APS TARC

Adult Protective Services Technical Assistance Resource Center

enhancing effectiveness of **APS** programs

APS Responses to Hoarding

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ACL Administration for Community Living

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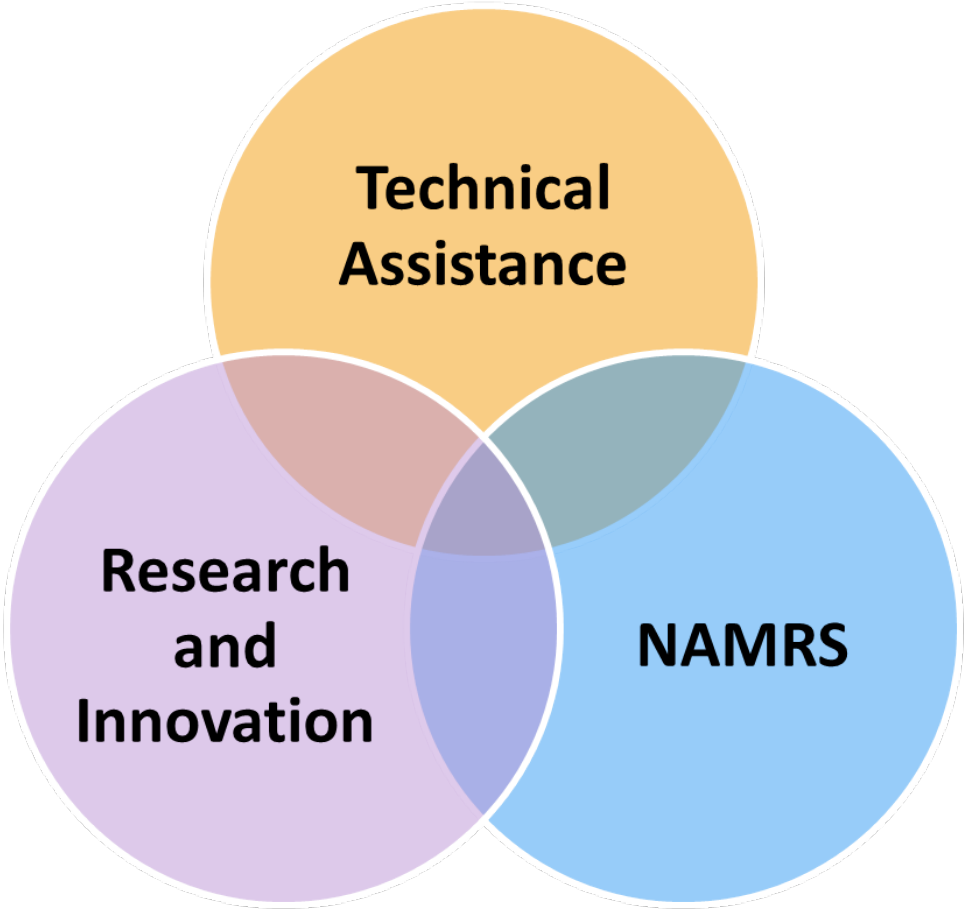
About the APS TARC

The mission of the APS TARC is to enhance the effectiveness of APS programs by:

- Supporting federal, state, and local partners' use of data and analytics.
- Applying research and evaluation to practice.
- Encouraging the use of innovative practices and strategies.
- Providing APS programs individualized technical assistance.



Our Presenter

Chris Dubble

Learning Objectives

- Identify the psychological, emotional, and environmental factors contributing to hoarding behavior.
- Distinguish hoarding behavior from general clutter or collecting habits.
- Assess the risks and impacts of hoarding on individuals' physical, mental, and social well-being.
- Identify APS approaches to address hoarding with a long-term harm-reduction perspective.

WHITE HOUSE
EVAPORATED MILK
STRAINED FOODS

LE
U.S.A.
BLUE BIRD

SHEFFIELD
Sealect
EVAPORATED
ALL-BRAN

What Does Hoarding Look Like?

