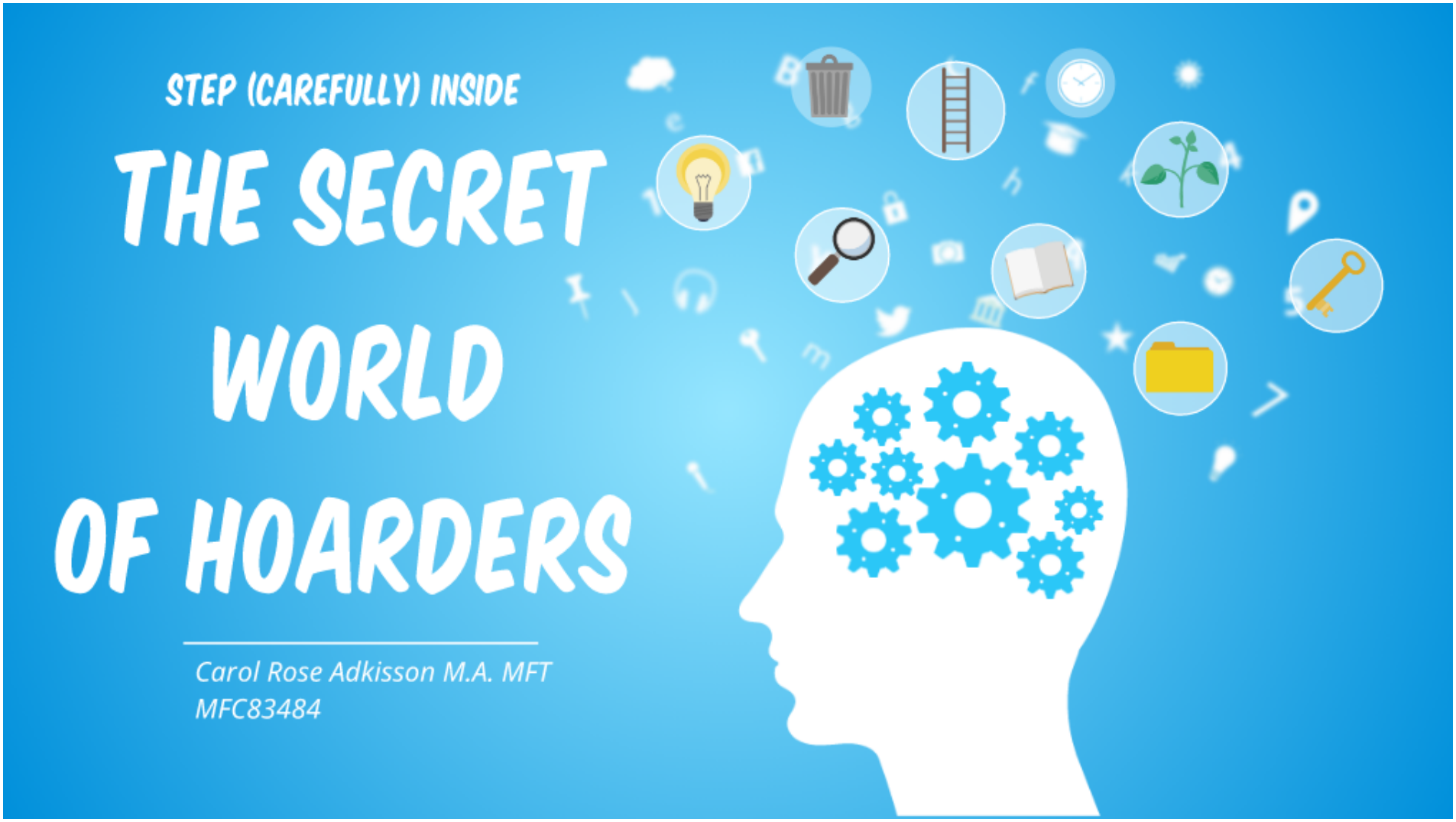
