



# South Australia Pre-Budget Submission

2026-27

*South Australian survivor  
of stroke, Paul Bovington.*



Survivors of stroke, Shannon Nelson (left), Brooke Parsons (middle) and fundraiser Dan Maitland.

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

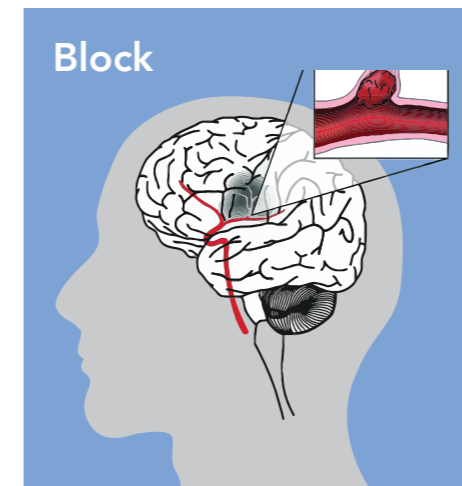
We partner with survivors of stroke, carers, health professionals, government and the community to reduce the incidence and impact of stroke for all Australians.

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

For 30 years, we have championed breakthrough stroke research, successfully advocated for access to innovative treatments, increased public awareness in stroke prevention and recognition, and educated thousands of health professionals to deliver best-practice care.

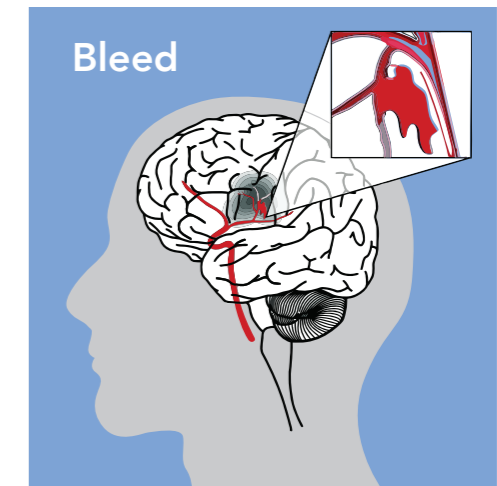
Every achievement takes a united team of stroke champions working together with a single voice and purpose: survivors of stroke with their families and carers, health professionals, researchers, volunteers, advocacy bodies, generous donors, corporate Australia, government and philanthropic partners.

### 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 have to act now

In 2023, there were 3,698 stroke events in South Australia,<sup>1</sup> 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 Australia<sup>1</sup> – 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,<sup>1</sup> and many don't know it. In addition, 153,500 South Australians are daily smokers and 173,400 have high cholesterol<sup>1</sup> – 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.

In 2023, the lifetime healthcare costs to government associated with strokes that occurred in South Australia were \$441 million, including \$344 million in hospital costs.<sup>1</sup> Therefore, the economic benefit of South Australian Government investment in initiatives to reduce the impact of stroke are clear.

South Australian Government investment in stroke management procedures, protocols and infrastructure is delivering results. The state is leading the nation with regard 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 funding proposals in this submission will:

- › maximise the State Government's investment in the South Australian Telestroke Service, ensuring residents in regional communities covered by the Service know the signs of stroke, and the importance of calling 000 (triple zero) immediately
- › ensure South Australians who receive excellent stroke treatment and care in hospital are able to access the information they need in a timely manner, and are supported in their transition from hospital to home and onto recovery.

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



Survivor of stroke, Stewart Greig.

## The hard facts



Almost **4,000** stroke events in SA in 2023<sup>1</sup>



There are almost **35,000 survivors of stroke** living in SA<sup>1</sup>



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



More than **80 percent of strokes** can be prevented<sup>2</sup>

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**

**\$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

Stroke Foundation is seeking South Australian Government investment in our proven, highly effective and evidence-based programs and resources, in order to meet the urgent needs of survivors of stroke, their families and carers.

### 1. F.A.S.T. (Face, Arms, Speech, Time) Community Engagement Program

**Investment: \$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 000 (triple zero) immediately, regardless of where they live.

### 2. Enhanced support for stroke recovery: *My Stroke Journey* for every South Australian survivor of stroke

**Investment: \$92,000 (\$23,000 per year over four years).**

Ensure more South Australians who are impacted by stroke are able to access the information they need in a timely manner, supporting the transition from hospital to home and on to recovery, and reducing the risk of recurrent stroke.

