Peer-Led and Community-Driven Mental Health Alternatives - Fund Action, Not Just Talk

For decades, people with lived experience have built alternative models of support—peer-run crisis spaces, First Nations healing practices, mutual aid networks, and non-coercive responses. These models already exist. They already work. Yet instead of investment, they are left to survive on scraps, while funding continues to pour into the same failing systems.

We don't need more reports telling us what we already know. We need funding commitments.

The Productivity Commission's mental health review (2020) made it clear:

- The system is failing and unsustainable.
- We need more non-clinical, community-led responses.
- Peer work must be central, not an add-on.

And yet—four years later—where is the structural investment in lived experience leadership? Where is the funding for peer-run respites, First Nations healing, mutual aid networks, and non-carceral crisis responses?

V Indigo Daya has shared what's working?

First Nations-led healing:

Mahi a Atua – Māori healing grounded in Indigenous knowledge Ngangkari – Traditional healers of the NPY Lands Peer-run & community-led alternatives:

Afiya Respite House – Peer-run crisis respite Peer Support Space, Florida – A non-clinical, community-driven space Alt2Su groups – Peer-led support for suicide distress Call Blackline – A crisis line for Black & queer communities Clinicians working outside coercive psychiatry:

Vikki Reynolds – Anti-colonial, justice-based practice Matt Ball – Listening with compassion and justice Sanah Ahsan – Liberation psychology Blended alternatives:

Soteria Houses – Community-based alternatives to hospitalization Hearing Voices Network – Non-pathologizing support for voice-hearers PTM Framework – A non-diagnostic, trauma-informed alternative to the DSM

What needs to happen now?

Reallocate funding—Stop pouring money into coercive and crisis-driven systems. Invest in peer-led, First Nations-led, and community-driven alternatives.

Sustainable funding for independent leadership—Lived experience leaders shouldn't be forced into insecure contracts while the system profits from our work.

Direct funding to grassroots initiatives—Not just to large organizations that absorb consumerled projects and water them down.

System accountability—If services claim to be "co-designed" or "trauma-informed," they should demonstrate how they fund lived experience leadership.

As Indigo Daya said:

"We cannot rely on the same structures to create change. The system is not going to fix itself."

So how do we push beyond identifying the problems and start funding real solutions? How do we shift the money, the power, and the action?

Let's talk about where the funding should be going and how we make that happen now.

#PeerLedAlternatives #CommunityCare #NothingAboutUsWithoutUs #JusticeDrivenMentalHealth #FundTheChange #ProductivityCommission