Word association: What is the first word that comes to your mind when I say “hoarding”?

Addressing Hoarding in APS

- Do no harm.
- Screen as a mental health issue.
- Find their goals.
- Accurately assess for risk.
- Plan for the long-term with harm reduction.

Do No Harm

- **“Do no harm” is a foundational ethical principle** – It reminds us to prioritize the safety and well-being of the person in all interventions.
- **Hoarding is a mental health issue, not a housekeeping problem** – Treating only the symptoms ignores the underlying psychological complexity.
- **Stigma and shame worsen isolation** – Avoiding harm means being mindful not to reinforce any social judgment or stigma felt by the person.

Do No Harm

- **We are guests in someone's living space** – Entering with humility and sensitivity is essential to avoid causing unintended harm.
- **Harmful interventions damage trust** – Once trust is broken, it can become significantly harder to engage the person in supportive services or future support.

Tips for Doing No Harm

- **Don’t start with cleaning** – Premature cleanouts can be traumatic and lead to greater resistance or worsening of the behavior. APS should prioritize relationship-building and readiness to the extent possible.
- **Understand that hoarding is often tied to trauma or anxiety –** Approach the situation with empathy and recognize the emotional attachments involved.

Tips for Doing No Harm

- **Include the person in harm reduction and safety planning** – Empower the person to identify risks and be part of the solution. This approach increases buy-in and long-term success.
- **Coordinate with multidisciplinary supports –** Engage partners to address the complex factors without overwhelming the person.

Screen as a Mental Health Issue

- **Hoarding is a clinical diagnosis** – It is classified as *Hoarding Disorder* in the DSM, emphasizing the need for clinical screening and mental health intervention.
- **Behavioral interventions alone are often insufficient –** Without addressing the psychological, emotional, and cognitive components, physical cleanup efforts typically fail or result in relapse.

Diagnostic Criteria – DSM-5-TR

1. Persistent difficulty discarding or parting with possessions, regardless of their actual value.
2. This difficulty is due to a perceived need to save the items and to distress associated with discarding them.
3. The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas and substantially compromises their intended use. If living areas are uncluttered, it is only because of the interventions of third parties.

Diagnostic Criteria – DSM-5-TR

Diagnostic Criteria – DSM-5-TR

4. The hoarding causes clinically significant distress or impairment in social, occupational or other important areas of functioning including.
5. The hoarding is not attributable to another medical condition.
6. The hoarding is not better explained by the symptoms of another mental disorder.

Screen as a Mental Health Issue

- **Mental health-informed approaches reduce stigma** – Framing hoarding this way promotes empathy and discourages blame or judgment.
- **Interventions should focus on more than symptoms –** Screening at this level lays the groundwork for sustained progress by addressing root causes.
- **Centering on mental health improves interdisciplinary collaboration** – Considering the diagnosis can align intervention strategies more effectively.

Tips for Screening

- **Use observational clues** – Look for signs such as blocked exits, narrow pathways, excessive accumulation, or inability to use key living areas for their intended purpose.
- **Watch for emotional distress when discussing addressing belongings –** Heightened anxiety, defensiveness, or strong attachment to items may signal underlying mental health concerns.

Tips for Screening

- **Include collateral information when appropriate** – Neighbors, family, or service providers may have insight into the duration and impact of the behavior.
- **Know when to refer** – If hoarding behavior appears to interfere with daily functioning or presents a safety hazard, refer to specialized professionals who can assist.

Find Their Goals

- **Person-directed goal setting increases safety** – Individuals are more likely to address serious hazards when these are framed within their own goals.
- **The process encourages insight and self-reflection –** Person-directed goal-setting fosters the person's awareness about the impact on quality of life.
- **Using their goals reduces reluctance** – When individuals feel heard and not pressured, they are less defensive and more open to interventions.

Find Their Goals

- **Harm reduction focuses on their goals** – Even small, self-identified goals like clearing a single pathway, can make environments safer without overwhelming the person.
- **APS ethical values are prioritized** – Prioritizing their goals and choices supports the core APS ethical values, including supporting autonomy and always using the least-restrictive interventions.

