



Home, sweet home

Move over Carol Smilie and Alan Titchmarsh, **Arthritis News** is here to help you design and organise your house and garden. Minal Chande looks at what you can do to ensure your home suits your needs

With home improvement programmes featuring on nearly every TV channel, it can be hard to escape the pressure to have a stylish looking home.

While everyone wants an attractive looking interior, for people with arthritis there is more to designing your home than just how it looks. Pain and fatigue can make it difficult to carry out day-to-day tasks, such as washing, cooking and tidying up.

Many people struggle to move around the home, so making sure there is enough space to do so is important.

A well designed home can make it easier for you to do what you want when you want to do it. Planning the layout of your home is one aspect of this, as is how you organise things inside and outside it.

The idea is to be able to go about your daily life with the least effort. Our first top tip comes from Jude Benharoch, senior

rheumatology occupational therapist (OT) in West Sussex. 'In each room, make sure the items you use most regularly are the easiest to access,' she advises.

This is certainly important for Maxine Mulrooney who has osteoarthritis (OA) and systemic arthritis. 'I can't walk very far so it is difficult for me to do things around the home,' she says. 'I find it is a good idea to put things where you sit frequently so that you don't have to keep getting up to reach them,' she says.

It is often a matter of thinking around things that seem hard. What can you do in design terms to avoid bending, stretching or carrying? How can you make cooking, cleaning, washing, dressing, even relaxing, any easier?

'We've got trolleys on wheels so I don't have to carry things around. I can bring food in from the kitchen or put a plant on the trolley to water instead of carrying it,' says Maxine.

According to Jude, safety is of paramount importance when thinking about the layout of your home. 'People should consider general safety issues to reduce the risk of accidents, such as having safe flooring, keeping areas well lit, and having enough space between furniture to move about safely,' she says.

Whether you are considering simple solutions, such as moving furniture to make the most of the floor space, changing where you store things, or overhauling a whole room, think about what you can do and what you find more difficult.

Some people find that a visit from an occupational therapist (OT) can help them consider their requirements and the possible options. 'Daily living centres or OT departments may have equipment you can try,' says Jude. 'It is important to compare the prices of equipment from different suppliers and if possible, "try before you buy".'

➔ continued from page 21

It is possible to have an accessible home, with a design suited to your needs, as well as to your tastes. 'Not all "disabled" equipment looks like something out of a hospital,' says Sharon Kilty, who has rheumatoid arthritis (RA). The only piece of such equipment in Sharon's house is the shower seat. 'The rest is just standard stuff you can get through builders,' she says.

The kitchen

Whether you are planning a brand new kitchen or just a few alterations, the aim is to minimise the amount you need to trek around the kitchen or cart heavy items from one side of the room to another.

Think about how the kitchen will be used – for cooking and washing the dishes, obviously, but if you will be eating, relaxing or doing the laundry here too, this



(Previous page, above and right) Marian Trew's kitchen was designed to accommodate her and her family's needs. (Bottom right) Diane Evans's kitchen



Diane Evans, who has rheumatoid arthritis, has adapted her kitchen



We have redone the kitchen. I've tried to make it as normal as possible. Walking into my kitchen you wouldn't think it was designed for a disabled person.

I wrote down all my needs and problem areas. I wanted a high fridge, a ceramic hob, a high oven and lever taps. I also knew I had a problem reaching things at the back of cupboards.

I looked in regular shops and magazines to research different designs. I thought about my problem areas and how I could overcome them. I did not get very much help from the salesman in the shop – he couldn't conceive the idea of what I wanted. There was a lot of planning on my part, and I thought very carefully before I bought anything about whether it was appropriate for me.

I discussed my requirements with the people at the kitchen company, who said there wouldn't be any problems with meeting them. I had to be quite instructive with them – everyone's disability is different.

In my kitchen now, I use a ceramic hob to cook on, which has a touch pad – it doesn't have knobs on it. I can drag saucepans off it without having to lift them. I have taps with levers on. These are a bit more expensive than normal taps but certainly make life a lot easier. Some people can bend down, but for me a low oven would be useless, so I've also got a built-in oven at a reasonable height. I also have a small kitchen worktop with a high seat, so that I can sit down and do things.



has other implications. 'Consider how the layout could be improved, and make sure you have enough space to move around,' says Paul Highman, principal information officer at the Centre for Accessible Environments (CAE). The CAE runs the House Adaptations Advisory Service (HAAS) which assists disabled people, their families or carers in finding an architect or designer to plan a house adaptation.

