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# Abortion Access Scorecard

Below is a summary of the current abortion laws across states and territories in Australia. Although a person's access to abortion care is decriminalised across all states and territories in Australia, references to the provision of abortion is still in criminal codes.

Each item is ranked according to most accessible (green tick), somewhat accessible (orange tick) or least accessible (red cross) and explained in the proceeding chart and information about the laws in each state and territory.

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*Last updated: January 2024*



# Abortion Access Scorecard

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA*
Abortions provided by one doctor	✓	✓	✓	✓	✓	✓	✓	✓
Abortions can be accessed without risk of criminalisation	✓	✓	✓	✓	✓	✓	✓	✓
Doctors can provide abortions without risk of criminalisation	✓	✓	✓	✓	✓	✓	✓	✓
Nurses, Midwives and Aboriginal & Torres Strait Islander workers can provide medical abortions without criminalisation	✗	✗	✗	✗	✗	✗	✓	✓
Support people can assist someone to access abortion without risk of criminalisation	✗	✓	✓	✗	✗	✗	✗	✓
Safe Access Zones are legislated	✓	✓	✓	✓	✓	✓	✓	✓
Counselling referrals are optional and not mandated	✓	✓	✓	✓	✓	✓	✓	✓
Abortion access free from judgement and justification	✓	✓	✓	✓	✓	✓	✓	✓
Abortion evidence base is supported with data collection and publication	✗	✓	✓	✗	✓	✗	✗	✓
Conscientious objection (CO) is legislated with referral	✗	✓	✓	✓	✓	✓	✓	✓

Note: Each item is ranked according to most accessible (green), somewhat accessible (orange) or least accessible (red)

\* WA legislation has passed and is expected to come into effect by March 2024

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<p>Nurse Practitioners, Nurses, Midwives and Aboriginal and Torres Strait Islander health workers can provide medical abortion care without risk of criminalisation</p> <p>Orange:</p> <p>Red:</p>	<p>Can only assist.</p>	<p>Can only assist.</p>	<p>Can only assist.</p>	<p>A medical practitioner may direct an authorised Aboriginal and Torres Strait Islander health practitioner, midwife, nurse or pharmacist to assist in abortion care</p>	<p>The Act allows for other registered practitioners (i.e. not medical practitioners) to perform early medical terminations in certain limited circumstances. It is considered that this could include nurses, nurse practitioners and midwives in the first instance. There are currently other legislative and policy barriers to this part of the Act, and so this part of the Act has not yet commenced</p>	<p>A nurse or a midwife must assist a medical practitioner to perform an abortion in an emergency.</p>	<p>In Victoria no further legislative or regulatory change is required for nurse practitioners with appropriate qualifications and training to prescribe MS-2 Step. However nurse practitioners should check their employers clinical governance framework.</p> <p>Unclear whether Endorsed Midwives, Registered Nurses or Midwives are able to prescribe.</p>	<p>A prescribing practitioner is authorised to perform an abortion on a person who is not more than 23 weeks</p> <p>A prescribing practitioner means a person who is a member of a class of registered health practitioners that — (a) is authorised under the Medicines and Poisons Act 2014 to prescribe an abortion drug; and (b) is prescribed by the regulations for the purposes of this definition.</p>
<p>Support people or doulas can assist someone to access abortion care</p>	<p>It is a crime if a person besides a doctor or</p>	<p>No crime is listed.</p>	<p>No crime is listed.</p>	<p>It is a crime for an unqualified person to</p>	<p>It is a crime for an unqualified person to</p>	<p>Termination by a person other than medical</p>	<p>A person who is not a qualified person must</p>	<p>A person is not criminally responsible for</p>

