

Social contagion

We've all become familiar with viral contagion.

This briefing explains the concept of social contagion.

After reading this, see our leaflet 'The transgender craze' for how this concept relates to the surge in transgenderism in recent vears.

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Defining social contagion

Beliefs, feelings and behaviours can be contagious. We all know people whose enthusiasm is infectious. But harmful and irrational things can also spread from person to person. This is often called 'social contagion'. It covers many things, from the rapid spread of anorexia and self-harm among young people to outbreaks of mass hysteria. Even some medical symptoms have been found to be socially contagious.

Often 'contagions' can appear to come out of nowhere and

spread quickly. At times this can seem almost inexplicable. But psychological or other manipulative techniques, whether used deliberately or not. can convince people to believe or behave irrationally.

Many social contagions are now being spread through online pseudo-communities. These can play a decisive role in manipulating people. They pressure others to engage in damaging activities and so spread the contagion.

This briefing looks at

examples of social contagions and how they spread, including how Christians should understand this phenomenon.

THE WERTHER EFFECT

The 'Werther Effect' is an example of what are known today as social contagions. It refers to copycat suicides, often following a highly publicised case. The term comes from a series of suicides across Europe after the publication of

in the 18th century. The novel is about a young man, Werther, caught up in a love triangle. Tragically, he eventually kills himself.

As the book's popularity grew across Europe, some readers shot themselves with the same kind of pistol Werther used in the novel. One woman even threw herself into a river clutching a copy of the book.1

Johann Wolfgang von Goethe and his book The Sorrows of Young Werther



The Sorrows of Young Werther

Social contagion and mass hysteria

There are many accounts of 'mass hysteria' and 'collective delusions' in history. These dramatic cases show how they can spread between people.

THE 1518 'DANCING PLAGUE'

In July 1518, Mrs Troffea began to dance in the streets of Strasbourg. During the next few days, more than 30 others joined her dancing.

Mystified physicians concluded that 'overheated blood' was the cause. Town councillors built a stage and even employed musicians, hoping that the afflicted might 'dance off' the sickness. This only made matters worse, and around 400 others joined the mania. Reports say some danced until they died of exhaustion.

This is only one example of the medieval 'dancing plagues' that historians now believe were caused by hysterical contagions.²



PANIC IN SCHOOLS

A surprising number of mass hysteria cases take place in schools.

In 2016, several children at Elsa Perea Flores School in Peru began fainting, screaming, experiencing seizures and frothing at the mouth. This spread

to around 80 pupils, with many hospitalised, and even teachers being affected. Pupils claimed to have been chased by a bearded man dressed in black.³

That same year a spate of similar outbreaks took place in schools in Malaysia. Officials struggled to handle the situation, and many schools were forced to close.

One observer said: "It was mass hysteria season and cases were happening non-stop, spreading from one school to another".⁴

TANGANYIKA 'LAUGHTER EPIDEMIC'

In 1962, three students at a school in Kashasha, Tanganyika (now Tanzania), suddenly experienced attacks of laughter and crying, each lasting several hours. This occurred for up to 16 days. The symptoms spread to another 92 pupils, eventually forcing the school to close.

Returning home, the children brought the contagion back to their local villages. Within a few months, one village saw 217 people affected and more schools were shut. When the school re-opened the 'laughter epidemic' re-emerged.

Some estimate around 1,000 people were affected and 14 schools shut over a two and a half year period.⁵ Most attribute this to hysterical contagion.



Social contagion and problem behaviour

Academics describe self-harm – and other behaviours like drug-taking and eating disorders – as 'socially contagious'. For many, these behaviours are 'coping strategies' that try to address underlying struggles. While coping strategies can sometimes alleviate stress, the 'relief' is short-lived and they do not address the underlying issues. Harmful behaviour must be repeated for any relief to continue.

Group settings reinforce and help spread these addictive behaviours in several ways.

'CO-RUMINATION'

This is where a group of friends keep dwelling on their shared anxieties. Through continual discussion and speculation they can dramatically intensify each other's distress. The sense of companionship means group members spur one another on

in problem behaviour. Studies show corumination leads to higher levels of anxiety.⁶

IDENTITY AND COMMUNITY

A problem behaviour can come to define a social group and its members. A subculture is born. Some online communities centre on self-harm or eating disorders. They foster a deep sense of identity and purport to offer shelter to the vulnerable. Group members who consider leaving the lifestyle face rejection from the community. They may even feel the behaviour defines who they are. One person describes "being a mess" as their "entire identity".



i want to get better but being a mess is my entire identity Source: 73,551 notes Feb 18th, out?