The size of your kitchen can also be an issue, according to Adam Thomas. A wheelchair user himself, he runs a company called Design Matters, and has designed hundreds of tailor-made kitchens for disabled people. 'People with arthritis often need a big kitchen. Not being able to reach very high or very low means that everything needs to be accessible.'

Choosing a sensible layout will make life a lot easier. Many people with arthritis

organise their kitchen so that things are as close as possible to where they need to be to avoid having to bend or stretch to reach things. 'I found it difficult carrying things around, so when we redid the kitchen we put the cooker next to the sink,' says Maxine. Sharon has also organised her kitchen to minimise how much she needs to move around. 'I keep my pots and pans right next to the hob, and the plates and cutlery next to the dishwasher so I haven't

Marian Trew had a brand new kitchen fitted by a specialist company when she became a wheelchair user

The kitchen we had before was galley style – very long and narrow. When I had to start using a powered wheelchair I could only get into the kitchen, I couldn't turn or get into any cupboards. It was not very useable.

We had the wall knocked down between the kitchen and the dining room so there is loads more room now. The units have been built around three sides. There are drawer units that are much easier to open than cupboards. I have shallow drawers at the top for cutlery and deeper drawers for pots and pans underneath.

There is a gap underneath the worktops and the sink so there is space for me to get into. The sink is at the front of the worktop and shallow, so it is easier to reach into it as my arm and shoulder movement is limited. There is also a control for the extractor over the hob just under the sink.

I have an induction hob, which is very slim and flat. It is on a corner so I can get right underneath it. The hob turns itself off once you take the pan off. The oven is at middle height so I can get to that easily.

We discussed having lower worktops but decided that, since others would be using the kitchen, I would get a wheelchair that goes up and down so that my relatives and children can cook at a normal height.

The new kitchen has made an enormous difference. It was very difficult for me to reach cupboards and taps, and as everything was filled in before, I couldn't move under anything. It is much easier now to prepare food.

got to go far to get things from one place to another,' she says.

Being able to reach very low or high cupboards can be a problem. Consider storing the things you need on a daily basis at the front of cupboards or on the worktop. You can get wire baskets that pull out from the cupboards when opened. Marian Trew, who has RA, advises having a lot of storage space. 'This way the cupboards don't get overcrowded and it is easier to get things out,' she says.

The choice of handles on cupboards and drawers can make a difference. 'If you have arthritis in your hands, consider the impact of different designs – choose drawer handles that are easier to grip,' says OT Jude. On cupboards, D-shaped handles or magnetic touch latches that open when lightly pressed are easier to use.

Choosing to have an even height for your work surfaces, hobs and sink will make life a lot easier as you can slide items across rather than having to lift them. 'For someone with arthritis, the height of a worktop is vital,' says Adam. 'If we get the height wrong by an inch, the person with arthritis could be in considerable pain.'

Ovens come with either a side opening door or a drop down door. According to the CAE's Paul Highman, an oven with a



Lever taps in kitchens and bathrooms are easier to use than taps you have to grip and twist, as Diane Evans' photograph shows

side door is safer. 'If you have a drop door, you are having to reach into the oven, which is dangerous as your arms are weaker at this angle.'

Marian has a side door oven. 'The door opens left to right instead of pulling down, and it has runners that come out so that the trays pull out but not completely,

Home, sweet home

which make it safe,' she explains. 'There is a top drawer under the oven – a pull out stainless steel surface – which I can put hot food on when the oven is open. This makes it easier to transfer cooking from oven to worktop.'

The height of the oven is also a consideration. 'I have a double oven. There is a top oven, which is also a grill. I have a high stool to sit on so I can manipulate things in and out of the oven,' says Anne Howard, who has OA and fibromyalgia.

Marian has also chosen an oven with touch controls to avoid having to grip knobs or dials.

The depth of your sink is another consideration. 'If you can't reach to pull the plug out, you might need a shallower sink,' says Adam. Using a washing up bowl raised on blocks in the sink will also mean less bending over. Buying lever taps or fitting tap turners onto existing taps can also make a big difference.

Ensure that your fridge and freezer are at an appropriate height for you. 'I got a fridge-freezer, with the fridge at the top. Bending down several times a day was too much effort,' says Anne.