### 3. Support for the Young Stroke Service

Ensure the sustainability of the Young Stroke Service (YSS), Australia's first health service dedicated to helping young survivors of stroke aged 18 to 55, which is operating in South Australia. YSS is working with young South Australians who have had a stroke, as well as their supporters and health professionals, providing them with the information, support and services they need as they navigate life after stroke.

# Proposal 1: F.A.S.T. (Face, Arms, Speech, Time) Community Engagement Program

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

## Investment in a F.A.S.T. Community Engagement Program will:

- › mobilise communities through a grassroots engagement program focused on stroke 'hotspot' regions and priority populations at higher risk of stroke
- › drive public awareness and inspire action through a mainstream media campaign, emphasising the F.A.S.T. message through stories told by people impacted by stroke
- › result in an increase in the awareness of the F.A.S.T. signs of stroke in the South Australian community, earlier engagement of ambulance services and quicker presentation to hospital
- › increase the unprompted awareness of at least one F.A.S.T. sign of stroke in South Australia from 66 percent to 75–78 percent.

Stroke is a medical emergency. When someone has a stroke, every minute counts. **Faster diagnosis and treatment saves lives and reduces disability.**

In 2023, the lifetime healthcare costs to government associated with strokes that occurred in South Australia were \$441 million, including \$344 million in hospital costs.<sup>1</sup>

**Prompt access to stroke treatment means decreased costs for our health and disability systems.**

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.

The 2025 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 Australian community, and showed that one in three South Australians are unable to name any of the F.A.S.T. signs of stroke (34 percent).<sup>3</sup> Only 11 percent of South Australians are aware of all three signs of stroke<sup>3</sup> (up from 5 percent in 2023).<sup>4</sup>

**It is critical South Australians understand that if they or someone they know experience the signs of stroke, they must call 000 (triple zero) immediately.** The South Australian Telestroke Service is ensuring those in regional areas of the state have 24/7 access to stroke specialists, so it is essential they know the F.A.S.T. message.



**1 in 3** South Australians are unable to name any **F.A.S.T. signs of stroke**<sup>3</sup>



**Only 11 percent** of South Australians are aware of all **3 F.A.S.T. signs of stroke**<sup>3</sup>



**Only 42 percent** of South Australian stroke patients arrive at hospital within the recommended 4.5 hour window for **clot-dissolving treatment**<sup>5</sup>

## The program

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, nationally<sup>6</sup> and internationally,<sup>7,8</sup> 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.

Therefore, **Stroke Foundation is calling on the South Australian Government to invest in a F.A.S.T. Community Engagement Program.**

We will **engage and partner with existing community groups, services and stakeholders to share the F.A.S.T. signs of stroke.** A network of local volunteers and stroke champions, many with lived experience of stroke, will be recruited, trained and supported to deliver the program. Activities will include **StrokeSafe community presentations, workplace engagement and targeted events.** These local champions will lead grassroots engagement to creatively raise awareness of the signs of stroke and stroke prevention strategies.

A **state-wide, integrated multi-channel advertising campaign** will amplify the F.A.S.T. message across TV, radio, outdoor, digital and social media channels. This will be complemented by a **mainstream media campaign** featuring stories of survivors of stroke, and calls to action encouraging residents and workplaces to actively support the campaign.

This program will **target stroke 'hotspot' areas** across South Australia, including South Australian Telestroke Service catchment areas

and other high need locations, as well as **priority populations at higher risk of stroke**, including Aboriginal and Torres Strait Islander, multicultural and regional, rural and remote communities.

**We are calling on the South Australian Government to invest in a F.A.S.T. Community Engagement Program to increase the number of South Australians who know what stroke is, how to reduce stroke risk, how to recognise a stroke when it occurs, and how vital it is to call 000 (triple zero) immediately. This program will ensure life-saving information on stroke reaches more South Australians and will deliver economic benefits for our health and disability systems.**

## Learn the F.A.S.T. signs of STROKE



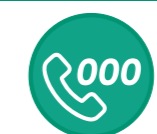
**F**ACE  
*drooped?*



**A**RM  
*can't be raised?*



**S**PEECH  
*slurred or confused?*



**T**IME  
*is critical! Call 000.*

If you see any of these signs  
**Act FAST call 000 (triple zero)**



## Case study 1

### F.A.S.T. in action: Beth's story

Beth Browning was just 19 when she had a stroke in 2019.

"I was lying in my bed and started to feel dizzy. I tried to type something on my phone, but couldn't. I went downstairs to tell my parents, but when I tried to speak, I couldn't get the words out," said Beth.

