

Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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HOARDING 101: What is Hoarding and How to Help

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Hoarding Disorder

- Hoarding disorder is a mental health issue that can cause struggles for the individual, family, legal system and human services or healthcare professionals.
- Audience members will increase their knowledge about hoarding disorder and have tools/skills to assist the individual who hoards.



Objectives

- Understand the DSM-V diagnosis of Hoarding Disorder
- Learn the reasons behind hoarding behaviors
- Know the different types of hoarders
- Understand what works with eliminating the behavior
- Learn about minimizing anxiety to make progress
- Know the most common mistakes to avoid
- How to achieve aftercare success

Statistics about hoarding

- 2-6% of population, makes hoarding one of the most frequent of the mental health disorders (Steketee and Frost)
- People with HD are less likely to marry and more likely to divorce (Samuels 2002 Kim 2001)
- Epidemiological studies indicated that males are more prevalent at hoarding than females, but clinically samples are predominantly female.
- Appear 3x more in adults ages 55-94 than in ages 34-44
- Hoarding appears to run in families, 50% have a relative that hoards
- Approximately 75% have a comorbid mood or anxiety disorder.

Commonalities among individuals who hoard

- Age: While severe hoarding is most common in middle-aged adults around the age of 50, their hoarding tendencies began around ages 11 to 15. During these early teenage years, they typically saved broken toys, outdated school papers, and pencil nubs.
 - Personality: Oftentimes hoarders struggle with severe indecisiveness and anxiety.
 - Genetics: Although hoarding is not an entirely genetic disorder, there is some genetic predisposition involved in the disorder.
 - Trauma: Many hoarders experienced a stressful or traumatic event that propels them to hoard as a coping mechanism.
 - Social Isolation: Hoarders are often socially withdrawn and isolated, causing them to hoard as a way to find comfort.
- Perfectionism: Has been identified as significant predictor of worst outcome for treating hoarding disorder.

THREE PRIMARY HOARDING BEHAVIORS

- Positive emotions lead to difficulty discarding and additional acquiring.
- Negative emotions lead to difficulty discarding and additional acquiring.
- Informational processing deficits, difficulty discarding, and acquiring lead to clutter

Hoarding Disorder DSM-V CRITERIA (APA, 2013)

- A. Persistent difficulty discarding or parting with possessions, regardless of their actual value.
- B. This difficulty is due to the perceived need to save the items and to distress associated with discarding them.
- C. The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas and substantially compromise their intended use. If living areas are uncluttered, it is only because of the interventions of third parties (e.g. family members, cleaners, authorities).
- D. The hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (including maintaining a safe environment for self and others)

DSM V-Continued

- E. The hoarding is not attributable to another medical condition (e.g. Brain injury, cerebrovascular disease, PraderWilli syndrome).
- F. The hoarding is not better explained by the symptoms of another mental disorder (e.g. Obsessions in OCD, decreased energy in MDD, delusions in schizophrenia or another psychotic disorder, cognitive deficits in major neurocognitive disorder, restricted interests in autism spectrum disorder).

Specify if:

- With Excessive Acquisition
- If discarding possessions is accompanied by excessive acquisition of items that are not needed or for which there is no available space.

Specify if :

- With Good or Fair Insight
- With Poor Insight
- With Absent Insight/Delusional Beliefs

Types of Hoarders

Animal Hoarding:

- A person that acquires more animals than they can properly care for is classified as an animal hoarder.
- Animal hoarders typically begin their accumulation with the best intentions- whether saving animals, providing shelter, adoption, or one of the many other reasons for animal hoarding
- As the accumulation of animals grows, either through the steady acquiring of more animals or through the animals producing litters of their own, the situation can quickly spiral out of control.
- The loss of control often results in the animals often becoming sick or worse, dying.

