

# International medical graduates assessment experiences and performance project

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Final Report 2025



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## Acknowledgement of country

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The Australian Medical Council acknowledges Aboriginal, Torres Strait Islander Peoples and Māori Peoples as the Traditional Custodians of the lands the AMC works upon.

We pay respects to Elders past, present and emerging and acknowledge the ongoing contributions that Indigenous Peoples make to all communities. We acknowledge the government policies and practices that impact on the health and wellbeing of Indigenous Peoples and commit to working together to support healing and positive health outcomes.

The AMC is committed to improving outcomes for Aboriginal, Torres Strait Islander and Māori Peoples through its assessment and accreditation processes including equitable access to health services for First Nations Peoples.

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## About the images

*The images for the personas have been developed using AI technologies. The personas draw on a range of evidence-based themes and are representative of the lived experiences of international medical graduates. To comply with research ethics requirements, we have created images for each person to capture the human element rather than using real photos of individuals.*

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# 01 Introduction

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This final report provides a summary of the AMC's International medical graduate assessment experiences and performance project 2022 - 2025.

The research uses journey mapping and persona development to improve assessment and employment pathways for international medical graduates. It focuses on safe and quality care for rural, remote and underserved metropolitan communities.

Our research aim was to gain a deep understanding of the challenges and solutions that international medical graduates experience in terms of migration, assessment and registration.

Central to our purpose was to give voice to international medical graduates who have generously shared their experiences with us.

We also draw on the insights of a wide group of professionals who support workforce systems to assess, register and employ international medical graduates. These perspectives have shaped our work.

We sought to build partnerships across the health ecosystem to bring about positive change.

Our work aligns with the implementation of broad policy reforms including the **National Medical Workforce Strategy** and **The Independent review of overseas health practitioner regulatory settings**, led by Robyn Kruk, AO.

This project has Monash University Human Research Ethics Committee (HREC) approval #37561.



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## 02 About the AMC

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The Australian Medical Council (AMC) is a national standards body for medical education, training, and assessment.

Its purpose is to ensure that the standards of education, training and assessment of the medical profession promote and protect the health of the Australian community.

The AMC sets the standard for and manages the national assessment of international medical graduates who are seeking general registration as a medical practitioner in Australia. It contributed to the development of all the current Australian assessment pathways for international medical graduates. The AMC also undertakes research and analysis to support the review and improvement of assessment pathways so they remain valid, reliable, fair and efficient.

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## 03 International medical graduate pathways — a shared space

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In Australia, international medical graduate assessment and pathways are a shared space with many stakeholders. The Commonwealth Government and departments, Australian Medical Council, Australian Health Practitioner Regulation Agency (Ahpra), Medical Board of Australia, Prevocational Councils, Specialist Medical Colleges, bridging course providers, recruitment agencies and most importantly International medical graduates themselves all have a stake in international medical graduate pathways and a role in identifying opportunities for improvement.

This means that much of the activity to progress improvement and evaluate success needs to be undertaken in partnership.

## 04 Why this work matters

International medical graduates make a significant contribution to many OECD countries including Australia. They make up more than 30 percent of the Australian medical workforce, represent more than 50 percent of the General Practice workforce, and are the mainstay of rural and remote health communities and underserved metropolitan communities.

Australia, along with other OECD countries, experience barriers to international medical graduate assessment with individual and system level impacts. Pathways for international medical graduates are complex, at times bureaucratic, time consuming, uncertain, expensive, and stressful.

The workforce issue requires urgent attention, and the international medical graduate journey needs to be simplified.



31%

of doctors practising in Australia did their medical training overseas.



56%

of doctors working in general practice did their medical training overseas.

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## 05 Mapping Journeys and Story Telling

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Journey mapping is a method used to map the key milestones, the pain-points and the enablers of a particular process. It has been used in marketing and customer product development, however, it has not been widely used in medical education.

Journey maps are often combined with persona development. **Personas** are useful because they draw on evidence from interviews, surveys and focus groups to create compelling stories which explore the lived experience of a specific user group.

