

Yarning up After Stroke

The Yarning up After Stroke Project aims to:

- **Empower** Aboriginal people who have had a stroke to decide what they want and need in their **stroke recovery**
- Develop a **culturally safe** community-built stroke recovery tool to maximise the **health & well-being of** Aboriginal people living with stroke
- The **Stroke Navigator** role has been proudly **developed** & created by many **Aboriginal people with lived experience of stroke** living on Gomeroi/Gamilaraay lands.

The **Stroke Navigator** is designed to **support & empower** people during their **stroke recovery** – from **hospital to back home in the community**.



www.yarningupafterstroke.com.au

Stroke Navigator – Kazzi-Jo Dufty

The **Stroke Navigator role** was designed within the **Yarning up After Stroke Project**, which is a **research project led by Hunter New England Local Health District** and funded by a Medical Research Future Fund Grant.

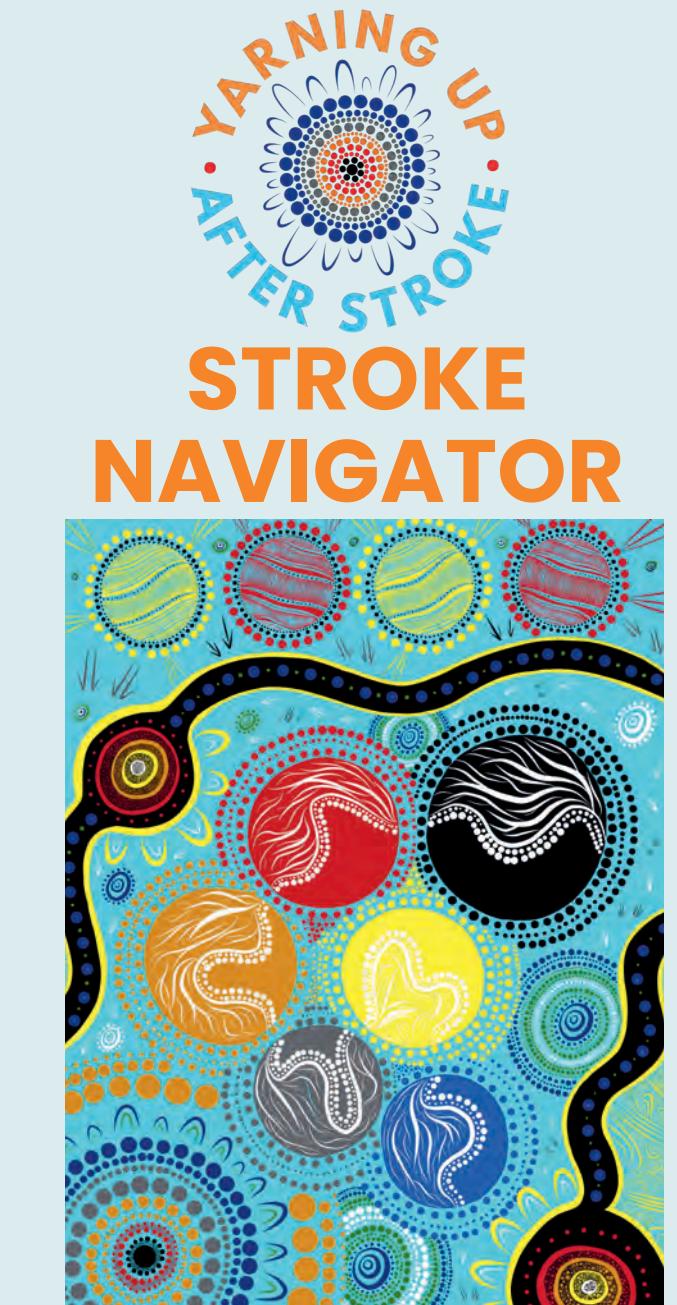
An important part of this **research project** is to **understand how helpful this role is**.

To receive support from the Stroke Navigator you must:

- Be **Aboriginal and/or Torres Strait Islander**
- Be **18 years old or older**
- Have had a **stroke** within the **past 6 months**
- Be **living on Gomeroi/Gamilaraay lands** within the Hunter New England Local Health District.
- **Yarn** with an Aboriginal researcher **3 times** over three months and chat about your health and emotional well-being (**to complete 2 surveys**) at two different times.
- The third yarn will be to talk about your **experience** receiving support from the stroke navigator

**To find out more
Contact the Yarning up After Stroke
Team on 0487 133102**

Hunter New England Human Research
Ethics Committee 2020/ETH02782
2020_ETH02782-YuAS_StrokeNavigatorBrochure_v2_15102025



Australian Government
Department of Health and Aged Care



During your **Hospital stay** the Stroke Navigator will **check in** with you regularly and can **offer**:

SUPPORT

Support you and your family to access & receive **culturally safe health care**.

Support you & your family in **finding culturally safe spaces to yarn together** when they come to visit.

Provide support to **link in with** your **GP & Aboriginal Medical Service** before your discharge from hospital.

Provide **support to you and your family** during **discussions** with health staff.



MONITOR

Monitor your progress while you are in hospital.

ADVOCATE



Advocate for you & your family with **Drs & health staff**.



Attend hospital case conferences & discharge planning meetings to provide **advocacy** as needed.



EXPLAIN



Explain & provide education to you & your family about **hospital plans & processes** regarding your admission.



Explain what is happening, why & what **tests** are needed. e.g MRI



Support and explanation of the **referral options & processes** for your **discharge** home.

When you are back Home the Stroke Navigator can offer:



Regular check-ins with you and your family **in person, over the phone or online**.



Support you with **health appointments**.



Check on your referrals & follow up if needed.



Provide **education to family, friends & Community** about **changes** that have happened **after your stroke**.



Provide **education on stroke signs and symptoms** & reducing your **stroke risk**.



Help **connect** you with **other people who have had a stroke & group** programs.



Connect you with **services** that provide **transport**.