Types of Hoarders Continued

BIBLIOMANIA (HOARDING OF BOOKS) / INFORMATION HOARDER

- This category of hoarding typically involves individuals with an extremely high intelligence.
- The information hoarder justifies the accumulation of clutter through their never-ending quest for knowledge.
- The collection of information is vital to the day-to-day process of the hoarder, no matter how unlikely the use is for all of this information.
- Letting go of the books, magazines, and information that has accumulated to overwhelming levels will be like letting go of a part of themselves

Types of Hoarders Continued

SYLLOGOMANIA (HOARDING OF TRASH/GARBAGE)

- Although pure syllogomania hoarding cases - where there are no items of value, sentiment, or functional use - are rarely seen, they do exist.
- Generally the overall conditions of the home are despondent. Extremes have usually been met, such as utilities being completely shut off, and the home being contaminated with a combination of insects, rodents, and gross filth conditions.
- These individuals in general tend to have more severe symptoms of mental disorder than the average hoarder.
- These symptoms require specialized treatment from not only a mental health standpoint, but also in addressing the conditions of the home.

Types of Hoarders Continued

LARDER HOARDING (HOARDING OF FOOD)

- Is mainly contributed to the fear of losing everything.
- This fear drives the individual to stockpile items that may assist in a perceived “survival mode,” where they are forced to live off of their stockpile.
- The large majority of the items in these scenarios go remain untouched and unused.
- Food hoarders are difficult to reason with, taking as example the fact that many of them do not see any validity behind expiration dates for food items.

Types of Hoarders Continued

RECYCLERS HOARDING

- Has large piles of plastics, glass, and aluminum cans throughout their home that far exceeds the normal amount that an average household may contain.
- These individuals will retain the intention in their minds that they will recycle all of the contents of their home which will bring them large amounts of cash. However, the piles continue to increase in size and scope to the point where entire rooms are filled with potential cash as the intention of recycling never materializes.
- Additionally, the amount of recyclables that fill the home becomes so extensive that it would literally take dozens upon dozens of trips to the recycling center to remove all of the items for recycling.

Types of Hoarders Continued

COLLECTORS HOARDERS

- Collectors typically start off collecting a certain category or group of items.
- The collection grows to a point that exceeds the control of the individual or the collector sparks a new interest in a new collection of items.
- The collection ultimately grows to a size where it is considered hoarding due to the fact that the collection is interfering with the daily functioning of the household.
- This almost always leads to the accumulation of every day clutter on top of the already large collections within the home.

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Types of Hoarders Continued

SHOPAHOLICS

- Most hoarders over time lose a large part of their social lives and find themselves feeling alone without the joys and happiness their lives were once filled with.
- The thrill of a bargain creates a high, and a release of endorphins that gives them a quick boost of happiness and joy we call the "high". Unfortunately as they drive the items home, or the items are being shipped to their residence the high is a little less and by the time the items arrive at their homes, the high is completely gone. The items were not truly needed in the first place and with the rush of positive feelings now gone, the items are simply placed in a pile, and rarely will any of them be used.
- This replacement of true emotions and positive feelings by shopping can not only quickly fill a residence, but can put the hoarder in a terrible financial state with credit cards racking up large balances

Hoarding Disorder Treatment

Cognitive behavior therapy (CBT) using the technique of exposure and response prevention appears to improve compulsive hoarding symptoms.

- This technique decreases excessive fears of making decisions, losing important possessions, throwing things away, and organizing saved items out of sight, by gradual exposure to tasks that provoke these fears.
- CBT for compulsive hoarding can be effectively done either in someone's home or in a therapist's office setting.

Medication – Drugs with potent effects on the brain chemical serotonin seem most effective. Serotonin reuptake inhibitors (SRI's) are highly effective and FDA-approved for treatment of OCD.

- However, it is not clear whether they are as effective for compulsive hoarding as for other OCD symptoms.
- A combination of medication and CBT appears to be the most effective treatment regimen for most people with the compulsive hoarding syndrome.

