

HOARDING

What Is Hoarding Disorder?

Hoarding disorder includes *all* three of the following:

1. A person collects and keeps a lot of items, even things that appear useless or of little value to most people, and
2. These items clutter the living spaces and keep the person from using their rooms as they were intended, and
3. These items cause distress or problems in day-to-day activities.

How is hoarding different from collecting?

- In hoarding, people seldom seek to display their possessions which are usually kept in disarray.
- In collecting, people usually proudly display their collections and keep them well organized.

What are the signs of hoarding?

- Difficulty getting rid of items
- A large amount of clutter in the office, at home, in the car, or in other spaces (i.e., storage units) that makes it difficult to use furniture or appliances or move around easily
- Losing important items like money or bills in the clutter
- Feeling overwhelmed by the volume of possessions that have ‘taken over’ the house or workspace
- Being unable to stop taking free items, such as advertising flyers or sugar packets from restaurants
- Buying things because they are a “bargain” or to “stock up”
- Not inviting family or friends into the home due to shame or embarrassment
- Refusing to let people into the home to make repairs

What makes getting rid of clutter difficult for individuals who hoard?

- Difficulty organizing possessions
- Unusually strong positive feelings (joy, delight) when getting new items
- Strong negative feelings (guilt, fear, anger) when considering getting rid of items
- Strong beliefs that items are “valuable” or “useful,” even when other people do not want them
- Feeling responsible for objects and sometimes thinking of inanimate objects as having feelings
- Denial of a problem even when the clutter or acquiring clearly interferes with a person’s life

Who struggles with hoarding behavior?

What Is Cognitive Behavior Therapy?

Behavior Therapy and Cognitive Behavior Therapy are types of treatment that are based firmly on research findings. These approaches aid people in achieving specific changes or goals.

Changes or goals might involve:

- **A way of acting:** like going out without buying or picking up new items;
- **A way of feeling:** like challenging thoughts and beliefs about the need to keep items and about collecting new things;
- **A way of thinking:** like understanding that relapses can occur;
- **A way of behaving:** like practicing the removal of clutter with the help of a clinician or coach and then independently removing clutter;
- **A way of coping:** like finding and joining a support group or teaming up with a coach to sort and reduce clutter.

Behavior Therapists and Cognitive Behavior Therapists usually focus more on the current situation and its solution, rather than the past. They concentrate on a person’s views and beliefs about their life, not on personality traits. Behavior Therapists and Cognitive Behavior Therapists treat individuals, parents, children, couples, and families. Replacing ways of living that do not work well with ways of living that work, and giving people more control over their lives, are common goals of behavior and cognitive behavior therapy.

HOW TO GET HELP: If you are looking for help with hoarding, either for yourself or someone else, you may be tempted to call someone who advertises in a local publication or who comes up from a search of the Internet. You may, or may not, find a competent therapist in this manner. It is wise to check on the credentials of a psychotherapist. It is expected that competent therapists hold advanced degrees and training. They should be listed as members of professional organizations, such as the Association for Behavioral and Cognitive Therapies or the American Psychological Association. Of course, they should be licensed to practice in your state. You can find competent specialists who are affiliated with local universities or mental health facilities or who are listed on the websites of professional organizations. You may, of course, visit our website (www.abct.org) and click on “Find a CBT Therapist.”

The Association for Behavioral and Cognitive Therapies (ABCT) is an interdisciplinary organization committed to the advancement of a scientific approach to the understanding and amelioration of problems of the human condition. These aims are achieved through the investigation and application of behavioral, cognitive, and other evidence-based principles to assessment, prevention, and treatment.

Hoarding behaviors can begin as early as the teenage years, although the average age of a person seeking treatment for hoarding is about 50 years of age. Without effective treatment, individuals who hoard often endure a life-long struggle with hoarding. They tend to live alone and may have a family member with the problem. It seems likely that serious hoarding problems are present in at least 1 in 50 people, but they may be present in as many as 1 in 20.

Are hoarding and obsessive compulsive disorder (OCD) related?

Hoarding was commonly considered to be a type of OCD. Some estimate that as many as 1 in 4 people with OCD also have hoarding. Recent research suggests that only 1 in 5 individuals who hoard have non-hoarding OCD symptoms, and that hoarding is a distinct disorder. The American Psychiatric Association is considering establishing a separate disorder for hoarding in the new Diagnostic and Statistical Manual (DSM-V). Hoarding is currently considered a feature of obsessive compulsive personality disorder (OCPD) in DSM-IV, but may be removed in DSM-V. Hoarding also may develop along with other mental illnesses, such as dementia and schizophrenia.

