MOORE THAN ARTHRITIS

SCHOOLS & JIA AWARENESS

Pip's Different Days

Understanding changing days, feelings and asking for help



A Pip the Panda story and activity guide

Shared reading for ages 5-8 | Extensions for ages 9-12

Stronger together. Beyond limits.

START HERE

Read together. Let the child lead.

A flexible way to use the guides

Start with the story that fits the child's current concern. Read one story section, pause for conversation, and offer an activity only if the child wants it. Ten minutes may be plenty. Return another day; finishing the pack is not a task the child has to complete.

Offer more than one way to respond

Children can speak, point, draw, use a communication device, ask an adult to write, or simply listen. Read activities aloud when helpful. There are no scores for writing, movement or how much a child shares. Blank spaces are invitations, not homework.

Use fiction safely

The animal school is an imagined setting for learning. Pip's experiences do not describe every child with arthritis. A child can disagree with Pip, choose another response or decide the story does not fit them. Never ask a pupil to confirm a diagnosis or explain private treatment to a class.

Health information and individual support

The stories provide awareness and conversation prompts, not diagnosis or treatment instructions. A child's own clinical advice and agreed school arrangements take priority. Adults manage medicines, healthcare decisions and safe supervision. None of the activities asks children to test pain tolerance or copy exercises.

For whole-class use

Introduce the material as a story about belonging and different needs. Check privately with the affected child and family before connecting it to their experience. Everyone can participate without identifying a health condition. Allow children to pass or leave a discussion with an adult.

Ask: "Would you like to talk, draw, listen, or stop for now?"

GUIDE 1 / STORY 1

Pip's Different Days

The map-making morning

Pip had an excellent plan for Saturday: make a map of the garden, find the wonky apple tree and eat a picnic beside it. They had drawn a compass, packed a notebook and invented a name for the expedition: The Great Garden Search.

But when Pip got out of bed, their knees felt stiff. Pulling on socks took longer than usual. Pip stared at the notebook. Yesterday they had moved around more easily. Today felt different.

"I was looking forward to my adventure," Pip told Gran. "What if I can't do it the way I planned?"

Gran sat beside them. "That sounds disappointing. Tell me what feels difficult." Pip pointed to their knees. They did not have all the words yet, but Gran listened.

Pip's healthcare team had explained that they had juvenile idiopathic arthritis. Everyone called it JIA. It could make joints sore, swollen or stiff. Pip had not caused it by being naughty, playing a game or thinking an unhappy thought.

Gran helped Pip follow the plan their family had agreed with the healthcare team. Then she asked, "What matters most about your adventure?"

Pip thought carefully. "Finding things. Making a map. Being together." The garden gate was still there. So was the apple tree. Perhaps there was more than one way to have a Great Garden Search.

Pause together

What had Pip been looking forward to? What did Gran do before suggesting a solution? It is fine to point to an answer or leave the question for later.



A different day does not mean you have done anything wrong.

GUIDE 1 / STORY 2

An adventure with room to change

Pip and Gran chose a place near the back door where Pip could sit comfortably. They spread the map across a tray. Gran asked before moving the tray or helping with the notebook.

"I can draw the places I can see from here," Pip decided. "You could tell me what is behind the big plant pot." Gran described a snail trail and a tiny feather. Pip added both to the map.

Later, Pip wanted to try a little more of the garden, following their own agreed advice. Halfway to the apple tree, they felt tired in a heavy sort of way. They stopped. "I need help changing the plan again," they said.

Gran listened. They returned to a comfortable spot and had the picnic there. A change of plan did not guarantee that the tiredness or stiffness would go away. It did mean Pip did not have to manage the day alone.

"I still wish today had been easier," Pip said. "And I like the snail on our map." Both things could be true.

That evening, Pip added a new symbol: a small circle meaning a place to pause. They did not give themselves a mark out of ten. There was no prize for reaching the tree or for hiding how they felt.

Tomorrow might feel similar or different. Pip could not decide that by wishing. They could tell a grown-up, ask questions and keep making plans that had room to change.

Talk about the ending

Did the story need a perfect, pain-free ending to include something good? What would you say if Pip wanted to stop the adventure completely? "We can stop" is a useful answer too.

You can enjoy something and still wish your symptoms were easier.

GUIDE 1 / UNDERSTAND

What is JIA? Words we can use

A child-friendly explanation

Joints are places where bones meet, such as knees, elbows and fingers. JIA is a name for a group of conditions that cause joint inflammation in children. Inflammation can make joints sore, swollen or stiff. Children have different experiences; you do not need to have every symptom to deserve help. [1, 2]

Some days can change

Symptoms may change over time. A flare means the condition becomes more active. Feeling tired, sore or finding a task difficult deserves attention even when nobody else can see why. A grown-up and the healthcare team can help work out what is happening. [2]

It is not your fault

Having JIA is not a punishment. Being cheerful is not a treatment. You can tell the truth about your feelings, including feeling cross, worried or fed up. You do not have to make other people comfortable by saying you are fine. [2]

Pain and tiredness are different words

Pain might feel sore, aching or sharp. Stiffness can make moving a joint difficult. Fatigue means a deep kind of tiredness that can affect thinking as well as doing things. You can use your own words, pictures or gestures. You do not need a perfect description. [2, 3]

Words to practise

"Something feels different." "My hands are sore." "I feel too tired to think." "I don't know the word yet." "Can you stay with me while I explain?" An adult should help, rather than expect you to work everything out.