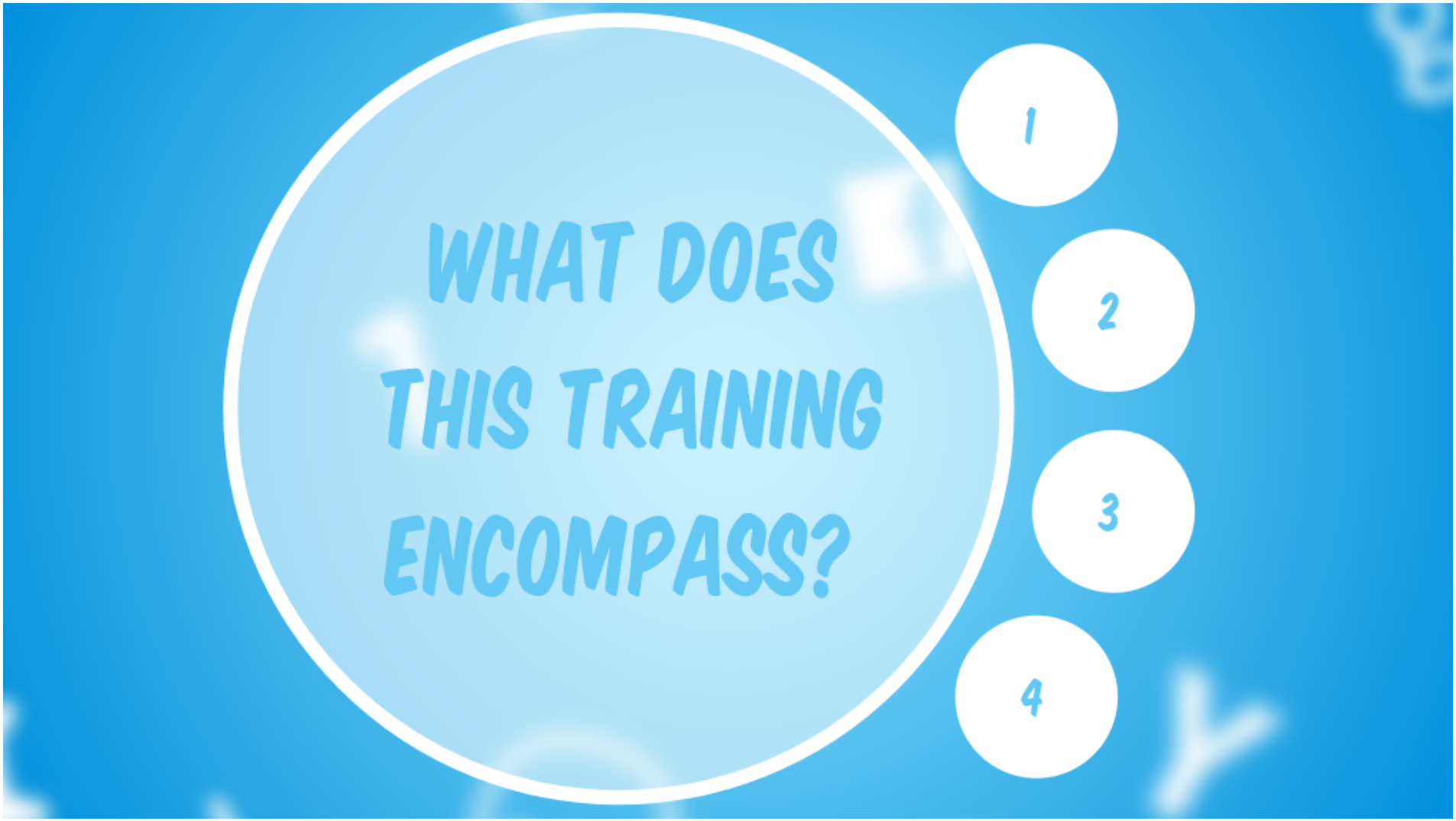

