SOLVING THE PUZZLE: IDENTIFYING AND UNDERSTANDING HOARDING DISORDER
GOALS

• Hoarding Disorder
  • Definition
  • Players Involved
  • Levels of Hoarding
• Causes
• Symptoms
• Dangers
• Resources
• Best-Practices
Over ten years as a municipal inspector dealing with hoarding situations

20 Years in Public Service

Current

Professional Educator
Housing Inspector-City of Duluth
President-Minnesota Association of Housing Code Officials

Testified in court on hoarding cases for municipal enforcement efforts and evictions

Taken extensive training on hoarding

Unique understanding of hoarding: family member that has Hoarding Disorder
DEFINITION

• DSM-V (American Psychiatric Association)
  • Diagnostic and Statistical Manual of Mental Disorders first published in 1952
  • First treated as a symptom of Obsessive Compulsive Disorder (OCD)

• DSM V (2013)-Redefines hoarding in as a discrete disorder severing it from OCD and giving it a new name 'hoarding disorder'
DEFINITION-DSM V

- Persistent difficulty discarding or parting with possessions, regardless of their actual value.

- This difficulty is due to a perceived need to save the items and to distress associated with discarding them.

- The difficulty discarding the possessions results in the accumulation of items that congest and clutter active living areas and substantially compromises their intended use.
WHO HOARDS?

• Starts in childhood
  • A chaotic upbringing may have effects and is common when hoarding is seen in children

• Men hoard more than women

• 5% of the general population hoard to some level (The Hoarding Task Force)

• People with lower income have shown to hoard more than people with higher income

• It is estimated that up to 1.2 million people suffer from compulsive hoarding in the USA
WHO HOARDS?

• Biological, social and psychological causes all may be involved in the hoarding. On the surface hoarders may not be recognizable. At work or in social interactions they may seem to be “normal” when in reality they may be living in severe hoarding conditions at home.

• Education ranges.

• More likely to hoard if they have close family members who engage in compulsive hoarding or if they grew up in a hoarding environment.
Clutter will continue to build up and may get to the point that rooms and areas are no longer useable for living.

Indecisive, perfectionism, avoidance, procrastination and high intelligence.
SYMPTOMS

• Persistent Difficulty discarding or parting with possessions because of a perceived need to save them

• Often Hidden from family, friends and neighbors

• Experiences Distress at the thought of getting rid of items
WHY DO PEOPLE DO IT?

NO ONE WANTS TO FEEL THIS WAY
WHY?

• Occurs in all cultures

• Trigger or Traumatic Event
  • Hoarding usually will manifest by a trigger event and may start at a lower level and increase to severe.

• (Cromer, Schmidt, and Murphy, 2007)
  • Family History
  • Death
  • Divorce
  • Lost Job
  • Moment in History
Feeling: Items are unique or will be needed at some time

Assigned emotional significance and remind the person of a better time or happy event

Creates a “safe” feeling while surrounded by items

They don’t want to waste
HOARDING IS NOT

• Laziness

• Chronic Disorganization

• Lack of experience organizing
**The stages of HOARDING**
Scale developed by the National Study Group on Chronic Disorganization:

<table>
<thead>
<tr>
<th>Level I</th>
<th>Level II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard household with a low level of clutter.</td>
<td>Household requires professional organizers.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level III</th>
<th>Level IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household requires organizers and possibly mental health providers.</td>
<td>Household needs help from a team of service providers, including cleaners.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level V</th>
</tr>
</thead>
<tbody>
<tr>
<td>Help is needed from a range of agencies, including social services and fire safety.</td>
</tr>
</tbody>
</table>
DANGERS

- Blocked egress
- Halls
- Stairs
- Windows
- Doorways
- Piles falling
HEALTH AND SAFETY HAZARDS

- Increased risk of falls
- Being Trapped
HEALTH AND SAFETY HAZARDS

• Un/In-Sanitary Conditions
  • Food waste
  • Pet waste
  • Human waste
  • Rodents
  • Insects
EMERGENCY PERSONNEL

• Dangers to First Responders
  • Excessive Fire Loading
  • Piles Falling (can’t find patient)
• Not being able to maneuver in the unit
ADDRESSING THE PROBLEM

• Communication
  • Don’t use the words: “hoarder, trash, junk”
  • Listen to their statements and labels
  • Be compassionate and understanding

• DON’T JUDGE

• Work with family members and loved ones
Processes and Evidence
- Document everything!
- Photographs
- Uniform Checklist

