In the Valley of the Shadow: The Impact of Trauma on Interpersonal Communication

Catherine M. Jordan
Seton Hall University

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IN THE VALLEY OF THE SHADOW...
THE IMPACT OF TRAUMA ON INTERPERSONAL COMMUNICATION

BY

CATHERINE M. JORDAN

Thesis Advisor

Michael McGraw, Ph. D.

Submitted in partial fulfillment of requirements
for the degree of Master of Arts in Corporate and Public Communication
Seton Hall University

2002
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Chapter I

Introduction

I am a survivor of the September 11 attack on the World Trade Center. But I don't like to say that. Instead, I prefer to say that I witnessed the attack. Or that I was there when it happened. Because I was not in the towers, but rather standing outside, 500 feet away, I crave this distinction. I don't have the worst story from that day, not by a long shot. Yet the fact is, I ran for my life, away from crashing planes and exploding jet fuel, with ash from the building floating down around my head, within easy reach of falling debris and tumbling bodies, assaulted by treacherous sounds and sights and smells. My life was in danger that day, and I survived. I am not merely an eyewitness, an observer, an innocent bystander. I am a survivor.

Shortly after the attack, I instinctively knew that as a survivor I would somehow never be the same. So I wanted to know: who I would be now? How would I be different? What could I expect in terms of my own emotional and physical response and recovery? How bad would it get? How long would it take? What should I do? Information is power. I went to the website for the American Red Cross (http://www.redcross.org), since I surmised they had the most experience dealing with traumatized people. What I found at that website was both helpful and disturbing. I found a laundry list of symptoms, some of which I was having, and some of which I wasn't, as well as a brief description of the
classic phases of recovery from grief and trauma: denial, anger, bargaining, depression, and acceptance.

Though I knew it was a bit too soon to tell, I didn’t seem to fit into a phase.

What did that mean?

As the media recognized that the whole world was traumatized, there was even more discussion of the “recovery process.” My family and friends began to communicate with me, or to behave in ways that delineated expectations, about how I “should” be behaving. For instance, I “should” be talking about the event a lot. I “should” be very angry at the terrorists. I “should” be around people and make sure that I didn’t withdraw. People were convinced, if I would just follow their advice and do these things, I would “feel better.” I would be back to my old self again in no time.

In my shocked, interior world, I was unable to talk about the event in much detail. I was not angry at the terrorists, I felt sorry for them, and I was afraid of them. I did not like to be around people because I was feeling emotional and vulnerable. These differences between the expectations for my behavior and my actual behavior caused a lot of friction in my personal interactions with family and friends.

I began to explore additional literature about Post-Traumatic Stress Disorder, or PTSD. PTSD has two phases: acute, which can occur the first month to three months after a traumatic experience, and chronic, if symptoms persist and I or change after a period of 90 days from the initial trauma. I also began to
writes about my own experiences and feelings. Thus, with encouragement from my graduate school advisor, this thesis was born.

In my formal and informal reviews of the literature, I found that among the mass media outlets, discussion of the trauma response and recovery process is usually confined to the conventional five step process of denial, anger, bargaining, depression, acceptance (Horowitz, 1976, from Horowitz, 1997). Among the academic and clinical literature, there are two general categories of trauma response: intrusive and numbing, with each general response following its own stages of progression and recovery (Horowitz, 1997).

I searched to find the "process" that I was going through, the one that most closely matched my experiences. I found that in talking to other survivors of September 11, they also felt that their own responses defied customary categorization. In these informal conversations, I found similarities among survivor reactions: exaggerated startle response; a nearly crippling fear of planes, high buildings, confined spaces; intense distraction; and a high degree of dissociation (moments of withdrawal or detachment). Like me, few of my fellow survivors felt that they were experiencing the conventional five step recovery process. Like me, my fellow survivors were having trouble dealing with their varied and disorderly emotions, and didn't know very well how to cope, except to hang on and hope for the best, limit exposure to the media, and deal with emotions in any way that felt right -- whether to talk it out or withdraw and be quiet, and try to eat and sleep and work most days. It hardly seemed like a very
clinical approach, but we could not seem to handle it any other way than moment by moment.

As a result of this experience, dealing with my own emotions and talking extensively to fellow survivors, I came to believe that grief and recovery are as unique as each individual. There are many factors in an individual's response to trauma or any major life event, including gender, ethnicity and culture, exposure to prior trauma, as well as the type and duration of trauma involved. Additional factors would encompass personality, life stage, personal resilience, education, and availability of a supportive environment (Horowitz, 1997). The more I learned about trauma and recovery, the more my frustration with "the process" grew. Why are survivors offered incomplete, inadequate processes as solutions? Why does the framework present itself as inflexible, causing further isolation?

Some of the most interesting evidence for the uniqueness of trauma has been gathered from survivors of other large-scale traumatic events, such as both world wars, the hydrogen bombs at Nagasaki and Hiroshima, the Nazi concentration camps, the wars in Vietnam and Korea, and some of the major natural disasters of this century. Each set of trauma survivors from each of these separate events demonstrated unique "general response tendencies" according to which trauma they had experienced (Horowitz, 1997). Each response profile was different according to the type and duration of the trauma experienced; and one of the most critical factors was whether the trauma was a natural disaster, an accident, or a deliberate human attack.
In the end, through some combination of perseverance and blind luck, I found support for the beliefs I had formed about trauma recovery. I stumbled into a recovery program for trauma survivors on the cutting edge of treatment for post-traumatic stress disorder, one that allowed for each person's unique experience of their trauma and recovery. Frameworks for trauma recovery need to be presented in the media with greater sensitivity and flexibility, to enable trauma survivors to validate their emotions.

This paper includes my own account of September 11th and my ongoing recovery from the events of that day. A survey of the latest literature on grief and recovery follows, for the purposes of comparison between my own case study and conventional descriptions of trauma and recovery processes in mass media, academic and clinical literature. An experimental trauma recovery program founded at the University of Pennsylvania and administered at Mount Sinai hospital in New York, called the "Brief Recovery Program" will also be discussed.
Please note that in all the literature for this thesis, the phrase "post-traumatic stress disorder" appears ALL of the following ways: post-traumatic stress disorder, post traumatic stress disorder, posttraumatic stress disorder. All versions are considered acceptable. For the purposes of this paper and consistency with APA, we are going with "post-traumatic stress disorder," unless it is used in a direct quote or title in one of the other forms.

Limitations

Due to the volume of literature on Post-Traumatic Stress Disorder, and the growth in research in that field in the last decade, most of the references included here are from 1995 or later. None of the literature included is dated before 1990.
Definitions

The following definitions are in whole or part from Horowitz (1997).

The grief / recovery process is defined as the period of time following a traumatic or loss-related event, when a person is dealing with feelings of grief, anger, helplessness and depression in the face of loss.

Post-Traumatic Stress Disorder, or PTSD, is defined as a collection of symptoms with four primary criteria: 1) the occurrence of an event that involves death, injury or threat, as well as fear, helplessness or horror, followed by symptoms of 2) re-experiencing, 3) avoidance and numbing, and 4) increased arousal (hypervigilance). PTSD can be acute (short term), or chronic (long-term), and also has the possibility of delayed onset (6 or more months after the traumatic event).

Trauma is defined as the occurrence of an event that involves actual or perceived death, injury or threat, as well as fear, helplessness or horror.

The grief recovery process is denial, anger, bargaining, depression, and acceptance. These are the emotional phases commonly experienced after a loss.

Anxiety is an overwhelming, sometimes chronic, sense of fear and discomfort in the presence or absence of perceived or actual threat.

Denial is the refusal to believe that a factual event or situation has occurred, often a period of adjustment after a loss. Emotional denial is characterized by the sentence "I can’t believe that ... ."

Depression is characterized by disconnection and disinterest in everyday or previously enjoyed activities.
Dissociation is a psychological and emotional withdrawal from the current environment, a moment of "going blank."

Flashbacks (see re-experiencing).

Grief is overwhelming sadness in the face of loss.

Hyperarousal and hypervigilance are the behaviors of constantly scanning the environment for threat, and responding to non-threatening sensory input with startle reactions (jumping, for instance).

Numbing is the inability or refusal to feel positive or negative emotion.

Re-experiencing, (also, flashbacks) is the uncontrolled internal replay of an event that makes the person feel as if it is re-occurring in the present moment.

Recovery is stabilization after a period of intense emotion.

Triggers and cues are sensory components of a traumatic experience. When they are encountered outside of the trauma, they may cause or lead to re-experiencing, anxiety or other emotional responses.

Withdrawal is refusal or inability to participate physically or emotionally in normal activities, particularly on an interpersonal level.
Chapter II

September 11, 2001

Skyline of a lifetime

As a 36-year-old native New Yorker, it's hard to say when I got attached to the Twin Towers of the World Trade Center. It wasn't a matter of conscious attachment, not like I fell in love with them the way you fall in love with a romantic city neighborhood. The towers were not poetic, they were functional, not fancy, but a fact. As I grew up and found out when and where to look, it seemed I could see the towers from nearly everywhere, places unexpected: from the windows of our high-rise apartment in the Bronx, from Exit 11 of the New Jersey Turnpike, from a sailboat on the Long Island Sound, from the Newark line of the Path train, from a condo balcony in Rockland county. More than our magnetic north, the Twin Towers were the center compass point of our New York metropolitan world.

The towers signified what I wanted for myself: strength, success, freedom, utility, admiration, maybe even domination. They grew up as I grew up, matured as I matured. I loved them because I respected them. Whenever I would pass the towers on the outdoor plaza of the World Trade Center, I would put aside my native New York poise and look up. I would challenge the tower, usually the North Tower, and it would challenge me. Every time, I came away feeling dizzy and respectful, affectionate and proud.

I loved the observation deck on top of the South Tower, although I probably only went there a handful of times. I remember the impressive wall-to-
wall floor-to-ceiling windows, the little sticker overlays designating the tall
buildings, the boroughs, the distant sights.

What I really loved about the observation deck was the roof. The
conditions had to be just right: clear, sunny or partly cloudy, no lightning or
thunder or rain or snow or ice, and not too much wind. You couldn't ask for no
wind at the top of World Trade, that just didn't happen. But sometimes, not too
much was good enough.

On the roof, the wind would ruffle your hair and whistle in your ears. The
world down there lost some of its color. A setting sun would obliterate New
Jersey. It was not possible to pick out or person or a car on the streets directly
below: maybe a big, white city bus going up West Street if you were lucky. There
was a parade of bridges up our grand rivers, the clustered skyscrapers to the
north, the stadiums, and the airports, all of the landmarks of 20th century New
York. From a bygone era, the Lady in the Harbor, tiny, alone, but strong and kind
and determined, a welcome to freedom.

My favorite part of the roof was the silence. Here I was on top of the
greatest, busiest, most prosperous city in the world -- on top of the world itself? --
so high that not even sound could reach me. Not voices or sirens or horns, not
subways or buses, maybe not even a foghorn. Just sun, and wind, and curving
horizon, and silence.

I don't know when I was last on the roof. I always meant to go again, to go
more often, to go once again, to go for lunch one day. I had a chance to go at the
end of August, but I declined. There was always tomorrow, or the next time, right?

My first job on Wall Street, in early 1989, was with Dean Witter on the 88th floor of the North Tower, of 1 World Trade. (Nobody called it the North or South Tower, but rather Tower 1 or 1 World Trade, and Tower 2 or 2 World Trade.) It was undeniably cool, working in the Trade Center, but there were some surprises. There were queues at the elevators in the morning rush and again at lunch, made orderly by velvet ropes. There was a mall in the "basement" with food and shopping, Burger King and Alexander's. The numerous elevators necessary to carry people vertically ate up a lot of the building's core, so there wasn't as much usable workspace on the floors as you might think: two sides of the tower were narrow, and two sides were wide. Once upstairs, you really could have been anywhere. The décor was industrial and fairly unremarkable, at least on the Dean Witter floors: dark heavy-duty carpeting in the hallways, linoleum near the elevators and in other high-traffic areas. Even in the offices themselves, the windows were deceptively skinny, maybe 24 inches wide, hardly enough room to get my head in the groove to look across to New Jersey or Brooklyn.

The building moved and creaked a lot. The elevator cables clanked together loudly on occasion. The building's utility areas were built around the elevator banks, including the bathrooms. If I was in the bathroom stall nearest the adjacent elevator bank and an express elevator went by, I would think I had just been passed by a tractor-trailer on the Cross-Bronx Expressway. It's a wonder I didn't end up blown onto the floor. On windy days, the tower moved so much that
the water would slosh out of the toilets onto the bathroom floor. I could often feel
the building shift beneath my feet as I walked down the hallway, as if we were on
a cruise ship — sometimes I could feel the elevators swaying in transit. Pens and
pencils routinely rolled off desks and went in various directions around the floor.
When the weather was bad, it was like working in a funhouse, only nobody was
laughing. Looking back, despite the near-daily reminders of the tower’s
eccentricities and vulnerabilities, I realize that no one ever showed me the stairs,
nor did I bother to find them for myself. This lack of concern and education about
safety procedures was underscored in the 1993 bombing, when it took over 6
hours to get everybody out of the towers. After that, the tenants and landlord
were much more conscious about doing quarterly emergency drills, no doubt
saving thousands of lives on September 11 (Murphy & Levy, 2001).

At the end of 1989, I accepted a permanent job at Merrill Lynch, located in
the new World Financial Center, next door to the World Trade Center. Over the
course of the next 12 years, I transferred a couple of times between the World
Financial Center in New York and 101 Hudson Street in Jersey City, so World
Trade was always within reach, or within sight. As months and years went by, I
did not venture into the World Trade Center very often, only to pass through over
the West Street pedestrian bridge, or occasionally onto the concourse to shop for
something specific, or out onto the plaza on a pretty day.

In April of 2001, I moved into a window office on the 35th floor of 2 World
Financial Center, with an unobstructed view to the south of the Statue of Liberty
and New York Harbor. If I craned my neck near my window, I could see the
corner of the South Tower of the World Trade Center, next door. The office represented an unparalleled personal achievement, one for which I had worked hard. But the first time I walked in there and looked out the window, I cried for reasons I don't fully understand to this day. While money and success may be the American dream, they were not turning out to be my dream.

While I debated leaving the only career I'd ever known, at each end of the day, I got the treat of my life. Traveling to work by New York Waterway ferry over the last year had been a new experience for me. It became my habit to cruise along on the outside deck of the ferry, enjoying the view of the harbor, the Statue, the skyscrapers. I loved the contrast of nature's work and man's work, and the mist and the smell of the brackish harbor water. It became a ritual with me, to study the changing light, the changing seasons, the changing outline of the world against the backdrop of the city, of the skyline, of the buildings, my buildings. Occasionally I stayed inside in the morning, in the interest of my hair. But I never missed an evening ride outside, since it helped me leave my day behind. The "ferry guys" — Danny and Hector — knew me and would smile at me that I was out there in all kinds of ridiculous weather, often the solitary outside passenger.

Each evening, as the city receded from me, I watched the setting sun play against the granite and steel and stucco and brick and tinted and untinted glass, overseen by Lady Liberty, and I was often moved to tears and I held on to the rail of the soaring, bouncing catamaran ferry. How lucky was I? The great-granddaughter of barely literate Irish tenant farmers, I was a free person, a
woman, with money and love and friends and education and property and opportunity who had worked hard and succeeded in the greatest city on this earth. I saw all of that in my skyline, in my towers, and felt joy and gratitude and pride and magic. It all made me feel so alive, every day. I never got tired of looking.

I particularly remember a late summer sunset show on the ferry, the setting sun casting grey and cream through clouds on the horizon into the azure evening sky, pink and peach absorbed and reflected in granite's grey buildings, windows radiating a mosaic of light blush and rose and chablis, mother of pearl, squares and dots of neon red and purple, teasing the copper statue and her golden flame of freedom, and in the lavender and periwinkly heavens, a stripe of green, small beads of hematite cirrus, slipping away into sapphire and navy water, all the way to the rim of the world.

As that same evening fell into night, knowing that if I decided to leave Merrill I would not work or live in the area for much longer, I returned to the skyline, taking a bicycle ride through Liberty State Park in Jersey City. The city looked so big and close, sparkly, organized chaos of light against dark, a frozen fireworks finale. Like a new lover, I couldn't stop looking, staring, memorizing, analyzing. I traveled the esplanade four times before I stopped in near-exhaustion and dehydration. What?! I thought to myself. Was it the first time, or the last, that I was ever going to see this skyline? Good God, GO HOME!
That was August 24. The following day, exhausted and desperate to leave Merrill, exhilarated by the possibilities of professional freedom, I asked for a severance package.