STEP (CAREFULLY) INSIDE
THE SECRET WORLD OF HOARDERS
Carol Rose Adkisson M.A. MFT
MFC83484


WHAT DOES THIS TRAINING ENCOMPASS?
1
2
3
4


Today we will discuss hoarding.
How we can understand and help the client and his/her family?

STEPPING INTO A HOARDER'S WORLD IS NOT AS EASY AS YOU MIGHT THINK

A hoarder has multiple layers that if peeled back, may possibly reveal a family system that helps to enable his or her behaviors, traumatic events from her childhood, anxiety, obsessive-compulsive thinking, and possibly an addictive personality compounded by delusional thinking.

Would you like a peek into that world?

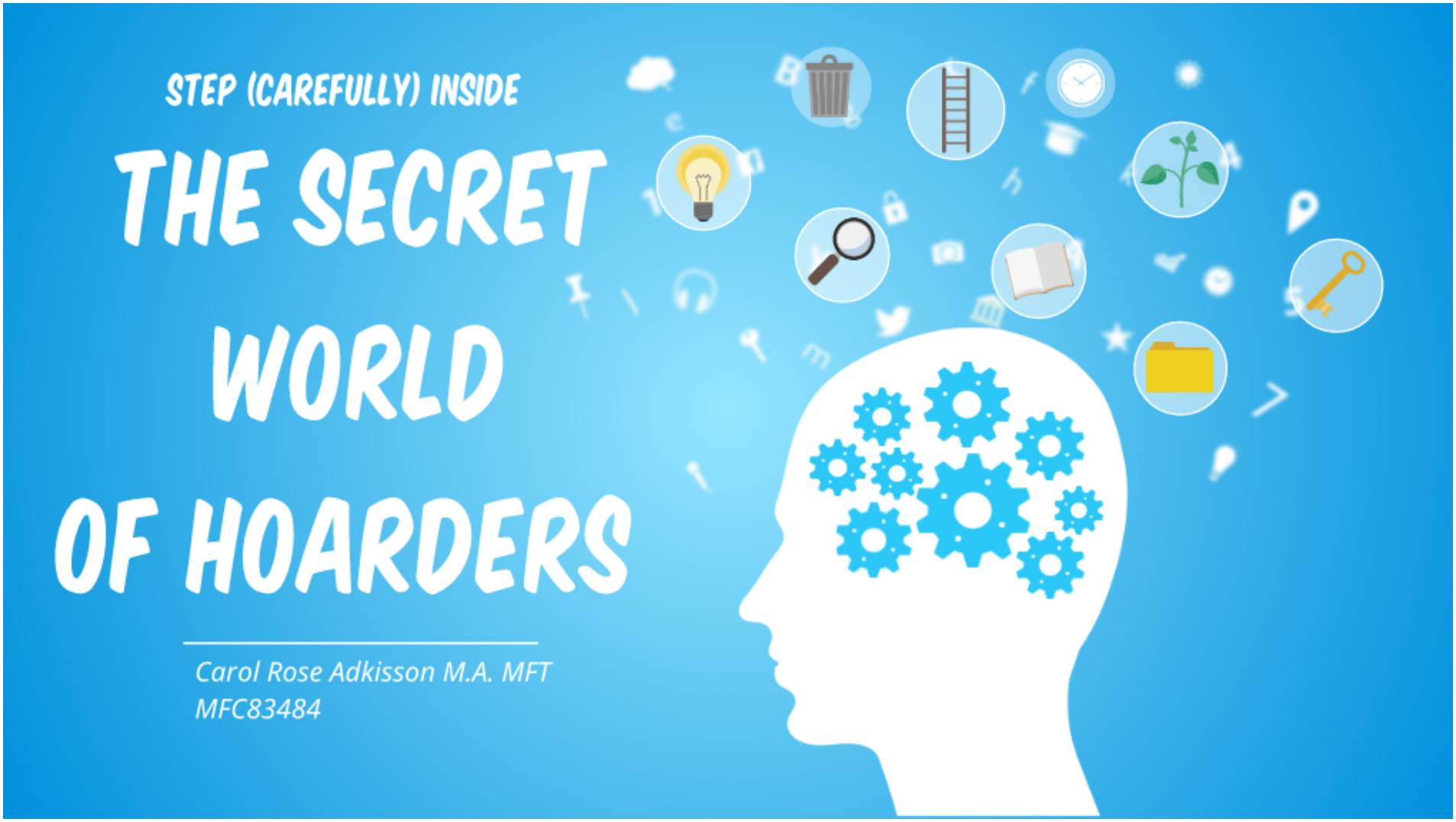
Let's help these clients that are more common than you may realize. Let us delve into that world and explore the depths of their secret world.

