**MOORE THAN ARTHRITIS**

SCHOOLS & JIA AWARENESS

# Pip Goes to School

Learning, joining in and finding support at school




## 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 2 / STORY 1

# Pip Goes to School

## The bridge-building challenge

On Monday, Pip's class was building bridges from card. Pip loved bridges. They had brought a drawing of a magnificent one with three towers and a flag.

The morning started awkwardly. Sitting on the carpet felt uncomfortable, and Pip's fingers were sore when they tried to hold a pencil. Around them, everyone seemed busy. Pip worried that asking for a change would interrupt the lesson.

Before class, Pip and their teacher, Ms Fern, had agreed a quiet signal. Pip put a small help card at the edge of the table. Ms Fern came over and spoke softly. "Would you like to tell me here, or somewhere more private?"

"My hands are sore. I still want to show my bridge idea," said Pip. Ms Fern did not ask Pip to announce their arthritis to the class. They looked at the arrangements already agreed with Pip and their family.

Pip chose a comfortable seat. Ms Fern helped them use a way of recording ideas that suited the task and their needs. Pip described the bridge while Ms Fern noted the key words. Pip chose which details to add to the drawing.

At the next table, Rowan was finding the instructions confusing. Ms Fern helped Rowan too. Different children needed different things to learn.

By break, Pip had not finished the drawing. The bridge idea was still theirs. Getting support had not taken away their imagination.

### Pause together

What was Pip worried about? How did Ms Fern protect Pip's privacy? Could Pip have used a different signal?



**Asking for support is part of learning.**

GUIDE 2 / STORY 2

# A place in the team

After break, the class carried their models to the hall. Pip knew the corridor could be crowded. Ms Fern had arranged a calmer way to get there, following Pip's school plan. Nobody had to race.

In the hall, the teams would test their bridges. A friend suggested that Pip could watch from the side. Pip frowned. "I'd like to help choose where the weights go," they said.

Ms Fern asked each group to think about the different parts of the task. There was planning, building, measuring, testing and explaining. Pip chose testing with the team. They could change tasks or pause if they needed to. They were not given the same seated job every time.

At lunchtime, Pip felt unusually tired. They told Ms Fern rather than waiting until the end of the day. An adult followed the agreed arrangements and helped Pip decide what to do next. There was no promise that a short pause would make everything easy.

Later that week, Pip had a hospital appointment. When they came back, Ms Fern welcomed them and explained the next important step. Pip did not have to do every missed worksheet before joining the group.

The bridge leaned to one side and its flag fell off. Pip laughed. "It needs another support," they said. Rowan held the tower steady while Pip explained their idea. Support helped bridges stand. Support helped a classroom work too.

## Talk about the ending

How did the adults help Pip stay part of the learning? What should happen if the agreed plan does not help enough? A child can say so; adults can review it.

**A useful plan can change when the child's needs change.**

GUIDE 2 / UNDERSTAND

# School can make room for you

## Learning is more than handwriting

If writing is difficult, tell an adult. Depending on your needs and the lesson, adults might explore a different way to record ideas, suitable equipment or a change in how much writing is needed. You still deserve work that interests and challenges you. [5]

## Moving around and sitting comfortably

Tell an adult if the carpet, chair, stairs or busy corridor is difficult. There may be ways to change the place, route, timing or support. An adult should help arrange them and check that they work. [4, 5]

## Joining activities

Having JIA does not automatically mean missing PE, games or trips. Your adults and healthcare team can discuss what is appropriate for you and how activities might be adapted. You should not have to decide medical safety on your own. [4]

## Appointments and coming back

Some children need time away for healthcare. Ask who will help you find the important learning and reconnect with friends. Returning should include a welcome and a manageable plan. [6]

## Your voice matters

You can say that an arrangement makes you uncomfortable or leaves you out. An adult can explain what choices are available and help review the plan. You do not need to wait until something feels unbearable.

## Useful school words

"I want to join in. Can we change this part?" "I need a private chat." "The plan isn't helping today." "Who can help if my usual adult is away?"

**Support should help you belong, learn and have choices.**

GUIDE 2 / ACTIVITY

# My school support passport

Complete with a trusted adult. This is a conversation page, not a medical care plan. Store it safely. Share only the information needed to help you.

## What I want you to know about me

My interests, favourite learning and something I am looking forward to:

## A part of school I would like help with

For example: getting to class, writing, lunch, playtime, PE, concentrating or returning after an appointment.

## My signal and the adult response

I can ask or show: _____. The adult will: _____. If they are away, I can go to: _____.