I planned my departure so that I got to show off for family and friends just once before leaving. My mother’s birthday was September 6, a Thursday. For a small surprise party, I selected a restaurant in the World Financial Center, with a lovely view of the Statue of Liberty and Ellis Island. The night of the party, the harbor looked lovely, bathed in deep rose and indigo, and my guests visited my office just upstairs and fawned appropriately. On the way out of the Holland Tunnel after the party, I had an opportunity to capture the stunning nighttime skyline from the Newark Bay extension. I remember wanting to stop along the shoulder and jump out of my car to take a few shots with my camera, but I was afraid my mother in the vehicle behind me would think that my car was breaking down, creating a hazardous situation. So I carried on, and gazed out my car window, and hoped that my party guests were doing the same.

Five days later, I was wishing I had stopped for those photographs. Five days later, all of those party guests thought I was dead.

I remember clearly the evening of September 10th, the last time I saw my towers intact, because I had been stood up for a date. I wasn’t upset, exactly, but my pride was certainly hurt. With an afternoon downpour trickling off to a sunshower, I took my usual spot outside. The boat’s salty wake shot up, the clouds above drizzled down, but the sky directly over the towers was surprisingly clear. The buildings glowed amber, cinnamon and peach, reflecting the burning
sun blasting through a narrow slot in the clouds on the opposite horizon. I got pretty wet, mingling tears and raindrops and spray, but I got to see yet another subtle mood of my beautiful skyline, a reminder of an ending summer, a dawning autumn.

I didn’t know it was goodbye.

Figure 1. The Twin Towers of the World Trade Center, with the World Financial Center in the foreground, taken from Jersey City, New Jersey in 1998.
In the Valley of the Shadow

The morning of September 11 was exceptional only in that it was another spectacular day at the end of a spectacular summer. I took my usual route to work, driving along the Newark Bay extension, through the toll at 14C, then down Grand Street in Jersey City, the towers visible all along on the hazy morning, harbinger of the coming hot day, trying to catch the 8:50 AM ferry.

I was little cranky that morning. I was tired of working and anxious to leave my job.

As I took my briefcase out of my car in my rush to make the ferry, I dropped some papers, which then blew under my car. Among the papers was a tax refund check for $300 (courtesy of George W.), and a grade report I would need to get reimbursed for $2,000 of my graduate school tuition. So I got down on my hands and knees, hiked up my skirt, worried about running my pantyhose on the asphalt, literally cursing, and crawled under my car.

I don’t remember hearing anything while I was under the car, but that must have been when the first plane hit Tower One. When I was back on my feet and running for the boat, I saw black smoke coming from the North Tower, but I didn’t think much of it. While fire in the towers was unusual, it was not unprecedented — there had already been a minor fire in one of the towers earlier in the year. One of my familiar ferrymen, Daniel, greeted me with his usual warm nods and hellos.

Having seen the black smoke, I didn’t go upstairs on the outside deck. As the ferry moved out of the canal toward the river, I stayed downstairs and
watched out the windows. The fire became more intense and involved. singeing Tower One, the streaming cloud of brownish-black smoke was growing, engulfing Tower Two. I asked a balding man with glasses, what had happened, and he said that a plane had hit the towers. I dismissed it, thinking that didn’t make any sense. How could a plane hit the towers? There was rarely air traffic in that area, except for helicopters. Well, I thought, maybe some private pilot had fallen asleep at the switch of a small plane. I had no sense of danger or attack, only a feeling of unfortunate accident. As we approached the ferry terminal, the darkness of the tower’s daily morning shadows that extended into the river interfered with our view, our only source of information, of the growing conflagration above us. Dark, then light, Dark, then light.

Figure 2. The morning shadows of the World Trade Center on the Hudson River.

Courtesy of HereisNewYork.
The ferry docked, we disembarked. It was 9:00 AM.

Once off the ferry, most passengers marched straight up the ramp, traveling alongside the Financial Center’s buildings. I diverged to the right a bit, and traveled toward my building along the less-crowded, more open esplanade between the buildings and the South Cove marina, an area made sunny because it lay in the valley between the shadows of the two towers. From this bright vantage point on that beautiful morning, I could see that the fire in One World Trade was truly becoming serious business.

Suddenly, I didn’t want to go to work. I didn’t care about work. I HADN’T cared about work for a long time. Since my severance package was in the works, I had nothing to lose or gain by going to work that day. I stood there debating, pacing a bit, looking up through my sunglasses at One World Trade in smoke and flames, five hundred feet away, a true towering inferno, roaring and crackling, sending off a pungent odor of fire and melting, the familiar antenna obscured by the dense brownish cloud. My eyes were stinging. Chunks of ash were floating in the air around me like confetti. The morning sun was getting stronger, hotter, and the lining of my brown lightweight wool suit was beginning to stick to me.

I remember asking a passer-by, “Was it really a plane that hit it?”

The man didn’t lose a step as he walked by me, away from the towers, toward the ferry terminal. “It was really a plane.”
As I became more and more uneasy, my thoughts became increasingly methodical, but also more child-like. I looked down at the ground, focusing on the gray octagonal pavers at my feet, attempting to manage the distraction of the fire above my head, and my own fear and sense of danger, trying to concentrate. I remember thinking, God, do I really want to go into my building and then have a problem getting out? No. Do I REALLY want to go to work today? No. Should I just go home? I could dial-up on my laptop and work from home. No, I couldn’t, my laptop was in my office. Damn. Okay, maybe I could go get my laptop and THEN work from home. No, that’s not going to work, once in, never out. Then I was looking back up at the fire, watching the fire, smelling the fire. Okay, maybe they’re evacuating my building. The building practically NEXT DOOR is on fire, a BIG fire, maybe they’re taking precautions. If they are, I can go home and enjoy my day without guilt. Okay, Okay. Let’s go. So I turned, faced the World Financial Center atrium with its secret surprise of palm trees inside, when I heard the noise.

It sounded like a missile, a big missile, or artillery, whistling towards us. I thought they were dropping the bomb. But the sound was going around, horizontal somehow, instead of vertical. It was escalating, unbelievable, deafening, piercing, painful. I started looking around for the source, covering my ears, and then I realized there was only one place to look.

Up.

Everyone was looking around and up, and because of the first plane’s strike it wasn’t a stretch to identify what the noise was, though I’d never heard it
before, a jetliner, full throttle, flying low, echoing turbulence as the plane flew out of New York Harbor and up West Street. Everyone was turning to look. I kept looking up but not seeing the plane because it was so low the buildings were blocking my view, but then at the last second, it emerged from behind a building, like a demented child's pop-up book, and against the cornflower sky I saw the ugly grey plane, with UNITED AIR LINES emblazoned on the side and the red and blue stripes, all of the window shades drawn down, the plane's wings dipped jauntily, almost gleefully, as the plane banked and barrelled directly into the tower, pedal to the metal, at lightning speed and in terrible slow motion, stabbing into one of the pillars of New York City.

I started screaming, screaming for all the countless souls on the plane and in the building that were being ripped from this earth before my eyes on this achingly beautiful day, screaming for their unkind deaths and for my unwitting witness. I knew immediately that it was terrorism, thinking, they're killing us with our own people, with our own planes, that the choice of a United plane was deliberate and cruel. I knew that the pilots were dead, because no live pilot would have allowed his plane to be flown into a building to kill thousands of innocent people, that any live pilot would have struggled to the death to ditch the plane in the harbor. I knew that the people on the plane and on those floors had been alive, and how awful, how awful, to die, vaporized, being unwillingly used as such a horrific instrument of violence and death and torture. I remember thinking that I was so close that I could have seen people in the windows of the plane, if there had been any, if the shades had not been drawn. The people, the people, all of
the people. I thought this all so quickly, I was thinking all of this as I was still screaming, devastated, even as the impact of the plane into the core of the tower delivered a deafening sonic boom.

Everyone around me was also screaming. The ground was shaking, and the South Tower swallowed the second plane whole, gone in a flash, so fast I would have thought it a hallucination, but then the tower exploded its evidence — a cloud of vicious crimson and gold, grey and black of the jet fuel igniting, erupting into smoke and ash and flames, and debris started coming down. It was then I turned to run for my life, turning and running and stumbling. There were people all around me on the ground, also getting up and turning to run. We were running back toward the ferry, and we were all still looking up, back over our shoulders, disbelieving, mesmerized.

Now both towers were on fire. The second strike was worse because it was lower, and it seemed bigger, with more smoke than the other one, somehow. I wondered if the first plane had been smaller. I was shaking and sweating and crying. People were looking at me as if to say, Why are you crying? and I felt like saying, Why AREN'T you crying? I realized that everyone was in shock. Typical of Wall Street, there were a lot of men around, not that many women. People were clumping, congregating together near the ferry terminal, talking and asking questions as if they knew each other in that easy way that sometimes happens among New Yorkers, but staying calm and treating each other compassionately. After the second plane struck, the ferries had pulled away from the terminal, probably waiting to make sure it was safe, that it was over, before they returned. I
knew they would come back. They had to. They couldn’t just leave us all here, right?

I was also afraid that the cell service was about to go haywire, so I tried to call my mother at home. I knew if she heard about this, she would be distraught, knowing how close I worked to the Trade Center. She had been here with me, in my office, just five days earlier, at her birthday party.


Just then, another plane flew overhead, low and fast. A big dark plane, probably military. Everyone screamed again and dove on the ground, flat on our stomachs. That time I remember being down on the ground, knocking my forehead a little on the pavers in my clumsy attempt to lay low, with dirt and grit and little pebbles digging into my palms and my knees. I realized that the attacks might not be over, there might be more planes coming. There could be a bomb, even a nuke, on one or both of the planes that had crashed into the towers. In any case, I was still in grave danger. I decided then that if anything else — anything else — happened, I was going to jump in the river. At the very least, I knew I could swim. I knew I could count on myself.
The plane came and went without incident, flying close to the south tower and disappearing into the cloud of smoke.Everybody got back up again, without any lingering outward sense of alarm, just another workday morning in lower Manhattan, New York, USA.

I was petrified. I began to pray. I tried to remember if I had committed any sins, mortal or venial, and began to say The Act of Contrition. But I could only remember “Oh My God, I am heartily sorry for my sins.” and nothing more. I was also thinking that if I was killed by terrorists for being a Westerner. a Christian, I was probably getting a free pass into heaven regardless of the redemptive state of my soul. I decided to try and say Psalm 23 instead, what I could remember. “The Lord is my shepherd, I shall not want. He maketh me lie down in green pastures, he maketh me lie down beside still waters...though I walk in the valley of the shadow of death, I will fear no evil.” I was weeping now, praying for my soul and my life, trying to get ready to die, convinced that there had been bombs on the planes, convinced that those bombs would shortly explode. Then, beginning a rosary, an Our Father. “Our Father, who art in heaven, hallowed be thy name...and lead us not into temptation, but deliver us from evil.” Then the Hail Mary, “Hail Mary, full of grace...Holy Mary, Mother of God, pray for us sinners, now and at the hour of our death. Amen.” All these prayers were about death, why had I never realized that before?

I tried to stay calm. I started dialing again. I noticed most other people had given up on their phones and were just standing and watching the building fires. The hell with that, I was going to keep trying and I was going to get through.

Each time, I was shaking, weeping, just wanting to hear the sound of my mother’s voice. I realized that some of the calls might be going through enough to register on her Caller ID, so then she would know I was at least okay enough to call. Finally, I dialed again, and got through. Ring. Ring.

I got her @#$@ voicemail. I actually yelled out loud in frustration. I wanted to throw the phone in the Hudson. I needed to TALK to her.

Instead of leaving a message, I hung up and dialed again. I knew it was a risk, that I should leave a message in case for some reason I DIDN’T get through again, if something else did happen. But I just couldn’t do it. I couldn’t. I needed the contact, not just the communication of a message.

So I hit redial, again. Ring. Ring.

“Hello?”

“Catherine?”

“Mom? Mom, I’m okay.” I was screaming. I thought, or at least yelling, shrill, near hysteria, and suddenly shaking, trembling, my fear manifesting in my voice now as well as my knees.

“Okay, honey.”

“A plane hit the Trade Center.”

“Yes, I know,” she said.
"No, another plane. A second plane," I tried to explain.

"Yes, we know. We saw it."

could not grasp this. "You saw it?"

"Yes, it was on television."

I did not understand this. How did the television people know they should be watching? I dismissed my mother's misinformation and decided it wasn't important to get into that now. I would explain everything to her later.

"Okay, I'm getting on the ferry now. Or soon. They left but now they're starting to come back."

"Okay, honey. Are you coming down here? Or are you going to Bayonne?"

I had a studio apartment in Bayonne to be near work and school, an accommodation to my long hours.

"I'll probably go to Bayonne," I said, thinking that I wasn't going to want to travel real far. "I'll call you again from there."

"Okay," she agreed, clearly wishing I would come home. "Do you want me or Russ to come and get you in Bayonne?"

"No, No, I'll be okay. What about everybody else? Is everybody else okay? Do you know if Chris or Michael or Uncle Michael is here? Tracy?" Relatives who worked in and around the Financial District, Chris worked in Tower One.

"We haven't heard from anybody. We're very worried about Chris."

"Okay, if I see anybody I'll call back." Hey, you never know.
"Okay, honey."

"I love you," I said, and that was when I really started to cry, losing my composure.

"I love you, too," she said. "Thanks for calling. I'm very glad you called. Be careful."

"Okay." I hung up. It felt weird that there wasn't more to say. My life had been in danger. My life was still in danger. Was that all there was to say?

I hung up the phone and looked around. There was a little band of people close around me now, having observed my conversation, looking at me anxiously, wanting to ask to borrow my phone, obviously one of the few that was working, but afraid of the reply. I held the phone out to the crowd. "Does anyone want to use my phone? It's sort of working."

A heavyset older woman took my phone and gratefully called Brooklyn. As she dialed, I looked back up at the towers. The fires were worse, the buildings were visibly deteriorating, their external steel frames warping and buckling. It was getting harder to breathe with the soot and ash and the toxic burning smells in the air all around us. The roaring and cracking of the fires was awful, and getting louder, a terrible fuel fire. I could hear, even feel, that the fuel fires were displacing air in and around the towers, creating snapping noises like a million flags flapping, moving air around at rates that defied physics. The heat was radiating, reaching us a block away. Helicopters were now hovering overhead,
but it seemed that they were as confused about what to do as anybody on the
ground, since they could not approach the fires or their rotor blades would melt.

When the woman caller was done, she handed my phone to her friend,
but the friend declined. A couple of men — COMEX traders identifiable by their
jackets and pins, looked curious but declined politely. An older man accepted,
but he couldn’t get my phone to work. He had a handicap with his hands. As I
descended further into shock, I was losing my ability to communicate. I couldn’t
make him understand how to work my phone, the words would not come so that I
could explain. Me, writer, graduate communications student, words are my living
and my life, and the words would not come. I don’t know why I couldn’t work it for
him, though I know I tried. We just failed to communicate, to connect.

The man thanked me for trying and wandered away. I remember feeling
bad, but thinking, it’s okay, you’re in shock, you did the best you could. Even
now, I worry about him and I hope he was okay. The rest of my little band of
wannabe-callers had dispersed. While a part of me wanted to stay and see if I
could be of help, I couldn’t think of what kind of help I could be to anyone,
especially if I couldn’t even help somebody use my phone. I decided to get out of
the city immediately. I got on the growing line for the ferry, watching the sky for
more planes, more attacks, watching the towers for signs that they were about to
explode.

Moments later, everybody around me screamed all at once, and I looked
up, afraid to see another plane approaching. At first I didn’t understand why
everybody was screaming; to me, it looked like gebris. Then I realized it was a
man in dark pants and a light colored shirt, red necktie flapping, soaring down, twisting and floating and somersaulting slowly in the air currents like an ash in the furnace of hell. I put my head down and tried not to look anymore. I was crying a lot harder now, so sad, so afraid, so shocked, so devastated by the inhumanity of all that was happening around me. I started praying again, trying to accept that I might not get home on this day or ever again. It would be hard on my family, I knew, but I was ready to accept whatever was going to happen to me. What good would it do to fight it? I would rather be at peace. I was thinking of praying aloud to see if anyone would join me, but I was afraid it would cause hysteria. My heart was racing. I worried incoherently that my mascara was running. We clustered closer in the ferry line, in a collective daze. Even though I was trying not to look, each time another poor soul jumped out of the tower, the crowd screamed and kept on screaming, all the way down, and I would look up, I had to look up, in case it was another plane. Most of the jumpers were from the highest floors, so they were not jumping to save their lives, but because they were suffering horribly in the inferno, or they were afraid to. It was the only way out. Maybe they wanted something of their bodies to be found for their families and they knew it would be hopeless in the fires. Maybe they figured it would be painless that way. Maybe they had nothing to lose either way. I wonder if they thought there would be nets, or foam, or something to catch them. But what kind of material could absorb the impact of a thousand foot fall? Nothing. Nothing on this earth.
When I was on the ferry line, time halted; every moment was becoming distinct. One moment, calm, people murmur and reassuring each other, helpful, but nearly silent. The next moment, screaming, pandemonium, people grabbing each other for support, reacting to the mounting horrors around us. All responses were accepted as appropriate, without comment. Everyone was cool, helping each other cut and being understanding. We all stood together and watched the buildings burn, or stared at the ground, as we waited for ferries, our marine rescue. The ashes from the burning building swirled around us with increasing density, minute reminders of our proximity and vulnerability. I was still praying, praying, still convinced that there were bombs, there were bombs, I was still waiting for them to explode, for us to be lifted out of our shoes, catapulted into the river, vaporized perhaps. I was taking only shallow breaths, afraid of the toxic fumes we were breathing. I was sweating under my suit, sweat tricking down the back of my neck into the crease of my back. My eyes were hot from crying, my cheeks were sick with tears, my nose stuffed with snot. I was watching the vivid blue summer sky for further threat, while trying (and failing) to avoid seeing the jumpers, now falling at the rate of several a minute, from both towers, some of them holding hands. Waiting, waiting, waiting for the ferry, wondering, should I run instead, north, further away? Would I have time to run if something else happened? Was I doing the right thing, standing there, hopelessly waiting?

