnosed with NSSI.



The associations between pathological narcissism and stress related disorders: the role of vulnerable features.

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Abstract

Introduction: The relationship between personality and Stress Related Disorders among trauma survivors is of theoretical and practical interest. However, empirical studies of the etiological role of narcissistic traits in the development of Stress Related Disorders are still limited. In the present contribution we aim to investigate the relationship between pathological narcissism and Stress Related Disorders in a sample of community dwelling adults.

Methods: In a sample of 704 non clinical participants we administered the Italian version of the Pathological Narcissistic Personality Inventory (PNI), the ICD-11 Trauma Questionnaire (ITQ) and the PTSD Checklist for DSM-5 (PCL-5) with Life Events Checklist for DSM-5 and Criterion A. One-hundred twenty-five participants reported that they have been exposed to one or more traumatic events. Regression analyses were performed entering PNI scales as predictors and PCL-5 and ITQ scores as dependent variables.

Results: The pathological narcissism was significantly related with self-report measures of Stress Related Disorders. Narcissistic vulnerability (Hiding the Self and Contingent Self Esteem) seems to be the narcissistic dimension associated with PTSD. Moreover, Complex PTSD was predicted by both grandiose (Self -Sacrificing Self-Enhancement) and vulnerable narcissistic features (Contingent Self-Esteem and Devaluing).

Discussion: These results seem to suggest that both vulnerable and grandiose pathological narcissism features represent a risk factor for Stress Related Disorders after an exposure to a traumatic event because they experience the traumatic event as a narcissistic injury, as a blow to their narcissistic illusion of invulnerability.



Malignant narcissism in adult psychotherapy outpatients: Relationships with personality disorders, physical aggression, and self-destructive behaviors

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Abstract

Introduction: A scoring procedure for malignant narcissism (i.e., MNARC index) based on the Personality Inventory for *DSM-5* (PID-5) trait scores has been recently proposed. The MNARC index is obtained computing a weighted sum of the scores of 11 PID-5 traits, reflecting the relative importance of each PID-5 dysfunctional personality trait. Although the MNARC index showed promising criterion and incremental validity, to the best of our knowledge, no study tried to assess its clinical usefulness with respect to personality disorders, physical aggression and self-harming behaviors.

Methods: The sample included 168 adult psychotherapy participants (58.3% female; mean age=34.52 years, *SD*=13.53). Participants were administered the PID-5, the Clinician-Administered Nonsuicidal Self-Injury Disorder Index (CANDI), the Columbia Suicide Severity Rating Scale (C-SSRS), Aggression Questionnaire (AQ), the Structured Clinical Interview for *DSM-5* Personality Disorders (SCID-5-PD), and Structured Clinical Interview for the *DSM-5* Alternative Model for Personality Disorders Module I.

Results: Pearson *r* value suggested a positive, strong, and significant association between MNARC index and AQ Physical Aggression scale, $r = .70, p < .001$. Significant Spearman *r* values were observed for the relationships between MNARC index, and CANDI global severity scores, $r_s = .18, p < .0167$, C-SSRS Suicidal Ideation frequency index, $r_s = .29, p < .0167$, and C-SSRS Suicidal Behavior frequency index, $r_s = .27, p < .0167$. When the frequency of suicidal ideation and suicidal behavior based on the C-SSRS interview was held constant, no significant association was observed between the MNARC index and NSSI severity, partial Spearman $r = .06, p > .30$. Rather, when the CANDI Global Severity score was held constant, the MNARC index remained significantly associated with both C-SSRS Suicidal Ideation frequency index, $r_s = .25, p < .0167$, and C-SSRS Suicidal Behavior frequency index, $r_s = .21, p < .0167$.

Discussion: Our data suggested the importance of considering the risk for physical harm towards others in psychotherapy participants showing high scores on the MNARC index; moreover, malignant narcissism, at least as it was operationalized in the MNARC self-report index, seemed to be significantly, albeit



moderately, associated with increased risk for clinician-rated suicidal ideation and suicidal behavior. This finding highlights the importance for practitioners to assess malignant narcissism in clinical samples, because of its potential negative consequences.



EXPECTATION AND ATTENTION TO BODILY SENSATION: CLINICAL AND NEUROBIOLOGICAL INSIGHTS.

Proposer

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Discussant

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Abstract

This symposium brings together diverse perspectives to explore the intricate interplay between neurocognitive processes, psychophysiological mechanisms, and their implications for understanding and treating both physical and mental health disorders.

Functional Neurological Disorder (FND) poses challenges due to its enigmatic nature, often lacking organic explanations for symptoms. Barbiani et al. propose a novel framework integrating Bayesian predictive coding models to elucidate the role of expectations, attention, and personality traits in FND and placebo/nocebo effects. By highlighting shared cognitive and neuroanatomical factors, this perspective offers insights into potential biomarkers and therapeutic targets for FND treatment. Volpato investigates the impact of the COVID-19 pandemic on therapy adherence among Ischemic Heart Disease (IHD) patients. Through a multi-group cohort study, she examines how patient beliefs and expectations influence adherence to therapy during this challenging period. By integrating socio-demographic, clinical, and psychological data, this study aims to inform tailored interventions to optimize patient care and outcomes amidst the pandemic.

Patron explores the role of interoception—our ability to perceive bodily signals—in various physical and mental disorders. By examining interoceptive mechanisms in conditions like chronic pain and mood



disorders, Patron underscores the importance of evaluating interoception in clinical settings. She advocates for integrating interoceptive measures into clinical practice for improved diagnosis, prognosis, and treatment selection across a spectrum of disorders.

Finally, Malandrone et al. delve into the neurobiological underpinnings of depression, focusing on emotional dysregulation and the brain-heart interplay (BHI). Through mindfulness-based interventions (MBIs), they explore how practices such as Self-Contact and Loving Kindness modulate BHI indices in individuals with depression. By elucidating neurobiological responses to MBIs, this study sheds light on potential therapeutic avenues for depression management and relapse prevention.

Collectively, these presentations offer a comprehensive understanding of the complex interactions between cognitive, emotional, and physiological processes in health and disease, paving the way for innovative approaches to diagnosis and treatment across diverse medical domains.



Shared networks for Functional Neurological disorder and the placebo/nocebo effect: the role of expectations and attention

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Abstract

Functional Neurological disorder (FND) is characterized by symptoms that are not explained by an organic cause. Among the different etiological models that have been proposed for FND, of note is the Bayesian predictive coding model, which posits that perception relies on top-down cortical predictions (priors) to infer the source of incoming sensory information. This model can also apply to non-pathological experiences, such as placebo and nocebo effects, wherein sensory information is shaped by prior expectations and learning. Here, we develop a framework in which shared cognitive (e.g. attention and expectation), personality (e.g. suggestibility), and neuroanatomical (e.g. amygdala activation) factors would justify a deeper link between FND and placebo/nocebo effects. We leverage two main sources of similarities between FND and placebo/nocebo effects, namely the interplay between attention, prior beliefs and expectation (according to a Bayesian framework) and the role of personality traits. In particular, we build on evidence demonstrating that attention may modulate somatic symptoms, to the point that symptoms improve with distraction, and conversely symptoms worsen when attention is directed towards the body. We conclude by hypothesizing that nocebo-like mechanisms stemming from maladaptive prior expectations that are reinforced via attention, stress and anxiety could be involved in the maintenance of functional symptoms. Some neuroanatomical considerations will be put forward as well, to further support the link between FND and the nocebo effect specifically. This new perspective may offer guidance for better clarifying the pathogenesis of FND, and for identifying potential biomarkers and therapeutic targets to successfully guide treatment.



The relationship between beliefs, expectations, and adherence to therapy during the COVID-19 period: a multi-group cohort study on patients with Ischemic Heart Disease (IHD)

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Abstract

Introduction: The COVID-19 pandemic, starting in March 2020, drastically altered healthcare, leading to reduced services and hospital suspensions due to increased admissions. Fear of infection decreased hospital visits, emphasizing the need for cautious resumption of services. Patients with Ischemic Heart Disease (IHD) face added stress during this transition, as adherence to long-term therapy is crucial for preventing recurrent events, compounded by pandemic-related anxiety and depression potentially hindering treatment engagement. Decision-making in medical care, influenced by past experiences and knowledge, warrants further exploration regarding expectations' role in therapy adherence.

Methods: A mixed-methods multi-group cohort study was conducted involving patients with IHD during the transition from COVID-19. In addition to collecting socio-demographic, lifestyle, and clinical information, data related to follow-up visits, number of hospitalizations in the last year, therapy adherence using the Medication Adherence Rating Scale (MARS), the difference between pills taken and prescribed, and Net Adverse Clinical Events (NACE) were considered. Semi-structured interviews based on Interpretative Phenomenological Analysis (IPA) were administered to better understand subjective experiences, along with the following psychological scales: Coronavirus Anxiety Scale (CAS); Covid-19 Stress Scale (CSS); Brief Illness Perception Questionnaire (BIPQ); Illness Cognition Questionnaire (ICQ); Hospital Anxiety and Depression Scale (HADS). Additionally, questions were asked about illness expectations. Data were collected at baseline, 3, 6 and 12 months.

Results: Since June 2022 to date, 200 participants (78.5% male) with a mean age of 63.8 (SD=10.4) have been recruited from three centres, two of which are for acute care and one for rehabilitation. Currently, the established connection between post-hospitalization anxiety and illness perception indicates that elevated anxiety levels correlate with a heightened sense of illness threat. Additionally, there's an observed trend where illness threat perception is more pronounced in the initial phases following a cardiac event,



gradually diminishing over time during the post-hospitalization period, thereby impacting patients' expectations.

Discussion: Better understanding patients' experiences and perceptions during the transition from COVID-19, which can inform tailored interventions to improve therapy adherence and mental health support. Additionally, identifying factors associated with adherence, such as illness perceptions and anxiety levels, could aid in developing targeted strategies to optimize patient care and outcomes.



Interoception Dysfunctions in Physical and Mental Disorders

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Abstract

The brain and the body are intrinsically and dynamically coupled, our thoughts, emotions, and perceptions are guided by internal signals, and the continuous brain-body interplay influences most parts of human behavior. Interoception refers to the individual's ability to perceive and interpret bodily signals accurately. Specifically, bodily signals include both somatic bodily modifications (i.e., proprioception) and visceral modifications (visceroception). A growing body of research suggests that dysfunctional interoceptive mechanisms are especially implicated in chronic symptoms that characterize a wide set of physical and mental disorders. However, the ability to perceive and interpret bodily signals is often unevaluated in clinical settings. Studies will be discussed that support the role of altered interoception in different conditions including chronic pain (e.g., chronic headache) and mood disorders (e.g., clinical and subclinical depression). Chronic headache patients were found to have lower interoception accuracy for somatic bodily modifications, reduced sensibility to bodily sensations as well as increased resting frontal muscle tension compared to healthy controls. Furthermore, more severe depressive symptoms were found to be associated with impaired interoception accuracy for visceral modifications, reduced sensibility to bodily sensations, and altered autonomic activity.

In clinical practice, interoceptive measures could be usefully integrated with psychophysiological evaluation as clinical predictors for the purpose of diagnosis, prognosis, and treatment selection. Regarding clinical interventions, brain-body communication can be addressed through biobehavioral trainings for the mitigation, and clinical care of interoceptive disorders and could in turn could reduce the risk of the development and expression of symptoms across physical and psychological disorders.



Embodied Attention: Exploring Mindfulness Practices to Investigate the Brain-Heart Interplay and Emotional Dysregulation in Depression.

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Abstract

Depression is, among other things, characterised by emotional dysregulation. Recent research has unveiled neurobiological alterations, including disruptions in heart rate variability (HRV) and sensorimotor cortices, revealing impaired bottom-up and top-down processes crucial for effective emotion regulation. Mindfulness-Based Interventions (MBIs) emerge as promising therapeutic modalities, demonstrating efficacy in mitigating depressive symptoms and reducing the risk of relapse when integrated into standard care. Of particular interest is the brain-heart interplay (BHI), which offers insight into the dynamic interaction between EEG and sympatho-vagal dynamics. This composite index, reflective of autonomic and central nervous system activity, could be a biomarker for depressive and post-traumatic symptoms. Studies on BHI in individuals with depression suggest altered communication between cardiac and cortical activity during rest and emotional tasks. This study aims at estimating BHI index after two audio-recorded MBIs (i.e., Self-Contact and Loving Kindness) comparing 24 endocrinological patients with from moderate to extremely severe depression, to 36 healthy 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 depression, autonomic symptoms, dissociation, post-traumatic symptoms, 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 MBIs techniques in depression. Our results are expected to show how different MBI practices may elicit different neurobiological responses in individuals with depression, thus furthering our understanding of its psychopathology and potential therapeutical options.



**RISK FACTORS AND REHABILITATION INTERVENTIONS IN THE CONTEXT OF
MENTAL HEALTH SERVICES AND MAJOR PSYCHIATRIC DISORDERS**

Proposer

*Giacomo Andrea Minazzi*¹

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

Discussant

*Stefania Cella*¹

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Abstract

The present symposium is dedicated to exploring cutting-edge research and advancements in psychiatric rehabilitation and mental health. Our symposium features four distinct contributions, each offering valuable insights into various facets of mental health care and intervention strategies in several psychiatric contexts and settings.

The first contribution, presented by Giacomo Andrea Minazzi from Università Cattolica, delves into the evaluation of group rehabilitation activities within a residential psychiatric context. Utilizing the Patient Reported Experience Measure (PREM) approach, Minazzi's study aims to identify specific process indicators of effective group functioning, shedding light on subjective patient experiences and enhancing group intervention, paving the way for tailored and more effective group interventions.

The second contribution, presented by Lorenzo Antichi from Università degli Studi di Firenze, addresses the prevalence and predictive factors of Metabolic Syndrome (MetS) in patients receiving antipsychotic depot treatment. Through comprehensive data collection and analysis, Antichi's research aims to develop predictive models for identifying patients at risk of MetS, facilitating early intervention strategies in clinical practice. Their findings have significant implications for optimizing monitoring strategies and early intervention approaches in clinical practice.



The third contribution, led by Fabio Frisone from Università Cattolica, explores the use of artificial intelligence (AI) platforms in facilitating the retrieval of autobiographical memories (AMs) in patients with substance use disorder. Through experimental design and interaction with avatars, Frisone's study investigates the potential of AI to promote the sharing of personal experiences and enhance therapeutic interventions in addiction treatment. Their findings offer promising avenues for improving therapeutic interventions and enhancing patient outcomes in addiction treatment.

The fourth contribution, presented by Ilaria Colpizzi from Università degli Studi di Trento, focuses on cognitive risk factors associated with depression in adolescence. Through longitudinal data analysis, Colpizzi's research identifies key cognitive vulnerability mechanisms contributing to depressive symptoms over time, informing preventive interventions targeting specific cognitive factors in adolescent mental health care.

Together, these contributions offer valuable insights and advancements in psychiatric rehabilitation and mental health care, contributing to the ongoing improvement of intervention strategies across diverse psychiatric settings.



Evaluating group rehabilitation activities in a residential psychiatric context

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² Adele Bonolis, As.Fra. Onlus Foundation, Vedano al Lambro (MB), Italy

Abstract

Introduction: The project aims to identify, 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 good functioning of group activities, utilizing the PREM (Patient Reported Experience Measure) approach.

Methods: The Grounded Theory method was adopted to identify specific process indicators of "good functioning" of group rehabilitation activities. Staff and patients were interviewed about their experiences with these groups, considering differences between activities of different typologies and intervention methodologies. The study aimed to identify the processes contributing to the "therapeutic nature" of group activities. By comparing these process indicators with those found in the literature, a survey was created and tested for feasibility, to be administered to patients and staff of the facility to highlight the distribution of such process indicators among the activities offered.

Results: Eleven process indicators were extracted, organized into one core category (i.e., "active participation") and one main category (i.e., "good group climate"), and presented in a theoretical framework. We aim to administer our survey to approximately 100-150 patients. The formulated tool will enable scoring of different process indicators in each group activity. We will identify the "profiles" of each activity, highlighting different process components and identifying any critical or strong areas. Additionally, we will compare evaluations given by patients and activity conductors.

Discussion: The primary contribution of the study is the development of a questionnaire for evaluating group rehabilitation activities, applicable across various domains. Such a comprehensive instrument appears lacking in the literature and will facilitate comparisons between different group rehabilitation activities. Moreover, the study will shed light on elements subjectively experienced by patients as useful in group rehabilitation contexts and identify the most effective groups for further in-depth study of their characteristics and implementation processes.