STAGES OF TREATMENT (STEKETEE & FROST, 2007)

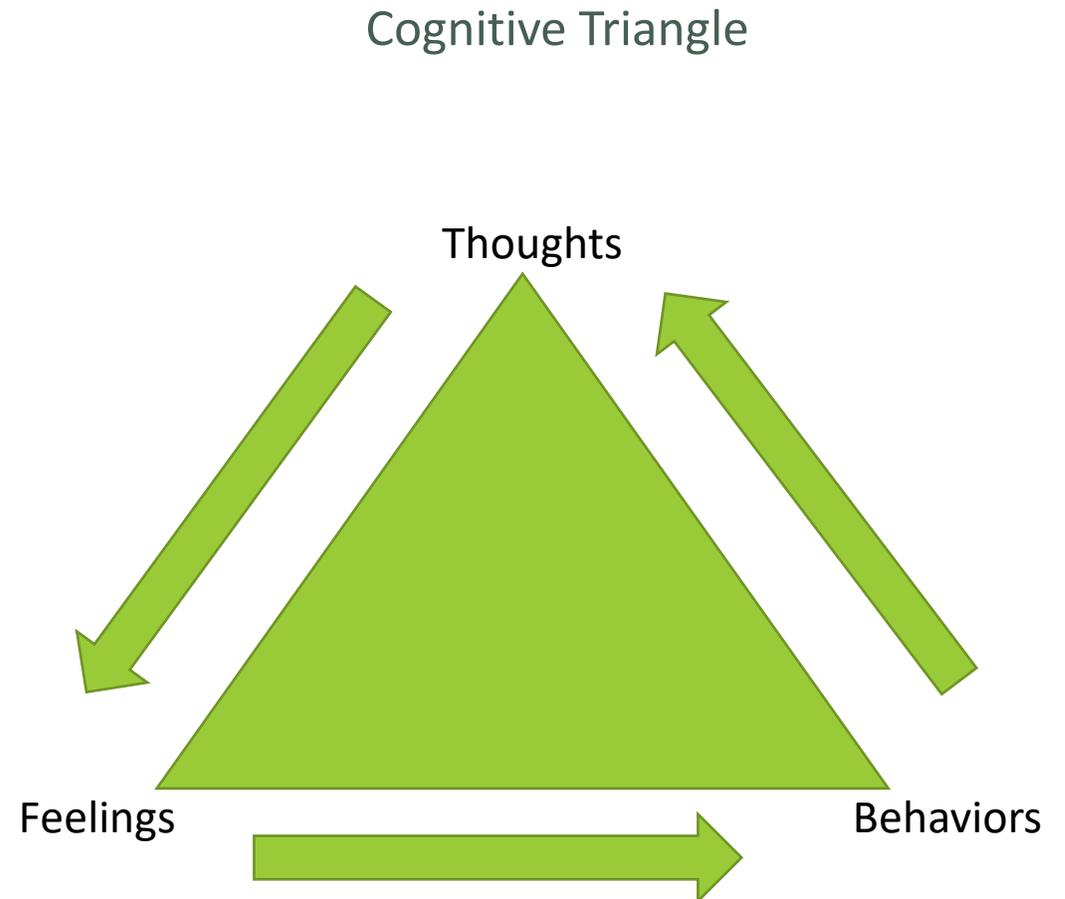
- Psycho-education
- Case Conceptualization
- Establish goals
- Motivational Interviewing
- Skills Training for Organizing and Problem Solving
- Exposure Methods/Behavioral Experiments
- Reducing Acquiring
- Maintenance and Relapse Prevention

Motivation to Change

- Sustaining Motivation to change can be difficult and can sound like lacking insight
- Depends on two things:
 - Importance of change
 - Confidence that change is important
- The discrepancy between how the individual lives and how they want to live creates the motivation but without confidence that change is possible they will revert to changing their perception about the problem.

