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[9/11 Truth: The 9/11 Cover-Up](#)

Thousands of New Yorkers were endangered by WTC debris—and government malfeasance.

[Michael Mason](#)



In the aftermath of the first explosion, the air over Lower Manhattan transformed instantly.

“The sky was glittering with glass,” says Nina L., a Tribeca resident who asked not to be further identified. She ran to her window and saw a shower of flaming jet fuel cascading from one of the towers.

“This can’t be a good thing to have my windows open,” she immediately thought to herself.

Nina closed her windows and shut her air conditioner flues. As a former jeweler, she’d worked around dangerous chemicals before and understood the hazards of toxic fumes. From her apartment seven blocks north of the World Trade Center, she sat transfixed until a second explosion jolted her into action.

Nina tore up an old pillowcase, fashioned a makeshift bandanna over her face, packed her cats into cages, and trekked northward.

“The whole neighborhood was blanketed in a gray snow,” she recalls. “Some people were walking by in moon suits.”

Although Nina could not have known it at the time, she had just entered one of the most dangerous atmospheric conditions ever to occur on American soil, and she suffers the consequences. She had chronic bronchitis until 2003 and still has esophagitis and sinusitis. Many health professionals believe others like her won't experience the harsher, suffocating symptoms for several more years.

Up to 70 percent of [first responders](#) are ill as a result of [9/11 contamination](#). If a similar rate of illness holds true for those who lived and worked near the Twin Towers, the number of seriously ill New Yorkers could climb to 300,000 in the near future. About 70,000 New Yorkers so far have listed themselves with the [World Trade Center Health Registry](#), a database that tracks the health impact of the 9/11 attacks. The registry has been [criticized](#) for excluding large numbers of those potentially sickened outside a designated one-square-mile area. Despite the insistent denials of city and federal officials, tens of thousands of New Yorkers were unnecessarily exposed to a chemical brew without even the most rudimentary precautions. Today New York City is still mired in a fog of [cover-ups](#) and [half-truths](#) regarding its environmental welfare.

Civil rights attorney Felicia Dunn Jones, who worked a block from the towers, was caught in the initial deluge of dust when the towers fell. Although her family rejoiced upon her return home, Dunn Jones developed a serious cough the following January. She died barely five weeks later of sarcoidosis, an immune disorder caused by toxic exposure. Dunn Jones's name will be added to the list of victims when the memorial is completed in 2009, and the honor isn't just a token gesture. The addition of her name is a [hard-won acknowledgment](#) that exposure to 9/11 contaminants can lead to death.

[David Worby](#), a personal injury lawyer, is representing more than 10,000 individuals who claim they've suffered serious illness as a result of 9/11. Already, 130 of them have died of causes similar to Dunn Jones's, though Dunn Jones was not a client of Worby's. Worby is critical of government officials for their overly sanguine assurances about the safety of the air and is especially critical of the city's lax enforcement of federal requirements that respirators be worn at contaminated sites.

"They are getting sick because of people like Christie Todd Whitman and Rudy Giuliani," Worby says. Whitman was administrator of the Environmental Protection Agency, and Giuliani was the mayor at the time the towers fell. "My people don't want their names to be on the wall, because they are not victims of terrorists—they're victims of bad government. Giuliani should be banned from public office for what he did."

New York City, the Port Authority, and the contractors who were responsible for the cleanup (Bovis and Turner Construction) are all defendants in the Worby lawsuit.

"I started this suit on behalf of one cop that got sick," Worby says of his class-action lawsuit filed in 2004. "Nobody would touch the case with a 10-foot pole because it was considered unpatriotic to say anything against the cleanup or the EPA. We have come a long way. They once called the 9/11 cough a badge of honor. Now they know that the whole thing is a catastrophic government disaster."

Since the attacks, various scientific studies have demonstrated that New Yorkers are engulfed in billows of illness and disease related to 9/11. First the 9/11 cough and mental health problems caught the attention of local doctors. Then chronic respiratory and gastrointestinal conditions began to surface. Recently [a program at Mount Sinai](#) noted the emergence of [rare blood cancers among 9/11 first responders](#). Experts predict that more problems will surface in the next few decades.

