

Care Ease System for Physically Disabled Persons

Kilaparthi Harikrishna, Assistant Professor, Department of ECE, Satya Institute of Technology and ManagementVizianagaram, Andhra Pradesh, India. Email:- harikrishna.kilaparthi@gmail.com
Revada Yamuna, B Tech Student, Department of ECE, Satya Institute of Technology and Management, VizianagaramAndhra Pradesh, India. Email:- yamunarevada037@gmail.com
Regu Kavya, B Tech Student, Department of ECE, Satya Institute of Technology and Management, VizianagaramAndhra Pradesh, India. Email: - kavyaregu46@gmail.com
Bandi Thanuja, B Tech Student, Department of ECE, Satya Institute of Technology and Management, Vizianagaram, Andhra Pradesh, India. Email: - kavyaregu46@gmail.com
Sangireddi Divya, B Tech Student, Department of ECE, Satya Institute of Technology and Management, Vizianagaram, Andhra Pradesh, India Email: - thanujabandi69@gmail.com
Sangireddi Divya, B Tech Student, Department of ECE, Satya Institute of Technology and Management, Vizianagaram, Andhra Pradesh, India. Email: - sangareddydivya2@gmail.com
Shapa Pavan Kumar, B Tech Student, Department of ECE, Satya Institute of Technology and Management, Vizianagaram, Andhra Pradesh, India. Email: - sangareddydivya2@gmail.com
Illapu Mahesh, B Tech Student, Department of ECE, Satya Institute of Technology and Management, VizianagaramAndhra Pradesh, India. Email: - pavanchapppa056@gmail.com

ABSTRACT:

A care ease system is vital for physically disabled individuals to enhance their independence, improve their quality of life, and foster greater inclusion within society. Such systems can provide essential support, such as remote monitoring of health conditions, automated assistance with daily tasks, and improved accessibility to information and services. By leveraging technology, these systems can empower individuals with disabilities to live more comfortably and independently, reducing reliance on caregivers while maintaining dignity and autonomy.

Furthermore, these systems can also benefit caregivers by providing valuable insights into the well-being of their loved ones and offering tools to better manage caregiving responsibilities. This "Care Ease System" aims to provide assistance and independence to individuals with physical disabilities. The system leverages a combination of hardware and software components, including Arduino, DHT11 sensor, ADXL335 accelerometer, GSM module, LCD display, buzzer and Push button. The system enables remote monitoring of vital signs like temperature and humidity using the DHT11 sensor, fall detection through the ADXL335 accelerometer.

The GSM module allows for emergency alerts to be sent to caregivers in case of a fall or other critical situations. This system empowers individuals with disabilities by providing them with greater autonomy and control over their environment, enhancing their quality of life and well-being. This "Care Ease System" is designed to enhance the independence and well-being of individuals with physical disabilities. The ADXL335 accelerometer detects falls and triggers an alert, notifying caregivers or emergency services.

At the core of the system is an Arduino microcontroller, responsible for interfacing with various sensors and controlling the system's functionality. These sensors include the DHT11 for environmental monitoring (temperature and humidity) and a push button for user input. The system Communicates with the user is facilitated through an LCD display for real-time information and a buzzer for alerts by GSM technology.

INTRODUCTION:

The Internet of Things (IoT) refers to a network where various physical objects are connected and accessible via the internet. These "things" can range from vehicles with built-in sensors to individuals with wearable health monitors.

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Volume: 09 Issue: 04 | April - 2025

SJIF Rating: 8.586

ISSN: 2582-3930



Fig.1 Internet of Things

Through embedded sensors and relays, IoT devices interact with internal states or external environments. IoT enables seamless communication and data exchange between devices, which may include health monitoring systems, smart vehicles, and environmental sensors—comprising a combination of hardware, software, and services. It leverages existing technologies to gather and utilize valuable data effectively.

IoT reduces the need for human intervention by enabling devices to observe, identify, and respond to situations autonomously. By connecting embedded systems to the internet, IoT allows remote control and monitoring of objects from anywhere. This connectivity enhances data collection across locations, boosting efficiency, safety, and security. IoT platforms also help organizations lower costs by improving process efficiency, asset utilization, and productivity. As data, processes, and devices converge online, IoT creates new opportunities across sectors. Its applications span electrical, medical, IT, and even space research fields.