Create a plan with the tenant and stick to it
- Written Agreement
- Offer Services

Implement
- Issue orders with specific corrections.
  - Be concise with what is needed and timelines
  - Focus on Immediate Health and Safety Issues

Assessment
- Reinspection for compliance

Report/Revise
UNIFORM INSPECTION CHECKLIST

- The Clutter Movement
  - Marnie Matthews
- Quick Reference
- Universal and Effective Protocols
- Based on Harm Reduction Approach
- Minimum Safety and Sanitation Standards
  - Housing
  - Public Health
  - Fire Departments
  - Property Management
- Not restricted to trained professionals
## UNIFORM INSPECTION CHECKLIST STEP 1

### Uniform Inspection Checklist - Hoarding/Excessive Clutter - Quick Reference

**Date Completed:**

**Address:**

**Person Completing This Form:**

**Town:**

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**RESIDENT INSTRUCTIONS**

The purpose of inspection is to ensure housing is decent, safe, sanitary, & in good repair. Inspector must be able to view, reach, and test all items on inspection checklist.

For **STATUS**, use **P** to indicate Pass if item MEETS STANDARD or **F** to indicate Fail if the item DOES NOT MEET STANDARD. Use **UNK** to indicate Unknown if item unobserved or N/A to indicate if item Not Applicable. Write comments in space to right of target.

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| STEP 1 | STATUS | The following items must be UNOBLSTRCTED ~ completely clear of any items ~ | SPECIFIC AREA NEEDING TO BE ADDRESSED (EX: BACK DOOR, BEDROOM WINDOW, PATH FROM BEDROOM TO KITCHEN, ETC.) |
|--------|--------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------
<p>|        |        | <strong>Egress</strong> - means of exit - must be unobstructed, egress doors must open full 90 degrees or from door frame to door stop, whichever is wider |                                                                                                     |
|        |        | <strong>Pathways</strong> - Minimum of 36”91cm wide unobstructed and continuous pathways throughout residence |                                                                                                     |
|        |        | <strong>Staircases</strong> - must be unobstructed (if applicable) |                                                                                                     |
|        |        | <strong>Smoke detectors, CO detectors, and sprinkler heads</strong> - (all that apply) must be unobstructed with front and surrounding clearance of 18”91cm |                                                                                                     |
|        |        | <strong>Internal Doors</strong> - must be unobstructed - (Applies primarily to residences requiring inspection for tenancy) closet, cabinet, pantry, etc. Inspector must be able to open &amp; close doors fully &amp; freely, &amp; be able to latch if applicable |                                                                                                     |
|        |        | <strong>Windows</strong> - 1 window per room must be unobstructed, includes every room with a window measuring over 20”76cm width x 24”91cm height |                                                                                                     |
|        |        | <strong>Heat &amp; Electrical Sources</strong> - stoves, ovens, refrigerators, washing machines/dryers, a/c units, heat thermostats (all that apply) must be unobstructed |                                                                                                     |
|        |        | <strong>Heat &amp; Electrical Sources</strong> - clearance requirements - open flame heat sources, fireplaces, furnaces, oil tanks, water units, electrical panels, etc... must be unobstructed with front and surrounding clearance of 36”91cm |                                                                                                     |
|        |        | <strong>Emergency Pull Cords</strong> - (if applicable) must be unobstructed, end of cord must be no more than 18”46cm distance from the floor |                                                                                                     |</p>
<table>
<thead>
<tr>
<th>STATUS</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Windows</strong></td>
<td>must be accessible <em>(any window not included above)</em></td>
</tr>
<tr>
<td><strong>Electrical outlets</strong></td>
<td>must be accessible</td>
</tr>
<tr>
<td><strong>Plumbing fixtures &amp; pipes</strong></td>
<td>must be accessible, including under sinks</td>
</tr>
<tr>
<td><strong>Toilets, sinks, bathtubs, &amp; showers</strong></td>
<td>must be accessible</td>
</tr>
</tbody>
</table>

The following items must be ACCESSIBLE ~ easily able to be reached by inspector ~
### GENERAL HEALTH AND SAFETY TARGETS