While the progression of diseases continues to unnerve New York residents, more people [are asking](#) why basic health and safety standards were ignored and violated in the wake of the attacks. One nonprofit organization, the New York Committee for Occupational Safety and Health (NYCOSH), keeps a [diligent watch](#) on 9/11-related issues.



Image courtesy of NOAA

“The first indication I knew something was wrong was that by September 12 there was no evidence of or even consideration of organization,” says David Newman, an industrial hygienist with NYCOSH. Newman was consulting on environmental hazards at 9/11 from day one. “There was no health or safety plan at the site, and this is Safety 101.”

Asbestos was most likely in various construction materials used to build the World Trade Center, an EPA memo stated. It explained that short-term exposure to asbestos can cause respiratory, skin, or eye irritation. The information was dangerously incorrect.

“If our purpose was to save lives and avoid injury and illnesses, we did not have years, months, or even weeks to wait for corrective actions,” said former Occupational Safety and Health Administration chief John Henshaw in a recent House Judiciary Subcommittee hearing. OSHA played an advisory role during the WTC cleanup.

Inhalable asbestos particles are microscopic and completely unidentifiable without the aid of a microscope. Exposure to asbestos is dangerous in part because it does not cause obvious irritation; contamination manifests itself over the course of years and decades, not days. It’s an invisible, deadly, and patient toxin. The only effective protection against airborne asbestos is a special respirator.

“I was down there watching people working without respirators,” Newman says. “Others took off their respirators to eat. It was a surreal, ridiculous, unacceptable situation.”

Stringent protocols govern asbestos contamination cleanup. After a specialized training period, health exam, and certification, licensed technicians must wear industrial-grade

respirators and asbestos-resistant suits. New York City has a history of properly addressing asbestos contamination. Back in 1989, a [relatively small steam pipe explosion](#) on Gramercy Park South sent 200 pounds of asbestos blowing onto neighboring buildings. As a precaution, the entire building was covered in protective plastic sheeting, and city environmental officials complained that the cleanup would require more than four weeks of painstaking procedures for outdoor decontamination alone. More than 200 area tenants were displaced for weeks following the accident.

The World Trade Center had been, by some accounts, the largest fireproofing project in the world, with possibly 400 to 1,000 tons of asbestos, which was [released during the collapse](#). Bureaucrats aired their assurances to the world.

“The air is safe as far as we can tell, with respect to chemical and biological agents,” Giuliani pronounced two days after the attack.

On September 12, a regional EPA office volunteered to send 30 to 40 electron microscopes to Ground Zero to test bulk dust samples for the presence of asbestos fibers, according to EPA whistle-blower Cate Jenkins, yet the local EPA office declined the offer, opting for the less effective polarized light microscopy testing method instead. Jenkins had further alleged that regional office personnel were told by the local EPA office: “We don’t want you fucking cowboys here. The best thing they could do is reassign you to Alaska.”

Three days after 9/11, following questionable air sampling techniques, a spokesperson for the EPA said that levels of asbestos were either at low levels, negligible, or undetectable.

“I am glad to reassure the people of New York and Washington, D.C., that the air is safe to breathe and their water is safe to drink,” Whitman said one week after 9/11.

Under the gray, noxious air, trusting residents returned to their homes in Lower Manhattan, unsuspecting children returned to their schools, and hundreds of thousands of downtown workers trudged to their desks. In the following year, the EPA gave more than 50 public assurances concerning the toxic exposure. At least another 15 came from New York City officials.

The systemic failures began occurring almost immediately following the disaster, in part because of an unclear chain of command. In times of environmental crisis, a blueprint for a federal response, called the [National Contingency Plan](#), entitles the EPA to oversee safety and cleanup efforts—but it does not obligate the EPA to do so. During 9/11, New York City initiated a lead role in the environmental crisis response, and as a result, the mayor’s leadership has been called into question.

“We didn’t have the authority to do that [health and safety] enforcement, but we communicated that to the people who did,” Whitman said in a [60 Minutes interview](#). “Really, the city was the primary responder.” Whitman’s office repeatedly declined an invitation to speak with DISCOVER.



