

CONCUSSIONS: Understanding and Supporting our Students

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Concussions, also known as traumatic brain injuries, have been referred to as the “silent epidemic” as the injury is not directly visible (Goldstein, 1990). Although they can range from mild to severe, the word concussion is most often associated with a mild traumatic brain injury. A concussion is described as an injury to the brain caused by a blow or jolt to the head or body, leading to a disruption in normal brain functioning. Concussions affecting school-aged children go beyond sports injuries and can be caused by: car accidents, fights, falls, abuse, and collisions during recreational play (Davies, 2011). An individual does not necessarily have to lose consciousness to sustain a concussion (brainstreams.ca, n.d.).

Every year approximately 165,000 Canadians sustain concussions although this is likely an underestimate as concussions are often underreported (Reddy et al., 2008). Approximately 6500 of those affected by concussions are permanently disabled; they are not able to return to their pre-injury lifestyle. Concussions are the number one killer and disabler of children and adults under the age of 35 (brainstreams.ca, n.d.).

The symptoms of concussions can vary from person to person; two people with concussions may look very different. The effects can last from a few minutes to days or weeks.



Concussions



SIGNS & SUPPORTS

Symptoms that can possibly indicate that a concussion has occurred:

- Nausea/ vomiting
- Dizziness
- Stumbling and/or clumsiness
- Double or fuzzy vision
- Headache
- Unusual drowsiness
- Slurred speech
- Numbness in arms or legs

If you suspect a student has sustained a concussion, it is imperative that medical attention is sought immediately. Symptoms can take time to appear and because they are often cognitive in nature, teachers may be the first person in a school to notice changes in a student. For example, a student may sustain a hit at recess but not show symptoms until it is time to concentrate or engage in a learning activity an hour later.

A number of changes can occur following a concussion and can include:

- Physical changes: tiredness; lack of interest; headaches; awkward movements; slowed reactions; heightened sensitivity to noise or light.
- Cognitive changes: forgetfulness; difficulty learning new material; word-finding difficulties; problems with organizing materials; being easily distracted.
- Emotional changes: unable to deal with minor changes in the environment or daily routine; little or no expressed emotion; depression.

- Behavioural changes: irritability; inability to deal with unexpected event.

Symptoms are often brief, typically resolving in 7–10 days (McCrory et al., 2013). Recovery from a concussion varies but most people will recover completely. According to a Canadian study by Barlow et al. (2010), only 13% of children who suffered a concussion continued to have symptoms 3 months post-injury.

If a student has suffered a concussion, this information needs to be shared with the school. The school may need time to plan for the student's return and implement appropriate supports that are essential to his/her recovery. These supports and strategies may need to be adjusted as the student recovers.

Once a student is able to return to school, he/she may need:

- Rest breaks throughout the day
- A shortened school day
- More time to complete tests and assignments, or permission to complete assignments in smaller chunks
- A quiet place to work
- Reduced assignments (particularly those related to reading, writing or computer work)
- Help with organization
- Removal from gym class or physical activities during recess until the student is symptom free

RESOURCES & REFERENCES

Resources

Brain Injury Association
<http://brainstreams.ca/>

Braintrust Canada
<http://braintrustcanada.com/>



References

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