It is important to choose a non-slip kitchen floor – this means no loose mats or highly polished floors if you are unsteady on your feet. A soft-cushioned vinyl floor can be a good choice.


If other people use or access your kitchen, you might need to factor in their needs. 'When my four-year-old granddaughter comes around, we have to watch her. The knives in the kitchen are not out of reach for her,' says Anne.

In some cases, a change in circumstances might mean that you have to consider redesigning your whole kitchen as Marian did when she became a wheelchair user for the first time (see box).

The bathroom

When basic things like keeping sweet and clean, or answering a call of nature become troublesome because of your arthritis, it is time to take action. Adapting your bathroom can make daily ablutions much easier. This might be a case of fitting a new shower cubicle or redesigning the whole bathroom as Sharon has done.

'I knew the kinds of things I wanted. I was lucky that taps with long handles had become trendy. It became a matter of finding ones that I liked,' says Sharon.

Getting in and out of the bath is a  p24

➔ *continued from page 23*

common cause of difficulties. Grab rails can help – they can be fixed either on the wall on the side of the bath or fixed to the floor next to the bath. They can help you get up or down, from one position to another or to move along. ‘Make sure grab rails are not smooth and that they are designed for use with wet hands,’ says Jude. It is also important to ensure that the grab rails can take the weight of the person they are designed for.

If you can’t give up the luxury of having a bath, a wide variety of equipment is available to help with bathing. ‘Equipment such as bath seats are available for getting in and out of the bath,’ says Jude. Bath boards can be used to sit on to shower, if your shower is over the bath, or to get down onto a bath seat fitted in front.



(Above) Level access to a shower is ideal if you have arthritis. (Left) Diane Evans has a non-slip mat in her shower and the grab rail doubles as a towel rail

Bath seats provide a seat within the bath, and come with different shapes and sizes. Pauline Dredge, who has OA, has an electric seat on her bath. ‘It goes up and down automatically to get me in and out of the bath – it would be very difficult otherwise,’ she says.

A walk-in bath is a more expensive option. You step in through the low door and sit on a seat in the bath. You do have to wait inside whilst it fills and drains, however.

Jude recommends fitting ‘level access showers or cubicle showers with a low step’. Diane’s new shower cubicle should be more accessible than her current one.

‘We are having a walk-in shower put in at the moment, with a small step that I can manage,’ she says. ‘I only need to touch a button to turn the shower on.’

For those for cannot stand for long periods of time, a shower stool might be an option. These can be free-standing or fold down seats which fix to wall.

The drying off process can also pose problems if you have arthritis. However, a body dryer may help. Like a hair dryer, only bigger, it can be installed into your shower. After your shower, it blows hot air to help you to dry off, making towels redundant. Quite a pricey option, but worth considering if this is a genuine

difficulty for you – your local social services may be able to help with the costs.

Some people find it helpful to fit grab rails around the toilet for support. ‘I have rails around the toilet because I can’t get on and off otherwise as my knees lock,’ says Maxine. Fitting a raised toilet seat can help, as can raising the toilet on a platform, though you can purchase toilets with the original seat in a higher position.

The bedroom

And so to the bedroom. What is needed here? Enough comfort so you can sleep (and get romantic too, perhaps), and plenty of room for storing clothes and getting dressed.

Bed height needs to be thought about in practical terms. ‘If the bed is too high then it will be difficult to get your legs onto, if it is too low, it will be difficult to stand up from,’ says Jude. Looks like futons are out,

then. But splashing out on a whole new bed might not be necessary – blocks can be placed under the legs of a standard bed to raise its height.

Pauline finds that handles under the mattress help her to get out of bed. ‘I’ve got a round handle that fits under the mattress – I hold onto it to pull myself up,’ she says. Leonard Madden, who has OA, chose to buy an electrically operated bed. ‘I have a bed that I can operate with a remote to raise the leg up or the end of the bed,’ he says.

Not all solutions have to be expensive, as Diane shows. ‘I was having difficulty with bedside lights. I was struggling to get the switch on and off. I have a small standard lamp with a floor switch, which I got from Ikea for a fiver. It will do for me,’ she says.

There can be simple answers to storage problems too. ‘Bending down is difficult. I have raised my shoes on a rack inside the wardrobe rather than keeping them on the floor of the wardrobe,’ says Leonard.

Anne lives in a bungalow. ‘There is not much room for storage here, so I chose a bed with drawers underneath,’ she says.