Image courtesy of EPA

At a time that demanded clear thought and action, a brazen can-do attitude emerged from the rubble, and nobody embodied the reactionary spirit more than New York City's mayor.

"You smell it, and you feel there must be something wrong," Giuliani said. "But what I'm told is that it is not dangerous to your health." Days later he encouraged New Yorkers to "go back to normal."

Once praised for his heroic response, Giuliani has now made New York City vulnerable to a billion-dollar lawsuit that addresses many haphazard health violations that occurred under his watch. Fewer than 30 percent of Ground Zero workers, for example, wore respirators. After repeated phone calls and e-mails, Giuliani would not return calls or send comments.

The president's 2002 proposal establishing the Department of Homeland Security addressed the lead-agency issue in the event of future crisis as follows: "After a major incident, the EPA will be responsible for decontamination of affected buildings and neighborhoods and providing advice and assistance to public-health authorities in determining whether it is safe to return to the areas."

Nevertheless, a lengthy [2003 report](#) (pdf) from the EPA's Office of the Inspector General (OIG) hammered the EPA for not fully utilizing its abilities, for making uninformed assurances to New Yorkers, for not taking a proactive approach, and for deferring the onus of environmental decision making to ill-prepared New York City officials.

With NYC officials and local landowners left to head up sampling and cleaning facilities, a number of private interests could easily sway air-testing results. An opportunity for collusion exists between the city and landlords: If buildings were found contaminated,

property owners could lose millions due to asbestos-blighted buildings, devaluing one of the most lucrative real estate locations in the world. It was in the financial interest of Manhattan's most wealthy citizens to see their properties up and running at capacity again.

Initially, the New York City Department of Health (NYCDOH) took the lead in implementing an indoor cleanup program, which placed the responsibility for asbestos removal directly on landlords and residents themselves, in direct violation of city, state, and federal laws and at an enormous potential health risk.

Nina, for example, returned to her Tribeca apartment a week after 9/11. She found the entire place salted with what appeared to be a fine coating.

“This stuff goes through clothes, cracks, everything,” says Nina.

In the mail, she received a letter from the NYCDOH instructing her how to clean her apartment: Use a wet rag and use a High Efficiency Particulate Airfilter vacuum. (A study cited in the EPA's OIG report shows that most residents failed to follow cleaning instructions appropriately.) Only trained, respirator-equipped professionals should conduct asbestos cleanup. Shortly after returning to her apartment, Nina developed crippling headaches and respiratory problems—troubles she never had before.

Eventually, in May 2002, the EPA reclaimed the initiative for indoor air cleanup. It offered a more involved testing for contaminants, but it still did not adhere to the minimum criteria for protecting human health under the EPA's own guidelines for a Superfund site. As a result, the cleanup efforts received little public trust. In the first cleanup attempt, 4,166 entities had registered; only 295 residents and building owners participated in the second program. Outdoor air sampling and cleaning was another matter.

“Our rooms were microcosms for what was going on in the neighborhood,” Nina says.

A [toxic cloud](#) composed of industrial waste and human remains crept out from the aching, smoldering pit at Ground Zero and wound its way into the adjoining streets. Its vapors circled around and up buildings, pumped in and out of nostrils, mouths, and lungs, and stung the eyes of every woman, child, man, bird, and beast within a wide range. It spread itself on building walls and inside boiler rooms and left its trail on parked cars, handrails, and public benches. That day, New York City was blinded by a perpetually sickening haze. It poisoned the minds of politicians who acted with hubris and paranoia. It obscured the vision of responders and residents, many of whom acted with heroism and reckless bravado, never thinking that their actions might be endangering themselves, their families, their cities, and their very future. The cloud billowed southward, over the river, enveloping everything in the dust and debris of blown-apart lives.

Teroy Canfield, now a music producer in Tulsa, Oklahoma, was a student at the Institute of Audio Research in Manhattan in September 2001. On the day of the attacks, he

remembers getting a “light dusting” following the collapse of the towers. Several hours later, he joined thousands in their exodus across the Manhattan Bridge toward Brooklyn.

