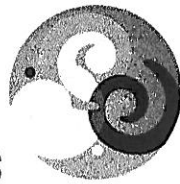


1) Baracade hoarding - fear

2) sentimental hoarding - feeling

3) disorganized hoarding - lots of belongings, but able to let go of them when clients self-identify, it is usually one level above their identification

www.challengingdisorganization.org
- clutter hoarding scale



Thoughts in Order

Counseling & Consulting

Motivational interviewing can be helpful in these situations

7 Key Points about Hoarding

Hoarding is the acquiring and keeping of so many possessions that areas of the home become unusable, yet the person continues to avoid any meaningful reduction of the belongings.

attachment to things - what they symbolize

1. It's not about the stuff.

- It's about the person's attachments to the stuff. Therefore, taking away the belongings doesn't solve the problem, and often makes it worse.
- These attachments are often intertwined with painful memories or fears.

2. It's both safe and unsafe.

- Hoarding is a maladaptive coping mechanism, and as such it provides comfort and a feeling of safety. However, this sense of safety puts the client at risk of fire, falls, and entrapment. Some people consciously choose hoarding as the lesser of two risks, while others with lower insight can't explain why they hoard.

3. It's not always squalid. hoarding & squalor can co-occur; two separate problems

- Some hoarded homes are not particularly dirty. Squalor appears to be more closely related to co-occurring conditions such as dementia.

4. It's not just a form of OCD.

- Hoarding is a symptom that occurs in conjunction with many mental and physical illnesses, including depression, complicated bereavement, and PTSD.

5. It's not disorganization.

- This common misconception leads to a lot of rearranging and not much reduction, and is one of the more sophisticated avoidance strategies used by people who hoard.

6. Involuntary cleanouts are harmful. taking away choice is harmful

- When a person's coping mechanism is stripped away too quickly, the person is retraumatized. With hoarding, this tends to result in redoubling of acquisition and savvy disguising and hiding. Emotionally, whatever was contributing to the hoarding is now made worse, not better.

7. It doesn't have to be great to be better.

- "Harm reduction" is the preferred method for assisting hoarding clients to reduce dangers without traumatic forced intervention. This method emphasizes respect for the client's autonomy. Harm reduction seeks to define and aim for "good enough."



Aiming for Good Enough:

9 Key Points about Harm Reduction for Hoarding

Hoarding is the acquiring and keeping of so many possessions that areas of the home become unusable, yet the person continues to avoid any meaningful reduction of the belongings.

Harm Reduction is an approach to hoarding abatement that supports the client's dignity and autonomy while correcting, in priority order, risks to the client and community.

1. High pressure, threats, and shaming are counterproductive.

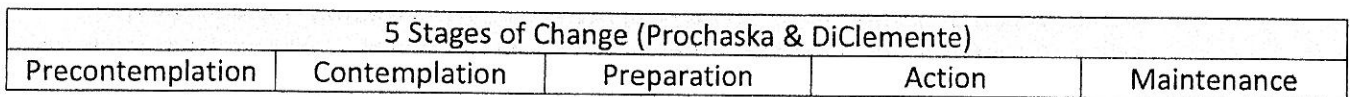
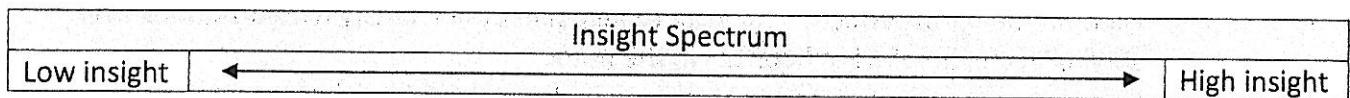
- It won't "shock them into reality."
- These reactions are likely to cause emotional harm.

2. The client should drive the bus.

- It's unethical and sometimes illegal to force hoarding abatement on the client. The client should be in charge according to his or her capacity.

3. The client's insight and motivation will determine how far you can go.

- Clients vary in their position on the insight spectrum and also in their place in the change cycle. High-insight clients in the action stage will be a breeze; low-insight clients in precontemplation will resist mightily.
- Even low-insight, precontemplative clients can benefit from the harm reduction approach.



4. Rapport-building is essential for harm reduction to succeed.

- You can't fake this. You have to believe in this approach and demonstrate ongoing empathy, respect, and concern for the client or you will come across as manipulative, judgmental, and self-serving.
- As the client begins to see the positive consequences of reducing the hoard, you can suggest further improvements.
- Be prepared for emotional reactions in the client (remember, hoarding is a coping mechanism). Make referrals for mental healthcare as needed/when possible.

Harm Reduction Applied to You

• *continued* •

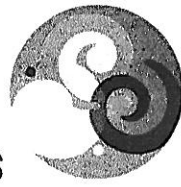
4. Working with hoarding clients in their homes increases your risk for compassion fatigue and vicarious traumatization.