These methods inform human-centric design and user-centred strategic planning because they allow us to see the challenges and proposed solutions from the perspective of those most closely impacted. They democratise change and privilege the voice and perspectives of the users of a process and system. They are based on the premise that users know best the challenges they experience and can provide insight into the solutions that will work for them on the ground.

The 15 personas challenge notions of the homogeneity of international medical graduates. They show the diversity of international medical graduate experiences in terms of age ranges, pathways, countries of origin, education and work experiences, family and life circumstances, pain-points and enablers.

Our journey maps are structured as current and future state maps.

The **current state journey map** focuses on exploring the challenges and emotions of international medical graduates as they navigate pathways to immigration, assessment, registration and working as doctors.

The **future state journey map** revisits all the milestones shown in the current state and focuses on exploring individual and system level solutions to challenges.

Our journey maps and personas are evidence-based. They draw on a survey with more than 4000 respondents; interviews; and 10 focus groups with health services and international medical graduates.

# The Personas

Figure 1


The 15 personas challenge notions of the homogeneity of international medical graduates.

Learn More





**Figure 2**  
Standard Pathway Persona Card



## Divya

**PERSONA DESCRIPTION**

Divya, 26, female, is planning on getting married. Country of training – India. She recently graduated from a prestigious Indian medical school. Her English is very good. She wants a better life, and is coming to Australia for love to reunite with an Australian partner (employed as a business analyst in a corporate IT company and lives in metro Brisbane) whom she met while he was on a work trip in India. They aim to start a family in Australia. Divya is planning to do the AMC clinical exam online as the next step, ideally while still in India. She has just learnt that the moratorium is 10 years and is wondering how they will manage this as newly-weds – they may need to live separately as her partner's career is not transferable to a rural setting. She is finding it complicated to understand requirements and would like to have a mentor to provide more guidance on how to navigate the system. She would also like training resources and further guidance to support her examination preparation.

<b>AGE</b>	<b>GENDER</b>	<b>RELATIONSHIP STATUS</b>
26 Years of Age	Female	Engaged to an Australian

**COUNTRY OF TRAINING**  
India

**STAGE OF TRAINING**  
Completed Medical Degree.

**PATHWAY**

STANDARD PATHWAY

EXAMS

**MOTIVATIONS TO COME TO AUSTRALIA**  
For love and to reunite with her Australian partner.

**AUSTRALIAN WORK LOCATION**  
Still overseas and is unsure about work location and whether she is exempt from moratorium requirements.

**STRENGTHS**  
Wants to start a new life in Australia and contribute to the Australian community.

**CHALLENGES**  
Completing assessments and understanding legislative requirements.

**ASPIRATIONS**  
Reunite with her partner, start a family and continue her medical career.

**ENABLERS**  
More clarity about moratorium requirements; and would like to have a mentor to provide more guidance on how to navigate the system. She would also like training resources and further guidance to support her examination preparation.

**Figure 3**  
Competent Authority Pathway Persona Card



## Rohan

**PERSONA DESCRIPTION**

Rohan, 45, male, married. Country of Training - UK, family background Anglo-Indian - very experienced. He had run an emergency department in regional UK. On immigrating to Australia, he was accepted for provisional registration through the competent authority pathway and then was accepted as comparable to an Australian trained emergency physician through the specialist pathway. He initially secured employment as an emergency physician in an outer-metro area in Australia. Rohan has general registration, and specialist registration as an emergency medicine physician. He commutes to work from the Eastern Suburbs, Sydney. He came to Australia to seek a better lifestyle and expected to continue his career seamlessly in a metropolitan area. His partner found a job in a metro area – she experienced some challenges but they have been resolved. Rohan has encountered racism and inferences from patients and Australian colleagues that he had trained in India rather than the UK. He would like to see a better culture in medicine.

<b>AGE</b>	<b>GENDER</b>	<b>RELATIONSHIP STATUS</b>
45 Years of Age	Male	Married

**COUNTRY OF TRAINING**  
United Kingdom

**STAGE OF TRAINING**  
Worked as a Director of an Emergency Department in regional UK.

**PATHWAY**

COMPETENT AUTHORITY PATHWAY

**MOTIVATIONS TO COME TO AUSTRALIA**  
To seek a better lifestyle with expectations of continuing his life seamlessly in a metropolitan area.