Assisting Physically Disabled via IoT

IoT technology offers valuable support to patients with physical disabilities, which may range from reduced stamina to full paralysis. By enabling interaction between embedded sensors and physical devices, IoT allows for proactive assistance through advanced human-machine interaction. Paralyzed patients can benefit from applications that integrate home automation, patient monitoring, and communication features like speech-to-SMS or touch-to-SMS. This system helps reduce dependency and provides support even when caregivers are not nearby. Patients can control electrical appliances using voice or touch commands and send messages such as "need water" or "need food" to caregivers, which are also played aloud via a speaker to alert anyone nearby. The system monitors vital signs like heartbeat and temperature using sensors such as LDR and LM35, and alerts can be sent when thresholds are crossed, allowing doctors to act promptly. These sensors include the DHT11 for environmental monitoring (temperature and humidity) and a push button for user input. The system Communicates with the user is facilitated through an LCD display for real-time information and a buzzer for alerts by GSM technology.

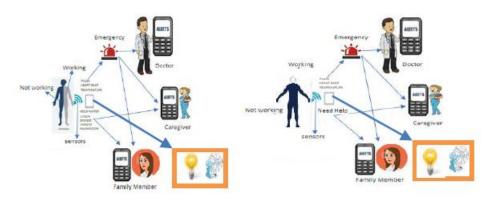


Fig.2 Android based Paralyzed using IoT for dumb user and for Voice user



LITERATURE SURVEY

Several individual models have been developed for health monitoring, home automation, and voice recognition. Kumar Mandalu et al. designed an IoT-based home automation system using Bluetooth and Ethernet with Arduino, though Bluetooth range was limited. Tharaniyasoundhari et al. introduced a voice-controlled home automation system using SVM and GPRS, but faced packet loss during signal fluctuations. Gagan developed an automation system using Intel Galileo for safety and control, though increased sensors raised costs. Maradugu Anil Kumar and Ravi Sekar proposed a health monitoring app using Zigbee and ATMEGA8L, but range was limited. B. Sneha used ATMEGA328 and Bluetooth for health tracking, again limited by range. Gulbakshee used HMM in a speech-to-SMS system with slow recognition. Mc.Ian used a dictionary-based speech recognition method, which was time-consuming due to pronunciation variations. Sanja also used HMM-based speech-to-SMS, facing similar delays in simple systems. Sharon suggested IoT assistive technologies to enhance independence for differently abled people. Bhoomika proposed a secured healthcare IoT system with message compression to prevent data loss. Riazul presented various healthcare data transfer methods and monitoring parameters. Sapna focused on IoT's role in healthcare with cloud connectivity. Alexandru developed a post-ICU remote monitoring system using sensor arrays. Riazul also proposed a collaborative security model for IoT and eHealth. Hasmah introduced a remote body temperature monitoring system for timely intervention. Lastly, Manohar proposed an email-based home automation model, though delayed or missed emails affected system performance.

PROPOSED SYSTEM

Understanding IoT-enabled systems is crucial to develop efficient automation for the disabled. Leveraging IoT's broad applications, a smart and supportive system can be built. Previously, health monitoring posed challenges for doctors and families, with patients relying heavily on caregivers for basic tasks. IoT in healthcare enhances patient engagement and satisfaction by enabling better doctor-patient interaction. It not only ensures safety and health but also improves the quality of care. Earlier methods struggled with timely treatment and doctor unavailability. Home automation empowers patients to be independent, while the messaging system clearly communicates their needs, leading to greater comfort and satisfaction.

Although many systems have been developed for healthcare, home automation, and voice-to-speech, most lacked ease of access. Hence, a dynamic system integrating all these functions with efficient use of IoT is needed to ensure automation and user-friendliness.



