

Minnesota Gerontological Society  
Center on Aging  
MAGEC

Co-sponsored Webinars

Impact of Hoarding Disorder on Seniors  
with Janet R. Yeats, MA, LMFT  
Co-Founder, The Hoarding Project

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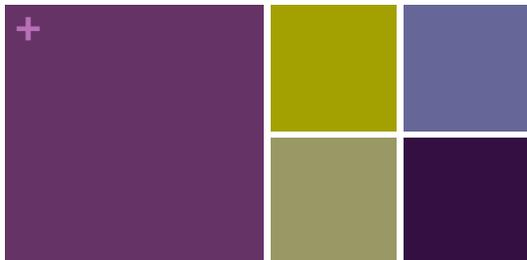
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The Impact of Hoarding Disorder on Seniors

[www.thehoardingproject.org](http://www.thehoardingproject.org)

Janet Yeats, MA LMFT  
MN Gerontological Society - 8.20.14 Webinar

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+ Objectives

- Background on Hoarding
- Safety/health issues involved with hoarding
  - Are there any precautions we should take for our safety?
- Measurement/Assessment Tools
- What to do when we encounter a homeowner with a hoarding situation:
  - How to talk with them re: hoarding concerns
  - How to offer resources



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## Background on Hoarding

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FAQ: What is hoarding disorder? Hoarding is a mental health disorder with public safety implications.



**Quick answer:** A new diagnosis with the DSM5, the common definition has 4 parts:

1. Excessive acquisition of stuff
2. Difficulty discarding possessions
3. Living spaces that can't be used for their intended purposes because of clutter
4. Causing significant distress or impairment

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FAQ: What's the difference between clutter, collecting, and hoarding?

**Quick Answer:**

- **Clutter:** possessions are disorganized and may be accumulated around living areas
  - No major difficulty with excessive acquisition AND no major difficulty discarding items
  - Can carry on normal activities in home

- **Collecting:** new possessions = part of larger set of items
  - Display does not impede active living areas in home
- **Hoarding:** possessions become unorganized piles of clutter
  - Prevent rooms from being used for normal activities
  - Motivation to display items: lost

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+ FAQ's: How many people hoard?

Quick answer: More than you think but we're really not sure yet!

- Estimates range greatly- up to 15 million in the U.S.
- Studies haven't been big enough to give accurate estimates yet



- Prevalence
  - 2-5% of the population (Iervolino et al., 2009; Samuels et al., 2008)

On the high end,

That means that over

**342 million people on the planet** meet criteria for moderate to severe hoarding behavior.

That's approximately

**15.7 million people in the United States.**

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+ FAQ's: Are some people more likely to hoard than others?

Quick answer: Research shows that

- Men and women hoard equally
- Older people hoard more than younger people
- People with lower income (Samuels, et al. 2008) hoard more than people with higher income




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+ FAQ: What causes hoarding?

- Quick answer: lots of things can contribute to hoarding-like biological, psychological, and social factors.

The BIOPSYCHOSOCIAL Model of Hoarding Disorder states that:

Hoarding behavior arises from a variety of external and internal variables that are biological, psychological, and social in nature.




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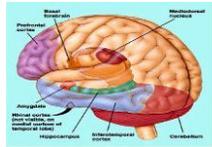
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## + FAQ's: What are the Biological Factors that contribute to hoarding?

- Family history/genetic link
- Brain functioning differences
  - Occipital and frontal lobes (Saxena et al., 2004).
    - These are the parts of the brain that are responsible for visual things and executive functioning (see below)
- Information-processing (cognitive) deficits (Cushman, Brown, Savage, Shallice, & Saksida, 2007; Cushman, Rothberg, Williams, Corina, & Kralik, 2010; Hartl, Daffney, Adams, Shallice, & Frost, 2009; Hartl et al., 2004; Lawrence et al., 2006; Tolin & Villavicencio, 2010; Tolin, Villavicencio, Uenbach, & Kurtz, 2010; Winsor, Shallice, & Frost, 2007)
  - Attention
  - Memory
  - Categorization
  - Complex thinking
  - Decision-making




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## + FAQ's: What are the Psychological Factors that contribute to hoarding?

- Mental health/emotional distress
  - Unresolved trauma and loss
- People who hoard have specific beliefs about and attachment to their possessions (Frost & Hartl, 1996)
  - Feelings toward object
  - Memory-related concerns
  - Desire for control
  - Responsibility and waste
  - Aesthetics
- Hoarding behaviors can be reinforced over time (Frost & Hartl, 1996)
  - Acquiring things makes us feel good, so we want to do more of it
  - Getting rid of things makes us anxious, so we want to do less of it




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## + FAQ's: What are the Social Factors that contribute to hoarding?