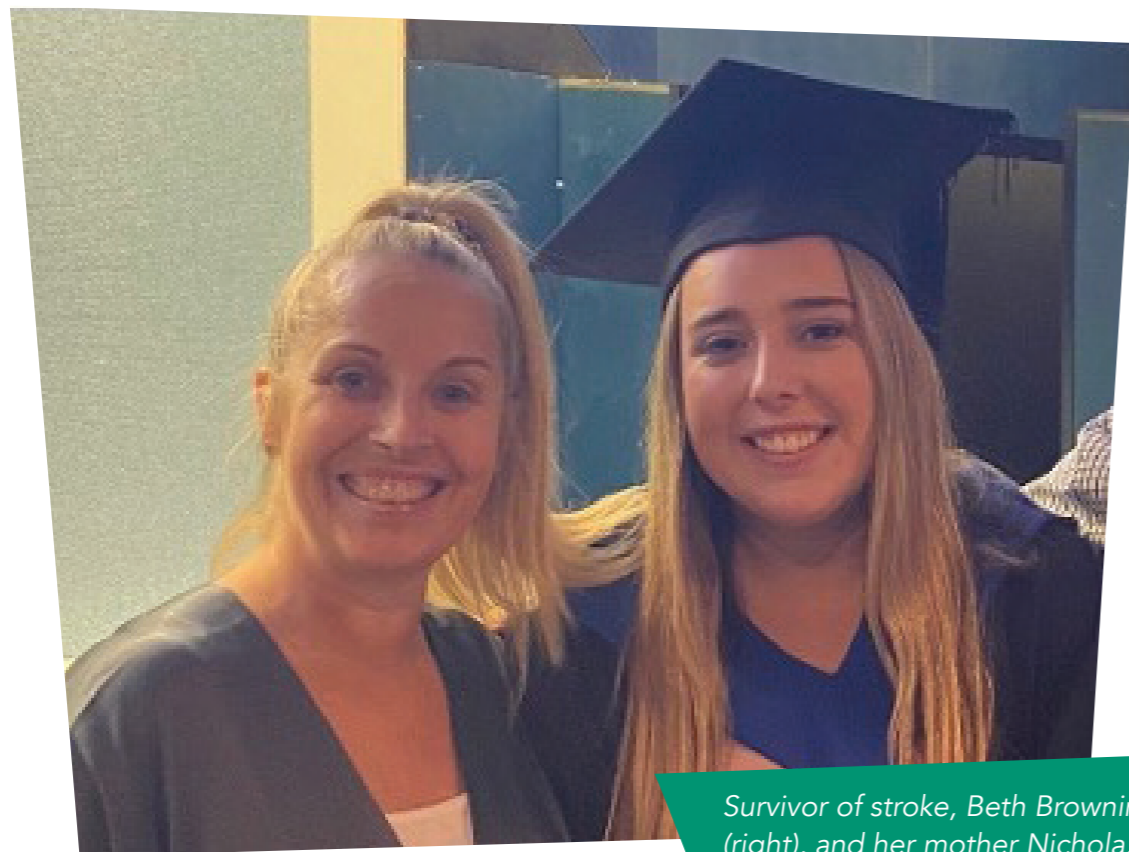
Fortunately, she was a nursing student, and her mother was a nurse, and they were both quick to recognise the signs of stroke.

Beth was rushed to the hospital, where she underwent CT and MRI scans that confirmed she was having a stroke.

Twelve hours after her stroke, Beth's speech began to recover, and she started to feel better.

Beth has no permanent cognitive deficits or motor skill impairment as a result of her stroke, and she has made an excellent recovery; however, she still battles fatigue and headaches.

"I do consider myself extremely lucky. I think it's really important to raise community awareness about the signs of stroke, and the fact that stroke can affect anyone, young or old."



Survivor of stroke, Beth Browning (right), and her mother Nichola.

Fides Camino and Siobhan McGinniss from Stroke Foundation's StrokeLine team.



## Proposal 2: Enhanced support for stroke recovery – My Stroke Journey for every South Australian survivor of stroke

**Investment: \$92,000 (\$23,000 per year over 4 years).**

Investment in enhanced support for stroke recovery in South Australia will ensure:

- › we can make *My Stroke Journey* free of charge to South Australian hospitals, removing barriers to delivery
- › we can provide education and practical support to South Australian hospitals to ensure every survivor of stroke receives a copy of *My Stroke Journey* that is in the language and medium of their choice, and is culturally appropriate
- › every survivor of stroke discharged from a South Australian hospital receives a copy of *My Stroke Journey*, supporting the transition from hospital to home and on to recovery
- › all South Australian survivors of stroke, families and carers have the information they need to take their place at the centre of their care, look after their health, reduce their risk of another stroke and live a good life after stroke.

