Abstract

This presentation attempts to explore the possible connection between social structures and dementia. It investigates the relationship between changing social institutions, social alienation and dementia. The working hypothesis is that the observed reduction in confidence in many social institutions today, such as family, religion and political organization leads to increased levels of alienation. In turn alienation leads to higher levels of dementia. The application of this connection occurs primarily in economically developed societies. Finally, a comparison is attempted between economically developed and developing societies. In this way the subject is seen through its broad social dimension. In conclusion, the demented individual is the result of an increasing social pathology, endemic in economically developed societies.

Key words: Dementia, Social Structures, Alienation

Introduction

What I am attempting to do and I will try with this presentation is slightly acrobatic and therefore perhaps risky. I am a sociologist and therefore I see the issue from a different perspective that has to do with social structures. I am not referring to the social epidemiology of dementia. Such knowledge exists and there are far more experts than me to report. International and Greek literature is full of similar studies.

What intrigued me is that dementia as a disease primarily refers to the so-called economically developed countries. Regardless of specific statistical numbers, this fact alone begs the question: Why? Which is the endemic feature of the social structure of "rich" countries leading to higher rates of dementia in the general population?

This answer cannot be found by analyzing micro-level sociological characteristics of the population. It takes a macro-sociological approach that examines the structures of society and the way that they are likely to be associated with dementia.

Based on this thought, I try to explore the following relationship: changes in key social institutions in societies of economically developed countries are leading to alienation. In turn, the growing alienation contributes to dementia.

This study makes use of the functionalist theory of sociology. Through its father, Emile Durkheim, it argues that any change in a social system causes chain reactions in the form of dysfunctions. The argument can be formulated as follows:

Changes in Social Institutions

Changes in Social Institutions is a process that leads to Alienation and then to Dementia. We live in an era characterized by large and abrupt changes. The changes in social institutions and social structure are experienced more directly by more people. One could say that this always happened. The difference is that we believe that these changes are more massive and faster. We react exactly because we are just in the middle of all the changes and we have not figured out yet how to adapt.

Beginning with the social institution of the family, we experience changes that tend to relax previous rigid structures. The definition of 'family' is ever changing, including new, non-standard structures. Examples are single parent families, families of single persons, same sex parents. Additionally, the typical family in economi-
cally more developed countries is decreasing due to the decline in the number of births. Another structural change is the increase in the divorce rate.

Continuing with the social institution of religion, faith and support is shaken as a result of large scandals coming out in public every so often. Regardless of the scandals, the role of religious faith and the church representatives is diminishing in the economically developed countries. Two other social institutions, education and politics, are increasingly characterized by uncertainty and inability to provide clear and trusty leadership.

All these examples show that today's economically developed societies are required to handle highly volatile situations that may lead to personal and social insecurity.

Someone will notice: this is logical acrobatics. There are no studies to prove the causal relationship between social structures and dementia. That is correct. This is exactly what I want to point out: the need for research of this relationship. Also the model I propose does not support the direct relationship between structures and dementia. It presupposes a very important intervening factor: alienation.

Alienation

The analysis of alienation refers to its four main characteristics: the loss of power, loss of meaning, loss of social rules and social isolation (Seeman, 1959).

Loss of power refers to the expectation that the person regardless of his/her actions can not influence the flow of situations as experienced. The person feels very 'small' or weak to express views or organize specific action, because it is believed that nothing will change. According to Marx, this has its roots in industrial society and is applicable to workers in the factories (Seeman, 1959: 784). In practice this means that the person suffers from alienation in the form of loss of power when he realizes the gap between those he would like to do and those he feels capable of doing (Kalekin-Fishman, 1996:97). In the postindustrial society we find increasing applications of power loss, especially if we consider the rapid changes in structure and organization of work. The loss of power is, therefore, the perception that the person lacks the means to achieve his or her objectives.

A second characteristic of alienation is the loss of meaning. The literature of alienation indicates that the loss of meaning is characterized by low expectations about future behavior and expectations. (Kanungo, 1982). In other words, the person loses interest to try for something, as it is believed that there is no gain and therefore not worth the effort. In this sense, the loss of meaning is closely related to the loss of power.

The loss of social norms is the third feature of alienation. It describes a situation where the norms that determine individual behavior have been forfeited and are not regarded as rules of conduct. This aspect refers to the inability to identify the individual with the dominant values of society, or rather with what are perceived as the dominant values of society. It is a situation where it is expected that socially unacceptable behaviors are necessary for achieving defined goals (Mirowski & Ross, 1999). The applications of this dimension beyond the confines of the social sciences have also been applied in literature (Senekal, 2010).