When Canfield returned to his apartment near Clark and Henry Streets in Brooklyn Heights, loose papers and other debris were blowing across the area. His home was in the path of the cloud but supposedly far from the designated danger areas.

“There was dust on our air-conditioning units and on the vents,” Canfield recalls. “When we turned it on, the dust would blast into the room. We had wet bandannas and T-shirts, and we would put them on our faces when we went to sleep.”

Canfield couldn’t decide which was worse—to suffer the heat, to have an air-conditioning unit blowing dust into the room, or to open the windows and endure the noxious odors that were creeping their way into Brooklyn. More often than not, they chose to run the air. As Canfield explains, he simply thought the dust was just dust—skin cells, fibers, whatever.

In the following week, Canfield noticed that his dorm room rapidly collected an inordinate amount of the gray stuff, which prompted him and his roommate to clean the place three separate times that week. Neither of them had heard of, nor followed, any precautions. School had already resumed, and nobody there seemed to be talking about toxins or asbestos, so why worry, he thought.

About six months later, Canfield developed a catch in his throat.

“It was like if you swallowed a piece of rice and your instinct is to hack,” he said. “A dry, hard hack. I might cough three or four times a day, or a week.”

Every so often, the hacking would yield a small clump of tissue—different from phlegm or anything else Canfield had ever seen.

“It was sometimes brown and pinkish-bloody,” says Canfield, who has never smoked. “It didn’t hurt, so I figured it would go away.”

Canfield says that he no longer coughs as frequently as he used to, but he has developed a breathing sensitivity. Ordinary smoke from indoor cooking or an outdoor barbecue seems to bother him the most.

“Some people were buried in the dust,” explains Noah Greenspan, a cardiopulmonary specialist at the Pulmonary Wellness and Rehabilitation Center in midtown Manhattan. “There were a lot of toxins in the air, a lot of things that are very hard to clean out of the lungs, things like fiberglass and asbestos. If you inhale those things in large quantities, it’s very difficult for the body to recover from that completely.”

Greenspan has conducted a number of breathing tests on New Yorkers and expressed concern that many people don't know that pulmonary rehabilitation is a helpful treatment option. He explained that some victims won't even show any signs of disease for years.

"Smokers can smoke for 25 years before they become symptomatic," he says. "I think we are going to see a similar trend for people who were exposed to 9/11."

No agency has tracked the number of former residents like Canfield who have since left New York and fanned out across the globe, nor is there an agency outside of state lines devoted to meeting their health-care needs. At best, former residents are advised to download a treatment guideline from the NYCDOH Web site and pass it on to their doctors. Canfield, who has no health insurance, tells me that he doesn't plan on seeing a specialist anytime soon.

"I just treat myself if I have to—just eat some soup and my veggies, you know?" he says. "I don't have money to go to a doctor."

Even those who conducted air sampling in 2001 have suffered. While the EPA was conducting its own measurements, outdoor air had to be tested for radioactive materials, too, and that required the help of an elite group of government scientists from the National Nuclear Security Administration (NNSA).

Before 9/11, Steve Centore ran four miles a day, led an active family life as the father of three boys and a daughter, and held a security clearance earned from more than 25 years in government service. As a physicist with NNSA, he was among the first sent onto the scene following 9/11. The New York City Department of Health asked Centore to conduct air sampling at Ground Zero, but when he showed up at their makeshift command center on Chambers Street, the NYCDOH simply handed him a hard hat and a painter's mask and told him to get to work.

"We weren't worried about contamination, and we were told we didn't need respirators," Centore says. Even though he was a scientist, he still had to rely on the EPA's findings for his own safety.

Centore spent the next four months working among the steaming ruins, looking for radioactive material in both the pile and the debris being carted off to various sites. The radioactive air samplings came back negative—he claims everything had been burned up and swept into the air.

Centore didn't think much about the cough he had developed until several months later, when it got so persistent that he ruptured a blood vessel in his upper torso.

"It turned half my chest black and blue," he says.

The bruise initiated a succession of doctor's visits, but with little relief. By 2005 Centore was a different man—not just physically but mentally. He could no longer exercise, and

he seemed detached much of the time. His list of medications steadily increased. For the first time in his life, he began drinking heavily. His wife began to take notice of strange behavior.

