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Stroke
FOUNDATION

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South Australia Pre-budget Submission

2025–26

South Australian StrokeSafe
Speaker, Janet Weir.



Stroke Foundation is the voice of stroke in Australia, working to prevent stroke, save lives and enhance recovery

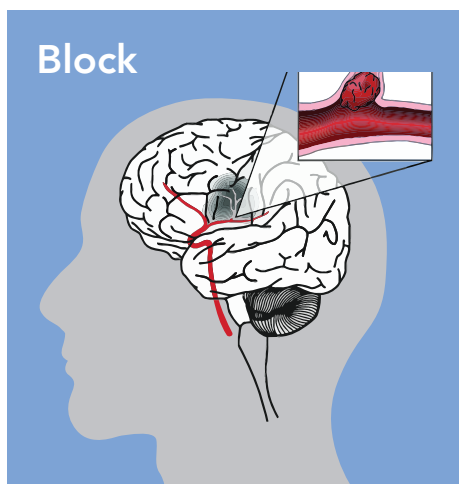
We partner with survivors of stroke, carers, health professionals, government and the community to reduce the incidence and impact of stroke for all Australians.

Stroke Foundation is the leading national organisation in Australia focused on stroke prevention, treatment and recovery.

For more than 25 years, we have championed breakthrough stroke research, successfully advocated for access to innovative treatments, increased public awareness in stroke prevention and recognition, and supported thousands of health professionals to deliver best-practice care.

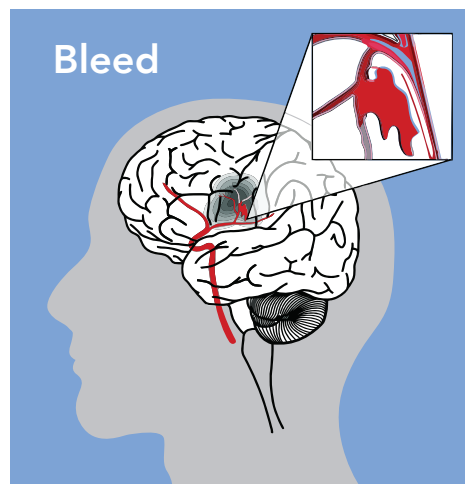
Every achievement takes a united team of stroke champions all working together with a single voice and purpose: survivors of stroke with their families and carers, health professionals, researchers, volunteers, advocacy bodies, generous donors, corporate Australia, government and philanthropic partners.

What is a stroke?



Ischaemic stroke

(Blood clot or plaque blocks artery)



Haemorrhagic stroke

(Artery breaks or bursts)

Stroke can strike **anyone**, at **any time**.

A stroke happens when blood supply to the brain is interrupted.

When this happens, brain cells do not get enough oxygen or nutrients and they immediately begin to die.

Stroke is always a medical emergency.

Importantly, we know that more than **80 percent of strokes can be prevented**.



The state of stroke in South Australia – why we must act now

In 2023, there were 3,698 stroke events in South Australia,¹ and many of those survivors of stroke will be living with an ongoing disability. There are almost 35,000 survivors of stroke living in South Australia¹ – and their number is growing.

One of the key modifiable risk factors for stroke is high blood pressure. Importantly, 368,000 South Australians are living with high blood pressure,¹ and many don't know it. In addition, 153,500 South Australians are daily smokers and 173,400 have high cholesterol¹ – putting them at an increased risk of stroke.

Why is this happening?

Our population is growing and ageing. We are living longer, more sedentary lives. Our physical and social environments are influencing lifestyle choices and behaviours, putting us at an increased risk of stroke, and at a younger age.

At the same time, there is a clear lack of community knowledge and awareness about the common stroke risk factors, the typical signs of stroke when it happens, and the fact that stroke is a medical emergency and calling an ambulance immediately at the first sign of stroke is critical.

Our health system is also struggling to meet the needs of patients with stroke. Improvements have been made in the delivery of acute stroke treatment and care; however, time-critical treatment and best-practice care is not available to all South Australian patients. In addition, we know that for many survivors of stroke, their rehabilitation needs are not assessed and those who need rehabilitation do not always receive it. This in turn increases the impact on informal carers and social care services.

It doesn't have to be this way

Stroke can often be prevented and it can be treated. We are making progress, but there is much more to be done.

We are taking action, but we can't do this alone. It takes everyone's support, from government right through to individuals, to prevent stroke, save lives and enhance recovery from stroke for all South Australians.

