Overview/Abstract

Youth and emerging adults in the United States, defined as individuals ages 15 to 29¹⁻³, were classified as the loneliest generation given their high levels of chronic loneliness⁴, an identification made in 2018 predating the COVID-19 pandemic. **Chronic loneliness, or the persistence of loneliness over time, is a preventable, growing public health problem among youth and emerging adults.**⁵⁻⁷ Chronic loneliness among young people can lead to significant physical, social, and emotional impairments (e.g., depression, anxiety, substance misuse), which if left untreated, can extend well into adulthood.⁸⁻¹³ Initial research has demonstrated that recent migrant youth and emerging adults (henceforth referred to as REMYEA), those who migrated to the United States as children or within the past five years, are especially vulnerable to experiencing chronic loneliness.¹⁴⁻¹⁹ **However, there is a lack of intervention research on detecting, mitigating, and addressing the effects of chronic loneliness for this underserved population.**

The overarching goal of this one-year study is to develop the content for the first comprehensive, culturally-responsive loneliness reduction intervention prototype for REMYEA to be tested in a subsequent study intervention trial R34 application submitted to the NIMHD. With an OVPR seed grant, the research team will be able to perform three research activities: (1) conduct five focus groups involving 30 community organizational leaders and local health agencies serving REMYEA in medically underserved communities in New York City and Long Island²⁰⁻²¹ to identify essential content areas for the loneliness reduction intervention from the perspective of providers; (2) perform outreach and recruitment to assemble a REMYEA Community Collaborative Board (CCB) involving representatives from at least 10 community health and social service organizations serving REMYEA in the aforementioned medically underserved communities; and (3) develop, in collaboration with the CCB, an intervention prototype package operating at the individual (REMYEA) and organizational (local community organizations) levels that implements hybrid tele-health and in-person social connection programming to increase detection and reduction of chronic loneliness.