Predicting the likelihood of metabolic syndrome in patients with antipsychotic depot

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Abstract

Introduction: Antipsychotics cause metabolic side effects and contribute to the development of Metabolic Syndrome (MetS), which indicates a preclinical state for the development of cardiovascular disease and diabetes. Hence, the present study aims to evaluate the prevalence of MetS and its predictive factors.

Method: A 227 sample of patients who had severe mental illness and were undergoing antipsychotic depot were recruited from the Department of Mental Health of Parma (Italy), participating in the Health Monitoring and Health Promotion Programme (HMHPP). Nurses and psychiatrists measured three classes of parameters. First, the clinical, socio-demographic ones, such as age, diagnosis, anthropometric data (i.e., height, weight, body mass index (BMI)), and drugs (i.e., antipsychotics, antidepressants, mood stabilizers, medical therapies). Second, the MetS's criteria measured through blood tests, such as waist circumference (cm), triglycerides (mg/dL), lipoprotein (HDL) cholesterol (mg/dL), glucose (mg/dL), and blood pressure (Hg). Third, lifestyle factors were assessed by administering the Alcohol Use Disorders Identification Test - Consumption (AUDIT-C), the Fagerström Test for Nicotine Dependence (FTND), and posing questions about alimentation habits and physical activity level. Logistic regression and machine learning models have been compared, considering their predictivity of the onset of MetS. Each model's area under the curve (AUC) was compared using DeLong's test. The importance of variables was determined using the mean decrease accuracy (MDA) and the mean decrease gini (MDG) indexes. The variables were halved in two: MetS's criteria and lifestyle factors/clinical and socio-demographic characteristics.

Results: The sample comprised 156 males and 71 females; the mean age was 42.68 (SD = 11.99). A hypercaloric alimentation and a BMI over 25 statistically predicted the MetS, showing the most important influence over the others by MDA and MDG. The retained model had an AUC of .68. Regarding the MetS criteria, triglycerides, glucose, and blood pressure significantly predicted MetS. However, the most important variables were triglycerides and blood pressure. The AUC's retained model was .94.



Discussion: Metabolic criteria predict MetS better than lifestyle factors and clinical and socio-demographic characteristics. Creating predictive models may optimize the monitoring and development of strategies for the early identification of risk factors for MetS in clinical practice.



Autobiographical memory in substance use disorder: the mediating role of artificial intelligence

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Abstract

Introduction: The project aims to propose strategies to facilitate the retrieval of autobiographical memories (AMs) in patients with addiction in a drug rehabilitation center. Specifically, the study intends to investigate the use of artificial intelligence (AI) platforms to facilitate the retrieval of AMs. The main objective is to explore whether the use of an avatar can facilitate the sharing of personal experiences and promote the retrieval of AMs.

Methods: The experimental design involves 35 patients completing the Autobiographical Memory Test (AMT) in two ways: face-to-face and through interaction with an avatar. During the sessions, cue-words (neutral or substance-related) are presented, and participants are asked to recall their associated memories. The aim is to find out whether avatars can promote the sharing of personal experiences and greater specificity of AMs.

Results: The expected results are related to the characteristics that interaction with an avatar might elicit compared to face-to-face interaction. Face-to-face interaction might provoke social desirability, shyness, and mistrust, whereas interacting with an avatar might promote anonymity, making participants feel more comfortable sharing personal information and experiences. In this context, we expect that interacting with an avatar may promote the sharing of one's AMs, which may affect the latency - we expect it to be shorter when interacting with an avatar -, the pleasantness of memories -we expect more pleasant memories to emerge in avatar mode - and the quality of responses - we expect avatar mode to reduce overgenerality and increase specificity of responses -.

Discussion: Substance-use disorder is often associated with attempts to escape self-awareness and personal history. Encouraging the use of AI platforms that can enhance AM sharing could have a significant impact on improving the condition of the patients by influencing awareness of their narrative identity. And even if the avatar does not lead to better outcomes than face-to-face interaction, its use could still be helpful, because if the avatar achieves at least the same results as face-to-face interaction, it could assist psychotherapists and caregivers in various tasks, reducing their work time and their risk of burnout.



Assessing Risk Factors for Depression in Adolescents: Necessary or Sufficient Conditions?

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Abstract

Introduction: Depression is a prevalent mental disorder that significantly challenges global health, largely due to its association with a high risk of suicide. Recent findings have shown a rise in both subclinical symptoms and fully developed depression during adolescence, emphasizing the critical need for early preventive interventions. Understanding the relationship between various cognitive risk factors and depression in adolescence is therefore crucial. These cognitive risk factors, derived from prominent theories of depression such as Beck's cognitive theory, the hopelessness theory, and the response styles theory, are hypothesized to be both necessary and sufficient conditions for the development of a full-blown depressive disorder in adulthood. Therefore, it is crucial to investigate the role of these factors in the onset of depression among adolescents.

Method: This study utilized a longitudinal dataset over one year, with four waves of data collection on depressive symptoms and cognitive risk factors among adolescents (N = 519; mean age = 15.33 years; 63% female). A relative importance analysis determined the extent to which each cognitive vulnerability mechanism—cognitive errors, automatic thoughts, the negative cognitive triad, brooding, and stressful events—contributed to explaining the variance in subclinical depressive symptoms across the study period.

Results: The analysis showed that automatic thoughts, the cognitive triad, and brooding were the most significant contributors to the variance in depressive symptoms throughout the four waves. Specifically, focusing on the fourth wave only, automatic thoughts accounted for 12.10%, the cognitive triad for 14.33%, and brooding for 7.75% of the variance in depressive symptoms. The robustness of these findings was affirmed through cross-validation analysis, suggesting that the model is probably reproducible in similar adolescent populations.

Discussion: The findings suggested that automatic thoughts, the cognitive triad, and brooding are critical risk factors in the onset and vulnerability to depression and should be prioritized in preventive interventions.



Sunday, 15th September 2024

THEMATIC SESSION

**“ILLNESS AND HOSPITAL EXPERIENCES IN PATIENTS AND
CAREGIVERS”**

Chair:

Chiara Fioretti

University of Salerno



Biomarkers and psychological interplay in end-stage renal disease: hemodialysis therapy, emotions and cognitive reserve

Dina Di Giacomo¹, Federica Guerra¹

¹ Department of Psychology, University of Aquila, Aquila, Italy

Abstract

By the increasing of survivorship and the unmet needs of ESRD patients in clinical practice, an emerging research and clinical topic is becoming the interaction between individual and external aspects as factors affecting living and compromising the quality of life in hemodialysis therapy. The aim of the study was to investigate the relationship between individual factors and biomarkers in ESRD patients analyzing psychological dimensions, biomarkers and cognitive reserve.

Participants of the study have been 61 patients (n=30 female, n=31 male) in range age 22–79 years (mean = 52.4; SD ± 12.2) affected by ESRD. Patients have been evaluated by psychological measurements testing psychological dimensions (distress, anxiety, stress, depression dialysis distress) and cognitive reserve.

Our findings highlighted the long-term disease dialysis could be distressing for dialysis therapy; more, the relevant biological markers as creatinine value is better managed by patients in early time of dialysis than over the time. Regarding to that, we explored the role of CR in ESRD patients. By our finding, the educational index of CR is a factor related to the better management of biomarkers (creatinine and eGFR values).

In conclusion, the complex clinical needs of ESRD condition as well related HD side-effects must be tailored to the individual features making priority the cognitive reserve.



Mental health and burden among informal caregivers of visually impaired patients: A pilot study

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² National Centre of Services and Research for the Prevention of Blindness and Rehabilitation of the Visually Impaired, Ophthalmology Unit, 'A. Gemelli' University Polyclinic Foundation IRCCS, Rome, Italy

Abstract

Background: Visually impaired people often need help because vision loss interferes with their ability to engage activities of daily living (e.g., reading, face recognition, driving, financial and medication management); family members may be called upon to provide physical and emotional support. Those who take on the role of informal caregivers may be subject to adjustment problems related to their new role and responsibilities. Studies on chronic conditions such as cognitive and behavioural, neuropsychiatric, or oncological disorders show that informal caregivers who care for these patients may find themselves experiencing the so-called burden of caregiving, which can generate psychological distress leading to depression. At present, little is known about the adjustment process of family members caring for visually impaired adults. This lack of knowledge is in contrast with the growing evidence that underlines the influence of family caregiver functioning and support on paths rehabilitation and patient health outcomes. Visual rehabilitation programs address the needs of the disabled but often neglect caregivers.

Objective: This study is aimed to assess burden of care and prevalence of depression among informal caregivers of low vision patients who access to our vision rehabilitation center.

Methods: An observational, single-center, cross-sectional study enrolling informal caregivers of visually impaired was conducted. Burden of care was evaluated with the Caregiver Burden Inventory (CBI) and the prevalence of depression was determined by the Patient Health Questionnaire (PHQ)-9. Results: Thirty-five patients with peripheral or central vision loss and their informal caregivers were included.



Female caregivers had significantly higher CBI ($p < 0.01$) and PHQ-9 ($p < 0.001$) scores than male. A significant correlation between CBI and PHQ-9 scores was also found ($p < 0.001$).

Conclusions: Our findings are consistent with literature data reporting that informal caregivers experience burden and are at risk for developing depression. Therefore, in order to maintain high adherence to visually rehabilitation programs and to cope with visually impaired needs, focusing on mental health and psychological burden of informal caregiver is also needed. An early intervention of psychological support for caregiver would be desirable to prevent the reported psycho-emotional consequences. In short, addressing caregiver burden requires a targeted professional intervention.



The Interaction Between Psychological Factors and Nutritional Styles in Women Hospitalized in the Oncological Gynecology Ward: Implications for A Comprehensive Care

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Abstract

Introduction: Women hospitalized in the oncological gynecology wards constitute a particularly vulnerable population, often struggling not only with the challenges related to their health conditions, but also with possible eating disorders and associated psychological distress. This study aims to examine the correlations between psychological and behavioral factors related to diet in these patients.

Methods: From October 2023 to April 2024, 135 women (average age=50) were assessed through the Distress Thermometer (DT), the Hospital Anxiety and Depression Scale (HADS), the Teruel Orthorexia Scale (TOS), the Body Image Scale (BIS), and the Mini Nutritional Assessment (MNA).

Most of them were Italian (94.1%), divided among the north (0,7%), central (70,4%), and southern Italy (28,9%), while the remaining 5.9% came from other countries.

6.7% reported past eating disorders, and 24.4% reported food intolerances.

Results: Patients over 70 (10,4%) showed significantly higher orthorexia nervosa levels (TOS, $p<0.003$). Those who came from central and southern Italy exhibited notable anxiety (HADS-A, $p<0.001$), while northern patients had higher depression levels (HADS-D, $p<0.006$).

Positive correlation emerged between food intolerances and anxiety (HADS-A, $p<0.001$), as well as between distress scores and higher levels of depression (HADS-D, $p<0.001$), anxiety (HADS-A, $p<0.001$), and body image concerns (BIS, $p<0.001$).



Finally, positive correlations were found between MNA and orthorexia nervosa scores (TOS, $p < 0.001$).

Discussion: High orthorexia nervosa incidence among elderly patients highlights age's role in eating disorders and dietary attention. Additionally, regional differences underscore cultural and socio-economic disparities influencing psychological symptoms.

The link between food intolerances and anxiety emphasizes the importance of comprehensive mental and physical health assessment. Lastly, balancing a nutritionally adequate diet with obsessive eating behaviors is crucial.

In conclusion, this study highlights the significance of integrated strategies, comprehensive of psychological and behavioral factors, to address nutritional and health concerns among patients with gynecological cancer. These insights offer valuable direction for crafting tailored interventions aimed at enhancing the management of both psychological well-being and nutritional needs.



Clinicians' attitudes towards the use of routine outcome monitoring in public health services: a qualitative study

Arianna Teti¹, Chiara Urone¹, Giulia Alessi¹, Vittoria Cioffo¹, Maria Regina Giordano¹, Salvatore Gullo¹

¹ Department of Psychology, University of Palermo Palermo, Italy

Abstract

Introduction: Although the literature has highlighted the effectiveness of using Routine Outcome Monitoring (ROM) in improving treatment outcomes and reducing drop-out rates, its application in clinical settings is still limited. Several studies suggested that it might depend largely on clinicians' scepticism about the potential impact of ROM on the therapeutic relationship. Furthermore, there is a lack of available literature on ROM implementation in Italian private and public context. This study aims to investigate the attitudes and beliefs of Italian clinicians regarding the implementation of ROM methodology within public care settings. *Method:* Fifteen therapists (of which 93.33% women and 50% psychoanalytic/psychodynamic, 37.5% child neuropsychiatrist, 12.5% CBT, 12.5% systemic), that work in Italian Public Health Services and that used ROM methodology spanning 12 to 36 months as a part of a larger trial were interviewed about the experience of implementing ROM into their clinical practice. The interviews were recorded, transcribed and analysed through Constructivist Grounded Theory approach. *Results:* The results indicated that although clinicians initially encountered resistance, they ultimately regarded the ROM methodology as a beneficial approach for monitoring treatment progress and a valuable tool for engaging patients. Clinicians also emphasised the importance of receiving adequate training to be able to effectively integrate standardised tools within treatment tracks. Despite this, clinicians still perceive several barriers that might hinder the implementation of ROM as a routine practice within public care services. *Discussion:* Clinicians perceive ROM as a useful practice to improve the quality of their therapeutic work and to monitor the quality of public services; however, in order to implement it on a wider scale, suitable solutions need to be found to overcome the barriers perceived by clinicians and trainings have to be developed to help clinicians in integrating this new tool into their therapeutic work.



Testing the Role of Uncertainty in Illness in Patients and Informal Caregivers

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Abstract

Background: Illness is a life-disruptor worsening the psychophysical health of patients and informal caregivers. Uncertainty in illness (UI) is a cognitive state related to the inability to determine the meaning of unpredictable or unclear illness-related events. UI can worsen psychological health leading to anxiety issues which are widespread in the health-related context. Despite several studies explored the potential pathways to anxiety, the role of UI is still unclear.

Aim: Relying on cognitive theories, it was hypothesized that dispositional intolerance of uncertainty (IU) and worry contribute to higher UI. Simultaneously, IU would influence anxiety and this path may be mediated by worry and UI, thus resulting in a sequential mediation model.

Method: Such model was tested in a large sample of patients and informal caregivers through a 5-step procedure: i) fitting separate CFAs for each measure (all provided good-fit); ii) conducting the Harman single-factor test; iii) using a partially-disaggregated item parceling approach to reduce free parameters; iv) using the maximum-likelihood estimator as parcels were normally distributed; v) fitting the sequential mediation structural equation model among the latent variables with a bootstrap with 10'000 replications..

Results: The model provided a good fit to the data (CFI=0.988, RMSEA=0.045, SRMR=0.038). All paths were positive and statistically significant, except for IU which was not associated with anxiety, indicating a complete mediation. The total indirect effect from IU to worry and to UI up to anxiety was positive and statistically significant. The model total effect on anxiety was positive and statistically significant, with 54% explained variance.

Discussion: This was the first study that tested a theoretically driven model about the relations between these cognitive constructs using a strong methodology. Results showed that the IU effect on anxiety was completely mediated not only by worry, but also by UI, thus highlighting the important role played by these variables. These findings are in line with the cognitive theories about anxiety and uncertainty and contribute to providing interesting and useful insights for clinical and research purposes in the illness context.



**Psychological aspects in patients living with hiv treated with long-acting antiretroviral therapy:
a study protocol**

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² Department of Medical Sciences, University of Turin, C/o Infectious diseases Unit, Amedeo di Savoia Hospital, Turin, Italy.

Abstract

Introduction: Adherence to antiretroviral therapy (ART) is an important factor in the management of HIV disease. Several psychological and psychopathological aspects seem to be implicated in adherence behavior. Despite advances in ART development, several challenges (e.g. daily reminders of HIV status) are associated with the current treatment paradigm of lifelong adherence to daily oral pill intake. Long-acting (LA) injectable ART allows reduced dosing frequencies, minimizing the impact of forgetfulness and high pill burden. Few studies have yet addressed the psychosocial aspects associated with this new regimen. Therefore, the present research project aims to investigate the psychological aspects of people living with HIV (PLWH) making the switch from oral antiretroviral therapy to LA injection therapy.

