

After Swissair 111, the helpers needed help

Nancy Robb

Stress counsellors were quick to respond when Swissair 111 smashed into the choppy waters off Peggy's Cove, NS, last Sept. 2. Within 24 hours, organizations such as the RCMP had stationed counsellors on the coastline near the crash site and at the morgue to help those involved in recovery and identification operations.

"How could anybody ever be prepared for this?" asks Dr. John Butt, Nova Scotia's chief medical examiner. He had the unenviable task of being responsible for victim identification. "There is no simple way to take anybody and ask him to go out in a rubber boat with a scoop and pick up a bucket of gut. I know that sounds crude, but that's what was going on."

The Swiss jetliner was en route to Geneva from New York when it fell into the waters near one of Nova Scotia's most popular tourist havens. The impact shattered the jet into more than a million pieces and killed all 229 passengers and crew members. Only 1 body was identifiable by sight.

More than 1000 people — from military personnel to fishermen — were involved in recovering human remains from the sea. Hundreds more — from doctors to RCMP officers — took on the gruesome task of putting names to the thousands of body parts transported to a temporary morgue at CFB Shearwater, on Nova Scotia's Dartmouth shore.

Gilles Chiasson, RCMP psychologist for the Atlantic region, says research suggests that 3% to 4% of people involved in recovery and identification efforts may develop post-traumatic stress disorder. Most RCMP officers are used to dealing with death, he says, but "it's not as if you're responding to a call and it's over. In this case, people went out day after day after day for 2 months."

It was clear from the beginning that some people couldn't cope with the tragedy. According to 1 source, a few junior RCMP officers helping in recovery operations became physically ill and had to be removed from their posts. As well, a few technicians at the morgue chose not to return after a day "because they couldn't [cope with] the work environment," says Dr. Jim Young, Ontario's

chief coroner who was called in to assist Butt. "We understood that and there was no shame in it."

Young, who came to Halifax for 3 weeks to help Butt, an old friend and colleague, says people working at the morgue were encouraged to talk about their feelings and take advantage of the on-site counsellors.

Steps were also taken to ensure that people had long periods away from the morgue. "The tendency when you start is to go and go and go," Young says. "The faster you normalize hours the better, because it really grinds after a few days."

Inspector Lee Fraser, head of the RCMP's forensic identification unit in the Atlantic region, says the RCMP switched all identification officers at the morgue on the 18th day. "We said OK, that's enough," he recalls. "Everybody in the forensic identification unit had a debriefing before going home."

RCMP psychologist Chiasson says some RCMP officers have begun to exhibit symptoms of post-traumatic stress, which include crying spells, insomnia and nightmares. "This is quite a different type of disaster because we're not dealing with whole bodies," he says. "What we do find is that when our people are able to put a face or name to those parts, that's when we're seeing some post-traumatic reaction."

As a preventive measure, the RCMP held mandatory small-group debriefing sessions throughout November for the more than 500 officers it deployed during the disaster. Debriefing sessions were also held for spouses of identification officers.

Chiasson says the sessions are designed to encourage people to talk about their reactions and to educate them about post-traumatic stress and its possible symptoms. "We're trying to get the message across that if you have feelings or reactions, these are normal — it's the event that's abnormal.

"By having a team on site defusing the situation and the formal debriefings afterwards, we hope to have a healthier group at the end."

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