

*A Teacher's Guide To
Juvenile Arthritis:
High School*

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How to use this book

“A teacher’s guide to Juvenile Arthritis: High School” was created to assist all high school teachers in understanding Juvenile Idiopathic Arthritis (JIA), it’s implications and how best to help students with the condition. It features ‘fill in the blank’ sections to personalise the resource, as well as quotes and hyperlinks. To share, simply hit the ‘share’ button in the top right corner, fill in the email of your intended recipient, and hit ‘done’. You can share the presentation to a number of people, so feel free to send it to all of your teachers!

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All About Me!

Hi! My name is _____. My favourite subject is _____, and this year I am looking forward to _____. I have **Juvenile Idiopathic Arthritis**. As my teacher, I may need your help to ensure I have strategies in place that will help me achieve the best possible outcome in class this year.

But first... what is Juvenile Idiopathic Arthritis?

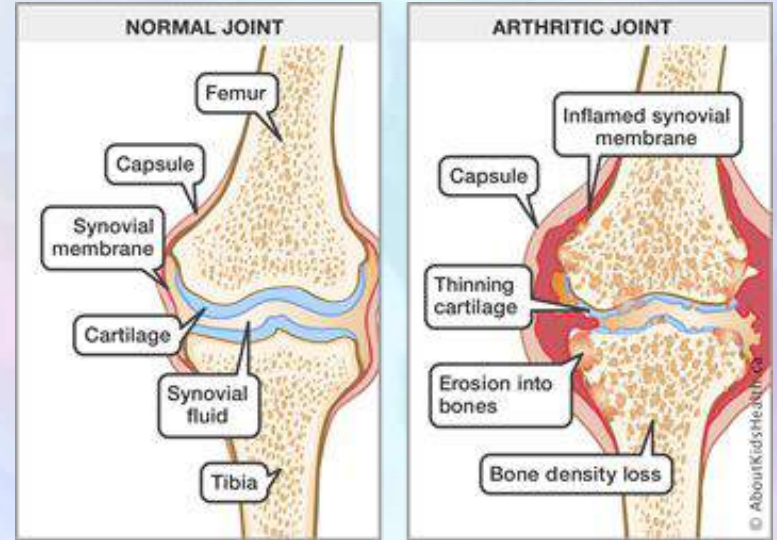
Juvenile Idiopathic Arthritis (JIA) is an autoimmune disease, in which the immune system attacks healthy tissue and cartilage in the joints.

A Quick Breakdown

Juvenile - for or relating to young people (JIA can only be diagnosed in those under 16 years of age).

Idiopathic - relates to a disease in which the cause is unknown.

Arthritis - a disease causing painful inflammation and stiffness of the joints.



Did you know: there are different types of JIA?!



The 7 Types of JIA

To learn more, visit:

[Types of JIA in children and teenagers](#)

1. Oligoarticular - affects up to four joints within the first six months of diagnosis.
2. Oligoarticular extended - after six or more months, upwards of five joints are affected.

POLYARTICULAR ARTHRITIS

3. Polyarticular RF positive arthritis - this can affect any joint in the body, and has a rheumatoid positive factor (RF) when blood is tested.

An RF is an antibody that is found in the blood of those with some types of JIA

4. Polyarticular RF negative arthritis - this can affect any joint in the body, and does not have a rheumatoid positive factor (RF) when blood is tested.

5. Systemic Arthritis	6. Enthesitis Related Arthritis	7. Psoriatic Arthritis
Systemic JIA can affect any joint, and may carry on into adulthood. This form of JIA is considered to be more severe than other forms.	Enthesitis Related Arthritis (ERA) is a type of JIA which affects the hips, knees, ankles, feet and lower back.	Psoriatic Arthritis is one of few types of JIA that affects boys and girls equally. It is the combination of Psoriasis and Arthritis.

Did you know? Oligoarticular Arthritis is the most common type of JIA, and affects 50 - 60% of those with JIA.

For more information on Systemic JIA, visit [Systemic JIA](#)

Juvenile Idiopathic Arthritis vs Adult Rheumatoid Arthritis (RA) : What's the difference?

