Psychosocial Approaches to Thriving Health Systems (PATHS)

Project Summary

WHY PATHS?

2 in 3 people who are needing psychosocial support are not receiving any

Support is hard to find unless you're in crisis or eligible for the NDIS

Current services are fragmented, overly clinical, and often culturally unsafe

WHAT WE DID

Engaged 90+ people through consultations and surveys

Co-designed a psychosocial support service model with the Townsville community

Costed the model for local and national delivery

WHAT WE HEARD

"Many people don't access support until the building is on fire and people are preparing to jump off the balcony."

"Initial help-seeking should focus on informal community-based supports, not formal mental health services."

"People need to feel safe, supported, and connected to seek help."

"Cultural stigma around mental health is a significant barrier."

People need a model that includes:

- Face-to-face, non-clinical support
- Available before crisis
- No diagnosis or paperwork needed
- Meets people where they are

IMPACT

1. Low-barrier service model designed with community – not just for them
2. Delivers effective care from just $3-$65 per person per day
3. Reduces pressure on crisis services and hospitals
4. Helps people stay well and connected in their community

NEXT STEPS

- Pilot service model in diverse regions
- Push for funding psychosocial supports outside the NDIS

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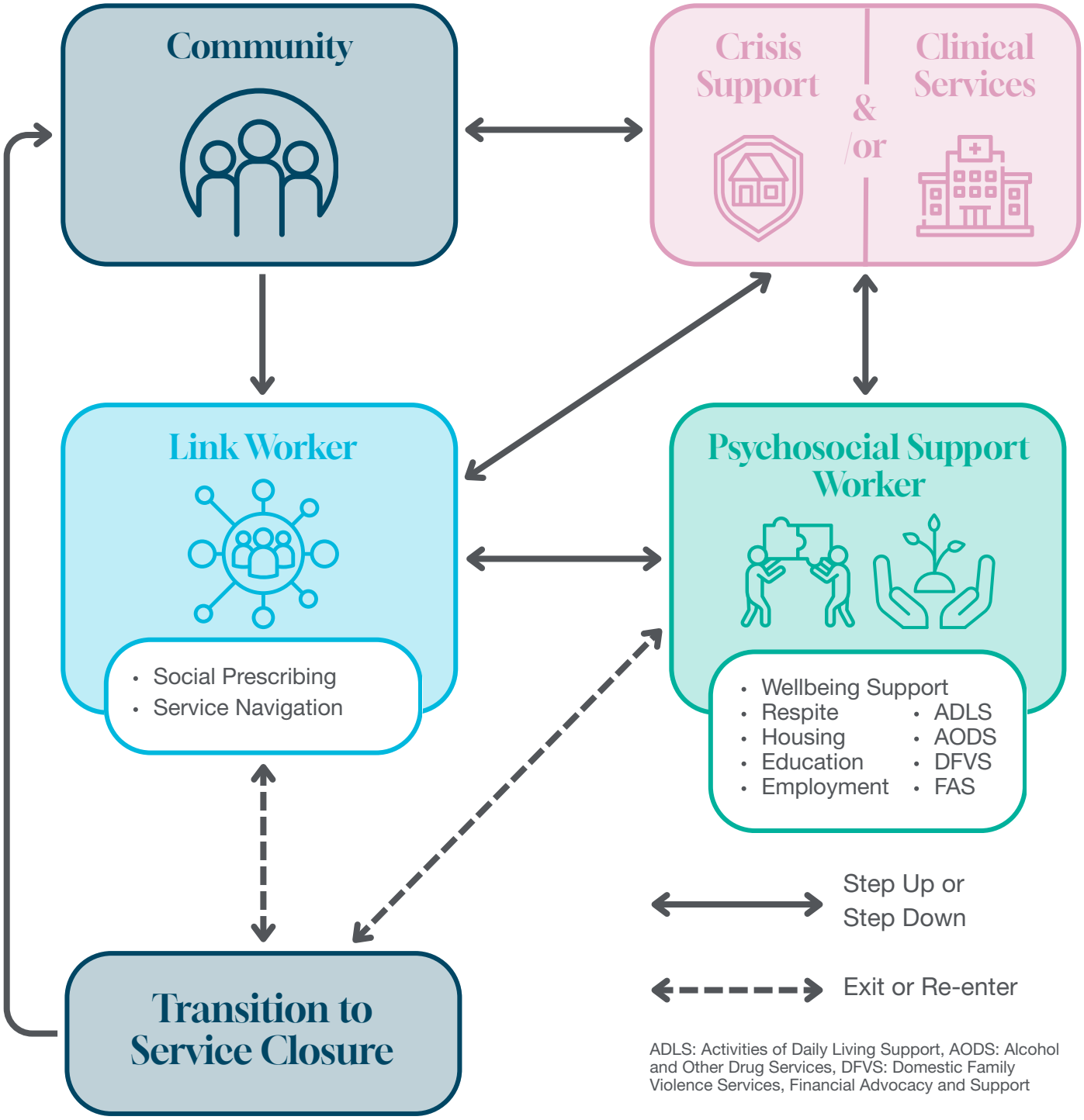
Psychosocial Support Service Model



ADLS: Activities of Daily Living Support, AODS: Alcohol and Other Drug Services, DFVS: Domestic Family Violence Services, Financial Advocacy and Support

This community-based psychosocial support model provides flexible, person-led care that recognises the non-linear nature of mental health recovery. Guided by a "no wrong door" approach, people can access support through self-referral, community contacts, or formal services, and shift between care types as needed.

Soft entry via Link Workers offers wellbeing-focused support and social connection, while structured entry via Psychosocial Support Workers provides more intensive assistance. The model is integrated with existing crisis alternatives and clinical services to ensure coordinated, continuous care.