BOX 8.3

The June Bug Disease: A Case of Hysterical Contagion

One summer, a mysterious epidemic broke out in the dressmaking department of a southern textile plant, affecting 62 workers. The symptoms varied but usually included nausea, numbness, dizziness, and occasionally vomiting. Some of the ill required hospitalization, but most were simply excused from work for several days.

Almost all the affected workers reported having been bitten by a gnat or mite immediately before they experienced the symptoms. Several employees who were not afflicted said they had seen their fellow workers bitten before they came down with the disease. However, local, state, and federal health officials who were called in to investigate could obtain no reliable description of the suspected insect. Furthermore, careful inspection of the textile plant by entomologists and exterminators turned up only a small variety of insects—beetles, gnats, flies, an ant, and a mite—none of which could have caused the reported symptoms.

Company physicians and experts from the U.S. Public Health Service Communicable Disease Center began to suspect that the epidemic might be a case of hysterical contagion. They hypothesized that, although some of the afflicted individuals may have been bitten by an insect, anxiety or nervousness was more likely responsible for the onset of the symptoms. On hearing this conclusion, employees insisted that the "disease" was caused by a bite from an insect that was in a shipment of material recently received from England.

In shifting from a medical to a social explanation, health experts highlighted several points. First, the entire incident, from the first to the last reported case, lasted a period of 11 days, and 50 of the 62 cases (80%) occurred on 2 consecutive days after the news media had sensationalized earlier incidents. Second, most of the afflicted individuals worked at the same time and place in the plant. Of the 62 afflicted employees, 59 worked on the first shift, and 58 worked in one large work area. Third, the 58 working at the same time and place were all women; one other woman worked on a different shift, two male victims worked on a different shift, and one man worked in a different department. Moreover, most of these women were married and had children; they were accordingly trying to combine employment and motherhood—often an exhausting arrangement.

The epidemic occurred at a busy time in the plant—June being a crucial month in the production of fall fashions—and there were strong incentives for employees to put in overtime and to work at a high pace. The plant was relatively new, and personnel and production management were not well organized. Thus, the climate was ripe for high anxiety among the employees.

Who, then, got "bitten" by the "June bug," and why? Workers with the most stress in their lives (married women with children) who were trying to cope with the further demands of increased productivity and overtime were most vulnerable. Job anxieties, coupled with the physical manifestations of fatigue (such as dizziness), created a set of symptoms that, given appropriate circumstances, could be labeled as illness. The rumor of a suspicious bug and the presence of ill coworkers apparently provided the appropriate circumstances, legitimizing the illness and leading to the epidemic that resulted.

Source: Kerckhoff & Back, 1968.