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How to Write a Book Chapter for a Compilation Book

Amy Szumstein

Do you feel the urge to share a story from your life in writing but feel intimidated by the idea of writing an entire book? Amy Szumstein, a nurse and nutrition counselor, who has many varied personal and professional experiences, found that contributing a chapter to a compilation book encouraged her to consider writing at least one book on her own. Her story could inspire you to do the same.

Amy never saw herself as a chapter author and agreed to the project to when the person said, “You’ve got a lot of stories to tell.” Amy thought to herself, “There is no better way to tell a story than to write it down.”

I bet you also have a lot of stories to tell, don’t you? If you were approached, would you agree to help out the person who needed a few more authors to complete the book?

When you listen to this episode of *Writing to Get Business*, you’ll discover how the experience of writing the chapter changed Amy’s perspective in a big way.

- In writing a chapter for a compilation book, does a formula help?
- Can writing a chapter in a compilation book stimulate the urge to continue writing?
- How can authors deal with the issue of how much to reveal of themselves?
- What themes are commonly found in memoir-style books?
- Why are books that inspire so important in these times?

Patricia: Hi. This is Pat Iyer with *Writing to Get Business*. And I have with me, today, Amy Szumstein, who is a nurse who has experience with nutrition and a varied career. I invited her on to the show because she has participated in writing a chapter for a compilation book. And it's not a topic that we have covered much in the show, and it may be an opportunity that comes your way, as a potential writer or as an author. Amy, welcome to the show.

Amy: Thank you for having me.

- Patricia: Let's talk about what led up to your involvement in writing a chapter for this compilation book. How did you find out about it? Did you approach that person? Did they approach you?
- Amy: Well, the funny thing is, I've known Peggy, who is the person who was in charge of seeking people out, for a long time. And I knew what she did. I think she knew never to approach me and I knew I was never interested. And yet, she got to a point where she needed just a few more writers, and she reached out and I said no. And she reached out again and said, "Well, you have a lot of stories to tell." And I said, "You know what, I do. Okay." And so, she brought me in just by purely asking more than one time and I was happy for it. In the end now, though, she did it. I'm grateful for it.
- Patricia: You said she knew not to approach you. So how did she know that you wouldn't be interested?
- Amy: I just never gave the vibe. Knowing her and asking her questions and talking to her about what she did was fascinating to me, but I never gave that additional step in her direction to invite me into her world.
- Patricia: Before you wrote this chapter, had you written blogs or articles or did any other kind of writing?
- Amy: No, actually not. I do consider myself a good writer, I have a son who's always asking me to double-check his stuff, and we're tweaking it as we go, and a daughter as well. I write nice thank-you notes. I mean, I have fun writing, but I never saw it as joyful enough to take it to a different level.
- Patricia: And what made you change your mind?
- Amy: The fact that she said I have lots of stories to tell. And I thought there's no other way to tell your story than to just write it down. We all have stories, many. And I could have written bunches of different stories.
- Patricia: What was the topic for your chapter?
- Amy: "I Changed My Religion but I Found My Faith" is actually the title of mine. And so, it just journeys through where I had been growing up and where I ended up as an adult. And it weaves in, of course, all of

my life experiences, of marriage, divorced mom, critical care nurse, Olympic-caliber athlete, coach, you're able to weave in a lot of the little touch points. And I think, because of that, I've sort of toyed with the idea of maybe writing more at some point.

Patricia: When you were constructing your chapter, did you have any outline that you were following? Did you get any instruction on how to put your chapter together?

Amy: Actually, yes. There was a little bit of a formula which definitely made it easier to follow some instructions that way, because just to hand me blank sheets of paper, I don't know that I would have been able to construct what I did just in general.

Patricia: Can you tell us a little bit more about that chapter, how you decided which stories to include, which ones not to? Or how much you were willing to reveal about yourself? Because that's one of the things that, sometimes, intimidates people of, "Oh, do I really want the world to know this?"

Amy: Boy, is that the truth? Okay, so I'll give you a short story; then I'll back it up. So the truth is, I wrote the whole thing, and then I read it and thought, "That's not the story I want to tell." It very much pointed a lot to the outside world and I'm responsible for where I am. And so I rewrote it with like two weeks before the deadline and changed it.