- Interpersonal relationships
  - The better family connections (in past and present), the less hoarding (Sampson & Harris)
- Social support
  - The more support experienced from family, the less hoarding (Sampson & Harris)
- Major life events/transitions
  - Unresolved trauma and loss contributes to hoarding (Sampson & Harris)
- Social stigma
  - "Hoarding is weird"
  - Stigma can contribute to depression, anxiety, etc.
- Culture
  - Western, consumer cultures = hoarding is present
  - Not sure about other, non-consumer-driven cultures
  - Consider context (e.g. refugee families, etc)




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## + Co-morbid Diagnoses



- Hoarding Disorder is also associated with lots of other mental health issues:
  - 57% major depressive disorder
  - 29% social phobia
  - 28% generalized anxiety disorder (Frost et al., 2006)
  - 30-40%: OCD (e.g. Samuels et al., 2007)
  - 31%: Organic Brain Illness
  - 30%: Personality Disorders (Matzke-Cole, et al., 2000)
  - 20%: ADHD (e.g. Sheppard et al., 2010)
  - Dementia (Pitwang et al., 1999)
  - Eating Disorders (Frankenburg, 1984)
  - Substance abuse (Samuels et al., 2008)

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## + FAQ: Hoarding must be some sort of coping mechanism, right?

**Quick answer:** It depends.

Trauma has been related to hoarding in the research

- Traumatic life events (Croemer, Schmidt, & Murphy, 2007; Hariri, Duggan, Allen, Sketee, and Frost, 2005)
  - 76%: endorsed a history of a traumatic life event (Breslau et al., 1998)
  - 55%: stressful life event around onset of hoarding (Grisham, et al., 2006)
  - Relational traumas

But it can also be considered a reinforced behavior that occurs over time because of difficulties with:

1. History/vulnerabilities
2. Information-processing deficits
3. Beliefs about possessions
4. Emotions
5. Reinforcement

Cognitive Behavioral Model of Compulsive Hoarding (Frost & Hartl, 1997)

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## + FAQ: Does therapy work come before, during, or after work on the hoarding problems?

**Quick answer:** It depends. Oftentimes, we can do them simultaneously when safety and coping skills are in place.



Rule of thumb:

1. **Safety** first.
  - Emotional regulation (self-soothing)
  - Self-awareness/mindfulness
  - Organization, categorization, etc
2. **Skills** second.
  - Emotional regulation (self-soothing)
  - Self-awareness/mindfulness
  - Organization, categorization, etc
3. **Everything else** can follow.
  - Grief, loss, and trauma
  - Hoarding work: acquisition/discarding

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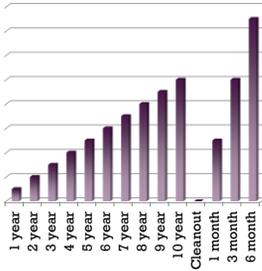
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## + FAQ: Can't I just clean out my loved one's home?



**Quick answer: Not if you can avoid it.**

- It can do more harm than good.
- Can be traumatizing
- Even threats can be unhelpful
- Can ruin relationships and trust

*"In all three instances of going in and cleaning these places up, within weeks of relocating the individual back into a clean environment, the individual passed away...it was such a dramatic change for them because we didn't realize the impact of the sociological change." (Brace, 2007)*

- It's not sustainable
  - Higher relapse rate among forced clean out
  - You'll just have to do it again later
- Sometimes it's necessary though
  - Involve the homeowner as much as possible for lasting change

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## + FAQ: At what point is this reportable to the authorities?

**Quick answer:** If there is a threat of endangerment to the health and safety of:

- A child/minor
- Older adult (over 60 with a cognitive, physical, or functional impairment)
- Person with disability or dependency
- Animal

you must report (if you are a mandated reporter)

- Building codes differ from city to city and county to county, but general safety concerns include:
  - 3 ft. pathway through home (EMT's, gurneys)
  - Working smoke alarms
  - Cleared entrances and exits
  - No flammable materials

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## + FAQ: What's up with animal hoarding? Is it the same thing as object hoarding?

**Quick answer:** There are some similarities between the two, but they differ in several ways.

■ Research on animal hoarding is about 20 years behind object hoarding

■ Know that people who hoard animals began with the best intentions, they did not intend to harm animals.

- Similarities:
  - Acquisition, difficulty discarding, clutter, distress
  - Many people who hoard animals also hoard objects
  - Co-morbidities
- Differences:
  - Animal hoarding: squalor (100% of homes)
  - Gender and age differences
    - AH: More women; later age
  - Types of objects:
    - Objects: variety
    - Animals: one species
  - Lack of treatment for A.H.
  - MAJOR mental health concerns (a mental health professional *must* be involved)

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**Minnesota Gerontological Society  
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Co-sponsored Webinars

Next Webinar – September 23 at noon  
The Healthy Brain Initiative  
with Jan Mueller, Alzheimer's Association Minnesota – N Dakota

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