The living areas

Most people spend a lot of time in the living areas of the home, whether they are

eating, reading, watching TV or just relaxing, so the choice of furniture and how everything is arranged is important. ‘When buying new furniture or storage units, try reaching all shelves and drawers first to check they are practical. Consider furniture heights – low furniture can be difficult to get up from,’ says Jude.

The choice of chair or sofa can be very

Home, sweet home

important. ‘Your posture can impact upon the pain experienced in joints,’ says Jude. Maxine had to buy a new sofa as the old one had a loose cushion back, which made getting up hard. ‘We’ve got a high back settee that automatically reclines so I can



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Choose sofas and chairs with arms and firm cushions so you can get up easily

Anne Howard moved into a bungalow because of her osteoarthritis and fibromyalgia

I did have housing that was tied into my job, but when I had to give up work because of my arthritis, housing became an issue. I applied to the local council and my bungalow came up. I had been living in a Victorian flat up 29 steps before.

The previous tenant of the bungalow was disabled, so some adaptations were already in place. For example, the bathroom is a wet room where the water drains away. I have a shower chair that I use to sit under the shower and I have a stool at the sink. I also have a pick-up stick hanging on the sink to retrieve clothes off the floor. The toilet seat is raised up by around four inches and there is a grab rail at the side of the toilet.

I walk with elbow crutches, so I have to pace myself. Also, I have to have things within reach – not at ground level or very high up – as bending is difficult.

I have wall-to-wall carpets. I don’t like wooden floors. I believe they get quite slippery when wet which can be very precarious if you’re walking with elbow crutches.

I have a washing line assembly in the back garden – the line goes from the back door across garden on a pulley system. As you pull it around, it has pegs attached to it that can open and close automatically, so as you stand on the step, you can hang out towels and shoot them across the line. The previous tenant left it.

If you had an unlimited pot of money, you could make your home look attractive. Otherwise, you need functional pieces. You have to go with practicalities when you are disabled.

put my legs out,’ she says.

‘I try to make chairs as high as possible, so it is easier to get out,’ says Richard Thomsson. ‘For example, I have a chair with blocks underneath it. It also has a number of cushions on it,’ he explains. Stools and pouffes are good for resting tired feet.

The positioning of your electrical equipment can also make a difference. ‘I struggle with the video and the DVD as the stand that I have is quite low down,’ says Anne. Diane has raised her video recorder onto a higher shelf. ‘I also leave everything plugged in,’ she says. The right kind of remote control can also make a huge difference.

Electricity sockets that are low down a wall can be moved up if you struggle to reach these. ‘Mostly all our sockets are at waist level now,’ says Philip Whittaker, who has OA.

Plugs with hand grips can also be helpful. There are many types of light switches that are easier to use than conventional ones. You can buy large rocker switches or pull-handles with a toggle at the end. It might also be an

↳ continued from page 25

idea to have a light switch at the top and at the bottom of the stairs to avoid having to negotiate stairs in the dark.

Getting up and down the stairs

Many of us get puffed out going up and down the stairs – but using stairs can be extra difficult if you have arthritis, and can put a lot of pressure on the joints. The width of the steps and the number of stairs can all affect how easy it is to get up and down. Some people may choose to live in a bungalow, such as Anne (see box), or in a flat accessible by a lift.

If you do have stairs, there are a number of ways you can make negotiating the steps easier. OT Jude suggests having a second rail and/or additional grab rails fitted. Carpeting your stairs is also safer as you will be less likely to slip.

Thinking about what you will need, and where, can help you avoid unnecessary trips up and down. 'I keep a pile of things at the top and bottom of the stairs so I don't have to keep going up and down and only have to come down once on bad days. I keep a second set of toiletries in the

downstairs toilet,' says Diane.

Other people with arthritis prefer to use a stairlift – this is not a cheap option though. 'It costs about £1,500-£2,000 for a straight track lift. A curved track lift will be at least £1,000 more expensive,' says Elaine Green, OT assistant at Worthing Council social services.

If you are unsure whether a stairlift would suit you, you could hire a rental stairlift or try one out at your local disability centre. You may also be entitled to support. 'Means tested grants are available through your local social services OT, who will assess your need for stairlift and provide support through the process,' says Elaine.

Sharon could only find one company that made a stairlift that would suit her. 'I had to get a perching stairlift as my knees don't bend in very far so I couldn't have a normal seated one. Also, my staircase is quite wide and it goes around a corner,' says Sharon.