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>The following items provide a guide for addressing <strong>GENERAL HEALTH AND SAFETY.</strong></td>
</tr>
<tr>
<td>Sinks must function and show routine use &amp; care</td>
</tr>
<tr>
<td>Kitchen must have clear &amp; sanitary space sufficient for food preparation counter, portable kitchen island, or table will satisfy requirement</td>
</tr>
<tr>
<td>Refrigerator/freezer must be sanitary, no expired/decaying food, not overfilled - door &amp; drawers easily close, light &amp; temp controls accessible</td>
</tr>
<tr>
<td>No expired or decaying food in residence</td>
</tr>
<tr>
<td>All gas pilot lights must be lit <em>(if applicable)</em></td>
</tr>
<tr>
<td>Stove, range w/ oven - interior, exterior, &amp; top must be sanitary &amp; free of debris, NO flammable items inside, on, or within 6'/15cm of stove top</td>
</tr>
<tr>
<td>No evidence of infestation</td>
</tr>
<tr>
<td>Garbage &amp; debris must be removed from residence on a routine basis</td>
</tr>
<tr>
<td>No trip hazards, fall hazards, or avalanche risk</td>
</tr>
<tr>
<td>No extension cords under carpets, across floors, or across rooms</td>
</tr>
<tr>
<td>No long-term storage of newspapers, magazines, papers, or flammable/ignitable liquids to cause or accelerate fires</td>
</tr>
<tr>
<td>No exposed or frayed electrical wiring</td>
</tr>
<tr>
<td>No inoperable or unregistered vehicles in yard <em>(if applicable)</em></td>
</tr>
<tr>
<td>No excessive pet odor, pet hair, pet waste</td>
</tr>
</tbody>
</table>
Pragmatic and Practical Approach

It's about safety first

Recognizes the person and involves them in the process

HARM REDUCTION METHOD
This model relies on a team of housing enforcement and social, health and mental health services personnel to work with the person who hoards. The goal is long-term management of the situation; not elimination.

We recommend a goal of achieving Level III or lower on the Institute for Challenging Disorganization (ICD) Clutter Hoarding Scale. Any progress is beneficial. It includes the person who hoards in the decision-making to the extent he/she is able.
BENEFITS OF HARM REDUCTION

Can help restore the resistant person who hoards to a level of safety and health that has been absent while living with too much stuff.

Can be the first step toward influencing treatment resistant older adults who hoard toward considering alternative and addressing the underlying problems which lead to hoarding.

Benefits the community by removing health and safety hazards and maintaining housing values.
ELEMENTS

Reasonable, clearly written housing codes and regulations that address the accumulation of debris inside a private residence.

Collaboration among a team of stakeholders who are willing and able to work outside their “silos” to effect change with the individual who hoards and within their own system as well.

A long-term perspective that sees management rather than complete resolution of the situation as the goal.

An integrated plan to proceed.

Use of the NSGCD Clutter Hoarding Scale to rate the amount of clutter. (Recommended)

Coordination with trash pick-up or volunteers to collect the items that the person is willing to discard. It must be removed from the premises and taken away or people who hoard will put them back in the house. (Recommended)
Members of the team include:

- The consumer to the degree that he/she is capable. The consumer must be involved with identifying items to be discarded. If not, it could lead to more severe psychological damage.

- A housing safety inspector who has the willingness and ability to enforce the codes if necessary.

- A helper/supporter who can establish an unconditional relationship with the person who hoards. The goal is to engage the consumer and helper to work a program.

- Community resources including mental health services, health department and animal control if needed. This would also include a faith-based resource as well as any established cleaning service or organizing service.

- The housing court, if necessary
HARM REDUCTION DEBRIEFING

- Trying to reduce risk and address safety issues
- Not an answer to all situations
- The end result may not be our standards
Some notes about the housing safety and the helper role:

Generally, individuals respond better with both a mandate to comply with health and safety codes and positive support for their actions to manage the situation.

The housing safety and helper roles work best when they are two different individuals or agencies.

It is critical that team members communicate with one another.

Clients may tend to split people into good and bad people.

No one is truly the bad or good guy.

Roles need to maintain a united front.

Clarification of goals and roles is critical.
CALLING FOR HELP

- Contact authorities when needed
  - Fire
  - Police
  - Attorney
  - Mental Health
CALL FOR HELP!!!

- If there is a threat to the health and safety of:
  - A child or minor in unsanitary conditions
  - Vulnerable adult
  - Animals
  - Disabled
  - Danger to other tenants in the building
TO CLEAN OR NOT TO CLEAN?

• Clean Outs

• Are they effective?

• Recidivism
RESOURCES

Clutter Movement
Marnie Matthews 615-617-5484
https://www.facebook.com/cluttermovement/

The Hoarding Project
http://thehoardingproject.org/home/
THANK YOU!  

GMS  
Presentations and Training