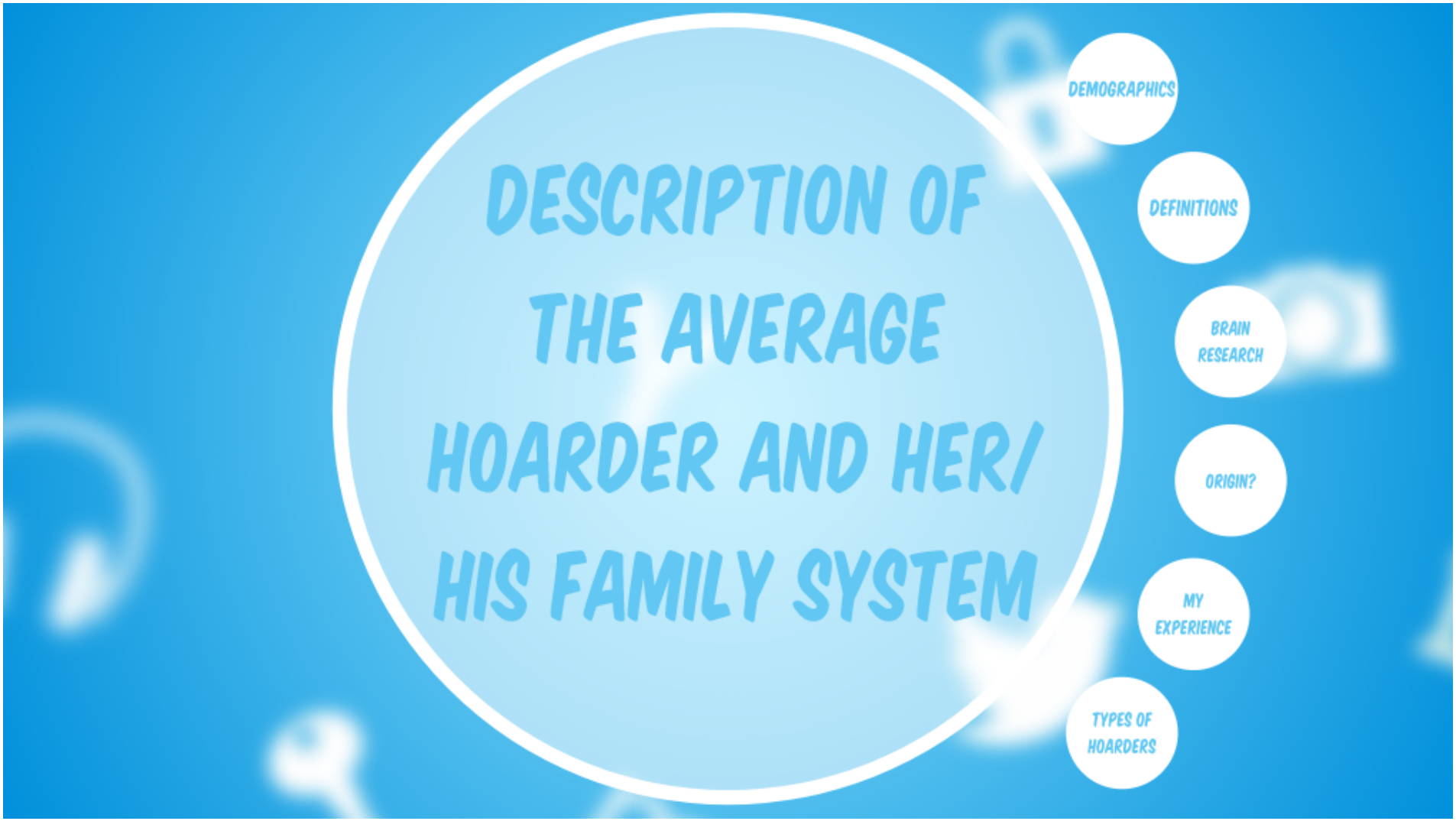

SELF DISCLOSURE

A PICTURE OF THE AVERAGE HOARDER AND HIS/HER FAMILY SYSTEM.

