Campaign Toolkit

BC Concussion Awareness Week
September 27 to October 3, 2026

BC INJURY research and prevention unit

CATT © | CONCUSSION AWARENESS TRAINING TOOL

Summary

This year's BC Concussion Awareness Week will take place from **September 27 to October 3, 2026.**

The information, tools, and resources in this toolkit are intended to help increase British Columbians' knowledge of concussion.

Objectives

- To increase British Columbians' knowledge around concussion recognition, diagnosis, treatment, and management by providing relevant, credible, and evidence-based concussion information and resources for British Columbians of all ages
- To promote the Concussion Awareness Training Tool (CATT) as the central place to enable British Columbians in different roles and settings to receive evidence-based concussion information and education
- To promote a culture of safety by changing British Columbians' behaviours around concussion recognition, diagnosis, treatment, and management through awareness as activated knowledge

Campaign partners

- Ministry of Health
- Provincial Health Services Authority
- Fraser Health
- Interior Health
- Island Health
- Northern Health
- Vancouver Coastal Health
- Indigenous Sport, Physical Activity & Recreation Council
- BC Concussion Advisory Network, including but not limited to:
  - BC School Sports
  - Doctors of BC
  - UBC
  - Child Health BC
  - Escape Velocity (EV)/ DEVO Cycling Team
  - BC Centre for Ability
  - GF Strong Rehabilitation Centre
  - WorkSafeBC
  - Sport Medicine Council of BC
  - BC Brain Injury Association
  - UBCP/ACTRA
  - ICBC
  - viaSport

Who is this guide for?

This guide is for public health professionals, advocacy organizations, academics, and communications departments who are interested in, and passionate about, improving awareness about concussion mechanisms and possible consequences, to improve the ability to make better choices around recognizing, managing, and preventing concussions in various settings and for diverse age groups in BC.

Call to action

- Promote evidence-based resources to increase awareness and educate about the importance of concussions
- Share and engage with Concussion Awareness Week social media posts to increase the reach of campaign messages

Concussion Facts

Concussions can happen to anyone, anywhere, anytime, from both significant and seemingly minor falls, hits, or collisions. They are common brain injuries that can have life-altering consequences. Early recognition of concussion, proper follow up care by a healthcare professional with relevant training, and appropriate management can make a difference in recovery.

It is estimated that at 1 in 70 Canadian adults suffer a concussion each year. This is considered an underestimate, as many people do not seek medical care for concussion.

In 2023/24, nearly 600 people were hospitalized due to concussion, representing a rate of 11 hospitalizations per 100,000 population. Falls were the leading cause of concussion and accounted for 57% of concussion-related hospitalizations, followed by transport-related injuries at 39%. Older adults aged 70 and over, especially those aged 85 and older, had the highest rates and numbers of concussion-related hospitalizations.[1]

In 2023/24, over 20,000 people visited the Lower Mainland emergency departments for concussions. Males aged 0–19, 30–49, and 85+ years had higher concussion emergency department rates than females, while females aged 20–29 and 60+ years had higher concussion emergency department rates than males. In 2023/24, children aged 0–14 years accounted for 26% of concussion-related ED visits.[2] Further, in 2018, concussions were most common among Indigenous youth (14.2%) ages 11-15.[3]

Accounting for approximately 5% of Canada's population (1.6 million), Indigenous communities are disproportionately affected by TBI. These groups are three times more likely to be hospitalized as a result of brain injury compared to the rest of Canada.[4]

Experts are concerned that the public is not aware of how to properly recognize and manage concussions. A 2022 province-wide survey found that only 11% of British Columbians are confident in their ability to recognize a concussion when it happens.[5]

Concussions are also costly for society. In BC, the estimated health care costs of concussion in 2026 were approximately $50 million in emergency department visits, $9 million in hospitalizations, and $3 million in disability. Total health care costs were $62 million.[5]

For more information on the burden of concussion in BC, please explore the following data visualizations:

- Concussion-Related Emergency Room Visits
- Concussion-Related Hospitalizations

1. Discharge Abstract Database (DAD), Ministry of Health. Retrieved from Visualization for Injury Hospitalizations for Concussion, BCIRPU, 2025.
2. National Ambulatory Care Reporting System (NACRS). Retrieved from Visualization for Concussion-related ER Visits, BCIRPU, 2026.
3. Government of Canada. Retrieved from Concussions and their association with mental health in Canadian adolescents, Public Health Agency of Canada, 2026.
4. Victoria Brain Injury Society (VBIS). Retrieved from Brain Injury Basics: TBI & Indigenous Peoples, VBIS, 2026.
5. BC Injury Research and Prevention Unit, Survey conducted in 2022.