<p>without risk of criminalisation</p> <p>Green: All aspects of criminalisation of support people or doulas has been removed from the Criminal Code</p> <p>Red: Risk of criminalisation of support people or doulas exists in the Criminal Code</p>	<p>nurse practitioner supplies or administers a termination drug to another person.</p> <p>It is also a crime if a person besides a doctor carries out a surgical termination.</p>			<p>perform, or assist in, a termination.</p>	<p>perform or assist in a termination. The Act imposes a maximum penalty of 7 years imprisonment for an unqualified person who performs a termination of pregnancy and a maximum penalty of 5 years imprisonment for an unqualified person who assists in a termination of pregnancy.</p>	<p>practitioner or pregnant woman is guilty of a crime.</p>	<p>not perform an abortion on another person.</p>	<p>administering , in good faith and with reasonable care and skill, surgical or medical treatment — (a) to another person for that other person's benefit; or (b) to an unborn child for the preservation of the mother's life, if the administration of the treatment is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.</p>
<p>Safe Access Zones (SAZ) are legislated</p>	50m SAZ	150m SAZ	150m SAZ	150m SAZ	150m SAZ	150m SAZ	150m SAZ	150m SAZ
<p>Counselling referrals are optional and not mandated</p>	Yes	Yes - after 22 weeks	Yes	Yes	Yes	Yes	Yes	Yes
<p>Abortion access free from judgement and</p>	Yes	No - The	Yes	Yes	No	Yes	Yes	Yes

without needing to provide justification of choice		government opposes abortions based on Gender Biased Sex Selection			Gender Biased Sex Selection			
Abortion evidence base is supported with anonymous data collection and publication to improve health systems and processes	No data collection	Data collection, but no published data yet.	Data collection	No data collection	Data collection	No data collection	No data collection	Data collection.
Conscientious objection (CO) is legislated with a referral	Must tell patient	Must inform and give information on how to locate/contact a doctor without CO or transfer to another doctor without CO	Must inform and refer in a clinically reasonable time	Must inform and refer or transfer care	Must inform and give information on how to locate or contact a doctor without CO or transfer to another health service without CO	Must provide information on where to access care elsewhere	Must inform and refer	Must inform and refer or provide information on where to access care.

# Abortion Law in Australia

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## Key definitions

**Abortion:** Refers to a pregnancy being ended due to medical intervention. In abortion law it is often referred to as 'termination of pregnancy'.

**Abortion access:** Refers to a person being able to overcome any barriers to have an abortion.

**Abortion care:** When abortion is recognised as healthcare. The language of care implies that consent is informed and granted.

**Abortion provider/provision:** Refers to the health professional who performs abortion care.

**Assist:** Refers to a health professional who is supporting an abortion provider to provide abortion care.

**Conscientious objection:** Where the health practitioner refuses to offer or support a person to access abortion because of a personal belief. It is the law in most jurisdictions that compels the conscientious objector to declare their objection and direct the person to someone/some service who does not hold a conscientious objection.

**Counselling:** Pregnancy options counselling is non-directive and supports a person to work through their pregnancy options, including abortion, adoption, care, kinship care and parenting. Counselling should always be optional. If counselling is mandated for someone who has already made a decision, the counselling experience itself can create feelings of distress and powerlessness in the pregnant person.

**Data:** Refers to anonymised data on abortion care. All healthcare providers must follow Privacy laws and respect the confidentiality and privacy of patients.

**Informed consent:** When a person considers a health intervention, has full access to the relevant health information, understands the consequences of their decision, including the consequences of not having the health intervention, can consider all of their options, and makes a decision. Informed consent can be delayed or withdrawn. If a health decision is forced or coerced, it is not informed consent.



**Medical abortion:** A safe and effective method of abortion that involves taking medication to medically induce a miscarriage-type process. In Australia the medication used for early medical abortion is currently licensed up to 9 weeks (63 days) gestation. Other countries have licensed the use of medical abortion up to 11 weeks (77 days) gestation.

**Surgical abortion:** Surgical abortion is a safe day-surgery procedure that can occur at varying gestations. It can occur in various ways such as manual vacuum aspiration or dilation and curettage, depending on gestation, the patient's medical history and other factors. The word 'surgical' can be deceiving as it usually refers to a procedure rather than actual surgery, depending on the method.

