

Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

M. A. Tripathi^{1*}, Vikas Sahay², Pirojiya, P. P.³

ABSTRACT

Some mysterious events occur nearly every year in India and several people become victims of such events. It is noticed that this type of events affect particular segments of population which have shared common beliefs. This type of phenomenon transmits collective illusions of threats, either real or imaginary, through a segment of population in a society as a result of rumors and fear. This phenomenon is therefore called Mass Psychogenic Illness (MPI) and has been reported since hundreds of years in different socio-cultural settings. MPI is neither spatially nor temporally confined and can strike anywhere and anytime. One such phenomenon that has characteristics similar to MPI is braid chopping. The braid chopping or hair cutting incidents occurred in different parts of India in the month of July –August 2017. A study was conducted to comprehensively analyze the causal factors of this particular MPI phenomenon. Case study method of research was adopted for this study and 9 cases were studied by using unstructured interview method. These 9 cases were reported in different region of Gujarat. Only police reported cases were studied as investigative team was formed by the Crime Investigation Department, (CID) Gujarat, to reach the bottom of the epidemic and control it as soon as possible. The findings indicate that all the victims shared some common characteristics in terms of gender, level of education, socio economic condition, mental set up, kind of illness during the time of incident, level of stress, satisfaction level with present living conditions, past history, etc.

Keywords: *Victim, Mass Hysteria, Mass Psychogenic Illness, Crime Investigation, Epidemic*

Some mysterious events occur nearly every year in India and several people become victims of such events. It is noticed that this type of events affect particular segments of population which have shared common beliefs. Therefore, it is called Mass Hysteria. Mass Hysteria, also known as Mass Psychogenic illness (MPI) and has been reported for hundreds of years in different socio-cultural settings (Chowdhury, & Brahma, 2005). This epidemic is also known with different terminologies such as collective hysteria, group hysteria, collective obsessional behaviour or epidemic hysteria. This is a phenomenon that transmits collective illusions of

¹ (Assistant Professor (Psy), Department of Forensic Sciences, Raksha Shakti University, Ahmedabad, India)

² (IPS, Director General, Raksha Shakti University, Ahmedabad, India)

³ (DySP, Crime Investigation Department (CID), Gujarat Police, Gandhinagar, India)

*Responding Author

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Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

threats, either real or imaginary, through a segment of population in a society as a result of rumors and fear (memory acknowledgment). Rather than being viewed as a collection of people suffering from individual hysteria (or conversion disorder), epidemic hysteria or mass hysteria is instead seen as a social phenomenon involving otherwise healthy people (Herbert, 1982). It has been described in humans as "very similar to a stampede in the animal world" (O'Donnell, Elliott, & Huibonhoa, 1980). It has also been called a culture-bound stress reaction (Chan, & Kee, 1983). A disturbance of body function that is characterized by neurological, sensory or motor symptoms for which the available medical explanations either cannot explain, or fail to account for the severity of the patient's impairment (Williams, & Kozłowska, 2005). Another name of such disorder, used by classificatory system, is Conversion Disorder, affecting groups of people in schools or other closed communities (Illis, 2002). Mass Hysteria can strike anywhere and anytime. When stressed out, the mind can make the body sick. Outbreaks of such mysterious illness are more common than we believe where psychological stress and anxiety are the main causal factors. It starts from a small part of a country and spreads across regions. Earlier it spread from mouth to mouth so it took time to reach other parts of country but now, due to all pervasive social media communication channels, such events spread very fast in all regions of the country. MPI has been characterized by a group of symptoms without any identified cause, and occurs in those who share a common belief that these symptoms constitute a definite illness (Philen, Kilbourne, McKinley, Parrish, 1989).

