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# First Responders at the Cocoanut Grove Night Club Fire in 1942

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September 11, 2001, gave the world an in-depth look at the heroic but harrowing work that is done by "first responders" every day in this country and around the world. Not a day went by during the first month after 9/11 without millions of people witnessing the brave police officers, firefighters, emergency services workers, excavation teams, medical teams, and mental health teams doing their jobs at Ground Zero or the Pentagon. First responders, and their very critical role, were indelibly engraved into our consciousness after the terrorists' acts. Yet, from time immemorial, there have always been people willing to put their lives on the line to respond to mass tragedies. In the past they were known as rescuers. Their jobs were no less dangerous and no less traumatizing than the brave people who were called to duty almost three years ago. The following is an account of the roles that rescuers or "first responders" played in the Cocoanut Grove Nightclub fire in November 1942.

On November 28, 1942, Holy Cross College played an afternoon football game against Boston College and won. Boston was alive with excitement and with fans celebrating the victory. Many fans from the game were among the 1,000 people reveling at the popular Cocoanut Grove Nightclub in the midtown theater district of Boston. On that night, the club admitted 400 people over its occupancy limit.

The country was in the midst of World War II. Together at the nightclub with the revelers from the football game were Marines, soldiers, sailors, and Coast Guard personnel. There were young men getting ready to join the army for training, military personnel getting ready to be shipped abroad to fight in the war, and military personnel on leave from their units just having fun. There was a wedding party in the club that night, as well as a large number of local hospital personnel.

Shortly after 10:00 p.m., a fire started in the dimly lit basement of the nightclub. A busboy, replacing a light bulb that had been removed as a prank by one of the celebrating patrons, struck a match in order to see the outlet. The match touched one of the artificial palm trees in the bar and flames began to spread throughout the building. Because of the large number of flammable decorations and silk draperies in the club, the fire spread rapidly, engulfing the nightclub.

The nightclub did not have clearly marked emergency exits. The two revolving doors at the front of the building opened inwardly rather than outwardly. In a panic, people attempted to leave the nightclub the same way they had entered. As the hordes moved through the roaring fire in complete darkness, they jammed against the revolving doors. Just about one half of the club patrons escaped the Cocoanut Grove fire. Approximately 492 patrons were killed during the fire. Many others were injured. Near the front entrance of the club, where the doors jammed, witnesses said that bodies were stacked six feet high.

The nightclub had several other exit doors, but the patrons had no knowledge of them. One exit door's panic bar had been welded shut. There were no clear directions to another exit door, which was well-hidden behind decorations and drapes.

A full battalion of rescue workers ("first responders") was called into duty that night. There was a mobilization of police and firefighters. Civil defense personnel (medical personnel) and air raid wardens were asked to maintain order and/or to give first aid to people suffering from smoke inhalation and burns. Soldiers who escaped the fire went to work trying to help with the recovery efforts. Priests participated in the rescue and recovery operation by administering last rites to the dying.

In 1942 rescuers did not have the luxury of modern technology. Fire apparatus and rescue vehicles were parked adjacent to patrons' cars. This slowed down the rescue operation. The

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rescue was carried out without cell phones, which had not yet been invented. Much of the communication was done by people willing to go on foot or by car to deliver messages.

Firefighters eventually entered the revolving doors, and found the front area of the night club piled high with bodies. It took firefighters just over an hour to put the fire out completely. Thereafter, they began to remove people from the nightclub. Many of the firefighters were traumatized by the conditions of the bodies they found and by the contorted positions in which they found them. In one account, a firefighter stood screaming hysterically at the sight that unfolded before him.

An article by Roger C. Evans and Rupert Evans, *Accident and Emergency Medicine*, 68 POSTGRADUATE MEDICINE J, 714-34 (1992), describes how deaths from trauma usually happen in one of three distinguishable periods. The "first peak" occurs within seconds/minutes of the injury, where only prevention of the accident could have avoided deaths. The "second peak" happens in the second to fourth hours post injury, ("golden hour") which results in 35% of deaths from trauma in countries with advanced trauma services. The "third peak" occurs several days/weeks after the initial injury where death results from sepsis or multiple organ failure.

Rescuers in 1942 did not have the knowledge about mass traumatic injuries that "first responders" in the study above had. By 1942 Boston, like other cities in the country, had been preparing for war and for soldiers returning home from battle. Boston Massachusetts General and Boston City Hospital had established burn units in preparation for an enemy attack with massive fire and war casualties. The two hospitals had already established wartime protocols. As a result, Massachusetts General Hospital was able to save thirty-nine people who had been in the fire. Boston City Hospital saved 131. Advances in the treatment of fire-related injury and trauma were made because of the treatments administered to survivors of the Cocoanut Grove fire. Some of the procedures and techniques were used in the treatment of injured soldiers returning from the war.