- Short-term approaches have low success rates but they are often all that's available for clients with limited financial resources.
- Hoarding is usually a longstanding, deeply entrenched problem.
- Appropriate professional boundaries are trickier to maintain in the client's space vs in your office.
- Watching clients interacting with their belongings, or handling their belongings yourself, can generate more countertransference than you're accustomed to.
- Involuntary cleanouts, even when done with as much dignity and compassion as possible, are likely to be traumatic for the client and also for the workers.

Suggested further reading:

The Gift of Fear, by Gavin de Becker, Little Brown & Co. (New York), 1997.

"Let Me Show You the Basement": A Guide to Staying Safe in Clients' Homes, by Debbie Stanley, Thoughts In Order (Clinton Twp. MI), 2011. Available at www.ThoughtsInOrder.com.



Harm Reduction Applied to You: 4 Key Points about Safety in the Client's Home

1. In-home hazards can be both interpersonal and environmental.

- 1) Don't picture what the client is telling you. • Environmental dangers can be:
 - Airborne hazards such as mold, dust, tobacco smoke, viruses and bacteria, asbestos, lead, and mercury.
 - Ingestion hazards such as any contaminants on your hands, food or drink you accept from the client, clients' medications, and again viruses and bacteria.
 - Contact hazards such as bodily substances from people or pets, wounds or infections from pets or vermin, transference of infestation from hitchhiking pests like lice or bed bugs, and once again viruses and bacteria.
 - Structural hazards from restricted egress/ingress, weakened stairs or floors, damaged walls and ceilings, deficient electrical or natural gas systems, and inadequate lighting.
- 2) Mindfulness technique: picturing a film, setting smaller, turning from color to black/white & then turning it off.
- 3) You are not responsible for carrying their emotional material w/you when you leave.
- 4) shifting body language & orientation.
- 5) Interpersonal danger increases when:
 - Your presence has been mandated, either officially or unofficially.
 - The project is moving faster than the client can tolerate.
 - There is discord among the family members present in the home.
 - The client feels threatened, lied to, tricked, or manipulated.
 - You see or discover evidence of criminal behavior.

2. Intuition is your most important protection.

- Trust it despite societal bias that favors logic over intuition.
- Educate it well to prevent both false positives and false negatives.
- Recognize that context informs every situation and decision.

3. You need a safety plan.

- Always take a cellphone and carry it on your person.
- Stay within your scope: Danger increases when you go beyond it.
- Think of a "Likely Story"—a believable lie that you could tell easily to explain a hasty exit.
- Agencies should have a process for knowing where staff are and when they are scheduled to leave the client site. Someone must be assigned to watch the clock, call the employee if s/he is late checking in or returning, and call police if needed.
- If your employer does not implement a plan, do it yourself by designating a Lifeline, or Safety Buddy, who will respond to your SOS signal and send help.

Aiming for Good Enough

• *continued* •

5. You don't need to know why the person hoards.

- “Why?” can be such a loaded question, and often the client can't simply tell you why, so it's best not to ask.
- Do be ready to listen and empathize if the client wants to tell you his or her reasons. Don't argue, debate, or attempt to change the client's mind, even if the reasons seem illogical to you.

6. It's important to manage the expectations of the family and others involved in the case.

- They will likely be expecting or hoping for a large-scale cleanout. Educate them about the importance of the harm-reduction mindset.
- Be prepared for them to react with frustration, impatience, and threats to seize control. Empathize with their feelings while continuing to advocate for the client's needs.

7. Any improvement is worth it.

- Even if all you do is correct basic safety issues—clear all doors, clear the stove and bathtub, ensure the utilities work, etc.—you will have helped.
- Improvements can continue slowly over time, as the client becomes more comfortable.

8. But “any improvement” might not satisfy the authorities.

- Clients are often constrained by lease agreements and HUD regulations. Work with the client in the harm-reduction mindset to help him or her satisfy the authorities while staying in charge of what happens in the home.
- Sometimes the client's hoarding infringes on the rights of neighbors or of others in the home. When there are minor children in the home, the situation is especially tricky.
- Have a worst-case-scenario plan: What will you do if the client is evicted, hospitalized, or otherwise mandated to change or move elsewhere?

9. Maintenance and monitoring are key.

- Harm reduction doesn't address the psychological causes of hoarding. Therapy is ideal, but it is often unavailable to the client or the client refuses it.
- If the client is not actively in therapy with hoarding as a focus of treatment, monitoring by others is crucial to maintaining improvements.

Suggested further reading:

Digging Out, by Michael Tompkins and Tamara Hartl, New Harbinger (Oakland, CA), 2009.