So when I look back at it now, I have much more peace and joy in how it came out. That having been said, yes, there was definite concern, who's going to read this? Is this the way that they saw this? Did they perceive the same scenarios the way that I did? And what kind of strife am I going to cause within my family, if this isn't the same story that a brother or a sister saw, or mom or dad or anybody? That definitely was ringing in the back of my mind. But I think once I committed to the second telling of it, and not worrying about how it was told, just sort of telling it from my perspective, it made it easier and more succinct and heartfelt.

Patricia: What kind of reaction did you get from your family to this chapter?

Amy: Okay, so this is the funny part; they still have never read it.

Patricia: Do you have a theory as to why that's true?

Amy: What's that?

Patricia: Do you have any theories as to why that's true?

Amy: No, but it's funny because I had this fear about it and yet, in reality, it didn't even happen. I think it's they don't believe it was really me. I don't know. It's okay. I know, it's kind of funny. But a lot of my friends have read it and they're very proud of me for having done it the whole ... The other thing that you had asked is what stories did I pick. I picked the stories that when I thought I was on Track A, they shot me way over to Track Z, and I sort of brought it back to Track A. Those are kind of the stories that I focused on, the ones that really threw me for a loop, and I really had to refocus and garner all of my strength and resources, and get back where I wanted to be heading.

Patricia: Can you give an example of one of those?

Amy: My son, who just at school one day, asked to go to the bathroom, couldn't go. The teacher said, "Wait till we're done." Now, he wasn't an abuser of going to the bathroom, so that irritated me. But anyhow, when the bell finally rang, and he went to the bathroom, he tripped and hit his head. And it gave him a concussion that lasted about 14 months. And his light and sound sensitivity were off the charts. And so I needed to rebuild his brain structure with therapy, and homeschool him back to his grade, before homeschooling was in vogue. Now everybody homeschoools, but I homeschooled then. And he was with me every day. I mean, it was 5 to 15 hours of therapy a week. So that really was a derailment.

Patricia: I would guess so.

Amy: And then, after he got all better, he dove into a swimming pool and broke his neck.

Patricia: Ouch.

Amy: Yeah. So derailment number ...

Patricia: That is of course you know as a nurse that spinal cord injuries re serious so you must have been freaking out.

Amy: Yes. Yes. Yes. Yeah, 20 years as a critical care nurse doesn't prepare you for anything with your own family.

Patricia: No. Wow.

Amy: But all is good. Everything's good. He's a normal functioning student and pseudo athlete now. So those are some of the things that I spoke about, though, very big life-changing events. Now, if I were to go back and write, I could take any one of those stories and dig deep, and how I made it through and was the rock for them, him, and just how I made it through. I think it's a survival story on both sides.

Patricia: When I talk to people about helping them with writing their books, it's a common theme of overcoming challenges, developing resilience, developing and using coping skills to get through hard times, and then the lessons that the author can share with people who are similarly challenged. You have a well of stories to draw from, Amy, because anyone who's worked in a critical care unit knows how the body can be challenged, and the things that are necessary to survive. I used to wonder, when I was taking care of patients also, there would be so many people who I would take care of who are dealing with some type of a terminal diagnosis. I worked on oncology units, for example.

And some of them were such sweet people, and I would question, "Why did this person end up getting cancer? And then there's this other difficult, irritable person that I'm assigned to who's as healthy as an ox and will go on forever?" And I never could reconcile that.

Amy: Bad things happen to good people, right?

Patricia: Yeah, they sure do. And it may be a part of the coping skills, because there's a whole set of beliefs about what you can do to live with cancer as opposed to die with cancer. Some of the people who survive critical illnesses and critical injuries, the people who refuse to give up, the people who push themselves in therapy, physical therapy, occupational therapy, speech therapy, they're going to push just a little bit harder every time. And then there were others who were victims, who said, "You know, if I'm meant to get better, I'll get better. If not, oh, well."

Amy: So true. And in fact, I worked in the ICU. January was a big turnover month, if you know what I mean, with deaths, because everybody

pushed through the holidays. They had family that was going to come in and visit. They sort of had this innate thing to make it through that time period. And then, in January, they would be like, “Okay, I'm ready to transition.” Yeah, I get what you mean completely.