Meaning of Possessions

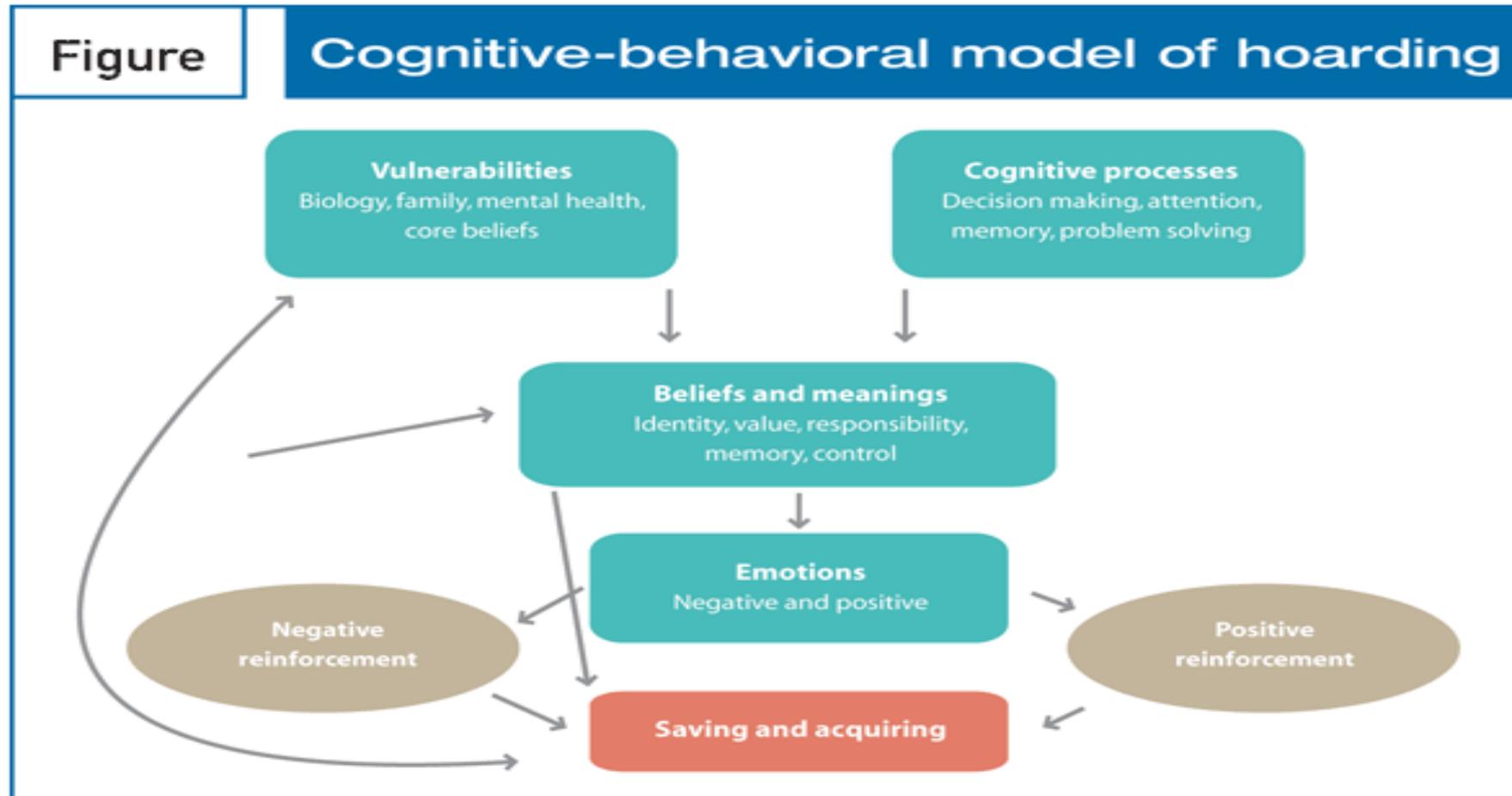
- Driving force behind saving and acquiring possessions.
- Thoughts you have about important possessions and emotional attachment to them



