
Seeing the Picture From Inside the Frame: Two Therapists' Observations Following the Virginia Tech Tragedy

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Around 8:30 a.m., I (MK) was in my office at the Family Therapy Center at Virginia Tech (VT). On hearing the first, tentative reports of a gunman on campus earlier that morning, I was not particularly alarmed. After witnessing the manhunt on the first day of that school year, I felt confident that the campus was secure and that the matter was probably already resolved. I wondered if my 12:30 class would be cancelled and how I would adjust my lesson plans if it was. As the morning hours went by, e-mails, Web postings, automated phone alerts, and the office grapevine made it clear that something terrible was happening. Those of us in the Family Therapy Center felt safe, being a couple of blocks away from the main campus, but we worried about students and colleagues who were scattered among the main campus buildings. It was not until around noon, after we were allowed to leave the building and go home, that I saw the news and realized the horrific extent of the shootings. I spent the rest of the afternoon intermittently watching the news, crying, and trying to contact students, coworkers, and family over computer and phone lines swamped by thousands of others trying to do the same.

I (FP) was at the University of Minnesota for a site visit when the VT shootings happened. Susan, my wife, called me as the events were unfolding. She

told me that she and Stephen (our son) were fine, although we learned later that two people Steve knew were shot but survived. I also learned that an Indonesian student I knew died. He was shot four times and fell on top of Stephen's coworker's husband, who himself was shot three times. The Indonesian's dead body probably saved his life. (In a blog, his wife writes that he was "saved by the blood of the Indonesian student.") In so many ways, we at VT were connected in the midst of this tragedy.

My perspective, from being out of town, was one of seeing both horror and support on the faces of those who learned I was from VT. Right after the tragedy, I met with a group of University of Minnesota undergraduates as part of the site visit. When they heard I was from VT, they cringed. Their concern clearly showed. Everyone I met at Minnesota reached out. I knew I needed to cut my trip short, so I returned to VT the day after the shootings. The man who drove me to the airport, Habib, said his two high school daughters cried for the VT students. When I arrived at the Roanoke airport—the day after the shootings—I saw flowers and signs for the incoming families of those killed or wounded.

Our Work

I (MK) could not provide an accurate accounting of the next day. Grief, horror, relief, rumors, comfort, confusion, and shock blurred together. In the midst of it all, something approximating clarity emerged: There was work to be done. The University was coordinating the mental health response to the campus, the families of victims, and the community through local agencies and campus mental health services, including the Family Therapy Center. The

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response was quick and well organized, with personnel deployed in multiple sites and services publicized to ensure accessibility. Yet, sometimes unofficial, personal channels are the ways people choose to seek help. Groups and individuals who knew Fred, who knew the Center, who knew me, or who knew of our work together following the Southeast Asia tsunami began to call, e-mail, and stop us in hallways. Faculty, shattered by the loss of colleagues and students and by their own proximity to the traumatic events of April 16, called for help dealing with their own traumatic stress and grief and for help in reaching out to their students. Those who work with international students asked for help with Asian students terrified of potential racist reprisals. Staff who support faculty, students, and administrators so well that they are often taken for granted, asked for our support and help as they coped with the exponential increase in demands on them.

Fred called me. We had worked quickly in early 2005 to prepare and deliver mental health training for Indonesian practitioners responding to the tsunami, and we work well as a team. When he said that he had been able to organize workshops with faculty and staff to discuss traumatic stress and grief, I told him that I already had the handouts prepared, targeted to the needs of faculty, staff, students, and family members. It was good to be busy. It was easier than dealing with my own feelings, although suppressing them entirely was neither a goal nor a possibility. Tears fill my eyes as I write this. Anticipated and unanticipated triggers bring the pain back to the surface.

We met with the English Department first on Thursday, 3 days after the shootings. They were hard-hit, enduring intense media scrutiny because the writing assignments of Seung-Hui Cho, an English major, had first caught the attention of English faculty, who had referred him for counseling. Many looked shaken and exhausted. Some were tearful. The next day we met with faculty and graduate students in the Department of Human Development (our department) and then with faculty from the Department of Interdisciplinary Studies. Many in both departments were affected by the tragedy through their connections to lost and wounded faculty and students. That day, we also met with the staff of our college, several of whom had helped us copy our handouts, had fielded questions from our students, and had taken our phone messages as usual, without sign of strain or complaint while we busied ourselves with our “important” work. A staff member in our own department disclosed that earlier in the semester she had moved

one of our graduate teaching assistant’s classes from a classroom in Norris Hall, which was too small, to a room in another building. The original classroom was one in which the killings occurred. The student had called our staff member, thanking her for saving her life and those of her students.