When the ferries were docked, the lines moved quickly. People were scrambling to get on. I was one of the last people on the ferry I got on — even
though the captain was already yelling through the loudspeaker that we were exceeding capacity, my ferryman, Daniel, saw me near the front of the line, so upset, and grabbed my hand and pulled me on, and I started to cry now in gratitude, thanking him as I passed by, the crowd behind me pushing me through. I remember thinking that even if we sunk, at least we would be further away. The ferry was not going back to my car, but to another terminal a mile away. That was close enough for me.

In my last ferry ride watching the towers, my last commuter ferry out of lower Manhattan, I quietly watched the blackened, blazing buildings hemorrhaging smoke, receding from me, transfixed, amazed, horrified, and not safe yet, fleeting the scene of the crime.

I reached the Colgate terminal in Jersey City, expecting relative calm, but Jersey City was experiencing counterpart pandemonium. People were standing alongside the riverwalk, watching. I thought it was ghoulish, but I understood, they couldn’t help it. Just as it had been hard to look away from the beauty of the skyline, now it was even harder to look away from the horror.

One block from the ferry, I thought to look back. At the corner of Grand and Hudson streets, I took what would be my last look at the Twin Towers of the World Trade Center. at the searing intensity of the fires, the people and the debris still falling, the ferries traveling and clustering, the helicopters hovering in vain, with screaming near and distant, sirens of all types and volumes, all the noises layered over onto each other into a senseless hum, at the dual corridors of smoke stretching now past the Statue of Liberty and through Hell’s Gate and
out to infinity over the Atlantic, in that last moment before things went from in comprehensible to catastrophic. People immediately around me were watching, talking, yelling, walking, running, in every manner, and in every direction. And me, I was still weeping, I don’t think I had stopped for even a moment. But I couldn’t do any more, I couldn’t look anymore, and I couldn’t stay anymore. So I turned and began to make my way up Grand Street, back to my car.

Two blocks later, at the corner of Grand Street and Washington Avenue, I felt a rumble, and then heard a roar, an echoing noise like the world’s biggest jackhammer, and turned and saw the south tower plummeting, racing downward like an elevator without a cable, then disappear into the cloud of its own dust. By then, my shock was so profound, the tower’s fall didn’t seem surprising. Of course the tower fell down. After the shock it had sustained, it was only natural, like a person passing out after a serious injury.

People started running towards and away from the river, yelling, “It’s gone, it fell down! It’s gone! It’s gone!”

Then I thought about the people again, all of the people, and I decided that there had been enough time to get everybody out. I decided that, not knowing that only an hour had passed since the first plane had struck One World Trade. I decided that based on my considered, reasonable assumption that it was about 12:00 or 1:00 in the afternoon.

Turning off Grand Street onto Marin Boulevard several blocks later, within a block of my car, I finally saw someone I knew from my office. This guy Bill was driving by in his Camry, with a bunch of people I didn’t know in his car with him,
and he called out to me and asked me if I was okay, and I said yes. He told me
that all of our work colleagues made it out of the World Financial Center. He
asked me if I needed anything and I said no. I asked if they needed anything and
they said no. The light turned, the policeman waved him through, so Bill drove
away and I walked off in the other direction. That's when I looked down at my
watch, finally, for the first time. It was 10:20 AM. I was, truly, shocked. And I
began to weep again.

I needed water. I could not face this drive without water, but there were no
stores around me. I went into a trailer, an office for a sailing school and the local
marina. I must have looked a fright, because the two women there were aghast
at the sight of me. I asked them if they had any bottled water. They said no,
nicely, eyes wide as I burst into tears. They sat me down on the nearby chair and
ran around apologizing and got me Styrofoam cup after cup after cup of water
out of their little water cooler. I drank and drank, and cried and cried, as they
gave me tissues and put their arms around me and consoled me, that I was okay
now, that I would be okay now, that everything was going to be okay now. Once I
got all of the new tears out and all the water in, and I was able to stand up and
collect myself yet again, I thanked them profusely, for the water, for the words of
consolation, for the tissues, for the hugs.

Back at my car a moment later, putting my briefcase in the back seat, the
spot I had been crawling and cursing an hour and a half ago, I saw my camera
bag, from my mother's party. I got it out, and started taking pictures.
I took all the pictures I could of the north tower standing all by its lonesome, somehow never thinking that it, too, would fall, not thinking that my pictures are some of the only ones in existence of that brief, bizarre terrible circumstance.

**Figure 3.** Personal photograph of One World Trade Center (North Tower) standing alone from Jersey City, New Jersey.

I took pictures that gave it perspective of the building missing its twin, and of my true distance from the situation.
Figure 4. One World Trade Center. The Portofino apartments in Jersey City appear in the foreground on the right, the buildings of the World Financial Center are in the foreground toward the left.

Figure 5. One World Trade, one or two minutes before it collapsed.
Once I felt I'd taken enough pictures, I stopped and resumed the business of getting myself home. Knowing I might be in for a long drive, before I left the parking lot, I stopped in a port-a-john.

While within the green plastic cubicle, I felt and heard the familiar rumbling jackhammer, and I knew that the north tower was leaving us, going down. I bolted out of the potty still in slight disarray, way past caring— who was looking at me anyway? — and ran to where I could see that the tower had, in fact, joined its tragic twin in a dusty grave. This time, I think I was beyond tears.

I went back to my car again, drove to a spot with a clear shot, and took some more pictures, trying to incorporate elements from my earlier photos to show continuity, trying and failing to capture the domed roof of my own office building, engulfed in smoke and ash.
I got back in my car. I drove easily down Marin Boulevard, up Grand
Street, waved on by cop after cop at every intersection, and wound my way back
onto the Newark Bay Extension of the Jersey Turnpike. At the top of the ramp, at
the exact spot I had wanted to shoot the nighttime skyline five days earlier, I
stopped the car, and got out, and shot the skyline devoid of its anchors, the
towers painfully, conspicuously absent, with only a raging cloud of fire and smoke
and ash remaining as a desperately inadequate reminder of what was there, of
what was done, of what was gone, missing, murdered, vaporized, destroyed, obliterated, never to be replaced again.

Figure 7. The skyline of lower Manhattan from the Newark Bay extension of the New Jersey Turnpike, about ten minutes after the collapse of the north tower. The towers had stood on either side and behind the dome-roofed building.

In the car, finally on the main line of the turnpike, I had the radio on. The news agencies were able to report the events, but not any of the reasons behind them. It was both consoling and disturbing. It was reassuring somehow to listen to the familiar morning voices of News Radio 98, the man and the woman, talk about all of the events that I knew intimately, and new details such as the
crashes in Pennsylvania and Washington, D.C., in such a way that what was senseless somehow became coherent, at least in the telling.

On the roads, the traffic was heavy, but moving very quickly, everyone driving like maniacs to some perceived place of safety. As I reached the Asbury toll plaza on the Garden State Parkway, I got through on my cell phone to my best friend, Lynn, who used to work next door to World Trade on Church Street. I got very upset again as I told her what had happened. I was telling her about the ferry, the noise, the United Airlines plane, when she interrupted to tell me that it was not a United plane, but an American Airlines plane, that had flown into the second tower. I was absolutely stunned into silence at this egregious correction. I tried to maintain perspective, that she was in as much shock as I was, that she was just recounting the gospel according to CNN, but it was hard.

Ultimately unable to maintain my composure on the phone, I did for the first time what I would do many, many times to come over the next several months. I withdrew, suddenly and without much explanation. "Lynn, I have to go," I said, and I hung up the phone on my bewildered friend. It was my very first brush with irritation at the insensitivity of those who were not as close as me, non-survivors, non-participants, people who felt they were there, and felt they knew what I had been through, because of television. It was the first difficult moment of many to come with family and friends and colleagues — moments where my reliability as an eyewitness was called into question, moments where people told me they understood how I felt and knew what I was going through because they’d seen the events on television, moments when I realized that
people were far more interested in telling me where they were when they heard about it than hearing about what it was like to be there, what it was like to go through that, moments where my sense of personal isolation and incredulous emotion became so extreme, I felt like a sole survivor. The media has brought the attacks into everyone's personal experience, so everyone had a story to tell. But the attacks didn't belong to everyone equally — not from where I had been standing. I didn't want to deprive anyone of their own experience, neither did I have any desire to share my story with equivocators. My only defense was withdrawal. Even before I arrived home at my mother's that day, I was already retreating.

At 11:30 AM, in a deserted shore town on a beautiful September summer day. I pulled into in my mother's driveway, and thought that under different circumstances, I would welcome the chance for an unexpected day of body surfing in the ocean. On a different day, I would be wishing for my bathing suit, instead of ultimate comfort clothes. I wished I had the heart, I wished I would have the heart someday again. Someday, any day. As I got out of the car, it was heavily hot in the driveway and the sun was hurting my eyes. God, why is it still summer? I thought in another random moment of wild confusion. I went inside, numb at my family's effusive response to my safe arrival. For all the moments of the morning that I had wanted to be hugged, for someone to hold me, suddenly that was not the time.

They gave me water. They told me everyone in the family and in the neighborhood and in our sphere was pretty much accounted for. I gave a clinical
In the Valley of the Shadow

abbreviated account of my experience in halting tones. I had some tuna fish on
pumpernickel bread. I holstered unmercifully at the dog for begging when what I
really wanted was to yell at somebody for knocking down the Twin Towers. Then
I went inside and changed my clothes, and watched the replays of the morning's
events on CNN, unmoved.

The rest of the day is like salt water taffy, long and thin moments at some
times, short and thick ones at others. I watched television. The phone rang a lot.
Our far-flung family was calling. My mother's friends were calling. Even my
friends were calling my mother. Many people called crying, assuming the worst,
not even asking at first, just assuming I was dead. That was hard to listen to,
even from the other room. I didn't speak with many people, and when I did, not
for very long.

I stayed at my mother's for a couple of hours, but then I got restless. At
around three in the afternoon, I left to go home to my own house, my family
stunned that I would venture back out into the dangerous word, instead of
staying safe and secure with the family unit. But I couldn't stay. I was in danger of
snapping, lashing out. I had to do something. I went to Wal-Mart and dropped off
the film from the morning, and impressed upon them the gravity of the pictures. I
went to the hospital and tried to donate blood, but they weren't accepting
donations.

At home on my voicemail, which I had not once thought to check, were
two hysterical messages from my manager, the last person on my mind, a couple
of more messages from hysterical friends, even hysterical friends overseas, and
a message from Merrill Lynch contingency planning asking me to call in for
headcount purposes.

I laid face down on my sofa in my silent house on this gorgeous afternoon
and totally lost it until I was hoarse and dehydrated and exhausted and had
soaked the couch cushions with tears and saliva. People were checking to see if
I was alive. People were confirming the danger that I was in, the threat that I had
faced, the random fatality that I had inexplicably escaped. People were accepting
what I was trying to deny. That I could have died that morning. That it all easily could have gone another way. But it had not. I had survived. I was not a
victim. I was a survivor.

When I was done, I pulled myself together and perfunctorily returned my
phone calls. I called Merrill Lynch Business Resumption and gave my
information. The man on the phone, working out of his house, was able to tell me
that all was relatively well, that I was one of the last people from my division to
call in, so nearly everyone was accounted for.

When I hung up the phone, I cried a little again. This was too real. This
had happened in my world. I was going to know people who were dead, or
missing, or lost, or hurt. Whether we knew the individuals or not, we would face
insurmountable, unimaginable losses in my corner of the world.

I knuckled down again and called my manager, making several attempts
around circuits busy signals. When we finally connected, she was ecstatic to
hear from me, I was the only one unaccounted for. We briefly engaged in the
story-sharing ritual. She and my colleagues had been in the office already when
the first plane hit, although word was sketchy about what had happened. After
the second plane hit, they all evacuated safely. Then she started reading me a
message she had written on behalf of the Chairman of our division. It sounded
like idiotic incoherent poorly-written gibberish to me. But I didn’t say that to her, I
told her I was fine. Then she started asking me about what Merrill Lynch location
I wanted to report to work at the next day.

Report to work the next day?

I managed the intranet home page for our division, a key communications
tool in a time of crisis, especially when no one can get into the office and the
phone service was less then reliable. Especially in a global business unit such as
ours, when other parts of the financial services world would be carrying on
business with or without the World Trade Center.

But report to work the next day?

I picked my location, and decided that I was only going into the office if I
damn well felt like it. Let them fire me, I would sue. And then I hung up the
phone.

For the next few hours, the next many hours, I watched the news
coverage, numb. I watched the collapse of 7 World Trade live on television,
grateful that it was long-evacuated. At least it seemed like the attacks were over.
I was waiting and praying for them to start finding survivors in the rubble. I
watched in a stupor until some friends of my showed up unannounced. Had they
called, I would have turned them away.
I told them my story, briefly. I drew them inaccurate, meaningless maps to explain where I worked and where I was standing. I pointed at my building in television shots. But I could tell that none of it was really penetrating.

My friends stayed with me through the President's address. Even though I don't like him, I thought Bush was good, strong, scared, but trying to lead, trying to do the right thing. When he quoted the bible, Psalms, "Though I walk through the valley of the shadow of death, I will fear no evil," I thought, that's what I was saying today. That's where I was today, I was in the valley of the shadow. I was in the valley of the shadow between the two towers. I was in the valley of the shadow of death. I was there. And I was frightened out of my mind.

So I was crying, again. I don't think my friends understood why.

After they left, though it was approaching midnight, I went back to my mother's house. I thought maybe a walk on the beach with the dog would help me unwind. My beach, my place of tranquility and relaxation and salvation. My mom came with me. But when we got to the beach, the sound of the waves was so much like explosions that I was overcome. The glow in the sky to the north was undeniably the continuing fires of the towers, fifty miles away. And plainly visible in the night sky, obliterating the beautiful stars, replacing the absent air traffic, marring the unfamiliar silence and stillness of the skies, there were new clouds above us, an awful pallid aurora borealis of ash and smoke and soot, all that was left of and glass and steel and concrete and men and women and hopes and dreams, all of that was being carried away in a haze, off to some distant point of eternity on the southern night horizon, taking with it our safety, our
security, our joy, returning to us incontrovertible images burned upon our retinas, an army of shell-shocked survivors, mountains of regrets and denials and a few lucky awful goodbyes for the leagues of stricken family members of the missing, and for all, sorrow and horror and nightmares and loss and pain. For all, a new world inside and out, a world here but far from home, one which we did not know, or understand, or recognize, one for which we had no map, no guidebook, no instructions, just our feelings, our instincts, our responses, and our sorrow and nostalgia and regret for our lost and sullied innocence. Concrete to ashes, glass to dust.

When I got home, I watched CNN again for a few minutes. Then I turned it off, took some sleeping pills and went to bed.

In bed, as the pills took effect, I cried and prayed for the missing. I prayed that if anyone was alive, they would be found. I prayed that the weather would hold for them, that they would be warm in the soft warm glorious starry summer night, that the fire hoses would reach them and bring them water to relieve and protect them from fire and thirst, that air pockets would keep them from smothering, that shifting rubble would not crush them. I prayed they would not be alone, that they would find and comfort each other. I prayed very hard for a miracle. I prayed for the numbers of dead to be small, low, few. I begged God to snatch victory from the jaws of this awful defeat. I prayed for all humans and all humanity, but especially for the humans in the rubble. I prayed for the dead, for the ones that could not possibly have made it, for the ones on the planes and on the floors that were struck. I prayed that their deaths were quick, and for their
comfort and salvation. I prayed for myself, that I would be strong enough to survive this. And then I slept. On the night of Tuesday, September 11th, I slept.

And I did not dream.

The long road.

How is it possible to be one person on a Tuesday, and then feel like you're someone else on Wednesday?