Tips for Finding Their Goals

- **Explore values and motivations** –Connect goals to what they care about.
- **Break the process into small steps** – Support the person in setting realistic, specific, and manageable goals.
- **Learn about motivational interviewing** – Motivational interviewing provides tools to help people self-identify goals and methods to encourage self-directed behavior to reach them.

Tips for Finding Their Goals

- **Reassess and revise goals frequently** – Encourage flexibility by checking in on what's working and adjusting as needed.
- **Avoid imposing our own priorities** – Guide rather than direct. Let them identify and direct what feels doable and meaningful.

Accurately Assess for Risk

- **Safety is prioritized without overreacting** – A clear, accurate assessment helps distinguish between manageable risks and immediate dangers requiring intervention.
- **Accurate risk assessment prevents unnecessary or harmful interventions** – Misjudging the level of risk can lead to traumatic forced cleanouts or unjustified removals from the home.

Accurately Assess for Risk

- **Documentation and defensibility focus on the risk assessment** – Clear evidence-based assessments are critical for legal, ethical, and supervisory review, especially in complex or contested cases.
- **A clear risk profile improves collaboration** – When communicating with other professionals, a well-established risk profile creates shared understanding.

Tips to Accurately Assess Risk

- **Focus on functional impact, not just volume** – Assess how the clutter affects the person's ability to cook, bathe, sleep, exit safely, and access services.
- **Consider the progression and duration** – Ask how long the current conditions have existed and whether they're worsening over time.
- **Use a structured tool or checklist** – Instruments like the *Clutter Image Rating Scale (CIR)* or a standardized home safety checklist help reduce subjectivity and ensure key areas are evaluated.

Clutter Image Rating Scale (CIR)

Tips to Accurately Assess Risk

- **Assess health risks to both the individual and others** – Consider air quality, sanitation, fall risks, and whether others are affected.
- **Document specific observations, not opinions** – Use objective language (e.g., “kitchen stove obstructed by stacked papers”) rather than subjective terms like “disgusting” or “unlivable.”

Plan for the Long-Term

- **Hoarding is a chronic condition, not a one-time crisis** – Long-term support is necessary because hoarding behaviors typically develop over years and require sustained intervention.
- **Quick fixes often backfire** – Sudden cleanouts without follow-up can cause trauma, worsen trust, and lead to rapid re-accumulation.
- **Behavioral change takes time** – Building insight, developing new habits, and addressing emotional attachments to items is a gradual process.

Plan for the Long-Term

- **Coordinated and wraparound services are typically optimal** – Long-term planning enables collaboration among protective services, mental health, housing, legal, and social service supports.
- **A long-term approach can reduce frustration and burnout from these situations** – A long-term plan distributes effort across time and teams, preventing the urgency-driven cycles that wear down professionals.

Tips to Plan for the Long-Term

- **Create a collaborative service plan** – Involve the person in identifying priorities, desired outcomes, and pacing of change to ensure buy-in and engagement.
- **Plan for setbacks and relapses** – Normalize the possibility of regression and include strategies to re-engage without shame or judgment.
- **Start with minimum safety standards and build momentum** – Focus on achievable, short-term safety goals and then set goals that build momentum.

Sample Minimum Safety Standards

- Working toilet and sink
- Adequate and safe walking paths in the main rooms
- No infestations of insects or rodents affecting health
- No excessive accumulation of garbage
- Access to all required means of exit from the home
- Working electrical outlets
- No active threat of eviction

**Source: Carmen L. Moran, Ph.D. Hunter College School of Social Work*

Tips to Plan for the Long-Term

- **Engage in a multidisciplinary approach early and often** – Include long-term housing, mental health, medical, fire safety, and legal supports as appropriate to address all aspects of the situation.
- **Incorporate therapeutic support** – Refer to mental health professionals skilled in hoarding, cognitive behavioral therapy (CBT), or trauma-informed care to support emotional and behavioral change.

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