

## Teaching and Counselling Kids with a Concussion

Each year, students we teach and counsel are involved in incidents which expose them to the risk of concussion. A concussion is an injury to the brain caused by a blow or jolt to the head, face or neck. A concussion causes disruption of normal brain functioning. Contrary to popular belief, an individual does not have to lose consciousness to sustain a concussion.

Concussions can occur in sports (eg: rugby, boxing, cycling, and soccer), or as a result of a motor vehicle crash, an assault, or a fall. A concussion is a brain injury, and all brain injuries should be taken seriously.

Symptoms of concussion can vary from one person to another and can last for minutes, hours or weeks. Teachers are more likely to see the long term effects of concussion which can include:

- Persistent headaches
- Fatigue
- Dizziness/light headedness
- Increased sensitivity to light and noise
- Reduced memory
- Reduced concentration/increased distractibility
- Irritability and low frustration
- Anxiety or depression
- Sleep disturbances

If a student sustains a concussion at home or at school, parents need to seek medical attention immediately and inform their child's school of the outcome as soon as possible.

Teachers need to be aware of the physical, cognitive, academic, emotional and behavioural outcomes of concussion so they can accommodate students with concussion in their classrooms. Outcomes may be subtle and temporary, but may significantly impact a student's performance. Teachers can objectively evaluate pre and post- concussion performance in these domains. Development of an IEP and a School Based team process may be necessary.

Signs that a student may have experienced concussion may also include decreased academic achievement, attendance issues, late or incomplete homework, difficulty multitasking, understanding concepts, and organizing thoughts and ideas. As counsellors, we can suggest the following strategies:

- Taking a few days or weeks off school
- Returning to school gradually, starting with shorter days
- Having reduced academic expectations or course/assignment load
- Having a learning resource teacher/counsellor act as case manager who is the primary contact and who monitors student's progress and strategies; and stays in touch with student's parents
- Participating in light aerobic activities rather than sports or regular PE with NO CONTACT sports until symptom free
- Abstaining from all recreational drinking and drug use

PE teachers and coaches need to be particularly aware of the signs, symptoms, and outcomes of concussion because the risk of concussion is higher when students are engaged in athletics. There is a higher risk of re-injury when a student is symptomatic.

Teachers can adapt the learning environment by allowing the student to work in a quiet place and allowing for breaks during the school day; reducing number of assignments, allowing extra time for in class assignments, homework and tests, reducing stressful situations, and allowing the student to work with a peer. Counsellors can provide explicit and supportive feedback on a regular basis.

For students who experience persistent symptoms, a referral to an interdisciplinary rehab team for further assessment, including a neuropsychological assessment, is appropriate.

It is important to:

- Recognize the concussion and its outcomes
- Reassure the student that everything will be done to accommodate their difficulties
- Expect a positive outcome

There are many on line resources available on this topic. A concussion management “quick reference” card is available from the BC Brain Injury Association at 1-877-858-1788 or through their website at [www.bcbraininjuryassociation.com](http://www.bcbraininjuryassociation.com)