It's important to understand the system in order to help the hoarder heal. It's also necessary for the family to form an alliance, just as you would with an addict or an alcoholic. We will discuss the five stages of hoarding, the diagnostic criteria as presented in the DSM-5, and various treatment methods to deal with this insidious problem.

Many times as clinicians we are unaware that our clients present with this problem as it is generally a secret condition. Hoarders are not hoarders, but collectors, at least in their minds, however delusional that may be. Let me help you to lead your clients to success and freedom.

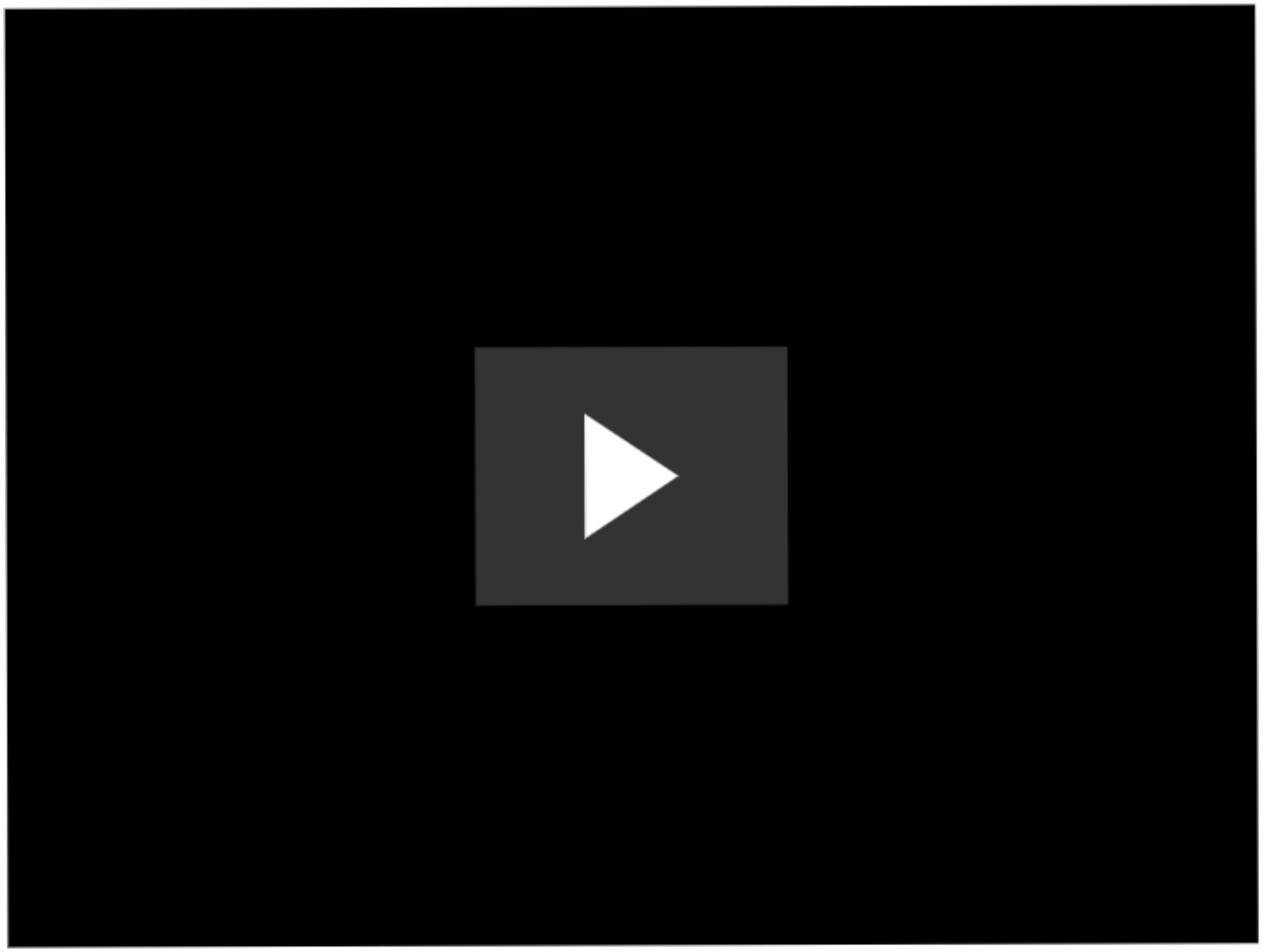

STEP (CAREFULLY) INSIDE
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DESCRIPTION OF THE AVERAGE HOARDER AND HER/ HIS FAMILY SYSTEM
DEMOGRAPHICS
DEFINITIONS
BRAIN RESEARCH
ORIGIN?
MY EXPERIENCE
TYPES OF HOARDERS

DEMOGRAPHICS

DEMOGRAPHICS

Hoarding usually starts around ages 11 to 15
Older age groups-symptoms seem to increase with age
Prevalence of approximately 1.5%
Affects people of both genders
More often unmarried (67%).
More likely to be impaired by a current physical health condition (52.6%) or co-morbid mental disorder (58%)
More likely to report lifetime use of mental health services.



DEMOGRAPHICS

Developmental stages of a hoarder

Childhood-Difficulty discarding things.
Teenage to Adulthood -Gradual build up of items
20's to 30's-Saving an excessive number items
Middle Age-Symptoms accelerate
Elderly-Rooms become unusable

DEFINITIONS

DSM-5 DEFINITION

Hoarding Disorder is classified in the Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV-TR)5 as a criterion for obsessive-compulsive personality disorder (OCPD) and a symptom of obsessive-compulsive disorder (OCD).