Provincial Proclamation

The BC Government has issued an official proclamation for BC Concussion Awareness Week.

View the proclamation online on the BC Laws website.

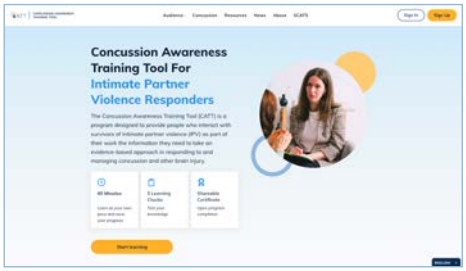
Coming Soon

Resource Spotlight: CATT for Intimate Partner Violence Responders

Brain injury is common in situations of intimate partner violence (IPV), yet it often goes unrecognized, leaving survivors without the support and care they require.

Launched in July 2026, CATT IPV provides evidence-based information on responding to and managing concussion and other brain injuries for individuals who work with survivors of IPV. The course was created in collaboration with Supporting Survivors of Abuse and Brain Injury through Research (SOAR), a registered charity that focuses on intimate partner violence-caused brain injury.

Access the course on cattonline.com.



CATT for IPV Responders

Resource Spotlight: 10 Myths about Concussion (and the Facts!)

A new 11x17 printable poster provides a visual reminder of some common myths and facts about concussions. Download it on the CATT website.

Concussion Myths and Facts

Social Media Toolkit and Images

The CATT and the BC Injury Research and Prevention Unit will be leading communications efforts through their social media channels:

Concussion Awareness Training Tool - CATT

@catt.concussions
@injuryresearchbc

BC Injury Research and Prevention Unit

Campaign hashtags

Use the following hashtags to join the campaign:

Primary hashtag: #ConcussionWeekBC

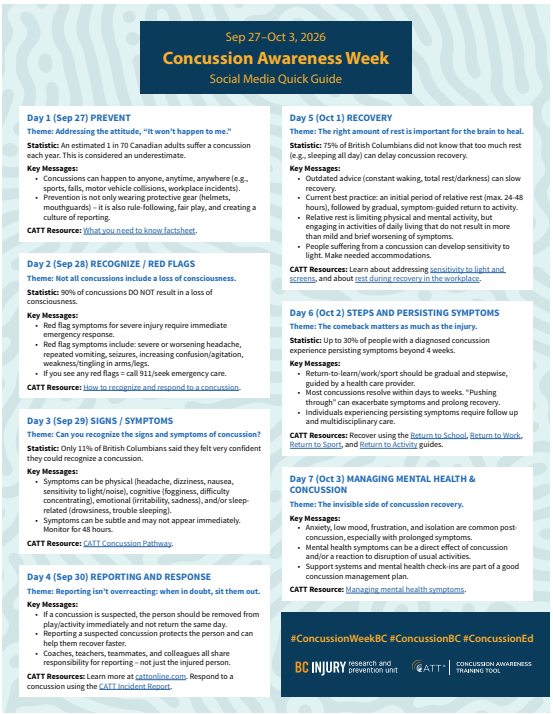
Secondary hashtags: #ConcussionBC #ConcussionEd

Images

We have prepared some images for you to use on social media. Download the images on Google Drive

Posts

This year, we have designated a concussion-related topic for each day of BC Concussion Awareness Week. Please see the following pages for a detailed description of each topic and suggestions for generating engagement and related resources, or view our Social Media Quick Guide in the toolkit for a summary of the information below.



