When Keeping Company Is Therapy

After Swissair Crash, Mourners Needed to Tell Their Stories

By LISA CHERTKOV

SOMEONE calls for a doctor, and I approach to find a man sobbing. He is curled up, crying, inconsolable. I could be in the intensive-care waiting room, or approaching a rape victim, or telling a father he has lost his son to AIDS. But this is nothing like any of those daily routines of doctoring, because I am on a plane bound for Halifax, Nova Scotia, with the families of those who died on Swissair Flight 111. The cabin is full of tear-filled memories and pain.

Every seat is taken up with grieving. There is no happy next story of the lump that is benign or the leukemia in remission. There is none of the peace of accompanying a familiar patient and family through the last days of a terminal illness, insuring comfort and a chance to say goodbye. These are strangers thrown together by the horror of an unspeakable loss, and I am just a psychiatrist reminding myself that sometimes doctoring means nothing more than keeping company.

A day earlier my beeper went off and I responded to a call for volunteers for the Disaster Team organized by the city's Department of Mental Health. I canceled my plans for the next few evenings.

When I arrive at Kennedy Airport, the Ramada Hotel's banquet room is organized for disaster. It is a Friday, only 48 hours since the crash. Each table is set with phones and staffed with airline employees who assisted a small circle of griever. Some have recently flown in from Geneva, others gathered from around the states. There is an ebb and flow of traffic, a “hurry up and wait” atmosphere as messages and levels of urgency travel up and down chains of command. And, there is the bizarre experience of flight to Halifax. Families board the plane together, each wearing a clipping tag saying “Swissair Family Member.” I sit in the second row on the aisle, identified to the flight crew. I suddenly realize that there is an unusual attention to the safety video. There is a hustle as the monitors click down, uncomfortable laughter as passengers look around for exits and then a sob at the mention of a water landing. There is the usual sharp intake of breath at takeoff, but a closer look reveals a few silent tears, clenched hands of memory.

The flight path mirrors the disaster, and families count the minutes passed, wonder if this is the moment of the distress call. Over and over they tell the story of the planned trip, break-time chatter as other volunteers ask me: “Is this your first crash? Didn’t I meet you at Flight 800? How long have you been a disaster psychiatrist? I really confess that I am a novice.

I register and am oriented and given a badge, and then I wait. I watch a father’s pain as he decides to return home to his young children, rather than stand by the sea where he lost his wife. He leaves behind a handful of photos of her, coming back in twice, and a third time, to confirm that someone will call him if they identify her body.

On Saturday morning, I am assigned to be the psychiatrist for the vacation or business, reservation changes at the last minute, long-awaited reunions with family. They tell the story of the call, the disbelief, the realization. And they describe the past: two days, the reporters and the unending ringing of the phone, the overwhelming level of frantic activity, and the silent moments of unmoving fatigue when they realize there is nothing to do. Family members pass well-folded copies of obituaries. And they discuss what to expect in Peggy’s Cove.

Some hope to identify a body and bring a loved one home, while others more realistically seek only a moment to look out over the sea and say goodbye. One family carries flowers from a passenger’s garden for each of them to toss into the surf. Others carry second thoughts, premonitions, worries, feelings never uttered, and endless what ifs. Tear-stained fingers draw lines and circles on the map from J.F.K. to Halifax, tracing the shoreline in search of a spot too small to warrant its own name on the map. The hushed voices quiet as the approach is announced, and there is an audible heavy sigh and sob at the realization that this must be nearly the spot, nearly the moment. The sea is dark gray below the clouds, and then the land is the dark green of trees. The pilot apologizes for turbulence, and the bouncing shudder as the plane turns frees some long-held tears.

After a few hours in the Halifax airport, I board a return flight with families who had arrived the previous day. Again people approach me wanting to talk as they learn that I am a psychiatrist. There is a greater calm returning home. They tell of family balancing, of relationships, tensions, strong feelings and loss. I give one family permission to cry and confirm to another that it is normal that they have not yet shed a tear. And in each case, the families need a few moments to tell a story. We circle out over the ocean, leaving Halifax, with silent tears over a dark sea.