Methods: The study project is aimed at PLWH undergoing treatment at the HIV Infection Outpatient Clinic, Amedeo di Savoia Hospital, Turin. The study was proposed to PLWH who had been identified by the infectious disease physician as eligible for LA therapy since the time of approval by the Hospital Ethics Committee (reference number 0030555). Participation in the project was voluntary after signing informed consent. PLWH were asked to complete questionnaires via an online survey during the first administration of LA therapy (T0), during the fourth administration, 5 months later (T1), and during the seven administration, 11 months later (T2). The data collected include socio-demographic information (e.g. gender, age, sexual orientation, marital status) and clinical information (e.g. date of diagnosis, course of infection, medical comorbidities). Finally, psychological variables (personality, alexithymia, perceived social support, locus of control, perceived stigma, quality of life, anxiety and depressive symptoms, treatment satisfaction) will be assessed.

Results and Discussion: Investigating which factors may underlie the failure of new therapy or treatment satisfaction is of primary importance from a preventive perspective, in order to structure psychological interventions aimed at assessing and enhancing these factors. Early psychological interventions could



reduce the risk of psychological distress, improve people's adaptation to HIV infection, promote ART adherence and consequently ensure better QoL.



Sunday, 15th September 2024

THEMATIC SESSION

**“DEVELOPMENTAL DIFFICULTIES: FROM ASSESSMENT TO
INTERVENTION”**

Chair:

Giulia Fioravanti

University of Florence



Prismatic adaptation coupled with cognitive training as novel treatment for developmental dyslexia: a randomized controlled trial

Giulia Conte¹, Lauro Quadrana¹, Lilian Zotti¹, Agnese Di Garbo², Massimiliano Oliveri³

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Abstract

Despite intense and costly treatments, developmental dyslexia (DD) often persists into adulthood. Several brain skills unrelated to speech sound processing (i.e., phonology), including the spatial distribution of visual attention, are abnormal in DD and may represent possible treatment targets. This study investigates the efficacy in DD of rightward prismatic adaptation (rPA), a visuomotor adaptation technique that enables visuo-attentive recalibration through shifts in the visual field induced by prismatic goggles. A digital intervention of rPA plus cognitive training was delivered weekly over 10 weeks to adolescents with DD (aged 13–17) assigned either to treatment (N = 35) or waitlist (N = 35) group. We observe a high compliance to treatment suggesting that the digital rPA-cognitive treatment program was feasible and sufficiently engaging to adolescents. The software's algorithm dynamically adjusts the task level, which seems crucial to ensure good engagement in the task while minimizing frustration and motivation drops. Efficacy was evaluated by repeated measures MANOVA assessing changes in working memory index (WMI), processing speed index (PSI), text reading speed, and words/ pseudowords reading accuracy. (Results showed that) rPA treatment was significantly more effective than waitlist ($p \leq 0.001$; $\eta p^2 = 0.815$). WMI, PSI, and reading speed increased in the intervention group only ($p \leq 0.001$, $\eta p^2 = 0.67$; $p \leq 0.001$, $\eta p^2 = 0.58$; $p \leq 0.001$, $\eta p^2 = 0.29$, respectively). Although modest change was detected for words and pseudowords accuracy in the waitlist group only (words: $p \leq 0.001$, $d = 0.17$, pseudowords: $p = 0.028$; $d = 0.27$), between-group differences were non-significant. To our knowledge, this is the first study to evaluate the efficacy of PA coupled with cognitive training for the treatment of DD in adolescents. According to our initial hypothesis, this technique appears to enhance reading abilities by optimizing the defective visual attention orientation of DD through PA as well as by strengthening



executive functions. This innovative approach could have implications for early remedial treatment, expanding knowledge on non-phonological remediation interventions in DD.



The Development of Social and Emotional Intelligences in the COVID era: What Effect in the Maintenance and Remission of Internalizing Symptoms? A longitudinal Study in a Primary School Sample

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² Department of Psychology, Educational Science and Human Movement, University of Palermo, Italy

Abstract

Introduction: The COVID-19 breakdown put a great strain on the general population worldwide in terms of reduced mental health and increasing internalizing symptoms such as anxiety and depression. In such a context, primary school children constitute a vulnerable population for the onset of these kinds of symptoms because of the great number of challenges and changes in children's social and educational landscape due to the lockdown measures. Particularly, children from 6-11 years old start to develop their socio-emotional functioning in terms of abilities and self-perception, especially at school with peers and teachers, and the socio-emotional developmental path could be hindered during a critical event of that kind. This three-wave longitudinal study aimed to explore how children's self-perceptions of their trait Emotional Intelligence (trait EI) and Social Intelligence (SI) change over time and examine the effect that trait emotional intelligence could have on the remission or maintenance of anxiety and depression over time after the COVID-19 outbreak.

Methods: A total of 169 primary school children completed all three waves of data collection. Four self-report questionnaires were used to assess trait Emotional Intelligence, Social Intelligence, Anxiety, and Depression respectively.

Latent Growth Curve Models (LGM), based on structural equation modeling, were used to test variables changes over time.

Results: Only Social Awareness (SA), among the dimensions of Social Intelligence, significantly increases over time while trait EI significantly decreases over time. As regards internalizing symptoms, both scholastic and environmental anxiety significantly decrease over time while depression remains stable over time. Finally, only Social Skills were found as significant predictors for a decrease in scholastic anxiety but not for depression levels while trait Emotional intelligence was found as a predictor of less anxiety and depression levels at the starting point but not as a predictor their changes over time



Conclusions: These findings highlight the importance of evaluating children's socio-emotional development considering the impact that stressful situations such as a pandemic could have on it and considering these changes for a prognosis about the remission of clinical conditions of anxiety and depression



A new model of psychological intervention with social robots for children with Externalizing Disorders

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Abstract

Introduction: The treatment of children with Externalizing Disorder includes various challenges related to the large number of rehabilitation requests and highlights the necessity for a global-level response that can incorporate the related family. New technologies represent a new tool for the treatment of children with neuro-developmental disorders (NDDs). The study intends to explore the evolution of rehabilitation models across various contexts, both in the hospital and the home, using social robots. The aim of this research is to explore the use of socially assistive robots for intensive care of children with Externalizing Disorders in a home setting.

Method: The research proposes a « Triangular interaction system: child - robot mediator – caregiver» to provide long-term intervention for children with externalized disorders. This preliminary and feasibility study involves school-aged children with disruptive mood dysregulation disorder (DMDD), attention-deficit/hyperactivity disorder (ADHD), and oppositional defiant disorder (ODD), along with their parents, recruited from the Child and Adolescent Psychiatry Service at Pitié-Salpêtrière Hospital. The experimental protocol is inspired by typical remediation procedures employed at the hospital. Various interactive activities with a robot aim to reduce attentional, motor and emotional instability of children. The activities are designed to engage both the child and parents in the intervention and promote interaction between them. The child is emotionally involved with the robot, perceiving it as a “transitional object”, capable of thoughts and reactions. The persistence of the parent-child interactions with the robot is monitored using specially designed devices to measure their involvement in the activities.

Results: We expect to implement the system with 10 children and their families as case studies, formalizing metrics to evaluate and validate the system in future studies and identifying the possible challenges and pitfalls of using such complex systems in unstructured scenarios.



Discussion: The current scientific studies highlight the difficulties of transitioning from laboratory settings to ecologically home environment. The protocol will be custom-made with the help of the pedopsychiatry team of the Pitié-Salpêtrière Medical Hospital, considering the specific needs and resources of children with NDDs.



Psycho-emotional Fragilities, Schools, and Adolescence: Perspectives from Teachers, School Managers, and Mental Health Professionals

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Abstract

Introduction: The introduction of the Dir. M. of 12/27/2012 formalized the inclusion of students with Special Educational Needs (SEN), drawing increased attention to students experiencing scholastic difficulties. A specific area of concern is addressed by the so-called "band C", encompassing situations lacking certifications (e.g., disabilities or specific learning disorders) and characterized by linguistic, social, and cultural disadvantages, along with various forms of psycho-emotional distress in adolescence. This research aimed to explore adults' perceptions of psycho-emotional fragility among secondary school students, as well as the strategies employed by schools to address these issues.

Methods: To gain a comprehensive understanding of psycho-emotional fragility, perspectives from both schools and health services were integrated. The sample comprised 19 participants, including 9 teachers, 2 school managers, 4 school psychologists, and 2 health service workers (aged 32-62 years; 15 females and 5 males). A total of 16 semi-structured interviews were conducted and transcribed verbatim, with subsequent thematic analysis of the transcripts.

Results: The main themes were organized into five areas: structural aspects, psycho-emotional fragility of adolescents and the impact of the pandemic, student management strategies, teacher training, and the role of the school psychologist.

Discussion: The identified themes underscore the importance of promoting experiential training for teachers, involving families in the educational process, and ensuring a stable and continuous presence of psychologists within school settings.



Cognitive Disengagement Syndrome as an influence on school functioning and levels of anxiety and depression in children

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Abstract

Introduction: Cognitive Disengagement Syndrome (CGS, previously known as Sluggish Cognitive Tempo) is a set of symptoms which include inattention, daydreaming and behavioural slowness. It is particularly relevant during developmental age since it may affect everyday school functioning: in fact, teachers are considered as optimal raters of slowed and inefficient school behaviour; in addition, its impact on children's mood and levels of anxiety (and, consequently, on their social lives) has to be considered.

Aim of the study: the aim of the present study was to confirm the association between teacher-report ratings of CGS and direct behavioural measures of attention, notably the Attentional Network Test: the hypothesis was that higher levels of CGS as rated by teachers would be associated to a worse performance at the task and to higher reaction times. Secondly, CGS would be positively associated with the evaluation of anxiety and depression.

Methods and results: 127 Italian primary-school children (age range 7-11, $m = 8,6$, 57% F) were collectively administered with the Child and Adolescent Behavior Inventory, an informant-report battery for the evaluation of CGS and of internalising and externalising traits; in a second moment, they were individually administered with the ANT. Results: The results highlighted a negative, significant correlation between CGS as rated by teachers and the performance index in the Attentional Network Test (ANT) task; a positive, significant correlation was found between teacher-rated CGS and reaction times at the ANT. As for the internalising psychopathology dimensions, regression analyses showed significant associations between CGS assessed by teachers and levels of anxiety and depression in children. Conclusions: Having high levels of CGS can lead to a negative outcome in attentional tasks; in addition, the higher the CGS trait, the longer the time spent in resolving ANT tasks. Such relations may suggest that CGS should be considered as a set of symptoms which may severely affect the children's school functioning. Furthermore, this trait can have consequences in daily life, leading to anxious or mood-related symptoms.



In this framework, teachers can be considered reliable raters for predicting children's behaviours, especially for the relation between internalising psychopathology and school-related abilities.



Comparison of cognitive profiles between autistic females and males

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Abstract

Background: Autism symptoms influence cognitive development, determining differences in cognitive profiles between autistic and neurotypical individuals. Research showed sex-differences in social abilities with a females' advantage, therefore cognitive profiles should be investigated to better characterize girls' profiles.

We aim to analyze cognitive profiles' sex-differences in the context of autism, through a systematic review of literature and a subtest-level-depth original research.

Methods: PRISMA Review. Studies eligibility was defined according to PICOS criteria. After full-texts assessment, 22 studies were included (%agreement=94,59%; Cohen's Kappa=0,89). 72 autistic preschoolers: n=36 females (Mage=55.80m; sd=21.80m), n=36 males (Mage=56.30m; sd=20.40m) 20 autistic school-aged subjects: n=10 females (Mage=139.00m; sd=30.60m), n=10 males (Mage=135.00m; sd=29.00m)

Measures: Cognitive profiles were investigated with Griffiths Mental Development Scales (GMDS) or Wechsler Intelligence Scale for Children-Fourth Edition (WISC-IV). Behavioral profiles were assessed using ADOS-2.

Results: Contrasting result regarding cognitive profiles: no sex-differences using the Mullen Scales of Early Development (MSEL) and WISC (n=5 studies). Males' advantage in Performance Development Quotient (DQ, GMDS) (n=2) and Perceptual Reasoning Index (WISC) (n=2). Both sexes' profiles are characterized by advantage in visual-reception and performance. No significant sex-differences in cognitive profiles. Preschoolers' profile: Males: Performance DQ advantage and Personal-Social weakness ($t(35)=5.01, p<0.001$); Females: Performance DQ advantage and Language weakness ($t(35)=2.63, p=0.01$). School-aged individuals' profiles: higher scores in Perceptual Reasoning and lower scores in Working Memory (Males: $t(9)=3.63, p=0.006$; Females: $t(9)=2.63, p=0.03$) and Processing Speed (Males: $t(9)=3.85, p=0.004$; Females: $t(9)=2.49, p=0.03$). No sex-differences in ADOS-2 scores.



Conclusions: Focusing on cognitive aspects is pivotal for diagnostic precision and interventions individualization. Despite contradictory results in literature, we found various studies suggesting absence of cognitive abilities' sex-differences. Further, both sexes' profiles seem characterized by an advantage in Performance/Perceptual Reasoning, as confirmed by our study.



Developing an Evaluation Grid for the “Drawn Stories Technique”: Exploring the Indicators of Children's Socio-Emotional Development, Anxiety, and Depression Levels

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Abstract

Introduction Since the first development of psychology, drawing has been considered a useful tool to understand an individual's development and personality. The graphic method is considered a useful way to express not only personality dimensions but also the child's emotions, and the affective tone with which children “emotionally invest” the context in which they live. In other words, drawing allows children to express something emotional and something meaningfully experienced that they have not yet categorized or verbalized. This study aims to develop an ad hoc evaluation grid for the “Drawn Stories Technique” to explore which drawing indicators (story outcomes, themes, emotional contents, and formal aspects) could reflect children's socio-emotional functioning in terms of emotional and social intelligences and clinical levels of anxiety and depression.

Method. The Drawn Stories Technique together with four self-reported questionnaires to evaluate trait Emotional Intelligence, Social Intelligence, Anxiety, and Depression respectively were administered to 228 primary school children in the group during class time.

Results. Negative outcomes were positively related to depression scores but not to anxiety scores while social intelligence was associated with fewer themes related to death, less hostile emotional contents, and more human characters designed more in detail. As regards emotional intelligence, it was negatively related to heavy traits in the draws. Moreover, children who show clinical levels of depression tend to significantly draw fewer themes related to fables and animals and more everyday life events while children who have clinical levels of anxiety showed differences in some formal aspects of the drawings such as fewer empty spaces and more heavy traits in the draws.

Conclusion. This study has shown the potential use of projective graphic techniques with primary school children to obtain potential indicators of maladjustment through the development of an ad hoc evaluation grid to collect information.



The role of child maltreatment on the development of gender representations: a cross-sectional study

Eleonora Bevacqua¹, Vittoria Spicuzza¹, Gaia Teresi¹, Phoebe Martina Aiello¹, Eliana Ferrante¹, Lorenzo Passalacqua¹, Chiara Passantino¹, Martina Riolo¹

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Abstract

Introduction: The family environment play an important role in the transmission of gender representations and roles, as well as in the development of representations of self and others, as emphasized by attachment and complex trauma theories. But gender stereotypes are also influenced by sociocultural factors: Glick & Fiske (1996), in their theory of Ambivalent Sexism (AST), analyzed the ambivalent feelings of both genders toward each other distinguishing between Hostile Sexism (HS) and Benevolent Sexism (BS). This study aims to explore the role that childhood maltreatment experiences might play in the development of both HS and BS representations of gender.

Methods: An online survey was conducted with the Qualtrics® survey platform (Qualtrics, Provo, UT, USA). The link was sent to the official e-mail address of the University of Palermo of each student. The final sample included 966 participants (72.5% females; mean age= 21.4). An ad hoc questionnaire was created to collect demographic data; the ambivalent sexism inventory (ASI) and the ambivalence toward men inventory (AMI) was used to evaluate gender representations and the Childhood Trauma Questionnaire Short Form (CTQ-SF) to assess several types of childhood abuse and maltreatment.

Results: Preliminary results showed a significant and negative relationship between benevolent sexism toward women and both emotional abuse and neglect scores, while no associations were found with sexual abuse and physical abuse and neglect. Contrary, hostile sexism toward women showed a significant and positive relationship with both physical abuse and neglect scores. As regards sexism scores toward men, benevolent scores showed a significant and negative relationship with physical abuse and a positive relationship with physical neglect while hostile scores showed a positive and significant relationship only with emotional abuse.

Discussion: Our results are partially in line with the literature regarding ambivalent sexism scores, while, regarding the relationship between ambivalent sexism and child maltreatment, we found no support from the literature. Deeper analysis will be performed to grasp possible explanations of our data.