**Supply:** Refers to when abortion related medication is given to a patient, usually by a pharmacist or sometimes another health professional. Depending on legislation this can occur at a hospital, pharmacy, clinic, in person or via post or courier.

**Gender biased sex selection:** When someone chooses to continue with a pregnancy, or access abortion, or proceed to adoption, care or kinship care, on the basis of the sex assigned to a fetus.

**Gestational limits:** Gestational limits refer to how many weeks gestation a pregnancy must be for a single doctor assessment, two doctor assessment, or only under life threatening circumstances. When legislation refers to a gestational limit, it usually refers to the point that more than one doctor is required to confirm the procedure.

**Safe access zones:** The designated zones outside of sites where abortion care is provided, in which no person can protest or intimidate another person who is accessing an abortion or who is working for an abortion provider.

**Woman or pregnant person:** Refers to the person who is pregnant, most commonly women, who will make the decision whether or not to proceed with their pregnancy. Pregnant person refers to the trans men and non-binary people who also experience pregnancy, have pregnancy options, and some of whom choose to proceed to abortion care.

# The Australian Capital Territory | ACT

[Health Act 1993, Division 6.1](#)

## **Who is authorised to access abortions?**

Abortion access is legal at any pregnancy gestation.

## **Who is authorised to provide abortions?**

It is legal for a doctor to provide abortion care.

## **Who is authorised to assist in providing abortions?**

It is a crime if a person besides a doctor supplies or administers an abortion drug to another person; and the abortion drug is supplied or administered by the person for the purpose of ending a pregnancy.

It is also a crime if a person besides a doctor carries out a surgical abortion.

## **Safe Access Zones**

There are 50 metre safe access zones set around the protected facility (an approved medical facility or place where an abortion medication is prescribed, supplied or administered).

## **If/when surgical abortion facilities need approval**

The ACT Health Minister must approve any facility where surgical abortions are provided.

The ACT Health Minister declares protected areas around approved medical facilities which prohibits photography, video etc.

## **Conscientious objection**

Health practitioners with a conscientious objection are legally required to inform the person requesting an abortion.

## **Counselling referrals**

Counselling referrals are available if the patient chooses, however they are not mandatory nor legislated.

## **Data Mapping**

There is no territory level publication on abortions in the ACT. There is some level of data collection through a [recent no-cost abortion commitment](#) by the ACT Government, being rolled out across clinical settings in 2024.

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## **New South Wales | NSW**

[Abortion Law Reform Act 2019; Public Health Amendment \(Safe Access to Reproductive Health Clinics\) Act 2018 No 26](#)

### **Who is authorised to access abortions?**

Abortion is legal up to 22 weeks' gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

Informed consent (free and voluntary) must be given by the person seeking an abortion, or if they lack capacity to give informed consent, informed consent must be provided by a person lawfully authorised to give consent on behalf of the person seeking an abortion.

A person who consents to, assists in or performs an abortion on themselves is not guilty of a crime.

### **Who is authorised to provide abortions?**

It is legal for a doctor to provide abortion care.

After 22 weeks' gestation, a specialist medical practitioner may perform an abortion if they have considered:

- “All relevant medical circumstances, and
- the person’s current and future physical, psychological and social circumstances, and
- the professional standards and guidelines that apply to the specialist medical practitioner in relation to the performance of the termination.”

The specialist medical practitioner may also seek advice from a “multi-disciplinary team or hospital advisory committee.”

The specialist medical practitioner must also consult with a second specialist medical practitioner and obtain informed consent from the person seeking an abortion. A medical practitioner or a specialist medical practitioner may perform an abortion in an emergency to save the person's life or to save another foetus.

Abortions performed for the purposes of gender biased sex-selection are not permitted through clinical guidelines.

