**MEDIA RELEASE TEMPLATE**

**Why Were End of Life Doulas Left Out of the Support at Home Program?**

**[Your Name]**, a local end of life doula, is calling on the Australian Government and wider community to acknowledge a critical omission in the upcoming **Support at Home Program** — the exclusion of end of life doulas from the newly designed **End of Life Pathway**.

Despite growing demand for non-clinical support at end of life and a nationally accredited training qualification available across the country (and subsidised in NSW under Smart & Skilled), doulas have been left out of the national care framework set to launch in November 2025, now that the date has been extended.

“We are a trained, compassionate and cost-effective workforce already working in the community — walking alongside individuals, families, care workers and palliative services,” says [Your Name].  
“Why we’ve been excluded from the official model is a mystery — and it’s a disservice to dying people and their families.”

Doulas provide emotional, spiritual and practical support, help people plan for their end of life, and offer consistent, calm presence during dying and death. They work with — not instead of — clinical team  and help fill a growing gap in emotional and practical care.

As palliative care teams and home support workers face increasing pressure — particularly with an ageing population and limited training in death and dying — doulas offer a community-based, person-centred and death-literate solution.

“This is a grassroots movement,” says [Your Name].  
“People are choosing to die at home and families want guidance. We’re already here, trained and working — why won’t the government see that?”

**[Your Name] is calling for:**

* Immediate media attention to this omission
* Inclusion of doulas in the End of Life Pathway
* Public support for recognising this essential role in care frameworks

Doulas across Australia are urging members of the public, health professionals and policymakers to raise their voices and join the conversation.

“If the system really values dignity, choice, and flexibility at the end of life — doulas need to be included,” says [Your Name].

**For interviews, contact:**  
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