Fig.3 Care Ease System for physically patients



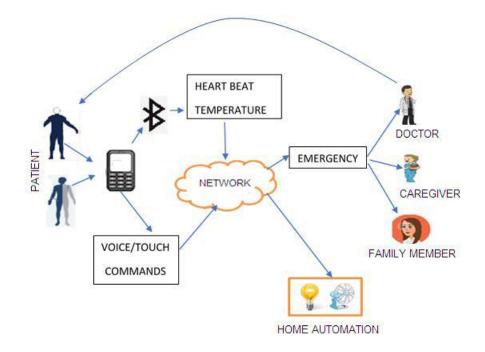


Fig.4 Working of Proposed system for physically disabled people using IoT ANALYSIS

The analysis phase is a crucial step in developing the "CARE EASE SYSTEM FOR PHYSICALLY DISABLED PERSONS," as it lays the foundation for all subsequent stages. It involves identifying user needs, defining system requirements, and evaluating suitable technologies. This phase ensures that the system is designed to effectively improve the quality of life, safety, and independence of physically disabled individuals. Visual tools like diagrams and flowcharts are used to clarify system architecture, while algorithms are assessed to ensure they are reliable and efficient.

Software Requirement Specification (SRS)

The Software Requirement Specification (SRS) defines the system's purpose, core functions, performance expectations, and limitations. It serves as a blueprint for developers, testers, and stakeholders, ensuring everyone has a clear understanding of what the system must deliver. The SRS helps avoid confusion, supports accurate planning, and acts as a reference for testing and validating that the final product meets user expectations.

User Requirements

User requirements reflect the real-world needs of physically disabled individuals, aiming to make their daily lives safer and more independent. The system must detect falls in real-time and immediately alert caregivers with location details. It should monitor environmental conditions and adjust them automatically when needed. In emergencies, the system must allow users to request help quickly, even without speaking or moving. The user interface should be simple and intuitive, catering to users with different abilities. Users must be able to customize alert settings, and the system should function reliably under all conditions, including power or network failures. Accessibility features must support users with visual, auditory, motor, or cognitive impairments, ensuring broad usability.

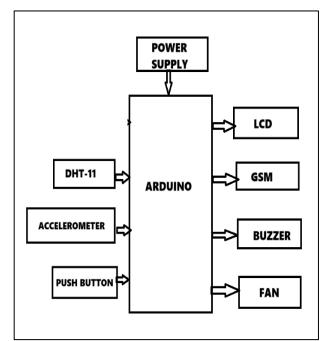
Software Requirements

The Arduino IDE is used to write, edit, and upload code to Arduino boards, providing essential tools like a code editor, error display, and serial monitor. The GSM module enables mobile communication, supporting both data transmission and voice services across various frequency bands, with global roaming capabilities. The SMS Center (SMSC) manages the delivery of SMS messages, storing and forwarding them as needed to ensure consistent communication even when the recipient is temporarily unreachable.



Hardware Requirements

The hardware requirements of the CARE EASE SYSTEM include all the physical components needed for reliable performance. These components monitor the environment, detect emergencies, and provide quick assistance. Key hardware includes sensors, microcontrollers, communication modules, and display units, selected for performance, cost, and reliability. The system uses an **Arduino microcontroller** (such as Uno, Nano, or Mega) to process sensor data and send alerts. A **GSM module** (like SIM800L or SIM900) enables SMS communication with caregivers in emergencies. The **ADXL335 accelerometer** detects falls by measuring acceleration in three axes, offering high sensitivity and low power consumption. An **LCD screen** (16x2 or 20x4) displays system status and alerts. A **DHT11 sensor** monitors temperature and humidity, offering fast and stable readings. A **buzzer** provides audible alerts during emergencies, and an **emergency push button** allows users to manually trigger an alert. The system is powered by a stable **power supply**— either a battery or an AC adapter—to ensure continuous operation. The content diagram, also known as a context diagram, is a high-level visual that outlines the CARE EASE SYSTEM's boundaries and interactions with external entities. It highlights key inputs, outputs, and stakeholders, offering a clear overview of the system's scope. Its main purpose is to create a shared understanding of the system's environment and ensure alignment with project goals. Unlike detailed diagrams, it avoids internal complexities and focuses on how the system communicates with its surroundings, making it especially useful in the early stages of development.





The design phase of the "CARE EASE SYSTEM FOR PHYSICALLY DISABLED PERSONS" outlines a modular, userfocused safety solution using GSM communication and Arduino-based processing. It includes multiple sensors for realtime monitoring of physical movement and environmental conditions, with fall detection powered by an accelerometer and manual alerts enabled via a push button. When emergencies are detected, a buzzer sounds locally, and the GSM module sends SMS notifications to caregivers with sensor data and user location. The DHT-11 sensor monitors temperature and humidity, while an LCD screen displays system status for user awareness. The data flow diagram (DFD) visualizes how information moves across modules, aiding in system architecture and database design. The sensor and alert modules are independently designed for easy integration, low power consumption, and reliable performance. Key components are selected and positioned carefully to ensure accurate detection, durability, and user comfort, making the system scalable, maintainable, and highly responsive.