Involvement of young people with a preponderance of females is reported in the literature (Boss, 1997; Weir, 2005). These outbreaks are often characterized by the rapid spread of symptoms by 'line of sight trans-mission', i.e. directly watching other affected persons (Jones, et. al., 2000). Mirror neuron system (MNS) may also play a role in the pathogenesis of mass hysteria. Clinical findings indicate that symptoms of mass hysteria were transmitted by sight and sound (Lee, & Tsai, 2010). Recent evidence suggests that MNS plays a key role in emotional contagion – the tendency to catch and feel emotions that are similar to and influenced by those of others (Nummenmaa, Hirvonen, Parkkola, & Hietanen, 2008). Mass hysteria may simply demonstrate the phenomenon of emotional contagion, in which the experience of an emotion spreads to those around us (Hatfield, Cacioppo, & Rapson, 1994). MNS has been proved to be, more or less, gender specific. This is because, when individuals observe an action done by another individual, motor cortex, an automatic reaction of MNS, in females is more active than in males (Cheng et al. 2006). The role of the media is also important as a positive re-enforcer of MPI, which was evident in the epidemic of mass hysteria concerning an imaginary threat from a 'Monkey Man' in East Delhi (Verma, & Srivastava, 2011). Recently, it was manifest in hair cutting or braid chopping epidemic. The incidents of braid chopping was initially reported from the western parts of Uttar Pradesh and gradually, it spread towards Delhi, Bihar, Haryana, Rajasthan.. In Gujarat, the population of migrated people from these states is more and they keep in touch with their families and relatives through phone and social media. But the main source of information is the electronic media with the help of which it gradually spread all over India. People started talking about such incidents on social media. Some fake videos were also uploaded of hair cutting followed by illness and death within three days and that spread all through in Gujarat. Gujarat Home Department took immediate action and formed a special crime investigation team to investigate the truth behind these incidents. The team, consisting of four people, three inspectors from State CID Crime and a Clinical Psychologist from Raksha Shakti University (RSU), was led by a DySP of State CID Crime, Gujarat

METHODOLOGY

The study was descriptive and explorative and case study method of data collection was adopted. Reported cases of braid chopping from different parts of Gujarat were studied. Formal interview technique was used to collect all relevant information. Interview was conducted in a very comfortable environment, with two lady police officers in civil dress being consistently present during the interview. Before the interview, all subjects were explained in detail about the purpose and goal of the interview by the expert researcher. Subjects were interviewed in presence of their acquaintances. They were given full liberty and space to narrate their experiences. No time limit was set for the meeting but the average time for one interview was approximately 1 ½ hours. Total 9 reported cases were studied for this study.

Case No. -1:

60 year old, uneducated, married, Hindu female, belonging to very low socio-economic strata of the society, was the first victim of this epidemic in Gujarat. She complained that someone was moving his hand in her hair while she was sleeping alone in the night. She got scared and terrified, caught her head tightly and ran outside. After about 50 meters, she fell down and became unconscious for nearly half an hour. When she came back to consciousness, a small bunch of hair was found in her hand, which she thought belonged to her. When inquired by the special team, she confessed that she was not sure whether the hair belonged to her or to someone else but the hair was certainly in her hands. During interview, it was learnt that the lady worked as a daily wage laborer in the fields but had stopped working since the last fifteen days due to illness. Her husband was unemployed since last many years as he was suffering from tuberculosis (TB). Her only married son had died at the age of 33yrs and her 3year old grandson had also died after some time in an accident. His daughter-in-law had left her home and married someone else. She had a daughter, who was married to an Auto driver and lived nearby. On the occasion of Raksha Bandana, the daughter had come to meet her mother. The old lady had heard about braid cutting incidents from people. They had both discussed about such incidents as seen on the television. She reported that they had a discussion about her son and the old lady was very sad and weak. Therefore they had visited a doctor and had got some medicine. On the day of the incident, her daughter returned to her home. The old lady was all alone with her ill husband who was sleeping inside the room and she was sleeping in Verandah (Platform). She was in severe distress, feeling low and fearful in the night. At 9:30 pm. this incident happened. In the morning, there was a murder case in the village so the police and media both were present in the village. Somehow, the media came to know about this incident and visited her and took a picture of her with a few hairs in her hand. This was published in a well-known newspaper on 8th August, 2017 and on the same day; it was telecast on different electronic news channels. And within the next two days, police had started getting complaints of the similar incidents from all parts of the State. During our visit, we found that she was not sure whether the hair was her or not. FSL was also present at the police station due to above mentioned murder case inquiry. As per their view, prima facie it didn't look like hair of an old lady. The piece of hair which was presented to the police appeared to be of a young lady. It was also noticed that there was a barber shop very near to the place of the incident.

