

Newfoundland, Sept. 11, 2001

William Eaton

On Sept. 11 Newfoundland experienced the largest single-day influx of air travellers in its history, when 13 500 visitors arrived unexpectedly after terrorist attacks in the US closed North American skies to commercial traffic. Our guests had been on their way from Europe to the US and most experienced prolonged waits and extreme worry before finally setting foot in Canada. After being kept in their planes for up to 12 hours at 4 Newfoundland airports for security reasons, the worried weary finally stepped off with nothing. They had to leave all cabin baggage behind and did not have access to their luggage, which meant no clean clothes and no medications.

What greeted our unexpected guests was a well-organized opening of the collective arms of your average, every-day Newfoundlander. Of course, the Emergency Measures Organization sent triage teams to the airports to direct medical care for the injured (none required) and to organize food and lodging for the stranded (lots), but what sticks out long after the shock of Sept. 11 has started to fade is the overwhelming assistance offered to complete strangers by an entire province: churches, professional groups and Newfoundlanders at large.

Gander, a town of 10 000, accommodated 6500 travellers, while Stephenville, which has 7500 residents, welcomed 1096; 1000 arrived at Goose Bay, which has 6800 residents, while just under 5000 disembarked in St. John's.

Because there was insufficient hotel space, our guests were housed in schools, churches and private homes. In St. John's, they were placed in 40 locations and fed through donations from local restaurants and hotels. In Gander, Stephenville and Goose Bay, most food and lodging was provided mostly by private individuals.

In St. John's, medical issues were initially handled by 3 casualty officers. By Sept. 12 it was clear that expanded medical services were required because it was obvious that our visitors would be here a while. More than 100 health professionals stepped forward: nurses volunteered to staff the "medical room," a makeshift clinic in the St. John's Convention Centre, round the clock, and social workers, crisis counsellors and FPs all answered the call.

In St. John's, 10 family physicians and 3 FP residents staffed the medical room from Sept. 12 to 16 (the last planes left Sept. 17). We used a coat-check room in the Convention Centre to see patients — privacy was provided near the back by stapling 3 blankets to the ceiling.

Although only 42 of the St. John's visitors were referred to the emergency room and only 2 needed admission, most of our 5000 guests made at least 1 visit to the medical room. The main issue was medication refills, mainly for HRT,



Halifax International Airport Authority

Airports across Eastern Canada faced parking problems on Sept. 11.

beta blockers and ACE inhibitors. Incidents of anxiety and insomnia were rare, much rarer than in the life of a regular family practice, but what impressed me most was the complete lack of anger or annoyance among the stranded. They were universal in their thanks and praise, and most couldn't believe the help they received. There were a few difficulties — the mixture of strange medications, when combined with language and cultural differences, caused some harried moments — but the overwhelmingly positive attitude of the passengers made the work light indeed.

Our prescriptions were ferried to the pharmacy and the medications arrived back thanks to a collection of volunteer drivers. More volunteers set up impromptu driving tours of St. John's. Clothing, bedding and personal items were donated; a local hair salon provided free shampooing. Snacks were always available at the housing sites, while 3 hot meals per day were provided by individuals and local businesses. Our guests were housed in the convention centre, a large school, churches and homes. They were not charged.

The events following Sept. 11 taught me that Europeans take beta blockers while Americans take ACE inhibitors, and that postmenopausal North Americans take HRT. I also learned that helpers don't wait for the proper systems to be in place before offering help, and that doers of good don't refrain from doing good just because of legal niceties. If you put off helping until *you* are ready, the crisis will have passed and your help will no longer be needed.

I was lucky. I happened to be in the right place at the right time, and I'd do it over again tomorrow. I just hope that no similar event ever gives me the opportunity.

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