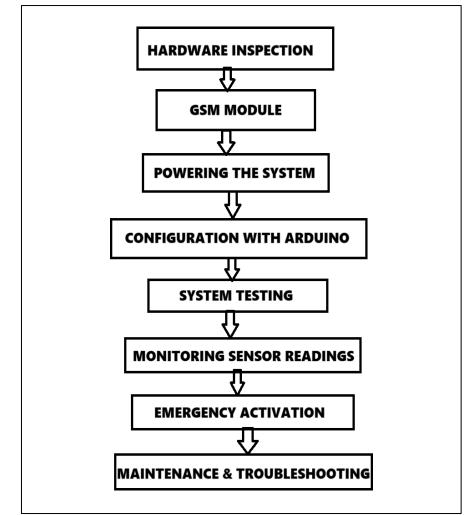
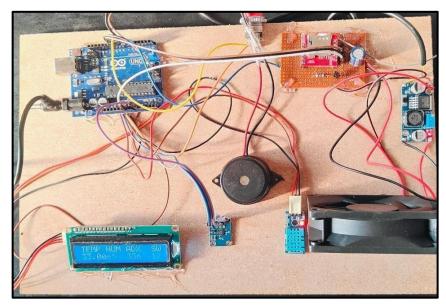


Fig.6 Data flow diagram for care ease system

RESULTS

The CARE EASE SYSTEM FOR PHYSICALLY DISABLED PERSONS project aimed to develop a comprehensive and





affordable solution that provides real- time monitoring, alerts, and support for individuals with physical disabilities. The system utilizes GSM technology for tracking and alerts, an Accelerometer for movement detection, a buzzer alert system, an emergency push button, and an LCD screen for user interface. The system was designed to address safety, independence, and well-being of physically disabled individuals. It sought to create a system that is accessible, reliable, and effective in supporting the well-being of its users. This System gives the Real-Time fall detection, alert notifications, Emergency assistance and temperature range, Automatic controllable fan & Emergency push button. This System also consisting of LCD in order to maintain specific tasks and also gives the schedule.

Fig.7 The Care Ease System for Physically Disabled Persons

Real-Time Fall Detection: The system provides real-time fall detection using a Accelerometer and a fall detection algorithm.

Alert Notification System: The system sends SMS alerts to caregivers or emergency services in case of a fall or other emergency.

Emergency Assistance: The system allows the user to manually trigger an alert in case of an emergency by pressing the emergency push button.

User-Friendly Interface: The system provides a user-friendly interface with an LCD screen that displays system status, sensor readings, and emergency contacts.

Cost-Effective Design: The system is designed to be affordable and accessible to a wide range of users, utilizing low-cost hardware components and open-source software

CONCLUSION

The **CARE EASE SYSTEM FOR PHYSICALLY DISABLED PERSONS** is designed to offer an affordable, real-time monitoring and alert solution to enhance the safety and independence of physically disabled individuals. It uses GSM technology for communication, an accelerometer for fall detection, a buzzer and emergency push button for immediate alerts, and an LCD screen for user interaction. The system ensures real-time fall detection, sends SMS alerts to caregivers, and allows manual emergency activation. With its user-friendly interface and cost-effective design, the system provides a reliable and accessible solution to address the limitations of existing assistive technologies.

A care ease system is vital for physically disabled individuals to enhance their independence, improve their quality of life, and foster greater inclusion within society. Such systems can provide essential support, such as remote monitoring of health conditions, automated assistance with daily tasks, and improved accessibility to information and services. By leveraging technology, these systems can empower individuals with disabilities to live more comfortably and independently, reducing reliance on caregivers while maintaining dignity and autonomy. The analysis phase is a crucial step in developing the "CARE EASE SYSTEM FOR PHYSICALLY DISABLED PERSONS," as it lays the foundation for all subsequent stages. It involves identifying user needs, defining system requirements, and evaluating suitable technologies. This phase ensures that the system is designed to effectively improve the quality of life, safety, and independence of physically disabled individuals.

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