Case No-2:

A 35 year old, married, Muslim female, educated up to primary level, having two children, living with a physically disabled husband on rental house since last one year. Brother reported that during her childhood, at times she used to fall down and become unconscious

Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

for few minutes and would come to her senses after getting Dargah water. The lady had lost her father at a very young age and due to poor economic conditions; she got married to a man who was unemployed. After some time, she came to know that her husband was suffering from some mental illness. She divorced him after three years of marital life and remarried a divorcee who had a girl child from first wife. She lost her first child from this husband. Husband's girl from first wife got married but was unable to adjust. Therefore, she got divorce and returned to her father's place and since last one month she was here. They had moved from another village to this village about a year back and started a General Store. After her daily domestic work, during her leisure time, she used to sit with the ladies of the neighborhood. On the day of the incident, she was feeling unwell and had visited a doctor who prescribed medicines for the same. She heard about the braid chopping incident from the neighboring ladies along with whom she also watched videos of the same in their mobile phones. She got scared and started apprehending about future misfortunes. On 11th August, 2017, she was scared and fearful and ruminating about those incidents which she had seen in the videos. Meanwhile her son went to the toilet and the daughter also left out for something. Suddenly she saw a green colored ball coming through the window, spreading smoke in the room and a lady emerging from the smoke, which caught her hair from behind. She was terrified and frightened, and started screaming loudly. Neighbors reported that when they entered, they saw her in a very scared and frightened condition on bed. There was nobody around her even though she was behaving as if someone was pulling her hair. Neighboring ladies reported that they had seen part of braid lying on floor. But the braid was not produced to the police and was informed that they threw it in the dustbin. After the incident, nearly 300 people from the village gathered and a reporter living nearby clicked the photos of braid and sent it to the local media. The victim visited a Dargah after the incident and felt better.

When inquired, nobody had seen her long and open hair before. Physically no hair cutting was evident from remaining braid. She reported that someone pulled her hair out.

Case no-3:

26 yrs old, married, Muslim female, educated till primary level, appeared attractive and wore a red dress, had long hair, looked very happy during the interview. The lady was part of the crowd which had gathered during the first braid cutting case in the village. As narrated by her, she strongly believed in devils. She was terrified after listening about such incidents in the night. She called up her mother and informed her about the incidents. Her mother lived 10km away from the village and her husband was out of station. After listening to such news from her daughter, she immediately left for the village and brought her daughter along with her kids to her place. She reported that when she woke up in the morning and was going towards the washroom her mother asked her to check her hair as she had seen some hair lying on the pillow on which she slept. She found a bunch of her hair chopped off when she checked. She informed her husband over the phone about the incident but he did not believe her. Meanwhile, one of her uncle's had called her and during the conversation, she informed him that she had also become a victim of braid cutting incident. When she reported to the police about the incident, she reported that this incident occurred at her house in the noon while during our interview she informed that the incident took place at her mother's place. Physically, there was no sign of hair cutting and no hair was recovered or produced to the police.

During the interview, she revealed that she strongly believed that there were ghosts who could perform such acts. Presently she was living with her second husband. Her first marriage took place without her consent as she was in love with another boy from her village. The two

Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

years of marital life resulted in a divorce and later she got married to the boy she liked. From her second marriage, she had two boys, 1.5 years and 8 months old. Husband reported that about a year back, she had seen a witch and became unconscious. She regained consciousness when she was brought to a Dargah. He also reported that she had a tendency of watching horror and detective movies and serials.

Case no-4:

21 yrs old, married Hindu, female, educated up to 12th, belonging to a remote village of U.P., married to an uneducated male in a remote place of M. P. Her family had a history of possessions. Both her parents and an uncle suffered from this. About a year back, she had come to the city with her husband and started living in a small rented room in Ankleshwar industrial area. She reported that she strongly believed in devils and used to observe all fasts. She was a devotee of Durga for a year but since last year, she had started praying Hanuman more than other Gods & Goddesses. She was aware of braid cutting incidents since last ten days and was getting information from relatives on phone. She started living in fear and started feeling unwell. Her one year child was also sick. They did not have money for medicines but on the day of the incident, she had borrowed some money from a neighboring lady and had got medicines for her child. The day before the incident, she had seen a video on mobile where a lady's braid was chopped and she was dead after three days. On the day of incident, after her husband had left for his job and she was alone, she completed her cleaning and feeding the child and then once again saw the video on the mobile and closed the door and slept with her child. She saw the image of a lady and was frightened. Suddenly, she started screaming as she saw a black cat coming towards her. People gathered from neighborhood and informed her that some hair was lying there on the floor. She was frightened and shouting on the cat. After seeing the hair on the floor, she was more frightened and became unconscious for some time. Meanwhile, her husband came and took her to the doctor.

