Why I Write: 
**Reflections From 40 Years of Clinical Teaching and Writing**

Howard F. Stein, PhD

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“The rising world of waters dark and deep,
Won from the void and formless infinite”

John Milton, 
*Paradise Lost, Book Three*

Let me begin by introducing myself as a writer. I have been part of family medicine literature since the late 1970s, principally in *Family Medicine, The Journal of Family Practice,* and *Families, Systems and Health* (originally *Family Systems Medicine*). I have also written papers, chapters, books, and poetry outside medicine.

So why do I write? About 30 years ago a medical colleague called me a “paper factory,” which I took to be both compliment and sarcasm about the quantity of my writing—often called “productivity.” He missed the complex sources of my motivation for writing. For me there is both wish and urgency to record what I am learning and to share it. Why I write is similar to why I breathe. It is a vital sign. Writing is part of my identity as writer and poet; it is not only what I do but also part of who I am.

What I learn, the source of my writing, can come from anywhere—often from conversations with family medicine interns, residents, or faculty about a “case” (clinical relationship, diagnosis, treatment, outcome) they are currently involved in or a past one they are still haunted by. It may come from a grand rounds talk or from a Balint group. It may come from informal, clinically based research into Oklahoma wheat farming culture or more broadly from my interest in the culture(s) of Oklahoma. Many “cases” (stories) have inspired articles and poems, which I try to publish and also give to the interns/residents/faculty to help create a broader and deeper emotional “space” of understanding, between them and me, and between them and their patients and their families.

Over the years I find that I have often written and published to give voice to ideas, theories, and perspectives that were contrary to organizational and some journals’ orthodoxy and “party line.” Here writing and publication were acts of liberation, often a breaking of silence, secrecy, and taboo. One common phrase used by journal and book editors and publishers in rejecting my papers, chapters, and book manuscripts was that I was “neither fish nor fowl.” That is, my ideas did not fit a particular theory, method, model, or discipline. Being a transdisciplinary scholar is both blessing and curse. I find that I and my ideas often do not belong where I seek to articulate them. I have had colleagues and supervisors tell me that no one in family medicine can understand my ideas; one even forbade me to use the word “culture” in my workplace.

Despite numerous rejections, I have continued to write and submit manuscripts, in part because I believed in the worth of my unorthodox ideas and because I had friends, colleagues, mentors, editors, and publishers who affirmed that what I offered them was worthwhile. Their faith in me gave me faith in myself. Over my career I have been blessed to work with some wonderful editors, eg, Joan and Lynn Carmichael, MD; G. Gayle Stephens, MD; John Frey, MD; Paul Fischer, MD; Warren Holleman, PhD; Donald Bloch, MD; Susan McDaniel, PhD; Tom Campbell, MD; Peggy Touhey, MD; and Johanna Shapiro, PhD, in family medicine journals. They not only helped me to hone and to publish what I had written, but they also drew out of me ideas that I didn’t know I had. They gave me voice as much as they recognized and encouraged my own voice. A great editor makes a good writer better.

For me writing is both joy and torment. It is a struggle for *le mot juste.* The terrible waiting for an idea, a
word, a phrase is matched only by the gratitude of finding it—or of its finding me. I write to constantly improve my art, my science, and my craft. I write to tell the truth, as close to the truth as I can approximate at a given moment. I write not only because I can but because I must—not as compulsion but as obligation—to an imagined and real reader in an imagined and real world. Awkward as it is to say, I am “written” as much as I write. I write to help advance ideas in the discipline of family medicine (and other disciplines) and in turn to help doctors to be attuned to their inner life, to the inner life of the patients and families, and to the intersubjective dance between them. I write first to explain myself to myself, to know what I think, and, second, to try to explain myself to others. I write to hear myself (and to hear the presence of others’ voices in me) and to share with others what I am hearing. I listen to my own inner life to better listen to others and to write about them and our relationship.

Finally, I write to heed the promptings of what Nobel Laureate Octavio Paz called “the other voice,” the voice from the “trans-historical beyond,” from which comes the “perception of the other side of reality,” an experience “prior to all religions and philosophies.” I have learned to trust this voice to give me voice. To call it access to my own unconscious or countertransference is the beginning, not the end, of understanding from whence it comes. Martin Buber spoke of it as the realm of relationships between I and Thou, the antidote to a world of relationships based on I and It. I write best when I get out of my own way—and listen.

CORRESPONDENCE: Address correspondence to Dr Stein, 1408 Oakhill Lane, Oklahoma City, OK 73127. howard-stein@ouhsc.edu.

References