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Hoarding Behaviour: A workshop for RAMP CHW

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2 ☐ **What is hoarding?**3 ☐ **What is hoarding?**4 ☐ **What is hoarding?**

- 1 ☐ ➤ More stuff than fits in the space
 - Distress
 - Impairment
 - Random piles of items of mixed importance
 - Fear of putting things out of sight

5 ☐ **Distinguishing hoarding from related concepts**6 ☐ **Demographics and features of hoarding**

- Onset in teenage years
- Clutter and impairment by mid 30s
- Average age at treatment is ~50
- Low marriage rate, high divorce rate
- Tend to live alone and may be socially isolated
- Family history of hoarding is common

7 ☐ **Primary manifestations of hoarding**8 ☐ **Special meaning of possessions**9 ☐10 ☐ **Co-morbidity** **(N=217)**

- 1 ☐ Major Depressive Disorder 50.7%

Attention Deficit Disorder	27.8%
Generalized Anxiety Disorder	24.4%
Social Phobia	23.5%
Obsessive Compulsive Disorder	17.0%
Specific Phobia	14.3%
2 Kleptomania	9.9%
Post Traumatic Stress Disorder	6.9%
Substance Abuse	1.8%
Bipolar Disorder	1.4%
Eating Disorder	1.4%

11 ☐ **Personality traits**

12 ☐ **Nuances of problem awareness (insight)**

Fluctuating problem awareness

General categories of awareness

- Non-insightful
- Insightful, not motivated
- Insightful, motivated, non-compliant
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Different levels of problem awareness require different responses from service providers

13 ☐ **Hoarding specific assessment tools**

Hoarding Rating Scale (HRS),	5 items-brief
Activities of Daily Living for Hoarding (ADL-H)	Check-list
Saving Cognitions Inventory (SCI)	Cognitive
Savings Inventory-Revised	Insight
Clutter Image Rating (CIR)	Pictorial
Home Environment Index (HEI)	Sanitation
Home Environment Assessment Tool for Hoarding Environmental	

14 ☐ **Home Environment Assessment Tool for Hoarding**

Motivated by need for a quantitative *generalist* measure of environmental risk for hoarding

Collaboration between researchers and community partners

Items developed by 34 frontline hoarding experts in different fields

Tested and refined in Canadian field trials

- rural and urban settings
- fire prevention, older adults, and tenancy preservation

15 ☐ **Overview of the HEATH**

Checklists in five domains

- each is followed by a rating scale

0-2 severity rating for each domain

- Requires professional judgment on severity of risk

16 ☐ **1. Safe Pathways**

17 ☐ **2. Fire Safety**

18 ☐ **3. Structural Integrity**

19 ☐ **5. Sanitation**

20 ☐ **Balance of change**

21 ☐ **Decisional Balance Sheet**

- 1
- + To know what I have
 - + Be able to use what I have
 - + Family and friend happy

- Part with objects
- Hard work
- Emotional distress

- 2
- + Keep stuff
 - + Avoid decision making
 - + No work to clear objects

- Can't find anything

- Can't have people over
- Can't use rooms

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- ✓ Educate the client about the risks
- ✓ Be clear about expectations and limitations
- ✓ Ask questions rather than telling what to do
- ✓ Understand before moving to action
- ✓ Use respectful, non-judgmental language
- ✓ *Work with* instead of *doing for*
- ✓ Genuinely praise success, however small

23 ☐ **Harm reduction principles**

- Reduce potential harm caused by type of objects, how and where they're stored
- Purpose is not to stop all collecting and saving
- Move items out of high risk areas to lower risk areas, reducing volume only eliminating items if absolutely necessary
- Set up rules and systems to maintain gains
- Provide on-going monitoring to maintain gains
- Provide incentive/reinforcement for maintaining gains

24 ☐ **Harm reduction: conceptualize risk profile**

- ☐ Identify the most important risks
- ☐ Prioritize immediate/acute threats to personal safety and housing security
- ☐ Determine who is affected by each particular risk
 - If only the resident is affected, and the resident has decisional capacity, then resident needs to have control over this risk
- ☐ Consider the minimum basic standard and strive for this
- ☐ How can you break the task down into small manageable parts that will eventually achieve the minimum standard?

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Door: open 90° without obstruction

Bedroom window: can access and open

Stove: nothing combustible stored on or near

Home health: sufficient space and conditions for staff to work

Pests: space clear enough for heat treatment for bedbugs

Pathways: path from bedroom to exit is 1m wide

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26 ☐ **Effective strategies for intervention**

- ✓ Be clear about expectations and limitations
- ✓ Ask questions rather than telling what to do
- ✓ Understand before moving to action
- ✓ Use respectful, non-judgmental language
- ✓ *Work with* instead of *doing for*
- ✓ Genuinely praise success, however small

27 ☐ **Setting intervention targets**

- (Problems from) hoarding take decades of time to form, cannot be solved quickly
- May not be able to accomplish everything, prioritize specific targets for intervention
- Targets should be a blend of what needs to be done and what the person with lived experience wants
- Targets should be specific and accomplishment should be measurable and even seeable (in photos)

28 ☐ **Decision-making questions**

- Would I buy this item again if I didn't already have it?
- How many others do I have, and is that enough?
- Do I have enough time and/or space for this item?
- Have I used it in the last year?
- Do I have a specific plan to use this item?
- Is this item important or does it seem so because I am looking at it?

- Is it current and/or of good quality?
- Do I need it or just want this item?
- Will not having this help me solve my hoarding problem?

29 ☐ **House and room mapping: a technique**

- Create a map of the home
- Begin with greatest area of risk and/or highest motivation
- Label each room as a separate zone
- Further sub-divide each room into sections
- Begin sorting in section 1 and move clockwise (or counterclockwise) through the room until all sections have been sorted
- Nothing remains or re-enters that section unless it “lives there”

30 ☐ **A few things that may help**

- Use a timer
- Take frequent breaks
- Limit visual field
- Ask, don't tell
- Instructions verbally and in writing

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- Develop new routines to replace old habits and prevent re-accumulation of clutter
- Establish and use intentional space for desired activities
- Set a schedule for enacting new behaviours
- Pair new behaviours with established behaviours
- Invite visitors to the home
- Regular home visits if possible

32 ☐ **Multi-agency involvement**

- Hoarding is a mental health problem that may create physical, health, safety, housing and familial problems
- Hoarding cases often require significant coordination of services
- Networking and coordinating with other service providers are often necessary.

33 ☐ **Coordinated case management**

- Teaming with other professionals can maximize resources, provide networking potential and increase range of knowledge
- Hoarding task forces provide an opportunity to connect with other providers in your geographic region
- Carrot and stick approach
- Coordinated service plans and disability reasonable accommodation are useful tools

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35 ☐ **Contact information**