

CAHMA's Peer Treatment Support Service Model of Care

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Background

CAHMA has implemented a peer support and case management model of care that reflects community need in Belconnen, Canberra. The MoC was developed from the identified issue that people who use drugs often have complex engagements with health and social systems and engage very late with these systems due to stigma, discrimination, criminalisation. This often causes significant crisis and negatively impacts outcomes. CAHMA has implemented a MoC which encourages ongoing engagement after crisis is resolved, supporting medium to long term goals, building social capital and fostering resilience.

Description of Model of Care

The Peer Treatment Support Service prioritises:

- empowering people to plan their goals and navigate health and social systems;
- building individual's social capital and control over their health and wellbeing;
- provision of material aid, transport and warm referral;
- role modelling resilience, hope and fighting stigma and discrimination through peer identity;
- supporting transition from service user to peer worker and recasting experiences of drug use and drug treatment journeys as positive, powerful expertise.

Effectiveness

The PTSS has been very successful in transforming lives through:

- Re-centring individuals as the clearing house for their own health information, growing confidence and fostering social capital;
- Providing pathways for people to transition to paid employment post drug treatment;
- Stabilising people's health and wellbeing and helping people build resilience to stigma and discrimination.

Conclusion

The PTSS Model of Care is being released mid 2025 and will form the framework for teaching up and coming peer workers how the PTSS model works and how to operate within a framework of empowerment, health equity and resilience.

Implications for Practice or Policy

With the rapid expansion of interest across healthcare in peer work this model of care provides an example of community-controlled peer work best practise as well as posing some ethical considerations for non-peer based organisations who are seeking to implement peer workers within their workforces.

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