Sunday, 15th September 2024

SYMPOSIUM SESSION



FATHERING MATTERS: PATERNAL ROLE AND FAMILY RELATIONS FROM PREGNANCY TO EARLY CHILDHOOD

Proposer

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Discussant

Franco Baldoni¹

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Abstract

In the last decades, fathering research has flourished, reflecting sociocultural changes in family structures and roles, as men navigate new roles and responsibilities while establishing an affective bonding with their offspring. Literature is showing the pivotal role fathers play throughout early childhood period, exerting a significant influence on quality of family relationships. At the same time, according to a systemic perspective, the reciprocal interactions among family members emerge as crucial determinants of paternal adaptation and psychological well-being.

Specifically, prior investigations highlighted the multifaceted contributions of fathers, such as the significant association between paternal involvement, couple adjustment and family well-being. Moreover, paternal functioning is associated with various domains of children's socioemotional, cognitive, and psychosocial development.

This aim of this symposium is to examine paternal adjustment from pregnancy to early childhood, focusing on the association between father's outcomes and family processes.

The first communication presented by Casu et al., focused on the mediating role of perinatal depressive and affective symptoms in the relationship between maternal and paternal perceived stress and couple adjustment during pregnancy, using a dyadic analysis.



The second contribution presented by Cimino et al., investigated peripartum depression in fathers during the COVID-19 pandemic, examining the relationship between pandemic-related stress, depressive symptom, and quality of dyadic interactions with their children during feeding dynamics.

In the third contribution presented by Gemignani et al., investigated the predictors of paternal psychological distress during the first year after childbirth, including both individual (eg. paternal involvement), and dyadic dimensions (e.g. quality of coparenting behaviors).

The fourth communication presented by Perzolli et al., explored dyadic emotional changes during parent-mediated intervention with autistic preschoolers through a longitudinal design. Using the Emotional Availability Scales, this work highlighted the relevance of considering dyadic features to optimize treatment outcomes. Taken together, this symposium offers a developmental perspective on paternal adjustment from pregnancy to early childhood in different contexts, underlining the complex interplay between paternal functioning and family processes.



COVID-19 and Its Influence on Peripartum Depression in Fathers: Cross-sectional Study to Analyze the Links to Father-Child Feeding Dynamics

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² Department of Psychology, International University Uninettuno, Rome, Italy

Abstract

Introduction: The COVID-19 pandemic has introduced specific challenges, including the fear of infection, economic instability, and changes in everyday routines, which have the potential to worsen or initiate depressive symptoms. While much of the existing research has predominantly concentrated on mothers, it is recognized that depression affects both parents in the postnatal period. Using the theoretical/clinical perspective of Developmental Psychopathology, this study investigated peripartum depression among fathers during the COVID-19 pandemic, specifically looking at how pandemic-related stress, depressive symptoms in fathers, and their interactions with their children during feeding are interconnected.

Methods: This study employed a cross-sectional design to gather data from 162 Italian fathers (Mage 40.15 years; SD=3.41) and their newborns (Mage of children 5.25 weeks; SD=1.12) from the general population. The data collection took place through online surveys and remote observational techniques during the pandemic's second wave, from November 15, 2020, to March 15, 2021. The Symptoms Check-List/90-R and the Peritraumatic Distress Index (CDPI) were utilized to measure the severity of the fathers' depressive symptoms and distress, respectively. The quality of father-child feeding interactions was assessed using the Feeding Scale in its Italian version (SVIA).

Results: The analysis showed a strong positive correlation between the peritraumatic distress experienced by fathers due to COVID-19 and the severity of their depressive symptoms, alongside a negative correlation with the quality of their interactions during feeding times. Based on these correlations, hierarchical multiple regression analyses were conducted to explore the predictive impact of peritraumatic distress related to COVID-19, depressive symptoms in fathers, and the quality of their feeding interactions. Notably, increased peritraumatic stress predicted higher levels of depressive symptoms among fathers. Additionally, elevated stress levels related to the pandemic were indicative of diminished quality in father-child interactions.



Discussion: This research builds upon prior studies by highlighting how peritraumatic distress, especially during such a crisis as the pandemic, can negatively affect paternal involvement in critical bonding activities like feeding. This impact is significant as feeding interactions encompass more than just the provision of nutrition; they are crucial for emotional bonding, communication, and the development of trust and security between the father and child.



A dyadic perspective on perceived stress and couple adjustment during pregnancy: The mediating role of depression and perinatal affective symptomatology

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Abstract

Introduction: International literature on perinatal mental health has extensively investigated the occurrence of depression and anxiety from pregnancy to the first postpartum year, including long-standing empirical evidence on women's psychopathology and recent growing findings on men.

Previous studies have also highlighted the clinical relevance of the mutual influence of affective states within the parental couple, however literature still shows a lack in this field.

This study aimed to explore in expectant couples, by using a dyadic approach, the relationship between perceived stress and dyadic adjustment considering the mediating role of depressive symptoms and perinatal affective symptomatology.

Methods: Using a cross-sectional design, heterosexual expectant couples were recruited from 3 Italian perinatal health services during their regular control visits. A total of 191 couples at the third trimester of pregnancy (191 mothers aged 31.88 ± 5.10 years, 191 fathers aged 35.24 ± 6.79 years) completed self-report measures of perceived stress (*Perceived Stress Scale-PSS*), depression (*Center for Epidemiologic Studies Depression Scale-CES-D*), perinatal affective symptomatology (*Perinatal Assessment of Paternal/Maternal Affectivity-PAPA/PAMA*), and dyadic adjustment (*Dyadic Adjustment Scale-DAS*). The Actor-Partner Interdependence Mediation Model was applied for statistical data analysis.

Results: Mothers' and fathers' higher perceived stress resulted associated with their own lower dyadic adjustment both directly and indirectly, through their own higher levels of depression and perinatal affective symptomatology. Both parents' perceived stress was linked to their partners' lower dyadic adjustment only indirectly, through the partners' higher depressive symptoms and perinatal distress.



Discussion: The findings highlight the relevance of considering a dyadic perspective when studying the transition to parenthood in expectant couples. The quality of psychological processes concerning adjustment to parental role and caregiving is clinically relevant and reveals that individual stress experienced during pregnancy, in both women and men, may negatively influence individual and couple wellbeing, with potential consequences for the development of sensitive interactions with the baby. Further research studies with a dyadic approach are recommended to strengthen the literature on this topic.



Perinatal period as a Critical Window for Men' Health: Investigating the Predictors of Paternal Psychological distress during the first year after childbirth

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Abstract

Introduction: Becoming a father is a transformative experience, marked by hormonal changes and neuroplasticity as well as shifts in self-concept, social roles, and daily routines. Although the arrival of a new baby is often a joyful event, the postpartum period can be a time of heightened psychosocial stress, which can put new fathers at a higher risk of affective symptoms. In particular, the Paternal Perinatal Affective Disorder (PPAD) is a recently defined clinical condition that fathers may manifest from their partner's pregnancy to the first year after childbirth, showing clinical manifestations that are different from those reported by women. In the present study, we examined potential predictors related to the PPAD in a sample of new fathers.

Methods: $N=111$ new fathers with children aged from 0 to 15 months completed self-reported measures of anxiety and depressive symptoms, perinatal affective symptoms, stress, social support, coparenting quality, involvement in childcare, perceived experiences of care during childcare, and infant behavior.

Results: As a result, the coparenting alliance negatively predicted paternal perinatal affective symptoms ($\beta = -0.2$; $t(107) = -4.9$; $p < 0.001$; $R^2 = 0.18$). In addition, more rejection perceived by fathers' own parents during childhood positively predicted perinatal affective symptoms ($\beta = 0.08$; $t(83) = 3.9$; $p < 0.001$; $R^2 = 0.15$).

Discussion: Overall, our findings added meaningful knowledge on the factors that might contribute to the onset and manifestation of the PPAD in new fathers.



EPISTEMIC TRUST ACROSS DIFFERENT SETTINGS AND POPULATIONS

Proposer

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Discussant

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Abstract

The construct of Epistemic Trust (ET) refers to the confidence or reliance individuals place in the knowledge, expertise, or credibility of others, particularly in the context of acquiring or evaluating information, beliefs, or claims. It involves believing that sources of information are reliable, accurate, and truthful, which influences how individuals interpret and accept new information. ET, that is fundamental to various aspects of human cognition, social interaction, and decision-making, as it shapes how people navigate the vast amount of information available to them and how they form beliefs and make judgments about the world, has seen growing interest from researchers and clinicians in recent years. Epistemic trust, and its closely related construct of mentalization, is considered a transdiagnostic factor implicated in the process of health genesis from childhood to adult age and related to various age groups. While theoretically the construct may not be new, there are still numerous unanswered questions from an empirical research standpoint.

The aim of the symposium is precisely to create a comprehensive representation of the construct through the presentation of research results sharing the objective of investigating Epistemic Trust in relation to different age groups (adults, young adults, and adolescents), in relation to various psychological functioning variables (emotional regulation, defense mechanisms), and psychopathological variables (aggressiveness, interpersonal issues) in clinical and non-clinical contexts.

Locati et al.'s contribution presents results regarding the relationship between ET, emotional dysregulation, and psychopathology investigated through network analysis.



Garofalo et al.'s contribution, instead, investigates the mediating role played by Epistemic Trust in the relationship between trauma and aggression.

A meditational model is also employed in the work of Fiorini Biancoletto and Liotti, which investigated the relationship between ET and defensive functioning and interpersonal issues.

Lastly, Colli and Saccuman's work investigates the role of Epistemic Trust and Reflective Functioning in relation to eating disorders and body perception in social media use.



An Investigation into the Interplay of Epistemic Trust, Defensive Mechanisms, Interpersonal Problems, and Symptomatology: a Mediation Model

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Abstract

Introduction: Recently, epistemic trust has emerged as one of a key construct in enhancing the understanding of psycho(patho)logical processes. Yet, the complex relationships it shares with other critical dimensions that potentially shape specific symptoms patterns remains underexplored. This study aims to explore how epistemic trust, mistrust, and credulity relate to relational difficulties, (mal)adaptive defense mechanisms, and psychological symptoms, thereby enhancing our insights into their effects on mental health.

Methods: A sample of 385 Italian individuals (60% females and 40% males; $M_{age} = 28.2$, $SD_{age} = 9.6$, range 18-65 years) completed an online survey including a battery of self-report questionnaires: Epistemic Trust, Mistrust, and Credulity Questionnaire; Defense Mechanisms Rating Scale-Self-Report-30, Inventory of Interpersonal Problems-32, and Brief Symptom Inventory.

Results: The findings revealed that epistemic trust is positively associated with highly adaptive defenses and negatively with some relational problems, as well as paranoid ideation. Conversely, epistemic mistrust and credulity were associated with significant interpersonal difficulties, more primitive defense mechanisms, and greater levels of psychopathology. Moreover, these epistemic distortions, as well as worse overall defensive functioning, partially mediated the relationship between interpersonal difficulties and symptomatology, highlighting their harmful impact on individual psychopathological functioning.

Discussion: To our knowledge, this is the first study investigating the interaction between epistemic trust dimensions, defense mechanisms, interpersonal problems, and symptomatology. Our results emphasize the critical role of epistemic disruptions as potential risk factors for mental distress, providing essential insights into a deep understanding of underlying mental processes and useful implications for clinical practice.



The interplay of mentalization and epistemic trust about dysregulation and personality structure in clinical adolescents.

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Abstract

Introduction: Mentalization (RF), allows individuals to interpret actions caused by intentional mental states. RF facilitates the creation of epistemic trust (ET) to evaluate social information as accurate, reliable, and relevant. RF and ET have been identified as transdiagnostic factors promoting adolescent psychophysical well-being. At the same time, a maladaptive RF and ET may play a role in contributing to psychopathological risk. While, recent studies are focused on non-clinical contexts, more findings are needed about the interactive dynamics between RF, ET, dysregulation, and developmental psychopathology in a clinical setting.

Methods: Participants are 70 Italian clinical adolescents (Mage = 15.54, SD = 1.98) enrolled at the Child Neurology and Psychiatry Unit of IRCCS Mondino Foundation in Pavia. The clinical sample was assessed in RF (RFQY-5), ET trust, mistrust and credulity (ETMCQ-A), dysregulation (DERS) and the personality structure (APS-Q).

Results: A first network analysis between RF, ET and dysregulation reveal that ET improves emotion regulation strategy, and both ET and mentalization improve impulse control difficulties and emotional awareness. Conversely, epistemic mistrust is positively associated with difficulty engaging in goal-directed behaviour, access to emotion regulation strategies, impulse control difficulties, and lack of emotional clarity. In contrast, credulity is associated with nonacceptance of emotional responses and impulse control difficulties. A second network analysis between RF, ET, and personality structures reveals epistemic mistrust positively associated with a deficit in the sense of self, in self-acceptance, and problems in family relationships. At the same time, credulity is positively associated with problems in sense of self and in investments in goals.

Discussion: The present findings suggest that RF and ET may be transdiagnostic factors playing different roles associated with adolescent development of emerging personality structures. RF and ET are involved



in countering dysregulation processes but do not play a protective role in clinical contexts in problematic personality patterns. Epistemic petrification maintains problems in emotional dysregulation and specifically promote deficits in the development of a sense of self and personality structure. While ET and RF play a role in regulatory processes, distrust and credulity also delve into deeper identity structural issues.



Childhood Trauma and Aggression: The Mediating Role of Epistemic Trust

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Abstract

Introduction: Aggression is an urgent public health issue that has long been of interest for psychological research and practice. The so-called “cycle of violence” posits that individuals who are victimized early in the development are at higher risk of becoming perpetrators of aggressive behavior. While the association between childhood traumatic experiences and aggression is well established, investigation of potential mechanisms explaining this association has been scant. The purpose of the present study was to fill this gap by examining the mediating role of epistemic trust dimensions (trust, mistrust, and credulity) as possible mediating factors of the trauma-aggression link.

Methods: The present study is based on a cross-sectional design conducted in an adult community sample (data collection is in progress; current $N = 225$, 59.8% women, $M_{age} = 29.17$, $SD_{age} = 9.53$). Self-report measures of childhood traumatic experiences (Childhood Trauma Questionnaire, CTQ), epistemic trust (Epistemic Trust Mistrust Credulity Questionnaire, ETMCQ), and aggression (Angry Aggression Scale, AAS) were administered. Product-moment correlations were conducted to examine bivariate associations among the study variables. A bootstrapping approach was employed to examine total, direct, and indirect effects of the CTQ on the AAS including the ETMCQ scale as mediators.

Results: Preliminary results showed that CTQ scores were positively related to epistemic mistrust, credulity, and aggression scores, and negatively related to epistemic trust. Epistemic mistrust, but not trust or credulity, was related to aggression scores and mediated the childhood trauma-aggression link.

Discussion: The present findings advance current knowledge on the link between childhood traumatic experiences and adult aggression by showing that one particular dimension of epistemic trust – that is, the tendency to mistrust others – plays a selective role in explaining this link. These results suggest that traumatized individuals can develop an attitude of open mistrust towards others, which in turn can explain their increased aggressive tendencies. Working on reducing mistrust could represent a promising target to reduce aggression in individuals who suffered from childhood traumatic experiences.

The role of epistemic trust and reflective function in body perception during social media use

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Abstract

Eating disorders represent one of the most significant clinical issues in adolescents and young adults. A central factor in these issues is a disturbance in body image and self-perception (Lewer, 2017). Over the past few years, several contributions have highlighted the influence of social media use on the relationship with body image disorders and pathological behaviors related to lifestyle and eating habits. This is particularly evident in the age group ranging from adolescence to young adulthood, with particular attention to females. This age group, in particular, represents a population worthy of clinical attention as it is a period during which various psychopathological conditions emerging in adolescence tend to crystallize.

Given these premises, it is likely that mentalization, the ability to interpret one's and others' behavior in terms of intentional mental states, and epistemic trust, the ability to determine the personal value of socially transmitted information, may play a central role in the relationship between social media use and body perception.

The aim of this study is to investigate the relationship and the role played between body image, eating issues, and social media use on one hand, and epistemic trust, attachment, and reflective function on the other hand, in a population of young adult females. The second objective was to study the factorial structure of a new tool constructed to assess the effects of social media exposure on body perception, the Body Perception in Social Media Scale (BPSMS).

Method: The sample (N = 271), with a mean age, was recruited through an online survey. Inclusion criteria were a) female sex, b) having at least one Instagram or TikTok account, c) age between 18 and 30 years.

