Twelve years ago, Kamalika Roy, MD, made the journey from India to continue her medical training in the U.S. as an international medical graduate (IMG). She has since completed residency and fellowship training, her master’s in clinical research, and continued as a faculty in the Department of Psychiatry.

Dr. Roy—an assistant professor of psychiatry at Oregon Health & Science University—chairs the AMA International Medical Graduate Section (AMA-IMGS) and recently offered insights on some of the challenges faced by those who trained internationally aiming to practice in the U.S.

The Q&A was done as part of IMG Recognition Week, an annual event celebrating the contributions international medical graduates make to medicine. For those hoping to learn more about succeeding as an IMG, the International Medical Graduates Toolkit is a valuable resource.

Find out how IMGs have changed the face of American medicine.

**AMA:** What was your journey as an IMG like?

**Dr. Roy:** Coming here to this country, I was supported by a lot of people. A lot of my teachers and mentors helped me to get into residency, and then I trained in residency and fellowship.

Initially, when I first came, I was a research assistant at New York University Langone Medical Center. I did some research into mild cognitive impairment in Alzheimer’s Disease Center. And then I did my psychiatric residency in Wayne State University—Detroit, Michigan. After that, I was a consultation liaison psychiatric fellowship at the University of Michigan, Ann Arbor.
AMA: What are some of the major challenges of being an IMG?

Dr. Roy: Overall, I would say there are quite a few limitations of being an IMG here in this country. The first limitation is about the immigration status. If you are from a country like India, then the IMGs face a different kind of challenge because of their immigration status, because of the unending backlog that this country continues to have for decades for Indian citizens.

It's also a challenge to manage your visa on an ongoing basis being in the backlog. Giving you your legal immigration status by you renewing your visa every year, or every few years, as needed by the U.S. Citizenship and Immigration Services. I faced with some challenges with renewing my visa and last year, in 2020, amidst the pandemic, which exponentially worsened the renewal process and essentially took away the option of visa processing at the embassies.

AMA: What are the barriers IMGs face to success in the clinical realm?

Dr. Roy: One of them is that you encounter implicit bias, which sometimes restricts their options for growth, for a lot of IMGs. There are ways of dealing with that implicit bias. We all know that it's there; it's unconscious.

There's not much objective data about the impact of this bias, or official recognition of this bias, but as it is there. IMGs usually work uphill against these kinds of biases throughout their career, in this country.
At the same time, I would like to say, it's not all about implicit bias. There are a lot of people who are very, very supportive in the pursuit of medicine and the pursuit of scholarly activities.

When it comes to international medical graduates, the experience was a good experience for me and that's why I'm here. That's why I decided to join the American Medical Association—to help others in their efforts of moving on in their career advancement.

**AMA:** Why is it beneficial for IMGs to be involved in organized medicine?

**Dr. Roy:** When I reach out to IMGs in my forums, I try to encourage them to be part of societies, specialty societies, state societies, and national societies such as the AMA. Getting involved in organized medicine and being part of a professional society not only helps develop their identity, but also actually opens a lot of doors of opportunities, direct and indirect.

**AMA:** What is a misconception physicians and the public at large may have about IMGs?

**Dr. Roy:** When IMGs come to this country, they are basically at the mercy of the immigration system to do anything. For example, if I fall sick today. Let's say I am diagnosed with some kind of chronic disorder, which makes me take an extended and indefinite time off from work. I will not be able to do that—just because I'm on a specific type of visa.

Our physical existence in this country is tied with our employment. And altruistic physicians do not know about that. If we do not work, we cannot stay in this country. So that's one thing which makes it an existential struggle for international medical graduates, because if you are not able to work, then you essentially need to pause your and your family’s physical existence in this country.

One other thing is many physicians believe that IMGs don't have a good understanding of American legal system or American society. That's not always true, because many international medical graduates also are highly involved in organized medicine or other activities, where they could be significantly exposed and acclimatized to these nuances.

**AMA:** What advice would you offer for IMGs looking to practice in the U.S.?

**Dr. Roy:** First and foremost, this country is the country of opportunity. If one, works hard, if one works eagerly for something, if one knows what they really want in life, they should totally go for it.

And they should not lose all of their patience in the process of getting into residency. Sometimes international medical graduates may not match for the first time into a residency position, but they should not give up on the hope of matching. They should continue to improve their profile by volunteering with other academic physicians, identifying and analyzing the areas of improvement and working with one or more mentors.
International medical graduates must remember that here in this country that are more physicians that would help them than there would be instances where implicit biases and all other challenges would come their way.