

NARRATIVE ESSAYS

Narrative essays are quite different from other forms of academic writing and frankly they are much more subjective, so even though they are only 1000 words in length, they can be challenging to write.

My intention here is to explain the criteria by which we evaluate narrative essays, and help guide you in understanding what makes for a compelling, effective narrative essay.

First, what a narrative essay is not and more importantly what it is.

Perhaps the most prevalent misconception is that the narrative essay is an opinion piece. A narrative essay is not an opinion piece. No matter how insightful your opinion is on a particular topic, this is not the place for that opinion. Some essays we get have a brief clinical narrative at the start, and then go on for 3 or 4 pages to expound on the injustice or wrongness in the healthcare system that needs to be corrected. Nine times out of 10, the editors agree with the conclusions of the author. But the narrative essay is not an outlet for opinions, and this essay will be returned to the author.

What the narrative essay should do is tell a story. Often this means it will be written in the first person, although not necessarily. In fact, most narrative essays describe the intersection of the patient's or family member's or learner's story and the narrator's story.

Obviously, this story must be relevant to family physicians and educators.

Learning is also important. The point of the essay is not didactic – i.e., all family doctors should do this or that – but rather personal insight through deep reflection. How did this story change the narrator? How did it confirm or challenge her deeply held beliefs? How did it affect the way she practices medicine or teaches? Probably one of the biggest shortcomings of many submissions is that the patient is described vividly and empathically, but how the patient affected the narrator is almost wholly absent.

Another consequence of deep reflection is that the story the essay tells should be emotionally compelling – it should involve the reader and make the reader care about the outcome. This means we must see the patient, but we must also see the physician. Hemingway quote: There is nothing to writing. All you have to do is sit down at the typewriter and bleed. We hope you will be willing to bleed a little.

Many of the narrative essays make very similar points – the doctor-patient relationship is still important; caring and compassion still matter; not making assumptions about the patient and understanding the patient in the context of her life lead to good medicine. This is not a bad thing, but if the point is a familiar one, then it is important to try to make it in new and interesting ways. An intriguing first sentence that pulls the reader in is always helpful: “When Mrs. P died, I decided to leave medicine.”

Finally, in terms of style, because you don't have too many words, you should have a clear idea of the main point of theme of your story, what you're trying to convey. Details in writing usually bring a

story to life, but if the details are tangential to where the story is heading they can be simply distracting.