Instruments: A battery of instruments was administered regarding social media use (Multidimensional Instagram Intensity Scale and Multidimensional TikTok Intensity Scale), body perception, and eating behaviors (Body Appreciation Scale, Eating Attitude Test), epistemic trust, mentalization, and attachment (Epistemic Trust, Mistrust and Credulity Questionnaire, Relationship Questionnaire, RFQ).



Results: The results suggest the presence of a mediational role played by epistemic trust and mentalization in relation to the effects that social media use has on body perception and eating attitudes.



**RECENT EVIDENCE IN THE PSYCHOSOMATIC FIELD: CURRENT TRENDS AND
FUTURE DIRECTIONS**

Proposer

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Discussant

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Abstract

The contribution of clinical psychology in the health field constantly gains attention. The state of the art indicates a growing interest in psychological factors affecting the biological functioning of patients, as well as biological conditions producing psychological effects. In this sense, clinical psychology is of fundamental importance in the field of multidimensional clinical care for the patient. In particular, the psychosomatic practice assumes a central role in the theoretical, preventive, diagnostic and therapeutic fields. The literature shows increasingly relevant evidence, so that it is possible to follow the historical evolution of the discipline and appreciate its recent developments. In this sense, the present symposium is aimed at highlighting both contemporary trends and future directions referred to clinical research processes. In particular, it is possible to appreciate contributions that take into account the psychosomatic clinical activity in different contexts. According to the first contribution (Cavallo M. & Cecchetti S.), recent evidence about the main neural and neuropsychological correlates of common psychosomatic disorders will be presented, to underline the relevance of the neurobiological domain to support both the assessment and the treatment stages of current psychological practice. The second contribution takes into account the somatization process in the field of chronic conditions and in particular with Type 1 Diabetes Mellitus (Tutino R.). The third contribution (Sicari F.) reflects on the theme of quality of life and the expression of maladjustment for patients suffering from dermatological disorders. The last



contribution (Merlo E. M.) explores alexithymia and physical concerns in the field of gastrointestinal disorders. All contributions are referred to relevant themes and disorders of psychosomatic order. In this sense, the present symposium represents a dialogue among different clinical realities needing attention and in-depth analysis.



State-of-the art of the neurobiological underpinnings of common psychosomatic disorders

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Abstract

Psychosomatic disorders are clinical conditions with no demonstrable organic pathology. Symptoms frequently seen in children and adolescents typically include abdominal pain, headaches, fatigue, back pain, worry about health and difficulty in breathing, whereas during adulthood other symptoms (e.g., sleep troubles, irritability, fatigue, headache, myalgia, gastrointestinal symptoms) are more commonly reported. Neurobiological investigations of patients affected by common psychosomatic disorders have provided evidence of significant changes at neural (e.g., in cerebral blood flow, neuronal volume and density and brain electric signal) and neuropsychological levels. The aim of the present contribution will be to review the recent evidence of the neurobiological underpinnings in patients affected by psychosomatic disorders, with the twofold aim to highlight their possible neurobiological bases and link neurocognitive evidence to patients' clinical phenomenology. These multifaceted findings may help both researchers and clinicians to refine assessment procedures and develop more efficient therapeutic interventions to target psychosomatic disorders appropriately.



Quality of life in the field of psychosomatics: the case of dermatological disorders

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Abstract

Background: Psychosomatic practice is often addressed to specific pathological domains of reference, as happens in the case of dermatological disorders. Such clinical realities are particularly affected by psychologic functioning. In the literature there are many studies that considered the psychological functioning of dermatological patients and further studies are necessary to better understand the fundamental phenomena. Quality of life is a variable of particular interest for the subjects suffering from dermatological conditions. Defined as the standard of health and comfort experienced by the subject, it is evident that these disorders affect this relevant aspect.

Methods: 81 subjects aged between 18 and 78 years old (M:27; SD: 27.20) with female prevalence (67.9%) were enrolled in the study. The protocol covered sociodemographic variables such as age, gender, years of pathology duration, education and diagnosis, together with the SF-36 (composed by physical role Limitations, bodily pain, general health perceptions, energy/vitality, social functioning, emotional role Limitations and mental health) to assess the quality of life of subjects and their level of decreased adaptation because of the condition.

Results: The results from the descriptive analyses showed a decreased quality of life, so high scores compared to physical and psychological limitations specified for consistent levels of maladjustment. The correlational analyses clarified the importance to consider the age, the sex, the duration of the dermatological condition and the level of education of the subjects regarding the quality of life. There were no statistically significant differences between groups in terms of quality of life. Age, sex and education were significant predictors of the quality of life, in particular education appeared to be beneficial.

Conclusions: The psychosomatic practice in this sense, aims to understand the phenomena decreasing quality of life, in order to produce opportunities for the subjects' adaptation. The data emerged would represent a starting point for the realization of targeted interventions for the psychological assistance of subjects affected by dermatological conditions.



Psychosomatic phenomena in subjects suffering from Type 1 Diabetes Mellitus: the role of somatization and uncertainty

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Abstract

Background: Type 1 Diabetes Mellitus is a complex condition, characterized by many factors that contribute to its course and any pathological consequences. As evidenced by the current state of the art, the psychological functioning of subjects affected by this condition is strongly influenced by the consciousness of pathology, as well as by adverse phenomena that undermine compliance, adherence and adaptation. Given the age of onset, some of the important variables are linked to the level of development reached by the subjects and their psychological functioning. In this regard, intolerance to uncertainty, anxiety, depression and somatization phenomena are relevant and must be taken into account.

Methods: The observation group consisted of 105 subjects aged between 11 and 17 years old (M: 13.88; SD: 2.16), with prevalence of female subjects (66.66%), suffering from Type 1 Diabetes Mellitus and treated at the "Riuniti" Hospital in Reggio Calabria. The instruments used were SAFA scales (Depression, Anxiety, Somatization) and IUS-12 (Prospective Anxiety and Inhibitory Anxiety). Subjects all responded to protocol by adhering to parental consent.

Results: The data emerged regarded the consistent presence of depression, anxiety, somatization and uncertainty. In this regard, there is a significant presence of psychopathology and somatization processes. Correlational analyses allowed for the emergence of meaningful relationships, particularly between age, duration of pathology, education, and clinical variables such as anxiety, depression, and somatization. The relationships between intolerance to uncertainty and psychopathological variables foresaw the presence of significant relationships useful to clarify the pejorative course of psychopathology due to uncertainty. Age, education and duration of the disease were important predictors of psychopathological variables.



Conclusions: The emerged data provided for the emergence of useful evidence to understand the extent of psychopathological and somatization processes in subjects suffering from Type 1 Diabetes Mellitus. In particular, these results would represent the basis for structuring interventions useful to contain the presentation of psychopathological symptoms and in a global sense to assist reference patients.



Psychosomatic practice in the field of gastrointestinal disorders: the key role of alexithymia

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Abstract

Background: Gastrointestinal disorders represent a field of particular interest in psychosomatic practice. In particular, along with dermatological and cardiovascular disorders the literature presents evidence with reference to psychological factors that contribute to onset and maintenance of physical phenomena. In terms of gastrointestinal disorders, it is clear to date how factors such as alexithymia and some predictors such as age and gender can contribute to pathological conditions. The aim of this contribution was to focus on the relationships between psychological and gastrointestinal phenomena within healthcare contexts.

Methods: The sample consists of 103 subjects, aged between 18 and 73 years old (M: 28:56; SD: 13.04) with female prevalence (86.4%), diagnosed for gastrointestinal disorders. The administration of instruments involved the use of Toronto Alexithymia Scale (TAS-20) in order to identify alexithymia and Gastrointestinal Symptom-Rating Scales (GSRC) in order to identify gastrointestinal disorders and their manifestations.

Results: Through the statistical analysis it is possible to highlight how the average scores related to alexithymia exceeded the minimum threshold (>51) resulting borderline and indicating a consistent presence of alexithymia. Correlational analyses highlighted the presence of statistically significant relationships between age, duration of the disease and education, showing that the level of education corresponds to lower levels of alexithymia. The correlation relationships emerged between alexithymia and gastrointestinal manifestations are significant and particularly relevant with reference to the study aim. There were no statistically significant differences between the male and female sex groups, which must take into account the disparity of the sample in terms of the significant prevalence of female subjects. Age, education and duration of the disease are valid predictors of the appearance of alexithymia and gastrointestinal disorders.

Conclusions: The study highlighted a consistent presence of alexithymia and gastrointestinal disorders in the subjects considered. In particular, the results demonstrate the protective role of variables such as



education and years of illness, highlighting how they play a crucial role. The emerged regarding data on alexithymia show that this phenomenon, widespread throughout the population, represents a dynamic of particular interest in the field of psychosomatics.



THE DIMENSIONS OF SPACE, TIME, AND TRAUMA.

Proposer

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Discussant

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Abstract

This symposium explores the intricate connections between space, time, and trauma, shedding light on how individuals and communities cope with extreme conditions such as war, pandemics, space exploration, and mental health challenges. In Afghanistan, healthcare workers have faced significant strain from both the 'War on Terror' and the COVID-19 pandemic, with studies emphasizing the importance of resilience, compassion, and social support in mitigating PTSD and depression. Transitioning to Ukraine, ongoing conflict poses heavy emotional burdens, particularly on psychotherapists, who find support through initiatives like EMDR. Meanwhile, astronauts grapple with unique stressors in space, requiring innovative interventions like mindfulness to maintain mental health. Additionally, research on time perception and depression highlights how emotional experiences can affect cognitive processes. Together, these studies underscore the complex interplay of space, time, and trauma, revealing both struggles and adaptive strategies across diverse environments.



The mediating role of compassion, resilience, and perceived social support on post-traumatic and depressive symptoms within Healthcare Workers operating in Afghanistan.

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Abstract

The aftermath of the 'War on Terror' in Afghanistan has deeply impacted the population, notably healthcare workers (HCWs), who face significant challenges including chronic resource shortages and the recent COVID-19 pandemic. Previous research has consistently shown HCWs to be vulnerable to psychological distress, including PTSD and depression. Studies on military personnel and HCWs have highlighted the potential of resilience and social support in mitigating the severity of traumatic stress and depressive symptoms (Pietrzak et al., 2009). Moreover, recent findings suggest that higher levels of self-compassion are associated with reduced PTSD symptomatology, underscoring the protective role of kindness towards oneself and others (Winders et al., 2020). This study aims to investigate the potential moderating effects of compassion, resilience, and perceived social support on post-traumatic stress disorder (PTSD) and depression symptoms among HCWs in Afghanistan. Participants will undergo a cross-sectional study involving online surveys to assess PTSD, depression, anxiety, compassion, resilience, and perceived social support. Psychological measures, including the PTSD Checklist for DSM-5, Generalized Anxiety Disorder-7, Patient Health Questionnaire-9, Brief Resilience Scale, Compassionate Action and Engagement Scales, and Multidimensional Scale of Perceived Social Support, will be administered. Expected outcomes include determining if compassion, resilience, and perceived social support moderate PTSD and depression symptoms. The study hypothesizes that higher levels of compassion, resilience, and perceived social support will be associated with lower PTSD and depression symptoms among HCWs in Afghanistan.



Experiences from Ukraine: Combining Online Interventions and On-Site Intensive Training to Treat Severe PTSD and Depression.

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Abstract

During the ongoing Ukraine-Russia conflict, the country has undergone significant transformations that have deeply affected its citizens, including psychotherapists. These professionals have found themselves addressing not only the traumas experienced by the general population and military personnel but also those affecting their own families and themselves. As the war has persisted, the burden of losses has continued to escalate, adding to the already substantial emotional and psychological strain on the community. From the outset of the conflict, the EMDR (Eye Movement Desensitization and Reprocessing) European and Italian Associations have stepped forward to support Ukrainian psychotherapists. Their efforts have been multifaceted, including the provision of online therapy groups, regular consultation sessions, and intensive on-site training. These initiatives have been particularly focused in Lviv, where psychotherapists have been trained to treat severe cases of PTSD (Post-Traumatic Stress Disorder) and post-traumatic depression. The upcoming presentation will showcase these efforts, highlighting the experiences and outcomes of the treatment programs. It will detail how these interventions have been implemented to address the acute mental health needs triggered by the war. The key themes of humanity, solidarity, and bravery resonate throughout these actions, painting a picture of a resilient people determined to overcome the immense challenges they face. This narrative not only reflects the dire situation in Ukraine but also the unyielding spirit of its people and the global community of psychotherapists rallying to provide aid and support during these turbulent times.



Exploring the Interplay of Emotions and Time Perception in Depression: Insights from Neural Dynamics

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Abstract

Various cognitive and emotional factors shape our perception of time. Notably, individuals experiencing depressive symptoms often report changes in their time perception, characterized by a phenomenon termed time dilation—a subjective slowing of temporal flow. However, research on this topic yields conflicting and inconclusive findings, leaving the mechanisms behind altered time perception in depression largely unknown. This study aims to explore the neural dynamics underlying the influence of emotional experiences on time perception in relation to depressive symptomatology.

120 university students participated in a retrospective time estimation task while watching either sad or neutral emotion-eliciting videos. Moreover, participants' electroencephalographic (EEG) activity was recorded for the whole duration of the experiment by means of a high-density EEG cap. The severity of depressive symptoms was assessed using the Patient Health Questionnaire (PHQ-9).

Our findings revealed notable differences between individuals with depressive symptoms and healthy controls. Specifically, the emotional modulation influenced time estimations exclusively in healthy controls. Moreover, individuals with depression exhibited beta band modulations related to depressive symptom severity and retrospective time estimations. These results suggest that cognitive processes related to depression may disrupt the connection between emotions and time perception. Overall, our study contributes to a deeper understanding of the interplay between emotional experience, cognitive processes, and time perception in individuals with depressive symptoms.



Stress management in human space exploration

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Abstract

As space missions extend from low-Earth orbit operations to long-duration explorations, crew members will encounter a distinct array of experiences and stressors. Astronauts face numerous challenges that could affect their distress levels, including isolation and confinement within small workspaces, separation from family and friends, communication delays, adaptation to microgravity, radiation exposure, boredom, and other factors. Such stressful environments can adversely impact mood and performance. Therefore, it is crucial to develop preventative countermeasures to enhance cognitive and behavioral health, manage stress, and prevent performance degradation. Mind/body practices, such as relaxation training and meditation, have been demonstrated as effective in promoting high performance and reducing sleep issues and stress, as recently indicated by a NASA review study.

This presentation will discuss two studies: MINDFUL-ICE II, supported by the European Space Agency (ESA) and the Italian Space Agency (ASI), which implements a specific mindfulness-based intervention for isolated and confined environments at the Concordia base in Antarctica; and RELAX-PRO, supported by ESA, ASI, and NASA, which aims to test an astronaut relaxation training protocol specifically adapted for space. The relaxation exercises are practiced both on Earth and in space aboard the International Space Station.



NOVEL TAILORED INTERVENTIONS TO TREAT AND PREVENT THE ONSET AND MAINTENANCE OF EATING DISORDERS: CLINICAL CHALLENGES ACROSS DIFFERENT SETTINGS

Proposer

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Discussant

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Abstract

Eating disorders (EDs) are psychiatric illnesses characterized by abnormal eating patterns and often comorbid medical conditions and psychosocial difficulties. Recovery from an eating disorder is less likely if the disorder is untreated, or if it is inadequately treated. Over the past two decades, significant progress has been made in developing effective treatments for these conditions. However, there has been a recent call to make psychological treatments more available, affordable and scalable. Moreover, patients themselves advocate for the need of more personalised and innovative approaches to treatment that create long-lasting changes in their lives. The first presentation (Gardini et al.) will focus on the implementation of a novel virtual reality transdiagnostic software and intervention applicable to EDs prevention with the aim to reduce dysfunctional eating behaviors and improving ED-related transdiagnostic factors such as emotion regulation, psychological flexibility and experiential avoidance. The second presentation (Albano et al.) will present usability data on a newly developed app and website for a diagnostic or subthreshold-level EDs; this is a eight weeks tailored guided self-help intervention based on patient's level of interpersonal distress. The third presentation (Aloi et al) will explore the mediating role of early maladaptive schemas between childhood maltreatment and interpersonal problems, identifying the presence of specific cognitive schemas to be addressed in psychotherapy to



personalize interventions. Finally, the fourth presentation (Muzi et al) will present a network analysis exploring the relationships between EDs, the role of dysfunctional levels of anger, and personality disorders. Overall, this series of presentations will be discussed in the light of the transdiagnostic maintenance factors of EDs and the new outcomes to be assessed and implemented in clinical interventions for more evidence-based treatments that are useful and beneficial to individuals.