What kinds of things do people hoard?

Most often, people hoard common possessions, such as paper (especially mail, newspapers), books, clothing, and containers (e.g., boxes, paper and plastic bags). Some people hoard garbage or rotten food. More rarely, people hoard animals or human waste products. Often the items collected are valuable but far in excess of what can reasonably be used.

What are the effects of hoarding?

- Severe clutter threatens the health and safety of those living in or near the home, causing health problems, structural damage, fire, and even death
- Expensive and emotionally devastating evictions or other court actions can lead to hospitalizations or homelessness
- Conflict with family members and friends who are frustrated and concerned about the state of the home and the hoarding behaviors

Is compulsive hoarding caused by past poverty or hardship?

Many people who hoard may call themselves “thrifty.” They may also think that their behavior is due to having lived through a period of poverty or hardship. Research does not support this idea. However, experiencing a traumatic event or serious loss, such as the death of a spouse or parent, may lead to a worsening of existing hoarding behavior.

Can hoarding be treated?

Yes, hoarding can be treated. Unfortunately, it has not responded well to the usual treatments that work for OCD. Some strategies used to treat hoarding include:

- Challenging the hoarder’s thoughts and beliefs about the need to keep items and about collecting new things
- Going out without buying or picking up new items

- Getting rid of and recycling clutter. First, by practicing the removal of clutter with the help of a clinician or coach and then independently removing clutter
- Finding and joining a support group or teaming up with a coach to sort and reduce clutter
- Understanding that relapses can occur
- Developing a plan to prevent future clutter.

How can I help a hoarding friend or family member declutter?

Attempts by family and friends to help with decluttering may not be well received by the person who hoards. It may be helpful to keep in mind:

- Until the person is internally motivated to change, the person may not accept, or even welcome, your offer to help.
- Motivation cannot be forced.
- Everyone, including people who hoard, has a right to make choices about their objects and how they live.
- People who hoard are often ambivalent about accepting help and throwing away objects.

Can't hoarding be solved by simply cleaning out the home?

No. Attempts to clean out the homes of people who hoard without treating the underlying problem usually fail. Families and community agencies may spend many hours and thousands of dollars clearing a home only to find that the problem recurs, often within just a few months. Individuals who hoard often experience extreme distress and may become further attached to their possessions if their homes are cleared without their consent. This may lead to them refuse future help.

How do I have a conversation with my friend of family member who is ready to talk about hoarding?

When a person seems willing to talk about a hoarding problem, these guidelines may be useful to follow:

- *Respect.* Acknowledge that the person has a right to make their own decisions at their own pace.
- *Have sympathy.* Understand that everyone has some attachment to the things they own. Try to understand the importance of their items to them.
- *Encourage.* Come up with ideas to make their home safer, such as moving clutter from doorways and halls.
- *Team up with them.* Don't argue about whether to keep or discard an item; instead, find out what will help motivate the person to discard or organize.
- *Reflect.* Help the person to recognize that hoarding interferes with the goals or values the person may hold. For example, by de-cluttering the home, a person may host social gatherings and have a richer social life.
- *Ask.* To develop trust, never throw anything away without asking permission.

Are there medicines that can help reduce hoarding?

- Medicine alone does not appear to reduce hoarding behavior.

- Medicine may help reduce the symptoms.
- Medicine can be used to treat conditions, like depression and anxiety, that may make hoarding worse.

Where can I find further information and help?

International Obsessive Compulsive Disorder Foundation
(www.ocfoudation.org)

Boston University School of Social Work
(www.bu.edu/ssw/research/hoarding)

San Francisco Mental Health Association
(www.mha-sf.org/programs/ichc.cfm)

Smith College Department of Psychology
(www.science.smith.edu/departments/PSYCH/rfrost)

The Institute of Living/Hartford Hospital
(www.harthosp.org/InstituteOfLiving/AnxietyDisordersCenter)

For more information or to find a therapist:

Please feel free to photocopy or reproduce this fact sheet, noting that this fact sheet was written and produced by ABCT. You may also link directly to our site and/or to the page from which you took this fact sheet.

**ASSOCIATION for BEHAVIORAL
and COGNITIVE THERAPIES**

305 Seventh Avenue
New York, NY 10001
212.647.1890
www.abct.org