In two minds: tales of a psychotherapist
Paul Valent

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Sooner or later, clinicians learn to confront lifeand-death decisions, at both a literal level and then, slowly, the varied reverberations that ripple through our personal and professional lives. Initially, such moments stir our primal feelings: intense vulnerability, helplessness, panic or sheer numbing. At these moments, we can no longer think or feel. With time, training and experience, our extreme reactions are gradually transformed, as we learn to regulate how we respond, less at the mercy of our instinctive reactions.

Dr Paul Valent provides an insider’s view to personal and professional transformations through richly detailed clinical case studies alongside pivotal moments in his family life. His insights into the unfathomable and secret moments of trauma make this book a compelling read.

Why and how traumatized patients trigger overwhelming emotions in therapists is revealed during a close reading of Dr Valent’s assessment and treatment of a range of grim clinical conditions: complex post partum depression, sexual degradation, murder, rape and child abuse. But there is much more to this book than in-depth psychological case studies. As a skilled psychotherapist, he provides a language to those silences that ‘trauma’ is, complex experiences beyond the registry of ‘common’ senses.

After spending nearly four decades clinically repairing psychological trauma, Dr Valent underlines why such therapy is both so consuming of time and emotionally such a burden. This burden, ‘compassion fatigue’, ‘emotional burnout’ or ‘vicarious trauma’, is, at one level, reflected in his book’s title – to be in two minds is the state of dissociation which usually follows severe traumas, as most of the patients, his case studies, experienced. Another level highlights how psychiatry itself is in two minds, profoundly split in its attempts to locate human suffering between ‘brain’ and ‘mind’.

Yet another level emphasizes that to be in, or between, two minds is an ongoing existential struggle for both his patients and himself. At the start of his career, Dr Valent provided therapy to his patients to make these self-discoveries, eventually discovering his own need for deeper self-understanding. His first analytic experience was apparently unsatisfactory, to say the least. However, he persisted to delve further. At times, I had a small quibble when I felt that his style, bitingly honest and compassionate, veered too close to the poetic: “I did not encourage love to be a consciously aware spring of new meanings” (p. 118).

The complex case studies also covered aspects of his significant work with survivors of Victoria’s 1983 Ash Wednesday bushfires, of immediate relevance in the aftermath of the 2009 Black Saturday devastating bushfires.

Along the way, Paul exposes pivotal moments between three generations of his family relationships. Gradually, a pattern of the ongoing, mutual influences between his personal and professional life emerges. For example, his disclosure, “The little that I gave to my patients I had withheld from my father” (p. 57) surprised me as a colleague and friend for over 20 years, as I have observed Paul’s commitment and generosity in many professional settings.

More in keeping with my own view of his work are the many moral questions and astute clinical observations. For example, during supervision of a new psychiatric registrar’s case of a 57-year-old woman whose headaches started at the age that her mother died, Dr Valent asked, ‘What happens if we are synchronized to these dead people?’ (p. 140). He thus introduced the young doctor to the idea of trauma transmission from generation to generation. More self-observation followed: “I absorbed my parents’ fears and numbed them into my nothingness. But I also had my own individual fears to suppress, including that my parents would abandon me again.” (p. 322).

His previous abandonment at the age of 4, part of Paul’s harrowing Holocaust testimony recorded as he approached retirement, is the powerful penultimate chapter. But now I jump ahead.

Paul’s candid account of his generational family struggles started in his early childhood traumas, to reverberate decades later on in his graduation as a doctor. Then he felt that his mother “…was no help. After her initial joy she retreated back into her own world. She proudly told stories about me being a doctor to her card partners, but the stories bore little resemblance to reality. I could not talk to her, really”. He tried to reassure himself that everything was fine, but of course, in retrospect, he realized that was far from the truth. He needed to get away, as many trauma survivors at one time or other need to.

Then, married, with family on the way, Paul returned to Australia from England and Israel. He continues to trace his professional development, informed by a deepening self-understanding. From his initiation into clinical psychiatry, to a first and then second personal therapy, Paul returns again and again to highlight parallel developments between his personal, family and professional relationships. His understanding of the power and generational impact of trauma became original contributions in his earlier books and valued

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contributions to the emerging field of traumatology, gaining him international recognition.

In the background is the ever-present shadow of his childhood Holocaust trauma.

What I found deeply moving throughout Paul’s book was his alertness and sensitivity to the many expressions of hidden trauma in diverse settings: patients in his consulting room; bushfire victims; his first analyst; personal experiences during his testimony; revisiting and reliving his childhood moments with his children in Budapest.

Aged 63, Paul’s Holocaust testimony led to his feelings of amazement as he observed the developments of his story as he told it. He concluded with the moving, unanswerable question: “My testimony was another level of integrating my story. How many levels did patients need to recover their own pasts? I wondered how many levels their therapists needed to recover?”

No wonder Paul conceded his “hate (of) superficial equation of survival with resilience”. He preferred to account for his survival as a combination of luck, his parents’ grit and his ability “to obey and disconnect my thoughts and feelings. Did I do well?” (p. 328).

This book deals with the complex and disturbing legacy of trauma’s expression in personal and clinical life. Paul acknowledges the power of trauma in great detail, accessible to both mental health professionals and the general reader. Yet I wondered how the latter could sustain reading chapter after chapter. Or, would they need to pick up the book, then take a breather as they pace their return for a later time.

How to sum up this book? Paul provides a partial, but profound testimony to the fact that his life’s work reached well beyond personal struggles to survive. His major contribution is providing opportunities for reparation in the lives of his many patients, colleagues and others who otherwise were doomed to the constricted lives imposed by the secrets of past trauma. Thus Paul has restored, preserved and perpetuated the memory of his murdered family, enriched the lives of his current family and future generations, and advanced knowledge of trauma in his chosen profession.

Taking all this into account, Paul’s writing embodies his life’s mission – to live life according to the proverb, ‘Physician, heal thyself’. For me, reading his tales of psychotherapy has been an experience that will linger, I suspect, for many years. It is that sort of book.

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