

socioeconomic class, while 31.4% were from lower social class. 467 [54.9%] reside in urban towns. Most of the adolescents (61.1%) used the internet for academic purposes while 32.8 % used it for social interactions. Majority used their personal phones. Internet addiction was found in 88.1% of the respondents (24.9% had mild, 59.6% had moderate while 3.6% had severe) and a good number (81.1%) perceived addiction as bad. Addiction was significantly associated with the respondent's age ($p = 0.043$), mother's level of education ($p = 0.023$), family size ($p = 0.021$), place of residence ($p = 0.035$), alcohol intake ($p = 0.017$), smoking ($p = 0.015$), substance use ($p = 0.001$) as well as duration of internet use. ($p < 0.001$). It was predicted by male gender (AOR: 2.054; CI: 1.200–3.518), early adolescent age group 10 to 13 years (AOR: 0.115; CI: 0.015–0.895) as well as having used internet for less than 6 months (AOR: 0.301; CI: 0.189–0.479).

Conclusions: There was increased prevalence of Internet addiction following the lock down of the COVID 19 pandemic. The associated factors found in this study will guide decisions in the planning of appropriate care for the adolescents when this pandemic ends.

Sources of Support: Nil.

136.

A TRYING TIME: PROBLEMATIC INTERNET USE (PIU) AND ITS ASSOCIATION WITH DEPRESSION AND ANXIETY DURING THE COVID-19 PANDEMIC

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Purpose: Problematic Internet Use (PIU) is defined as uncontrollable internet use associated with psychosocial or functional impairment that is not due to a primary psychiatric diagnosis. PIU has been measured using different screening tools such as the Young Diagnostic Questionnaire (YDQ) for Internet Addiction or the Internet Addiction Tool (IAT) and the pre-pandemic prevalence has been variable at 0–26.3%. The prevalence using the Problematic and Risky Internet Use Screening Scale (PRIUSS) is estimated at 9–11.1% in American college-aged students. PIU has also been linked with a negative impact on mental health (depression, anxiety, ADHD etc). The purpose of this study is to determine the prevalence of PIU using the PRIUSS screening tool and its relationship with depression and anxiety among adolescents and young adults during the COVID-19 pandemic.

Methods: Eligible participants 12 years and older, who presented to the Adolescent Medicine clinic from January 4, 2021 to June 30, 2021, were given three screening tools. They were the PHQ-9A (Patient Health Questionnaire-9A), GAD-7 (General Anxiety Disorder-7), PRIUSS and a survey that asked about demographics, schooling and pre-existing diagnosis of anxiety and/or depression. Fisher's exact test, Mann-Whitney test and Pearson and Spearman correlations were performed.

Results: The responses of 447 unique participants were analyzed and the ages ranged from 12–21 years old (22% were 12–14 years, 71% were 15–18 years and 7% were 19–21 years). Of the sample, 96% identified as female, 95% were enrolled in school and all had access to an electronic device(s). Regarding pre-existing conditions, 33% ($n=148$) had anxiety, 29% ($n=128$) had depression and 22% ($n=97$) had both anxiety and depression. Sixty percent ($n=268$) did not have a pre-existing diagnosis of either anxiety or depression. In our sample, 58% had a positive GAD-7 screen, of which 54% ($n=146$) did not have a pre-existing diagnosis of anxiety. Similarly, 58% had a

positive PHQ-9A screen of which 58% ($n=150$) did not have a pre-existing diagnosis of depression. A positive PRIUSS score was observed in 18% of our participants. Of those, 13% ($n=36$) did not have a pre-existing diagnosis of either anxiety or depression, 21% ($n=31$) had a pre-existing diagnosis of anxiety, 27% ($n=35$) had a pre-existing diagnosis of depression and 24% ($n=23$) had a pre-existing diagnosis of depression and anxiety. In our study, there was a positive association between PHQ-9A and GAD-7 scores and PRIUSS score ($p<0.001$). Analysis also showed positive correlation between PRIUSS score and pre-existing diagnosis of depression ($p<0.001$).