PEER PRESSURE AND SOCIAL STATUS

Research shows that problem behaviours like drug-taking, self-harm and eating disorders spread through group pressure. This pressure can come in various forms, including through 'advice', blackmail or rumours. Going further in the problem behaviour is celebrated and leads to individuals gaining social status and approval from the group. Socially rejected people are particularly vulnerable because they are more likely to cluster in groups promoting these harmful behaviours.⁷

Case-study: Anorexia



Anorexia contagions have been observed since the 1980s. Shockingly, they spread even within peer groups at residential clinics. Here, anorexia is viewed as a social identity, with others pressured to imitate. Deanne Jade, founder of the National Centre for Eating Disorders, says:

"...I ask myself if an eating disorder unit is the best place for an impressionable young girl to be... As any inpatient will tell you, a specialist unit is the best place to learn how to be really, really good at anorexia... Some patients have reported bullying and intimidation by the hardcore cases..."⁸

Some websites depict anorexia as a goddess called Ana; an authoritative voice giving direction and identity. Others look professional, offering diet tips, weight-loss pills and laxatives. The online 'pro-Ana' community embraces anorexia as a lifestyle choice. They provoke each other to lose more weight, encourage sharing 'progress', express anger towards outsiders and share in each other's pain. Attempted interventions are often seen as attacking the identity.⁹ In the words of one sufferer:

"I had an illness; I had something few others had; I was special. The anorexia gave me an identity and made me an individual."¹⁰

Accessing the pro-Ana community on social media is easy. A quick search reveals a stream of shocking content. One study found that merely viewing pro-Ana websites made people see themselves as heavier, reporting a greater likelihood of thinking about their weight.¹¹

Some sites offer advice on how to trick doctors or carers into thinking you haven't been starving yourself.¹² Networks like Instagram and Tumblr have tried to restrict such content, but the material is still rife and draws in vulnerable people.¹³

Tips for hiding anorexia

Ana's Angel

"Leave dirty dishes around the house (example: pour a little milk in a bowl...)"

Thinify me

"Wear nail polish to hide the discolouring in your nails from lack of nutrients."

The power of suggestion

Some popular entertainers spectacularly reveal the mind's vulnerability to suggestion. **Derren Brown** persuades his subjects to sit in cold water as though it were a warm bath or drink vinegar like orange juice. He has even convinced some that he was invisible.¹⁴

In tests for new medicines, many sick people can experience genuine benefits from taking a new pill. That's why placebos are always given to one group and the genuine drug to another in order to test its effectiveness. The *nocebo* effect is the opposite: the suggestion that someone will suffer negative symptoms leads to the symptoms themselves. The nocebo effect can spread by social contagion.



THE NOCEBO EFFECT

In one experiment, nocebo expert Fabrizio Benedetti took a group of students into the Alps. He suggested to one of them that thin air could produce migraines. This rumour reportedly spread to more than a quarter of the group and those who heard it began to suffer the worst headaches. Analysis of the students' saliva revealed a change in processes which also occurs in cases of altitude headache.¹⁵ Benedetti said:

"The brain biochemistry changed in the 'socially infected' individuals".¹⁶



Of course, suggestion requires a suggestible subject. But it might only take a little twinge of pain, or some small abnormality, to make someone suggestible and get them to think: "maybe I *am* unwell". Even more people are likely to be taken in by the suggestion if they then begin to show symptoms of some kind.

We can see four parts to this:

- 1. The person is open to suggestion.
- 2. The suggestion is made that they have or soon will have a particular condition.
- 3. The idea takes root, producing psychosomatic symptoms.
- 4. 'Social contagion' results. The more people that exhibit symptoms, the more convincing the suggestion becomes.

Many cases of mass hysteria involve the power of suggestion:

A rumoured gas attack led 35 people to experience fainting, headaches and nausea. The reality: someone had sprayed a harmless cleaning product.¹⁷

Reports of a virus saw more than sixty factory workers experience numbness, dizziness and



vomiting. The reality: no virus was found. The US Public Health Service said the cause was hysterical contagion.¹⁸

Worry about 'electro-sensitivity' led sufferers to experience sickness and insomnia. The reality: sufferers were just as likely to feel the same way when exposed to sham transmitters that don't emit any electromagnetic waves.¹⁹

A biblical view of social contagion



In a fallen world it is no surprise that people can behave irrationally or inexplicably. The Bible points out how absurd it is to bow down to an idol made of half a log, while the other half is burned (Isaiah 44:13-20).

Many examples of irrational group or mob behaviour are found in Scripture. The hundreds of prophets of Baal cut themselves "until their blood flowed" to try to provoke an answer from a non-existent deity (1 Kings 18). God's own people, delivered from slavery by a miraculous display of God's power, are nonetheless ready to choose a leader to take them back to Egypt when difficulty comes (Numbers 14:4).

Romans 1 is clear that people intentionally suppress what they know deep down about God — his existence, power and nature. Nothing could be more irrational than exchanging the truth of gracious loving God for a lie!

The only true source of meaning and identity is lost if people ignore God. They are left fruitlessly trying to find purpose in other things. This search becomes ever more detached from reality as society moves further from biblical standards — the exchanging of truth for lies increases. Drug-taking, self-harm and eating disorders are sad products of a society that has undermined the family and spurned biblical morality. Many, including young people, struggle with poor mental health, feel directionless and lack identity.

Christians want to see people protected from dangerous contagions that entrap rather than help them. It is our calling to "shine like stars" and "hold out the word of life" (Philippians 2:15-16). In Christ, people can escape self-hatred and find divine direction, total restoration and everlasting love.

The recent explosion in gender confusion and transgender ideology is one area that desperately needs this Christian response. The NHS Gender Identity Development Service has seen a more than 3,000 per cent increase in referrals in the last decade; 75 per cent of those

on the waiting list are female. Our separate publication, 'The

transgender craze' argues that these unusually rapid trends are being driven by a social contagion, like some of the examples found in this briefing.



References available at christian.org.uk/Socialcontagion-ref

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