For adults: these descriptions support conversation; they are not a symptom checklist for diagnosis.

GUIDE 1 / ACTIVITY

My different-day map

Choose a real or imaginary day. Draw, talk, point or ask someone to write. You can change your answers. Keep the page private unless you choose to share it with a trusted adult.

1. Something that matters to me

What would you like to do or feel part of? It might be a story, a game, a visit or time with a friend. The important part might be company rather than finishing a task.

2. Something that might get in the way

Think about a tricky part of the day: opening something, sitting for a long time, concentrating, travelling or not knowing who to ask. You can write "not sure".

3. A change an adult could help arrange

Could the place, timing, equipment or activity change? Could an adult help explain? These are ideas to discuss, not changes you must organise yourself.

4. My stop or change-plan message

Choose words, a gesture or a card that means: "Please check in with me." My adult will respond by listening and helping choose what happens next.

There is no goal to do more tomorrow. The goal is to be heard today.

GUIDE 1 / TRY A CONVERSATION

When someone says...

"But you managed it yesterday!"

Pip could say: "Today feels different. Can we talk about what would help now?" An adult could respond: "Thank you for telling me. Yesterday does not decide what you need today."

"You look fine to me."

Pip could say: "You may not be able to see how I feel." An adult could respond: "I believe you. Let's find somewhere we can talk." Children should not have to prove their symptoms by looking upset.

"Just try a bit harder."

Pip could say: "I am trying, and I need support." An adult could ask what is difficult and use the child's agreed arrangements. A child is allowed to stop asking the same person and seek another trusted adult.

"You should be happy - we changed the plan."

Pip could say: "I am glad you helped, and I still feel disappointed." An adult could respond: "Both feelings make sense. You don't have to cheer up for me."

Try one together

Let the child choose a situation and whether to play Pip, the adult or neither. Practise one sentence, then switch roles if they want. Do not recreate a distressing incident without checking that the child wants to discuss it.

If speaking is hard

Try pointing to "help", "stop" or "private chat" on paper. Adults should agree how they will notice and respond. A signal only helps when someone acts on it.

The responsibility for a supportive response belongs to the adult.

GUIDE 1 / AGES 9-12

Same person. Changing needs.

Older-reader extension: choose, question and reflect.

A situation to think through

You enjoy a weekend visit with friends. On Monday, concentrating in class is difficult and you need support. Someone says the weekend proves you are well enough to do the usual work. What is missing from that conclusion? What could a trusted adult say to help?

One possible response: doing something enjoyable does not provide a full picture of symptoms or energy. A private check-in about today's needs is more useful than judging a photograph or a previous activity. You can enjoy life and still need support.

Separate what you notice from what you guess

"My wrist hurts when I write" is something you notice. "I must have caused a flare" is a guess. You do not have to diagnose yourself. Share observations and questions with an adult or your healthcare team. They can help you understand changes.

Choose what to share

You might tell a friend, "My energy changes, so I may change plans." You might tell a teacher more about a particular lesson. You can ask an adult to help decide who needs information for your care. You do not owe classmates your medical history.

A useful question for your next appointment

"What changes should I tell you about, and who should my family contact if they happen?" Add one question about something important to you, such as sleep, clubs, friendships or a hobby.

Write or discuss: one thing I want adults to understand; one response that helps; one question I would like answered.

You are allowed to be interested in much more than your health.

GUIDE 1 / ADULT COMPANION

Respond to the child in front of you

Learning aims

The child can name or indicate a need, recognise that changing symptoms are not a personal failure, and identify a trusted adult. Success is increased understanding or feeling heard, not a completed worksheet.

Suggested shared session: 20-30 minutes, with breaks

Read the two story pages at the child's pace. Ask what mattered to Pip before asking about the child. Offer the map activity or one conversation card. Finish by agreeing one adult action, such as setting up a private check-in. Stop sooner if the child prefers.

Listen before problem-solving

Try: "I believe you. What is hardest right now? Would you like help thinking about options?" Avoid praising silence, endurance or a smile as evidence of coping. Do not make enjoyable activities conditional on managing schoolwork without support.

Keep pacing individual

Discuss activity, pauses and changes with the family and clinical team. The pack deliberately gives no exercise prescription, fixed rest interval or daily energy allowance. Appropriate movement and school participation can be supported with individual advice. [3, 4]

Notice and follow up

If symptoms or functioning change, communicate through the child's agreed family and healthcare route. Do not assume a new difficulty is always JIA. Record the child's words and practical impact rather than interpreting them as laziness, anxiety or attention-seeking.

