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Rooms of Shame: Senior Move Manager's Perspective on Hoarding

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Introduction

Senior Move Managers is a new industry of professionals who assist older adults and their families with the physical and emotional aspects of downsizing, relocating, or modifying their homes. Senior Move Management is represented by the National Association of Senior Move Managers (NASMM). The core values and principles of behavior for this new industry, as expressed in NASMM's Code of Ethics, include advocacy, confidentiality, and maximizing client's dignity and autonomy (www.nasmm.org).

In the context of their work with older adults, Senior Move Managers frequently encounter hoarding situations. Often, the interaction begins with a call, "You've probably never seen anything as bad as this." These "rooms of shame" are typically hidden behind closed doors and the move manager may be the first professional to encounter the problem.

This article describes typical scenarios for Senior Move Management involvement with hoarders and techniques that have been successful in reducing or eliminating hoarding. The purpose of this article is to familiarize Geriatric Care Managers with Senior Move Manager capabilities so they will understand how best to partner with these professionals in hoarding situations.

Working with Elderly Hoarders

Since most Senior Move Managers work primarily or exclusively with seniors, their typical hoarding client is an elderly individual who has accumulated possessions for decades. Although circumstances vary with each client, hoarding behavior presents a common set of risk factors for elders, including:

1. Increased risk of falls

As the individual's balance and mobility decrease, floors covered with debris and lack of adequate pathways around furniture creates significant risk factors for falls.

2. Chronic conditions exacerbated

Medication compliance is hampered by the mounds of clutter; pulmonary conditions are made worse by the dust and mold; and home-based services cannot be delivered due to unsafe conditions.

3. Increased social isolation

Due to embarrassment or fear of discovery, many hoarders are reluctant to allow people into their home. This reluctance, combined with decreased mobility (lack of transportation, difficulty walking, and inability to drive) reduces social opportunities and increases the hoarder's isolation.

Using "things" to fill needs or to compensate for losses is a common theme in hoarding. For example, after his retirement, a physician begins donating to over a thousand charities. Having lost the prestige of his profession, the physician's donations make him feel important, but over time, the mail fills his home and becomes overwhelming. Eventually, he stops opening the mail and the papers take over his space.

For the isolated older adult, the human interaction involved in the purchasing process can fulfill deep emotional needs. In the words of one hoarder, "I never learned to drive and I can't get around much anymore. I order lots of things over the phone, and they get delivered by UPS. The UPS man is my friend, and I look forward to seeing him every day. If I stopped ordering things, I would be lonely."

Ironically, the need for human interaction can be a motivating factor

for decluttering as well. An isolated hoarder who enjoys the company of the Senior Move Manager may agree to dispose of items in order to keep the Senior Move Manager coming back. The Senior Move Manager or the GCM can use the development of a trusting relationship as a means to promote change in the hoarder's life.

Types of Hoarders

Hoarding situations encountered by Senior Move Managers in the general community are diverse. Initial contact is typically by a family member or by the hoarding individual himself. Additional sources of referrals include attorneys, trust officers, Geriatric Care Managers, home-based service providers and social service agencies. Sometimes the project involves clearing out a home where the hoarding individual is no longer present. More often Senior Move Managers are called in to work directly with the hoarding individual.

Senior Move Managers are typically contacted for help in implementing a move from one home to another, but when hoarding is a factor, the situation becomes much more complex.

Based on our experience in the field, Senior Move Managers see three distinct types of hoarders:

The Proud Hoarder

The proud hoarder sees no problem with her living situation, does not want help decluttering, and limits the move manager's intervention strictly to moving belongings from one place to another. The proud hoarder is often in denial about the seriousness of the cluttering situation. In the words of one client, "I need help moving. In the hallway there are about 90 cartons. There are 60 bins in the living room,

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and 40 more in my bedroom. I'll get rid of some, but most of my things are going with me. Last year I rented a storage unit and put my sofa and chairs in it to make space for my stuff. That's why there is no where to sit. I am moving to a smaller apartment so I can afford a second storage unit...."

The Embarrassed Hoarder

The embarrassed hoarder knows that her living situation is not normal and is humiliated by her inability to change her living situation. She lived a more "normal" lifestyle at some point in the past, and desperately wants to do so now, if only she could only get control over her cluttering. Usually a trigger – perhaps the death of a spouse, retirement, or depression – created emotional needs that are filled by hoarding behavior. Although decluttering is a struggle, the embarrassed hoarder is often receptive to help from professionals. While ongoing intervention to maintain the decluttered environment may be necessary, the embarrassed hoarder has real potential for significant improvement in her living environment. In the words of one client, "I heard about you from someone in my depression support group. My knees are bad and I live in a third story walk-up. If I could clean-up my apartment, I could move to a first floor apartment and life would be easier."