Development of a tailored guided self-help mobile app to improve psychological wellbeing and interpersonal difficulties for people suffering from eating disorders: a usability study

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Abstract

Eating disorders (EDs) are psychiatric illnesses characterised by pathological eating behaviours, ranging from protracted undereating to recurrent loss of control overeating. Despite their disabling nature, many individuals with EDs do not receive appropriate mental health care. The use of eHealth technology has been proposed as a potentially effective alternative to traditional, in-person treatment delivery for those with EDs. The online Guided Self-help (GSH) is a tested approach to augment or replace standard care, which is considered a first-line intervention for these conditions. The overall aim of this project is to exploit the use of highly scalable and inclusive digital technologies, i.e. mobile app and GSH, to improve the transdiagnostic understanding of EDs and their psychological treatment. This project aims to establish at what stage and for which disorder the evidence-based interventions used are most valued and beneficial to individuals. Therefore, online GSH will be tested in two different settings and clinical context: the community setting for those reporting abnormal eating dysfunction; and the outpatient setting for those reporting a diagnosis of EDs.

We conducted a qualitative usability evaluation of a newly-developed app and website (INTERconNEcT-EDs,) for EDs in 20 individuals with a diagnostic or subthreshold-level eating disorder. The contents delivered through our mobile app consists of workbook, video-clips, interactive materials (chat based forum groups) and interpersonal group sessions, based on the integration of psychoeducation, cognitive behavioural techniques and interpersonal therapy. The application and website have been developed by a multidisciplinary team of clinicians, researchers, staff members and individuals with lived ED experience. This 8 weeks intervention will be a tailored online GSH to patient's level of interpersonal distress, given



prior evidence that interpersonal difficulties are associated with the development and maintenance of EDs and can predict poorer treatment outcome.

Participants will complete a semi-structured interview and self-report measures. A thematic analysis will be performed. Qualitative and quantitative results will indicate the app usability, validity, reliability, satisfaction and perceived feasibility for clinical implementation.

Findings will inform the optimal design of app-based interventions for ED maintenance symptoms.

The present study is funded by the European Union – Next Generation EU through PRIN PNRR 2022



Early maladaptive schemas mediate the interplay between emotional abuse and interpersonal problems across eating disorders

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Abstract

Introduction: Childhood maltreatment (CM) and early maladaptive schemas (EMSs) play a pivotal role in the development of eating disorders (EDs), but their interplay on interpersonal problems remains unclear. We explored the mediation performed by EMSs between CM and interpersonal problems in EDs.

Methods: We approached 321 patients suffering from EDs (26 AN-BP, 77 AN-R, 94 BN, 124 BED) and cross-sectional evaluated them using the Eating disorder examination questionnaire (EDE-Q), Childhood trauma questionnaire short-form (CTQ-SF), Inventory of interpersonal problems (IIP-32) and Young Schema Questionnaire Short Form (YSQ-S3). We tested a path diagram where EMSs mediated the relationship between CM and interpersonal problems.

Results: Interestingly, no correlations were found between EMSs and sexual abuse, but medium/high correlations were found between EMSs and emotional abuse. The mediation analysis showed a specific mediator role for the “Disconnection and Rejection (DR)” ($\beta=.03$; $p=.002$; CI 95% [.01, .06]) and Impaired Autonomy (IA) ($\beta=.01$; $p=.033$; CI 95% [.002, .04]) EMS factors in the relationship between emotional abuse and interpersonal problems.

Conclusion: Emotional abuse seems to play a key role in predisposing patients with EDs to develop interpersonal problems when mediated by the presence of specific cognitive schemas such as DR and IA. Our findings suggest that EMS should be systematically assessed during the psychotherapy of ED patients with a history of trauma in order to develop tailor-made treatments.



A qualitative study investigating the use of a new transdiagnostic virtual reality software for the prevention of eating disorders

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Abstract

Introduction: Eating disorders (EDs) are clinically severe psychopathologies which warrant effective preventive interventions using innovative approaches, such as virtual reality (VR). H.O.M.E. (How to Observe and Modify Emotions) is a novel VR transdiagnostic software and intervention applicable to ED prevention by reducing dysfunctional eating behaviors and improving ED-related transdiagnostic factors of emotion regulation, psychological flexibility and experiential avoidance. Taking into account patient's subjective experience is essential when developing preventive interventions. Thus, this study aimed to evaluate the H.O.M.E. software quality and the opinions of general population (GP) participants with ED risk undergoing the H.O.M.E. preventive intervention.

Methods: GP participants with ED risk were recruited online via self-report psychometric screening tools: the SCOFF Questionnaire and Eating Disorder Examination Questionnaire (EDEQ). N=30 (100% females, mean age: 26.47 ± 8.34) tested the software quality by completing the Igroup Presence Questionnaire, Simulator Sickness Questionnaire, System Usability Scale, and User Experience Questionnaire. N=20 (100% females, mean age: 24.35 ± 6.02) completed a semi-structured interview after completing the H.O.M.E. preventive VR intervention to collect their subjective experience. Descriptive statistical analyses were run on psychometric tools and a qualitative thematic analysis on post-intervention interviews.

Results: Questionnaire scores showed that H.O.M.E. had an acceptable sense of presence, contained motion sickness symptoms, good ease of use, and satisfactory user experience. Participants undergoing the H.O.M.E. intervention reported positive opinions and reported that H.O.M.E. improved their dysfunctional eating behaviors, psychological coping strategies and ED-related transdiagnostic factors. H.O.M.E. also encouraged participants to seek additional psychological support.

Discussion: H.O.M.E. can represent an acceptable and useful VR tool that could be used in clinical psychology to prevent EDs, especially by acting on the transdiagnostic factors linked to their onset and maintenance. The similarities between VR and everyday life technologies can act as a bridge between



people at risk for EDs and traditional psychotherapy, encouraging people to get psychological support before the onset of a full diagnosis.



**The interplay between personality disorders' features, anger expression and disordered eating:
A network analysis study**

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Abstract

Introduction: Eating disorders (EDs) are systematically ranked amongst the most complex of all psychiatric illnesses to treat. Personality disorders (PDs) are common co-occurring conditions, and a growing literature points toward the central role of dysfunctional levels of anger in this clinical population. However, to date, no studies have conjointly explored these variables through a Network Analysis (NA). Then, this approach was applied to evaluate the relationships between personality disorders' (PD) features (at Cluster A, B, and C level), the experience and the expression of anger, and both restrictive and bulimic ED-symptoms.

Methods: A national sample of patients with a DSM-5-TR diagnosis of EDs (N = 232), who were admitted to a specialized residential treatment, were evaluated at intake with the Shedler-Westen Assessment Procedure (SWAP-200). In the same time point, patients were also asked to complete the State-Trait Anger Expression Inventory (STAXI), the Eating Attitude Test (EAT-40), and the Bulimic Investigatory Test, Edinburgh (BITE).

Results: Findings showed that the STAXI Anger Expression Inwards and Anger Expression Control had high centrality, along with EAT Dieting Behavior. Anger Expression Inwards was connected to both Oral Control and Food Preoccupation. With respect to PDs, the SWAP-200 Cluster B emerged as a bridge symptom between BITE overall bulimic symptoms and STAXI Anger Reaction, and this variable also showed an high betweenness value.



Discussion: These NA results highlight a complex interplay between anger and several dimensions of ED-pathology, while also suggesting the potential bridging role of Cluster B personality traits when considering bulimic symptoms. Research on individual differences in the field of EDs may help identify new relevant targets for tailored therapeutic interventions in this difficult-to-treat population.



**EXHAUSTED, OVERWHELMED, AND DISCONNECTED PARENTS: CORRELATES
AND CONSEQUENCES OF PARENTAL BURNOUT IN ITALIAN MOTHERS AND
FATHERS AT DIFFERENT STAGES OF PARENTHOOD**

Proposer

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Discussant

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Abstract

Parental burnout is a unique syndrome consisting of four main dimensions: emotional exhaustion, contrast with the previous parental self, loss of pleasure in the parental role, and emotional distancing from one's children. Crucially, parental burnout differs from ordinary parental stress, arising from a chronic imbalance of risks over resources in the parenting domain.

While global research increasingly focuses on understanding what makes parents vulnerable to parental burnout, very few studies have examined it in Italy, where estimates of parental burnout rose from 0.6% in 2018–2019 to 1.9% in 2020 during the COVID-19 pandemic. To address this gap, the present symposium assembled four papers exploring parental burnout correlates and consequences in Italian mothers and fathers at different stages of parenthood.

The first paper by Sacchi et al. longitudinally investigated maternal mental health during pregnancy amidst COVID-19, assessing its impact on parental burnout 12 months postpartum and the role of parental reflective functioning. The second paper by Andrei et al. presented preliminary results of a multiregional



project examining differences in burnout between mothers and fathers, developmental trajectories of parental burnout, and the influence of children's developmental stages.

The third paper by Tracchegiani used structural equation modeling to explore the impact of various childhood maltreatment experiences on parental burnout and whether epistemic trust, mistrust, and credulity served as significant transmission mechanisms differently for cisgender heterosexual mothers and fathers. The fourth paper by Carone examined the consequences of parental burnout for parenthood regret in the context of childhood maltreatment experiences reported by cisgender heterosexual mothers and fathers, also exploring whether the ability to mentalize past traumatic experiences influenced this association.

Collectively, these findings identify key intervention targets for preventing and addressing parental burnout and its correlates among Italian parents, particularly amidst experiences of childhood maltreatment and extraordinary stressors such as the COVID-19 pandemic.



Transitioning to parenthood during the pandemic: the role of prenatal maternal mental health on the risk for parental burnout outcomes

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Abstract

When parents undergo significant conflicts between parenting resources and demands, they may develop parenting stress that can escalate into parental burnout (PB), increasing the risk of inappropriate behaviors for some parents. Perinatal period is a challenging time of constant caring demands for new parents, who require considerable resources to cope with it. This balance was particularly jeopardized for those parents who faced the transition to parenthood during the COVID-19 pandemic. We aim to longitudinally investigate the impact of maternal mental health (MMH) in women experiencing pregnancy under pandemic COVID-19 on levels of PB 12 months postpartum. We also explore the potential role in mitigating this relationship played by mothers' individual coping resources in the caregiving domain, such as parental reflective functioning.

We designed a longitudinal observational study. Pregnant women were recruited through social media posting during the pandemic Italian lockdown from April 8 to May 4, 2020, and contacted again at 6 and 12 months postpartum. Inclusion criteria were residence in Italy, age over 18 years, and fluency in Italian. We collected data on MMH (e.g., anxiety, depression, post-traumatic symptoms), and post-natal parenting (e.g., parental reflective functioning, PB).

A total of 396 mother-child dyads were eligible for inclusion in the study. Linear regression analysis showed a significant positive association between MMH (e.g., anxiety symptoms) in pregnancy and levels of PB 12 months postpartum ($p < .001$), accounting for pregnancy-related and sociodemographic (e.g., age, education level, socioeconomic status, newborn's biological sex) confounding effects. Moderation analysis also revealed that better levels of parental mentalizing significantly weakened the predictive relationship between prenatal MMH and PB ($p = .039$).

The study highlights the threatening role of prenatal MMH in the context of the COVID-19 pandemic on PB over the transition to parenthood. Given the additional burden provided by the pandemic, it is possible that demands arising from parenting outweigh perceived social-emotional resources, exposing mothers with increased vulnerability to MMH in pregnancy to a higher risk of clinically relevant



outcomes in parenting. In this framework, the study also suggests that a caregiving-related metacognitive resource proves functional in helping anxious mothers cope with overburdened parental demands.



Exploring the role of epistemic stances in parental burnout among mothers and fathers with a history of childhood maltreatment

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Abstract

Introduction: Parents with a history of maltreatment may be susceptible to parental burnout. Similarly, maltreatment can disrupt epistemic stances, leading parents to perceive information as untrustworthy or malicious (mistrust), or to struggle with the discrimination of reliable information (credulity). Mistrust and credulity, in turn, can pose obstacles to seeking assistance from others, increasing exhaustion in the parental role and, ultimately, the risk of parental burnout. Yet, the impact of childhood maltreatment on parental burnout, as well as potential mediating mechanisms, remain unexplored.

Methods: The present cross-sectional, questionnaire-based study involved a non-clinical community sample of 660 cisgender heterosexual parents ($M = 42.31$; $SD = 7.72$; 76.7% mothers) with at least one child aged 0–18 years ($M = 10.08$, $SD = 5.47$) to investigate the effect of different childhood maltreatment experiences on parental burnout through epistemic trust, mistrust, and credulity. Also, it explored invariance in these associations between mothers and fathers.

Results: Structural equation modelling revealed higher levels of parental burnout in parents reporting greater emotional abuse and physical neglect, and lower emotional neglect. No significant direct associations were found for physical and sexual abuse. Also, parents who experienced greater emotional abuse were more likely to develop higher levels of epistemic mistrust, which, in turn, contributed to higher levels of parental burnout. When differences between mothers and fathers were examined, mothers who experienced greater emotional abuse in their childhood were more likely to develop higher epistemic mistrust and epistemic credulity, which, in turn, predisposed them to higher parental burnout. Also, emotional abuse and neglect had a direct effect on parental burnout. Conversely, among fathers, both emotional abuse and physical neglect had a direct effect, but no significant indirect effects were found.

Discussion: To the extent that psychological maltreatment and physical neglect pose different risks for mothers' and fathers' burnout, interventions aimed at preventing and treating parental burnout should be tailored on parents' childhood maltreatment experiences and epistemic stances.



Parenthood regret following childhood maltreatment: Mediation by parental burnout when parents fail to mentalize trauma

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Abstract

Introduction: Successful adaptation to parenthood demands various resources. Given that evidence suggests most adults undergo at least one traumatic event in childhood, the everyday challenges associated with parenting can be exceptionally burdensome for individuals exposed to trauma, particularly those involved in early parent-child relationships. These parents may already grapple with significant difficulties in emotion regulation, leading to exhaustion and, ultimately, regret their decision to become parents. However, in such circumstances, mentalization may serve as a protective factor, allowing parents to make sense of their childhood adverse relationships and to regulate their emotions. While previous research has explored the impact of specific types of maltreatment (e.g., physical abuse, sexual abuse, neglect) on future parenting practices, little is known about the consequences of childhood maltreatment on parental burnout and regret. The present cross-sectional study investigated the mediating role of parental burnout in the relationship between diverse childhood maltreatment experiences and parenthood regret. Additionally, it explored whether the ability to mentalize past traumatic experiences influenced this association.

Methods: 865 parents ($M = 41.80$; $SD = 8.26$; 77.46% mothers), all identifying as cisgender and heterosexual, and with at least a child aged 0–18 years ($M = 9.82$, $SD = 5.52$; 51.10% assigned females at birth) living in the house with them, were recruited through snowballing techniques and administered self-report questionnaires through the Qualtrics platform.

Results: Moderated mediation analyses with a Structural Equation Model approach indicated that physical and sexual abuse, as well as physical and emotional neglect, had a direct effect on parenthood regret. Also, at higher levels of failure in mentalizing trauma, parents who experienced greater emotional abuse and neglect, and physical neglect reported higher levels of parental burnout. This, in turn, contributed to increased parenthood regret.

Discussion: The results highlight parental burnout as a crucial intervention target to address in preventing parenthood regret, especially in the context of childhood maltreatment and failure in mentalization.



Parental Burnout in Italian parents: preliminary results of a multiregional project

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Abstract

The literature on Parental Burnout (PB) is in its infancy, but research is moving fast towards its better understanding for instance in terms of risk factors, cross-cultural variations, and consequences on children. Nevertheless, several relevant issues, such as the lack of rigorous scientific designs, the absence of an epidemiological overview of the phenomenon, and a paucity of Italian studies, call for joint systematic efforts to improve our knowledge on this potentially useful construct. The study presents the preliminary results of a multiregional project aimed to enhance our understanding of PB by investigating its construct validity, clinical utility, and epidemiology, and to address main questions as: Do fathers and mothers differ vis-à-vis PB? What is its trajectory over time? Are there sensitive periods of children's development that may trigger PB? To achieve these goals, a sample of Italian parents was recruited from schools in four Italian regions and data are being collected through an online survey, where quantitative data will be integrated with qualitative information. Parents will be asked to provide information pertaining to their demographics, work, family composition, health, and lifestyle together with a set of standardized questionnaires, including the Parental Burnout Assessment. Data will be collected four times, each three months apart. As the project was supported by the PRIN-PNRR funds, data collection has just begun. Therefore, during the conference preliminary results of the first two waves of assessment will be presented. This study will help to generate new knowledge on PB and to demonstrate if, in line with the emerging evidence coming from other cultural contexts, PB will attest its psychometric validity, clinical relevance and previously reported prevalence. This in turn will reinforce the need to develop interventions for burned-out parents and/or preventive steps for parents who are at the burnout risk.