In the days following September 11, I vacillated between numbness and overwhelming emotion. In numb mode, I could go about some semblance of a "normal" life: eating, sleeping, showing up for work. In overwhelmed mode, I could not function at all; I was not prepared for the paralyzing cataclysmic hysteria that would periodically wash over me. All I could do was surf the waves. I probably cried every hour or so, but I gave it a particularly good rip about once a day. If you'd seen me, you may have thought I was an escaped mental patient — I certainly felt like one. There were many triggers that could cause a new wave: soft-spoken calls about who in my world at work and at home was missing, ongoing reports and rumors of tapping and cell phone calls coming from the rubble, poignant broadcasts from stricken journalists with desperate and hysterical family and friends at the Lexington Avenue Armory. In between the waves, I gratefully continued with my life, and found my new mantra: I would never have another bad day again. I knew now what it really meant to have a bad day, and I would never have another bad day again.
I went back to work on Wednesday, the day after the attack. While the official Merrill Lynch line was that people should do what they felt capable of doing in terms of returning to work, or reporting to alternate locations, working from home, or not working at all, the clear subtext delivered by line management was that you'd better get your butt into an office somewhere. While on the one hand I was grateful for a distraction from the endless replays of the planes crashing from multiple angles on CNN, I was resentful that Merrill was sending a clear message that their clients were more important than their employees, even at a time like this. I recognized our responsibility to our clients and shareholders, but I felt it was heartless that staff who'd had their lives on the line and witnessed catastrophic death and destruction less than 24 hours earlier were expected — commanded — to return to work, especially considering that the New York Stock Exchange was closed. Call me crazy. But most everybody showed up, shell-shocked and emotional, and Merrill was prepared to conduct client business by Friday, September 14.

My own powers of concentration were squashed beyond repair (something my manager was very quick to point out on an almost daily basis), so I couldn't and didn't do much at work. I resisted returning to the midtown Manhattan office, it was too crowded with other displaced employees and too far from my home, and I was nervous about being in Manhattan; instead I went to a major location in central New Jersey. While Merrill Lynch Human Resources offered extensive, even mandatory, psychological assistance for all New York and New Jersey employees, most line managers, including my own, were
annoyed at the inconvenience of having so many unproductive employees. Instead of being treated with compassion, I was criticized and reprimanded for my diminished capacity.

My concentration was completely destroyed: I could not work, or read, or write, or otherwise focus. I couldn’t find words for simple things. I would forget to do things, and forget where I put things. I would go to work in the morning and come home at night and find that I had locked the back door but left the front door standing wide open all day long. The constant flow of adrenaline in my body left me inappropriately sexually aroused (not to mention puzzled) almost around the clock. My startle reflex was terrible. I would hit the ceiling in the morning when the alarm went off, and sometimes noises would startle me so badly I would cry like a child. I jumped at shadows, I was sleeping with the lights on. I didn’t have nightmares every night, but the ones I had were terrible, planes crashing, fires, people screaming, and me, always alone.

After the air traffic restrictions were lifted, my vigilance for planes in the sky was very distressing, particularly while driving. My sense of danger was impaired: I drove at breakneck speeds without any sense of risk. People often needed to repeat themselves to me multiple times. I forgot basic information, even major life events. One friend needed to tell me a couple of times that she had bought a condo, others, that they were having a baby.

The pressure to communicate and interact was on at home. My family and friends wanted me to check in a lot; to see how I was doing; to make sure I was okay; to share with me more and other second- and third-hand stories of people
who were there, or people who had loved ones missing, to commiserate, participate, share. I wasn't okay, and I wasn't going to tell anyone that I was okay just to make them feel better, I just didn't have it in me. I didn't feel like talking, and I didn't feel like listening. So most of my phone calls went unanswered — at one point I had a list of 35 phone calls to return — and my friends and family gradually started to become angry, even irate.

I absolutely did not care.

I found myself constantly distracted. Many times I became aware that people had been conversing with me and I had no idea what they were talking about because I had completely detached from the conversation and gone to a sort of vacant place in my head (later I found that this is called dissociation). When I wasn't distracted, I was edgy: my irritation with people was endless. I heard from old friends and old loves, intellectually appreciating their concern while I was often barely able to tolerate engaging in their conversation.

Most of my friends and family — some of whom thought I'd been killed, if only for a brief period of time — felt a strong need to interact with me in the days following the attack. People needed to be around me and to contact me more than I needed to be around them. I realized they had this sense that they had almost lost me, but I still didn't have any counterpart response. My shock wore on: I didn't really have a sense that I had nearly been killed, or that I had been in grave danger. But I understood their desire for contact with me in a detached way, though I still resisted and limited interaction.
I became increasingly resentful of people who would attempt to
equivocate our experiences by recount the stories of where they were and what
they saw when they watched the events unfold on television. While I understood
people’s need to participate and experience their own grief, and I realized the
intensity of this global flashbulb memory, I felt people were showing me a lack
of compassion. The World Trade Center attack only happened to people who
were there. It did not happen to people who watched in on television. They did
not hear the whistle of that plane. They did not hear the roar of the fires, or smell
the smoke. As much information as they had, or thought they had, it was not the
same as being there.

One of the few benefits to returning to work was that I was surrounded by
other survivors of the attack. While no two people had an identical experience,
our collective psychic injuries and emotional reactions were similar. We found
mutual reassurance in the parallels, and mutual outrage in the offenses of others.
We vented our frustrations about our insensitive senior management, and their
cavalier behavior towards the three victims from the firm and toward those of us
who were survivors. While we appreciated Merrill’s effort and expense for a
large-scale Employee Assistance program, we didn’t feel enough was being
done at the firm management level to be kind and understanding toward an
employee population who could not get through a day, or even an hour, without
crying, and we resented this collective executive denial. We were saddened by
media discussions of “getting back to normal,” jealous that the rest of the world
could and would carry on, while our suffering would continue, that we might
never be normal again. We talked endlessly of our newfound anxieties, over planes in the sky, over traveling to work far from home, over working, over the pressure to “talk about it,” over our uncontrollable emotionalism, over our parents and families and children, over our lost colleagues. We were different now, and we knew it: our grief surrounded us like an aura, we were bound together, and we could only be truly consoled by each other.

On the Thursday after the attack, I was called into a mandatory meeting by my merciful Merrill Lynch manager. Seeing the skyline without the towers was wrenching, but I forced myself to do it, to look at the awful architectural amputee, still burning and smoking and shifting and collapsing, an awful testament to the menace and heroism of humanity. From the safety of the ferry, I forced myself to face the degree of threat that I had withstood, to look at the spot where I was standing, to see how close I was, to look at the debris that had landed in the area. I forced myself to do a lot of things that day: ride the ferry again, maintain my composure while walking through midtown Manhattan past armed National Guardsmen, to walk through and around other obvious targets that had already experienced multiple bomb scares (like Grand Central Station), to ride in an elevator, and to try and appreciate the beauty of the long, eternal remaining famous endless skyline, the life that did remain. But for me, there would be no joy in that altered view, only sorrow for the figures that were lost.

In a meeting in Manhattan, on a high floor with windows that faced the adjacent Pan Am building, I realized I wasn’t the only one struggling to maintain my composure on a moment-by-moment basis. As we discussed another inane
marketing issue, the sound of a plane was heard in the distance. The room fell quiet as we all listened for a moment, as if the sound alone would tell us: friend or foe? The noise became louder, then deafening. We all left the table and got to our feet. My colleagues collected near the doorway (how fast could we get down from the 40th floor?), while I tried to try and look out the window, watching for the approaching plane, to define the threat. What was the target? Where? How close? How much time did we have this time? What were our options? By the time the plane passed, a huge F-16 flying patrol low over the Hudson, we were so relieved and yet shaken that we knew we would be unable to finish the meeting, crying and nervously giggling as we were. What was the point, anyway? What was the point of talking about how to send out the client statements to our Middle East clients without a U.S. postmark if we couldn’t even resolve our feelings of imminent, immediate danger? We were even afraid of our own safety measures. We were, truly, terrorized.

There was even still beauty in the world to content with, threatening in its own way. On the way home, the towers were still gone, like a lover not in bed. (It would be Christmas before I would stop looking for them.) There was a full harvest moon right over the skyline that was big and bright and beautiful, the perfect chill in the air signaling the change in seasons, the callous march of time, and I felt that God was mocking me, mocking us. I consoled myself that maybe the missing (still missing, not yet victims, not yet dead) were entitled to some splendor overhead. But it was hard. How to think of the world in this new way: this balance of barbarism and beauty? Even just pictures, images of the towers
intact, glorious, in all hours of the day and night, dark and illuminated, at sunrise and sunset, all of the ways that I knew them in my life, in their life, would pierce my composure. Equally ripping were the images of the rubble the towers had become, images of the fires, the smoke, the eerie glow of the stadium lights that would become the tower’s nightly legacy, their ghosts haunting their former residence, were very upsetting for me. I wanted to see, I didn’t want to see. In the first couple of days after the attack, sometimes in the news footage of Ground Zero, the camera would spin around and I would catch a glimpse of a nearby tall building and my heart would leap: Look! There’s one! There’s a tower! Look! It’s okay! They’re not gone! It never happened! It was the cruelty of shock and denial, followed by the inevitable pain of letdown, like thinking you’ve seen the face of a lost love in a crowd. I missed them. I missed my towers. I missed my skyline. I missed all those people I never knew, and all of the ones that I did. My heart was broken.

I was very moved by all the flags. Knowing that they were for the victims, and the survivors, and the families, I felt like every flag was for me. Every flag was to show me support, and love, and sorrow, to let me know that it was not and would not be all for naught, to give me strength and courage and reassurance, to show me the way. America would be defended from this attack. I would be defended from this attack. I would be as safe as I could be from now on. I was moved beyond belief by the unprecedented demonstration of global support. I cried when they played our national anthem at Buckingham Palace. The flags helped, a lot. I didn’t have one of my own, so I made one, out of paper
and cardboard and acrylic paint and clear postal tape, and put it in the rear
window of my car. Eventually, I got a sticker for my car and a big flag for the front
of my house. But I'll always keep my little paper and cardboard flag, to remind
me of how proud I was, of all of us, in this country and on this planet, on those
first few days, when all Americans were New Yorkers, when all the world was
American.

I became very aware of the interconnectedness of the world, all the lives
you never realize you touch. People who barely knew me, and people I hadn't
heard from in a long time, let me know that they cared about me, that they had
been worried about me. My neighbors in Toms River and in Bayonne. Old lovers,
Vinnie and Jeff. An old friend from high school, Terri. The guy who sold me my
coffee in the morning, Mike. Former colleagues from work that I ran into on the
street, Chris and Pat. They were all so relieved to see me, to hear from me. This
new, warm connection to the whole world was ironic, considering my
estrangement from my family and friends.

The warmth was still tempered by grief and helplessness. When I heard of
assistance that was needed, I would try to get in on it, only to discover that they
were overwhelmed with volunteers. I remember seeing a report about the
abandoned pets in the area, and as an animal lover, I was devastated. No one
was untouched, even pets had lost loved ones. But by the time I got through to
try and adopt, to try and do something, they had more help than they could even
reply to. Finally, I donated money to the Red Cross, and volunteered for training
at a later date. It was all I could do.
As days passed, my identification with the victims intensified. Why hadn't I died? All of these pictures and rolling tape of the victims' families? Why not take me, single, childless, without romantic attachment, and leave some wife, a mother, a beloved? I would have died for our freedom. I was willing to trade places, to relieve the pain of the world. Why so random? Why them and not me? And if it had been me, what then? I never would have gotten the thank you notes from my mothers party, never would have gotten the note of joy and pride and gratitude from my mother that she signed, "Love, Love, Love, Love, Mom." Why did I get to live to see that note? But if I had not, who would take my house, my cars? Who would want my most precious things (and what were they, anyway)? Where would they bury me? How was it that I had almost left this earth, but somehow got to remain?

My mother and brother sensed my intense distress but were concerned and baffled by my withdrawal. They knew me as an extrovert, a person of high emotion, who usually turned to others in times of stress. Now all of a sudden I was a mess, hiding out in my house, not returning phone calls. They were convinced that if I just hung out with them all the time and talked about it a lot, I would feel better.

I was appalled at the idea. As far as I was concerned, I was inconsolable. I guess that was part of the problem. I knew that I could not be consoled. In fact, I thought if someone saw me at the height of my hysteria, they might try to calm me down, or even sedate me. But I didn't want to be comforted, or calmed, or sedated. I wanted to get my emotions out. Whatever was in there, I was getting
rid of it, I wasn’t going to bottle it up and let it eat me alive. This wasn’t a pretty process, nor was it conventional. I didn’t want anybody getting in the way, nor did I want anybody getting hit with the emotional shrapnel of my rage and grief. I thought if my family saw me like that, they would be worried beyond belief, I also thought if anyone was around, they might get hit or yelled at or bit, things I was already doing to my sofa and bed pillows. I just wanted to be alone, to suffer, to work it out, to get it out, to recover in my own way. I didn’t want anyone telling me that it was going to be okay when maybe it wasn’t.

It’s still hard to express why I wanted to be alone so badly, why I became so withdrawn. Primarily, it just felt like the right thing to do, at least for me, since I was totally overwhelmed, but there were many factors involved. I had to get hysterical, and I could only do that if I was alone. I was expected to talk about what I had seen, and what I was feeling, but words were truly and wholly inadequate to describe either.

And what good would it do? No matter how many times I told the story of what I’d been through, at least verbally, the capture was incomplete, both for me, and for the listener. Even more, the things that haunted me were too terrible to share. What good would it do my mother to know I was so close that I could see that the shades on the windows of the United plane were all drawn down? What possible positive outcome could arise if I told my best friend of how I watched some of the jumpers twist and turn and struggle with their fates, somersaulting all the way through their terrible downward spiral? What good would it do my brother to know what it was like for my team members to walk through the pulverized
remains of our spiritual and professional colleagues, who had landed in horrific gigantic puddles literally at their feet on West Street, as bodies still rained down on them and on other bodies, landing with awful, irreverent unimaginable noises, chunks of flesh and showers of blood and brains and torn apart limbs indiscriminately flying in every direction with each landing? What would anyone gain from spreading these detailed images of death and violence and helplessness and madness and devastation? What could I tell you about all the people who never knew what hit them, or all those that knew and died anyway? All of it was inconsolable, incomprehensible, for me and the other survivors, for all the horrific things that we had seen and would never un-see again. What good would it do to give one more person nightmares from things they had not personally witnessed? Why not let just one more person sleep tonight?

I was afraid that in sharing my pain, it would not diminish, but rather spread like a virus. I could not, would not, speak to anyone of these things, I would write of them, but I would not speak of them, because as much I could not bear witnessing the act, neither could I bear watching the response, the reactions, to my account. I could not watch the dawning horror on people’s faces as I told my story, because it reflected and made more intense the horror in my own soul. Because if you were not there, as bad as you could imagine that it was, as much as I might tell you, we still could not do it justice. And we should not try. It was, truly, unbearable. I wanted to contain the collateral damage.

I was aware that I was grieving, and like I had never grieved before in my life, and I have done some of that. I lost my father when I was fifteen, and then
my grandparents and others in the years that followed. So I knew what it was to
live in the dark silent hollow cave of grief, to live in darkness, in the shadows,
but still see the light, the world, the beauty just outside of the cave, and think life
and the world unkind and unfair, close and yet distant, a joyless cruel illusion.
And I was revisited by those losses. I missed my father. In a Pearl Jam song
called "The Long Road," there are lyrics that say: "I have wished for so long, how
I wished for you today." Though dead and gone for twenty years, I thought he
could help me, I thought he could save me from my grief. I went to the cemetery
and prayed to him to send me someone, someone to save me from my grief.

As days went by, I realized this grief was no cave. This was so much, so
much, so much worse, so much deeper. This was a grave. There was no light for
me where I was, I was buried in rage and sorrow and despair for myself and my
world and the people still in the rubble. I was touched by beauty, particularly
music, but my only response was tears. When Neil Young sang John Lennon's
"Imagine" on the Tribute to Heroes, I became so totally and loudly unglued that I
was afraid my neighbors would call the police. I sobbed and screamed and
wailed and thrashed and howled and snarled and sobbed my rage and sorrow
and frustration into the arm of the sofa, the hunter green throw pillows. I realized
that this savage bloodletting of emotion would be with me for the rest of my life.
This pain – this cataclysmic hysteria – would always be on standby for replay in
streaming multimedia technicolor intensity, broadcasting emotions without editing
or filtering or even volume control, like a preset on a stereo – always tuned to the
same channel, playing the same long wall of rage and grief.
That was when I became afraid. Afraid that these emotions did not diminish, that I was going to have to do something about that. That if things got to be too much, for too long, and it was already very close to that, that I would have the option of going out into my garage, and leaving all the doors and windows closed, and starting up my beloved red Alfa Romeo, recline my seat, and go to sleep. It would be that simple, that painless. People would understand and forgive me, people would have to understand and forgive me, that even though I had lived that day, I might not ever be able to live again, not like this, not in this pain, not in this grief, not living in a grave, with a broken heart and empty eyes for a headstone. I would rather die in peace than live in that kind of pain, my very soul raped and torn by a deliberately misguided flying bomb.

