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By Tambelli Renata & Trentini Cristina

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Department of Dynamic and Clinical Psychology
Sapienza University, Roma, Italy

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REFLECTIVE FUNCTIONING MODERATES THE RELATIONSHIP BETWEEN CHILDHOOD TRAUMA AND PSYCHOPATHOLOGY AMONG ADOLESCENT OUTPATIENTS**Boldrini Tommaso (1), Nazzaro Maria Paola (1)**

(1) Department of Dynamic and Clinical Psychology, Sapienza University of Rome

Mentalization has been considered a buffer against psychopathology in individuals exposed to trauma and abuse. The initial research on mentalization by Fonagy (1996), as well as subsequent empirical studies (e.g. Borelli, 2015; Chiesa & Fonagy, 2013), highlighted the role of reflective functioning (RF) as a protective factor for individuals exposed to trauma in childhood against maladaptive outcomes. In recent years, association between mentalization and early traumatic experiences has gained an increasing interest among clinical and empirical studies. With regard to adolescence, literature on the relationship between traumatic experiences and RF is still scarce. Nonetheless, an evaluation of these adaptive and maladaptive developmental processes could have important clinical implications in adolescence. The aim of this study was to examine the role of RF as a resilience factor against the development of several psychiatric conditions in a sample of N = 60 adolescent outpatients. Participants were recruited in public mental health services. Each patient was evaluated, at the intake, with M.I.N.I. (Sheehan et al. 1994), SCID-II (First et al., 1997) and self-report tests: Childhood Trauma Questionnaire (Bernstein & Fink, 1998), Cambridge Depersonalization Scale (CDS; Sierra & Berrios 2000), Hamilton Rating Scale for Depression (HAM-D; Hamilton, 1960) and Hamilton Rating Scale for Anxiety (HAM-A; Hamilton 1959). During the first month of treatment the Adult Attachment Interview (AAI, George et al., 1985) was also administered, and the AAI transcripts were assessed with the RF Scale (Fonagy et al., 1998).

Findings showed that adverse experiences in childhood predicted several psychopathological dimensions; mostly, RF played as a moderator of the relationship between these variables. The clinical implications of these findings were addressed.