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In Memoriam 9/11/01

by

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“A strategic aim of terrorism is to obliterate the conditions that have made thought useful”. Donald Moss

This article chronicles some of my patients’ and my own experiences following the events of 9/11. Writing from the vantage point of nine months afterwards, I offer three case vignettes – two of patients whom I saw for crisis intervention after 9/11, and one of a patient I’d been seeing for 6 years at the time of the attacks.

I have chosen to present these cases because my interaction with each of these individuals has become an integral part of my own memory of these shattering events, and because these cases, in aggregate, illustrate the essential nature of traumatic adaptation. These include: 1) dissociation between any of the following elements of experience – behavior, affect, sensation, and knowledge (Braun, 1988); 2) representation of traumatic memory in the sensory, motor, and iconic modes; 3) identification with the aggressor; 4) distortions in information processing that result from the extreme narrowing of focus at the moment of traumatic exposure (Van der Kolk, 1996); 5) changes to the barrier between waking and REM sleep (Barrett, 1994); 6) the transposition of trauma narratives into familiar relational contexts (Garland, 1998); 7) the intergenerational transmission of trauma; and 8) the strong potential for re-traumatization and re-enactment of traumatic experiences and object relations in the transference-countertransference (Davies and Frawley, 1994).

I conclude with some observations about the potential effects of 9/11 on our society and clinical practice.

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The phone lines weren’t working well by 11:00 AM on the morning of September 11, 2001, when I first learned something had happened. A phone

message, left by a patient calling from Boston at about 10:00 AM, said she wasn't sure if she'd be able to get in for her appointment because of "the situation in lower Manhattan and the roads and bridges being closed." I was confused – what was she talking about?

I logged on to the internet. Much more slowly than usual, my computer found my news home page. An aerial photograph, published at 9:38 AM., showed both Towers aflame, orange plumes of fire and clouds of black smoke shooting straight up into the cobalt blue New York sky. The headline read: "World Trade Towers Threatened with Collapse". I tried scanning the article but couldn't concentrate. My arms felt weak, my fingertips were becoming numb. I was logging off psychically. I needed to find someone to talk to....

Those first few moments of exposure to the overwhelming onslaught of terrifying and violent perceptions, comprised, for each of us, the psychic equivalent of a photographic negative, an indelible imprint, as yet undeveloped, unelaborated. This experience was so stunningly captured on the cover of the following week's New Yorker magazine – that image which appeared at first to be a solidly matte black page until one gradually noticed the faint monochrome silhouettes of the Twin Towers imperceptibly emerge from the depths of the visual field. How many of us felt our initial experience manifested in that ghostly image that made us gasp with unwanted recognition?

Clinical Examples

The Case of L

For a few months following 9/11, I worked with several companies located in the financial district. The first victim of the attacks with whom I worked, on 9/17, L, had been at work in a building several blocks east of the WTC. When the second plane hit, she was evacuated. After descending 26 flights of stairs and reaching the street, her first vision was of "huge clouds of dark smoke coming right at me". Police directed everyone onto the FDR drive. From the highway, she saw and heard the second Tower collapse. Within moments, L was covered in ash and could barely see. From lower Manhattan, she walked up to Harlem on the FDR, then across town to the west side and home, with no information about what was happening.

When we met six days later, she could focus on nothing but her physical sensations and pervasive apprehension of danger: the tightness in her chest; the foul, chalky taste in her mouth, the smell of ash that (to her nose) lingered

in her hair. For six days, she'd hardly slept, feeling and believing it necessary to remain vigilant. If she dozed, she'd awaken screaming whenever an ambulance or police siren passed by. By then, she knew, cognitively, what had happened to her but had no memory of her long journey home. She felt afraid of everything and couldn't think clearly.

All stimuli and perceptions associated to her ordeal. She presented as being in an alternating trancelike and fight/flight mode and could not orient to the present moment. Processing her experience would not be possible until her activation level regulated. For the time being, I told her, focus on getting support and practicing good self-care, especially sleep. When L realized I would place no demands on her (e.g., to detail her story, to 'understand' her experience, to get on with healing), but was there to listen, acknowledge and offer her gentle support, she softened noticeably and looked directly at me. For a sustained moment, she returned from the fog.

The Case of M

One month after the attacks, I encountered a 30-year-old man, M, who was employed at a company that had had its offices in Tower One. That morning, he had just come up to the WTC lobby from the train station below when he sensed the air of quickening panic around him. He felt the ground rumble and shake under his feet; people began dashing about randomly in the direction of exits. He fell in with the crowds. When he made his way outside, he heard shattering sounds —glass cascading down from the crumbling curtain wall. He looked upward and saw an object free-falling through the air; and realized it was a woman....