For our workshops, we had pulled together the most up-to-date, evidence-based information available concerning disaster mental health and had then communicated it in everyday language. We talked about how the faculty themselves were feeling normalized traumatic stress and grief symptoms and offered tips for coping in the short and long term. We also talked about how they might address their students when classes resumed. We provided our handouts and resource information and stayed for informal questions and to offer comfort. We emphasized that getting through the tragedy wasn’t like the Olympics. There are no awards for how fast you get through and certainly no points for style. Slogging is just fine.

Although the content was important, it was the process of the workshops that most stands out in our minds. We believe that it may have been the most important aspect for the participants as well. We came to them as insiders, ourselves emotionally raw and alternating between pain and numbness. Like them, we moved about doing the mundane tasks of life, while inwardly and occasionally outwardly expressing our pain. We remember details in disconnected flashes, out of sequence. The word “surreal” kept entering conversations. One scene I (MK) recall vividly was standing in front of the convened English Department and being suddenly overwhelmed by a sense of community that had escaped my awareness in my 3 years at VT: *my* people, *my* students, *my* community, *my* home. I was proud to be associated with them. I was furious that the peace and beauty of our campus had been violated. I was angry and almost unbearably sad that mental illness had robbed so many of so much; that it does so every day, everywhere, in a million different ways; and that I am somehow professionally responsible for trying to stem that tide. I often feel impotent, unable to make a difference. On that day, I looked out at the faces before me and thought, I am making a difference, however small.

The memory that stands out most to me (FP) is a composite from all our work. I am amazed at the wisdom and compassion and support reflected in the comments of so many faculty and staff as they reached out to support one another. I have a picture in my mind of people at their best in the middle of the worst moment in the University’s history.

The days following the workshops were filled with a dizzying number of planned and impromptu responses. Across the hall from my (MK) office is the English Language Institute. There I met with a Korean student who reported being chased by a shadowy, faceless figure intent on retribution. She already had her plane tickets home. At the campuswide memorial service, attended by President Bush, the First Lady, and Governor Kaine, I joined the ranks of mental health professionals, with identity tags around our necks, milling through the crowd, watching for signs of distress.

On the first day of classes, I reclaimed my undergraduate classroom with a Hokie flag. We took it back as *our* space, safe and inviolate. In a shaky voice, I read through my own workshop handout and mechanically rattled off the University-sanctioned options for completing spring semester courses. The next day, I joined the ranks of local and area mental health volunteers to attend classes and support faculty and students who were meeting for the first time since the shootings. I attended three engineering classes. The engineering department lost 11 students and 3 faculty, and they were grieving deeply. Many had been in Norris Hall on that day. Between classes, a group of engineering graduate students expressed their frustration over their lab equipment, computers, and research being trapped in Norris because of the investigation. They wanted to be busy. They hoped to get on with their work and graduate on time, to feel normal again.

Crisscrossing campus on foot that day, I cut across the VT central common—known as the drill field—repeatedly, where makeshift memorials attracted passersby. A small group of students were there, yelling “Free hugs!” I got two. On hurried visits to my office at the Family Therapy Center, I reconnected with marriage and family therapy doctoral students who were eager to help, and did, volunteering wherever they could. Typical helpers, they thought of everything except their own feelings or their own needs to opt out of end-of-semester coursework and assistantship duties. Even that weekend, at a retreat at Scott Johnson’s (our program director’s) home, conversation was difficult and kept as light as possible. No one was really ready to sit with the enormity of their shock and grief. We were all still in it, and we needed to “keep it together” at least until semester’s end. Unknown to many, Scott had also spoken with an acquaintance connected with a newly built movie theater in nearby Christiansburg, which was not scheduled to open for another week.

When the acquaintance asked what he might do to help, Scott told him, “It sure would be nice if folks could just go see a movie.” The theater opened, admitting VT students, faculty, staff, and guests for free that weekend. Thousands packed in. I ran into one faculty member who had watched seven movies in 1 day, just to escape.

My (FP) experiences days and weeks after the tragedy included meeting with the chaplain of the Blacksburg Police Department, my minister, who was with parents of the victims when they found out their children had died. He and I planned and held two meetings at Blacksburg Presbyterian Church (BPC), one for associate ministers and staff and another for members. We called these meetings, “What Can and Should BPC Do to Promote Healing and Wholeness in the Wake of the Virginia Tech Tragedy? An Open Discussion.” With almost no notice, about 40 church members attended the meeting to support one another and brainstorm how to live our church’s commitment to loving action.