Toward the end of September, about the time that all hope was lost of finding any survivors, I reached my low point, for maybe only a day or two. I knew I had a choice, but I was going to choose to live. As emotionally overwrought as I was, intellectually I knew if I hung in there, it would get better. It would not always be this bad. I had survived the day, I would survive the aftermath, I was strong enough. Enough lives had already been lost. At the very least, I owed it to the people who didn’t have a choice on September 11, and to the loved ones they had left behind.

I had to get my pain out. I knew if I kept facing and experiencing my pain, I would be okay. But I had to do it mostly alone. I knew if I kept getting hysterical, I would be okay.
So many things seemed stupid and pointless, especially my job. Merrill went through a major reorganization less than three weeks after September 11th. The much-loved chairman of our division, the son of one of the firm's founders, was unceremoniously shown the door. I had worked closely with this man, and I was hit very hard -- we all were. It only served to reconfirm my desire to leave Merrill, leave Wall Street, leave lower Manhattan, take control of my own life and follow my dreams of being a writer. How I was going to do this when I could barely get out of bed in the morning, or get through an hour of the day without crying, I wasn't sure, but I knew I wanted to try.

Then someone did come to help me. An old friend and former lover began to call, to try and get me out of the house and out of my head, and where other had failed, he succeeded. Mark didn't try to tell me that he knew what I was going through, although he had lost his father only a few months earlier, so maybe he did understand more than most. He recognized I was inconsolable -- he let me get as upset as I wanted and didn't try to stop me or tell me to get over it. He helped me realize that my insane emotions were perfectly normal, that I had been through a holocaust. He just kept showing up, and didn't try to make anything normal. He had entire conversations by himself and didn't mind that I wasn't paying attention. He repeated himself as necessary and didn't get mad at me. Gradually, through his patient efforts, I began to connect to him. I was able to tell him things I couldn't say to other people, and my sense of desperation and isolation decreased.
Gradually, I retook control. I was beginning to understand and believe that while I would never be the same again, I would be okay. I started to cry less and protect myself more. I began to make decisions about my life and see the future in a hopeful way again. I reiterated my desire for a severance package from Merrill and was approved. I was able to tell people little things — or at least I was able to tell them that it was nearly impossible for me to talk about the day, the events, and the pain of September 11th.

I began to realize that some of my social discomfort was related to the sound of people’s voices — that any raised voice, even a casual yell between people from room to room, reminded me of the screams and shouts of that day. I also found that being in large spaces with lots of people — like shopping at the mall, for instance — was also very uncomfortable, nearly terrifying. Images of the towers continued to upset me, reminding me of the relative peace in my life, before. I cried less often and less intensely. My nightmares diminished in frequency. My vigilance for planes, my startle reflex, my fears and anxieties, became more manageable, but did not disappear. I had a lot of trouble falling asleep at night, images of the towers and the people falling would begin to intrude almost as soon as I closed my eyes. I was unable to say my goodnight prayers, a lifelong habit, because it reminded me so much of that day.

The physical toll also began to emerge. I suddenly developed a lot grey hair, one big patch near my temple. I developed a bad cough with occasional uncontrolled vomiting. I regularly slept 12 or 14 hours at a stretch, with naps in between.
Even when I was managing alright, little things would remind me. Nearly two months after the attacks, my laptop that had been in my office was returned to me, covered in Ground Zero dust. I submitted one of my photos of the towers to a website about September 11th, (www.HerelsNewYork.com, 2001), and weeks later heard that it was accepted. I was relieved as the number of lives lost declined, ultimately half of the original estimate of 6,000, and wondered if, how maybe God did perform the weird astonishing miracle for which we had all been praying. I was glad for these small signs of recovery, progress, hope, but still so sad that any of it ever had to happen.

I kept thinking that I would get “better,” less anxious, less depressed, improved functioning, increased concentration, as I passed milestones, like returning to Ground Zero (see Appendix A), or Thanksgiving, or getting laid off in December, or Christmas, and the anniversaries, the 11ths, one month, two months, three. Sometimes I was hard on myself, thinking I was not entitled to feel as bad as I did for as long as I did. As time passed, I got better, but it was slow progress, minutely incremental. I was having trouble getting back to life. First I had feared for my life. Then I feared for my sanity. Always, I feared for my own survival.

As days went by, I did improve. I measured this mostly by the quantity and frequency of my tears and my flashbacks. Right after the attacks, I cried prodigiously, many times a day. By December, I was down to maybe a couple of times a week, and I recognized most of the triggers. Any television or movie scenes where people were running for their lives, I found very upsetting. Images
of the towers intact and in all their glory would batter me. The flashbacks diminished, although I could summon them with total reliability in detail so exact that sometimes I got chest pains: the awful noise of the plane and then the impact, the red hot intensity of the explosions, the merciless whipping cracks of the fires, the sensation of standing at the foot of them and looking up and seeing it all, seeing it all.

The holidays were rougher than I would have thought. I began December with a wicked stomach flu on top of an aggravated ulcer. My medication gave me nightmares: I was chasing Osama Bin Laden and my life depended on his capture; I was in a situation where I was introduced to Rudy Giuliani (a fellow college alumnus and longtime hero) and he snubbed me in an awful way. I was more affected by the 100-day anniversary than I would have expected; the news that the fires were finally extinguished, that it was over, was meaningless at best. It was still so recent, and all so long ago. Rudy Giuliani came out and said what I’d thought all along: that we should not rebuild office space at the World Trade Center that it was now hallowed ground, that people had given their lives for freedom and we must never forget.

I was devastated when the World Trade Center elevator operators were criticized in the media for “abandoning” their posts, and I was nearly rabid in their defense, because I felt if they were criticized, then no one’s behavior was safe from attack. I would have been heartbroken if someone criticized me or any of my loved ones for their acts on that day: it was fight or flight. After months of media hero worship, the pendulum was starting back the other way to finger-
pointing. Didn't they understand that we were all running for our lives, that someone was trying to kill us?

Osama continued to menace and threaten and antagonize us via videotape. I took to heart his promises to destroy America, or at least I knew he would try and try again, and I feared for myself and my loved ones. I had concerns, partly rational, partly irrational: military bases and a nuclear power plant near my home that I felt could be possible targets.

Christmas was approaching, an annual inevitability. My heart was not in it. I practically rubber-stamped all my cards – no notes to anybody. I told as many people as I could that I didn't want to exchange gifts. Nobody protested. I had planned to travel and I cancelled the trip. Four days before Christmas, I went to the mall, alone, late one evening, to pick up the few presents that I could not dodge. The mall was more crowded than usual, but still within tolerable range, for most people, anyway. I could not take the voices, the sounds. I could not take the crowds, the faces. My vulnerability became so overwhelming that I began to shake and cry. I ducked inside a poster store to collect myself. Once inside, I turned, and right in my face, large as life, the World Trade Center. A whole wall of framed posters, big, small, in daylight, in evening light, at dawn. What could I do? These photographs were undeniably beautiful and moving and painful, not just for me, but for everyone. Even in their awful void, the towers will be unavoidable for the rest of my life. There may come a time when we – at least those of us here in New York – when we don't think of them or speak of them or
hear of them every single day. That day has not come yet, and may still be a long way off.

I continued to have setbacks. The day the plane crashed in Rockaway was a rough one, but everyone was very supportive. I saw the movie Vanilla Sky, and was devastated at a scene when a character jumps from a tall building. At my cousin’s wedding in October, the gospel according to Matthew was “if you build your house on sand, it will fall, if you build your house on rock, it will stand.” (American Bible Society, 1976). Nobody understood why I was sobbing. But I happened to know that the World Trade Center was built on bedrock, and it fell down anyway. I was there. I saw the whole thing.
Chapter III
Survey of the Literature

There are two general categories of literature about psychology in general; I have already referred to them in the Introduction as the mass media literature, and the academic / clinical literature. Mass media literature, including books and periodicals, is directed at a general audience, and would include the category of self-help books. Academic and clinical literature is targeted toward social workers, psychologists and psychiatrists, to assist them in treatment of their patients. For the purposes of this literature survey, I am going to adhere to those distinctions.

Mass Media Literature of Trauma and Recovery

In the last decade, the mass media literature on trauma recovery consistently contains the five-step grief recovery process: denial, anger, bargaining, depression, acceptance. My first exposure to the five-step process after September 11 was on the Red Cross website (www.redcross.org), which included a list of possible symptoms and a brief discussion of the five-step process (these materials have since been changed and now include a broader approach). Later in the week of September 11, I saw my therapist, and she gave me photocopied materials on Post-Traumatic Stress Disorder from the Diagnostics Standards Manual (American Psychiatric Association, 1994), with
specific clinical criteria and symptoms, but not how a patient should handle it or what to expect.

I received additional information about recovery from Merrill Lynch Employee Assistance, at one of the mandatory group therapy sessions that were held for all employees in the New York / New Jersey area about a week after the event. At the sessions we were given handouts about trauma and grief — again including the five step process — and encouraged to share our stories related to September 11 as much as possible.

Despite the daily reinforcement of the grief and trauma process, I didn't think I was experiencing denial, anger, bargaining, depression, acceptance in an orderly, phased manner. If anything, I was experiencing everything and more, all at once. I felt like I was trying to send the volume of a fire hose through a garden hose, while being the house on fire.

Since my symptoms intense withdrawal and inability to talk about what had happened seemed outside of the "norm," many of my questions remained. Did I have Post-Traumatic Stress Disorder? If not, was I going to get it? Was there any way I could avoid getting it? Was there something I could be doing to avoid getting a bad case of it? If my experience was different from other experiences, should I expect the same recovery process, or a different one? What did that mean? Was it cause for concern? Who knew more about trauma and recovery, anyway? A doctor, or a survivor?

My fears of a debilitating case of PTSD stemmed from personal experience. A close family member had experienced a trauma many years
earlier, and had suffered immeasurably. So it all came down to this: Was I going to be okay? Or was I going to be one of those people who were "never the same" after a tragic event? Could anybody tell me?

Post-traumatic stress disorder was added to the Diagnostic Standards Manual (DSM) in 1980, largely as a result of clinical observation and research done with Vietnam veterans, after finding that their collective symptoms did not fit into standard clinical diagnosis and treatment practices (Schnurr, 2000), and could develop months or even years after the event actually occurred, called delayed onset. According to Rachel Yehuda (2002), and consistent with the latest DSM-IV,

to be given a diagnosis of PTSD, a person has to have been exposed to an extreme stressor or traumatic event to which he or she responded with fear, helplessness, or horror and to have three distinct types of symptoms consisting of reexperiencing of the event, avoidance of reminders of the event, and hyperarousal for at least one month ... Reexperiencing of the event refers to unwanted recollections of the incident in the form of distressing images, nightmares, or flashbacks. Symptoms of avoidance consist of attempts to avoid reminders of the event, including persons, places, or even thoughts associated with the incident. Symptoms of hyperarousal refer to physiological manifestations, such as insomnia, irritability, impaired concentration, hypervigilance, and increased startle reactions (p. 108).
As my review of the literature became less personal and more academic, once I decided to pursue the topic as part of my thesis, the self-help books I got out of the local library, all penned by experienced Ph.D.'s with private practices, consistently discussed the three primary symptom categories of re-experiencing, avoidance and hyperarousal, but revealed varied recovery approaches for helping trauma survivors cope with the aftermath.

In *Trauma and Recovery* (1992), Judith Lewis Herman discussed the differences between single incident trauma (such as an assault) and prolonged incident trauma (such as a kidnapping-hostage situation). In her view, "the fundamental stage of recovery are establishing safety, reconstructing the trauma story, and restoring the connection between survivors and their community," or decreasing isolation. She emphasized the importance of empowerment, in the context of interpersonal and therapeutic relationships, that each trauma survivor must feel in control of their recovery. Extensive discussion of the perils of the therapeutic relationship include transference and counter-transference, or submission and dominance, as the survivor travels from helplessness to choice and power. Recounting the story of the trauma, integrating it into "normal" memory, allows the survivor to move into hopefulness for the future.

Another variation of the healing process, from Aphrodite Masakies (1992), included "remembering the trauma and reconstructing it mentally, feeling the feelings associated with the trauma, (and) empowerment – the mastery stage."
Relaxation techniques are recommended to reduce anxiety and achieve mastery. Matsakis has also done substantial writing on survivor guilt (1999).

Benjamin Colodzin (1993) focuses less on reconstruction and retelling, and more on coping strategies for survivors as part of the healing process, including meditative exercises, self-care, and managing fear, anxiety and stress.

While I could see how these approaches would be reasonable and helpful, they seemed simplistic to me. How could I reconstruct the trauma story if I couldn’t even discuss the trauma? How could I relax when I was so vigilant and easily startled?

Don Catherall (1992) describes his version of the healing process: the primary trauma stage, including re-experiencing and numbing, and the secondary trauma stage, which includes social withdrawal. “Initial blocks,” including gaining control over grief, rage and mood swings, must be resolved before normal activity can be resumed; pursuing tasks and rituals can assist in regaining a sense of normalcy and control. Earlier traumas may also resurface and need to be resolved. Jon G. Allen (1995) reiterated much of this approach, including the two-pronged responses of re-experiencing and numbing.

These approaches at least acknowledged my urge to withdraw. But I was not having episodes of re-experiencing the event, a primary focus for both researchers.

Mariann Hibel-Steer (1995), a survivor of an assault in a riot, presented what I believe to be the best approach for survivors and their families: do whatever feels right. Considerate of survivors with limited concentration abilities,
she presented the book in a direct, easy-to-read bulleted format. She discussed in detail the symptoms, reactions, and emotions that can occur after a trauma, covering the entire range of a survivor’s response, emphasizing that whatever the survivor was feeling, it was normal.

Survivors need the advice of former survivors. While it’s supportive to maintain contact with survivors of the same trauma, it’s inspirational to have contact with long-term survivors of trauma.

Clinical and Academic Literature of Trauma and Recovery

In most of the clinical literature, the focus is on the survivor’s behavioral reactions, and not so much on the survivor’s emotional reactions. For a lay person, reading clinical literature about your own condition is like experiencing an unpleasant alternate reality. Since I am not a social worker or therapist, I will only assess or criticize these clinical approaches from a patient/survivor’s point of view.

In Horowitz’ Stress Response Syndromes (1997), he expands out of the DSM to discuss some of the conditions that must be present for a diagnosis of post-traumatic stress disorder, such as the experience of a traumatic event to self or others in the immediate physical or emotional sphere, and a response of fear or helplessness. The event is re-experienced persistently, stimuli related to the event (including interpersonal contact) is avoided, and symptoms of hyper-arousal are sustained. These symptoms continue for more than one month.
Horowitz then discusses the "two important phenomena", which are the similar to some mentioned earlier: numbing and hyper-vigilance. These two different sets of responses can be experienced by the same survivor at different times. The numbing phase is characterized by denial and withdrawal; the hyper-vigilance reactions are characterized by confusion and excessive startle reactions.

So what did it mean that I was experiencing both sets of responses, but that I was missing the “critical” symptom of re-experiencing?

Again, a response / recovery process was offered: two in fact, one “normal,” and one “pathological.”

Table 1, Horowitz Stress Response Chart

<table>
<thead>
<tr>
<th>Normal Response</th>
<th>Pathological Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>• outcry</td>
<td>• overwhelmed</td>
</tr>
<tr>
<td>• event</td>
<td>• panic or exhaustion</td>
</tr>
<tr>
<td>• denial</td>
<td>• extreme avoidance</td>
</tr>
<tr>
<td>• intrusion</td>
<td>• flooded states</td>
</tr>
<tr>
<td>• working-through</td>
<td>• psychosomatic responses</td>
</tr>
<tr>
<td>• completion</td>
<td>• character distortions</td>
</tr>
</tbody>
</table>

It was of no comfort to me that I seemed to be in the “pathological,” or extreme, response category, putting me at higher risk for a brief psychotic
disorder, an extreme form of PTSD characterized by psychotic episodes, disconnected from reality.

Horowitz, with the assistance of Nancy Wilner, then offered a view that there are “general response tendencies” associated with different kinds of specific trauma, such as military combat, concentration camps, nuclear holocaust, disasters, bereavement, death of a parent, personal illness, the threat of death, rape, and mental illness. In each type of trauma, there is evidence that the various survivor groups experience certain symptoms, and certain aspects of recovery, that are uniquely characteristic of their trauma, survivorship and recovery. Survivors of Nagasaki and Hiroshima reported anxiety about the invisible contamination of radiation for months, and then years, after those attacks, as well as a “lifelong identification with death and dying.” Concentration camp survivors reported a blesching away of childhood memories, attributed to the intensity and duration of their experiences.