Since 9/11, he'd been having a recurring dream. In the dream, he is enraged with his younger brother, who, in reality, lives overseas in their country-of-origin. Sometimes M assaults him; and sometimes he kills his brother. In the dream, M feels no guilt but also has no relief from his repetitive murderous impulses.

This gentle man, who dearly loves his little brother, with whom he had spoken numerous times in the weeks post-9/11, wanted to understand his dream. He had given no purposeful thought to the apocalyptic events he'd endured -- the massively violent assault upon him by his fellow men from other countries; he was not aware of how catastrophically traumatized he was. For him, waking and sleeping life were equivalent hells in which people close to him died a thousand deaths and yet lived; a liminal world from which there was no prospect of relief. Reflective space had collapsed.

I did not have the chance to get to know M – we met only once for two hours. In addition to representing his survivor guilt, helplessness, and

identification with the massive aggression to which he'd been subjected, I wondered whether his dream also constituted an attempt to make the events seem realer, more accessible, by casting the action in a known relational context in which M's brother is the repository of some aspects of M's own dissociated trauma.

The Case of C

After witnessing the collapse of the Towers from her apartment north of Ground Zero, C, a 37-year-old woman, who had been in therapy with me for 6 years, was in a panic. Extra sessions were scheduled for a few weeks afterwards. In these sessions, C complained most vehemently about the fact that she had not heard from her elderly mother since the attack: "doesn't she even care if I'm dead?" For many years, C had chosen to rarely be in touch with her parents, who lived in Asia. She harbored unremitting contempt for her father and had not healed from what she experienced as her mother's traumatic abandonment of her at age 7 to the care of much older siblings.

Until the year prior to 9/11, memories of this early separation had only evoked feelings of intense rage, disgust, and betrayal, which, in turn, led to C's wholesale rejection of her mother.

Recently, C was becoming more tolerant of her feelings of loss and of her longing for a loving, protective mother. She dreamt of protecting her mother and of loving her; memories of enjoyable times spent together at ages 5 and 6 re-emerged. Feelings of anger drifted towards those of tragedy. Not surprisingly, C's transference experience of me became more ambivalent—she became both more reliant and more critical. Two months before 9/11, C had married.

C's mother came from a wealthy family. C's maternal grandmother had sent C's mother to live with relatives in another part of the country. The grandmother herself died while trying to flee political persecution from the mainland. C's orphaned teenage mother married C's father and had 9 children with him – C being the youngest. C's father's business prospered, and the family became rich, yet C's mother remained illiterate and utterly dependent (she didn't know how to dial the phone). C's character formed in substantial contradistinction to these 'helpless' aspects of her mother. She was well educated, proudly counterdependent, and terribly lonely. That defensive narcissistic structure, which had been loosening over the course of therapeutic work, was resurrected expeditiously when C herself became a victim of terror on 9/11.

In the context of her own disrupted attachment, C had never developed compassion for her mother's own early traumatic losses (nor, therefore, for

her own history). After the WTC attack, C could no longer abide her fragile maternal longings, as they would now have to be integrated into the context of shared traumatization/victimization – something for which C was not psychologically prepared.

To my great regret, C's retrenchment into her formerly inaccessible state manifested itself in a sudden and unequivocal rejection of me and of our relationship. I could do nothing to dissuade her from leaving – and was left feeling very much exactly as I imagine C had felt as a 7-year-old (and perhaps as her mother had felt after losing her own mother)—terrified, guilty, bereft, and powerless to stop the Other from vanishing like smoke.

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Christmas 2001

I was in a taxi headed down 5th Avenue on a clear, cold weekday evening. The after-hours empty streets gave the impression of my having a private viewing of the holiday window displays. At the corner of 35th street, the driver stopped at a red light. I opened the window to look directly overhead at the Empire State Building, dressed in its holiday red, white and green lights. The details of its familiar façade seemed strangely pronounced, and I became aware of feeling nostalgic and slightly derealized. I recalled the thrill I'd felt when, as a child, I'd stand on the street below and crane my neck back trying to achieve the impossible task of seeing the whole building at once. I particularly noted the setback for the observation tower – the 86th floor, I thought. As the traffic light turned green and the driver stepped on the accelerator, I had the sensation of a lateral shift of gravity that seemed located in my frontal lobe. I instinctively asked the driver to stop.