**AUSTRALIAN WORK LOCATION**  
Outer-metro area in Sydney.


**STRENGTHS**  
Years of experience working in emergency medicine.

**CHALLENGES**  
Racism and challenge of working far from where he lives.

**ASPIRATIONS**  
To work closer to where he lives.

**ENABLERS**  
He would like to see a better culture in medicine.

**Figure 4**  
Specialist Pathway Persona Card



## Hassan

**PERSONA DESCRIPTION**

Hassan, 50, male, married and partner also a doctor. Country of training – India. He completed training in cardiology in India and studies in Public health in Australia. He had applied for specialist recognition in cardiology but was deemed non-comparable. He currently works in a public health role at NSW Health in a large rural centre. His wife and children are living in Sydney. His wife struggled to find employment as a doctor – she also trained as a cardiologist. She applied for 100+ positions and is currently working in a weight loss clinic. She also ran into recency of practice issues and had to return to India to gain work experience because she could not secure employment. The long-term separation is putting a strain on the marriage and family life. Both Hassan and his wife are struggling with their mental health due to the immigration challenges and their identity of not being recognised in their trained medical specialty. They are on a working visa with lots of associated costs – schooling of children, healthcare, etc. They would like to see more opportunities for specialist recognition, better consideration of families and faster visa processing.

<b>AGE</b>	<b>GENDER</b>	<b>RELATIONSHIP STATUS</b>
50 Years of Age	Male	Married to a medical doctor

**COUNTRY OF TRAINING**  
India

**STAGE OF TRAINING**  
Cardiologist.

**PATHWAY**  
**SPECIALIST PATHWAY**

**MOTIVATIONS TO COME TO AUSTRALIA**  
Both Hassan and his wife were motivated to work in Australia as cardiologists and seek a better life.

**AUSTRALIAN WORK LOCATION**  
He currently works in a public health role at NSW Health in a large rural centre. His wife and children live in Sydney.

**STRENGTHS**  
Brings strong clinical skills to his work in Public Health. Showed adaptability in his career and willingness to learn new skills.

**CHALLENGES**  
Neither he nor his wife have been able to secure specialist recognition as cardiologists. They have lived separately which has put pressure on their relationship and family life. They are experiencing mental health issues because of the immigration challenges and to their identity of not being recognised in their trained medical specialty.

**ASPIRATIONS**  
To live together as a family in a metro area and for both he and his wife to work as cardiologists.

**ENABLERS**  
They would like to see more opportunities for specialist recognition, better consideration of families and faster visa processing.

**Figure 5**  
Short-Term Training in Medical Specialist Pathway Persona Card



## Latifa

**PERSONA DESCRIPTION**

Latifa, 33, female is in her final year of specialist training in Obstetrics and Gynaecology in Papua New Guinea. She is married with two small children. Latifa applied for a training position in Australia through the short-term training in a medical specialist pathway. Latifa travelled alone to Australia to keep costs down. Her mother is caring for her children. She is now nearing completion of a placement as a registrar for 12 months position in Obstetrics and Gynaecology in a Metropolitan hospital in the outer suburbs of Adelaide, South Australia. Latifa recognises that she will not gain specific qualifications or certification from her training experience in Australia. She is planning to return to Papua New Guinea in the New Year to complete the final subject in Obstetrics and Gynaecology and then start her career as a consultant in her home country. She learnt a lot from her experience in Australia. It provided her with advanced clinical skills in obstetrics and gynaecology under supervision. Latifa would like to stay in Adelaide for an extended period and to bring her family to stay but recognises extensions to short term training periods beyond one year are only approved in exceptional circumstances. She would like to see more flexibility and easier paths to extensions for those on short-term training in medical specialist pathways and options for more documentation to be provided by supervisors on training completed so international medical graduates have records for their CVs and future job applications in their home countries.