Social Media Quick Guide

DAY	THEME	STATISTIC	KEY MESSAGES	ENGAGEMENT	CATT RESOURCES
1 (Sep 27)	**Prevent** – Addressing the attitude, "It won't happen to me."	An estimated 1 in 70 Canadian adults suffer a concussion each year. This is considered an underestimate.	• Concussions can happen to anyone, anytime, anywhere – sports, falls, motor vehicle incidents, and workplace incidents. • Prevention is not only wearing protective gear (helmets, mouthguards) – it is also rule-following, fair play, and creating a culture of reporting. • Many people underestimate their own risk—until it happens.	Invite followers to share a time they underestimated a head-injury risk.	CATT has free concussion eLearning courses and resources. Here's what you need to know about concussion.
2 (Sep 28)	**Recognize** – Not all concussions include a loss of consciousness.		• Loss of consciousness is not common with a concussion. • Red flag symptoms for severe injury require immediate emergency response, whether consciousness was lost or not. • Red flag symptoms include: severe or worsening headache, repeated vomiting, seizures, increasing confusion/agitation, weakness/numbness, • If you see any red flags = call 911 / go to the ER immediately.	Share the CATT Red Flags graphic.	CATT has free, evidence-based concussion eLearning courses and resources. Learn how to recognize and respond to a concussion.
3 (Sep 29)	**Recognize** – Can you recognize the signs and symptoms of concussion?	Only 11% of British Columbians said they felt very confident they could recognize a concussion when it occurs.	• Symptoms can be physical (headache, dizziness, nausea, sensitivity to light/noise), cognitive (fogginess, difficulty concentrating), emotional (irritability, sadness), and sleep-related (drowsiness, trouble sleeping). • Symptoms can be subtle and may not appear immediately. Monitor for 48 hours.	Run a short interactive quiz ("How confident are you in recognizing a concussion? Test your knowledge").	Recognizing a concussion is the first step to recovery. Use the CATT Concussion Pathway to help with recognizing signs and symptoms of concussion.
4 (Sep 30)	**Respond** – Reporting isn't overreacting: when in doubt, sit them out.		• If a concussion is suspected, the person should be removed from play/activity immediately and not return the same day. • Reporting isn't overreacting. Reporting a suspected concussion protects the person and can help them recover faster. • Coaches, teachers, spectators, and teammates all share responsibility for reporting – not just the injured person. • Document the incident to help with response and recovery.	Create and share reporting protocols with your organization (coach, athletic therapist, first aid lead, human resources). Encourage a "see something, say something" culture.	Learn more about recognizing and reporting a concussion at cattonline.com. CATT has free resources, such as the CATT Incident Report, to help with responding to a concussion.

DAY	THEME	STATISTIC	KEY MESSAGES	ENGAGEMENT	CATT RESOURCES
5 (Oct 1)	**Management** – The right amount of rest is important for the brain to heal.	• 62% of British Columbians were not aware that a person with a potential concussion does not need to be woken up every two hours. • 75% did not know that too much rest can delay concussion recovery.	• Outdated advice (constant waking, total rest/darkness) can slow recovery. • Current best practice: an initial period of relative rest (max. 24-48 hours), followed by gradual, symptom-guided return to activity. • Relative rest is limiting physical and mental activity, but engaging in activities of daily living (e.g., short walks, preparing meals, housework) that do not result in more than mild and brief worsening of symptoms. Minimize screen time for first 24-48 hours following concussion. Avoid driving during the first 24-48 hours after a concussion. • People suffering from a concussion can develop sensitivity to light during regular recovery or when experiencing persisting symptoms. Make needed accommodations.	Share a "recovery myths vs. current guidance" comparison to address the statistics above.	• Learn about addressing sensitivity to light and screens. • Learn about rest during recovery in the workplace.
6 (Oct 2)	**Management** – The comeback matters as much as the injury.	Up to 30% of people with a diagnosed concussion experience symptoms beyond 4 weeks.	• Return-to-learn/work/sport should be gradual and stepwise, guided by a health care provider. • Most concussions resolve within days to weeks. "Pushing through" can exacerbate symptoms and prolong recovery. • Persisting symptoms warrant follow-up. Up to 30% of people experience symptoms beyond 4 weeks and need multidisciplinary care.	Prepare a quiz on social with questions on returning to activity.	CATT has free resources to help with concussion recovery. Check out our Return to Learn, Return to Work, Return to Sport, and Return to Activity guides at cattonline.com.
7 (Oct 3)	**Management** – Mental Health	The invisible side of concussion recovery.	• Concussion recovery isn't just physical – anxiety, low mood, frustration, and isolation are common post-concussion, especially with prolonged symptoms. • Mental health symptoms can be a direct effect of concussion and/or a reaction to disruption of usual activities (missed school, work, sport, social life). • Support systems and mental health check-ins are part of a good concussion management plan, not an afterthought.	Share resources for mental health support and a reminder that asking for help is part of a full recovery.	It is not well-known that mental health can suffer post-concussion. Learn more about managing mental health symptoms.