The main differences between JIA and RA include:

- ❑ RA is a single condition, whereas JIA has several variations and 'types'.
- ❑ Children/ teenagers with JIA typically enter periods of remission, and find that symptoms fade over time. However, symptoms of RA are likely to persist throughout adulthood.
- ❑ JIA may affect bone development and growth, however RA does not as it only affects adults.
- ❑ Having an RF (see page 4) is much more common for adults with RA than it is for kids and teens with JIA.
- ❑ Head to [Juvenile Idiopathic Arthritis: Different From Adult Rheumatoid Arthritis](#) for more details.

Symptoms, Strategies & Me!

Just like people, every case of JIA is unique. Symptoms may present differently among students, and vary in severity.

According to Arthritis NSW, the most common symptoms of JIA include:

- ❑ Joint pain and stiffness (this may be influenced by time and weather. For example, joints may become more stiff in the morning, night or during winter)
- ❑ Red, swollen, tender or sore joints
- ❑ Feeling fatigued
- ❑ Blurry vision or dry eyes
- ❑ Rashes
- ❑ Loss of appetite
- ❑ Fever



INVISIBLE

An 'Invisible' Disease

Something very important to understand about JIA, is that it is not always possible to see when a student is in pain.

Symptoms may not be visible, however the condition is very real. Not sure what to do? Ask the student. At the end of the day, most of us are very open, and want to be treated just like everyone else.

“I just want teachers to believe me, trust that I know my condition and listen to me.” - Ella, 15

SOME DISABILITIES LOOK LIKE THIS



SOME LOOK LIKE THIS



.... Back to me!

What do I have?

I have _____, and I was diagnosed when I was _____.

The main symptoms I experience include:

-
-
-

Splendid Strategies

Inclusion is key!

As students, feeling excluded as a result of your condition never feels good. Here are some mighty fine strategies to keep your students comfortable in the classroom:

- ❑ Allow rest breaks (especially during PE!)
- ❑ Consider typing instead of writing
- ❑ Allow time for students before and after class, as walking long distances across the school can cause pain
- ❑ Allow for extra time or rest breaks during exams
- ❑ Provide accessible seating (students feet should be able to touch the floor)
- ❑ Allow the student to move around during lessons (eg, walking to the bin and back to limit stiffness)

Managing Mental Health

Living with a chronic illness (especially an invisible one) can have a severe influence on a student's mental health. Students may worry about fitting in, taking frequent medications (which may come with side effects), being sidelined during activities, feeling judged or embarrassed... as well as living with unpredictable pain!



According to the Arthritis Foundation “studies show that up to 15 percent of children with juvenile idiopathic arthritis (JIA) have clinical depression and another 20% or so may have “subclinical,” or lower-grade, mood problems”.

How to Help

To help a student with mental illness, a teacher can:

- ❑ Ask how the student how they are: this shows you care, and shows the student that you recognise they're pain... even if you can't see it!
- ❑ Avoid using negative techniques - the use of sarcasm, passive aggressive commentary, discipline or punishment may reinforce low self esteem and make the student feel incompetent
- ❑ Greet your students as they enter the classroom - if possible this affirms their presence and makes them feel welcomed
- ❑ Ensure access to mental health support at school
- ❑ For more information, visit: [For Educators](#)

Frightful Flare-up's & Daily Changes

One of the most important things to understand about JIA is that it fluctuates. A student may seem completely fine one day, and be in severe pain the next. Whilst it is possible to predict when symptoms may become more prevalent (ie - during winter, after sports, mornings or nights), you may still notice a significant difference from one day to the next. When this happens, the best thing you can do for your students is listen to them, and utilise management strategies as necessary.

For me, I experience the most pain during:

- _____
- _____

- _____
- _____

“Flares or flare-ups are when symptoms of JIA come back after experiencing no symptoms for an extended period of time” - ‘About Kids Health’

Just like symptoms, flare - ups can occur randomly, and are very painful. To manage them, ensure you are aware of the condition and able to implement learning strategies to best accommodate your student/s.



Three



Facts



Top Things to Know About JIA

- JIA is a type of arthritis that affects kids and teens, causing swelling, stiffness, and pain in the joints (and sometimes other problems).
- JIA is the same thing as juvenile rheumatoid arthritis – it's just another name that doctors use.
- When JIA is diagnosed early and treated appropriately, it usually can be managed effectively.