### **Who is authorised to assist in providing abortions?**

Other medical practitioners, nurses, midwives, pharmacists or Aboriginal and Torres Strait Islander health practitioners can assist in providing medical and surgical abortions.

### **Safe Access Zones**

There are 150 metre safe access zones set around the premises of a reproductive health clinic at which abortions are provided.

### **If/when surgical abortion facilities need approval**

The Secretary of the NSW Ministry of Health may approve a hospital, or other facility the Secretary considers appropriate, as a facility at which abortions may be performed on persons who are more than 22 weeks' gestation.

### **Conscientious objection**

Health practitioners with a conscientious objection are legally required to inform the person requesting an abortion and must direct them to a service or someone who does not hold a conscientious objection.

### **Counselling referrals**

It is legislated that a doctor must assess whether it is necessary to discuss counselling with the person. After 22 weeks' gestation, doctors must provide information about access to counselling, except in the event of an emergency.

### **Data mapping**

There is state level data collection on abortions in NSW which must be reported to the Secretary of the NSW Ministry of Health, however, there has not been any published data yet.

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## **Northern Territory (NT)**

[Termination of Pregnancy Law Reform Act 2017](#); [Termination of Pregnancy Law Reform Legislation Amendment Act 2021](#)

### **Who is authorised to access abortions?**

Abortion is legal up to 24 weeks' gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

### **Who is authorised to provide abortions?**

One doctor can approve and perform an abortion up to 24 weeks' gestation. Abortions are available after 24 weeks' gestation if the medical practitioner has consulted with at least one other medical practitioner who has assessed the patient. An abortion will be performed in an emergency if a medical practitioner considers it necessary to preserve the life of the patient.

### **Who is authorised to assist in providing abortions?**

A medical practitioner may direct an authorised Aboriginal or Torres Strait Islander health practitioner, authorised midwife, authorised nurse or authorised pharmacist to assist in the performance of an abortion.

### **Safe Access Zones**

There are 150 metre safe access zones set around premises for performing abortion care.

### **If/when surgical abortion facilities need approval**

There is no requirement for a facility to be approved.

Surgical and medical abortions are primarily accessed in the [NT public health system](#).

## **Conscientious objection**

Medical practitioners with a conscientious objection to abortion care are legally required to inform the person requesting an abortion and provide information on how to contact or refer them onto an abortion care provider, unless in an emergency.

The medical practitioner must “refer the woman, within a clinically reasonable time” to another medical practitioner that doesn’t have a conscientious objection.

Health practitioners who assist in providing abortions that have an objection must identify a replacement health practitioner to assist.

## **Counselling referrals**

Counselling referrals are optional.

## **Data Mapping**

There is territory level data collection on abortions in NT which must be reported to the Northern Territory Chief Health Officer.

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## **Queensland (QLD)**

[Termination of Pregnancy Act 2018; The Health and Other Legislation Amendment Bill \(No. 2\) 2023](#)

**\*Note: the Amendment Bill has not yet passed and is expected to be debated in early 2024, so the content is not yet reflected here**

## **Who is authorised to access abortions?**

Abortion is legal up to 22 weeks’ gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

A person who consents to, assists in, or performs an abortion on themselves does not commit an offence.

## **Who is authorised to provide abortions?**

A medical practitioner (doctor) can provide abortions.

A doctor can approve and perform an abortion after 22 weeks' gestation if the doctor considers in all circumstances that the abortion should be performed and if the doctor has consulted with another doctor who agrees that the abortion should be performed. The doctors must consider:

- “all relevant medical circumstances; and
- the woman's current and future physical, psychological and social circumstances; and
- the professional standards and guidelines that apply to the medical practitioner in relation to the performance of the termination”

The above considerations do not apply in an emergency if where doctor considers it necessary to perform an abortion to save the person's life or “the life of another unborn child”.

It is a crime for an unqualified person to perform, or assist in, an abortion.