Meaning of Possessions Continued

- Beauty-too beautiful to throw away
- Memory-if I throw this away, I'll lose the memory associated with it.
- Sentimental-Throwing this away feels like abandoning a loved one
- Comfort/safety-I will be vulnerable without this
- Identify/Self-Worth-This possession represents who I am
- Control-I don't want anyone touching my stuff
- Mistakes-Throwing something out and finding I needed it later would be awful
- Responsibility/Waste-I'm responsible for not wasting this.
- Socializing-My stuff keeps me connected with the world and other people.

Hoarding Model



Screening/Assessment Tools

- Hoarding Rating Scale-A brief five item scale that assess the major features of hoarding disorder (Tollin, Frost, & Steketee, 2010)
- Saving Inventory-Revised –A 23-item scale with three subscales to determine the extent of compulsive buying and the acquisitions of free things. (Frost, Steketee & Grisham 2004)
- Clutter Image Rating-a pictorial measure that includes 9 pictures varying from 1=no clutter to 9=severe clutter for rooms in the home. A rating of 3-4 or higher signifies characteristics of hoarding. (Frost, Steketee, Tolin,& Renuad, 2008)
- Saving Cognitions Inventory-a 24 item self report questionnaire that assesses beliefs and attitudes when trying to discard items (Steketee, Frost & Kyrios, 2003)
- Activities of Daily Living for Hoarding-how much clutter interferes with ability o complete ordinary activities, like bathing. (Frost, Hristova, Steketee, & Tolin, 2003)

DEVELOP A PLAN

- What needs to be sorted – places and items.
- Categorize Wanted vs. Unwanted Items
- Where will kept items go?
- Interim as well as eventual furniture and storage
- Differentiate between trash/donate/recycle
- What supplies are needed? Containers, labels, markers, etc....
- Coach/family member/professional touches nothing without permission
- Patients make all the decisions about possessions
- Patients must think aloud when sorting
- OHIO (Only Handle It Once)

SKILLS FOR ATTENTIONAL DIFFICULTIES

- Divide projects into manageable steps
- Set a spatial and time goal
- Goal in each session is to make visible progress
- Determine usual attention span
- Reduce distractibility
- Cover distracting areas
- Create structure for sorting times

RELAPSE PREVENTION

- Review all skills and techniques.
- Review rules and establish future rules.
- Develop strategies to continue self-work.
- Identify social support and pleasurable maintenance activities.
- Develop strategies for setbacks.
- Schedule booster sessions.

Role of a Coach

DO:

- Meet as a team with therapist and person with hoarding disorder
- Help person remain focused
- Provide emotional support
- Help the person make decisions, but do not make decision for them
- Be a cheerleader
- Help with hauling
- Accompany the person on non-acquiring trips

DON'TS

- Don't argue
- Don't take over decisions
- Don't touch anything without permission
- Don't tell the person how they should feel
- Don't work beyond your own tolerance level

Most Common Mistakes by Friends, Family and Professionals

- Not recognizing there is a lot of shame with hoarding
- Expect treatment and progress to be fast
- Disregard the individuals feelings about their items
- Using negative terms or language like “hoarder”, “junk”, “garbage” or say “just throw it out”
- Not recognizing ambivalence –need to address to make progress
- Not expecting setbacks-this is a coping mechanism
- Throwing out their stuff or items without asking permission/forced clean outs
- Referring to the person as a hoarder, lazy

Online Resources

- Institute for Challenging Disorganization
<http://challengingdisorganization.org/>
- International OCD Foundation-Hoarding Website
<http://www.ocfoundation.org/hoarding/>
- Children of Hoarders
<http://childrenofhoarders.com/wordpress/>
- National Institutes of Health-Family Burden of Compulsive Hoarding:
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3018822/>
- National Alliance on Mental Illness
<http://NAMI.org>

Questions?

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