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Queensland Supreme Court Approves Abortion for 12-Year-Old at Hospital

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A 2016 decision by the Queensland Supreme Court to authorize an abortion for a 12-year-old girl has brought renewed attention to the legal framework governing reproductive healthcare in the state. The case, *Central Queensland Hospital and Health Service v Q* QSC 89, centered on the court's intervention to permit a medical termination due to serious health risks posed to the minor.

The case involved a 12-year-old girl, anonymized as “Q,” who was nine weeks pregnant. The Central Queensland Hospital and Health Service (CQHHS) applied to the court for permission to perform a termination, citing concerns about the girl’s mental and physical well-being. Justice Duncan McMeekin, presiding over the matter, granted the request under the *parens patriae* jurisdiction, which enables courts to act in the best interests of minors.

The court authorized the administration of Mifepristone and Misoprostol, medications used for early-stage medical termination, with surgical intervention as an alternative if necessary. The ruling followed evaluations by multiple professionals, including a general practitioner, a psychiatrist, social worker, and obstetricians. Justice McMeekin noted the girl’s consistent and voluntary wish to terminate the pregnancy, as well as her documented psychological vulnerabilities.

At the time of the ruling, Queensland’s legal position on abortion was governed by the 1899 Criminal Code, which criminalized the procedure unless it was necessary to preserve the woman’s physical or mental health. Although the girl and her parents consented to the termination, the legal requirement for court involvement reflected the constraints of the existing framework.

The case generated calls for legislative reform. Advocates argued that requiring judicial authorization, particularly for minors, could delay access and intensify psychological distress. Several legal and health policy commentators cited the case as an example of how outdated laws placed unnecessary burdens on families and healthcare providers.

In 2018, the Termination of Pregnancy Act was passed, decriminalizing abortion in Queensland and allowing terminations up to 22 weeks' gestation without the need for court involvement in most cases. However, access for minors remains subject to professional discretion, and healthcare providers are required to consider capacity and consent on a case-by-case basis.

While the 2018 reforms streamlined access for many women, some health law analysts note that regional availability and protocols for minors remain uneven across the state. There is continued debate over whether current safeguards strike the right balance between medical oversight and individual autonomy.

Under the current Labor government, led by Premier Steven Miles, reproductive health policy remains under review. The opposition Liberal National Party (LNP) has called for legal clarity that would reduce reliance on court systems in cases involving minors, advocating for more medical-based decision-making processes.

The 2016 Q case remains a key reference point in Queensland's legal history on reproductive health, illustrating the evolving balance between judicial intervention, medical ethics, and legislative reform. The case also serves as a reminder of the complexities facing healthcare providers and legal institutions when dealing with sensitive cases involving minors and reproductive decisions.