Patricia: I have not heard that before, but it makes sense to me in terms of people's ability to hold on.

Amy: Yeah. I remember, one year, we got to the 20th, about this time of January, and we had already had 30 deaths. Like if you figure one a day would sort of pass, we already had hit our number by about this time on the one year that I'm remembering now.

Patricia: And we're recording this on January 18th, to give people a perspective. So, the first 18 days of the month of January were busy.

Amy: Yes, they were.

Patricia: Well, I know that our viewer didn't expect us to be talking about death and dying as we were discussing your book. And they probably are saying, “Okay, come on, Pat and Amy, let's get back on something more cheerful.” It's what happens when you put two nurses together.

Amy: That's right. We can talk about a lot of other crazy things, too, and still be eating lunch, as we always say. And we can talk about anything over a meal, yeah. There have been plenty of good days in my life, too. I mean, traveling for Judo, being ranked number one in the country in my weight division, being an Ultimate Frisbee coach, and bringing my team, that when I first got them they hadn't even won a game, to the championship in three years.

There are certainly lots of highlights as well. I don't want to think that there's only doom and gloom, and I bring that into my life. No, I don't necessarily do that. But I do think that those challenges are presented to us just by the course of living, and how you deal with it, overcome it, and rise above it is really the key. And again, going back to how I rewrote the story, there's so much that happens externally that we can say this is why I am where I am, and I can't get better because of whatever. But it's so much of the internal part of you that's going to make you see the light, be the light, get over where you are to where you want to be.

Patricia: We're talking about getting over challenges. Were there some lessons that you shared in your chapter that you think would be helpful for the people who are listening to this?

Amy: Yeah, certainly. And not only my story, too, but a plethora of other stories and multiple other books that are in the series. If you're down and out, especially given all the things that are crazy in the world today, and you feel like you need that inspiration, there are so many books. There are so many books with people that are overcoming things.

If you're asking for one, it's putting one foot in front of the other. I had no time frame of reference for when my son would be better. Every day he woke up, I could look in his eyes and know what his pain level was, and he would just confirm it and go on. And yet I knew if I had given him pain medicine and stuck him in the corner in the dark, his brain would not have healed the way that it has.

One of the things that we did, this is a funny story. Do we still have a minute? Yeah. We had to rebuild his total topic map. Okay, so, Pat, you may know, when you hear a noise, like I hear a truck outside or the coffee machine goes off, like your brain knows where that is. His was all messed up. If he closed his eyes, he couldn't tell where sounds were coming from. And so the doctor, who I love, came up with this app, that was a fart app.

Patricia: Just like a boy, for sure.

Amy: Perfect. And so as a kid, he had to close his eyes touch the fart app, it was on an iPad, touch the app as he rebuilt that part of his brain, so that he can now close his eyes, drive a car, he knows where sounds are coming from. But those kinds of things that were so important to me and knowing how to get therapy for him, instead of just giving him some pain medicine and having him sit in a rocking chair, that just wasn't going to do it for me. So that could be a lesson, too. If your gut's telling you one thing, follow it.

Patricia: I'm thinking about a concussion that I had when I was 18, when I was thrown off of a horse. And I was in Colorado. My friend told me, "Don't let the horse run across the furrows of the field, make the horse run down the furrows." And this horse knew I was an inexperienced

rider, and said, “I'm going to do whatever I want to do. I don't care what she's telling me to do.” And I remember being thrown off the horse and then waking up on her bed, looking at her and knowing who she was, but not knowing how did I get to Colorado, how did I get the money for the plane ticket. I couldn't put that together in my brain.

And ever since then, I have two effects that I've seen from that concussion, is that when I'm really anxious, I have trouble coming out with a coherent sentence. I may stop the sentence and then start it again in a different direction. And I have high sensitivity to light and sound, which is why I was paying attention to what you said your son went through. It didn't affect my ability to learn or my achievements. So I'm thinking what your son went through, the clinical part of my brain is going, that sounds like more than a mild concussion. That he had quite an impact on his head.

Amy: He had mid-brain head injury. Yeah, he had a mid-brain head injury, essentially. Right.

