In this period, an increase of adolescents without previous mental health follow-up was observed (44% LOCK vs. 22% NOLOCK). **Conclusions:** Our work supports the hypothesis that the COVID-19 pandemic caused a change in psychiatric care in the ED. It also shows how lockdown changed the attendance in psychiatric emergencies, and also in the later community care attendance. Changes are detected in emergency care for adolescents during the pandemic compared to the previous year. Strikingly, our study does not reflect a quantitative increase in the demand. It would be of interest to continue collecting data after the time of the present project.

Disclosure of Interest: None Declared

## **EPP0574**

## Students' emotional well-being and religiosity during the COVID-19 pandemic- an international study in 7 countries

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**Introduction:** There are no conclusive findings about the possible protective role of religion on students' mental health during the COVID-19 pandemic. Therefore, more research is needed.

**Objectives:** The purpose of this study was to assess the relationship between the level of emotional distress and religiosity among students from 7 different countries during the COVID-19 pandemic. **Methods:** Data were collected by an online cross-sectional survey

that was distributed amongst Polish (N = 1196), Bengali (N = 1537), Indian (N = 483), Mexican (N = 231), Egyptian (N = 565), Philippine (N = 2062), and Pakistani (N = 506) students (N = 6642) from 12th April to 1st June 2021. The respondents were asked several questions regarding their religiosity which was measured by The Duke University Religion Index (DUREL), the emotional

distress was measured by the Depression, Anxiety, and Stress Scale-21 (DASS-21).

Results: Egypt with Islam as the dominant religion showed the greatest temple attendance (organizational religious activity: M=5.27 $\pm$ 1.36) and spirituality (intrinsic religiosity: M=5.27 $\pm$ 1.36), p<0.0001. On another hand, Egyptian students had the lowest emotional distress measured in all categories DASS-21 (depression: M=4.87±10.17, anxiety: M=4.78±10.13, stress: M=20.76±11.46). Two countries with the dominant Christian religion achieved the highest score for private religious activities (non-organizational religious activity; Mexico: M=3.94±0.94, Poland: M=3.63±1.20; p<0.0001) and experienced a moderate level of depressive symptoms, anxiety, and stress. Students from Mexico presented the lowest attendance to church (M=2.46±1,39) and spirituality (M=6.68 $\pm$  3.41) and had the second highest level of depressive symptoms (M=19.13±13.03) and stress (M=20.27±1.98). Philippines students had the highest DASS-21 score (depression: M=22.77±12.58, anxiety: M=16.07±10.77, stress: M=4.87±10.08) and their level of religiosity reached average values in the whole group. The performed regression analysis confirmed the importance of the 3 dimensions (organizational religious activity, nonorganizational religious activity, intrinsic religiosity) of religiosity for the well-being of students, except for the relationship between anxiety and private religious activities. The result was as presented for depression: R<sup>2</sup>=0.0398, F(3.664)=91.764, p<0.0001, SE of E: 12.88; anxiety: R<sup>2</sup>=0.0124, F(3.664)=27.683, p<0.0001, SE of E: 10,62; stress: R<sup>2</sup>= 0.0350, F(3.664)=80.363, p<0.0001, SE of E: 12.30. Conclusions: The higher commitment to organizational religious activity, non-organizational religious activity, and intrinsic religio-

activity, non-organizational religious activity, and intrinsic religiositywas correlated with the lower level of depressive symptoms, stress, and anxiety among students during the COVID-19 pandemic, but taking into account factors related to religiosity explains the level of emotional well-being to a small extent.

Disclosure of Interest: None Declared

## **EPP0575**

## Challenges and Factors Affecting Child, Adolescents, Young Adults, and Their Parents in Returning to School After Remote Learning in COVID Pandemic

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**Introduction:** The COVID pandemic caused an unprecedented public health crisis and adversely impacted children's well-being. It has negatively affected children's mental health due to social isolation, human losses, and remote learning. Our goal is to learn about the challenges and factors that these children and young adults face upon returning to school and college, which could further decline their mental health. We also need to understand parents' concerns about this transition to a back-to-school routine.