Conclusions: This study showed a higher prevalence of PIU using the PRIUSS screening tool scale during the COVID-19 pandemic. It demonstrated the importance of screening for depression and anxiety as over half the sample had positive screens without underlying diagnosis of depression and anxiety. Our study showed a positive correlation between PRIUSS scores and pre-existing diagnosis of depression, positive GAD and PHQ 9 A scores. Based on these findings, providers should consider screening for PIU in patients with underlying depression as well as positive mental health screens.

Sources of Support: Not Applicable.

RESEARCH POSTER PRESENTATION II: MEDIA USE/ADOLESCENT PHYSICAL HEALTH

137.

PARENTAL PERCEPTIONS OF THE IMPACT OF SUMMER MEDIA HABITS ON ADOLESCENT PHYSICAL HEALTH

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Purpose: Adolescent interactive media use increased dramatically during the Covid-19 pandemic, both for remote learning and socializing. Pandemic lockdown and media use contributed to a spike in mental health issues, but less is known about physical consequences of prolonged media use or the individual characteristics and media use habits that predict these physical outcomes. With many restrictions lifted in summer 2021, changes in adolescents' media use habits and health effects can help predict the "new normal."

Methods: A sample of 415 parents of adolescents in grades 9–12 was recruited by Alchemer using existing online panels as part of a nationwide online survey of parents of school-aged children ($N = 1,447$). Quota sampling was used to obtain a diverse sample. Parents completed a 15-minute anonymous survey about their child's summer media use and physical complaints including eye strain, neck or back pain, headaches, and fatigue. Other questions assessed habits of media use, including simultaneous use of multiple screens ("multitasking") and nighttime media use. Parents provided the number of behavioral health diagnoses of their child including ADHD, depression, anxiety, learning disabilities, and autism spectrum disorder. We conducted logistic regressions to examine associations among individual characteristics, media use patterns, and physical symptoms.

Results: Most adolescents used screen media more during the summer of 2021 than during the 2020–2021 school year (65.5%) or the summer of 2020 (53.8%). 71.3% of parents reported that their child experienced at least one physical symptom "sometimes" or more frequently following a typical day of media use. After controlling for demographic variables, "multitasking" frequency was linked to experiencing eye strain (OR = 1.01, CI = 1.00, 1.02), back or neck pain (OR = 1.02, CI = 1.01, 1.03), headaches (OR = 1.02, CI = 1.01, 1.03),

and fatigue (OR = 1.02, CI = 1.01, 1.03). The later that adolescents stopped using media at night, the more likely they were to experience fatigue (OR = 1.10, CI = 1.01, 1.20). Using media to view short videos was related to a lower odds of experiencing back or neck pain (OR = .55, CI = .32,.93). Finally, the greater the number of behavioral health diagnoses the higher the likelihood that an adolescent would experience back or neck pain (OR = 1.45, CI = 1.15, 1.82), headaches (OR = 1.59, CI = 1.26, 2.01), or fatigue (OR = 1.91, CI = 1.48, 2.47).

Conclusions: “Multitasking” was consistently associated with physical symptoms, although the association was small. Late night media use likely reduces and interferes with sleep, thereby contributing to fatigue. Behavioral health conditions may predispose adolescents to certain use habits, including physical positioning, that could increase physical symptoms associated with screen use. Until further research clarifies mechanisms linking media use to physical symptoms, encouraging the use of one screen at a time and earlier cessation of use may help reduce these problems.

Sources of Support: Digital Wellness Lab.

RESEARCH POSTER PRESENTATION II: MEDIA USE

138.

HOW MUCH IS TOO MUCH? SCREEN TIME AMONG YOUNG ADOLESCENTS IN SWITZERLAND

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Purpose: The literature indicates that adolescents should spend less than two hours a day in front of a screen, although more recent research indicates that up to 4 hours would be acceptable and recommends an update of this limit regarding the generalized access to screens. The aim of this research was to compare the characteristics of adolescents depending on self-reported daily screen time.