The Accidental Hoarder

The accidental hoarder is someone without a long history of hoarding, but circumstances such as changes in physical and/or mental status, or care giving responsibilities that are all-consuming, have made her less able to deal with the piles that are slowly building at home. The more clutter that accumulates, the more overwhelmed the hoarder becomes. Like the embarrassed hoarder, the accidental hoarder is often receptive to help from professionals. However, the same barriers that contributed to the clutter in the first place make it

harder for the accidental hoarder to make lasting changes. The accidental hoarder will often need to accept ongoing support to maintain any lasting gains.

Hoarding situations in Senior Living Residences

Increasingly, Senior Move Managers are contacted by staff at senior living residences regarding difficult hoarding situations. In these scenarios, the intervention is typically initiated by the community, not the resident. Sometimes an apartment is cluttered because the resident was unable or refused to downsize from a much larger home. The more cluttered the apartment is, the more overwhelmed the resident becomes, and the clutter grows. Clutter also occurs when the elder's physical and mental status deteriorates and she is no longer able to maintain the upkeep of her apartment.

Regardless of the cause, the community's interest is usually in protecting both public and personal safety. When the apartment is pest-infested, the Senior Move Manager's goal is typically to clean out enough debris so the residence can be treated for pests. When the intervention is to improve resident safety, the Senior Move Manager's goal usually corresponds to specific requirements set by the facility. For example, an administrator at an assisted living facility tells a resident who hoards, "The home health agency will not provide services in your apartment unless there are twenty-four inch paths for circulation" or "When you return home, you will be using a walker, so there need to be thirty-inch aisles for you to safely navigate." By accepting assistance to eliminate or even reduce clutter, the resident can avoid possible eviction and remain in her apartment independently and safely for a considerable period of time.

Senior Move Managers and Ethical Issues in Hoarding

In their work with elderly hoarders, Senior Move Managers

encounter many of the same ethical issues as Geriatric Care Managers, especially regarding when and how much to intervene. Issues such as evaluating the competency of a hoarder, balancing autonomy with safety, and defining success in working with elderly hoarders, are just some of the challenges that we face in working with these clients.

Case example:

A Senior Move Manager receives a call from Dr. M, an elderly dentist who said he was considering a move to a retirement community. On the first home visit, the Senior Move Manager observes that every room in the five-bedroom house is piled shoulder high, with only narrow aisles for circulation. The kitchen sink, stove, and refrigerator cannot be seen behind the debris. There is no furniture that is free of clutter. Dr. M sleeps on a cot in the basement and his food is delivered from Meals on Wheels. He appears well-groomed and content with his situation, although he admits that his friends no longer visit him at home and that possessions have taken the place of human connections in his life. He talks about the Collyer brothers, famous hoarders who died in 1947 when they were buried by piles of debris, and wonders if his home is as bad as theirs. He acknowledges that his environment poses a risk, and that he may fall or be unable to call for help. While he hopes this won't happen, Dr. M tells the Senior Move Manager that it's a risk he is willing to assume and he ultimately rejects assistance with decluttering. As an incentive to Dr. M, the Senior Move Manager offers to provide initial services for free. Despite this generous offer, Dr. M still refuses to accept help.

While Dr. M is clearly placing himself at risk, his mental and financial capacity is high. He is independent in all activities of daily living, has adequate finances to support his lifestyle, and he understands the risks his hoarding poses. Using the Risk/Capacity paradigm (Soniati, B., & Malady-Micklos, M. (2010). *Empowering Social Workers for Practice with Vulnerable Older Adults*. Washington

D.C.:NASW Press.), the Senior Move Manager concludes it is inappropriate to intervene at this time. Unable to convince Dr. M to accept help, the Senior Move Manager notifies a local social service agency so he can be monitored, should the situation change.

Another ethical issue in working with hoarders is how to define success and how far to push the hoarder into “clearing out” the space. In theory, success implies reducing or eliminating all clutter and preventing recluttering of the space. However, even if only modest gains can be made through reorganizing and relocating items, this can be considered success as well. For example, if a living room and bedroom can be made usable, even though a second bedroom continues to be unusable, the goal of increased safety will have been achieved.

Helpful techniques for working with hoarders

Hoarding situations are complex and there is no silver bullet for resolving the behaviors associated with hoarding. Based on our experience in Senior Move Management, we have found certain techniques that are helpful to remember when working with hoarders.

