

5 June 2026

RE: Statement on proposed changes to abortion law in South Australia

The Public Health Association of Australia (PHAA) South Australian Branch strongly opposes the Termination of Pregnancy (Restrictions on Terminations After 24 Weeks and 6 Days) Amendment Bill 2026.¹

PHAA is recognised as the principal non-government organisation for public health in Australia working to promote the health and wellbeing for all. PHAA seeks to drive better health outcomes through increased knowledge, better access and equity, evidence-informed policy and effective population-based practice in public health.

Abortion is essential healthcare. Access to safe, timely and equitable abortion care is an important part of reproductive healthcare and must remain guided by clinical need, evidence, and the circumstances of the pregnant person seeking care.

PHAA's position is that abortion should be treated as a health issue and regulated in the same way as other health procedures, without unnecessary barriers or conditions. PHAA has previously supported the removal of abortion from criminal law and the improvement of timely and equitable access to safe abortion care, particularly for those experiencing disadvantage.^{2,3}

South Australia's current law provides a careful, clinically led framework. Under the Termination of Pregnancy Act 2021, terminations up to 22 weeks and 6 days can be lawfully provided by a medical practitioner acting in the ordinary course of practice. After that point, a termination can occur only where two medical practitioners agree that the statutory requirements are met, including where the termination is necessary to save the life of the pregnant person or another foetus, where continuing the pregnancy would involve significant risk of injury to the physical or mental health of the pregnant person, or where there is a case or significant risk of serious foetal anomalies.⁴

In place of this compassionate and clinically sound legal framework the bill would permit a termination after 24 weeks and 6 days only where it is necessary to save the life of the pregnant person, except in an emergency.¹ This would remove access in serious and complex circumstances currently recognised under South Australian law, including serious foetal anomalies and significant risks to the physical or mental health of the pregnant person.

These are rare and often deeply distressing clinical circumstances. In 2024, 1% of all terminations were performed in South Australia after 22 weeks and 6 days. Reported reasons included physical or mental health of the pregnant person, foetal anomaly, and saving the life of the pregnant person or another foetus.⁵

The current Act also recognises that later access to care may be needed in circumstances involving delayed diagnosis, difficulty accessing timely specialist services, significant socio-economic disadvantage, cultural or language barriers, remote location, sexual and physical violence, or serious medical conditions that emerge or deteriorate during pregnancy.⁴ These are precisely the circumstances in which timely, compassionate and clinically appropriate care is most important.

PHAA SA is concerned that the proposed Bill would create additional barriers for people seeking abortion care at a time when they may be facing complex medical, personal and family circumstances. Additional restrictions are likely to disproportionately affect people already

experiencing barriers to healthcare, including those in rural and remote areas, people experiencing socio-economic disadvantage, and those affected by family, domestic or sexual violence. Restricting access in these circumstances is likely to worsen health outcomes by creating additional barriers to timely, evidence-based reproductive healthcare.

South Australian public opinion also supports keeping abortion care centred on the pregnant person and their healthcare team. Research conducted in South Australia found majority support for access to abortion care, including later abortion when the pregnant person and their healthcare team decide it is necessary.⁶

PHAA SA urges Members of Parliament to reject the proposed restrictions and maintain South Australia's evidence-informed, clinically led framework for abortion care.

South Australians should be able to access the healthcare they need, when they need it, through a system that respects patient dignity, clinical expertise, and health equity.

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President

Public Health Association of Australia, South Australian Branch

References

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2. Public Health Association of Australia. Abortion: Policy Position Statement [Internet]. Canberra: Public Health Association of Australia; 1989 [updated September 2023; cited 2026 June 5]
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3. Public Health Association of Australia. Submission to the Review of South Australian Law and Practice. Canberra: Public Health Association of Australia; 31 May 2019.
4. Government of South Australia. Termination of Pregnancy Act 2021 (SA), sections 5, 6 and 9. Adelaide: Government of South Australia.
5. Preventive Health SA. Annual Report for the Year 2024: South Australian Abortion Reporting Committee. Adelaide: Government of South Australia; April 2025.
6. Cations M, Ripper M, Dwyer J. Majority support for access to abortion care including later abortion in South Australia. *Australian and New Zealand Journal of Public Health*. 2020;44(5):349–352.