Methods: Data were collected in school among tenth graders (N=3006; mean age 13.6) between October 2019 and February 2020. Three groups were created according to self-reported daily screen time: under 2 hours (G<2), between 2 and 4 hours (G2-4), and over 4 hours (G>4). Groups were compared at the bivariate level and all significant variables (p<.05) were entered in a backwards multinomial logistic regression using G<2 as the reference category. Results are presented as relative risk ratios (RRR).

Results: Although significant in the bivariate analysis, considering oneself a below average student, relationship with mother, self-reported low socioeconomic status, relationship with father, and living with both parents were subsequently eliminated in the stepwise regression process. At the multivariate level, and compared to G<2, those in G2-4 were older (RRR: 1.20), and more likely to report lower emotional well-being (RRR: 1.40), being overweight (RRR: 2.05), to consider their screen time as excessive (RRR: 4.80) and reporting sleeping troubles (RRR: 1.46). No differences were found for gender, problematic internet use, or extracurricular sport practice. Compared to G<2, those in G>4 were older (RRR: 1.87) and more likely to be males (RRR: 1.48), overweight (RRR: 4.23), problematic internet users (RRR: 3.50), to consider that their screen time as excessive (RRR: 12.94) and reporting sleeping troubles (RRR: 1.97). They were also less likely to practice extracurricular sport (RRR: .57). No differences were found for emotional well being.

Conclusions: Our results indicate that young adolescents tend to do less well as screen time increases, especially males. Nevertheless, this

effect seems to be independent of their familiar, academic or economic situation. It is worth noting that they are well aware that their screen time is excessive. This finding could imply that self-content might be a better approach than just limiting time. Prevention strategies should probably be less strict on the 2-hour limit and take advantage of the self-assessment of young adolescents regarding their screen time. Such strategies should also be gender-specific. Moreover, prevention should be more focused on content than merely on duration.

Sources of Support: Direction Générale de la Santé du Canton de Vaud.

RESEARCH POSTER PRESENTATION II: MENTAL HEALTH/COVID

139.

“WE ARE GOING ON A WASTELAND, WE DO NOT KNOW WHERE WE ARE GOING ...” THE VISION OF THE FUTURE POST-PANDEMIC COVID-19: A QUALITATIVE STUDY FROM THE POINT OF VIEW OF YOUNG PEOPLE IN SWITZERLAND

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Purpose: This qualitative research aimed to explore the vision of the future of adolescents in the context of the COVID-19 pandemic.

Methods: Twenty-one (12 females) individual interviews were conducted between August 2020 and January 2021 with adolescents aged 14-19 years (median 16). We used a diversified sample in terms of family type, residence, sibship and occupation. A content analysis was performed.

Results: For their personal future, most participants talked about education and work. Some participants wondered about the effect of pandemic on their grades, especially when difficulties preexisted or during transitions (e.g., from mandatory school to post-mandatory school). Some participants faced failures and refusals for educational projects (e.g., find an apprenticeship or repeat a year) during the pandemic and had to change their plans sometimes in vain leading to precarious situations. “I am stuck. At the last minute, I have to look for a solution, an apprenticeship. Knowing that people who have apprenticeship projects started looking at the beginning of the year and not at the last minute [...]. “(Girl, 16 years old). Very few participants talked about family future. Some even reported that the pandemic had no impact on the daily family life, particularly when no complications related to the virus were experienced. When the family future was mentioned, worries were mostly on the academic future of siblings. “For her (sister), I don’t know how she will do it either [...]. She has her exams at the end and she has already missed 4 months of classes, it’s almost half a year [...].” (Boy, 18 years old). In terms of societal future, some participants thought that people will have to learn how to live with the virus and sanitary measures. For some participants, general vaccination would be the only solution, while for others it would not stop the barrier gestures and infections because of a lack of hindsight. Some positive and negative changes in terms of behaviors and habits among the population were reported. People would be less focused on their work, less stressed and more aware of climate changes. “[...] Perhaps we will be more attentive to the environment because during lockdown we saw the return of dolphins and there was a drop in the level of CO2 ... I think it could teach us to respect the environment better.» (Girl, 17 years old). However, more aggressiveness, less