Charles C. Kenney is a retired firefighter who has studied the Cocoanut Grove Nightclub fire. He was a seventeen-year-old sailor in the U.S. Navy on his way to London on that night. His

father was a firefighter who helped with rescue on the night of the fire. This writer spoke to Mr. Kenney, who now lives in Harwich, Massachusetts. He recalled talking at length to physicians, firefighters, police officers, and patrons who survived that night. Mr. Kenney recounted how it took firefighters only two to three minutes to respond to the fire because they were just around the corner answering another alarm. He believes that his father, like other rescuers, put everything on "automatic" and went to work doing their jobs "clinically" and "dispassionately." It was only later that he believes they experienced "depression" and other traumatic symptoms.

While Boston City Hospital and Massachusetts General Hospital saw most of the patients, other patients were being transported by ambulances and taxis to emergency facilities. Emergency facilities and hospitals were forced to design makeshift morgues to accommodate the dead. Because of the sheer number of dead, some medical staff refused to begin counting them until the next morning. Garages were used as temporary morgues. Witnesses reported that the huge concrete bays were emptied of vehicles and filled with the deceased.

This is from a commentary that Bernard De Voto wrote about the Cocoanut Grove Nightclub fire for Harper's [Magazine] in "The Uneasy Chair," February 1943:

The fire at the Cocoanut Grove was a single, limited disaster, but it exhausted Boston's capacity to deal with an emergency. Hospital facilities were strained to the limit and somewhat beyond it. If a second emergency had to be dealt with at the same time its victims would have had to wait some hours for transportation and a good many hours for treatment. If there had been three such fires at once, two-thirds of the victims would have got no treatment whatever in time to do them any good. Boston is an inflammable city and it has now had instruction in what to expect if a dozen hostile planes should come over and succeed in dropping incendiary bombs. The civilian defense agencies which were called on justified themselves and vindicated their training. The Nurses' Aid in particular did a memorable job; within a few hours there was a trained person at the bed of every victim, many other Aids worked to exhaustion helping hospital staffs do their jobs, and in

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fact more were available than could be put to use. Nevertheless it was clearly demonstrated that the civilian agencies are nowhere near large enough to take care of bombings if bombings should come. There were simply not enough ambulances: Railway Express Company trucks had to be called on to take the injured to hospitals and the dead to morgues. The dead had to be stacked like cord wood in garages because the morgues could take no more; the dying had to be laid in rows in the corridors of hospitals because the emergency wards were full. The drainage of doctors into the military service had left Boston just about enough to care for as many victims as this single fire supplied. Six months from now there will be too few to handle an equal emergency; there are far too few now for one twice as serious. One plane-load of incendiaries would start more fires than the fire department and its civilian assistants could put out. There would be more injured than there are even the most casually trained first-aids to care for. Hundreds would be abandoned to the ignorant assistance of untrained persons, in streets so blocked by rubble and so jammed with military vehicles that trained crews could not reach them even when trained crews should be free. Boston has learned that it is not prepared to take care of itself. One doubts if any community in the United States is.

*Id.* at 334.

Boston was in no way prepared for the tragedy that took place at the Cocoanut Grove Nightclub. The fire was unprecedented and resulted in the worst loss of life in a fire in the history of the city of Boston. The club had no fireproof fixtures. It had neither a sprinkler system nor clearly marked exits. At the time, Boston's legal occupancy laws were not applicable to nightclubs. The fire led to major fire prevention efforts and to the imposition of controls for places where large numbers of people gathered. The disaster led to modern fire code regulations as part of what was called the "Life Safety Code." Emergency lighting, exit lights, and occupant safety capacity were required by law. New fire codes were implemented which included the elimination of certain flammable decorations. There was a requirement that doors in such an establishment had to open outwardly. Laws also eliminated smoking in theaters.

Although the fire was not set intentionally, people were angry because there was a feeling that this was a disaster that was caused by negligence, and that it could have been avoided. The busboy was blamed, but a bigger blame was placed on those whose responsibility it was to take deliberate measures to save lives.

De Voto further comments:

Deeper implications of the disaster have no direct connections with the war. An outraged city has been confronting certain matters which it ordinarily disregards. As a place of entertainment the Cocoanut Grove was garish but innocuous and on the whole useful. It had been called "the poor man's Ritz;" for years people had been going there to have a good time and had got what they were looking for. With the naive shock customary in such cases, the city has now discovered that these people were not receiving the minimum protection in their pleasures to which they were entitled and which they supposed they were receiving. . . . For the responsibility is the public's all along and the certain safeguard—a small amount of alertness, civic courage and willingness to lose some money—is always in the public's hands. That means not the mayor's hands, but yours and mine.

