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

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

Tomai Manuela (1), Rosa Veronica(1), Lai Carlo (1), Pomoni Elpiniki (2), Caprai Antonio(2), Francisco Alarcon Sandoval (3), Marcela Reyes Elias (3), Silvia Carolina Colorado Hernandez (4), Francisca Romero de Burgos (4), Yesenia Beatriz de Guzmán (5)

- (1) Department of Dynamic and clinical psychology Sapienza University of Roma
- (2) Institute of Geosciences and Earth Resources National Research Council Pisa
- (3) Faculty of Engineering and Architecture Universidad de El Salvador
- (4) Faculty of Humanities Universidad de El Salvador
- (5) Study Unit Socio Economic-Universidad de El Salvador

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

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

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

Vegni Elena (1), Leone Daniela (1), Borghi Lidia (1), Rossi Maria Grazia (2), Bigi Sarah (2)

- (1) Department of Health Sciences, University of Milano
- (2) Department of Linguistic and Literatures Sciences, University Cattolic Sacro Cuore

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