What are the factors in how trauma and recovery are experienced? As mentioned earlier, these include gender, ethnicity, exposure to prior trauma, and type and duration of trauma involved. Other factors are personality, life stage, personal resilience, education, and availability of a supportive environment (Horowitz, 1997). Some factors increase an individual’s risk for developing post-traumatic stress disorder, such as a history of psychiatric illness for self or first-degree relatives, early sexual or childhood trauma, adolescent behavioral disorders, high neuroticism, life stress before and after the trauma, and being female (Friedman & Marsella, 1996).
The good news was that buried in this literature I was finding evidence for individualized response to trauma. The bad news was that the only risk category absent from my personal risk profile was adolescent behavioral disorders.

If all of these factors can potentially contribute to varied impacts in experiencing and recovering from stress, why are these “recovery processes” presented as universal? While they are useful when used in a flexible manner to put survivors and their families at ease in times of high stress and high emotion, their confident, simplistic presentation can cause additional confusion. Presented as a desirable standard for trauma response, these approaches can inhibit the recovery of survivors by leading them to question the validity and normalcy of their own emotions. The information can also interfere with the support and communication process, as improper and inappropriate — perhaps unreasonable — expectations are delivered to the members of the survivor’s support system.

Many of these frameworks are similar. But why the wild variations? Why do each of these approaches present themselves as “the one”? There is an odd scientific bias that prefers clean solutions to messy problems. Such is not the case with psychology, or trauma, or any other realm of internal human experience. Everybody needs to develop their own way of resolving their emotional conflicts. All of these books, all of these approaches, are going to help someone. But none of them will help everyone.

Instead, recovery needs to be presented more accurately and approached as a set of broad-ranging emotions and behaviors, specific to the survivor and
the trauma that was experienced. If we learned anything from September 11th about trauma and recovery, it was this.

9.11 Recovery in the Media

Many of the initial articles about the stress response to the September 11th terror attacks focused on how the tragedy had affected everyone—everyone in the U.S., everyone in New York—and how everyone was jumpy, everyone had insomnia, everyone was not eating, or eating too much. Some articles were descriptive pieces about the radically altered state of lower Manhattan; some about what to tell the kids who saw things that even adults couldn’t handle (Bernard, 2001; Brooks, 2001; Cramer, 2001; Fishman, 2001; Gates, 2001; Gibbs, 2001; Jacobson, 2001; Kantrowitz, 2001; Senior, 2001; Smith, 2001). It made me angry and frustrated, all the attention on the victim’s families, the firefighters and policemen, the displaced residents of Battery Park City, but little discussion of the ongoing struggle of survivors. I didn’t wish to deprive anyone of their moment in the sympathetic sun, I just wanted us to have our moment, too. The odd, prolonged silence on the subject of survivorship further increased my sense of isolation and overreaction.

The New York Times, with its thorough and compassionate coverage of the events and the aftermath, had the first article to address the unique reactions of survivors, “people who escaped but cannot shake the vibrations, who bore witness but cannot blink away the images...” (Barry, 2001), anecdotally relating how people were coping on the one-week anniversary of the attacks, weeping,
being jumpy, wishing they had done or could do more. By the end of September, the Times was discussing "survivor guilt," (Goode, 2001) and the projected regional scope of trauma and stress response to the attacks. Andrew Jacobs wrote a piece emphasizing how many survivors had trouble leaving the house, working, and talking about their experiences:

Grief counselors have been telling survivors to talk about their experiences, but Dee Howard and Inez Graham say each retelling brings on an unbearable rush of panic. "Everyone wants to hear the tragic details, but they don't really care how I feel," said Ms Howard..."They just want me to get on with my life" (p. D1).

In an article about Post-Traumatic Stress Disorder, Geoffrey Cowley (2001) described how stress reactions are normal in the aftermath of a disaster, but when they persist, they can cause a cascade of other problems. To escape a terrifying memory, people with PTSD typically avoid activities that trigger it, and that response can turn them into prisoners" (p. 50). "Even Soldiers Hurt” (Goldstein, 2001) described the unexpected, overwhelming response of civilian and military personnel to the mental health program after the attack on the Pentagon. It was clear that few survivors, regardless of status or training or even brute strength, felt safe.

There were other glimmers that my insanity wasn't aberrant. According to Brooks (2001), "Psychologists like to put things in stages if they can," says
Randal Quevillon of the Disaster Mental Health Institute, "but reactions to terrorism don't come in phases."

Some of the triggers of stress response for 9-11 survivors were documented (Goode, 2001), and included planes, sirens, sounds, smells. Traumatic events achieve their potency by fusing memory and intense emotion. The responses of the body and mind — feelings of grief, a rush of stress hormones that set the heart racing, the senses on full alert, the muscles ready to fight or flee — become inextricably entwined with the recollection of what occurred. The challenge for those who have survived horrifying experiences is to gradually tame the emotional storm aroused by the memories. For most people, emotional equilibrium returns in a period of weeks or months. For others, the struggle can last for years, or even a lifetime.

All of the articles consistently recommended seeking psychological help. But I was already doing that, and I wasn't getting better. I began to connect my recovery to milestones. I would feel better, I told myself, when I have left Merril Lynch. I left in December, and I did not improve. I would feel better. I told myself, when the holidays have come and gone, but they came and went I did not improve. I would feel better, I told myself, when I have gone on vacation, which I did in January. In North Carolina, my extended family was so distressed at my fragile state that they called my mother. But I knew that I was better than I had been.
In Florida, far from New York, far from winter, I did improve, a little, and functioned a bit better. But the nightmares still came on, and the palpitations at night, and the crying jags. I still had a very hard time talking about it, and still felt disinterested in the world and disconnected from family and friends. I was numb, and afraid of planes in the sky, and got the tightness in my chest when I saw images from that day and all the days before and all the days after. By the time February rolled around and I was wrapping up my PTSD research for this thesis, I had resigned myself to a long, painful, arduous depression and recovery, reconciled to the possibility that I might never feel like "my old self" again.

Then I saw a segment on CBS news show, "60 Minutes II," called "The Second Wave," about some of the severe trauma reactions of World Trade Center survivors. The segment mentioned a pilot study of the effects of trauma on World Trade Center survivors being run by Dr. Robert Grossman at Mount Sinai School of Medicine.

I thought, that's for me. That's what I need.

I called Dr. Grossman the next day. His assistant called me back, a polite woman who explained that there were some criteria for eligibility for the study. She inquired as to where I had been that day, and I explained. Then she hesitated. I thought I knew what was coming. She asked me, "Did you run for your life?" I started to cry, knowing that was the thing that made the difference, that was exactly the thing that separated me from the people uptown, from the people who saw it on television. Finally, I felt so relieved and validated, I began to cry. Yes, I did, I said, yes, I did.
The Brief Recovery Program

The treatment program at Mount Sinai Hospital in New York City was a research study of September 11th survivors, to measure the physical effects of trauma on verified cases of post-traumatic stress disorder, to study the correlation between stress and cortisol levels, measured in structured, timed saliva and urine samples. The study also attempted to measure the effects of two different therapeutic approaches on the patient's physical and psychological state over the course of treatment, to further correlate the link between cortisol levels and stress levels.

On my first visit to Sinai, I answered a series of detailed questionnaires (Appendix B) about my mental state, measuring on scales how I felt about myself, my emotions, other people, the world, the attack, my past, my future, as well as the frequency of nightmares, startle responses, and other anxiety and depressive behaviors. I reviewed my questionnaires and responses with a staff psychologist, and was then trained in sample collection. I was told that I would be chosen at random for either conventional Supportive Counseling (SC), or the Brief Recovery Program (BRP), a combination of exposure therapy, cognitive therapy, anxiety management (including breathing exercises), and interpersonal therapy. (Appendix C).

My first appointment for therapy was three days later, after sample collection was completed. I then learned that I had been chosen for the Brief Recovery Program. In my first session, we went over my emotional state since
the attack, in particular my inability to relate to others, and my emotionalism about talking about the attack. I was taught some breathing exercises by my therapist, as well as a technique to measure my distress levels on a scale of 0 - 100, that would be used as we proceeded with other aspects of treatment. I was also given a handout "Common Reactions to Trauma," (Appendix D), which I was encouraged to use for myself, friends and family, to increase understanding of my emotional state.

Over the course of treatment, one of the primary objectives was to acclimate me to relating the attack, understanding and processing my emotions about the attack, as well as to pinpoint and confront situations that I was avoiding. This would be accomplished by telling my story of the attack over and over during sessions. These retellings would be taped, and I would have homework, to listen to the tapes of my retellings between sessions. Negative thoughts that emerged during the retellings — such as feeling that since I wasn’t in the towers or caught in the dust clouds, I wasn’t entitled to have PTSD — would be addressed during cognitive therapy.

Anxious and skeptical about finally "talking about it," this first retelling was very difficult, and I twice registered a distress level of 100. Over the course of the next five weeks in two-hour sessions, I told my story or parts of my story each time, sometimes twice, and discussed my feelings about the events and my environment and recorded my progress through the weekly questionnaires and my own feedback. During the week, I listened to my tapes, and confronted situations that I had been avoiding. Each week, there was evident improvement.
Five weeks after starting, I could tell my story with a distress level of zero (though I would still get appropriately emotional). I was less depressed, I was not so angry or emotional, I felt more secure and social, and I was more productive. Five months of conventional therapy paled in comparison to five weeks of intense treatment.

What were the differences in the program, the things that helped me so much? I don’t know why telling the story was so much more therapeutic than writing it. Certainly, I needed to be in an environment where everything I was going through was considered natural and expected. I did need to tell my story, but I needed to tell it in a safe environment, where I would not be interrupted or concerned with someone else’s reaction. I needed help unblocking the blockages, venting and managing emotions, in a structured process, in a way that I knew that I would not be hurt, nor would anyone else. I needed someone to tell me if was okay now, it would get better soon, and what to do to get there.

I had survived the day. I had survived the aftermath.
Chapter IV

Conclusions

People need to recover from trauma in the best way they can, in the way they are most comfortable. The media’s pounding of the grief process, particularly encouraging friends and family to get the person to ‘talk about it’ and not allow them to ‘isolate’ or withdraw, and emphasizing the stages that they will go through, while well-intended, is a potential disservice to the recovery process. The ‘process’ needs to be de-emphasized, and people need to focus more on being supportive to trauma survivors in whatever way the survivor needs.

In the course of researching this thesis, I have already seen a shift in the media, away from the grief process, towards a more personalized recovery approach. Trauma recovery is different from grief, and recovery from terrorism may be even further differentiated (Brooks, 2001). When the results from the Sinai study are published in late summer of 2002, I am sure that the conventional grief process will be even further de-emphasized for trauma survivors, and this new framework for trauma recovery will grow in its stead.

I am alive, and I am lucky. I am also not alone. I see myself in other survivors. I see myself in my uncle’s eyes, and in the eyes of a neighbor, and even in the eyes of Rudy Giuliani. In his farewell speech after Christmas, toward the end he spoke of being a survivor of September 11. I watched his strong tones hush, and his speech halt, and his mind sweep back, and a moment of dissociation set in, and I saw myself and I knew his pain. Now a member of an
online survivor group. I know so many people who are still suffering, still struggling. I tell them to go to Sirai, I tell them to get help, whatever help that makes them feel comfortable, but knowing they will only do this when they are ready.

I still do not talk about the attacks much. But at least now I know that I can. I have left the valley of the shadow. But I can also return at will, by just closing my eyes.

I realize, God willing, that I might be like the old men from Pearl Harbor. Someday, fifty years from now, when I am an old woman, some local newspaper may come and ask me silly questions: what it was like to be there that day, and if I think of it well. Sometimes, I wonder, if I ever have children, how will I tell them what happened? How will I tell my children what I heard, what I smelled, what I did, what I felt, what I saw, what it meant? What will I tell them, when they ask me, why?

There are undeniable residual effects. My memory is not what it was, and my concentration lacks its former focus, but I refuse to let it frustrate me. I still have difficulty seeing and hearing planes in the sky. Sirens can freeze me in my tracks. Most of the time I am relatively relaxed, but some days I'm inexplicably jumpy. I identify deeply and become upset with images of other victims of terrorism and war, like the current situation in the Middle East.

I know my case of PTSD was worse than some, not as bad as others. I have recovered. I have recovered safety and security, relaxation, plans for the future, the ability to relate and converse and feel attachment and emotion. I have
regained so much of myself, it is more than I expected, more than I could have hoped. I am glad that I had faith in my own emotions and instincts; I am glad that I kept looking for someone who affirmed my emotions and my experiences, someone who could help me. In that sense, I know that I saved myself a second time.

I am not afraid to be sad anymore, I am not afraid to feel this loss. It’s the least I could do, the only appropriate response in the face of such sadness, the smallest price to pay, and it’s okay with me. I still grieve for the towers and for the victims as I would for any deceased loved one. I cry for their presence and in their absence. I cry at their mention, I cry at the anniversaries. I cry in their honor, I cry at their grave. I cry when I speak of them. I cry when I cannot. I cry because I loved them and because I miss them. I cry for the immensity of human loss and cruelty, but also for the vast courage and compassion. I cry for my own paralyzing fear and my random, fortunate rescue. I have accepted this: for the rest of my life, I will cry. I will not hold it in. I will cry.
References


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Appendix A

Back to Zero

I was down at Ground Zero on Tuesday night for the first time since the attack. I've been able to see it from the ferry, but this was my first time back in lower Manhattan. I went at night, after work. It was about 6:30 PM when I arrived. Every restaurant was open but completely empty. There were some people in the bars, drinking quietly. The whole financial district was silent and deserted, except for tourists taking pictures of each other with the wreckage in the distance.

The entire area around Ground Zero is fenced, with tarps covering the fences to obscure visibility, respecting the dead, protecting the living. In addition to the fences, the surrounding streets are blockaded with parade barriers, and there are police and National Guardsmen on every single corner to make sure the barriers aren't violated. About the closest I got was one or two blocks away, which was close enough to see plenty, but not close enough to see anything I really wouldn't want to see: from one vantage point, I could see a couple of workers in orange vests moving around the pile.

To facilitate the work 24X7, there are stadium lights illuminating the site. The lights combine with the smoke (fires still burning down below) to give this weird bright-blue-white-ghostly light to the whole area. This ghastly ghostly light is apparently visible from as far as thirty miles away -- I have been able to see it
from Newark. "The Pile" as it is called, is down to about one or two stories tall (it was originally six or seven stories high). The low buildings around the towers, some of which block much of "the view," are themselves bombed-out, windows blown, facades peeling off and hanging down in places like old, neglected band-aids. But the wreckage of the towers themselves is simply unidentifiable. The only thing I could discern was some of the stubborn remaining exterior - the metal "skin" from the first few stories of both buildings remains standing as high as 12 stories in one spot. The steel columns lead gracefully up to pointed arches, then transform into soaring fingers, like the interior of a place of worship.

There is movement and purpose. On one street I saw about six or eight hauling trucks lined up together, waiting to go into the site and load up their grisly cargo. After a few minutes, a little electric cart came with two orange-vested recovery workers in hard hats who opened the gates, and led the trucks up the street - such a weird sight - these gigantic trucks obediently and orderly following this tiny little cart.

It was hard to breathe; there was a lot of dust and shit in the air. The smells were of everything from sulfur to menthol to burning to soots unimaginable and unmentionable. It was very quiet. Few people talked (except the tourists, gasping their disbelief. "It looks like a giant car wreck," one woman said. And it did.) The equipment sounded like that of any construction site, a low hum.

The area outside Ground Zero was mostly cleaned up. There's a very thin film of sandy, gritty dust on everything, windows, buildings, walls, streets,
sidewalks. Water trucks were driving around to keep the dust down. About three blocks from the towers, I saw a brightly-lit shoe store that was open, but in apparent defiance had not cleaned its merchandise of the holy dust, which sat on the shoes an inch thick, ornamental buckles and buttons poking through in places, the dust much deeper in the bottoms of the window display. And then I realized, the shoes were covered in dust, but they hadn't moved. The falling of each tower had registered as a 2.0 earthquake on the Richter scale, but these shoes set on their glass shelves, still dangling from translucent plastic pedestals, undisturbed, another weird testament to the inequitable whims of destruction and survival. Lives were lost, but shoes were spared.

On many of the blockade fences there were flowers and posters in memory of the dead and in thanks to the living. There were still pristine flyes of the missing on every street corner and lamppost, on many buildings, storefronts.

