Walking alongside the DFSV Sector

The Role of PHNs in Responding to DFSV

What are PHNs?

Primary Health Networks (PHNs) are not for profit organisations funded by the Commonwealth government to improve the efficiency and effectiveness of the primary health care system.

Central and Eastern Sydney PHN

CESPHN covers Inner Sydney, Eastern Suburbs, Inner West, St George and Sutherland regions. We analyse and integrate information and data to support health planning in our region, and deliver and commission a range of primary health care services that meet identified needs and close service gaps.

CESPHN Involvement in DFSV

DFSV is a public health issue. It is one of the leading risk factors contributing to the burden of disease for women aged 15-54. Addressing DFSV requires a whole-of-community approach. Leveraging our historical and trusting relationship with healthcare providers, PHNs are in a unique position to walk alongside the DFSV sector in building the capacity of the health sector to respond to DFSV and address the health needs of victim-survivors.

CESPHN works in partnership with the Sydney Local Health District and the Leichhardt Women's Community Health Centre on programs that aim to improve health and social outcomes for people impacted by DFSV. Our vision is that all children young people, adults, and their families are supported by the primary health system to live safe and healthy lives, free of violence and its adverse impacts.

CESPHN DFSV Programs

1. **Training for Primary Care** on recognising the signs of DFSV and responding to disclosures
2. **DFSV Assist Navigator Service** providing consultation and referral support to primary care providers
3. **DFSV Health Assist** providing a Nurse Practitioner and other healthcare services to women's refuges

Stories of Impact

An elderly patient told his GP that his son had convinced him to sign over his property to him with the promise of giving him the rent from the tenants. Instead, his son kept the money for himself and in doing so neglected his father, making him more vulnerable and unwell. The GP called the DFV Navigator who was able to find a pro bono lawyer who specialises in financial abuse to assist the patient.

A GP had concerns about a patient who always attended appointments with her mother-in-law. At one appointment, she decided to ask the mother-in-law to leave. Once alone, the patient described the abuse and slave-like conditions she was subject to. The GP was unsure how to handle this. She called the DFV Navigator who was able to help her plan for the patient's next visit and provide information about possible referral pathways. The patient was referred to a DFSV service and eventually was able to safely leave the relationship.

To learn more, scan the QR code or visit https://cesphn.org.au/general-practice/help-my-patients-with/dfsv