## **Who is authorised to assist in providing abortions?**

A nurse, midwife, pharmacist, Aboriginal and Torres Strait Islander health practitioner or other registered health practitioner.

## **Safe Access Zones**

There are 150 metre safe access zones set around abortion services premises.

## **If/when surgical abortion facilities need approval**

There is no requirement for a facility to be approved.

## **Conscientious objection**

Health practitioners with a conscientious objection are legally required to inform the person requesting an abortion and must direct them to a service or someone who does not hold a conscientious objection.

## **Counselling referrals**

Counselling referrals are optional.

## **Data Mapping**

There is no state level data collection or publication on abortions in Queensland.

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## **South Australia (SA)**

[The Health Care \(Safe Access\) Amendment Act 2020](#); [Termination of Pregnancy Act 2021](#); [Termination of Pregnancy Regulations 2022](#);

### **Who is authorised to access abortions**

Abortion is legal for up to 22 weeks' and 6 days gestation. After 22 weeks' and 6 days gestation, abortion is only permitted in certain special or emergency circumstances.

A person who consents to, assists in, or performs an abortion on themselves does not commit an offence.

A person must have resided in South Australia for at least two months before accessing abortion care.

### **Who is authorised to provide abortions?**

A medical practitioner (doctor) can provide abortions.

The approval of two doctors is required if continuing the pregnancy would cause great risk to the life, physical or mental health of the pregnant person or if there is a risk of foetal anomalies. The requirement for a second opinion is waved in cases of emergency.

Abortions must not be performed for the purposes of gender biased sex-selection.

It is a crime for an unqualified person to perform an abortion.

### **Who is authorised to assist in providing abortions?**

Only doctors can provide abortion care. It is a crime for an unqualified person to assist in an abortion.

## **Safe Access Zones**



There are 150 metre safe access zones set around protected premises which are any premises where abortions are performed.

### **If/when surgical abortion facilities need approval**

Abortions are primarily accessed in the [SA public health system](#). Surgical abortion care must be provided from a list of prescribed hospitals as outlined in the Termination of Pregnancy Regulations 2022.

There is no requirement for a facility to be approved.

### **Conscientious objection**

Health practitioners with a conscientious objection are legally required to inform the person requesting an abortion and provide information on how to locate or contact a medical practitioner who does not have a conscientious objection.

Health practitioners can also transfer the person's care to another health service provider at which the requested service can be provided by another registered health practitioner who does not have a conscientious objection to the performance of the termination.

### **Counselling referrals**

Before performing an abortion, a registered health practitioner must provide all necessary information to the person about access to counselling, including publicly funded counselling.

### **Data Mapping**

There is state level anonymised data collection and publication on abortions in SA.

## **Tasmania | TAS**

[Tasmanian Reproductive Health \(Access to Terminations\) Act 2013](#)

### **Who is authorised to access abortions?**

Abortion is legal up to 16 weeks' gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

A person who “consents to, assists in or performs a termination on herself is not guilty of a crime or any other offence”.

### **Who is authorised to provide abortions?**

Medical practitioners are doctors and are authorised to provide an abortion.

An abortion can be performed after 16 weeks' gestation if the doctor believes that continuing the pregnancy would cause greater risk of injury to the physical or mental health of the pregnant person than if the pregnancy were terminated and if the doctor has consulted with another doctor who reaches the same conclusion. The doctors must consider the person's physical, psychological, economic and social circumstances and at least one of the doctors must specialise in obstetrics or gynaecology.

Abortions provided by a medical practitioner without informed consent is guilty of a crime.

### **Who is authorised to assist in providing abortions?**

A nurse or a midwife can assist a medical practitioner to perform an abortion in an emergency.

Abortion by a person other than medical practitioner or pregnant person is guilty of a crime.

### **Safe Access Zones**

There are 150 metre safe access zones set around premises at which abortions are provided.

### **If/when surgical abortion facilities need approval**

There is no law to require approval of facilities that provide abortions in Tasmania.