We have an opportunity to act, to reduce the impact of stroke on survivors, their families and carers, the community, and the healthcare system. We can and must act for the health and wellbeing of future generations.

We urgently need the support of the South Australian government. Our programs and services are in greater demand than ever before, because the health system, the National Disability Insurance Scheme (NDIS) and the aged care system are not adequately meeting the needs of the community.

Now is the time for action and investment to change the landscape of stroke prevention, treatment, and recovery in South Australia.

The hard facts



Almost **4,000** stroke events in SA in 2023¹



There are almost **35,000 survivors of stroke** living in SA¹



Stroke can happen at **any age**. **1 in 4** first ever strokes occur in people **under 65 years**¹



More than **80 percent of strokes** can be prevented²

Lifetime costs associated with strokes that occurred in 2023 exceed

\$1.2 billion

(almost \$341,000 per person)

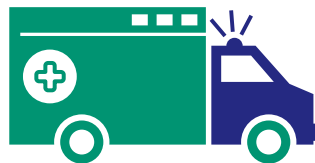


Costs in the first year after stroke were over

\$610 million

(almost \$171,000 per person)

\$441 million in healthcare costs for strokes occurring in 2023 including



\$31 million

in road ambulance costs



\$344 million

in hospital costs



Summary of Stroke Foundation proposals

To meet the urgent needs of survivors of stroke, their families and carers, Stroke Foundation is seeking funding of \$2.92 million over four years.

1. F.A.S.T. (Face, Arms, Speech, Time) Regional and Metropolitan Education Program

\$1.04 million (\$260,000 per year over four years).

Ensure more South Australians know how to recognise the signs of stroke and how vital it is to call triple zero (000) immediately, regardless of where they live.

2. A program to support South Australian Primary Stroke Centres and Stroke Capable Regional General Hospitals to achieve Stroke Unit Certification

\$40,000 (\$20,000 per year over four years).

Ensure all South Australian patients, regardless of where they live, have access to the evidence-based, specialist stroke unit care they need, in order to achieve the best possible outcome post-stroke. This will also ensure South Australian hospitals and clinicians are supported in their efforts to progress towards the 30/60/90 National Stroke Targets.

3. Enhanced support for stroke recovery: *My Stroke Journey* for every South Australian survivor of stroke and dedicated *StrokeLine* support for South Australia

\$1.44 million (\$360,000 per year over four years).

Ensure more South Australians who are impacted by stroke are able to access the information and support they need in a timely manner, which will have benefits for survivors of stroke, their families and carers, and our community, as well as our state's health system and economy.

4. National Stroke Week Peer Connection Grants

\$400,000 (\$100,000 per year over four years).

Ensure more South Australian survivors of stroke, and their family members and carers, are able to enjoy the significant benefits of peer support, and participate in the delivery of events during National Stroke Week that improve community awareness of stroke.



*StrokeLine health professional,
Katherine Yong.*



Proposal 1: F.A.S.T. (Face, Arms, Speech, Time) Regional and Metropolitan Education Program

Investment: \$1.04 million (\$260,000 per year over four years).

Investment in a F.A.S.T. Regional and Metropolitan Education Program will deliver:

- › F.A.S.T. advertisements across high reach, high impact broadcast channels, outdoor or transit media, and digital platforms such as Google Ads
- › a mainstream media campaign emphasising the F.A.S.T. message through stories told by survivors of stroke
- › a community-led education program focused on raising awareness of the signs of stroke in hotspot areas and among priority groups
- › an increase in the awareness of at least one F.A.S.T. sign of stroke in South Australia from 66 percent to 74 percent by 2027.

Stroke is a medical emergency. Faster diagnosis and treatment saves lives and results in improved quality of life. When someone suffers a stroke, every minute counts. F.A.S.T. access to treatment means a greater chance of recovery and decreased costs for our health system.

The F.A.S.T. message highlights the three most common ways to recognise a stroke (Face, Arms and Speech), and reminds us that Time is critical when seeking treatment. Stroke Foundation is the one organisation in Australia dedicated to sharing this message widely, and encouraging all Australians to learn it and share it with others.

Over the last few years of the pandemic, we know that many South Australians missed out on health checks and early detection of stroke risk, and there could be increased numbers of people at risk of stroke. Therefore, it is critical we improve F.A.S.T. awareness in our community now.

