

## Headway – the brain injury association

### Action for Brain injury Week 2025: *On a good day*

### Short read summary

#### Introduction

Every year in the UK, a person is admitted to hospital with a brain injury every 90 seconds. A brain injury can be caused by accidents, illnesses or medical complications, affecting independence, socialising, employment, relationships and mental health.

No two brain injury survivors have the exact same experience. And for many survivors, no two days are the same either.

An ABI is a fluctuating condition. This means that its effects can be more problematic on some days than on others. Many survivors describe having ‘good days’ and ‘bad days’.

Furthermore, the wide-reaching impact of brain injury means that families, partners and those closely involved in caring for the survivor are also often impacted by the fluctuating nature of this condition.

Our Action for Brain Injury Week 2025 campaign, *On a good day*, has explored the fluctuating nature of brain injury and aims to improve society’s understanding of how it can best support both survivors and carers with this.

As part of the campaign, we launched a set of surveys to explore the fluctuating nature of brain injury.

**This report is a short-read summary of the findings of our survey. For the long-read report, which includes quotes from brain injury survivors and carers along with additional information and statistics, visit our website at [www.headway.org.uk/on-a-good-day](http://www.headway.org.uk/on-a-good-day).**

We would like to thank all of the brain injury survivors and carers who completed our surveys to help us better understand how brain injury can



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fluctuate. Thanks as well to all independent Headway charities and volunteer-led branches, and professionals who helped to circulate the survey to their service users, clients and patients. We would like to extend particular thanks to the survivors and carers who granted permission for us to use their quotes within this report.

For more information, visit [www.headway.org.uk/on-a-good-day](http://www.headway.org.uk/on-a-good-day).

## Key findings

- Fatigue, memory, anxiety and concentration are reported to be the most commonly fluctuating effects of brain injury.
- 80% of survivors and 84% of carers feel low in mood on a survivor's bad day. Conversely, 80% of survivors and 91% of carers feel good on a survivor's good day.
- 64% of survivors and 53% of carers lose their tempers more easily on a survivor's bad day.
- 86% of survivors and 78% of carers find working or studying difficult on a survivor's bad day. Conversely, 62% of survivors and 78% of carers find work or studying easier on a survivor's good day.
- Around three quarters of survivors felt their relationships with a partner and others are negatively affected on a bad day. Conversely, two thirds felt that their relationship with a partner is good on a good day, although even on a good day, 27% still felt the relationship was neither good nor bad.
- Half of carers felt that their relationship with the survivor and others are negatively affected on a survivor's bad day. Conversely, 85%



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felt that their relationship was good on a survivor's good day.

- Around three quarters of survivors find it difficult to do things independently on a bad day. However, even on a good day, around a tenth of survivors struggle to do things independently.
- Two thirds of carers find it difficult to do things independently when the survivor has a bad day. Conversely, just over three quarters can do things independently when the survivor has a good day.
- Factors that contributed to a good day included improved effects of brain injury, having a healthy lifestyle, routine and having control, the occurrence of positive events and socialising.
- Conversely, factors that contributed to a bad day included struggling with the effects of brain injury (particularly fatigue), social pressures, changes in routine and lifestyle factors.
- For many survivors, a good day is not necessarily 'good' but simply not as bad as a bad day. Effects of brain injury can still be problematic on good days, with some survivors and carers worrying even on good days that things can change any moment for them. Furthermore, some survivors reported that good days were often directly followed by bad days, due to the 'boom-bust' cycle of attempting to do too much on good days and consequently struggling the next, causing a bad day.

## Key messages

A number of themes emerged from the survey findings that we can summarise into key campaign messages as follows:

### 1. *Brain injury as a fluctuating condition*

The varied effects of brain injury can fluctuate. Fatigue is a commonly experienced effect of brain injury that regularly fluctuates, often



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underpinning the bad days of brain injury and being associated with feeling negative moods such as depression, frustration, isolation, guilt and feeling useless. Other commonly fluctuating effects include memory problems, anxiety and problems with concentration.

## 2. *The impact of living with a fluctuating condition*

Living with a fluctuating condition such as brain injury can affect both survivors' and carers' moods, engagement in work or studies, ability to socialise, relationships, and independence.

## 3. *Experiences on good days*

Good days were reported to cause survivors and carers to feel a range of positive emotions such as happiness, independence, positivity, ability, reassurance and accomplishment, among others. However, even on good days, there remains a sense of anxiety about circumstances changing at any moment and a consciousness of avoiding over-exertion to prevent a bad day from following.

## 4. *Experiences on bad days*

Bad days were reported to cause survivors and carers to feel a range of negative emotions such as depression, social isolation, frustration and helplessness.

## 5. *Causes of good days*

Good days were caused by the effects of brain injury being less severe (specifically being able to manage fatigue), having a healthy lifestyle, following a routine and feeling under control, experiencing positive events and socialising.

## 6. *Causes of bad days*

Bad days were caused by the effects of brain injury being more severe (specifically coping with fatigue), societal pressures, changes in routine, having an unhealthy lifestyle.

## 7. *Improving bad days*

Bad days can be improved by resting, engaging in enjoyable and meaningful activities, completing mental exercises and

communicating with others about one's needs.

8. *Society's understanding of the fluctuating nature of brain injury*

Survivors and carers generally feel they have a good understanding of the fluctuating nature of brain injury, with many developing this understanding after 6 months.

9. *Professionals' understanding of the fluctuating nature of brain injury*

Survivors and carers have mixed experiences of welfare benefits assessors and GPs' understanding of the fluctuating nature of brain injury. Employers' understanding of fluctuating nature of brain injury is rated more favourably, possibly due to existing legislation in this area.

***“There is a real misconception, because he functions so well on a good day that somehow the bad days aren't real or we're making it up. I think better general understanding of how much things fluctuate and how bad the bad days can be would help. I also think better understanding of how much pressure it puts on the partner when things are fluctuating so much, and how much of a mental load partners/carers take... when we say we're tired we mean we're completely exhausted on having to do the thinking for two people!”***

For more information, visit [www.headway.org.uk/on-a-good-day](http://www.headway.org.uk/on-a-good-day).

For questions and enquiries about the survey and this report, please contact our Publications and Research Manager at [publications@headway.org.uk](mailto:publications@headway.org.uk).

For press enquiries, please contact [media.office@headway.org.uk](mailto:media.office@headway.org.uk).

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