“She would find me in the middle of the night standing in the driveway, wearing my pajamas and shaking,” Centore says. A psychiatrist gave him a diagnosis of post-traumatic stress disorder and put him on psychotropic medications for his panic attacks. He took a leave of absence from work, knowing that he would probably never return.

By the spring of 2006, however, a more serious set of symptoms emerged. Centore’s organs began deteriorating. First his gallbladder failed him, then his spleen and liver began to malfunction. He would require a liver transplant eventually.

“I started bleeding everywhere—out of my ears, mouth, penis, and anus, and none of the doctors could figure out why,” Centore says. “I was in the hospital for four weeks, and I can’t tell you how many colonoscopies I had in that time.”

When Centore asked the doctors if he could leave the hospital after four weeks’ worth of testing, he was surprised by their answer. Centore had been moved to number one in line on the liver transplant list, and doctors told him that he might only have hours to live. A liver was harvested in time, and Centore survived the operation. It has taken him a while to be weaned down from 34 daily medications to only 19, but he’s grateful he has his life. Although he believes his health problems are related to 9/11 contaminants, he no longer holds grudges.

“Every once in a while I still have panic attacks,” Centore says, “and I go to the doctor all the time, at least once a week. I am not out of the woods by a long shot.”

Heat up a ballpoint pen, a computer, an office sofa, electric wire, or any other object you might find in a high-rise and there comes a point when you can inhale it. The Twin Towers contained tens of thousands of computer terminals, each housing about four pounds of lead, and an untold number of fluorescent bulbs that contained mercury. Released metal particles from the smoldering pit of the World Trade Center were so fine that they could easily slip past a paper face mask and reach deep into lung tissue, where they are poorly soluble in lung fluid. Metals and glass can remain trapped there for long periods of time and make their way into the heart.

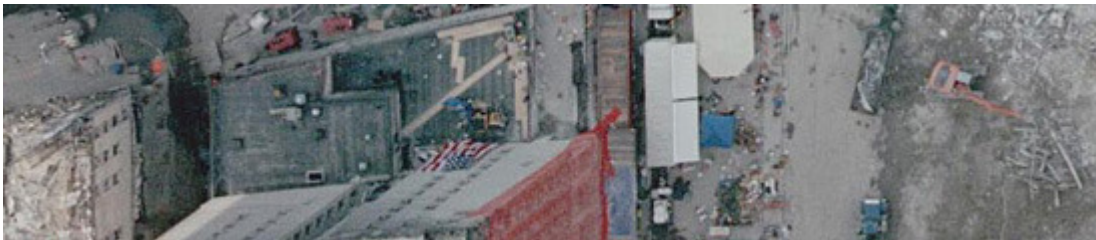


Image courtesy of NOAA

Though the list of known toxins released into the air keeps expanding, it doesn't deter the ongoing investigations of Thomas Cahill, a professor of physics and atmospheric sciences at the University of California at Davis. Cahill has led some of the [most exhaustive scientific studies](#) of 9/11-related toxins, and he has discovered a large number of health-threatening substances from air samples taken in the weeks and months after 9/11.

"There were two separate pollution events, and the first was an initial dust cloud," Cahill explains. "What must not be forgotten is that the later effects from the smoldering pile were far, far worse."

Unlike the publicly lambasted EPA tests and findings, Cahill's studies, which were published in peer-reviewed forums, were widely praised for their accuracy. Though the University of California at Davis has offered the conclusions to the EPA, the Senate, and New York City health officials, Cahill says he isn't aware of a single state or federal agency that has acted on his findings. Through sample analysis, Cahill first discovered that 21 percent of the initial dust cloud contained finely powdered, highly caustic cement—thought to be responsible for the "[9/11 cough](#)." Cahill noticed that the heat generated by the piles was converting gases into highly toxic, very fine aerosols. His study "[Analysis of Aerosols From World Trade Center Attack](#)" indicated that the contaminated air sometimes descended to ground level over a mile from Ground Zero, far outside the safety zones established by the EPA. Within a few hours' time, a person exposed to the fumes could ingest toxins that would otherwise take a year to accumulate in a typical environment.