Importantly, we know that major gains in population awareness of the F.A.S.T. message can be made over time. F.A.S.T. advertising campaigns are proven to increase awareness

of the signs of stroke, and calls to emergency services, nationally³ and internationally^{4,5}, and support well established scientific findings that significant and continuous exposure to public health messages over several years leads to gradual improvement in population awareness and knowledge.

Stroke Foundation has previously partnered with the NSW Government to deliver the F.A.S.T. Community Education Program in conjunction with the roll out of the NSW Telestroke Service. Over three years (2020-2022), the Program contributed to an increase in the unprompted awareness of at least two F.A.S.T. signs of stroke in regional NSW of over 20 percent (from 22 percent in 2020 to 44 percent in 2022).⁶ Further to this, in Tasmania, where the State Government has been funding the F.A.S.T. Community Education Program for six years, the unprompted awareness of the F.A.S.T. signs of stroke has grown to be significantly higher than in all other states and territories.⁷

Current F.A.S.T. awareness in the South Australian community

The 2023 Stroke Foundation F.A.S.T. Signs and Stroke Awareness Survey reported on the unprompted awareness of the F.A.S.T. signs of stroke in the South Australian community⁷:

Awareness in South Australia		
Number of F.A.S.T. signs recognised	Regional	Metro
0 signs	32 percent	35 percent
1 sign	29 percent	37 percent
2 signs	32 percent	24 percent
3 signs	7 percent	4 percent

In addition, **only 42 percent** of South Australian stroke patients **arrive at hospital within the 4.5-hour window** for clot-dissolving treatment (thrombolysis).⁸

South Australian Government investment in a F.A.S.T. Regional and Metropolitan Education Program is needed to facilitate improved awareness of the F.A.S.T. signs of stroke and the need to call triple zero (000) immediately. This will maximise the State Government's investment in the South Australian Telestroke Service, targeting those regional communities covered by the Service. The Program will also support South Australian hospitals and clinicians in their efforts to progress towards the 30/60/90 National Stroke Targets, a group of metrics designed to drive quality improvement in the areas of stroke unit access and time-critical stroke treatments, which have been endorsed by the South Australian Government.

The program

Program activities will be focused on regional and metropolitan stroke hotspot geographical areas, including South Australian Telestroke Service geographical catchment areas such as Victor Harbour, and other areas identified using data from sources such as the No Postcode Untouched report, the Australian Stroke Clinical Registry (AuSCR) and South Australian pre-hospital data.

F.A.S.T. Multimedia Campaign

Advertising Campaign: An integrated, multi-channel advertising campaign to promote the F.A.S.T. message in South Australia will be delivered. This may include high reach, high impact broadcast channels, Outdoor (OOH) or transit media, supported by digital advertising using a screens-based approach such as digital video on YouTube or catch-up TV.

Media Campaign: Mainstream media coverage emphasising the F.A.S.T. message through stories told by survivors of stroke. News stories will include a call to action for all residents and workplaces to get behind the campaign, as well as announcements about F.A.S.T. awareness levels.

F.A.S.T. (Face, Arms, Speech, and Time) Community Education Program

Stroke Foundation's F.A.S.T. (Face, Arms, Speech, and Time) Community Education Program establishes awareness and increases people's knowledge of the signs of stroke through community engagement in hotspot areas. We work with groups representing priority communities – including Aboriginal and Torres Strait Islander people and those from culturally and linguistically diverse (CALD) backgrounds – to develop and deliver tailored activities to increase F.A.S.T. awareness in these communities.



We recruit, train, and provide support to a network of local volunteers, many with a lived experience of stroke, to creatively raise awareness about the signs of stroke and stroke prevention, through the delivery of *StrokeSafe* presentations, workplace engagement and targeted events. Through the compelling voice of those impacted by stroke, we increase knowledge among those most at risk of stroke, and help to ensure patients get to hospital in the critical time window for life-saving stroke treatment.

Evaluation

A formal program evaluation will be undertaken, focused on the following outcome measures:

- F.A.S.T. Community Education Program
 - Awareness of the F.A.S.T. signs (unprompted and prompted), key stroke risk factors, and what actions to take in the event of a stroke.
 - Short-term (measured immediately after *StrokeSafe* presentations) and long-term (measured 3 months after *StrokeSafe* presentations) recall of the F.A.S.T. signs and stroke risk factors in hotspots.
 - Number of people at risk of stroke in hotspots who discussed their stroke risk with a health professional, and changed their behaviour in order to address a stroke risk factor(s) (measured 3 months after *StrokeSafe* presentations).
- Multimedia Campaign
 - *Advertising Campaign*: Key performance metrics to be determined with media agency, based on the target audience, objectives and media channels selected.