THE DAILY LIFE OF CANCER: CLINICAL PSYCHOLOGY'S IMPACT ON CANCER CARE

Proposer

*Eliana Tossani*¹

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Discussant

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Abstract

The integration of clinical psychology into cancer care is central to enhancing the wellbeing of those affected by cancer. This symposium explores the psychological challenges and support mechanisms for cancer patients, survivors, and their families through four distinct research contributions.

Martino et al. address the disruption of narrative self-continuity in breast cancer survivors. Their study highlights the therapeutic potential of integrating narrative identity processes in clinical settings to help survivors reconstruct their self-identity and life objectives following their cancer experience.

Iuso et al. investigate psychological dimensions in gynecological cancer patients, focusing on the interplay between personality traits, such as neuroticism, and genetic markers like the 5-HTTLPR genotype. Their findings advocate for personalized psychological interventions tailored to the genetic and personality profiles of individuals to mitigate stress and depression.

Cerea et al. examine the adverse effects of breast cancer on women's body image. Their research emphasizes the critical need for interventions that promote a positive body image rather than only reducing body dissatisfaction due to breast cancer, which could serve as a protective factor for enhancing women's overall quality of life.

Landi et al. investigate the psychological adjustments required by adolescents and young adults dealing with a parent's cancer diagnosis. This study highlights the critical need for tailored psychological support to help this vulnerable group navigate such a significant life challenge.



The presented contributions collectively underscore the intricate impact of cancer on psychological health and the transformative potential of precise psychological interventions. By examining these diverse perspectives, the symposium aims to deepen the understanding of how clinical psychology can actively improve the quality of life and resilience for those affected by cancer. This approach encourages healthcare professionals to adopt and refine evidence-based strategies that comprehensively address the needs of the cancer community.



**Neuroticism, perceived stress and depressive symptoms in patients with gynaecological cancer.
The role of allelic variant of the 5-HTTLPR genotype: preliminary results.**

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Abstract

Background: The study explored the associations between neuroticism, perceived stress and symptoms of depression in cancer patients characterised by the two serotonin transporter polymorphism variants (5-HTTLPR).

Method: The sample consisted of 41 gynaecological cancer patients who completed self-reported questionnaires including the NEO Five-Factor Inventory, the Depression-Depression (D/D) dimension of the Profile of Moods State and the Perceived Stress Scale (PSS). Polymerase chain reaction was also used to identify serotonin polymorphism (5HTT) genotypes.

Results: 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 trend towards statistical significance of the 1/1 variant on mindfulness ($p=0.074$). The bivariate correlations showed positive correlations of neuroticism with both psychopathological symptoms (D/D $r=0.522$; PSS $r=0.586$) in the combined S group, negative association of agreeableness with depression (D/D $r=-0.613$) and of conscientiousness with depression (D/D $r=-0.750$) and perceived stress (PSS $r=-0.702$) in the long variant group of the 5-HTTLPR genotype.

Discussion: 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.



Navigating adversity: uncovering the needs of adolescents and young adults living with parental cancer

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Abstract

Introduction: Adolescents and young adults (AYAs) experiencing parental cancer are a uniquely vulnerable population at risk of significant psychosocial challenges. This presentation aims to discuss the findings from two studies focusing on the psychosocial impact of parental cancer on AYAs and their families, examining both the influence of offspring unmet needs and parental psychological inflexibility. *Methods:* The first study involved 113 AYAs aged 11–24, assessing the relationships among illness unpredictability, unmet needs, and psychosocial adjustment. The second study examined 86 parents with cancer, exploring how parental psychological inflexibility mediates the effects of illness severity on quality of life (QoL) and family outcomes. *Results:* In AYAs, higher unmet needs correlated with poorer health-related QoL ($r = -0.24^{**}$) and higher internalizing problems ($r = 0.21^*$), with unmet needs mediating the impact of illness unpredictability on QoL (standardized indirect effect = -0.100^* [$-0.183, -0.018$]). In parents with cancer, higher illness severity was associated with greater parental psychological inflexibility, which negatively affected parental QoL (physical health QoL: standardized indirect effect $ab = -0.03$, $SE = 0.03$, 95% CI [$-0.108, -0.001$]; mental health QoL: standardized indirect effect $ab = -0.07$, $SE = 0.05$, 95% CI [$-0.169, -0.005$]) and family outcomes (family functioning: standardized indirect effect $ab = -0.09$, $SE = 0.06$, 95% CI [$-0.197, -0.005$]; parenting concerns: standardized indirect effect $ab = 0.04$, $SE = 0.03$, 95% CI [$0.002, 0.102$]; openness to discuss cancer: standardized indirect effect $ab = -0.04$, $SE = 0.03$, 95% CI [$-0.112, -0.005$]). *Discussion:* These findings highlight the critical role of psychological factors such as offspring unmet needs and parental psychological inflexibility in managing the impact of parental cancer. Interventions targeting these factors, particularly through frameworks like Acceptance and Commitment Therapy (ACT), could mitigate the adverse psychosocial outcomes in both AYAs and their families, enhancing overall well-being. Addressing the specific psychological needs of AYAs and parents facing cancer is essential for improving their QoL and psychosocial adjustment. Clinical psychology



interventions that increase awareness of these needs and promote psychological flexibility can play a significant role in supporting these individuals through the family cancer journey.



The relation among different facets of positive body image and Quality of Life (QoL) in women with breast cancer: a preliminary investigation

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Abstract

Breast cancer has a negative impact on body image due to the illness itself and its invasive treatments, which alter women's appearance (e.g., scarring, hair loss), significantly affecting women's Quality of Life (QoL). Body image has emerged as one of the most important patient-reported outcomes to monitor in breast cancer. However, much of the research in the field of body image in breast cancer has focused on body dissatisfaction, neglecting positive body image, which is characterized by respect for one's body and is associated with positive physical and psychological outcomes. Therefore, the aim of this preliminary investigation is to examine the relation among different facets of positive body image and QoL in women with breast cancer.

Thirteen women with breast cancer (age: $M=54.69$, $SD=6.24$; months from diagnosis: $M=7.78$, $SD=6.30$) completed self-report questionnaires assessing QoL in breast cancer (Functional Assessment of Cancer Therapy – Breast, FACT-B), functionality and body appreciation (respectively, Functionality Appreciation Scale, FAS; Body Appreciation Scale-2, BAS), and interoceptive awareness (Multidimensional Assessment of Interoceptive Awareness, MAIA).

Results showed that the FAS positively correlated with both the “social” ($r=.64$; $p=.02$) and “functional” ($r=.60$; $p=.03$) aspect of well-being measured by the FACT-B. Additionally, the “trusting” subscale of the MAIA positively correlated with the total score of the FACT-B ($r=.59$; $p=.03$), which assess multiple aspect of QoL. No other significant correlations emerged (all $ps > .05$).

Results of this preliminary investigation highlight the positive relations among some facets of positive body image and QoL in women with breast cancer. Specifically, higher appreciation of the body for what it is capable of doing seems to be associated with both social and functional well-being (and vice versa), while the experience of one's body as safe and trustworthy emerged as associated with multiple aspects



of QoL in women with breast cancer (and vice versa). These preliminary results can inform the development and enhancement of therapeutic interventions for improving QoL in breast cancer.



Themes and structure of self-defining narrative memories of breast cancer survivors: clinical reflections to promote a narrative identity integration

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Abstract

Traumatic events, as breast cancer (BC), can influence autobiographical memory (AM) interrupting the continuity of narrative-self. AM is based on a hierarchical organization across different levels of specificity that are crossed from top to bottom when the subject is retrieved for a memory. In BC a low specificity of AMs as well as the attempts to draw an integrative meaning from AMs are critical points. Our aim is to explore the narrative identity integration process of BC for long-term survivors, analyzing themes, specificity, and integration of the meaning in Self-Defining Memories (SDMs) a specific and significant AM. 10 women participated in an online group support program centered on the integration of AMs linked to the cancer journey. Moreover, they were asked to assess their Body Image perceptions. Women filled out an online survey three times, in which they had to report 3 SDMs each time. A Reflexive Thematic Analysis was performed to measure SDMs highlighting the main themes emerged from the whole corpus of memories. Then, SDMs were analyzed focusing on the specificity and integration of meanings in order to observe peculiarities of SDMs during each phase. The analysis of the themes highlights the concerns that remain imprinted: The onset of breast cancer; The labelling of negative emotions; Changes in the body. The analysis of the specificity and integration of meaning shows inhibition with regards to the retrieval of specific episodes remembered, probably due to defensive mechanisms of emotional avoidance and suppression from contact with the still painful experience, which tends to block the recollection process on an overgenerability level. Accordingly, it fosters a progressive failure in the memory recollection. The major aspect of difficulty is drawing from memories an integrative meaning of experience for one's self, life, or the relationship with their external and social context. BC seems to remain separated from self-identity and, therefore, not useful to draw an integrative



meaning. In other words, breast cancer appears as an experience that still affect survivors' daily life, with a high negative emotional impact that blocks the possibility to draw from memory an integrative meaning for self-life-story. This study suggests the importance, to be confirmed in future studies, of clinical support focused on the AM in BC long-survivorship. It is paramount to centralize cognitive reconstruction, and re-evaluate the meaning of past memories supporting the process in which the cancer experience is stored in narrative identity.



Sunday, 15th September 2024

THEMATIC SESSION

“NEW EVIDENCE IN CLINICAL PSYCHOPATHOLOGY”

Chair:

Piero Porcelli

University of Chieti - Pescara



Exploring the relationship between cognition and symptomatology among patients with schizophrenia and individuals at risk for psychosis: a machine learning study

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Abstract

Introduction: Besides positive and negative symptoms, many patients with schizophrenia (SCZ) show neuro- and socio-cognitive deficits to different extents. However, the way in which cognitive deficits might contribute to the development of more severe symptoms in SCZ or conditions that might predate schizophrenia has been poorly investigated only via univariate methods, which flatten deliver only group-level findings. Employing Machine Learning (ML), this study aims to identify classification signatures of symptom levels based on neuro- and socio-cognitive deficits in SCZ and to investigate their potential prognostic relevance in At Risk Mental State (ARMS) and First-Episode Psychosis (FEP) individuals.

Method: We recruited 91 SCZ (discovery sample, DS), 19 ARMS and 17 FEP (validation sample, VS). We divided SCZ in two groups (higher/lower) based on the severity of Positive, Negative, General and Total scales of the Positive and Negative Syndrome Scale (PANSS). For each scale, we trained 3 ML algorithms in the DS aimed at discriminating SCZ with higher/lower symptoms based on (i) 45 neurocognitive variables, (ii) 34 socio-cognitive variables, and (iii) the combination of (i) and (ii) decisions. Algorithms reaching more than 60% Balanced Accuracy (BAC) and permuted significance (all $p < 0.05$) were applied to the VS to predict symptoms 12 months after baseline.

Results: Three models were significant: 1) Neuro-cognitive variables classified SCZ with higher/lower PANSS total symptoms (BAC=61.7%). Decisions were most influenced by semantic fluency. 2) Socio-cognitive variables discriminated SCZ with higher/lower PANSS positive (BAC=62.2%) and 3) with



higher/lower PANSS negative symptoms (BAC=63.7%). Social inference abilities in sarcastic contexts were the most relevant variable. The socio-cognitive algorithm successfully predicted follow-up negative symptoms in ARMS (BAC=69.4%) and FEP (BAC=76.4%). The other algorithms did not validate in any of the VS populations.

Conclusion: We identified specific socio-cognitive alterations that specifically impact levels of negative symptoms in schizophrenia via ML; the generalizability of this ML algorithm to VS populations offers preliminary evidence of its prognostic relevance, suggesting that these specific socio-cognitive variables may be relevant for the symptom course also during conditions that may predate schizophrenia.



Psychological inflexibility processes in patients with depressive and anxiety disorders

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Abstract

Introduction: PI occurs when behavior is rigidly guided by internal events (e.g., thoughts, feelings, memories) rather than personal values or direct contingencies. Six processes have been hypothesized to contribute to PI: experiential avoidance, cognitive fusion, attachment to the conceptualized self, attentional rigidity, lack of values clarity, and actions that are inconsistent with one's values. This study explored PI processes as transdiagnostic factors relevant to anxiety and depressive disorders.

Methods: Participants were psychiatric outpatients with anxiety ($n = 51$; 68.6% female, Mean age = 34.5 yrs; SD = 15.5) and depressive disorders ($n = 49$; 61.2% females, Mean age = 40.9, SD = 17) as primary diagnoses, and 87 healthy adults (control group; 64.4% female; Mean age = 37.8 yrs; SD = 17.8). Patients were recruited at the Psychiatric Units of the Santa Chiara Hospital of Pisa (Italy). Participants completed the Multidimensional Psychological Flexibility Inventory.

Results: Results from ANCOVA analyses showed that both clinical groups differed from healthy adults in PI processes related to fusion, attachment to conceptualized self, and inactivity/actions that are inconsistent with values, while the differences between the clinical groups in these processes were not statistically significant. Further, depressive patients showed poorer acceptance and attentional abilities when compared to both anxiety and control groups, while patients with anxiety disorders showed more difficulties concerning values when compared to the other comparison groups.

Discussion: Findings support different PI processes as transdiagnostic factors for anxiety and depressive disorders. They also suggest some specificities for each diagnostic group that may be relevant for psychological interventions.



Expression of maladaptive emotional endophenotypes and psychopathological risk. A new experimental framework

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Abstract

Background: The Affective Neuroscience (AN) theory posits that Primary Emotional Systems (PES) constitute the emotional foundation of personality, organizing into "emotional endophenotypes" that serve as individual characterizations linking observable behaviors to biological and genetic bases. In clinical contexts, this framework has emerged as a potential tool for interpreting mental disorders, as impaired primary emotional manifestations are observed in conditions characterized by dysfunctional affective issues. Furthermore, disrupted emotional processes, such as emotion dysregulation (ED), are common in these clinical conditions and contribute to heightened negative emotional states. The present study aimed to investigate the linkage between emotional endophenotypes and specific psychopathological risk factors (PRF), as well as how levels of ED interact within this relationship.

Method: 138 non-clinical subjects were recruited, and completed assessments including the Affective Neuroscience Personality Scale - 2.4, the Difficulties in Emotion Regulation Scale-16, and the DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure.

Results: Positive associations were observed between certain negative PES (i.e., SADNESS, FEAR, and ANGER) and specific PRFs such as *Depression, Anger, Anxiety, Repetitive Thoughts and Behaviors*, and *Personality Functioning*. Conversely, negative correlations were observed between expressions of positive PES (i.e., SEEK, PLAY, and CARE) and these PRFs (except for *Anger* and *Repetitive Thoughts and Behaviors*). Moreover, significant positive correlations were found between levels of ED and the aforementioned PRFs. Noteworthy, the strength of correlations between PES expressions and PRFs weakened when controlling for the effect of ED, or even disappeared in the associations with positive PES. Additional mediation analyses further confirmed the role of ED in the association between expressions of positive PES and PRFs, particularly for *Depression* and *Anxiety*.

Discussion: Specific maladaptive emotional endophenotypes are closely associated with PRFs, with ED playing a significant role in this relationship. Understanding the impact of ED within the context of the AN framework may provide insights into mental disorders and their therapeutic treatment. These



findings underscore the importance of addressing ED and PES expressions in clinical interventions targeting mental health.



The Traumatic Roots of Shame: The Mediating Role of Dissociation

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Abstract

Introduction: Several studies examined the association among childhood trauma, shame, and dissociation. Yet, the contribution of trauma-related dissociative symptoms in the manifestation of different types of shame experiences remains relatively unexplored. Moreover, the existing literature predominantly derives its findings from clinical populations. Therefore, the purpose of this study was to examine, within a non-clinical sample, the mediating role of dissociation in the relationship between childhood trauma and shame experiences.

Methods: A sample of 771 adult participants (483 females, 62.6 %) aged between 18 and 83 years old ($M = 31.7$; $SD = 13.9$) was administered self-report questionnaires aimed at investigating childhood trauma (Childhood Trauma Questionnaire), dissociative symptoms (Dissociative Symptoms Scale), and shame experiences (Experiences of Shame Scale).