"The fuming World Trade Center debris pile was a chemical factory that exhaled toxins in a particularly dangerous form that could penetrate deep into the lungs of rescue workers and local residents," Cahill and his fellow researchers concluded.

It's painful just listening to Susan talk on the phone. Her gasps and wheezes and long pauses in conversation give you the impression that she may not make it through an entire conversation, and I caught her on a good day. A bad day means that she won't even be able to make the trek from Queens to her office downtown.

"The public isn't aware of just how bad the effects have been," Susan says.

"Susan," an anonymous source, was one of 386,000 people who worked in Lower Manhattan before the attacks. A week after the attacks, she returned to her job downtown.

"Within 24 hours of returning to work, I had a problem," she warbles. "I could not breathe at the office."

Even though she had heard the assurances of officials on television, today she bears the signs of serious toxic exposure: internal chemical burns, chronic respiratory infections, and severe asthma attacks.

For average citizens like Susan, New York City offers only one publicly funded treatment option: the [WTC Environmental Health Center](#) (WTC-EHC) at Bellevue Hospital, a new program launched in January 2007 that will expand to treat about 6,000 New Yorkers with 9/11-related health problems. The World Trade Center Medical Monitoring and Treatment Program based at Mount Sinai and the Fire Department of New York's Bureau of Health Services programs offer services to first responders. [Politicians have proposed](#) \$1.9 billion in funding over the course of six years.

"We get about 100 to 200 calls a week," says Dr. Joan Reibman, director of Bellevue's WTC-EHC. "We have a couple of hundred people waiting, so to get an appointment takes six weeks."

The Bellevue clinic currently serves about 1,300 patients in all. Although the three WTC treatment programs have been praised by Mayor Bloomberg's office, Reibman explained to me that the WTC treatment programs were initiated by private organizations.

"Neither the city or the federal government asked anyone to start any of the programs," she says. Eventually the programs drew the support of city officials and gained funding.

Critics of the WTC health programs contend that there is no central entity that integrates the gathered information, which could provide a greater understanding of disease incidence as well as a certain level of continuity of treatment.

"We [the WTC health programs] all work together on the development of guidelines," Reibman says. "We all share our information with each other. We have different populations, so our questionnaires are different."

Although it still makes her ill, Susan continues to plod downtown to work. She says sometimes the air in her workspace makes her eyes burn, but she doesn't have a choice—disability payments won't cover the rent or put food on the table.

"You can't dwell on it every single minute," she says. "If people dwelled on what happened, nobody would live downtown because they would be too frightened."

Curious about whether the workers and residents of Lower Manhattan are still haunted by health problems like Susan's, Nina's, and Teroy's, I took a walk through the streets surrounding the 9/11 reconstruction site. Although six years have passed since the attacks, the number of people I encountered seemingly with residual health problems surprised me.

"They told us it would be OK to come back here," recalls Nicholas Rowe, a silver-haired bartender at a nearby Blarney Stone restaurant and bar. In an Irish lilt, Rowe chose colorful words to denounce the EPA's assurances, none of them printable.

"Three months after the attacks, we would open the bar doors each day," Rowe recalls. "And every time I would wipe off the bar counter, there was black dust. Now I have nose

and throat and sinus infections that keep coming back, and I never had those before. My regulars come in with problems too.”

Just a couple of blocks from the Blarney Stone, I stopped and chatted with Jim Moock, a director of business development at CQG, a market-data provider located in a Broadway high-rise.

“Some people had painter’s masks on their faces, apparently the cops were giving them out,” Moock said, recalling the day of the attacks. “I didn’t get one. It was chaotic, and the only clear thought I had was, ‘Why didn’t I get one [of the masks]?’”

Moock developed a dry, hacking cough about two weeks after the attacks. Finally, after two months of aggravation, Moock scheduled a visit with a pulmonologist. That visit has resulted in the first of many subsequent checkups throughout the years.

“He gives me a test every year or two, and it has shown diminished [lung] capacity,” explained Moock. “He has me on two forms of inhaled medications that I take daily every morning. One is steroid based, and I’ve been on them since 2001.”