- *Media Campaign*: Number of news stories promoting the F.A.S.T. message published or broadcast in news outlets, and their reach.



We are calling on the South Australian Government to invest in our successful *F.A.S.T. Education Program*, which will be rolled out in targeted regional and metropolitan areas, to increase awareness of what stroke is, how to reduce stroke risk, and how to recognise the F.A.S.T. signs of stroke. This initiative will also maximise the State Government's investment in the South Australian Telestroke Service, targeting those regional communities covered by the Service, and ensuring residents know the signs of stroke and the importance of calling triple zero (000) immediately.

Case study 1: F.A.S.T. in action – Jenny’s story

Jenny Hellyer has an affinity with the ocean – it’s where the avid surfer enjoys spending time with her family, but in January this year, a regular family day out at the beach took an unexpected turn when they got home.

“My leg felt like it had turned to rubber. I tried to walk, but it felt like a flag flapping in the breeze, then it completely gave way. I also felt a numbness creeping up the right side of my face.”

The 43-year-old was having a stroke. Luckily she knew the F.A.S.T. acronym from Stroke Foundation’s campaign, recognised the signs of stroke and called an ambulance immediately.

“I just knew I had to get to the hospital quickly.”

After a month in hospital undergoing gruelling rehabilitation, the mother of two learned how to walk again and was determined to get back on her board. The former stand up paddleboard state champion’s love for the water drove her recovery.

“I just told myself get out there, you can’t let the stroke beat you.”


And that’s exactly what Jenny did. She’s now back on her board, taking on the waves once again.

“It feels great to be back out there in the lineup and doing what I love.”

“Everyone should know the F.A.S.T. signs of stroke. It could save their life, just like it saved mine.”



Survivor of stroke, Jenny Hellyer



Proposal 2: A program to support South Australian Primary Stroke Centres and Stroke Capable Regional General Hospitals to achieve Stroke Unit Certification

Investment: \$40,000 (\$20,000 per year over two years).

Investment in a program to support South Australian Primary Stroke Centres and Stroke Capable Regional General Hospitals to achieve Stroke Unit Certification will ensure:

- › all South Australian patients, regardless of where they live, have access to the evidence-based, specialist care they need, in order to achieve the best possible outcome post-stroke
- › non-stroke specialists in regional South Australia will increase their confidence and improve their decision-making when dealing with stroke
- › South Australian hospitals and clinicians are supported in their efforts to progress towards the 30/60/90 National Stroke Targets.

South Australian Government investment in stroke management procedures and protocols, and infrastructure, is delivering results in the acute management of stroke.

The state is leading the way nationally in ensuring access to emergency stroke treatments for all South Australians.

South Australia has the highest rate of endovascular thrombectomy treatment for patients with ischaemic stroke, with 14 percent of all reported ischaemic stroke patients accessing this time-critical therapy.⁸ In addition, 14 percent of South Australian ischaemic stroke patients receive thrombolysis treatment, compared with 10 percent nationally.⁸

Despite this, more can be done in South Australian to ensure all aspects of care are in-line with best-practice guidelines.

Access to stroke unit care, characterised by provision of care in one location by a multidisciplinary team including medical, nursing and allied health professionals with expertise in stroke, is proven to make the biggest difference to patient outcomes following stroke, both in hospital and after.^{9, 10}

Importantly, only 70 percent of South Australian stroke patients are able to access stroke unit care, which is below the national average.⁸ More work needs to be done to improve stroke unit access in South Australia.

Results from Stroke Foundation's National Acute Services Audit have shown that not all self-designated stroke units meet the core requirements for stroke unit care, and having a robust way of evaluating which hospitals have the essential elements of stroke unit care is an important step to ensuring quality care and good patient outcomes.