1. **Be non-judgmental:** Although this may sound obvious, not all helping professionals are cut out to work with hoarders. Hoarders are highly sensitive to nonverbal cues. If the hoarder feels judged or disapproved of, the ability to achieve change is dramatically reduced. As a professional, if you find your client’s environment disturbing, it is likely you will communicate this to the client. It is important to recognize your limitations in working with these clients.
2. **Listen closely to the client:** While there may be many agencies and/or family members who want immediate changes made in the hoarder’s living situation, resist the temptation to act too quickly. Be sure to ask the hoarding client

what changes *they* want to see happen, what *their* goals and priorities are, and what bothers *them* the most about their current living environment. For example, you may feel that decluttering an unusable kitchen is the most important place to start, but the client may tell you that the clutter in the second floor bedroom bothers them the most. By listening closely and “starting where the client is at,” the professional increases the likelihood of a successful intervention.

3. **Acknowledge the difficulty:** Most people don’t understand the stress involved when hoarders are asked to part with belongings. The professional needs to listen closely and empathize with the hoarder’s struggles. Don’t offer false hope that change will be quick or easy to achieve.
4. **Opt for low-hanging fruit:** When evaluating where to begin working with the hoarder, start with areas of the home that are less complex so the client can experience accomplishment as quickly as possible. This may help the client feel hopeful and more optimistic.
5. **Praise frequently:** Provide positive reinforcement. Hoarders have felt unsuccessful at handling their environment for years. Positive feedback builds self-esteem. The praise should be honest and not exaggerated.
6. **Group similar items together:** Many hoarders have similar items scattered throughout their home but are unaware of these patterns due to the sheer volume of clutter. Gathering together similar items enables the hoarder see what they actually have and to begin the process of categorizing and organizing their belongings. The hoarder may not agree to part with the items, but pointing out these patterns may decrease the likelihood of continuing to hoard that type of item.
7. **Provide creative disposal options:** Hoarders are major recyclers. Most hoarders believe that virtually every item has a use, and that “somewhere out there” is a person who needs or can use the particular item saved by the hoarder. One hoarder collected children’s toys and would spend each weekend giving toys away to children in poor neighborhoods. Unfortunately, the hoarder was collecting far more toys than she could ever hope to give away. Maintaining a list of charitable agencies and providing donation options that correspond with the client’s values may encourage them to part with items.
8. **Remove items agreed upon immediately:** Hoarders are known to have “removal remorse.” Once the client agrees to part with something, get it out of the house as quickly as possible.
9. **Provide voluntary homework:** Offer clients focused tasks that they can do between sessions. For example, if you have gathered together all the client’s purses and sorted them by color, ask the client to select two purses from each color to keep. Reinforce that the assignment is optional, so clients feel proud if they achieve it, and do not feel guilty if they can’t complete the task.
10. **Contact between sessions:** Use occasional phone calls between sessions to reinforce accomplishments, acknowledge the client’s feelings and communicate that you care.

Conclusion

Senior Move Managers encounter a significant number of hoarding situations, and as a result, many have developed expertise in working with elderly hoarders. To increase competency with hoarders, many Senior Move Managers pursue a variety of educational opportunities, such as sessions offered at the NASMM annual conference, teleclasses courses offered by the National Study Group on Chronic Disorganization (NSGCD – www.nsgcd.org) and online courses offered through eSMMART (www.esmmart.com).

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com). Hoarding is a frequent topic on NASMM discussion threads. To promote a common reference point for communicating about hoarders, NASMM has posted the NSGCD Hoarding Clutter Scale on their blog (<http://nasmm.wordpress.com/>).

Senior Move Managers represent a knowledgeable, professional resource with whom Geriatric Care Managers can partner in working with elderly hoarders. They are well-equipped to handle the labor intensive, sometimes time-critical requirements of working with hoarders. Since they specialize in late life transitions where downsizing is the norm, Senior Move Managers have a variety of proven resources for disposal or

donation of belongings. Since the hourly rate of most Senior Move Managers is considerably less than the rate charged by Geriatric Care Managers, collaborating with Senior Move Managers in hoarding situations minimizes costs to the client.

To locate qualified Senior Move Managers in your area, visit NASMM at www.nasmm.org and select **Find a Senior Move Manager**. Be certain to ask what kind of experience the Senior Move Manager has with hoarders, since some Move Managers prefer not to work with this population. All NASMM members are insured and agree to abide by the NASMM Code of Ethics.

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Meet Clark

I buried my wife yesterday. She was a hoarder. I loved her and I took care of her, especially the past few years when she was bedridden. After fifty years of marriage, her dying words to me were not "I love you." They were "Don't touch my stuff."

I was surrounded by her stuff for years. I want to get rid of it and reclaim my life.

This is Clark's bedroom; it is neat and orderly.

This is the living room and dining room in the home Clark shared with his wife.

This is the bedroom of Clark's wife.

It wasn't always this bad. It grew gradually, and kept on growing, like an addiction. When did it start? When we were younger, we had company, we did things... then her stuff took over our lives. How did I let this happen? What could I have done that might have made things different?

Clark cleared out much of his wife's clutter from his home. Three years later, like a number of elderly, lonely widowers, Clark took his own life.

