

## MAP OF THE TERRITORY DAVID HENDERSON COMMENTS

**COMMENTS TO EDITOR:** John, I can see why you sent this to me, because it certainly is an important topic; but after careful consideration my recommendation is to reject and resubmit. This essay is all over the place - it is part anecdote, part research recitation, part personal wrestling (that is poetic but not sufficiently thought through), and part polemic. It is repetitive and unclear in places as well. Somewhere in here there is a powerful story, which would be an honor to publish in Family Medicine. Let's encourage this author to write it! I make some specific recommendations below.

**COMMENTS TO AUTHOR:** Dear Dr. , Thank you for this moving essay. It is clear you have a powerful personal story to tell; as well as important insights about how to understand and address issues confronting URM students.

Unfortunately in its present form this piece is not appropriate for the narrative essay column. The narrative essays we publish share a couple of essential features. One is that they tell a story. The second is that they help us understand the arc of the author's evolution or growth. There are pieces of your story here - your experience as a boarding school student; the ride home to the projects with your fellow medical student. There are also hints of others' stories, notably URM students you have mentored. What is missing however is a single compelling narrative that engages the reader and brings to life the disjunction and alienation of the life you have lived in two worlds.

Further, for a family medicine journal, a story more focused on what it was like for you to become a physician - or what it continues to be like for you to be a Black physician in a still largely white profession - might speak to our readership most forcefully.

Some specific suggestions:

- 1) An abstract is not needed for a narrative essay, so this can be deleted.
- 2) Similarly, narrative essays do not normally have footnotes; and the style of writing that requires footnotes is not well-suited to the narrative essay format.
- 3) The first paragraph could probably go as well.
- 4) As above, perhaps the central story could focus more on your experiences as a medical student; or better yet, as a physician. I believe I understand the symbolic experience of suddenly becoming a boarder at X, but consider whether this experience should be so central. You could still include it as a reference point, and the anecdote about the ivy is wonderful (and illuminating). Think about bringing issues of authenticity, contradictions, compartmentalization, emotional isolation more into the present with a story rich in narrative detail.
- 5) Maybe there is another brief story to emerge from your attentiveness and care of contemporary URM students. You have many brilliant insights, but in a narrative essay they need to be shown to the reader, rather than simply told.
- 6) Your humility (about voice for one thing) is beautiful. Please retain this position of "not-knowing," not having all the answers. The quote from Zora Neale Hurston is perfect.
- 7) The essay has some wonderful metaphors, such as your interpretation of Korzybski's famous insight that "the map is not the territory"; and your awareness of tonality, song,

**and singing as an expression of identity. These could use fuller development. The line "Standing up to the light will make even one's shadow weary" is beautiful. Don't lose this.**

**We hope you will consider rewriting this piece and resubmitting. Tell us a story rich in particularity and detail that helps us understand what becoming and being a physician has been like for you. Help show us where you have struggled and what you have learned.**