Therefore, the Australian Stroke Coalition (ASC), co-chaired by Stroke Foundation and the Australian and New Zealand Stroke Organisation (ANZSO), has developed a voluntary system for certification of stroke units in Australian hospitals, which has been piloted and evaluated. **The ASC Stroke Unit Certification Program is now an ongoing initiative, with the goal of certifying all centres providing stroke care in Australia by 2030.**

Ensuring all South Australians receive evidence-based Stroke Unit Care

South Australia has:

- › **one comprehensive stroke centre (CSC)** that provides 24/7 thrombolysis and endovascular therapy and full stroke unit care (Royal Adelaide Hospital)
- › **two primary stroke centres (PSCs)**, hospitals that provide 24/7 thrombolysis and stroke unit care (Flinders Medical Centre and Lyell McEwin Hospital)
- › **three stroke capable regional general hospitals (SCRGHs)**, hospitals that are geographically distant from metropolitan centres, which provide 24/7 thrombolysis and stroke care approximating stroke unit care, but from which routine transfer to a PSC is infeasible, due to distance (Berri Hospital and Health Service, Mount Gambier and Districts Health Service and Whyalla Hospital and Health Service).

The Royal Adelaide Hospital has already been successful in achieving ASC Stroke Unit Certification. **State Government investment is now needed to support the two remaining PSCs, and three SCRGHs, through the certification process.**

Implementing a Bridging the Urban and Regional Divide in Stroke Care (BUILDSD) Tele-Stroke Unit Service in South Australian SCRGHs

Unlike in metropolitan hospitals, where stroke patients receive specialist stroke unit care led by stroke specialist medical leads, in many Australian regional hospitals patients are largely cared for by rotating junior medical staff under the supervision of generalists. To help address this and ensure every admitted stroke patient has access to stroke specialist

input during their inpatient stay, regardless of where they live, the *Bridging the Urban and Regional Divide in Stroke Care (BUILDSD) Tele-Stroke Unit service* has been developed.

This model of care, where patients living in regional areas are able to access stroke unit care through metropolitan-based stroke neurology specialists, was developed at Echuca Regional Health, and has been shown to improve diagnostic accuracy and reduce unnecessary resource use, and has been very well received by patients, families and regional health professionals.

Importantly, based on their current staffing composition, none of South Australia's three SCRGHs would be able to achieve Stroke Unit Certification. State Government investment in a BUILDSD Tele-Stroke Unit Service at these hospitals will ensure regional South Australian patients have access to the evidence-based, specialist stroke unit care they need, in order to achieve the best possible outcome post-stroke.

We are calling for South Australian Government investment to support the state's PSCs and SCRGHs through the Stroke Unit Certification process, including the implementation of a BUILDSD Tele-Stroke Unit Service at each SCRGH. This will help to close the gap between guidelines and practice, and facilitate progress towards achievement of the 30/60/90 National Stroke Targets, which have been endorsed by the State Government.



Proposal 3: Enhanced support for stroke recovery: *My Stroke Journey* for every South Australian survivor of stroke and dedicated *StrokeLine* support for South Australia

Investment: \$1.44 million (\$360,000 per year over four years).

Investment in enhanced stroke recovery in South Australia will ensure:

- › every survivor of stroke discharged from hospital in South Australia receives a copy of *My Stroke Journey*
- › all South Australian *StrokeLine* callers receive a same-day priority response
- › more South Australians who are impacted by stroke are able to access the information and support they need in a timely manner, including for issues such as mental ill health
- › all South Australian survivors of stroke receive the information they need to help prevent secondary stroke.

Survivors of stroke, their families, friends and carers, need access to ongoing information and support as they navigate life after stroke.

Stroke Foundation delivers a suite of products and services for survivors of stroke, their families, carers and friends, and the general public, including its flagship *StrokeLine* inbound information and support service. *StrokeLine* health professionals provide expert information, advice, support and referral on stroke prevention, treatment and recovery via telephone, email, social media and Stroke Foundation's recovery website *EnableMe*.

StrokeLine is a highly regarded, trusted service:

- › In 2023, 89 percent of clients said they would recommend it to someone else. This was similar to 2022, indicating the service delivers a consistent and positive user experience.
- › When advice was provided to clients about what they could do to resolve their issue, 77 percent acted on this advice.
- › In 2023, there was a 34 percent increase in callers to *StrokeLine* asking for advice on signs of stroke before calling an ambulance.