*Id.* at 334-35.

Natural and man-made disasters have occurred throughout history. According to the American Psychiatric Association, collective stress reactions were examined by researchers and clinicians as early as the nineteenth century, when there were massive railway accidents in England. The Association found that it was not until the 1900s that research was done on post traumatic stress reaction in rescuers. In 1914 and in 1918, Dr. Angelo Hesnard, a French psychoanalyst, examined the side effects in rescuers after two ship explosions. Angelo Hesnard, *Nervous and Psychic Disorders Following Naval Catastrophes: Contribution to the Study of Emotional Psychoneuroses*, 18 REV DE PSYCHIAT, 139-52, (1914); *Nervous and Psychic Disorders Following War at Sea*, 106 ARCH MED PHARM NAV, 241-89 (1918).

Mass trauma is defined by the Centers for Disease Control and Prevention as the injuries, death, and emotional disability caused by a catastrophic event. ("Mass Trauma Preparedness and Response," Center for Disease Control,

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<http://www.cdc.gov/masstrauma/default.htm>.) After the Cocoanut Grove Nightclub fire, Dr. Eric Lindemann and Dr. Stanley Cobb, at Massachusetts General Hospital, studied the psychological impact of the tragedy on some of the patients who survived the fire. They assessed and treated patients with crisis intervention techniques and concluded that the survivors suffered from "acute grief." In June 1943 Dr. Cobb and Dr. Lindemann published an initial report on their findings from working with seventeen patients who were admitted to the hospital on the night of the fire. Stanley Cobb and Eric Lindemann, *Neuropsychiatric Observations During the Cocoanut Grove Fire*, 112 ANNALS OF SURGERY, 814-24 (1943). In September 1944 Dr. Lindemann wrote a more detailed account of his work with those suffering from acute grief and its management in Eric Lindemann, *The Symptomatology and Management of Acute Grief*, 101 AMERICAN JOURNAL OF PSYCHIATRY, 141-48 (1944). (Read at the Centenary Meeting of the American Psychiatric Association, Philadelphia, Pa., May 15-18, 1944).

The survivors in Dr. Lindemann's study all showed similar reactions to surviving the fire. He discovered the following patterns of trauma responses in his patients:

- somatic distress;
- preoccupation with the image of the deceased;
- guilt;
- hostile reactions;
- loss of patterns of conduct (an inability to function as competently as they did prior to the fire); and, sometimes,
- the appearance of traits of the deceased in the behavior of the bereaved, especially symptoms shown at the time of the tragedy.

*Id.* at 142.

Dr Lindemann also found that the duration of a grief reaction depended upon the success with which the traumatized person did "grief work" and regained a sense of equilibrium in their lives. This work was done in three stages:

- emancipation from the bondage to the deceased;
- readjustment to the environment from which the deceased is missing; and

- the formation of new relationships in the world. When a person tried to avoid the distress caused by the grief experience, he did not move through the three stages quite as easily and regain stability in daily functioning.

*Id.* at 143.

Dr. Alexandra Adler, at Boston City Hospital, assessed fifty-four of the survivors. She followed up with forty-six of the fifty-four over a nine-month period. Dr. Adler, like Dr. Lindemann, saw some of the same symptomatology in patients who had witnessed and survived the violent dying. She, unlike Dr. Lindemann, did not treat anyone's psychological symptoms. Dr. Adler termed the symptomatology "post traumatic mental complications". (*Neuropsychiatric Complications in Victims of Boston's Cocoanut Grove Disaster*, " 123 AMERICAN MEDICAL ASSOCIATION, 1098-1101 (1943).

According to the findings of Dr. Adler's 1943 study at Boston City General Hospital and Dr. Cobb and Dr. Lindemann's initial study at Massachusetts General Hospital in 1943, and Dr. Lindemann's more in-depth discussion of the earlier research on the survivors in 1944, one year later, fifty percent of the survivors showed symptoms of sleep disturbance, increased nervousness, anxiety, guilt related to survival, and fears related to the Cocoanut Grove Nightclub fire. "Survivor's guilt," characterized by the survivor's confusion over having lived and the meaning of that survival, was for the first time identified by Drs. Cobb and Lindemann after this major disaster. The survivor questions why he is still alive and other people died instead. The survivor may feel total responsibility for the death of another.

What are the lessons that professionals working as first responders can learn from the Cocoanut Grove Nightclub fire in 1942? Citizen Corp, a group of volunteers who help to make their communities safer by preparing for disasters, offers the following lessons:

- Major disasters can overload the capability of "first responders," especially during the first critical twelve to seventy-two hours of an event;
- Communities can train individuals in emergency preparedness and basic response techniques in order to supplement the work of