It is now classified in DSM-5 as hoarding disorder (HD), a distinct entity under the category.

HOARDING DICTIONARY DEFINITION

The dictionary definition of a hoard is 'a supply or fund stored up and often hidden away', alternatively 'a secret store of valuables or money'. The word hoard can be used as a noun or verb (with or without object).

The word hoarding was originally coined to describe the behaviour of animals storing food for future use, then moved into use as a descriptor of human behaviour.

MEDICAL DEFINITION

In 1996 Randy O Frost and Tamara L Hartl defined compulsive hoarding with the following:

- The acquisition of, and failure to discard, possessions that appear to be of useless or of limited value.
- Living spaces so cluttered that using the room as intended is impossible.
- Significant distress or impairment to function.

A HOARDER'S PREFERRED DESCRIPTOR

Don't like to be called hoarders; it's offensive to them

Rather be called:
-Collectors
-Pack rats



BRAIN RESEARCH

BRAIN RESEARCH

A 2004 study looked at a group patients who had 'focal brain lesions' very specific injuries to small areas, in particular those who displayed 'abnormal collecting behavior.

Using high-resolution, three-dimensional magnetic resonance imaging they compared the study group with normal images and found that damage to a part of the frontal lobes of the cortex, particularly on the right side, was shared by the individuals with abnormal behavior.

This means that there is a particular spot in the brain that put the brakes on hoarding.

BRAIN RESEARCH

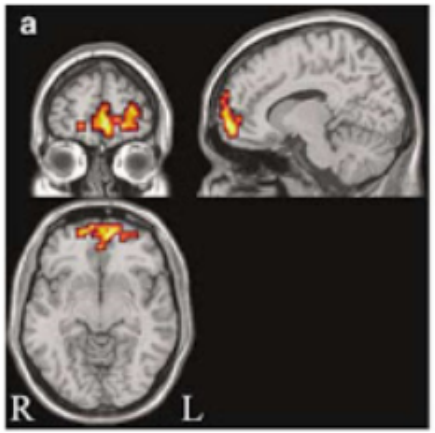
Another study from 2008 has shown that compulsive hoarders have a unique pattern of brain activity, distinct from that seen non-hoarding OCD patients or normal control subjects.