Importantly however, we know from our own existing services' data and internal evaluation of the service, that there is unfulfilled demand for *StrokeLine*, with the current service unable to adequately meet the needs of specific groups within our community:

- › *StrokeLine* provided information and support to almost 2,500 survivors of stroke, their families, friends and carers, and the public during 2023; however, this is only a small proportion of the Australians who experience a stroke for the first time each year, and are living with stroke in our community.
- › In the last three years, there has been a significant increase in the number of complex calls into *StrokeLine*. This includes vulnerable survivors calling the service for advice and support, who are facing challenges with issues such as anxiety, depression and suicidal ideation, loss of independence and finances, strained relationships and social isolation, in addition to trying to manage the impact of their stroke. These calls are longer in duration and often require follow-up.

Stroke Foundation's My Stroke Journey is a resource delivered by our hospital partners in the first few days after a person's stroke, which is used throughout their admission in education and care planning. This free resource also supports the transition from hospital to the community, and includes information on preparing for discharge and available supports and services.

My Stroke Journey is now a suite of resources, with versions available in both standard and easy English, Italian, Arabic, Chinese, Greek, Hindi, Korean, Vietnamese and for Aboriginal and Torres Strait Islander peoples, and parents and carers of children who have had a stroke.

We know that 94 percent of those who receive *My Stroke Journey* find it useful, and over 75 percent refer to it after going home. In addition, the proportion of survivors who receive advice on (1) stroke risk factors and (2) secondary stroke prevention and recovery, at discharge, has increased by 20 percent and 13 percent, respectively, as a result of *My Stroke Journey*.

In 2023, this valuable resource was delivered to only 2,170 South Australian survivors of stroke. Importantly, we know that many of the people who need this resource the most are not receiving it.

What will enhanced support for stroke recovery in South Australia deliver?

Dedicated, same-day StrokeLine Service for South Australia

We will deliver **dedicated StrokeLine support and a same-day priority response for South Australian callers**, to ensure clients are supported to access the information and services they need in a timely way. We will also **facilitate GP connection and liaison for clients with complex needs**.

Currently, around 1 in 6 calls (17 percent) to *StrokeLine* from survivors of stroke, their families and carers are about mental ill health, including depression, anxiety and suicidal thoughts. As such, the **mental health capability of StrokeLine will be strengthened**.

A targeted community awareness campaign to raise the profile of StrokeLine will be delivered, with a focus on promoting the service to hospital clinicians and inpatients, primary care (GPs), multicultural organisations, Aboriginal Community Controlled Health Organisations, and survivors of stroke, their families and carers, **in identified stroke hotspots**.

My Stroke Journey for every South Australian survivor of stroke

We will identify and directly engage with South Australian hospitals that are not delivering *My Stroke Journey*, prioritising those hospitals located in stroke hotspots.

Educational and promotional activities will be employed within these hospitals to ensure **every survivor of stroke** discharged from hospital in South Australia **receives a copy of My Stroke Journey that is in the language and medium of their choice, and is culturally appropriate**.



Evaluation

A formal evaluation plan will be developed, and specific outcomes to be measured will be determined at the commencement of the initiative. These could include, but not be limited to:

- › the number of South Australian clients accessing *StrokeLine*
- › the number of survivors of stroke in South Australia receiving *My Stroke Journey*
- › client satisfaction with *StrokeLine*
- › the number and type of supports provided by *StrokeLine* (e.g. referrals to other service providers, or provision of information on secondary stroke prevention)
- › knowledge, self-efficacy, and health literacy for survivors of stroke using *StrokeLine*
- › health-related quality of life, emotional wellbeing, levels of distress, and rates of anxiety and depression for survivors of stroke using *StrokeLine*

- › quality of life and physical and emotional wellbeing for family members or carers using *StrokeLine*
- › the number of South Australians receiving a secondary stroke prevention intervention.

We are calling on the South Australian Government to invest in enhanced support for stroke recovery, which will deliver a dedicated, same-day *StrokeLine* Service for South Australia, and ensure every survivor of stroke discharged from hospital in South Australia receives a copy of *My Stroke Journey*. This will mean more South Australians who are impacted by stroke are able to access the information and support they need in a timely manner, which will have benefits for survivors of stroke, their families and carers, and our community, as well as our state's health system and economy.



Case study 2: *StrokeLine* in action – Greta’s story

Greta rang *StrokeLine* and spoke to Siobhan, a *StrokeLine* health professional, in March 2024.

After a stroke in October 2023, Greta had changes to her vision and mood, as well as ongoing fatigue.