Moock believes he was exposed to the toxic dust in a number of different ways. “When it got to be windy, you would see it blow off the window ledges, and I would be outside and see it land on the sidewalk, and it would just sit there like a clump, not like ashes that would just blow away,” Moock said. “This went on for months. I remember watching it rain on this stuff, and it took a lot of rain to get rid of the dust because it was so dense.”

Moock claims he hasn’t seen the familiar pockets of dust for a long time, but does it mean the city is now clean and safe?

In March 2004, in an attempt to “get greater input” regarding the health concerns of New Yorkers, the EPA convened the [World Trade Center Expert Technical Review Panel](#), made up of 18 professionals from academia and public-health organizations. The panel’s goal was to assess any remaining exposures and risks, ascertain any public-health needs that were unmet, and then to offer a recommended course of action. In order to arrive at educated suggestions, the panel needed solid data.

“The whole process [of gathering data] has been extraordinarily poor in terms of understanding the extent to which people were exposed and possibly remain exposed, and if there are pockets of pollution left,” says Jeanne Stellman, a professor of public health at Columbia University, who served on the panel.

Various panel members criticized the EPA’s testing methods, suggesting that the data obtained weren’t sound enough to draw the conclusions the EPA had acted on. “There is only a limited amount of data available on what the nature of the exposure was, which varied day to day and hour to hour,” Stellman explains. “There was remarkably little sampling and analysis.”

With so little data available, the panel wasn't able to determine if the city still required cleanup or not. Too many questions remained unanswered. "At any rate, the issue of cleanup was never resolved," Stellman says. "And we never got up to the public-health aspects that we were charged with doing."

The EPA [disbanded](#) the WTC Expert Technical Review Panel in December 2005 without explanation. Few recommendations made it into the public record as a result. Instead of continuing the panel, the EPA decided to implement a second program launched in December 2006. The plan intended to address the cleaning and abatement needs of residents of Lower Manhattan, in the exact same locations it had addressed in its first criticized attempt.

In its June 2007 congressional testimony, the Government Accountability Office (GAO) reviewed the WTC panel's recommendations and corroborated its assessments. The [GAO review](#) stated that the EPA's decision to incorporate only some, rather than all, of the panel's recommendations undermined the validity of the second program.

"The majority of panel members do not support EPA's second program," the GAO report concluded. "[The second program] was not responsive to the concerns of residents and workers . . . it was scientifically and technically flawed."

Robert Gulack, an attorney with the federal government, thought he had escaped the toxic environment caused by 9/11. When his department relocated into the Woolworth Building following the destruction of 7 World Trade Center, it took him only a few days to notice the effect on his breathing.

"Three days later I woke up with a severe asthma attack," Gulack says. "More than half of my coworkers raised their hands during a meeting and said they had illness since coming into the building."

To the alarm of his coworkers, Gulack began wearing a double-canister respirator to work every day. The precautions couldn't deter the onset of problems from the contamination he had already suffered, though.

"I was certified as a scuba diver, and I had great lung capacity," he says. "Now a scan shows damage to my lungs and hyperreactivity to irritants." Once Gulack was rushed to the hospital for pneumonia following a number of bronchial infections. Now his illness carries a diagnosis of reactive airway disorder.

Gulack explained that even though his agency had received assurances about the building's air quality from both the landlord and the EPA, later testing (by a private company) proved the area was dangerously contaminated.



Image courtesy of CDC

“I know that I was exposed to things that no human being should be exposed to,” Gulack says. “Not only have I been exposed to asbestos but probably a number of other life-threatening contaminants. I’m 53, I have a wife and kids, and I don’t want to be taken away from them. There was no reason to subject me to those dangers—no justification for this at all.”

As a union steward, Gulack has advocated for employee health concerns and has closely monitored the EPA’s actions since 9/11. He believes that instead of learning from all its mistakes, the EPA remains unprepared for another crisis.

“New victims are being claimed every day as a result of this contamination,” Gulack says. “The EPA has officially taken their bad choices and made it their model. Now all crises will be handled politically, through the White House.”