Patricia: He's fortunate that he's made a complete recovery.

Amy: From both of his injuries, yes.

Patricia: Yeah. Yeah, both of them were significant.

Amy: Yes, they were, I know.

Patricia: You participated in this chapter in the book. And were you asked, as part of the marketing, we're going to switch subjects away from neurological injuries.

Amy: It's a big jump.

Patricia: I know, but I'm capable, and I know you can follow along. When the book came out, did the publisher ask you to help in terms of promoting the book?

Amy: Of course. And I knew that that was something I wanted to do anyway, trying to get it to that number-one position, which we did, and have it make an impact right away. The truth is I knew nothing about marketing for the books, and so I learned a whole lot. She was very helpful in teaching us and getting us, I guess, links and ... I don't

even know, all the different things, though, to sort of get lined up to market it. And yeah, it was fun. Because it was just all of us together, just the energy of it once it was all put together and released. And we released the book on Amelia Earhart's birthday, I think, it was. And the book has a connotation of from flight to light from struggle to not struggle, so it's sort of flowed in with Amelia Earhart's birthday.

Patricia: Interesting. Yeah, that would be a very fruitful theme to pursue. You could take several nuances out of the concept of flight.

Amy: Yes, absolutely.

Patricia: I am editing a book right now called *Dark Cockpit* that's written by a Romanian pilot. And his analogy is that pilots love it when the cockpit is dark and all the lights are off, there are no flashing lights, there are no warning lights, they just want everything to be smooth and no emergency lights on, whatsoever. And he uses that as a theme for your life can be like a dark cockpit, depending upon how you structure it.

There are a lot of leadership lessons, a lot of communication lessons. Something that you would relate to, Amy, from being in the clinical area is that sometimes there's an inconsequential thing that comes up, but it's a warning sign. And if you're knowledgeable, you remember that, or you act on it, or there's an intuition that gets activated that we talk about in healthcare, "Something's not quite right. I don't know why it's happening, but I need to get help for this patient."

And in the aviation world, when there's somebody in the cockpit or inside the plane who sees a problem, it's their obligation to bring it to the captain. And in very authoritarian worlds, where the captain is in charge and makes all decisions and doesn't want to hear anything, the copilot can see a problem arising and then try to get it to the attention of the captain. So as a result of several really bad crashes, where the captain wouldn't listen, the whole concept of crew resource management took hold, and then in turn, those principles came into health care. That's how we circle around this conversation.

Amy: Interesting. But I could see being in the cockpit, having it more peaceful and don't want all that distraction of lights and flashes because you know something's going on. It's the same with being in

the ICU, you start seeing all those lights and sounds, and you've got to be there, yeah.

Patricia: Yeah, there are alarms. That's one of the issues with critical care units in the United States, is that we've got all this equipment that's beeping and buzzing and flashing and making sounds. And it's very tempting to tune it out because it's this din that's going on all the time.

Amy: Yeah. And you wonder, too, is the patient, conscious or unconscious, how much of that is getting into their brain as well? And, "Oh, my goodness, what's going on? And why isn't somebody answering that one?" I took care of a patient one time, he mixed chemicals cleaning his dorm room, and got chemical pneumonitis. It burned the inside layer of his lungs. He was intubated for 52 days. And this football kind of size guy lost, I don't know, 70 pounds by the time he left. But when he finally woke up from the coma that we had him in so he could breathe on a ventilator, we asked him, "What did you remember?" He thought he was at the mall because of all the sounds around him. So you just never know what's going on in their heads and their subconscious while they're there, too.

Patricia: I know that when my father was in ICU, he interpreted those alarms as fire alarms. And he told us that there were lots of fires in the neighborhood because he kept hearing sirens all the time.

Amy: That's interesting. That's interesting.

Patricia: Wow, mixing chemicals. That's a little scary, Amy.

Amy: Well, it's not like fancy chemicals. He mixed bleach and something else, just normal over-the-counter substances.

Patricia: Probably bleach and ammonia.

Amy: Most likely. I don't remember now exactly what it was. But I think something had a fancy name and something else. And we did a presentation, we did a nursing grand rounds on it. I know you know what that is. And we presented him, and at the end, his mom came in and she's like, "I told him, 'I will clean your bathroom for the rest of your life.' That was too, too much for me to go through."