During the call, Siobhan worked to make Greta feel safe to talk about her concerns. Greta lived alone in Darwin, was no longer able to drive, and reported feeling socially isolated. She disclosed her previous suicide attempts and recent thoughts about ending her life. Siobhan listened, allowing Greta all the time she needed.

Greta and Siobhan talked about the role of hope in stroke recovery, and in managing depression and suicidal thoughts. Siobhan provided options for further support, referring Greta to *Lifeline*. She also encouraged Greta to make an appointment with her GP to talk about her mental health. Siobhan suggested a medication review and accessing professional support through a mental health care plan.

Siobhan understood the importance of social connection for Greta. She suggested talking to *FriendLine* for social support. She found a local stroke support group for Greta to join.

With Greta’s most pressing concerns dealt with, Siobhan broadened the conversation. Greta was unsure of her stroke risk factors. She spoke about wanting to get her heart checked. Siobhan provided secondary stroke prevention education. She again encouraged Greta to make an appointment with her GP, and talked about the things Greta could do to reduce her stroke risk.

Siobhan also identified the need for further rehabilitation. She talked with Greta about accessing allied health services through a chronic disease management plan.

As Greta couldn’t drive to appointments, Siobhan provided information on local transport options. She also provided details on how to access support through Centrelink.

“

Stroke Foundation’s *StrokeLine* Service was incredibly helpful. Siobhan was able to provide me with valuable information, and connect me with the services I needed. But more than that, she gave me hope that things could get better.

”

Survivor of stroke, Greta



StrokeLine health professional,
Siobhan McGinniss

Proposal 4: National Stroke Week Peer Connection Grants

Investment: \$400,000 (\$100,000 per year over four years).

Investment in Stroke Week Peer Connection Grants in South Australia will ensure:

- › more South Australian survivors of stroke, and their family members and carers, are able to enjoy the many benefits of peer support
- › more survivors, and their family members and carers are able to connect with and learn from others in a similar situation, share experiences, and gain confidence in their journey post-stroke
- › improved community awareness of what stroke is, how to reduce stroke risk, how to recognise the F.A.S.T. signs of stroke, and the importance of calling triple zero (000) immediately.

A positive relationship has been demonstrated between perceived social support and the health-related quality of life of survivors of stroke,¹¹ and there is growing evidence that peer-led interventions may be an effective way of helping survivors of stroke cope with the devastating consequences stroke.^{12, 13}

Peer support groups for survivors of stroke and carers can offer therapeutic benefits including empowerment and inspiration, a sense of belonging, learning new ways to cope, feeling helpful, feeling secure, being able to express feelings, and a sense of increased agency and independence.¹²

South Australian Government investment is needed to ensure the benefits of peer support are available to as many South Australian survivors of stroke, and their family members and carers, as possible.

NATIONAL STROKE WEEK
5-11 AUGUST 2024

KEEP LOOKING AT YOUR MATE.

IT COULD SAVE THEIR LIFE.

Know the F.A.S.T. signs of stroke.
FACE. ARMS. SPEECH. TIME.
You could save a life. Call 000.

Stroke FOUNDATION
MAJOR SPONSOR
EMVISION
SUPPORTING SPONSORS
abbvie precision
Learn more

National Stroke Week Peer Connection Grants

Stroke Foundation's National Stroke Week is our annual awareness campaign that **encourages the community to learn the F.A.S.T. (Face, Arms, Speech and Time) signs of stroke** so they can save a life in the event that someone they know experiences a stroke. All funds raised through National Stroke Week help Stroke Foundation continue to promote F.A.S.T. awareness in the community.

National Stroke Week Peer Connection Grants will be established to fund South Australian community groups and organisations that currently facilitate social connection and peer support for survivors of stroke, and their family members and carers, to **undertake events during National Stroke Week that promote greater community awareness and understanding of stroke.**

Support groups eligible for these grants will include those representing priority groups (such as Aboriginal, culturally and linguistically diverse and regional and rural South Australians), that will be able to develop and deliver events that are tailored to address the needs and interests of their communities.

We are calling on the South Australian Government to invest in the establishment of National Stroke Week Peer Connection Grants, which will ensure more South Australian survivors of stroke, and their family members and carers, are able to enjoy the significant benefits of peer support. These grants will also facilitate greater community awareness of what stroke is, how to reduce stroke risk, how to recognise the F.A.S.T. signs of stroke, and the importance of calling triple zero (000) immediately.





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**Will you help? We invite you to have a conversation
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