<b>AGE</b>	<b>GENDER</b>	<b>RELATIONSHIP STATUS</b>
33 Years of Age	Female	Married with children

**COUNTRY OF TRAINING**  
Papua New Guinea

**STAGE OF TRAINING**  
Final year of training in obstetrics and gynaecology

**PATHWAY**  
**SHORT-TERM TRAINING IN MEDICAL SPECIALIST PATHWAY**

**MOTIVATIONS TO COME TO AUSTRALIA**  
To gain international experience as a registrar in Australia

**AUSTRALIAN WORK LOCATION**  
Adelaide, South Australia

**STRENGTHS**  
Has gained excellent skills working in rural and remote health in Papua New Guinea

**CHALLENGES**  
Understanding the Australian health system and working in a large health facility

**ASPIRATIONS**  
Complete her training as a registrar in Australia and return to Papua New Guinea to complete her training in Obstetrics and Gynaecology

**ENABLERS**  
More flexibility and easier paths to extensions for those on short-term training in medical specialist pathways and more documentation on training outcomes



# The Journey Maps

Figure 6

Section graphic from the International medical graduates in Australia current state journey map.

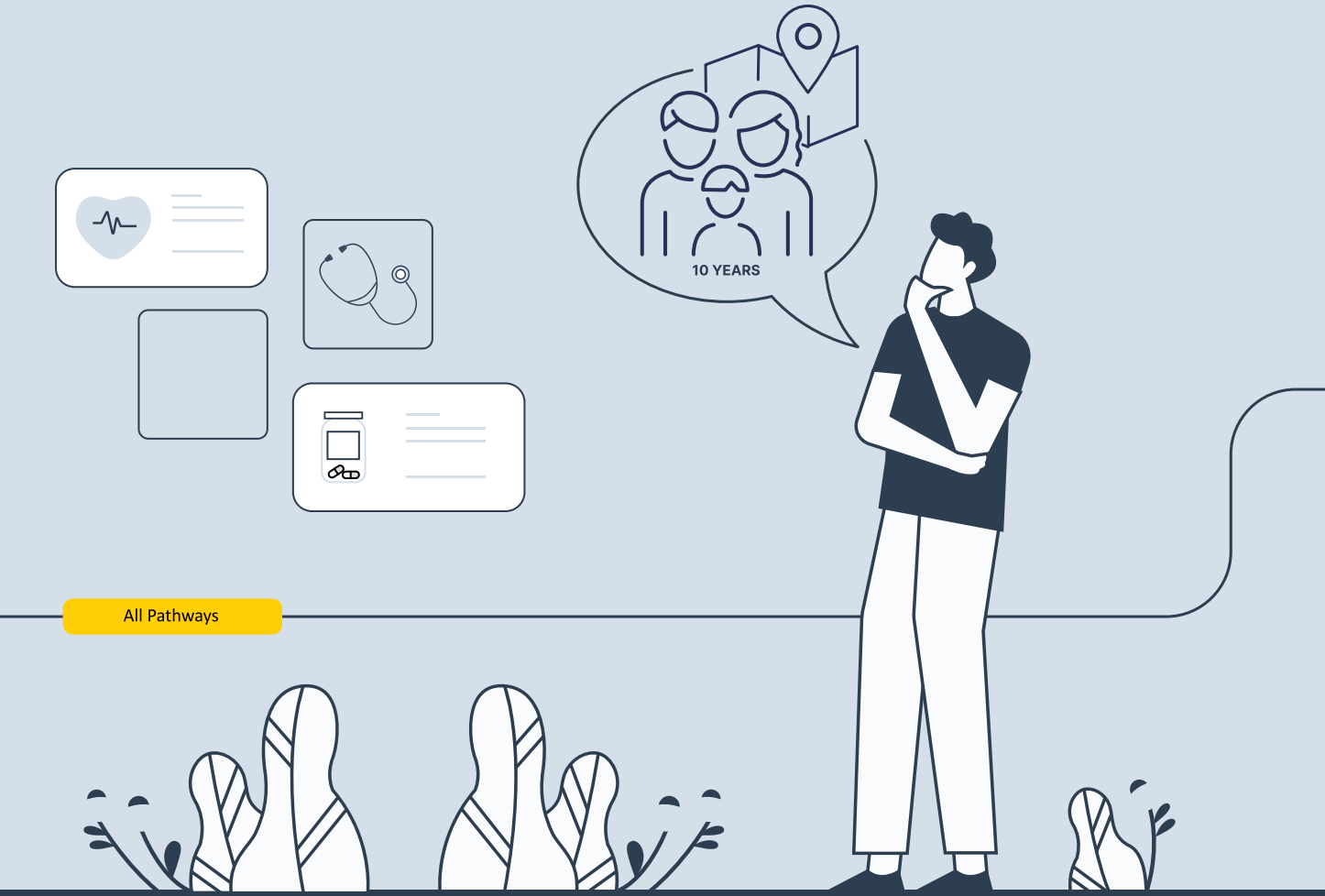
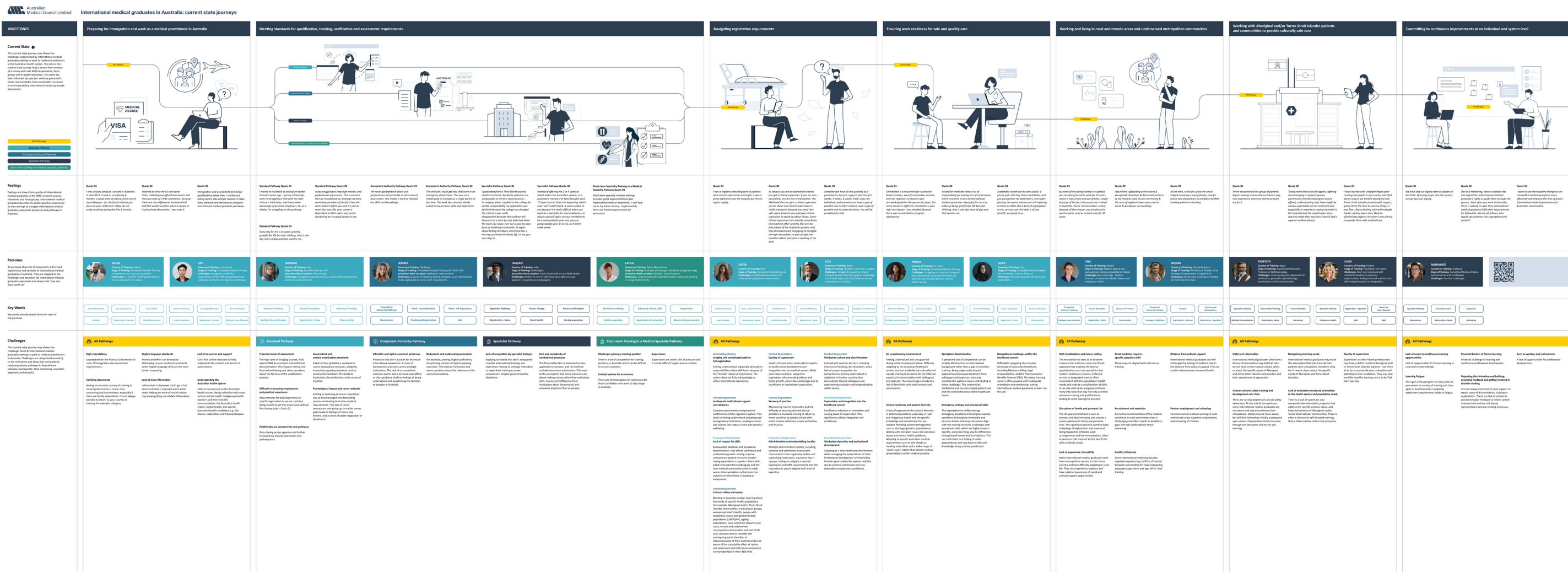


Figure 7

International medical graduates in Australia current state journey map.

Explore the Journey Maps



[Explore the Journey Maps](#)



## Interactive Journey Maps

As part of the consultation process for our project, we gained feedback that the journey maps provided valuable ways in which to learn of the lived experience of international medical graduates as they navigated assessment and registration pathways in Australia. Some stakeholders provided feedback that they wanted more interactive ways of navigating the content. We listened to this feedback and with the help of our design partners at What Works Global, we created interactive journey maps.