### **Conscientious objection**

Yes, a doctor with a conscientious objection is legally required to inform the person requesting an abortion and provide information on how to contact or refer them onto prescribed provider.

### **Counselling referrals**

Counselling referral is not mandated. If the doctor conscientiously objects, they must provide a list of services to seek support including all pregnancy options. If the doctor does not conscientiously object, there is no mandated information or referral.

## Data Mapping

There is no state level data collection or publication on abortion in Tasmania.

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## Victoria | VIC

[Abortion Law Reform Act 2008; Public Health and Wellbeing Act 2008](#)

### **Who is authorised to access abortions?**

Abortion is legal up to 24 weeks' gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

### **Who is authorised to provide abortions?**

A qualified person is a registered medical practitioner.

After 24 weeks' gestation, an abortion can be performed “only if the medical practitioner—reasonably believes that the abortion is appropriate in all the circumstances; and has consulted at least one other registered medical practitioner who also reasonably believes that the abortion is appropriate in all the circumstances (which include “all relevant medical circumstances; and the woman's current and future physical, psychological and social circumstances”).

### **Who is authorised to assist in providing abortions?**

A nurse practitioner can assist in the provision of abortion care.

A nurse practitioner can supply drugs up until 24 weeks' gestation however the legislation and regulations that permits nurses to assist with medical abortions are complex.

### **Safe Access Zones**

Sets the safe access zones as 150 metres outside clinics where abortions (by instrument, drug or any other means) are provided.

## **If/when surgical abortion facilities need approval**

There is no legislated approval of abortion facilities.

## **Conscientious objection**

A medical practitioner with a conscientious objection is legally required to inform the person requesting an abortion and provide contact information for local abortion providers or refer them onto an abortion care provider.

Registered health practitioners must inform and refer to another health practitioner without a conscientious objection, unless in an emergency where the abortion is necessary to preserve the life of the pregnant woman.

## **Counselling referrals**

Counselling referrals are optional.

## **Data Mapping**

There is no state level data collection or publication on abortion in Victoria.

## **Western Australia | WA\***

**\*Note: this legislation has passed and Is expected to come Into effect on or by 27 March 2024**

### [Abortion Legislation Reform Bill 2023](#)

## **Who is authorised to access abortions?**

Abortion is legal for up to 23 weeks 6 days gestation. Beyond this abortion is only accessible in certain special or emergency circumstances.

## **Who is authorised to provide abortions?**

A medical practitioner is authorised to perform an abortion on a person who is not more than 23 weeks pregnant.

A prescribing practitioner is authorised to perform an abortion on a person who is not more than 23 weeks pregnant if the prescribing practitioner performs the abortion by — (a) prescribing an abortion drug for the person; or (b) supplying or administering an abortion drug to the person.

A prescribing practitioner means a person who is a member of a class of registered health practitioners that — (a) is authorised under the Medicines and Poisons Act 2014 to prescribe an abortion drug; and (b) is prescribed by the regulations for the purposes of this definition.

After 23 weeks' gestation, a medical practitioner is authorised to perform an abortion on a person if they reasonably believes that performing the abortion is appropriate in all the circumstances; and has consulted with at least 1 other medical practitioner.

## **Who is authorised to assist in providing abortions?**

A registered health practitioner in a relevant health profession or a student in a relevant health profession is authorised to assist in the performance of an abortion.

## **Safe Access Zones**

Safe access zones are 150 metres around a premises which provide abortion care.

## **If/when surgical abortion facilities need approval**

There is no legislated approval of abortion facilities.

## **Conscientious objection**

The refusing practitioner must without delay transfer the patient's care to another registered health practitioner who can provide the requested service or to a health facility where the service can be provided or give the patient information on how to locate or contact a practitioner who can provide the service.

## **Counselling referrals**

Counselling referrals are optional.

### **Data Mapping**

There is state level anonymised data collection and publication on abortions in WA.