### We need to enhance support for stroke recovery to better meet the needs of our community.

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

People are at higher risk of stroke after their first stroke. Four in 10 survivors of stroke will go on to have another stroke,<sup>9</sup> and recurrent stroke is more likely to be fatal or cause major disability.<sup>10</sup>

Survivors of stroke need information and education about stroke risk factors, and strategies, including behaviour modification and blood pressure-lowering, lipid-lowering and antithrombotic or anticoagulation medications, that can reduce their risk of recurrent stroke.

The *Living Guidelines for Stroke Management* recommend that **all survivors of stroke and their families and carers should be offered information tailored to meet their individual needs, using relevant language and communication formats.** Despite this, the most recent Stroke Foundation National Stroke Audits show that only 62 percent

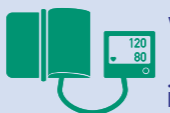
of acute patients<sup>5</sup> and 61 percent of rehabilitation patients<sup>11</sup> received this information.



**94 percent** of those who receive *My Stroke Journey* find it useful



Over **75 percent** of those who receive *My Stroke Journey* refer to it after going home



The proportion of survivors who receive advice on stroke risk factors at discharge, has increased by **20 percent** as a result of *My Stroke Journey*



The proportion of survivors who receive advice on secondary stroke prevention and recovery at discharge, has increased by **13 percent** as a result of *My Stroke Journey*

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

**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. The *My Stroke Journey* suite is complemented by other resources, including the *Aphasia Handbook*.

**Importantly, we know that many of the people who need this valuable resource the most are not receiving it.**

Hospital health professionals have told us that health service expenditure approval processes greatly increase the time it takes to order *My Stroke Journey*. This can lead to delays in ordering, or orders not being made, meaning patients don't receive the stroke information they need.

**We will identify and directly engage with South Australian hospitals that are not delivering *My Stroke Journey*.**

Educational and practical support will be provided to 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.

By removing barriers to the delivery of this resource, more South Australian survivors of stroke will be supported to transition from hospital to home and on to recovery, and have the information they need to look after their health, reduce their risk of another stroke and live a good life after stroke.

**We are calling on the South Australian Government to invest in enhanced support for stroke recovery, which will 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 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.**



## Proposal 3: Support for the Young Stroke Service

Stroke can happen at any age. It was estimated that in 2023, 1 in 4 (25 percent) of those who had a first-ever stroke in Australia were under the age of 65 years.<sup>1</sup>

We still don't fully understand why young people have strokes or how to best support them as they recover. Right now, most services are not made for young people, and 88 percent of young survivors of stroke say they don't get the help they need.

The Young Stroke Service (YSS) is Australia's first health service dedicated to helping young survivors of stroke aged 18 to 55. YSS works with young South Australians who have had a stroke, as well as their families, carers and health professionals, and offers a range of supports to help them in their recovery, including:

- › tests and therapy to help with memory and emotions
- › support to help with returning to work and returning to driving
- › information on the National Disability Insurance Scheme (NDIS)
- › trustworthy information about stroke and stroke recovery.

Staff from the YSS team work with young survivors of stroke to review their goals with them and develop a plan to address their needs. This may involve more assessments, referrals to other services or treatment from within the YSS.

Services are available in-person or via telehealth. Survivors who have difficulty with communication and thinking are given support to take part in the service.

**Importantly, while we know a lot about stroke in young people, there is still more to learn.**

Unfortunately, doctors often misdiagnose strokes in people aged 18 to 55, and young survivors of stroke say health services do not always cater to their needs.

YSS connects survivors of stroke, their families, carers and clinicians with researchers. More research will help us understand the cause and lifelong effects of stroke, and can then help improve health services.

**YSS is funded by a 2020 MRFF Rapid Applied Research Translation Grant until December 2026. Sustainable funding for this ground-breaking service must be secured, to ensure young South Australians impacted by stroke, and their supporters and health professionals, continue to receive the information, support and services they need.**

**We are calling on the South Australian Government to invest in the Young Stroke Service, which will ensure more young South Australian survivors of stroke are supported to manage their stroke recovery, achieve better outcomes, return to work (where possible), and resume social and community participation.**

## Case study 2 Young Stroke Service in action: Emma's story\*

Emma was 37 years old when she had a stroke.

