

# HOARDING DISORDER

## Factsheet

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A hoarding disorder is where someone acquires an excessive number of items and stores them in a chaotic manner, usually resulting in unmanageable amounts of clutter. The items can be of little or no monetary value. Hoarding is complex. It usually requires multi-agency support, for example, from fire safety, mental health and housing services. Supporting somebody to recovery or to a reduction in their hoarding takes time and patience.

Hoarding is considered a significant problem if:

- the amount of clutter interferes with everyday living – for example, the person is unable to use their kitchen or bathroom and cannot access rooms
- the clutter is causing significant distress or negatively affecting the quality of life of the person or their family – for example, they become upset if someone tries to clear the clutter and their relationship suffers

### Why do people hoard

Nobody knows the exact causes of hoarding but it often starts during adolescence and becomes a significant problem for most during their thirties. There are many theories as to why people do it. It is worth remembering that different people will have different reasons for their experiences. Some of the reasons include, but are not limited to:

- **Difficult feelings** - some people say hoarding helps them cope with other mental health problems, such as depression or anxiety, or distracts them from feeling upset or afraid.
- **Perfectionism and worrying** – someone might find it hard to make decisions, plan ahead or work out how to do tasks, and might feel very worried about making mistakes. The idea of sorting through their things is too difficult or upsetting so it is easier to just avoid trying.
- **Childhood experiences** - hoarding may relate to childhood experiences of losing things, not owning things, or people not caring about the person. Experiences like

childhood poverty, or emotional abuse or neglect, might make somebody feel more connected to their belongings, or make it hard for the person to organise them.

- **Family history or habits** – it is common for somebody who hoards to have family members who share this behaviour.
- **Trauma and loss** – the start of hoarding might be linked to a traumatic period in a person's life such as bereavement, a relationship breakdown or abuse. For some, if hoarding began prior to the trauma, it will exacerbate the problem.

## Spotting the signs

The following information will help to identify whether somebody may be dealing with a hoarding disorder. These are some of the signs to look out for but there are more:

- 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

## Types of hoarding

Whilst many people **actively** buy, collect or rescue items, many others acquire items **passively** through postal deliveries or grocery shopping. The type of things hoarders collect varies, but may include:

- clothes
- books, newspapers and magazines
- post
- packaging and containers
- food – including rotten or out-of-date items
- animals

Digital hoarding of data such as emails, and of IT equipment, is also becoming more common.

Hoarding is very different from collecting. The main difference between the two is how items are organised, and how much it affects day to day life. Collecting normally involves the careful, selective choosing of items, which are normally ordered in some way. Hoarding is not normally as selective. It does not involve organisation in a way that makes items easy to access or use.

It is really important to encourage a person who is hoarding to seek help, as their difficulties discarding objects can not only cause loneliness and mental health problems but also pose a health and safety risk. If not tackled, it is a problem that will probably never go away.

## **The effects of hoarding**

Hoarding can affect people in a multitude of ways. This includes but is not limited to:

- Struggling to find important things or belongings at home.
- Avoiding inviting people into the home or difficulty answering the front door.
- Difficulty maintaining personal hygiene because the bathroom is inaccessible.
- Difficulty preparing and eating meals because the kitchen or food preparation area is inaccessible, or there is no room inside the fridge.
- Being unable to quickly and safely vacate the premises in an emergency due to things blocking doorways or escape routes.
- Feelings of shame and loneliness which can lead to feelings of isolation, in turn affecting levels of self-esteem.

It is important to bear in mind that somebody living with a hoarder may also experience these effects.

## **The stigma of hoarding**

The term hoarding is often misunderstood and often used incorrectly. For example, somebody professing that they are a 'hoarder' because they like to collect things or have more clutter than usual. The media can often misrepresent what hoarding is and show it in a very extreme way. In turn this can make it difficult for people to recognise that they are hoarding or talk to others about what they are experiencing. There is also an assumption that hoarders are lazy or unclean, or perhaps require assistance with tidying up. It is very unhelpful if people do try to do this for somebody who is hoarding.

## **Other mental health related issues**

Hoarding can be a symptom of another mental health or physical problem. If there is another health problem this can affect the treatment. These can include:

- Brain injuries
- Dementia
- Depression
- Obsessive-compulsive disorder (OCD)
- Schizophrenia
- Personality disorders, such as obsessive-compulsive personality disorder
- Alcohol or drug addiction
- Prader-Willi syndrome