# Social Isolation in an Ostomy Population

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#### Introduction:

Social isolation is not uncommon in a population that has undergone life-altering surgery. The extent to which social isolation is permanent may influence physical and mental well-being. This study investigates social isolation prevalence in the general population of ostomates in North America and the United Kingdom (UK) (n=2,068).

#### Methods:

The data is derived from the Ostomy Comprehensive Health and Life Assessment<sup>1</sup>; a validated and reliable survey distributed in North America and the UK. The instrument is a self-reported multi-item survey querying major facets of the lives of persons having undergone ostomy surgery. The survey instrument consisting of 113 items has been assessed for construct and content validity, and overall reliability (Cronbach's alpha=0.84) of item-related responses.

Social isolation is derived using Hawthorne's Friendship Scale, a validated and reliable index of social isolation<sup>2</sup>.

#### **Results and Discussion:**

Social isolation, as indexed by Hawthorne ranges from "very socially isolated" to "very socially connected". Nineteen percent of study subjects demonstrated low levels of social support, or being very socially isolated. For those 24 months or less post-surgery, 20 percent demonstrated this. Of those more than 24 months post-surgery, 19 percent were so categorized. Overall, no significant differences were noted in the isolation index for those less than 24 months post-surgery, or those greater. However, when categorized by geographic location, North American respondents indicated 21 percent of those less than 24 months post-surgery as having low levels, or being very socially isolated, compared to 16 percent of those greater than 24 months post-surgery (p=0.0213). For Italian respondents, this is 28 and 18 percent respectively (p=0.0391). For UK respondents, this is 16 percent and 21 percent respectively (p=0.0207). The data suggest that variance in social isolation may be subject to time and regional or cultural influences.

**Table 1: Isolation** 

		Time from surgery					
Isolation Scale:	To	tal	less than or equal to 24months		greater than 24 months		
	n	%	equal to 2	4111011111S %	24 III	011UIS %	
Very socially isolated	238	8.0	91	8.7	147	7.5	
Isolated or low levels of social support	332	11.1	115	11.0	217	11.1	
Some social support	438	14.6	151	14.5	287	14.7	
Socially connected	661	22.1	241	23.1	420	21.5	
Very socially connected	1325	44.3	444	42.6	881	45.1	

**Table 2: Social Isolation in North America** 

	Time from surgery			
Isolation Scale:		than or 24 months %	greater than  24 months  n %	
Very socially isolated	58	10.0	61	6.9
Isolated or low levels of social support	65	11.2	84	9.5
Some social support	84	14.4	115	13.0
Socially connected	117	20.1	169	19.1
Very socially connected	258	44.3	456	51.5

**Table 3: Social Isolation in Italy** 

	Time from surgery			
Isolation Scale:	less than or equal to 24 months		greater than 24months	
	n	%	n	%
Very socially isolated	12	13.5	24	9.0
Isolated or low levels of social support	13	14.6	24	9.0
Some social support	13	14.6	59	22.0
Socially connected	26	29.2	86	32.1
Very socially connected	25	28.1	75	28.0

#### References

- 1) The Hollister Ostomy Comprehensive Health and Life Assessment, Hollister Incorporated, Libertyville, Illinois, USA
- Hawthorne G. Measuring social isolation in older adults, development and initial validation of the friendship scale. Soc Indic Res. 2006;77: 521-548.

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Hollister Incorporated has executed this study.

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Table 4: Social Isolation in the UK

	Time from surgery				
Isolation Scale:		s than or	greater than		
	equal to 24 months		24 months		
	n	%	n	%	
Very socially isolated	21	5.7	62	7.8	
Isolated or low levels of social support	37	10.0	109	13.6	
Some social support	54	14.6	113	14.1	
Socially connected	98	26.4	165	20.7	
Very socially connected	161	43.4	350	43.8	

### **Conclusions:**

Social isolation in a population that has undergone life-altering surgery can impact mental and physical health. The extent that it occurs in the ostomy population is not well-documented. This study finds that it occurs in approximately 20 percent of all ostomates and may be subject to regional, cultural, and temporal influences.

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