Patricia: Well, I did that with bleach, and I believe that was ammonia, one time. And I remember the smell. And part of my brain said, “You just really screwed up bad, Pat.” And I ran through the house and I opened up the front door. And I remember laying on the floor gasping for breath.

Amy: Wow.

Patricia: Because I had created a toxic gas by combining those two chemicals, whatever it was. Bleach was one of them. I think it was ammonia.

Amy: He was in his little bathroom. Yeah, he was in his little bathroom cleaning. So he probably didn't have the wherewithal to hightail it out and get some fresh air.

Patricia: Yes, I was in the bathroom, too, again. It's the most dangerous room in the house.

Amy: Oh, brother.

Patricia: Amy, let's go back to your book. I'm going to anchor this back to your chapter.

Amy: Okay.

Patricia: Now that you completed it, you promoted it. We talked about the flight analogy. We talked about those alarms, the ICU, the mixing of the chemicals, that was the pathway that we just took our listener down. Do you have any thoughts about writing again?

Amy: I do. And I think that confidence that I gained in doing it one time, certainly would be there doing it again. Ironically, my son has been published twice. So he's also in that realm of wanting to write, enjoying writing. But I learned that I do have many stories to tell. And they can be funny ones, too. I was a preschool substitute teacher for years. And just telling kids funny stories is also fun. So who knows, maybe I would branch out and do something completely different the next time around, not just self-help.

Patricia: There are many topics that you could write on, Amy, from the Olympic athlete perspective, to parenting a child with neurological injuries, to working with little kids, to your rich life working in the

clinical area as a nurse. I see lots of different directions. And plus your primary interest is on eating well so that you can perform well.

Amy: Right, right. Especially given this day and age, we haven't even touched on that. But I mean putting good stuff in to get good stuff out is the only way it's going to happen. When people run out of energy at two or three o'clock in the afternoon, everybody thinks that's normal. It's not normal. I mean, I don't drink coffee, I don't take Red Bull drinks in the afternoon. And yet I have enough energy to make it through a day and sleep through the night. It's really about nutrition.

Patricia: Well, any tips for our listener about nutrition before we round up this program?

Amy: You know, your fist is a serving size. You're supposed to get seven to ten in a day. Really 7 to 13, but I say average 10. No one's doing it. Are you getting 70 in, in a week? Are you getting 280 raw servings in, in a month? Most people aren't. And yet when you start to put just raw good food into your body, you feel it. Your body thanks you for it.

Patricia: I have a son who is a raw foodist, and he is married to a raw foodist, and they are very clear on the benefits that they receive from eating healthy raw food.

Amy: Yeah. I mean, you put dead in, you get dead out. You can't plant a cooked bean and have it grow more beans. You've got to put a raw bean in, and then you get lots of beans. Even if it's just in your pantry or in a plastic bag, we do it at the preschool, put it in a plastic bag hanging on the windowsill, give it a little bit of water and it grows. It can't help but grow. We would thrive if we had more whole food nutrition in. Yeah. Maybe that'll be my next book, Pat.

Patricia: I think that there are a large number of people interested in that topic, and probably not very many resources. I remember when my son told me that he was a raw foodist, I immediately said, "All right, well, let me find raw food cookbooks." And some of them were so difficult to interpret or required equipment that I had no idea how to use, they were drying racks. And I did buy a spiralizer, recently, and discovered the pleasure of turning your vegetables into these curlicue things that are fun to eat and enjoy. It is a different type of handling food. I wouldn't say cooking food because it's not cooking. There's no heat

applied. It could be dried food, but not necessarily using heat to cook food.

Amy: Right. I think there's a certain temperature it can reach for people that are truly raw so that you're not eating cold things all the time. I mean that's the vision people get, if it's raw, it has to be cold. No. It can be room temperature. It can be up to, I think, it's 165 or 175 degrees so that you get some, you know, the winter time, you don't want to be sitting there eating cold noodles. You might want warm noodle. But yeah, there's this like temperature cut off. Because you're just killing the nutrients in it anyway, the phytonutrients inside the food, so you don't want to get it up too high anyhow.

