

Gender dysphoria (GD) in young children and adolescents in Italy is a phenomenon still largely under-observed. Families with a child presenting a gender non-conforming self-perception and behaviors may easily experience discomfort and need psychological assistance. Recent international research suggests that both parents and transgender adults perceive professionals as not always well educated about gender identity issues. At the same time several studies indicate that GD youth is exposed to various risks for mental health and need specialized care. Recently, in Italy some specialized centers for GD in childhood and adolescence have been developed. The main aim of this symposium is to offer a description of such new clinical scenario. Contributions focus on the specialized centers of Turin, Florence, Milan, Naples and Rome. Caldarera and colleagues present the preliminary findings of a multicentric study aimed at systematically collecting national data regarding the characteristics of Italian GD youth. Fortunato and colleagues explore the mental health professional reactions to gender non-conforming children and adolescents, the activities of Italian specialized centres and their network with other mental health professionals. Ristori and colleagues focus on the psychopathological features associated with GD in adolescence. Finally, the study of Frigerio and colleagues explores experiences and representations related to GD among a group of parents of transgender adolescents.

CLINICAL PRESENTATION OF GENDER DYSPHORIA AND GENDER VARIANCE AMONG ITALIAN CHILDREN AND ADOLESCENTS: A MULTICENTRIC STUDY

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In 2012 a national network of the Italian gender clinics for children and adolescents was established within the Italian ONIG (Osservatorio Nazionale sull'Identità di Genere), and developed a shared protocol of assessment and care in line with international guidelines (WPATH) and the indications of DSM-5 by APA (2013). In recent years, similarly to what happened in other countries, the clinics received an increasing number of contacts by families of gender variant children and adolescents. The network set a multicentric study in order to systematically collect national data regarding the features of Italian gender dysphoric/gender variant children and adolescents. We collected data from the socio-demographic sheet and from the psychological case history form (filled out by the professionals of each participating centre) related to all children and adolescents consecutively referred to the clinics of Torino, Roma, Bologna and Napoli. We analysed information about history of gender identity development; education; perceived quality of family and peer relations; associated psychological difficulties. Demographic characteristics and association between variables were tested through descriptive and multivariate statistics. We collected the data about 114 children and adolescents aged 3-18 ($M = 12.78$; $SD = 4.27$). Preliminary analyses showed a progressive increase across years of the number of referrals;

participants' assigned sex at birth was female for 54.2% of the group. Moreover, the gender variant and the gender dysphoric subgroups showed significant differences in relation to gender identity development history, family and peer relations, and associated psychological difficulties (for each variable: $p < .01$). The increasing number of referrals indicates the need of continuing with research in order to increase the knowledge about the factors that support the wellbeing of Italian gender variant children and adolescents.

PSYCHOLOGISTS AND PAEDIATRICIANS' RESPONSE TO GENDER VARIANT CHILDREN AND ADOLESCENTS IN ITALY AND THE MODEL OF INTERVENTIONS

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Gender dysphoria (GD) in developmental age is a complex phenomenon that causes significant distress and needs clinical attention. Nowadays, studies on the prevalence of GD are scarce and consensus about the best clinical practice is currently under debate. In several countries the number of patients referred to gender identity clinics is high and increasing. In Italy the phenomenon is still hidden and the cases seen by the Italian centers are limited. The aims are to explore the mental health professional response to these cases, to ascertain the knowledge and experience about GD of professionals, to explore the functioning of the Italian specialized centres and their network with other mental health professionals. An ad hoc