FUN

Top Tips for Talking - Addressing JIA

- ❑ Meet with the student - a small conversation at lunch, or before/ after class will allow them to explain any specific requirements they may have, and give you an idea of what to expect in the future
- ❑ Keep it confidential - whilst most students are open about their condition, make sure to keep anything they share with you is kept private unless you are asked otherwise
- ❑ Check in - asking how the student is at the beginning of a lesson will provide an opportunity for them to communicate any pain they are experiencing. In addition, this will allow you both to create a plan that will ensure the student can participate during the lesson ahead, and implement strategies where necessary
- ❑ For specific information about PDHPE, visit: [Information for physical education and sports teachers](#)

Daily Pain Management

Students may choose to use the following methods to manage pain:

- Apply ice packs/ heat packs to painful joints
- Use joint braces or tape
- Take pain medication (eg, Ibuprofen, Paracetamol)
- For severe pain, use of a wheelchair or crutches
- Take breaks during exercise/ physical activity

Assessments

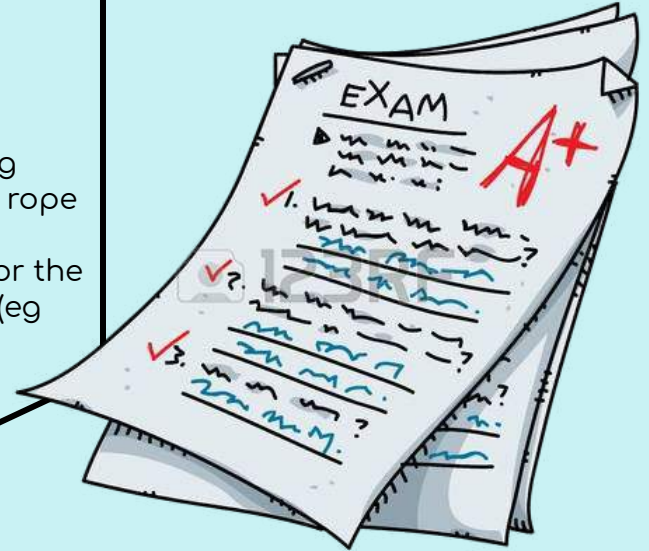
Exams

For students with JIA, sitting and writing for long periods of time can be painful. To manage this, allowing extra time during tests/exams, permitting the student to type their responses if possible, or allowing breaks can be very helpful.

Practical Assessments

To make practical assessments more comfortable, try the following:

- ❑ Allow break/rest time
- ❑ Provide low impact alternatives when doing activities such as jump rope or gymnastics
- ❑ Find alternative ways for the student to participate (eg being referee)



Excursions

Making modifications during excursions may also be necessary. Walking for long periods of time can lead to severe pain, as well as extended periods of sitting (eg. bus trips), busy sports carnivals and activities involving cold water (such as swimming) . Allowing the student to take pain medication, bring a support device such as a wheelchair or crutches and take short breaks can help.



When I go on excursions, it is helpful if my teachers:

Absence

Between doctors appointments, treatments and living with chronic pain, days of school are almost guaranteed for a student with JIA. This can make keeping up in the classroom difficult, as students may miss lessons and important content. To help, try the following:

- ❑ Keep hand-outs in a spare binder/folder - this will allow the student to catch up once they return
- ❑ Ensure detailed lessons are provided - if your class runs off an educational platform such as Google Classroom, lessons that contain enough detail for students to complete the work at home are very helpful
- ❑ Share your lesson plan/notes - should your school not run off a platform, sharing lesson plans or notes may help
- ❑ Schedule one on one time to help students catch up
- ❑ Check in - emailing and asking how they are can go a long way, as students stuck at home can feel isolated or left out

Treatment

Treatments for JIA can be complicated, here are the most important things to know about them:

- ❑ There is a hierarchy of medication- if a patient does not respond to one medication, their doctor will prescribe another, stronger medication. Patients move up the hierarchy until one medication is successful in controlling their JIA.
- ❑ While in remission, you can be on or off medication
- ❑ Joint injections (the injection of corticosteroids into the affected joint/s - under mild sedation) are used to treat localised joint inflammation
- ❑ Physio and occupational therapy may also be used to manage the condition and promote independence
- ❑ The aim of medication is to reduce long term joint damage, which may require surgery in future (such as joint replacements)

- ❑ There have been significant improvements in the medications available to treat JIA effectively within the past 10 years, which has decreased the need for joint replacements in youth, and lead to better quality of life for many students
- ❑ There can be side effects, some of which include an upset stomach and liver problems.

Top Three Things

The top three things I would like my teachers to know about my condition are...

- _____
- _____
- _____