My first vision of the attacks – the photograph I'd seen on the internet – was gone! Superimposed over the space that had just been vacated was the actual specter of the Empire State Building. And within that same moment, I felt that really, for the first time since 9/11, I *knew* what had happened. 'That's where the planes hit the Towers, at that height!' Feeling more than slightly trippy, I realized that for almost 4 months, whenever I'd pictured the attacks, I'd held that original image in mind. Envisioning the scene as if from a helicopter had been my way of dissociating the reality of the forceful physical impact of the planes, and the abject terror of the victims inside: The 767's were wider than the buildings and crashed into them traveling at speeds greater than 500 mph. An instantaneous inferno of terror and death resulted; body parts were hurled blocks away!

While I had cried and felt deep sympathy for the victims, I had been too traumatized to face my own fear. This experience of recognition marks the point at which I could begin to recover from my personal trauma.

After the Cleanup

Levels of apprehension seem to be rising since the ‘cleanup’ of Ground Zero ended on May 30. Suicide bombings and counterattacks intensify in Israel; escalating conflict between India and Pakistan threatens to de-stabilize a vast region. The growing disillusionment with corporate America, combined with the exposure of the sexual abuse scandal in the Catholic Church, threaten the covenant of the American way-of-life.

Simultaneously, credible news stories have emerged suggesting that the attacks might have been subverted had the Federal Government heeded the warnings it had been given by intelligence agencies. Can it be possible that we have been betrayed by both our national guardians (through negligence, denial, hubris) as well as by our attackers? What does the Homeland Security Chief’s prediction: “it’s just a matter of time”, mean to us?

Memorial Day Weekend

Times Square subway station: (Amid alerts about ‘transportation systems’) Changing train lines, I see a mime dressed in white-face and black body suit performing his act on a raised platform. I notice my pulse quickening and the beginning of a sweat. I think, “what a perfect disguise for a suicide bomber”. All reason to the contrary, I scurry past onlookers and quickly descend the stairs to the R train platform.

Sunday afternoon: breathless journey through the Holland Tunnel....

This all had a different feeling to me when I could think of it as a singular occurrence. But the expectation of continued danger compels us to remain on the defense, while simultaneously carrying on in our normal routine-- a confusing proposition. There is a dubious art to this co-conscious balancing act, as misinterpretation of neutral cues as containing danger can prevail whenever anxiety is sufficiently heightened, yet, misperceptions in the reverse can be costly. The skill is optimally achieved by adjusting the psyche’s aperture to identify and to capture the source of perceived danger precisely, at its nascence, thereby allocating the minimum amount of energy necessary to the task.

There are, of course, numerous negative consequences from idling too long in this vigilant, potentially paranoid-schizoid, mode. When the threat of endangerment is felt to be constant, one risks becoming, paradoxically,

desensitized to ambient dangers, thus chancing under-reaction, and an increased risk of revictimization - a “sitting duck syndrome” (Kluft, 1990).

Another crucial result, in my opinion, is that we cannot mourn, and thereby transform, the multiple losses of life and of social ideals, that we incurred on 9/11. The dissociation of grief, however necessary at times for survival, can become pathogenic. Emotional safety is a precondition for authentic grieving, thus, as long as we remain poised for further acts of terror, personal and societal growth remains restricted.

As we know, trauma-based obstructions to human development are rarely self-remitting. Unmetabolized bits of traumatic experience gain their foothold in character –individual and national- as well as in the construction of meaning and identity. This posture of traumatically mediated selective attention establishes grounds for various regressive positions, e.g., persistent self-hate or desire for revenge (internalization or externalization of aggression), submission to societal dictates in the absence of critical evaluation (conformity), and virulent forms of nationalism (a complex, politically endorsed variation of stranger anxiety). These issues are of concern to me now.

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Epilogue

Within 24 hours after the attacks, the city shut itself in, and slipped soundlessly into a state of shock. Some people were evacuated; many others made their exodus in panic and never returned. Rescue workers and others lay buried in the smoldering, acrid, seven-story high gravesite we came to know as Ground Zero (seven, I later learned, from my local firehouse). Commerce halted. Aircraft, except for government-issue planes (F16's, police helicopters) ceased flying overhead, rendering audible the atmosphere of horror. (Though we did keep scanning the skies for another plane-bomber.)

Vigils arose in neighborhood streets and parks, and time seemed to halt and fix us in that particular moment. Yet, blessedly, for a short while, in the wake of collective terror and under the influence of crumbling reality, kindness reigned among us.

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