Case-5:

12 yrs old, Hindu, girl, studying in 7th standard, third child of the family after two sisters, followed by a younger brother, belonging to Uttar Pradesh, living in a rental room with her family. Father worked in a company and mother was a housewife. She was very religious and used to pray every day. She believed that other members of the family were not doing proper prayer like her. Father reported that she was the most caring child and used to take care of every family member. She reported that she liked a college going girl very much who lived near their house because she was very beautiful, smart, intelligent and religious. This girl was possessed by Goddess every week. She used to go to her for tuition. Two months back, this girl left the rented house and shifted somewhere else. She reported that she loved her hair and when she heard about these types of braid chopping incidents she started tying cloths on her head most of time. On the day of incident, she had seen the news of braid chopping in the city and was frightened. On the same day, while sleeping with her family, in the midnight, she felt that someone was trying to cut her hair and she started screaming.

Case No: 6

26 yrs old, married, Hindu, female, educated up till 8th standard, belonging to U. P. After marriage, she had come to Ankleshwar with her husband and lived in a rental house. The husband worked in a factory but after a few months, he had started his own business of snacks. Her brothers were settled in the city and were financially stable. She talked to her relatives in U.P over the phone every day and during these days; their topic of conversation was braid cutting only. She received some videos and used to share and watch them. She was

Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

very fond of watching crime and horror serials and movies on television. On the day of incident, she heard two consecutive cases in the city on news channels. She discussed a lot with neighboring ladies regarding this. She was very frightened and scared of a video showing braid chopping and death of the victim. She reported that she was thinking about those incidents before sleeping. At midnight, she felt that someone was sliding her hand in her hair. She screamed and jumped on to her husband who was sleeping on the same bed with the two children. Husband reported that she was frightened and was murmuring that “she is there, “she cut my hair”. Husband was unable to see anything. After sometime, the husband called his brother-in-law. They came and took her to the hospital. Doctors said that there was nothing to worry everything would be alright. Till the day, she did not go to her home and lived at her brother’s place and all family members took care of her.

Case- 7:

15year old, Hindu girl, educated up to 8th standard, belonging to a low socio-economic status. Her mother was educated up to 12th standard from Delhi and married to a less educated person in a remote area of Gautam Buddha Nagar. She was not happy with the living condition of rural area. Therefore, she convinced her husband to move to the city. Three years before they moved to Ahmedabad and father started a shop of ladies’ dress. Family was living in a two room rented house in a congested area. Victim was not happy with the moving out as she had left all her friends and family. Any how she got admission in 8th standard but was unable to cope with the new condition. Meanwhile, her mother had decided to start sewing dresses with husband at shop to increase income. So, they stopped her study and since last one year, she was taking care of all domestic works as well as her younger sister. She used to watch TV whole day and was not allowed to go outside or talk with others. She used to watch crime and horror serials and movies. Since last one week, she was regularly watching the news related to braid chopping. She was more frightened when she heard that such incidents have started occurring in Ahmedabad city also. She started tying her hair most of the time with cloth, especially at night. On the day of incident, she was sleeping with her sister and in the midnight, she started screaming. When parents woke up, they saw that she was frightened and was telling that someone had cut her hair. There was small injury spot on the back of her head which had little blood. Bunch of hair was lying on the floor. Parents called a family friend who called police but they did not find any scissors, knife or other sharp instrument. During our interview, she reported that she did not see anything but felt as though someone was cutting her hair and was suddenly injured by a sharp instrument and called parents. Hair was chopped from middle part of the head. It was very uneven in cutting. It was seen that some hair were cut with the scissors and some were pulled out.

DISCUSSION

Victims from such types of epidemic can be divided into three categories

- 1- Who were suffering from psychological problem
- 2- Who have tendency to seek attention and publicity by any mean
- 3- Who have taken advantage to cut their hair

First category involves victims who are suffering from high distress and have some past history of mental illness episodes. Second category involves victims who are actually not getting attention from the society which they seek and during the epidemic their mind got opportunity. Third group of victim are those who like small hair but unable to ask their parents about their will. They know that their family culture will never approve stylish hair. Therefore, this epidemic has provided them opportunity to cut it by themselves.

Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

We can see from the case histories that every victim was unhappy with their present living conditions. The progression of hysteria is related to pre-existing tensions (Chen, Yen, Lin, & Yang, 2003). They share some common features with each other. All victims had heard and were aware of the epidemic of braid chopping. All were females, either uneducated or less educated and belonged to low socio economic conditions. Several studies from India, Chile, Brazil and Zimbabwe from a range of low and middle income countries suggest that common mental disorder is strongly associated with lower levels of education, socio-economic status particularly among women (Lund, et al., 2010). In this study most of the females were sick on the day of incident. And all married females were married in their early age. They were not happy with their husband's physical or financial status. The unmarried two girls were also found to be seeking love and affection from their parents as they were not getting proper attention from their family. Tendency for mass hysteria is related to neurotic traits in girls (Moss, & McEvedy, 1966). All victims had a tendency to watch crime, detective or horror serials and movies, except the first lady, who did not have a TV. Most of the victims were very religious and believers in God and devils. These all characteristics are important indicators of their suggestiveness, which make them more vulnerable for such conversion episode. Most of the cases have history of earlier episodes of hysteria like symptoms or exposure to hysteria like conditions.

This knowledge and awareness of hysteria becomes positive re-enforcer for such attacks. It also makes them vulnerable to such epidemics. It is now well established that there exists a neuronal system named mirror neuron system (MNS) in both monkeys and humans. Through the MNS, during action observation, the neural structures involved in the execution of the observed actions are recruited in the observer's brain as if he or she is the agent of the action. Thus, the MNS allows the individual to gain an experiential knowledge of the observed action in the absence of any motor output (Lee & Tsai, 2010).

It is very much evident that the first case was reported on 6th August, 2017. Till then, there was no case reported in Gujarat, though rumors had spread in northern part of India. Publication of the news in a reputed news papers may become a precipitating factor for such mass epidemic (Hefez, 1985). The local electronic news telecast and other printed media reporting became a perpetuating factor. Because people, especially women, had started discussing about the incidents, suddenly, cases started coming from different parts of the state. Three primary channels of communication serve to enhance the outbreak: face-to-face or visual communication, indirect conversation or gossip, and the mass media (Sirois, 1974). Rumors can heighten the community anxiety and propagate outbreaks (Haque, et al. 2013). This indicates the role of media in spreading and validating such information. A recent occurrence of mass psychogenic illness in Le Roy, New York, suggests that news media attention and patients' use of social media may play a role in the spread and perpetuation of symptoms (*Neurology Reviews*, 2018). In this very first case, the victim lady was in deep pain and sick, and clinically was experiencing a moderate level of depression. An affected situation such circumstances the thinking pattern is dominated by the prevailing moods (Cavener, Sullivan, & Maltbie, 1979) this made her more vulnerable. Hysteria helps to relieve tensions of existing psychological problems (Sirois, 1974). Lady under such stress and strain of life and work are considered more likely to be suggestible to disruptive influences (Boxer, Mitchell, & Richard, 1984). Another theory of secondary gain is also found to be evident as after the incident, her daughter came back and took care of her.

CONCLUSION

Overall scenario suggests that immediate proper action and determination on investigation can stop such rumors and diminish the epidemic from spreading. In this investigation, it was found that media had a strong role in spreading epidemic. Therefore, the media should avoid publishing such events without proper verification. Before publishing or telecasting such news, they should understand the consequences and try to report such news in a scientific way. Immediate action from governmental organizations, proper investigation and Proper information to the affected persons as well as the community by an expert can reduce the chances of spreading it (Tiwari, Baghiana & Sarkar, 1989). Social media restraint is also necessary as it was noticed that few of the victims had seen persistent videos on social media before the incident.

Thus, females will be more sensitive to the emotional contagion and, according to our hypothesis; females are more likely to develop mass hysteria than males, which is in line with the clinical observation that there is a preponderance of female participants in mass hysteria. Role of policing is also become very important as they are the first person who receives the complaints from victims. Therefore, knowledge of psychological illness is become crucial for them. With the knowledge and awareness of mental illnesses if they are little trained in psychological interviewing it can change the scenario.

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Braid Chopping a Mass Psychogenic Illness in Gujarat: A Qualitative Study

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Conflict of Interest

There is no conflict of interest.

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