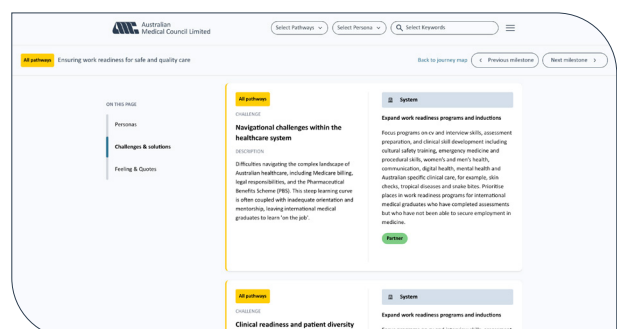
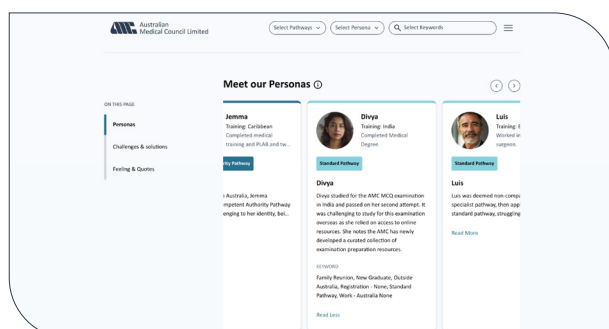
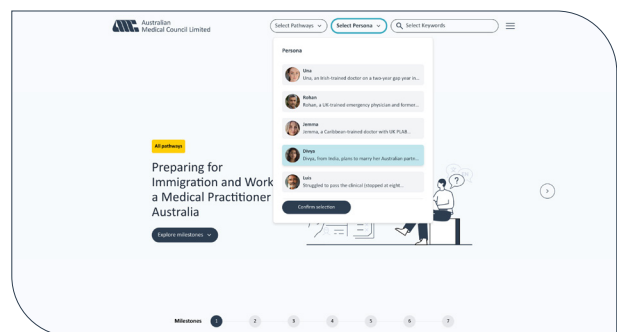
New features of these interactive journey maps include:

- The ability to search via persona, pathway and key words
- Side-by-side mapping of the challenges and solutions with tagging as to whether the solutions are lead, partner or support actions for stakeholders to undertake and alignment with Kruk recommendations
- Visually appealing animations
- Feelings and quotes for each milestone
- Mapping of each milestone to the personas.

Figure 9

Pages from the International medical graduates interactive journey maps.

Explore the Interactive Journey Maps



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## 06 The value and use of the journey map and persona research

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Provide evidence-based insights into the individual and system solutions needed to resolve some of the long-standing challenges that international medical graduates face.



Bring a human and strength-based perspective and highlight the contributions of international medical graduates despite the challenges.



Point to partnerships that can be formed to implement strategies that have shared responsibilities across the sector.



International medical graduates can see that they are not alone, and that there are system enablers for change.



Help to prioritise challenges and solutions.



Help stakeholders to align processes.



Provide a holistic end-to-end analysis of challenges and possible solutions.



# 07 Research Report

We have also prepared reports which summarise our research findings:

- a **survey report** which provides a detailed summary of the survey findings.
- 24 high impact changes that form the basis of our **Clearing The Way report**.

Read our reports here.



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## 08 Our Findings

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International medical graduates shared a number of challenges, which they experienced in navigating their path through the Australian immigration, assessment, registration and employment systems. They also had great insight into the enablers which could improve their experience and system outcomes.

### Challenges

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Key Challenges international medical graduate's face:



#### CHALLENGE 01

**Preparation** involves cultural adjustments, a significant financial burden and the learning of new skills.



#### CHALLENGE 02

**Document management** can be complex (impossible) for certain groups e.g. refugees.





**CHALLENGE 03**

**Recency of practice** can impact registration and the opportunity to work as a medical practitioner.



**CHALLENGE 04**

It can be difficult to access **supervision** which impacts progression and employment.



**CHALLENGE 05**

Many international medical graduates report **discrimination and exploitation**. This impacts their wellbeing, mental health, sense of belonging, identity and financial position.

