

## **Narratives – The Stories of IMGs**

The Educational Commission for Foreign Medical Graduates (ECFMG) is continuing to develop resources to assist newly arriving IMGs in their acculturation to the American medical and education systems and to working and living in American culture.

We previously asked the IMG Section of the AMA to assist us in recruiting advisors to serve in our IMG Advisors Network (IAN). We received a positive response and the program is now up and running with approximately 120 advisors. We would still be happy to increase those numbers and anyone interested can go to the ECFMG web site ([www.ecfm.org](http://www.ecfm.org)) and click on the IMG Advisor Network link to learn more or to become an advisor.

We are now approaching the IMG Section for assistance in yet another area. As we have been working to develop appropriate and useful resources, it is becoming more obvious that acculturation is actually a two-way street. That is, although it is essential that IMGs learn about the medical and educational systems and the medical and general cultures into which they are entering, it is also essential that those who will be working with them – program directors, faculty, nurses, administrative staff and others – understand not only “where” IMGs come from in the broadest sense, but also the journeys and challenges they have faced and overcome in order to gain entry into US training programs.

The stories of these journeys and challenges, these narratives, can be extremely powerful in helping those of us in the US Healthcare and medical education systems to really appreciate the IMGs’ accomplishments and hopefully inspire us to make that additional effort to ease their entry into their new programs and lives. We are therefore writing to you to invite you to compose and submit your narrative, the story of your journey from your home country through to successful entry and settling into the GME program you are now in or have completed. As a result of our making your narratives available, all IMGs would benefit by being met by better informed and more sympathetic people in the programs they enter.

We must acknowledge our colleagues at the Association of Faculties of Medicine of Canada for this idea which they have incorporated into a faculty development program for teachers of IMGs. To see an example of one of the narratives that they use click on or go to the web address listed below but before you do, and so you are not overwhelmed, please note that this is an extremely comprehensive narrative which was extensively edited by their staff. Also, much of it relates to regulations and processes that are peculiar to the Canadian system. And although your narrative could be as long as you want, it need not be this long. So have a look (you don’t need to read it all).

[http://www.medicine.mcgill.ca/facdev\\_img/OTI\\_10b\\_en.htm](http://www.medicine.mcgill.ca/facdev_img/OTI_10b_en.htm)

More important than long or short, your narrative should try to capture the experience of what you had to do and accomplish to get where you are today. This will not only inform and educate staff in American programs but also provide some inspiration and guidance to IMGs just beginning or in the process of applying for ECFMG certification and entry into US programs. It would be optional if you wanted to add some specific pieces of general advice for IMGs as appears at the end of the above narrative.

In addition to general narratives, we would also be very interested in receiving reports of “critical incidents.” These would have been incidents in which you encountered something about your new environment which was a revelation to you and had a significant or dramatic impact on your learning or coming to understand. They could also be in the opposite direction, that is, an incident where your colleagues, staff or patients had a unique experience whereby they learned something about you and your culture. Or, they could be instances where there was a clash of culture, understandings or expectations, hopefully with some resolution.

Critical incidents would be particularly valuable in developing specific teaching points both for faculty and residents as well as providing material that we might be able to use to develop simulation scenarios, videotapes and other resources.

We would need to do some editing on your submissions but would return them to you for approval before using them in any way. You would also have the option of being identified as the contributor or remaining anonymous.

Since all of our efforts on the acculturation program are a work in progress, there is no hard and fast deadline for submissions. In addition, narratives could be submitted by IMGs other than AMA Section members so feel free to share this invitation with any of your IMG colleagues who might be interested in contributing.

You can submit narratives, critical incidents or comments or questions about these resources to [IANadviser@ecfm.org](mailto:IANadviser@ecfm.org)

The narratives and critical incidents that only you can provide us will be a real contribution to developing resources that will not only ease the process of acculturation for newly arriving IMGs but will also help our colleagues in graduate medical education better understand and respect their journeys.

Thank you!

Gerald Whelan, MD  
Director, IMG Acculturation Programs  
ECFMG