When selecting a stairlift, Jude advises checking that the person fitting the equipment is qualified to do so. It is worth getting two or more company representatives to your home to compare costs and equipment.

It is important to remember that a

stairlift should only be used by the person it has been fitted for. 'Always check the maximum user weights for the equipment and consider the ease of use of the controls if you have arthritis in your hands,' says Jude. 'Make sure the stairlift covers the full length of the stairs. If you would struggle with 10 steps you are likely to struggle with the last few steps as well.'

Getting a handle on doors and windows

Ensuring you can open and close your doors and windows may seem like such a basic requirement, but if you can't, you could either feel trapped, or possibly chilly from the draught.

If your windows come with fiddly catches, you might consider changing the handles to make opening and closing easier. Diane struggled with closing her sash windows. 'There were a lot of days when I couldn't go out as I couldn't shut the windows,' she says. Maxine and her

Finding products and designs can take time – the internet is a useful resource



Home, sweet home

The garden

And so to the outside. Looking after your garden need not be a problem when you have arthritis.

According to Tim Spurgeon, head of advisory services with Thrive (the charity which provides practical gardening advice and skills to disabled people), there are three main elements to making gardening easier. 'The first element is the design of the garden to make sure you can get around easily,' says Tim. 'The next element is what you grow – choose plants that are easy to look after and can be left alone for periods of time. The final element is choosing the correct tools for you,' he says.

Leonard has designed his garden to make it less labour intensive. 'I have put in a fairly large patio to reduce the amount of grass I have to mow,' he says. Similarly,



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Potting plants using benches at the right height will help you avoid unnecessary bending

family are addressing the same problem. 'We are getting the windows replaced so that the whole side opens rather than just the top,' says Maxine.

Gripping and turning door knobs can be a problem for some people with arthritis – round handles are particularly difficult. Fitting lever handles on your doors can overcome this as they are easier to grip. Sharon had problems locking the back door. 'I got the builder to alter the pressure needed to turn the key. This made it a lot easier,' she says.

The width of doorways can be an issue if you are a wheelchair user like Marian. 'The more space you have the easier it is. We had the double door into the hallway removed. There is an archway now,' she says.

Flooring

The choice of flooring is important, as slippery or uneven flooring could lead to falls, as Jude has seen in her work as an OT. 'Rugs or loose mats can cause a trip hazard,' she warns. Many people with arthritis choose carpets over rugs or wooden floors.

'We would not have rugs as I would be scared of falling over them,' says Pauline. Richard also has carpets throughout his home. 'I put in carpets – though not on the kitchen floor – even the bathroom is carpeted,' he says. Fitted carpets also help keep the home warm.

Although carpets or foam-backed rugs

Philip Whittaker has adapted his garden

I have osteoarthritis in my back, shoulders, knees and hips – I can't walk very far at all. I did have two lawns but it got too much for me, so I turned the back garden into a gravel area, with pots of plants so these can be moved about on trolleys wherever I want them. The borders and flower bed are small enough to work on without having to stand on them.

I have bought adapted tools such as rakes and forks – I've got a D-handled fork and spades, and my wife does a lot of the digging. Instead of bending, I have tools with elbow extensions, which means I can hold on with my arms instead of my hands whilst doing the hoeing or raking.

I do think about my choice of plants. I don't do bedding plants. It is mainly permanent plants that don't need a lot of attention. I have a few borders in the front garden and I have a gardener's stool to sit on.

I have a potting shed, which has benches at a height for me to sit comfortably. There is also a sloping seat in there, which social services provided.

can help ease joint pain (especially if you are standing for a long period of time), Jude says that they might not be suitable for everyone: 'Deep pile carpets can be unsuitable for people using walking aids.' Other medical conditions can also be a consideration. 'I put wooden floors in as I have asthma,' says Leonard. 'I am quite pleased with my flooring, it is not really slippery.'

It is an idea to keep your carpets in good condition so that you do not trip up on worn or uneven edges. 'Avoid high thresholds between rooms as these can be difficult to negotiate with a walking aid and/or cause a falls hazard, and people can trip over them,' says Jude.

Philip turned one of his two gardens into a gravel area (see box) to cut down on the work he had to do.

Putting in firm paths along the beds and borders is a good idea as it will mean you do not have to stand on the soil. According to Tim, paths in the garden should be wide enough to use with a stick, a walking frame – or a wheelchair, if necessary. 'The paving should be in good order and laid evenly, and of a non-slip material,' he says. 'Ensure that there are no bits you can trip over. The edge of the path should be well defined and kept clear of leaves as these will make the path slippery.'