## Privacy and review

An adult I can talk to about who needs to know: _____. Something I do not want discussed in front of classmates: _____. We will check the plan together on: _____.

## One thing adults will arrange next

Action: _____. Person responsible: _____. When: _____. Children should not have to carry the whole message between adults.

**You can change your answers or ask someone to write them for you.**

GUIDE 2 / SOLVE TOGETHER

# What could the school change?

### The carpet problem

Pip finds floor sitting uncomfortable but does not want to be placed away from friends. Ask: how could the lesson offer a comfortable option within the group? Possible adult response: arrange suitable seating where Pip can see, hear and participate. Check Pip's preference privately.

### The busy corridor

Pip worries about being knocked while moving between rooms. Ask: which part is difficult and what would make it calmer? Adults might review routes, timing and supervision with the family and relevant staff. A friend can offer company; responsibility for safety remains with adults.

### The changing-games day

The class is playing an active game. Pip wants to join but needs an adaptation. Ask: what does Pip enjoy about the game? Adults use the child's individual advice to explore equipment, space, rules, time and choices. Avoid routinely making Pip the scorekeeper without asking.

### The return after an appointment

Pip returns to a pile of missed work. Ask: what learning is most important now? An adult can prioritise, explain what can wait and support reconnection with the class. Pip should not need to disclose appointment details to earn that support.

### Choose one situation

Name the barrier, the adult who can change it and one way to ask Pip whether the change helped. If no suggestion fits, write a question for the school rather than forcing an answer.

**A useful adaptation changes the barrier while keeping the child involved.**

GUIDE 2 / AGES 9-12

# Be part of planning your school day

## A short meeting you can help shape

Before meeting school staff, choose one part of school that works and one that needs attention. You can attend, send a note, use a trusted adult to share your views or ask for a shorter meeting. You are not responsible for writing the school's medical arrangements.

## Describe the impact

Try: "After a long written task, my hands hurt and I lose track of my ideas." This explains more than "writing is hard". If you do not know why something is happening, say what you notice. Adults can help investigate and seek advice.

## Ask for a specific conversation

"Could we discuss another way to show my answers?" "Could I get help with the route between these lessons?" "What happens if I need a pause during a trip?" Staff can explain what is possible and how to arrange it.

## Check whether support actually helps

An arrangement may look helpful but make you miss an enjoyable part of the day or feel singled out. Tell a trusted adult. Review learning, comfort, privacy and belonging together. A plan needs to work in real life, including when staff change.

## If you are not listened to

Tell a parent/carer or another trusted staff member. Ask them to help speak to the person responsible for your school support. You do not have to argue alone or wait until you cannot cope.

Prepare three short notes: the difficulty; what I would like adults to discuss; how we will know if it helps. Keep your own copy if you want one.

**Speaking up is a choice you can be supported to make, not another test to pass.**

GUIDE 2 / ADULT COMPANION

# Turn a conversation into support

## Learning aims and delivery

Use the story and passport in a 20-30 minute individual or small-group session, with the child free to stop. The child should leave knowing how to request help and who responds. Finish with one action owned by an adult, rather than a list for the child to manage.

## Build on the existing school plan

Discuss practical needs with the child, family, relevant school staff and clinical team as appropriate. This passport complements formal arrangements; it does not replace an individual healthcare plan, medication authorisations or risk assessment. School processes differ across the UK.

## Plan for ordinary transitions

Include cover staff, lunch supervisors, clubs, PE, trips and movement between classrooms. Agree what is shared with each person, who communicates it, where arrangements are accessible to authorised staff and how to keep information current. Check arrangements when the child changes class.

## Match support to the barrier

Explore recording methods, comfortable seating, movement routes, access to an agreed rest space and a manageable return after absence. Choose with the child and review effectiveness. Appropriate participation and activity should reflect individual clinical guidance. [4, 5, 6]

## Do not turn support into a reward

Access to an agreed adjustment should not depend on visible distress, finishing work first or explaining symptoms publicly. Avoid automatic exclusion from activities and avoid requiring the child to prove that a support need is consistent every day.

## Follow-up questions

Can the child find help when the usual adult is absent? Does their signal get a timely response? Are they learning with peers? Does the plan support access without unnecessary disclosure? Record an action owner and review date for any unresolved issue.

**A successful session produces an adult response the child can rely on.**

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/

## Moore Than Arthritis

Schools & JIA Awareness | Version 1.2 | 12 November 2026. General educational awareness material. This guide does not provide medical advice, diagnosis or treatment and makes no claim of independent clinical approval or endorsement.

Find Moore Than Arthritis resources: https://www.moorethanarthritis.co.uk/resource-library

**Stronger together. Beyond limits.**