

*COMPULSIVE HOARDING*

*KIERON O'CONNOR, PH.D., M.PHIL., C.PSYCHOL.*

*SENIOR RESEARCHER*

*FERNAND-SEGUIN RESEARCH CENTRE*

*LOUIS-H. LAFONTAINE HOSPITAL*

*ASSOCIATE RESEARCH PROFESSOR*

*DEPARTMENT OF PSYCHIATRY*

*UNIVERSITY OF MONTREAL*

*DIRECTOR, CLINICAL RESEARCH PROGRAM*

*OBSESSIVE-COMPULSIVE DISORDER*

*FERNAND-SEGUIN RESEARCH CENTRE*

*SCIENTIFIC ADVISOR*

*QUEBEC FOUNDATION FOR OBSESSIVE-COMPULSIVE DISORDER*

*MEMBER OF BOARD OF DIRECTORS*

*ASSOCIATION QUÉBÉCOISE DES PERSONNES ATTEINTES DE MALADIE*

*MENTALE*

**WHAT IS HOARDING?**

Hoarding is now recognized as a subtype of obsessive-compulsive disorder (OCD) but can also occur in other psychiatric disorders. Hoarding is the amassing and storing of unusual amounts of items which have no perceptible value. Almost any item may be the subject of hoarding, but the most common are: newspapers; magazines; flyers; receipts, bills, household junk; empty cartons; tinned food; correspondence... or e-mails... furniture, and even filthy rubbish. There have also been reports of people hoarding animals such as stray cats. The key component of hoarding is "clutter" and frequently the "clutter" is so great that the person can only enter their own house or apartment with difficulty and may be confined to a small often uncomfortable area to live in. I have even known people hire storage space when the apartment becomes uninhabitable.

**WHAT'S THE DIFFERENCE BETWEEN HOARDING AND COLLECTING?**

There is a big difference between collectors and hoarders. Collectors may collect many strange items, pins, badges, bottle tops. But for the genuine collector, the collection gives a sense of pride. It is also a very sociable activity and there may be club meetings with similar collectors. Also collections may take up space but they will not impede living.

**WHAT CAUSES HOARDING?**

There seem to be two major motivations for hoarding: utilitarian and sentimental. In the first category, one finds people who believe *"It will be of use some day"*. *"Or what if I (or someone) will need the information, recipe, receipt, empty box, etc... later?"* Of course, the "some day" or "later" never arrives and in the meantime, the pile of items which "maybe one day" will be useful continues to grow and clutter. The sentimental hoarders are usually people who grow abnormally attached to objects or items to the extent that they see them either as little personalities or as part of their own personality.

Hence they can't bear to part with them. In my experience, hoarders often have both sentimental and utilitarian hoarding motivations.

### **AREN'T HOARDERS JUST MESSY PEOPLE?**

Hoarder's homes often appear messy and disorganised, but surprisingly hoarders themselves do not lack organisational skills or responsibility. The reason the messy piles appear is that for the hoarder the piles are always "temporary", they just need the time to organise them properly and deal with information or sort out the objects. Of course, the pile is never temporary because "the right time" to deal with the items never comes along. In fact, usually the only time the person sorts through the "clutter" is when they must deal with it in therapy. Paradoxically, people who hoard are often very well organized and responsible in other walks of life and it may be over-concern with making a mistake which leads to the hoarding.

### ***WHAT ARE THE LONG-TERM IMPACT OF HOARDING?***

Hoarders often end up living very isolated and restricted lives. Firstly they will be reluctant to let people into their house since they will be ashamed of the state of clutter. They also suffer guilt and depression about their lives. It is frequently difficult to enter or maintain a relationship since there is often very little understanding on behalf of the other partner. Also the person may have genuine difficulties functioning normally in life, for example they may not have access to kitchen or bathroom because of the clutter. They may lose important letters and personal documents in the piles. They may face the constant threat of eviction from landlords or authorities.

### **CAN IT BE TREATED?**

Yes. But hoarding is recognised as an OCD condition which is difficult to treat either by medication or cognitive behavior therapy for several reasons. Firstly, hoarders frequently have other problems along with hoarding. There may be other forms of OCD,

for example, checking obsessions and ruminations are common. Or frequently there is depression and anxiety sometimes as a consequence of the problem. The person who hoards may just be a passive hoarder, storing items as they come along, or worse s/he may be an active accumulator, going to garage sales, buying bargains en masse from the supermarket, so as not to lose out on anything. Or even collecting objects from dumps, rubbish skips or waste bins. There may, in addition, be personality problems accompanied by rigid thinking and a difficulty regulating emotions properly and tolerating any discomfort. There is often denial of the problem or avoidance of accepting the need to deal with the problem as a priority. It sounds strange but often the hoarder gets so accustomed to the clutter, they don't "see" it. Also the hoarder may feel strongly that they are absolutely justified in keeping an item because *"it really could be useful"*... even if in reality it never is used.

### **HOW IS HOARDING TREATED?**

The first course of action is to educate the person about the problem and this will include motivating the person to deal with the problem NOW (not when they feel they have the time). Intensive cognitive therapy is then usually required so that the person appreciates how their thinking *"maybe one day I'll need it"* is not realistic. It's then important to draw up a hierarchy of clutter to be thrown out, a bit at a time. The first step is to organise the clutter into manageable categories. This sorting does not mean "churning" the clutter, which is simply shifting it to new piles to be hoarded elsewhere. The sorting is a first step towards throwing out and the throwing out should follow immediately after the sorting, since any delay may lead to procrastination.

As well as dealing with the clutter, any problematic accumulation habits need to be addressed and it is important the person adopts and maintains new non-obsessional ways of dealing with flyers, rubbish and information as they come along. For example, deciding what coupon to keep from a supermarket flyer on the same day it arrives rather than storing it until "the right time" to look at it, which of course never arrives.

One strategy absolutely not recommended is to turn up with a dump truck and simply toss out all the hoarder's clutter, regardless of their wishes. For family members,

frustrated by the clutter, this seems a clear cut option. But, one guaranteed to traumatise the hoarder and make the hoarding subsequently worse. Such a strategy may of course be justified in the case of severe health or fire risk due to the clutter but it is nonetheless always psychologically devastating for the hoarder.