A close-up photo of a radiantly smiling, impeccably coiffed young woman, Miriam, 27, 5'5", 130 lbs, Hispanic female, blonde hair, brown eyes, was wearing a green silk blouse and a light brown linen skirt, peach nail polish, wedding and engagement ring on left hand and a pearl and diamond ring on right, a diamond name necklace, rose tattoo on right shoulder, last seen on the 97th floor of the South Tower. Please call. A freckled, boyish man, short haired, bright-eyed, holding a little boy in his arms, cheek to cheek, Michael, 42, 6'1", 210 lbs, white male, brown hair, blue eyes, small scars on left eyebrow and right shin, last seen wearing a blue oxford shirt and khaki pants, platinum wedding band on left hand, worked for Cantor Fitzgerald in 101st floor of the North Tower. Please call. Far
past the point of hoping for rescue, these posters are for the sake of the recovery workers: loved ones of the missing wait for the crews’ shift changes north of the site and hold up pictures of their loved ones: did you find this one today?

For the living, the rescue workers, and the families of the missing, there were posters and banners from all over the world in all kinds of languages. One banner was a Canadian Maple Leaf flag: We Love New York. God Bless. Posters from schoolchildren. P.S. 127 in Bloomington, Indiana: We are praying for you. A tie-dyed bed sheet: Give Peace a Chance. A piece of oak tag with a half-dozen candid pictures of a woman and her family and the same line four times: We will miss you, We will miss you, We will miss you, We will miss you. Even the graffiti has been transformed: some poor soul without paper scrawled the lyrics to John Lennon’s “Imagine” on the side of a bank with a felt-tip pen. Trying to communicate, to interact, to comfort, to thank, to grieve, to leave a message, to leave a mark. Poems. Pictures. Rainbows. Candles. Stuffed toys. Carnations. Roses. Ribbons. And of course, U.S. Flags. And flags. And flags. And flags. And flags.

And flags.

The worst (the worst?! the WORST?!), yes, the worst was the firehouse. Ladder 5, Engine 15 near the South Street Seaport lost 15 men on September 11. Outside the closed doors to the bay, a large, hollow makeshift altar has been made of plywood and painted red. Above the altar, the official firehouse photos of the men, probably all aged 22-45. “Sacrificed in service to their city, their country, their loved ones.” Tom, Art, John, Vince, Tom, Vito, Mike, Tim, Frank, Larry. Paul, Tom, John, Ed, Kenny. Captains, Lieutenants, Firefighters, Paramedics.
Last names Irish, Italian, Eastern European. Fathers, husbands, brothers, sons.
In their mug shot photos, they are consistently unsmiling, almost grim, perhaps
too cool for the camera, or maybe firemen realize that this photo will be used,
God forbid, for their obituary. If their eyes were closed in the pictures, I imagine
they look much like they will look when they are found. If they are lucky. And if
they are found.

People have left bouquets and single flowers in buckets beside the altar.
Lots of lilies, I don’t know why. Votive and religious candles burn in every size
and shape and color. There are rosary beads hanging everywhere. Crosses are
dangling from nails in the wood. Notes, Scribbled letters from wives and
girlfriends to their fallen men, some in envelopes, some laminated, some tacked
to the wood, blowing in the breeze, neatly handwritten. “I’m so sorry, I miss you
so much.” Children have left notes to their fathers, and some have included
drawings of the burning towers. “I miss you, Daddy. I hope I see you in heaven.
And Alex misses you too.” A big, uneven red heart on yellow construction paper:
“We love you, Grandpa.” Some have left stuffed animals, furry jungle creatures to
comfort and protect those now in another world. There are prayer cards jammed
into the cracks of the wood. Many, many photos of happier times, on the job, at
weddings, with babies, at parties, at home.

And flags and flags and flags and flags.

I am standing there, crying, when a firefighter comes out of the door and
goes to the big red Blazer parked at the curb. He is tall, light-haired, handsome,
rugged, a walking stereotype. Embarrassed at my open tears for total strangers, I
turn away at first. But then I turn around. I feel sorrow and rage and gratitude.

Through the windshield of his truck in the evening sodium light, I look at him and he looks at me in complete understanding, and he has tears in his eyes, too. This man is my age, he could be my husband or boyfriend or brother. And we raise a hand to each other, more salute than wave, in comfort and in thanks, and he drives away, both of us still crying.

I try to go to the spot where I was standing when the secone plane hit. But I can't get there - the area is still restricted. I'm generally bad with distances, and now I have trouble measuring in my mind how far exactly I was away. How near to death and danger was I? One thousand feet? Five hundred feet? Seven hundred and fifty feet? Two hundred paces? Three hundred? I am anxious, to go there, to see, to settle this for once and for all in my mind.

But really, what does it matter? I lived. I was physically unharmed. Yet I am drawn to the spot where I stood before and during and after my world and the rest of the world was completely transformed. I want to stand where I stood when I watched the first tower burning, wondering how bad did I want to go to work that day. I want to stand where I stood when I heard the improbable screaming whistle of the approaching 767 coming up the canyon above West Street. I want to stand where I stood when I saw the gray and the blue and the red and the white of the United Air Lines jet enter the building as easily as if it were an airplane hanger. I want to stand where I stood when I heard the booming hammer of destruction fall down on the world of creation, when I saw the inferno
blast into the sky. I want to stand where I stood before I was able to even think to run. I want to stand where I stood and try and understand. I know that when I stand there, I will cry and cry and cry and cry and cry for all I witnessed, for all that thousands of us witnessed, for all that millions of others saw, and for all that was lost in that moment and all the moments that followed.

When I get back there, and I will get back there, I will shed those tears for all of us. Even then, it won't be for the last time.
Appendix B

Mount Sinai School of Medicine, Brief Recovery Program Questionnaires

PSTD Symptom Scale, Self Report Version
PTSSD Symptom Scale: Self-Report Version (PES; Pan et al., 1997)

Directions: Below is a list of the problems that people sometimes have after experiencing a traumatic event. Read each one carefully and circle the number (0-3) that best describes how often that problem has bothered you in the past week. Rate each problem with regard to the traumatic event that brought you to treatment.

0 = Not at all or only one time
1 = Once a week or less/once a while
2 = 2 to 4 times per week/always
3 = 5 or more times per week/almost always

1. Having upsetting thoughts or images about the traumatic event that came into your head when you didn’t want them?
2. Having bad dreams or nightmares about the traumatic event?
3. Reliving the traumatic event, feeling as if it were happening again?
4. Feeling emotionally upset when you were reminded of the traumatic event (for example, feeling scared, angry, sad, guilty, etc.)?
5. Experiencing physical reactions (for example, BREATHE too fast, or your heart beats fast) when you were reminded of the traumatic event?
6. Trying not to think about, talk about, or have feelings about the traumatic event?
7. Trying to avoid activities, people, or places that remind you of the traumatic event?
8. Not being able to remember an important part of the traumatic event?
9. Having much less interest or participating much less often in important activities?
10. Feeling distant or cut off from people around you?
11. Feeling emotionally numb (for example, being unable to cry or unable to have loving feelings)?
12. Feeling as if your future plans or hopes will not come true (for example, you will not have a career, marriage, children, or a long life)?
13. Having trouble falling or staying asleep?
14. Feeling irritable or having fits of anger?
15. Having trouble concentrating (for example, drifting in and out of conversations, losing track of a story on television, forgetting what you read)?
16. Feeling overly alert (for example, shouting to see who is around you, being uncomfortable with your head to the door, etc.)?
17. Being jumpy or easily startled (for example, when someone walks up behind you)?
DIRECTIONS: A number of statements which people have used to describe themselves are given below. Read each statement and then circle the appropriate number to the right of the statement to indicate how you feel right now, that is, at this moment. There are no right or wrong answers. Do not spend too much time on any one statement. Below is the answer which seems to describe your present feelings best.

<table>
<thead>
<tr>
<th>Number</th>
<th>Statement</th>
<th>Not at All</th>
<th>Slightly</th>
<th>Moderately So</th>
<th>Very Much So</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>I feel secure</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>I am tapesful</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6</td>
<td>I feel wished</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8</td>
<td>I feel uninterested</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10</td>
<td>I feel comfortable</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>12</td>
<td>I feel satisfied</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>14</td>
<td>I feel &quot;high strung&quot;</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>16</td>
<td>I feel content</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>18</td>
<td>I feel overwhelmed and rushed</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>20</td>
<td>I feel pleasant</td>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
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</tbody>
</table>

Signature: [Handwritten text]
On this questionnaire are a group of statements. Please read each group of statements carefully. Then pick out the one statement in each group which best describes the way you have been feeling in the PAST WEEK, INCLUDING TODAY. Circle the number beside the statement you picked. If several statements in the group seem to apply equally well, circle each one. Be sure to read all the statements in each group before making your choice.

1a. I do not feel bad.
   1. I feel fine.
   2. I am sad all the time and I can’t snap out of it.
   3. I am sad or unhappy that I can’t stand it.

2a. I am not particularly discouraged about the future.
   1. I feel discouraged about the future.
   2. I feel I have nothing to look forward to.
   3. I feel that the future is hopeless and that things cannot improve.

3a. I do not feel like a failure.
   1. I feel I have failed more than the average person.
   2. As I look back on my life, all I can see is a lot of failures.
   3. I feel I am a complete failure as a person.

4a. I get as much satisfaction out of things as I used to.
   1. I don’t enjoy things as much as I used to.
   2. I don’t get real satisfaction out of anything anymore.
   3. I am dissatisfied or bored with everything.

5a. I feel particularly guilty.
   1. I feel guilty a good part of the time.
   2. I feel quite guilty most of the time.
   3. I feel guilty all of the time.

6a. I don’t feel I am being punished.
   1. I feel I may be punished.
   2. I expect to be punished.
   3. I feel I am being punished.

7a. I don’t feel disappointed in myself.
   1. I am disappointed in myself.
   2. I am disappointed with myself.
   3. I hate myself.

8a. I don’t feel I am any worse than anybody else.
   1. I am critical of myself for my weaknesses or mistakes.
   2. I blame myself all the time for my faults.
   3. I blame myself for everything that happens.

9a. I don’t have any thoughts of killing myself.
   1. I have thoughts of killing myself, but I would not carry them out.
   2. I would like to kill myself.
   3. I would kill myself if I had the chance.

10a. I don’t cry any more than usual.
    1. I cry more now than I used to.
    2. I cry all the time now.
    3. I used to be able to cry, but now I can’t cry even though I want to.

11a. I am no more irritable now than I was.
    1. I am irritable or in a bad mood more often.
    2. I am irritable all the time now.
    3. I don’t get irritated as much by the things that used to irritate me.
170. I don't get tired as much as usual.
171. I get tired more easily than I used to.
172. I get tired from doing almost anything.
173. I am too tired to do anything.

180. My appetite is worse than usual.
181. My appetite is not as good as it used to be.
182. My appetite is much worse now.
183. I have no appetite at all anymore.

190. I haven't lost much weight, if any, lately.
200. I have lost more than 10 pounds.
210. I have lost more than 15 pounds.

195. I am purposely trying to lose weight by eating less.

205. I am no more worried about my health than usual.
1. I am worried about physical problems such as aches and pains, or sexual symptoms or complications.
2. I am very worried about physical problems and it is hard to think about anything else.
3. I am so worried about my physical problems that I cannot think about anything else.

215. I have not noticed any recent change in my interest in sex.
1. I am less interested in sex than I used to be.
2. I am much less interested in sex now.
3. I have lost interest in sex completely.

Catharine Fricen
We are interested in the kind of thoughts which you may have had after a traumatic experience. Below are a number of statements that may or may not be representative of your thinking.

Please read each statement carefully and tell us how much you AGREE or DISAGREE with each statement.

People react to traumatic events in many different ways. There are no right or wrong answers to these statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>1</th>
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<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
<tbody>
<tr>
<td>1. The event happened because of the way I acted.</td>
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<td>2. I can’t trust that I will do the right thing.</td>
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<td>3. I am a weak person.</td>
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<td>4. I will not be able to control my anger and will do something terrible.</td>
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<td>5. I can’t deal with even the slightest upset.</td>
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<td>6. I used to be a happy person but now I am always miserable.</td>
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<td>7. People can’t be trusted.</td>
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<td>8. I have to be on guard all the time.</td>
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<td>9. I feel dead inside.</td>
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<td>10. You can never know who will harm you.</td>
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<td>11. I have to be especially careful because you never know what can happen next.</td>
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<td>12. I am inadequate.</td>
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<tr>
<td>13. I will not be able to control my emotions, and something terrible will happen.</td>
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<td>14. If I think about the event, I will not be able to handle it.</td>
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<td>15. The event happened to me because of the sort of person I am.</td>
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<td>16. My reactions since the event mean that I am going crazy.</td>
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<td>17. I will never be able to feel normal emotions again.</td>
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<td>18. The world is a dangerous place.</td>
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<td>19. Somebody else would have stopped the event from happening.</td>
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**PTGI (continues)**

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<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totally Disagree</td>
<td>Disagree</td>
<td>Slightly Disagree</td>
<td>Neutral</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Totally Agree</td>
</tr>
</tbody>
</table>

20. I have permanently changed for the worse.
21. I feel like an object, not like a person.
22. Somebody else would not have gotten into this situation.
23. I can't rely on other people.
24. I feel isolated and set apart from others.
25. I have no future.
26. I can't stop bad things from happening to me.
27. People are not what they seem.
28. My life has been destroyed by this trauma.
29. There is something wrong with me as a person.
30. My reactions since the event show that I am a loser coped.
31. There is something about me that made the event happen.
32. I will not be able to tolerate my thoughts about the event, and I will fall apart.
33. I feel as if I don't know myself anymore.
34. You never know when something terrible will happen.
35. I can't rely on myself.
36. Nothing good can happen to me anymore.

*[Signature]*
<table>
<thead>
<tr>
<th>ID:</th>
<th>INITIALS:</th>
<th>DATE:</th>
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<th>5</th>
<th>6</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Totally Disagree</td>
<td>Disagree Very Much</td>
<td>Disagree Slightly</td>
<td>Neutral</td>
<td>Agree Slightly</td>
<td>Agree Very Much</td>
<td>Totally Agree</td>
</tr>
</tbody>
</table>

PTCHp (continued)

37. Someone should be punished for what happened to me.
38. If people knew what happened, they would look down on me.
39. If I stop being angry, what happened to me will be forgotten.
40. I deserve to be punished for the way I behaved/acted during the event.
41. If I stop being angry, the people who caused the event will get away with it.
42. Nobody cares about me.
43. I want to punish the people who did this to me.
44. I am ashamed of the way I behaved/acted during the event.
45. Stopping feeling guilty is letting myself off the hook.
46. People don’t understand me.
47. People don’t like me.
48. What happened to me is really unfair.
49. I disguised myself during the event.
50. If people knew what happened, they would not respect me.
51. My reactions during the event are despicable.
52. Stopping feeling guilty is like saying it is not my fault.
53. If people knew what happened they would be disgusted.

Cathleen J.
### STAXI

**PART I**

**Instructions:** A number of statements that people use to describe themselves are given below. Read each statement and then circle the number which best indicates how you feel **RIGHT NOW**. Remember that there are no right or wrong answers.

0 = Not at all, 1 = Somewhat, 2 = Moderately so; 3 = Very much so

<table>
<thead>
<tr>
<th>How I Feel Right Now</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I feel furious</td>
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<tr>
<td>2. I feel irritable</td>
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<tr>
<td>3. I feel angry</td>
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<tr>
<td>4. I feel like yelling at someone</td>
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<tr>
<td>5. I feel like breaking things</td>
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<tr>
<td>6. I am mad</td>
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<td>7. I feel like hollering on the table</td>
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<tr>
<td>8. I feel like hitting someone</td>
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<tr>
<td>9. I am burned up</td>
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<tr>
<td>10. I feel like swearing</td>
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</tbody>
</table>

**PART II**

**Instructions:** Read each statement and then circle the number which indicates how you **GENERALLY** feel. Remember that there are no right or wrong answers.

0 = Almost never, 1 = Sometimes, 2 = Often, 3 = Almost always

<table>
<thead>
<tr>
<th>How I Feel Generally</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. I am quick tempered</td>
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<tr>
<td>12. I have a fiery temper</td>
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<tr>
<td>13. I am a hotheaded person</td>
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<td>14. I get angry when I'm slowed down by others</td>
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<tr>
<td>15. I feel annoyed when not given recognition for doing good work</td>
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<tr>
<td>16. I fly off the handle</td>
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<tr>
<td>17. When I get mad, I say nasty things</td>
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<tr>
<td>18. It makes me furious when I'm criticized in front of others</td>
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<tr>
<td>19. When I get frustrated, I feel like hitting someone</td>
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<tr>
<td>20. I feel infuriated when I do a good job and get a poor evaluation</td>
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</tbody>
</table>

Signature: [Signature]

Date: [Date]
Appendix C

Mount Sinai School of Medicine,

Consent for Research Form
PART I: RESEARCH PARTICIPANT INFORMATION SHEET

THE RELATIONSHIP BETWEEN BIOLOGICAL AND PSYCHOLOGICAL CORRELATES OF PTSD

A. PURPOSE OF THE STUDY

You have been invited to participate in a research study to evaluate biological and psychological factors that are associated with posttraumatic stress disorder (PTSD) and to determine their relationship to the treatment of PTSD. You are being asked to participate in this research study because you are experiencing PTSD as a result of the World Trade Center disaster on September 11th, 2001.