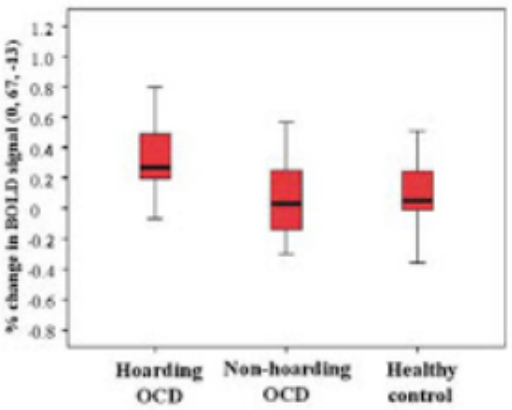
It suggests that hoarding is associated with impaired decision making.

When hoarders wrestled with decisions about their personal items MRI scans show much more activity in the areas of the brain that control decision making, attention and controlling emotions.

BRAIN RESEARCH

This area of the brain is known as the 'bilateral anterior ventromedial prefrontal cortex' or VMPFC. The prefrontal cortex is the the most 'advanced' area of the brain, only mammals have it and it is most developed in humans.





Hoarders have more activation

BRAIN RESEARCH

It seems that the although the regions are missing in the brain lesion patients and over-active in the OCD hoarding patients, in that they share the same functional unit of the central nervous system.

Put simply, this means that hoarders think differently. This may explain why traditional treatments for OCD sufferers with hoarding are less successful for those without hoarding. These findings are at a very early age of discovery.

NATURE OR NURTURE?

NATURE OR NURTURE?

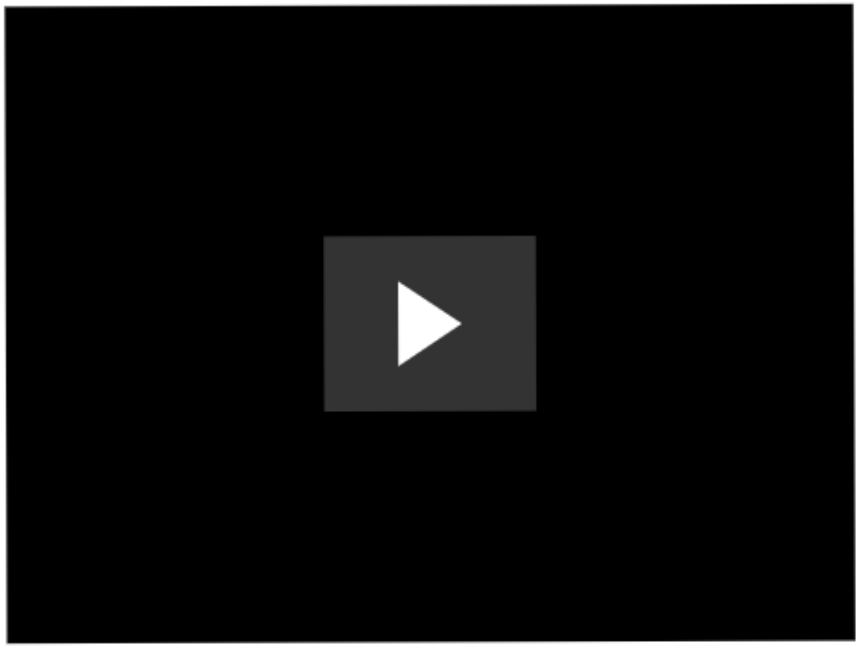
A 2008 publication has shown that NTRK3 gene may contribute to the genetic susceptibility to hoarding and OCD and has identified this as an area for further research.

A separate 2007 study has shown that there is a region on chromosome 14 linked with compulsive hoarding behavior in families with OCD.

These are studies are on very small samples, however these could be dramatic breakthroughs.

NATURE OR NURTURE?

Can be triggered by an emotionally heavy life event.



NATURE OR NURTURE?

How much is the risk of becoming a clinical compulsive hoarder is genetic and how much is learned behavior and upbringing is yet uncertain.

Genetics, brain functioning and stressful life events are being studied as possible causes.