The EPA’s calamitous handling of the 9/11 cleanup brings White House involvement into question. The damning OIG report showed that important public-health information was [held back](#) by Bush’s Council on Environmental Quality, and evidence also suggests that critical press releases were altered, making them contradict scientific fact. As the report noted, “the White House Council on Environmental Quality . . . influenced, through the collaboration process, the information that EPA communicated to the public through its early press releases when it convinced EPA to add reassuring statements and delete cautionary ones.”

Gulack’s concerns are substantiated by another indictment of the EPA—this time in their handling of the hurricane Katrina disaster in New Orleans. A [June 2007 report](#) from the GAO contains an eerily reminiscent passage: “EPA’s assurance that the public health is being protected from the risks associated with the inhalation of asbestos fibers is limited because the agency has not deployed air monitors in and around New Orleans neighborhoods where demolition and renovation activities are concentrated.”

Within sight of Ground Zero quietly stands the Statue of Liberty, seemingly ignored in our post-9/11 world. But like an oracle from a distant time, she offers prophetic words of

concern. In the shadow of the attacks, the inscription at her base no longer seems to address immigrants but rather speaks directly to New Yorkers who now find themselves disenfranchised and suffocating with disease: “Give me your tired, your poor/Your huddled masses yearning to breathe free.”

Yet some leaders are speaking up for sickened New Yorkers. Representatives Carolyn Maloney and Vito Fossella of New York introduced the James Zadroga [9/11 Health and Compensation Act](#), which would expand the current health programs for first responders, area residents, office workers, and students. New York representative Jerrold Nadler tirelessly champions decisive action on behalf of New Yorkers who are still susceptible to toxins.

“We have to clean this up; it was never done properly,” says Nadler, who also says cleanup efforts could run several billion dollars, but there is no exact figure because nobody knows how extensive the contamination is and if it extends to Brooklyn as well.

Because adequate testing has yet to be conducted, nobody knows for certain just how toxic Lower Manhattan remains, but there are plenty of indicators that the 9/11 attacks are still dismantling the downtown infrastructure. Two former Deutsche Bank buildings downtown will soon be demolished as a direct result of 9/11 contamination, and more demolitions are expected.

“To clean it up, it costs between \$10,000 and \$20,000 per apartment,” Nadler says about the current price of adequate cleaning. “Are you going to ask a resident to pay that?”

On June 25, 2007, former EPA administrator Christie Todd Whitman [testified](#) before a congressional hearing and repeatedly denied any wrongdoing or culpability in the EPA’s handling of the disaster. Nadler, who represents nearly all of Lower Manhattan, presided over the hearings.

“Let’s be clear: There are people to blame,” Whitman said. “They are the terrorists who attacked the United States.”

Nadler offered me a distinction.

“I divide the population of affected people in different ways,” he says. “First are the ones that were killed, and you can blame the terrorists for those. Then there was the plume—we think about 30,000 people were caught in it. And those people were also sickened by the terrorists. But the others are first responders on the pile, and most of those are sick due to exposure—there you can blame public officials who permitted them to work on the pile.” Nadler also includes area residents and workers among the victims of public officials.

During the hearings, Whitman acknowledged that some first responders were sickened by the contamination because they did not wear respirators.

“After the first three days, it is not a rescue operation,” Nadler says. “It is simply a cleanup, and there is no excuse for not doing it properly. At the Pentagon site, nobody got sick there because they enforced the safety laws.” Workers who did not comply with safety regulations were not permitted on-site at the Pentagon-run cleanup.

“Every action taken by the EPA during the response to this horrific event was designed to provide the most comprehensive protection and the most accurate information to the residents of Manhattan,” Whitman stated in a press release. Her remarks, however, only served to enrage already traumatized New Yorkers.

Through a spokesperson, Whitman declined to answer any questions for this article, instead offering a prepared statement citing her congressional testimony.

“It is clear there are laws and regulations that were in place, which, had they been followed, would have prevented all this,” Nadler says. “They weren’t followed.”

While the courts try to determine who is responsible for the environmental debacle following 9/11, countless New Yorkers continue to live and work near Lower Manhattan with the assumption that it is safe. The dust is now out of sight, out of mind, and possibly in their lungs, hearts, and bloodstreams.