

outcomes of children raised in same-sex parent families will be compared to children raised in different-sex parent families. The key aspects of aging bisexuals in the relationships relevant to help sexual health professional to work with older bisexual clients and their partners will also be highlighted, illustrating the principal therapeutic tasks and, in conclusion, the levels of agreement of Italian people with the sexual rights of LGB people will be presented.

**Keywords:** LGBT, sexual rights, same-sex parents

**Conflict of Interest and Disclosure Statement:** None.

## SEXUAL RIGHTS OF LESBIAN GAY AND BISEXUAL PEOPLE IN ITALY: A SNAPSHOT OF REALITY AND SOCIODEMOGRAPHIC CHARACTERISTICS INVOLVED IN THE RECOGNITION AND DENIAL



Cinzia ARTIOLI<sup>1</sup>, Marco SILVAGGI<sup>2</sup>, Simona Gabriella DI SANTO<sup>3</sup>, Margherita COLOMBO<sup>4</sup>, Stefano ELEUTERI<sup>5</sup>, Valentina FAVA<sup>6</sup>, Chiara MALANDRINO<sup>6</sup>, Irene MELIS<sup>7</sup>, Chiara NANINI<sup>7</sup>, Cristina ROSSETTO<sup>8</sup>, Sara SIMONE<sup>9</sup>

<sup>1</sup>Psychology and Sexology, Italian Center of Sexology, Bologna, Italy; <sup>2</sup>Psychology and Sexology, Institute of Clinical Sexology (ISC), Rome, Italy; <sup>3</sup>Psychology and Sexology, Italian Association of Sexology and Applied Psychology, Milan, Italy; <sup>4</sup>Psychiatry and Sexology, Piedmont Society of Clinical Sexology (SPSC) Turin, Italy, Association of High school of sexology of Turin (ASST); <sup>5</sup>Psychology and Sexology, Sapienza University of Rome, Rome, Italy; <sup>6</sup>Gynecology, Research group for sexology, University of Catania, Catania, Italy; <sup>7</sup>Sexology, Interdisciplinary Centre for Research and Training in Sexology (CIRS), Genova, Italy; <sup>8</sup>Psychology and Sexology, Study Center for Affective and Sexual Disorders Treatment, Genova, Italy; <sup>9</sup>Psychology and Sexology, International Institute of Sexology. Institute of Research and training (IRF), Florence, Italy

**Introduction & aims:** Only recently the importance of sexual rights (SR) has been discussed at the international level and the issue recently entered the public debate. Aim of this study was to analyse the levels of agreement of Italian people with the SR of LGB people (LGBp) and to verify their association with some characteristics of the population, such as having 40+ years, being undergraduates or churchgoers.

**Population sample:** 774 People (574 women and 200 men, mean age 34,7 SD 10,9).

**Methods:** An online anonymous questionnaire was realized to collect demographic data and information about the level of agreement/disagreement (on a 6-point likert scale) with statements regarding the right for LGBp, Disabled, Transgenders, Prostitutes to show in public, to practice a satisfying sexuality, to marry, to adopt a child, to be employed in any work. Nonparametric statistics were used for data analysis.

**Results:** SR for LGBp are not equally recognized as for heterosexual. There is general agreement on the following SR: to show in public, to work in any position and to have a satisfying sexuality; while the tolerance is lower concerning marriage and children adoption. The factors that mostly affect the disagreement about these variables are the level of education and religiosity: data showed a lower level of tolerance in undergraduates compared to graduates ( $p < 0.05$ ) and in churchgoers compared to non-believers ( $p < 0.05$ ).

**Conclusion & recommendations:** SR have different relevance. Their for LGBp seems to be granted about to freely show and live their sexuality and practice any job, while there isn't the same agreement in specific domains like marriage and adoption. This matter should be deepened and further considerations might direct the debate and sensitization policies.

**Keywords:** sexual rights, LGB, survey

**Conflict of Interest and Disclosure Statement:** None.

## SOCIAL AND PSYCHOLOGICAL CORRELATES OF TRANSPHOBIA



Antonio PRUNAS, Annalisa ANZANI, Marco DI SARNO  
Department of Psychology, Milan-Bicocca State University, Milan, Italy

**Introduction and objectives:** Hill (2002) defines transphobia in terms of "emotional disgust toward individuals who do not conform to society's gender expectations" (Hill and Willoughby 2005, p. 533). While there is established literature on homophobia, transphobia is still an understudied area, particularly in terms of the psychological variables implied.

Aim of the present study is to assess which socio-demographical and psychological variables (psychopathology, defense mechanisms and pathological personality traits) are associated with transphobia in a sample of Italian University students.