Patricia: And you develop a taste for raw broccoli and raw beans from food that you might not even think of as ones that you can eat raw.

Amy: Most definitely, most definitely. And the crunch of it, if you're a crunchy, salty kind of person, people don't realize you're eating crunchy broccoli and crunchy cauliflower and carrots. And it gives you that satiation that you're trying to get from pretzels or popcorn or potato chips. You're trying to compare them, just chew on them. You want the salty, throw in an olive.

Patricia: True. How can our listeners find out more about you, Amy, and the services you offer, and about your book?

Amy: Yeah, Holistic Healing With Amy is my website. So Holistic Healing With Amy. And I offer other services, too, how to clear your mindset, nutritional products. You can meet with me one on one, I love to chit chat, obviously, and get to the nitty gritty of what really might be bothering, harming, or helping you. Instagram, Facebook.

Patricia: Sounds perfect. Thank you so much, Amy. It was fun chatting with you. I think we could have gone on for hours.

Amy: Fellow nurses, it's always that way. We think alike. I mean, I remember going to nursing school, they'd hold up that one sheet and you had to figure out what was going on, 30 seconds they take it away. And I think we just, as nurses, think differently. We're always triaging situations.

Patricia: I know. And it's a skill that always stays in the background. I remember, several years ago, I was on a flight and I realized that I was asking questions of a man next to me, which was just born out of curiosity. And he latched on to what he thought would be my interest in him. And he said, "You know what? I'm going to tell you all about my divorce and my affair, because I know I'll never see you again." And he did, Amy. I heard all of the details. And at that point, I just wanted to pick up my book and say, "Please, I just want to read. I don't want to know all about your affair, and your marriage, and your divorce." But we are so good at asking questions of people and eliciting those details.

Amy: And being listeners, yes. Asking questions and being listeners. And knowing there's some half-truths to some things people say. You know that official question, how many beers do you drink a week, and they're in for alcoholism? And they say, "Two." And you're like, "Yeah, I'm not sure it's two."

Patricia: My answer to that is I've heard doctors say, "Yeah, but it's two beers, but they're there in these steins that are about 18 inches high. But there's only two of them."

Amy: That's a good point, too. Yeah.

Patricia: Well, thank you, Amy. And thank you to you, the listener, who is watching this on our YouTube channel, which is Pat Iyer, or coming to our website, patiyer.com, to be able to listen to our podcasts. They're carried on all of the audio platforms. Be sure to come to patiyer.com and pick up some free reports about editing, writing, proofreading. I've got a variety of reports on patiyer.com. And tune in next week when we have a new guest, new topic, new book. Thank you so much.

Amy: Thank you, Pat.

Patricia: This is Pat Iyer with Writing to Get Business. And I have just finished an interview with Amy. And we've talked about many, many, many topics. We talked about a chapter that she added to a compilation book. Amy, can you share some of the highlights from your perspective of this podcast?

Amy: Well, first, I have to say, Pat, we covered a lot of material. So if anybody wants to go back and listen to nursing, book writing, concussions, all kinds of stuff. But most importantly, I hope they walk away with the thought of I was somebody that never wanted to write and felt the cathartic outcome of writing, and have the desire to do it again now. And I hope that that comes through for them.

Patricia: That's such a great point, Amy, because in my podcasts, I focus on the process of writing and the type of writing. But you're stressing something that I want our listeners to remember, is that there can be a catharsis. You are sharing what you know, and it's also helping you to be able to put it down on paper.

Amy: And in a subtle way, it gives you that legacy. I now have a little bit of a legacy in where I've been, what I've gone through, and that's important as well.

Patricia: And it's one of the main reasons why people write books, is they want to be sure they've got a legacy.

Amy: I wasn't aware of that, Pat. Thanks for that little bit. I thought it was only me. No, I'm kidding. But I do feel that. I do feel that way. My kids have read the story, and they see it from my perspective, and that's awesome, too.

Patricia: Well, thank you so much. And be sure to check out Amy's podcast to get a perspective on a compilation book and some of the outcomes that it can bring, as well as two nurses sharing some very funny war stories that you'll enjoy. Thank you.

Amy: Thanks.