Check understanding gently

Ask: "Who could Pip tell? What could the adult change?" Accept different answers. Revisit any idea that a child caused their illness or must be positive to recover. Use the shared adult guidance on the shared adult guidance at the end of this guide for health concerns and confidentiality.

Adult follow-through: agree who will act, what they will do and when you will check back.

SHARED ADULT GUIDANCE

Health questions, feelings and safe support

Keep healthcare with the right adults

Use the family's agreed contact arrangements and the child's clinical advice. Medicines, doses, side effects, exercise prescriptions and screening schedules are outside this pack. Do not start, stop or change treatment because of a story or worksheet.

Eye checks matter

Some children with JIA develop inflammation inside the eye, called uveitis. It can be present without obvious symptoms. Keep the specialist eye-check schedule even if the child reports no problem. New eye pain, redness or changes in vision need prompt medical assessment; follow the clinical team's urgent advice route rather than waiting for a routine appointment. [7]

New or worrying changes

The pack cannot assess illness or injury. Seek appropriate clinical advice for new, worsening or concerning symptoms. At school, follow the individual healthcare and emergency arrangements. Use emergency services for an immediate threat to life. A child should tell a trusted adult rather than decide the urgency themselves.

Make room for feelings

Acknowledge frustration, worry, sadness and anger without insisting on a positive ending. Ask what is difficult and whether the child wants listening, practical help or both. If emotional distress persists, affects daily life or raises a safety concern, seek appropriate professional support and use safeguarding procedures where relevant.

If a child discloses harm

Listen calmly, avoid promising secrecy, and explain that you will involve people who can help. Follow the setting's safeguarding process. Do not investigate through a class activity or ask peers to solve the situation.

Support is personalised. Pip's story is never a substitute for the child's own care.

SHARED ADULT GUIDANCE

Using the guides and sharing feedback

Choose a useful starting point

Start with a situation that matters to the child: a changing day, a school activity or a friendship question. Read a short section together and ask what they think about Pip. Let the child choose whether to connect the story to their own experience.

Keep sessions flexible

Use one activity at a time. Offer drawing, speaking, pointing or listening, and stop when the child wants to. There is no expected number of pages to complete and no reward for doing more than feels manageable.

Listen to children

Ask: "Which part felt like real life?" "Did any words feel confusing or uncomfortable?" "Did Pip have enough choices?" "What would you change?" Offer pictures or choices as well as open questions. Nobody needs to share a diagnosis or private experience to answer.

Turn learning into an adult action

Agree one practical next step, who will take responsibility and when you will check back. Ask whether the change helps the child learn, feel comfortable and stay included. Review the arrangement when needs or circumstances change.

Help shape future resources

Parents, carers, educators and relevant professionals can share feedback with Moore Than Arthritis through the existing website contact route. Comment on clarity, tone and usefulness. Please leave out children's names, school details, medical records and other private information.

Keep older readers in mind

The ages 9-12 pages offer more detailed scenarios and questions. Choose the approach that suits the individual child. Some may prefer a conversation or written scenario to a mascot-led activity; their preference matters.

Measure whether children feel heard and adults act, rather than how many pages are completed.

SOURCES & EDITION NOTES

Evidence behind the learning

Health and school information checked on 12 November 2026. Numbered references identify the factual material; stories, scripts, activities and proposed lesson formats are original MTA development content. References do not imply endorsement or clinical approval.

[1] Great Ormond Street Hospital. Conditions treated by the Rheumatology department. https://www.gosh.nhs.uk/wards-and-departments/departments/clinical-specialties/rheumatology/conditions-treated-rheumatology-department/

[2] Arthritis UK. My child has been diagnosed with JIA. https://www.arthritis-uk.org/information-and-support/understanding-arthritis/young-people-and-families/information-for-parents/my-child-has-been-diagnosed-with-jia/

[3] Arthritis UK. Managing JIA. https://www.arthritis-uk.org/information-and-support/understanding-arthritis/young-people-and-families/managing-JIA/

[4] Cambridge University Hospitals. Guide to physical activity and exercise in JIA. https://www.cuh.nhs.uk/patient-information/guide-to-physical-activity-and-exercise-in-juvenile-idiopathic-arthritis-jia/

[5] Arthritis UK. Reasonable adjustments at school. https://www.arthritis-uk.org/information-and-support/understanding-arthritis/young-people-and-families/information-for-schools/reasonable-adjustments-at-school/

[6] Arthritis UK. Supporting a young person with arthritis: schools booklet. https://www.arthritis-uk.org/media/bv1k0b3z/j1272_yp_schoolsbooklet_update_web.pdf

[7] JIA-at-NRAS. Eye Health. https://jia.org.uk/resource/eye-health/

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