**CHALLENGE 06**

Many international medical graduates are subject to a **ten-year moratorium** to work in designated areas. This can impact family life e.g. children's schooling and partner employment — up to 50 percent of survey respondents stated that they had chosen to live separately for significant periods due to moratorium requirements.



**CHALLENGE 07**

Many international medical graduates are unfamiliar with the history and specific needs of **Aboriginal and/or Torres Strait Islander** patients and communities.

**CHALLENGE 08**

International medical graduates report challenges in **continuous improvement** at an individual and system level.

## Enablers

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The Enablers are structured in five themes as set out below:



**Theme 1**  
Socio-Cultural Support and Induction



**Theme 2**  
Communication and Coordination



**Theme 3**  
Design of international medical graduates  
assessments and pathways



**Theme 4**  
Education, Training and Support



**Theme 5**  
Further Research

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## 09 Co-Design Methods

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This work has been led by a Project Advisory Group that includes a wide range of stakeholders of international medical graduate assessment including: international medical graduates; health consumer and community members; the Council of Presidents of Medical Colleges; Post Graduate Medical Education Councils; executive staff of health services including general practice across a mix of locations (including metropolitan, outer metropolitan, rural and regional settings); the Medical Board of Australia (MBA); the Australian Health Practitioner Regulation Agency (Ahpra); the Australian Medical Association (AMA); AMC committees and staff; Aboriginal and/or Torres Strait Islander stakeholders; government agencies, examiners and supervisors, Workplace-Based Assessment providers; and bridging course providers.

We have conducted extensive consultation with 110 stakeholder organisations of international medical graduate assessment and registration, and more than 100 international medical graduates. This process yielded valuable information to further refine the personas and journey maps.





**Figure 10**  
Project Advisory Group members providing  
feedback on the personas and journey maps.





**Figure 11**  
Project Advisory Group members providing  
feedback on the personas and journey maps.



## What you said:

"The personas appear to be comprehensive and capture most things that IMG's face from a health service perspective."

"Really well done and gives a human touch to a complex issue. There are some many complexities around the IMG journey and this work shows how many things that need to be considered."

"The clearly articulate real-life challenges for IMGs, for example homesick and integrating into the Australian healthcare system. Often IMGs move to Australia and don't have family with them."

"The personas highlight that each person has their own unique situation and challenges. The health system needs more flexibility to support each individual circumstance."

"Good quality work and there is good diversity within the personas. They show the different life stories and context prior to arriving in Australia, for example someone that is coming for a gap year versus a refugee and the challenges they face."

"Such a challenging but exciting space to be involved in but there is some much room for improvement and change."

"The personas provide good examples to support the need for an organisation to invest in more resources to support IMGs entering the workforce so that they feel valued and supported."

"They look great and it is good to see both the current and future state. The future state provides practical solutions where changes can be made by all sector stakeholders."

"I think this is an excellent piece of work. While there are no surprises, it clearly documents the complexity and the unique pathway that each individual IMG will experience. It highlights that one size does not fit all and will hopefully assist with future change that will enable greater flexibility and simpler processes for IMGs in the future."

"It is a great way to educate staff members within the health system that are involved in the recruitment, employment and supervision of IMGs. It highlights the diversity and unique experiences that impact individuals and their families. It also highlights to IMGs the challenges they and their families will face so that they can make informed decisions regarding relocation to Australia to commence or continue their medical careers."

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# 10 Conclusion

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## Moving Forward

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- The health system is fragmented with multiple agencies involved in the professional journeys of international medical graduates.
- The international medical graduates have strong lived experience which can guide future improvements
- One size does not fit all – international medical graduates experiences and journeys are various so enablers need to be customised to meet individual and system needs.
- The personas and journey maps set out directions to shape international medical graduate and policy leaders' efforts to commit to action and system change.

The AMC has committed to a comprehensive plan of change focused on further improving our assessments and the learning support we provide to international medical graduates to help them prepare and progress through the AMC standard pathway.

Our next steps in this project are to measure the success of the project and form further partnerships with organisations and individuals across the system to bring about change.

## Further Information

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For further information about this project see the [AMC website](#).

To get in touch with the project team email [policy\\_research@amc.org.au](mailto:policy_research@amc.org.au)

