

Basic results summary

ISRCTN41755922 — RECONNECT: Remedying transient loneliness

Participant Flow

Stage	N
Students who registered for RECONNECT across 3 editions (2022, 2023, 2025) and completed the baseline survey	169
Comparison group of non-participating students recruited for the study	205
Total baseline survey responses (RECONNECT + comparison)	374
Of the 169 RECONNECT registrants: completed the programme and the endline survey (analysed pre-post)	83 (49%)
Of the 169 RECONNECT registrants: did not complete an endline survey (dropout)	86 (51%)
Total survey responses collected across the study (baseline + endline)	457

An attrition (dropout) analysis found no evidence that the 86 who did not finish differed from the 83 who did, on loneliness ($p=0.577$), satisfaction with life ($p=0.637$) or social integration ($p=0.257$) at baseline — i.e. dropout appears unrelated to baseline wellbeing.

Baseline Characteristics

All respondents were in their early 20s.

Characteristic	RECONNECT registrants (N=169)	Comparison group (N=205)
Female	65% (n=109)	45% (n=92)
Male	34% (n=57)	30% (n=61)
Not reported / other	n=3	~25% (n=45+7 undisclosed/missing)
Dutch nationality	40% (n=67)	not separately reported
International student	42% (n=71)	not separately reported
Nationality not reported	n=31	—
Disposable monthly income €500–€1000	~50%	~50%
Faculties represented	all 7 university faculties	all 7 university faculties

At baseline, RECONNECT registrants were significantly lonelier and reported lower wellbeing than the comparison group (see Outcome Measures below), while not differing from them on family belonging, perseverance, or being in a romantic relationship.

Outcome Measures

Primary outcome: Loneliness (3-item UCLA-derived Loneliness Scale, range 3–9, higher = more lonely)

Comparison	RECONNECT	Other group	Statistic
Baseline: RECONNECT registrants vs comparison group (Welch t-test)	6.49 (SD 1.80)	5.19 (SD 1.75)	$p<0.001$
Pre-post: baseline vs endline, RECONNECT participants (Wilcoxon signed-rank)	6.4 (baseline)	6.1 (endline)	$p=0.021$

Multivariate regression (robust/clustered SE, controlling for perseverance, family belonging and romantic-relationship status) confirmed both effects: registrants were significantly lonelier than the comparison group at baseline ($b=-1.32$, $p<.01$, comparison group relative to RECONNECT), and participation in RECONNECT was associated with a significant decrease in loneliness from baseline to endline ($b=-0.41$, $SE=0.159$, $p<.01$).

Secondary outcome: Satisfaction with life (SWL, 5-item scale, range 6–35, higher = more satisfied)

Comparison	RECONNECT	Other group	Statistic
Baseline: RECONNECT registrants vs comparison group (Welch t-test)	21.3 (SD 5.92)	25.2 (SD 5.48)	$p<0.001$
Pre-post: baseline vs endline, RECONNECT participants (Wilcoxon signed-rank)	21.5 (baseline)	22.9 (endline)	$p<0.001$

Regression: comparison group reported higher SWL than RECONNECT registrants at baseline ($b=3.94$, $p<.01$); participation in RECONNECT was associated with a significant increase in SWL from baseline to endline ($b=2.12$, $SE=0.470$, $p<.01$).

Secondary outcome: Social integration (Keyes' Social Wellbeing subscale, range 2–14, higher = more integrated)

Comparison	RECONNECT	Other group	Statistic
Baseline: RECONNECT registrants vs comparison group (Welch t-test)	7.93 (SD 2.25)	10.1 (SD 2.25)	$p<0.001$
Pre-post: baseline vs endline, RECONNECT participants (Wilcoxon signed-rank)	12.2 (baseline)	12.9 (endline)	$p=0.075$ (n.s.)

Regression: comparison group reported higher social integration at baseline ($b=2.98$, $p<.01$); the pre-post change for RECONNECT participants was not statistically significant ($b=0.50$, $SE=0.344$, $p>.1$).

Individual-level change (RECONNECT participants, N=83)

Outcome	Increased	Decreased	Unchanged
Loneliness	17%	34%	49%
Satisfaction with life	58%	29%	13%
Social integration	46%	34%	20%

Adverse Events

No adverse events were reported by participants or programme facilitators during RECONNECT. The intervention consisted of low-risk social and educational activities (group talks, informal social gatherings, peer-organised outings); no formal adverse-event monitoring procedure was implemented, consistent with the non-clinical nature of the intervention and the ethics approval granted (EACLM ref. 2022-05).