Advice for managing a child with JIA in the school setting

JIA is a chronic condition which may affect children and young people for many years. It is characterised by times of flare, when joints are swollen, painful and often stiff, and times of remission when function is minimally affected. Our aim is for JIA to impact on a child's life as little as possible and for them to be able to access all activities that they wish. It is also vital that the condition interferes with their academic performance as little as possible by ensuring they can access school with the appropriate support, if this is needed.

The following provides some general advice for children with JIA:-

School access

- Children benefit from still attending school even if they are in a "flare" of their condition. However at times of flare, if walking becomes uncomfortable, their usual means of transport to and from school may need to be altered.
- Early morning stiffness is a feature of arthritis and this may be particularly troublesome at times of flare. As this makes it harder to get the body moving in the morning, and may necessitate the child taking a warm bath before school to loosen joints and make them comfortable, pupils may at these times arrive late into school.
- If lower limb joints are particularly swollen or painful a child with JIA may need to use crutches or wheel chairs for a limited amount of time to enable them to mobilise. Disabled access facilities, such as a lift and ramps, should be available to ensure safety and independence if this is needed.

Class access

- Pupils should remain in class with their peers wherever possible. The only time when this may not be possible, depending on location of classroom and school policy, may be if mobility aids are needed during a flare (which should be short-lived).
- Schools may need to consider organising timetables or classrooms to reduce the number of stairs the pupil has to negotiate and the distances between classes.
- Pupils may benefit from a pass to allow them to leave lessons a little early in order to reach the next activity in good time and to avoid being jostled by other pupils, especially at times of flare when mobility may be slower than normal. If leaving lessons early it is important that they are given their homework assignments at the beginning of the lesson to prevent them missing out on this information.

Seating

- Pupils with JIA may find sitting and working for long periods uncomfortable, especially on hard classroom chairs. They therefore benefit from being allowed to move regularly during lessons to prevent stiffness or using a soft cushion to sit on.
- Unsupported sitting can be difficult for pupils with back pain or poor core stability (core strength). Schools may in some cases need to invest in a science stool with a back rest attached to allow better access to these lessons.
- Pupils with neck pain should face the teacher/front of the room to avoid continual twisting of the neck to look to the front, thus facilitating a comfortable sitting position. An angled desk top surface, or allowing the pupil

to lean on an A4 folder to work, may also prove beneficial in attaining a good sitting posture, putting less strain through the neck.

- If knees or hips are painful it may be necessary for children to sit on a chair rather than sitting cross legged on the floor.

Handwriting

- Pupils experiencing a flare in wrist and/or finger joints may find writing for long periods difficult. It may be beneficial for teachers to photocopy worksheets to prevent pupils having to copy out questions or large amounts of information. Allowing regular rest breaks to stretch out hands and using thicker pens can also help relieve hand pain.
- A laptop/word processor may be considered if writing becomes too difficult. However the disadvantages, for example, carrying a laptop around the school site, should be considered in decision making about how to record work.

School bags

- Pupils at secondary school are often required to carry heavy books and other equipment to/from school and around school during the day. Pupils would benefit from the use of a locker or secure room to place books and other equipment in, or alternatively be given two copies of text books to enable them to leave one at home and one at school.
- A rucksack type bag, where weight can be evenly distributed over both shoulders, is much better than a bag which is carried over one shoulder or across the body.

PE

- Maintaining cardiovascular fitness and strength is vital during disease flares, however a pupil's level of ability may be affected depending on the extent and distribution of the flare. Most young people with JIA can participate in low-impact fitness programmes without any adverse effects but they may struggle at times of flare with high impact activities or exercise that involves repetitive movements.
- They should be allowed to stop and rest if an activity is too painful, and if the activity remains problematic an alternative activity should be recommended. Pupils will normally have their own home exercise programme recommended by their Physiotherapist that can be completed instead if no alternative activity can be found.
- Additional time may be needed for changing clothes for PE depending on the joints affected.
- Children and young people with JIA should be encouraged to take part in active pursuits. Participation in PE and extracurricular sports and activities can result in many benefits for patients with JIA.

Exams

- Additional time to complete exams may need to be arranged to accommodate rest periods, to allow movement breaks and to stretch out painful joints.
- Special consideration may also be applied if it is felt that the child/young person's condition impacted adversely on their performance, for example if hands or wrists are affected allowing the use of a scribe or laptop to record work during the exam or if a child is in flare at the time of an exam which will affect concentration and performance due to pain.