Hoarding and Elders: Current Trends, Dilemmas, and Solutions

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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, continued on page 22
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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
facilit 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.
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Hoarders are known to accumulate a vast amount of items, which can create a disorganized living environment. For example, one hoarder collected children’s toys and would spend hours organizing and categorizing them. 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 to 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).
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.

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.

Margit Novack, MCP, is President and CEO of Moving Solutions® and eSMMART™ (www.movingsolutions.com). Since 1996 Moving Solutions has helped thousands of people in the Delaware Valley with the physical and emotional aspects of downsizing and moving. Margit is a pioneer in the Senior Move Management industry and is Founding President of the National Association of Senior Move Manager (NASMM). In 2007 Margit founded eSMMART, a web-based training platform to professionalize the Senior Move Management industry that awards a Certificate in Senior Move Management (cSMM). Margit is a sought-after speaker on hoarding and on late-life transition issues. She has graduate and undergraduate degrees from the University of Pennsylvania.