Prior to her stroke, Emma was a keen dancer and 'parkrun' participant and was working as a specialist language teacher in a primary school.

Emma developed symptoms of neck pain, nausea, vertigo and loss of balance. She called an ambulance and presented to the nearest emergency department. It was there that her stroke was diagnosed. After a brief hospital stay, Emma went home with short-term support from a virtual rehabilitation service. She did not meet the eligibility criteria for referral to the National Disability Insurance Scheme (NDIS). When her rehabilitation finished, she continued to notice challenges and met with the Young Stroke Service (YSS).

YSS staff guided her through an unmet needs screening tool, which was specifically designed for young people who have had a stroke. Emma explained that she was able to manage simple day to day tasks since the stroke, but felt extreme fatigue, particularly with social interactions. She was also experiencing heightened sensitivity to noise and light. Emma was concerned that she would not be able to return to work in a busy classroom.

**"It's really hard to convey to people I am constantly dealing with what my head is doing. I'm constantly monitoring what my body is doing. I'm constantly thinking 'can I factor in a food shop as well as catching up with a friend today – how much will that wipe me out?'"**

The YSS listened to Emma's concerns and helped her to develop a plan to enable her to do activities that were important to her. With support from an occupational therapist, Emma planned her daily routine so that she could pace herself and manage fatigue levels.

*\*Name has been changed to maintain confidentiality*

She then began practising simulated work tasks, slowly increasing her tolerance for noise, light and concentration. She made a plan for a gradual return to work and was given helpful advice about how to talk to her employer about what she needed to return to work, such as shorter work days.

Emma attended group exercise sessions led by a physiotherapist and exercise physiologist. In this group she was able to connect with other survivors of stroke, helping her to feel less alone. The exercise helped her to build the physical strength and endurance that she needed to access her work environment. With training, she was able to walk up and down several flights of stairs, including the ones at school.

The doctor at the YSS helped Emma to access income protection insurance payments, to help with finances during the time she was not able to work her usual hours.

Emma also found benefit in seeing a YSS neuropsychologist to help understand and manage low mood, and learn strategies to manage anxiety about her health.

Emma has now returned to work as a classroom teacher in a school. She still needs to carefully manage fatigue, but is gradually increasing her hours. She has returned to activities such as 'parkrun' and attending theatre shows, but needs to be mindful of energy demands throughout the week.

**"The Young Stroke Service has changed my whole outlook...without it I wouldn't know how to go about my day in a way that best supports being functional...I have been learning things every single time I come."**

## References

1. Kim J, Neville E, Dalli L et al. on behalf of the Stroke Foundation. 2024. Economic Impact of Stroke Report 2024. Melbourne, Australia.
2. O'Donnell MJ, Chin SL, Rangarajan S et al; INTERSTROKE investigators. 2016. Global and regional effects of potentially modifiable risk factors associated with acute stroke in 32 countries (INTERSTROKE): a case-control study. *Lancet*. 88:761-775.
3. YouGov. 2025. Stroke Foundation F.A.S.T. Signs and Stroke Awareness Survey Report 2025.
4. YouGov. 2023. Stroke Foundation F.A.S.T. Signs and Stroke Awareness Survey Report 2023.
5. Stroke Foundation. 2023. National Stroke Audit Acute Services Report 2023. Melbourne, Australia.
6. Stroke Foundation. 2014. Evaluation of F.A.S.T. Campaign – Report to Australian Government Department of Health.
7. Nicolson M. 2022. 2019-2021 Stroke FAST Campaign Evaluation: Interim report. Wellington, New Zealand: Te Hiringa Hauora | Health Promotion Agency.
8. Fuel. 2016. Evaluation of Department of Health UK Act F.A.S.T. Campaign (February 2009 – March 2016).
9. Hardie K, Hankey GJ, Jamrozik K et al. 2004. Ten-year risk of first recurrent stroke and disability after first-ever stroke in the Perth Community Stroke Study. *Stroke*. 35:731-735.
10. Rothwell PM. 2007. Making the most of secondary prevention. *Stroke*. 38:1726.
11. Stroke Foundation. 2024. National Stroke Audit Rehabilitation Services Report 2024. Melbourne, Australia.



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**Will you help? We invite you to have a conversation  
with us today, to learn more.**

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