Also, as the head of a large department, I needed to send some sort of formal message to faculty and students soon after the tragedy. Because people are suggestible after a disaster, I chose my words carefully. I knew that what many people were experiencing were normal reactions to abnormal events. I knew that, for most, recovery would come with time. I didn’t want to push people through their grief or be unrealistically positive. At the same time, I wanted to point them toward hope and eventual recovery. I wanted to acknowledge the gravity of the situation but also emphasize resilience and self-care. I sent the following note to all our faculty, staff, and students:

Dear Friends,

It has been only six days since our collective tragedy. I heard a newscaster ask someone if Virginia Tech would be defined by the shootings. Instead, I am convinced that we will be defined by our humanity, support, courage, and community spirit.

Healing takes time. But as the old song goes, “the darkest hour is just before dawn.” Take care of yourself—breathe, grieve, sleep, work, play, remember the good, and reach out.

On Friday, I went to the drill field ceremony and read those notes of caring on the white boards. One started this way:

“Sorrow is a gift;
Life is a gift;
Love is a gift. . .”

To grieve makes us human. Be kind to yourself, grieve in your own way, and focus on what gives you strength. We will get through this together.

Sincerely,
Fred Piercy
Department Head

As is typical with large-scale tragedies, kindnesses of every size and description proliferated across the community. Three big boxes of about 100 teddy bears were delivered to the Family Therapy Center, courtesy of the Rough Riders. Most were distributed to student services and local agencies. One sits in the Family Therapy Center waiting room, to comfort whoever comes in. One went to class with me (MK). I invited my students to hug it and then pass it along. So my students “hugged it forward” to one another then conveyed the bear to the drill field and points beyond. The other kinds of incidents that tend to happen at times of tragedy—the ugly kind—such as retaliation, blame, and exploitation were rare, to my knowledge.

Lessons Learned

What lessons have we learned through this experience? We learned that, no matter how much we might wish otherwise, we cannot force people to get help. The stigma of mental illness continues to be so great for many that they would rather endure intense suffering than speak to others about their pain. This is not only true for isolated, deeply disturbed individuals such as Seung-Hui Cho but for our neighbors and coworkers (and, possibly, ourselves) dealing with traumatic stress, depression, or anxiety. My (MK) experience is anecdotal, of course, but in the days following the shootings, I could not help but notice how few approached me because of my “counselor” neck tag or purple arm band and how many sought my help because they knew and trusted me. This reminded me of a lesson I learned long ago: that people come before programs. Programs are essential, of course, but unlike mystical baseball fields, if we build them, people will not necessarily come. Not only stigma, but perceptions of mental health treatment inhibit help seeking. The impact of systemic, contextual therapies that are nonpathologizing, relationally oriented, and strengths-based has not yet registered with the general public. Yet they hold the potential to put a friendly, trusted face on our profession and provide a liberating reframe on

human problems. We are challenged to consider what contributions we can make toward realizing that potential.

Another lesson came from our family therapy graduate students, who experienced a variety of dilemmas because of their multiple roles. For example, one of our therapists in training learned during a session that one of her clients grieved the April 16 shooting death of a victim who was also one of the therapist’s friends. The therapist, who felt like she was barely holding it together herself, struggled with whether or not to disclose her own loss to her client.

Another marriage and family therapy graduate student who was teaching a large class gave students the opportunity to meet with her privately to discuss the shootings. Several students talked about how the shootings evoked strong emotions regarding recent deaths of their loved ones. For example, one lost a brother 6 months earlier in Afghanistan. Another lost his fiancée in a boating accident. Yet another’s father died suddenly several months earlier. The graduate instructor saw her role shifting dramatically from teacher to therapist. She wondered how her students’ emotional disclosures would affect her relationship with them as their teacher. Her role became more complicated when several of her students’ parents called to ask her how their children were handling the disaster and asked her to keep their calls confidential. We were surprised at the prevalence of such confidentiality and dual relationship issues among our students. It may be that this phenomenon is likely to occur when disasters take place in university settings.

Conclusion

The continued effects of this tragedy will undoubtedly follow patterns seen in other large-scale traumatic events, meaning simply that it is not over. One effect we all feared has not come to pass, however: VT has not become well known as an unsafe place, as the location of the largest mass shooting in the United States. It has shown itself as the quiet, scenic place it has always been, where Hokies unite in the face of a tragedy that, sadly, really *could* happen anywhere. Fall semester is near. New student enrollment has exceeded University goals, and on-campus housing is overbooked. VT is not a place people want to stay away from. On the contrary, because of the way our community has come together, it is a place seen by many as more attractive than ever.