Results: The results of mediation analyses showed that dissociative symptoms partially mediated the significant and positive association between trauma scores and characterological, behavioral, and bodily dimensions of shame. Notably, these analyses also showed that the different types of child maltreatment (emotional neglect, physical neglect, emotional abuse, physical abuse, sexual abuse) were differentially linked to dissociative symptoms and shame experiences.

Discussion: The potential implications of this study extend to both research and clinical settings. In particular, it underscores the need to further explore the associations between trauma-related dissociation and shame feelings; moreover, the study suggests a need to consider and, if necessary, to address trauma-related dissociative-like states in clients exhibiting severe feelings of shame.



Effects of Depressive Symptoms on Mental Time Travel

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Abstract

Introduction: Mental Time Travel (MTT) is the use of one's mind to travel backwards and forwards in time to re-experience past events and pre-experience future ones. MTT is crucial for episodic memory and for adaptive functions such as planning. MTT can be impaired by neurological diseases or psychological problems such as rumination, a cognitive style typical of individuals who suffer from depressive symptoms that involves focusing attention on negative past events. Thus, one hypothesis is that individuals with such symptoms focus more on the past than on the future. According to this hypothesis, these individuals seem to experience future events as less vivid than healthy individuals do. However, further research is still needed to clarify whether individuals with depressive symptoms focus more on the past than on the future. This contribution aims to present and discuss the first results of a PRIN 2022 project on the impact of depressive symptoms on MTT in a community sample.

Methods: Thirty-four young adults (19 females; age $M = 23.12$ years, age $SD = 2.65$ years; no psychiatric or neurological diagnosis) were grouped according to the score of the DSM-5 Level 2 Depression – Adults: the experimental group included 15 participants with mild-to-severe depressive symptoms; the control group included 19 participants without depressive symptoms. All participants underwent a self-reference MTT task. After hearing an event, they had to classify it as “past” if already occurred or “future” if not occurred yet. We conducted an ANOVA to compare the two groups in the accuracy in classifying past and future events.

Results: All participants were more accurate at classifying past events than future events. Most interestingly, individuals with depressive symptoms were more accurate than controls at classifying past events, but less accurate than controls at classifying future events.



Discussion: Depressive symptoms, even in individuals without a formal diagnosis of depression, alter the ability to mentally travel in time. Our data support the hypothesis that individuals with such symptoms tend to focus more on the past than on the future. Clinical and therapeutic implications for the treatment of temporal alterations in depressive symptoms are discussed.

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The relationship between insomnia and personality disorders: a systematic review

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Abstract

Introduction: Insomnia is one of the most diagnosed sleep disorders, affecting about 30% of the global population. Insomnia significantly impairs psychological well-being, predisposing individuals to psychiatric disorders, particularly anxiety and depression. While research has provided large evidence that certain personality traits may constitute predisposing as well as perpetuating factors for insomnia, the relationship between insomnia and personality disorders (PDs) has yet to be fully clarified. Beginning from these premises, the purpose of the present systematic review was to synthesize results of studies examining the comorbidity between insomnia and PDs.

Methods: A literature review was conducted in PubMed, PsycINFO, PsycArticles, Medline, Psychology and Behavioural Science Collection, and Psychology Database, to identify relevant articles published until June 2023. The search terms were: sleep disorder* OR sleep disease* OR sleep problem* OR insomnia AND Personality OR personality trait* OR personality disorder*, both in the title and abstract. Inclusion criteria were: English language, personality disorder, and insomnia. Exclusion criteria were: languages other than English, personality traits, other sleep disorders, reviews, books, and commentaries. The research resulted in 1386 articles, of which only 46 articles met the inclusion criteria and were thus selected for the analyses.

Results: Insomnia resulted to be associated with borderline, antisocial, narcissistic, avoidant, schizotypal, and histrionic personality disorders. In individuals with PDs and insomnia, impulsivity, aggressiveness, interpersonal violence, substance use, anxiety, depression, as well as suicidal ideation and/or suicidal attempts were the most frequent dimensions linked to insomnia symptoms. Results also showed that emotion dysregulation play a crucial role in the onset and exacerbation of insomnia symptoms in PDs, particularly in borderline personality disorder.

Discussion: This systematic review, beyond shedding light on the association between insomnia and certain PDs, highlights the need to consider PDs when assessing insomnia both in research and clinical practice.



Psychometric properties of the Questionnaire for Psychotic Experiences (QPE) in an Italian general population sample

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Abstract

Introduction: Psychotic experiences, such as hallucinations and delusions, are present in various psychiatric disorders, including schizophrenia, bipolar disorder, and major depressive disorder. They have also been reported in individuals in the general population, although typically in milder and less disabling forms. To enable a comprehensive understanding and transdiagnostic comparison of the wide range of these phenomena, a new measure, the Questionnaire for Psychotic Experiences (QPE), was developed. The QPE assesses hallucinations and delusions from a qualitative and quantitative perspective. The aim of this study was to validate the Italian version of the QPE and to examine its psychometric properties.

Method: A total of 87 participants (mean age = 29.3 ± 7.4 years; 62.1% female) completed the Italian version of the QPE, which had been previously translated and cross-culturally adapted. Additionally, they completed three self-report instruments: a) CAPE, which measures psychotic experiences and related distress; b) STAY, which assesses current anxiety state and a general tendency to be anxious; and c) SCL-90-R, which measures a broad range of psychopathological symptoms. Cronbach's alpha and Kendall's tau correlation coefficients were used to assess the reliability and validity of the QPE.

Results: The QPE subscales demonstrated good internal consistency, with Cronbach's alpha ranging from .70 to .85. They also showed positive and significant correlations with the conceptually related CAPE and its subscales, particularly the one measuring positive symptoms, providing evidence for convergent validity. Conversely, weak or null correlations with the conceptually unrelated STAY and its subscales support the QPE's divergent validity.

Discussion: The QPE is a reliable and valid tool for assessing a wide range of psychotic experiences across diagnoses. Further research is needed to explore differences in psychotic experiences between clinical and nonclinical populations.



Dream activity, emotion regulation and personality features: An experimental study with Rorschach (R- PAS) and dream narratives

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Abstract

The Rorschach cards may evoke components of personality that escape awareness, but which may influence observable performance during the test. Similarly, the manifest (verbally reported) dream content involves unconscious (masked) elements. The aim of this study was to a) examine a possible correspondence between the content of a person's dreams and the attributions made by the same person when viewing the Rorschach cards; b) investigate how a difficulty in coping with negative emotions (e.g. anger) may express in the dreaming activity from a qualitative and with regard to the content perspective. Forty-one participants (17 men) ranging in age from 20 to 57 years ($M = 27.10$; $SD = 8.09$) were selected based on criteria related to the frequency of dream recall (i.e., at least once per week). Dream narratives were collected via email and coded according to the Rorschach Performance Assessment System (R-PAS). There was an association between the content of the dreams and the Rorschach responses in terms of the possible occurrence of dissociative experiences, physical anxiety and disturbing content probably related to the loosening of censorship mechanisms during the dream state. In addition, emotion dysregulation tends to be associated with the frequency and distress related to nightmares reported by participants. This study is the first examining the possible relationship between dream content, Rorschach responses, and the ability to cope with negative emotions using an empirical approach capable of understanding the unconscious components underlying psychological functioning.



Sunday, 15th September 2024

THEMATIC SESSION

“NEW EVIDENCE IN CLINICAL PSYCHOPATHOLOGY”

Chair:

Barbara Giangrasso

University of Florence



Mental health profile of Italian university students: A case-control study

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Abstract

Recent studies investigating the mental health of students revealed a troubling surge in psychopathological symptoms, particularly in the aftermath of the Covid-19 pandemic. University students have been identified as a population at high risk of psychological distress, exhibiting elevated levels of depression, social anxiety, and familial related stress. In recent times, there has been a growing focus on university counseling services (UCS), both for ongoing monitoring of the situation and for proactive wellness promotion. Main aim of this study was to describe the mental health profile and drop-out intentions of university students seeking psychological help at an Italian UCS. Employing an observational case-control paradigm, psychological distress, perceived loneliness, emotion dysregulation, and drop-out intentions were measured. A total of 191 students (72.2% f, $M_{age} = 22.61 \pm 2.8$) seeking psychological help and 382 matched controls filled out an online survey. Multigroup structural equation modeling (SEM) was adopted. Among university students seeking psychological assistance at the counseling service, a staggering 92.7% and 70.7% exhibited high levels of psychological distress and loneliness, respectively. These students showed significantly higher levels of psychological problems (psychological distress, perceived loneliness, and difficulties in emotion regulation abilities), and drop-out intentions compared to the control group. Results of SEM showed that mental health problems significantly related with drop-out risk, regardless of whether they sought mental health support. In both groups, perceived loneliness and emotion regulation problems were significantly and positively associated with psychological distress; goals and psychological distress were significantly and positively associated with drop-out intentions. The analysis of the indirect effects showed that perceived loneliness and emotion regulation difficulties are associated with drop-out intentions via psychological distress.

Mental distress is dramatically widespread among Italian university students, regardless of whether or not they require psychological-clinical help at their university's counselling service. This necessitates the implementation of timely interventions aimed at counting their mental distress and mitigating the risk of abandonment of their university pursuits.



The effect of a psychodynamic counseling intervention on university students' time attitudes

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Abstract

Introduction: time attitudes refer to individuals' evaluative feelings towards past, present, and future. Positive time attitudes were found to be meaningfully associated with individual adaptive functioning and healthy psychological outcomes in adolescents and young adults. Recent studies have shown that university counseling interventions are effective in reducing student' symptoms and in promoting their health in a key development stage. However, the way in which these interventions can affect the time attitudes of students who turn to a university counselling service is still unknown. *Aim:* the present work aimed to investigate the effect of a psychodynamic counseling intervention in changing time attitudes (AATI) in a sample of university students. We hypothesized that students who engaged in counseling intervention would show a significative increase in positive time attitudes scores compared to the students in the control group.

Methods: The sample included 252 students of Sapienza University of Rome, of whom 111 underwent university counseling and 141 constituted the control group. Students were asked to complete the Adolescent and Adult Time Inventory -Time Attitudes Scale (AATI-TA). The measure was administered at a pre-test (T0) and at a post-test (T1), which students in the experimental group completed at the end of the intervention, while those in the control group completed at the same time as the other group, but without undergoing any intervention.

Results: the results of the repeated-measures ANOVAs revealed that students who had received counseling intervention reported a significant increase in Present Positive and Future Positive time and a significant decrease in Present Negative at the post-test compared to students in the control group. No significant differences between the two groups in Past Positive, Past Negative and Future Negative time attitudes were recorded.

Discussion: our results support the hypothesis that a psychodynamic counseling intervention can have a positive impact on college students' feelings toward time, thereby promoting their mental health. These findings may have important implications for the development of interventions for university students



focused on positive appraisal of their present and future in a pivotal moment of their development process.



Rumination and worry profile in university students with Specific Learning Disorder.

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Abstract

Background: According to recent literature, university students with Specific Learning Disorder (SLD) are at higher risk for internalizing problems compared to students without SLD. Instead, in SLD less is known about rumination and worry that represent two repetitive negative thinking (RNT). Moreover, only few studies investigated the difference in these variables between male and female students with SLD. Addressing gaps in the existing literature the present study had three main goals. First, we investigate RNT in university students, focusing on the differences between students with and without SLD. Second, we analysed the relationship between RNT and both anxiety and depression. Third, we compared the psychological profiles of male and female students.

Method: An online survey was administered to 107 university students between 18 and 31 years (mean age=21.56; SD=2.60). Of these, 65 were typically developing (TD) students and 42 had a diagnosis of SLD. Participants responded to the Ruminative Response Scale (RRS), the Penn-State Worry Questionnaire (PSWQ), the Beck Anxiety Inventory (BAI) and the Beck Depression Inventory (BDI).

Results: Significantly higher scores were found in university students with SLD in rumination, anxiety and depression, whereas worry did not differ between the two groups. Regression analyses reported that rumination significantly affected depression and anxiety, whereas worry seemed to have a role only in anxiety. Finally, female students with SLD showed higher psychological problems compared both to TD females as well as to male students with SLD.



Conclusions: Our findings suggest the importance of evaluating RNT in university students with SLD with a particular focus on females. Moreover, the study suggests the usefulness of strengthening the psychological support offered by university student services.



Enhancing Academic Success: Understanding the Needs of Students with Learning Disabilities at the University of Valle d'Aosta

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Abstract

Introduction: Among the developmental tasks of young adults, starting and continuing an academic career are particularly critical phases that require adequate orientation and support. This challenge is even more difficult for students with learning disabilities who may be poorly informed about potential obstacles and receive inadequate support during their academic career. The aim of the study was to analyze the needs of students at the University of Valle d'Aosta in order to plan interventions and promote academic success.

Methods: The sample consisted of 45 participants. Semi-structured interviews were conducted with each student, and these interviews were then transcribed verbatim. The transcripts underwent thematic analysis.

Results: Barriers and facilitators have been identified, including personal factors (organizational factors and study methods, self-perception) and contextual factors (university resources, availability of teachers, organization of student services), as per the International Classification of Functioning (ICF) perspective.

Discussion: The emerging themes have underscored the necessity to develop orientation, information, and support services for students, as well as to implement initiatives for informing, training, and raising awareness among teachers at the University of Valle d'Aosta.



Unveiling Math Anxiety: Insights from a Personalized Assessment Approach in Psychology Students

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Abstract

Students' anxiety in STEM disciplines is an underestimated aspect of academic life, despite it may impact the psychological well-being of students in several ways. This form of anxiety, when properly managed, can serve as a motivating force, driving students to excel in their studies. However, elevated levels of math anxiety may hinder academic performance and threaten personal growth.

Our study aims to understand how associations between ideas may be affected by math anxiety levels in a sample of University students enrolled in Bachelor Psychology courses. Our study employs the *behavioral Forma Mentis Networks method*, which is a framework that models participants' mindset (*forma mentis*) with respect to a given topic. In more detail, we seek to assess the levels of anxiety experienced by students and explore the intricate relationship between their cognitive processes and math anxiety. Through this approach, we aim to uncover patterns of free associations between idea formations and anxiety levels, particularly within the context of STEM disciplines. Our preliminary results will show the complexity of the associations between STEM-related keywords and math anxiety. The cognitive networks of individuals with high levels of anxiety appear to have more negatively valenced words associated with STEM-related words

In this contribution, we will emphasize the importance of tailored interventions that address the individualized needs of students, as highlighted by our personalized assessment approach. Indeed, by understanding and addressing these individual dynamics, we can nurture a more supportive and inclusive learning environment conducive to personal and academic well-being.

In conclusion, our project underscores the significance of acknowledging and addressing anxiety in specific academic subjects, particularly in STEM disciplines. Our findings aim to stimulate the adoption of personalized assessments and targeted interventions, in supporting students managing their math anxiety levels.

Different coping strategies and addictive behaviors in domestic and international medical students: a comparative study

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Abstract

Introduction: Emerging adulthood represents a critical phase for the onset of various mental disorders. This is particularly evident in the stressful environment of medical education, where the prevalence of psychological distress and burnout is remarkably high.

The complex relationship between stress and coping strategies may lead to the emergence of addictive behaviors as maladaptive self-medication mechanisms.

This study aims to investigate stress and coping strategies in a cohort of medical students and to assess the prevalence of addictive behaviors and their relationship with perceived stress.

Methods: A cohort of international and domestic students from the Medicine and Surgery school at San Luigi Gonzaga University Hospital of Turin was enrolled. Data were collected via validated instruments such as the Perceived Stress Scale (PSS-10) and the Coping Orientation to Problem Experienced Inventory (COPE), alongside an assessment of addictive behaviors aligned with DSM-5 criteria.

Results: A substantial portion of participants reported high perceived stress, with notable differences between domestic (46%) and international students (25.7%). A significant correlation emerged between elevated stress and a decline in active coping strategies among Italian students.

Addictive behaviors were widely reported for relief from negative emotions (98.4% of the sample), relaxation (97.5%), and performance enhancement (82.5%). Distinct patterns were observed between the two groups, particularly regarding internet use and gaming.

Conclusion: The study reveals critical insights into the stress-related challenges and coping capacities among medical students. It underscores the need to develop comprehensive frameworks that not only address the coping strategy diversity and the risk of addiction but also promote student well-being and their professional engagements.



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