**Population sample:** 165 students were voluntarily recruited among those attending 3 public universities in Milan (Italy), by word of mouth and ads posted in public places. 49 were cisgender males (29.7%) and 116 cisgender females (70.3%); mean age was 24.32 years ( $SD = \pm 4.887$ ; age range: 18–49 years). As for sexual orientation, 132 participants (80%) were self-identified exclusively heterosexual, while 33 were self-identified homosexuals, bisexuals or asexuals.

**Methods:** The students completed a battery of questionnaires (presented in randomized order) including:

- the Transphobia Scale (Nagoshi et al., 2008);
- the Response Evaluation Measure 71 (Steiner et al., 2001; Prunas et al., 2009), to assess defense mechanisms;
- The Symptom Checklist–90–Revised (Derogatis et al., 1993) as a measure of psychopathology;
- Personality Inventory for DSM-5, brief version (Krueger, Derringer, et al., 2011), to measure personality traits.

**Results:** Results show that higher levels of transphobia were associated with: younger age ( $\beta = -0.188$ ,  $p < 0.01$ ), male gender ( $\beta = 0.251$ ,  $p < 0.001$ ), right-wing political orientation ( $\beta = 0.304$ ,  $p < 0.001$ ), exclusive heterosexual sexual orientation ( $\beta = -0.197$ ,  $p < 0.01$ ), religious beliefs ( $\beta = -0.146$ ,  $p < 0.05$ ), lower use of mature defense mechanisms ( $\beta = 0.205$ ,  $p < 0.01$ ) and higher Antagonism ( $\beta = 0.191$ ,  $p < 0.05$ ).

**Conclusion:** People with higher levels of transphobia show a specific psychological profile characterized by a less mature defense style and high levels of antagonism. Implications for clinical practice and prevention of transphobia will be discussed.

**Keywords:** transphobia, prejudice, gender identity

**Conflict of Interest and Disclosure Statement:** None.

## GENDER IDENTIFICATION AND TRANSITION PATH IN ITALIAN TRANS POPULATION: THE DECLINE OF THE GENITALS CENTRALITY



Paolo VALERIO<sup>1</sup>, Roberto VITELLI<sup>1</sup>, Anna Lisa AMODEO<sup>2</sup>, Alain GIAMI<sup>3</sup>, Cristiano SCANDURRA<sup>4</sup>

<sup>1</sup>Department of Neurosciences and Reproductive and Odontostomatological Sciences, University of Naples Federico II, Naples, Italy; <sup>2</sup>Department of Humanistic Studies, University of Naples Federico II, Naples, Italy; <sup>3</sup>Inserm – Cesp, Le Kremlin Bicêtre, France; <sup>4</sup>SIInAPSi Center, University of Naples Federico II, Naples, Italy

**Introduction & objectives:** In Italy, studies assessing the multifaceted trans subjective experiences are still very limited. The current study was aimed at establishing the internal diversity of Italian trans individuals and investigating the role played by medical procedures within the process of gender stabilizing processes. Two main indicators (sex assigned at birth and gender self-identification) were used to analyzing medical and legal pathways of this population.

**Population sample:** The sample was constituted by 167 trans participants (71 female-to-male [FtM] and 96 male-to-female [MtF]) who ranged from 18–66 years of age.

**Method:** A quantitative approach was used. The method of recruitment maintained a balance between community organizations and medical networks.

**Results:** The majority of FtM and MtF participants self-identified as "Trans man" (40.8%) and "Trans woman" (31.3%), respectively, showing the prevalence of a non-binary gender identification. Only 12.6% of participants had undergone Gender Affirming Surgery (GAS) (7.0% of FtM Vs 16.7% of MtF), while a higher percentage (24.6%) had requested for a change in civil status (19.7% of FtM Vs 28.1% of MtF). Furthermore, our results indicated that, in both MtF and FtM participants, an individual's gender identification influenced the process of care. Indeed, it emerged that more the identity was binary ("Man" and "Women") more steps of transition were actualized. On the contrary, in trans individuals who self-identified as non-binary ("Trans women", "Trans men", "Trans", or "Other") the steps of transition significantly decreased.

**Conclusion & recommendations:** Our findings demonstrate a strong heterogeneous identification of the Italian trans people, whose definition cannot be restricted to binary categorization, hormonal treatment, or GAS. It means that, even in Italy, the centrality of the genitals and the importance of surgery are undergoing a decline. Findings have important implications for both social policies and clinical practice.

**Keywords:** trans, gender identification, transition

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