The primary purpose of this study is to examine whether brief versions of two different psychological treatments (Brief Recovery Program and Supportive Counseling) that have previously been found to be helpful in treating chronic PTSD can facilitate recovery from a recent trauma. A second purpose of this study is to examine relationships among biological and psychological variables following a recent trauma and changes in these variables with treatment. The biological variables that we will measure are two brain chemicals, cortisol and noradrenaline, which can be measured through saliva (spit) and urine. The psychological factors that we will measure are your thoughts and beliefs about the world and your self and your symptoms of PTSD, anxiety, and depression. We will evaluate whether the biological and psychological factors predict how well people respond to treatment and how they are changed by treatment.

B. DESCRIPTION OF THE RESEARCH

Approximately 40 subjects will be enrolled in this study. To qualify for the study you must first be evaluated and meet the conditions for the study. The pretreatment evaluation includes an interview with a clinician and questionnaires about the symptoms that you are having. You may qualify for the study if you are currently at least 18 years of age, have been affected by the World Trade Center disaster on September 11th, 2001, and are experiencing significant symptoms of PTSD. Women who become pregnant during the study will be allowed to continue to receive study treatment but will be excluded from participating in the biological assessments. If you are currently in psychotherapy, you will have to stop it to participate in this study.

This research study compares the benefits of a Brief Recovery Program (BRP) with Supportive Counseling (SC). Subjects will be randomly assigned to one of these two groups. This means that group assignment is by chance, like flipping a coin. The probability you will receive either treatment is 50%. That is, 1 out of 2 subjects will receive BRP and 1 out of 2 subjects will receive SC. Each group offers four, weekly, individual sessions with a therapist.

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This Consent Document is approved for use by Mount Sinai's Institutional Review Board (IRB)

From: 10/1/02
To: 7/31/02

IRB Form 2

Rev. 02/2001
MOUNT SINAI SCHOOL OF MEDICINE
CONSENT FOR RESEARCH

GCO # 00-0012-002

The BRT treatment is administered in 4 weekly sessions that last about 2 hours each. During the first session, you will begin to discuss your trauma-related symptoms and receive education about the common reactions to trauma. You will also be introduced to a technique called "calm breathing training" which has been used successfully in treatment of chronic PTSD. In the second session you will begin to recognize the trauma in a safe and gradual approach with your therapist. You will also be introduced to "In Vivo Exposure" which helps people to overcome specific fears or situations that they have been avoiding. Finally in session two you will be instructed on how to restructure your own thoughts and perceptions about the trauma. This is commonly known as Cognitive Therapy. In sessions three and four you will receive further instruction regarding these techniques and have the opportunity to provide them with the support of your therapist.

The SC treatment is also administered in 4 weekly sessions that last about 2 hours each. In the first session your therapist will describe to you the approach of SC treatment. In session two you will be asked to identify your daily symptoms of PTSD and discuss them in the context of general crisis intervention. In session three and four you will discuss any difficulties you may be experiencing and consider possible coping mechanisms and problem-solving techniques.

After completion of the four sessions you will be evaluated by a separate clinician (different from your therapist). This "new" clinician will interview you and assess your response to the treatment you received. If your symptoms did not improve during the four week treatment period then you will be offered up to an additional weekly sessions of Protocol Exposure (PE) therapy.

PE therapy is a standardized treatment that has been found to be particularly effective for many people with PTSD symptoms. PE includes education about common reactions to trauma, training on how to relax your breathing, exposure to situations and memories that you avoid out of fear, and discussion about your thoughts and feelings related to these activities. The treatment is administered in up to ten weekly sessions that last 90-120 minutes each. PE involves talking about your trauma, re-experiencing the events of your trauma, as well as talking about the thoughts and feelings you have as you recall the memory of your trauma. During PE treatment we ask that you not begin any other treatment for your trauma-related disabilities. Treatment with PE may not require all 10 sessions. Your therapist will inform you if he or she believes it would be appropriate to end therapy before completing all 10 sessions.

In order to measure how much the treatment has helped you, you will be asked to fill out some questionnaires and speak with a clinician other than your therapist on a number of occasions. Should you decide to enter the study, this meeting is the first evaluation. A second evaluation will occur after you complete four weeks of BRT or SC. If you also participate in the ten weeks of PE treatment you will have a third evaluation upon its completion. Finally, we will follow-up on how you are doing by asking you to return for two evaluations scheduled three and six months after you have completed your treatment. Each of these evaluations will take approximately 3 hours to complete.

An additional part to this treatment study is the collection of biological assessments. If you are interested, you may choose to have your urine and saliva collected at several times during the study. The stress hormone that we are interested in for this study is cortisol. This hormone is naturally produced by your body. In some people who have had psychologically traumatic experiences, levels of this hormone in their bodies have changed. Cortisol plays many important roles in the body, but is particularly involved in helping people deal with stress. We will obtain measures of cortisol levels in your body by analyzing your urine and saliva samples. Saliva and urine will be collected prior to beginning treatment, after four weeks of treatment, and 6 months after completing treatment. If you participate in the PE treatment an additional saliva and urine sample will be collected after completion of this treatment.

Women who are pregnant or nursing will be eligible for treatment, but will not be eligible to participate in the portion of the study that involves the collection of biological samples. We will verify that women are not pregnant by administering a urine pregnancy test before collecting any saliva or urine. If you are eligible to participate in the biological assessment portion of the study, you will be given a kit to take home with you to collect saliva and urine samples. You will collect seven saliva samples from:

- Subject/Burrogate initials

For IRB Official Use Only:

This Consent Document is approved for use by Mount Sinai's Institutional Review Board (IRB)

From: [Signature]

To: [Signature]

Rev 8/2001

IRB Form 2
MOUNT SINAI SCHOOL OF MEDICINE
CONSENT FOR RESEARCH

GCO # 05-0912-002

your mouth about once every 4 hours over a 24-hour period, except while asleep at night. Each time you collect a sample of saliva, you will take a cotton swab from one of the plastic collection tubes in the kit. You will place the cotton swab in your mouth for about one minute, spit into the tube, and then place the swab into the collection tube. As part of these assessments, you will take a single 0.5 mg pill of dexamethasone, a substance that mimics the effect of light sleep before the final saliva collection.

We will also provide you with a container to collect all urinary output during the same 24-period during which you are collecting the saliva samples.

Dexamethasone is a synthetic steroid similar to your body’s own hormone cortisol. It is commonly used in the evaluation of patients with symptoms of depression. In this case, the dose of dexamethasone is influence natively lower than in standard clinical practice. Dexamethasone is approved by the FDA for the purposes of this study.

Video/Audiotaping:

By initialing below, you agree to allow or refuse to allow the recording of audiotapes and/or videotapes of assessment and therapy visits during your participation in this study. These tapes are used for two purposes. One purpose is to assist you in your treatment. If you are initially assigned to the Brief Recovery Program (BRRP) or if you receive additional treatment with Protracted Exposure (PE), you will receive an audiotape of each session to listen to in between visits as part of your treatment.

The second purpose of taping therapy sessions is to provide the evaluators and therapists in this study with feedback. Regardless of the treatment you receive (BRRP, PE, or supportive counseling), tapes of your therapy sessions may be reviewed by expert therapists located at the University of Pennsylvania’s Center for the Treatment and Study of Anxiety (CTSA), who are providing training and supervision of the therapists in this study. This is to ensure that the treatments are being implemented as intended.

CTSA experts may similarly review audiotapes of assessment visits to ensure that assessment measures are administered in a standardized manner. A study-specific participant identification number, rather than your name, will be used to identify the tapes. These tapes may be transported to the University of Pennsylvania by Federal Express or by study staff. The tapes will be stored in a locked file or at either Mt. Sinai or the University of Pennsylvania. The tapes will be used for study purposes only and will be destroyed upon completion of the study.

Your refusal to consent to taping your assessment and therapy sessions for supervision purposes will not prevent you from participating in this study. However, audiotaping of BRRP and PE sessions for your own use in part of the treatment and you must be willing to consent to this in order participate in this study. Please indicate those purposes for which you are willing to consent to the use of taping with your initials:

☑ YES       NO Please initial: 
I consent to audiotaping of therapy visits for my personal use during therapy (comment to this is required for participation in the study)

☑ YES       NO Please initial: 
I consent to audiotaping and videotaping of assessment and therapy visits to be reviewed by study personnel at the University of Pennsylvania for the purpose of providing therapists and evaluators with supervision and feedback.

☑ YES       NO Please initial: 
I consent to the transportation of audiotapes and videotapes to the University of Pennsylvania by Federal Express or by study staff. I understand these tapes will be identified by a study-specific participant identification number and not my name.

Subject/Surrogate/Initia l:

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C. CONSENT REMITTANCE

Participation in this study is being offered at no cost to you.

This treatment will be provided at no cost. Treatment can last up to 14 sessions. If you choose to have further treatment beyond 14 sessions, this would be your financial responsibility.

You will receive compensation for completing up to five possible research evaluations. You will receive $50 for today’s evaluation and $90 for each of the following evaluations that you complete. The most a person can receive for the evaluations is $250.

You will receive an additional $50 for each biological assessment. The most you can be compensated for biological assessments is $200.

D. POTENTIAL RISKS AND DISCOMFORTS

There are potential risks associated with the receipt of treatment. Some discomfort may be experienced during your therapy sessions as you begin to tell the story of your traumatic experience. However, most previous participants have tolerated this well and felt it was helpful for their recovery. There is no guarantee that participants in either treatment group will receive benefits from the study treatments and it is possible that benefits may vary between the ERP and SC groups. If you do not receive benefits or your symptoms increase after four weeks, you will be given the opportunity to receive additional treatment.

There are no known risks associated with the low dose (0.5 mg) of doxepin hydrochloride used in this study. However, in large doses and with prolonged use, doxepin hydrochloride has been associated with feeling less alert, having trouble sleeping, mood swings and depression.

Withdrawal from prior psychotherapy is required to enroll in this study. There may be possible psychological risks in terminating prior psychotherapy. Some possible risks may be feelings of uncertainty or nervousness in anticipation of both terminating a therapeutic relationship and beginning a new one. It is also possible that the symptoms of the condition for which you are being treated with psychotherapy will get worse if you terminate the psychotherapy.

E. POTENTIAL BENEFITS

The results of previous work indicate that treatment can be very helpful in reducing PTSD symptoms. However, there is no way to predict how each individual will respond to the treatment and there is no guarantee that the treatment will be helpful for a particular person. You may or may not receive any benefit from the treatment you receive. By participating in this study you will also contribute to our knowledge about the biological and psychological mechanisms of PTSD and how they may influence or be affected by treatment for PTSD, a common, chronic and under treated disorder. The results of this study may also benefit other patients who might later be given the same treatments.

Subject/Surrogate Initials

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From: [Signature] To: [Signature]

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Appendix D

Common Reactions to Trauma Handout
A traumatic experience produces emotional shock and may cause many emotional problems. This handout describes some of the common reactions people have after a trauma. Because everyone responds differently to traumatic events, you may have some of the same reactions more than others, and some you may not have at all.

Remember, many changes after a trauma are normal. In fact, most people who directly experience a major trauma have severe problems in the immediate aftermath. Many people then feel much better within three months after the event, but others recover more slowly, and some do not recover enough without help. Becoming more aware of the changes you've undergone since your trauma is the first step toward recovery.

Some of the most common problems after a trauma are described below.

1. Fear and anxiety. Anxiety is a common and natural response to a dangerous situation. For many it lasts long after the trauma ended. This happens when certain sensations and memories are so strong that the whole system of the world and a sense of safety have changed. You may become anxious when you remember the trauma. But sometimes anxiety may come from out of the blue. Triggers or cues that can cause anxiety may include places, times of day, certain smells or noises, or any situation that reminds you of the trauma. As you begin to pay more attention to the times you feel afraid you can discover the triggers for your anxiety. In this way, you may learn that some of the out-of-the-blue anxiety is really triggered by things that remind you of your trauma.

2. Re-experiencing of the trauma. People who have been traumatized often re-experience the traumatic event. For example, you may have uninvited thoughts of the trauma, and find yourself unable to get rid of them. Some people have flashbacks, or very vivid images, as if the trauma is occurring again. Nightmares are also common. These symptoms occur because a traumatic experience is so shocking and so different from everyday experiences that you can't fit it into what you know about the world. So, in order to understand what happened, your mind keeps bringing the memory back, as if to better digest it and fit it in.

3. Increased arousal is also a common response to trauma. This includes feeling jumpy, quite, shaky, being easily startled, and having trouble concentrating or sleeping. Continuous arousal can lead to impulsiveness and irritability, especially if you're not getting enough sleep. The arousal reactions are due to the light or light responses in your body. The light or light response is the way we protect ourselves against danger, and it occurs also in animals. When we protect ourselves from danger by fighting or running away, we need a lot more energy than usual, so our bodies pump out extra adrenaline to help us get the extra energy we need to survive.

People who have been traumatized often see the world as filled with danger, so their bodies are on constant alert, always ready to respond immediately to any attack. The problem is that increased arousal is used in truly dangerous situations, such as if we find ourselves facing a tiger. But alarm stress becomes very uncomfortable when it continues for a long time even in safe situations. Another reaction to danger is to freeze, like the deer in the headlights, and this reaction can also occur during a trauma.

4. Many people who have been traumatized feel angry and irritable. If you are not used to feeling angry this may seem easy as well. It may be especially confusing to feel angry at those who are closest to you. Sometimes people feel angry because of feeling irritable so often. Anger can also arise from a feeling that...
5. Avoidance is a common way of managing trauma-related pain. The most common is avoiding situations that remind you of the trauma, such as the place where it happened. Often situations that are actually related to the trauma are also avoided, such as going out in the evening if the trauma occurred at night. Another way to reduce discomfort is by pushing away painful thoughts and feelings. This can lead to feelings of numbing, where you find it difficult to have both fearful and pleasant or loving feelings. Sometimes the painful thoughts or feelings may be so intense that you find it hard to block them out altogether, and you may not remember parts of the trauma.

6. Trauma often leads to feelings of guilt and shame. Many people blame themselves for things they did or didn’t do to survive. For example, some assault survivors believe that they should have fought off an attacker, and blame themselves for the attack. Others feel that if they had not fought back they wouldn’t have gotten hurt. You may feel ashamed because during the trauma you acted in ways that you would not otherwise have done. Sometimes, other people may blame you for the trauma.

7. Grief and depression are also common reactions to trauma. This can include feeling sad, lonely, or displaced. You may cry more often. You may lose interest in people and activities you used to enjoy. You may also feel that plans you had for the future don’t seem to matter anymore, or that life isn’t worth living. These feelings can lead to thoughts of ending your life. You may be feeling guilty or blaming yourself. Because the trauma has changed so much of how you see the world and yourself, it makes sense to feel sad and to grieve for what you lost because of the trauma.

8. Self-image and views of the world often become more negative after trauma. You may tell yourself, “I hadn’t been so weak or stupid this wouldn’t have happened to me.” Many people see themselves as more negative overall after the trauma (“I am a bad person and deserve this”). Others feel that the difficulty that they have controlling their emotions and reactions to the trauma means that they are “going crazy” or “losing it.”

9. It is also very common to see others more negatively, and to feel that you don’t trust anyone. If you used to think about the world as a safe place, the trauma may suddenly make you think that the world is very dangerous. If you had previous beliefs about how things work, the trauma conveys that the world is dangerous and others can’t be trusted. These negative thoughts often make people feel they have been changed completely by the trauma. Relapse with others can become easier and it is difficult to become intimate with people as your trust decreases.

10. It is not unusual to have disruptions in relationships with other people after trauma. Some of the disruption is a result of feeling sad, frightened, and angry. In order to cope with these negative feelings, you may withdraw from others or not participate in the activities that you once did.

Sexual relationships may also suffer after a traumatic experience. Many people find it difficult to feel sexual or have sexual relationships. This is especially true for those who have been sexually abused, since in addition to the lack of trust, sex itself is a reminder of the assault.

11. Some people increase their use of alcohol or other substances after trauma. There is nothing wrong with responsible drinking, but if your use of alcohol or drugs changed as a result of your traumatic experience, it can slow down your recovery and cause problems to its own.

Many of the reactions to trauma are connected to one another. For example, a flashback may make you feel out of control, and will therefore produce fear and avoidance. Many people think that their common reactions to the trauma mean that they are “going crazy” or “losing it.” These thoughts can make them even more fearful. Again, as you become aware of the changes you have gone through since the trauma, and as you process these experiences during treatment, the symptoms should become less distressing.