Social isolation is the fourth feature of alienation. It is referred to as the feeling one is cut off from one's community (Kalekin-Fishman, 1996:97). Other researchers emphasize the central role of social isolation in the modern world. Thus, although the social isolation is experienced as a form of stress on a personal level, its roots are deeply embedded in the social organization of the modern world (Neal & Collas, 2000:114). With this increasing isolation, more and more of our daily interactions with others are with persons with whom we do not maintain close social relationships.

The Sudden Changes in Social Institutions Lead to Alienation

The abrupt changes described above cause insecurity and social dysfunction. The malfunction is the weakening of the stability upon which the majority of people depends and consequently, loss of the social base for a growing proportion of individuals. Rapid changes in social institutions, social security, the failure of support networks and the need to redefine human links create cracks in the smooth self-definition of the individual as a member of a social group.

This situation leads to alienation. Individuals are experiencing higher risk to be characterized by social confusion. Consequently, because they lose confidence in the structures of society and to social institu-
tions, they give up their goals. The reports agree: an increasing proportion of the population feels alienated from most social institutions (Black, 2008). It is typical that this happens not only in Greece, which is tried hard lately, but in other economically developed countries (Miller, 2011).

We observe a pattern of giving up all that integrates us into a society. This contributes to social isolation, which as mentioned above is one of the characteristics of alienation. Increasingly, we tend to refer to the individual than the group in a variety of social expressions. (Triandis, 1990). As a consequence, the violation of the normative social framework finds fertile ground and results in the loss of social rules. This in turn leads to loss of meaning and loss of strength. This way, all the characteristics of alienation are in effect. Even if individuals continue to be determined by society, they are increasingly losing their ability to fully integrate in it. Simply, this means alienation.

Alienation Contributes to Dementia

The last stage of the argument that this presentation explores is the relationship between alienation and dementia. The argument is that if there is a growing social alienation, as the previous section argues, this increases the risk of pathology at the individual level. That is, the social alienation contributes to dementia.

I try to explain this association: Individuals feel they are losing their supports as the social constants they have been used to are collapsing. That is, the person feels that the familiar social structures are gradually lost. As a result, and because of fear of exposure to something new, a person closes to himself, does not participate equally in social life, and retreats.

This social isolation creates the foundation on which the epidemiological risk factors for dementia are more likely to increase. We need to exercise caution here: social isolation is not a direct risk factor for dementia. However, we can consider an indirect factor. In conclusion, alienation contributes to dementia.

Dementia in Economically Developed Societies

Generally, the reference to dementia until recently was emphasized in economically developed societies. That gave the impression that dementia is almost exclusively a problem of the "Western lifestyle" without a comparison with the economically developing societies. (Tsolaki, 2002; Alzheimer's Disease International, 2011)

Essentially, this approach supports the central argument of this presentation. Namely, that dementia at the individual level is affected by social institutions and structures. Because the economically developed societies are characterized by higher levels of social alienation and social deconstruction, they have a higher rate of dementia.

Nevertheless, recent surveys indicate that the situation is not so simple. The reports agree that dementia rates in economically developing societies are growing rapidly and in some cases with more than double increase rates compared with economically developed societies. (Alzheimer's Disease International, 2008).

On a first glance, these findings seem to refute the argument of this presentation. If dementia is affected by social alienation, then it follows that the economically developing societies, which are characterized by less alienation, should not have high rates of dementia.

However, detailed analysis of the diagnoses of dementia worldwide shows that the increase of cases of dementia is not due simply to increased biological risk factors. Research suggests that in addition we should take into account the socio-cultural background that affects these risk factors. (Prince et al, 2003).

Therefore, we can conclude that social alienation begins to increasingly affect economically developing societies. This can happen because of the easy and continuous proliferation of so-called "Western lifestyle" with all the advantages and all its consequences. Alienation, as a consequence of social change happens in an increased rate not only in the richest societies but also in developing societies.

Conclusions

This paper attempts to link structural characteristics that appear mostly in economically developed societies by increasing the rate of dementia in these societies. This connection cannot be direct as to cause-effect relationship. However, the paper presents the social context which it is argued that probably affects the actual epidemiological characteristics that contribute to dementia.

The social context today more than ever, is characterized by significant and rapid changes in social insti-
tutions and structures of society. These changes, as the functionalist theory argues, end up as social dysfunctions and lead to alienation. The next stage is the result of alienation. The growing alienation is likely to be associated with an increased risk of dementia.

Therefore, it is interesting and important to see whether alienation leads to higher rates of dementia in a population. This presentation suggests the need for quantitative investigation of this relationship to determine the causal connection of these two.

References