Building in resting places in the garden is a good idea. 'Have

➔ p28

Home, sweet home

➔ *continued from page 27*

somewhere to perch and sit and rest if you have a large garden,' says Tim. A garden bench can also look very attractive.

It can help to put in steps plus a handrail where the ground level changes in the garden. Richard has steps up to his lawn: 'One of my sons got a handrail for steps and fitted it. It really is sturdy.'

'If you use a handrail on steps, you should start them a metre before the top of the step so that you do not have to balance on the step leaning forward,' advises Tim. 'In addition, if you have low vision, paint the edge of the steps white to avoid a fall.' The gradient of any ramps in the garden should be no more than 1 in 15. 'With very long slopes it is good to have a level resting place,' Tim says.

Many people with arthritis, including Leonard, also use raised pots and beds to avoid having to bend down. 'I have a lot more in pots rather than in the ground. Raised pots are easier to reach,' he says. Tim points out that plants in containers will dry out quicker and will need more watering, so you'll need to find a suitable watering can. Plastic containers hold moisture better so less watering is needed than for clay or earthenware pots.

Leonard chooses to grow plants that do not take a lot of labour. 'I grow perennial plants rather than new plants each year,' he says.

Tim advises thinking about the conditions you have in your garden when choosing your plants. 'If you have a very muggy garden you do not want to grow alpiners. You should also choose plants that cover the ground easily to reduce the amount of weeding.

'Select Mediterranean plants or herbs that do not require much watering. If you like conifers, choose dwarf growing conifers as there will be less pruning to do. If you want apples and pears and other fruits, you can grow dwarfing varieties of these as well so that all fruits remain within reach.'

Using the right tools will also avoid straining your joints unnecessarily. 'All the tools in my garden are long-handled so I don't have to do a lot of bending,' says Leonard. 'I carry around a grabber, which folds up and hooks onto my belt, to pick things up in the garden.'

If you have a greenhouse or a shed in the garden, try to situate this as close to the house possible, and with good even access between all buildings. Try to grow things



Keep the paths clear of leaves which can make things slippery underfoot

at the right level for you – you can have plants growing on benches, for example.

Getting support

Making house adaptations to suit your needs can be a costly business. Some people with arthritis may be entitled to a Disabled Facilities Grant. This is a grant that you can get from your local authority to help you live an independent life. This includes adaptations such as widening doors, a stairlift, changes to the bathroom and the kitchen.

If you are unsure about which home adaptations would be best for you, a visit from an OT may help. OTs are based in hospitals or social services departments. Your doctor can refer you to a hospital OT, but you can either contact social services yourself or be referred.

All OTs provide advice on how best to carry out everyday activities and on suitable equipment. Social services OTs can arrange structural adaptations to enhance safety and independence within the home.

Pauline was referred to an OT through her doctor. 'The OT was quite helpful and provided me with a rail around the toilet. Though I had to find a bath seat myself.'

Sharon also saw an OT after her hip replacement. 'Somebody came to make sure I had a high enough chair and a high enough bed. They provided me with raisers,' she says.

OTs provide advice on where to get equipment. Some equipment might be available on loan from the hospital or

equipment for daily living.

If standard equipment does not meet your needs, REMAP can be accessed via OTs. REMAP is a national charity of retired engineers who work with you and your OT to make one off pieces of equipment where there is no commercially available alternative.

Remember that accessible does not mean ugly, and that many items will be available in regular shops. We tend to buy what we can from normal shops first,' says Maxine. Diane looked on market stalls and in catalogues to get ideas for her new kitchen. Some people find that magazines are a good source of inspiration – try keeping a cuttings file ready for when you want to give your home a makeover. Using the internet is another great way of researching products.

Finding the right things should be getting easier. Mainstream retailers are beginning to cotton on to the fact that everyone wants life to be more convenient and less stressful – not just people with long-term conditions. As Diane says, 'it is not necessarily things that are especially for disabled people that are helpful. It is a matter of finding out what is good for you.'

For further information, please contact:

● Assist UK (leads a national network of Disabled Living Centres)

Tel: 0870 770 2866

Website: www.assist-uk.org

● Centre for Accessible Environments

Tel: 020 7840 0125

Website: www.cae.org.uk