MY EXPERIENCE

MY EXPERIENCE WITH THE AVERAGE HOARDER

Ego syntonic vs Ego dystonic

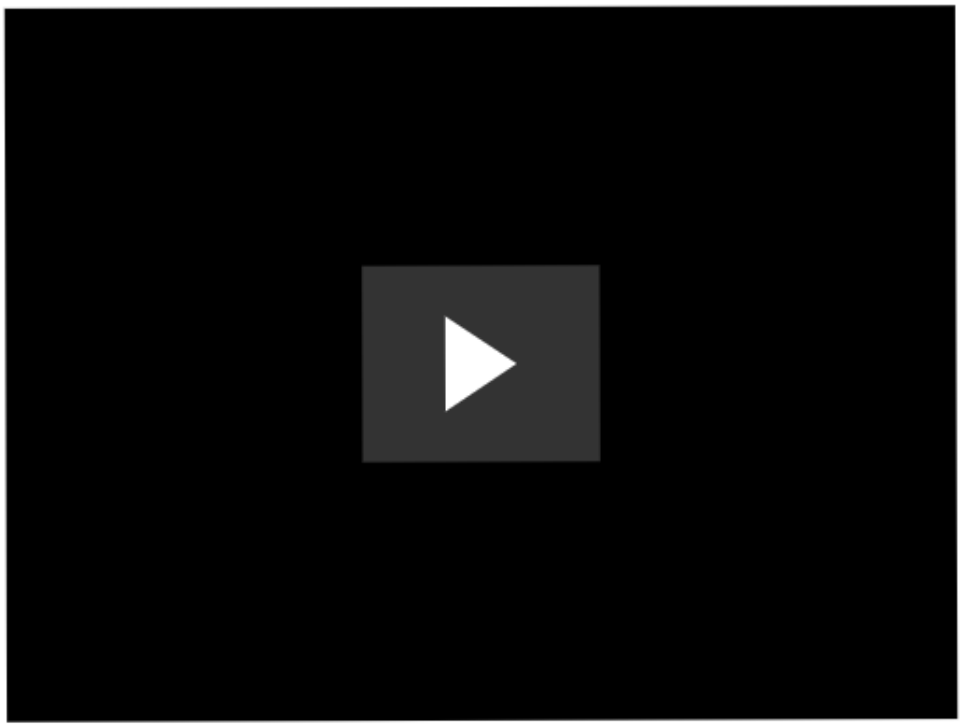
- Don’t see themselves with a problem

Compulsive hoarding is characterized by difficulty discarding items, often resulting in significant distress and impairment due to excessive accumulation of clutter (Frost & Gross, 1993).

Therefore, the act of hoarding is considered ego-syntonic in Hoarding Dystonic and ego-dystonic in OCD.

MY EXPERIENCE WITH THE AVERAGE HOARDER

Stubborn



MY EXPERIENCE WITH THE AVERAGE HOARDER

Lacking linear thought--Speaks in circles

MY EXPERIENCE WITH THE AVERAGE HOARDER

Frustrating to work with

MY EXPERIENCE WITH THE AVERAGE HOARDER

Family system is burnt out

MY EXPERIENCE WITH THE AVERAGE HOARDER

Lack of understanding the consequences of their disorder

MY EXPERIENCE WITH THE AVERAGE HOARDER

Limited growth without treatment

TYPES OF HOARDERS

TYPES OF HOARDERS

Clinical compulsive hoarding

Clinical compulsive hoarding tends to run in families. Several studies have shown that approximately 50% of hoarders report a first degree relative, e.g. a parent, sibling or offspring who hoards. Some of the latest research into compulsive hoarding has been into genetic factors.

Compulsive hoarding, also known as hoarding disorder, is a pattern of behavior that is characterized by excessive acquisition and an inability or unwillingness to discard large quantities of objects that cover the living areas of the home and cause significant distress or impairment.

TYPES OF HOARDERS

OCD or 'perfectionist' hoarding

Perfectionists are heavily represented among hoarders.
Hoaders may have perfectionist tendencies in a few areas of life but not in others.

Example: A young person may do the same piece of homework over and over again, or the home improver might paint the same table for a week, but this need to 'get it right' may have little 'carry over' effect on others areas.

However, the young person only experiences this need where school work is concerned and is slapdash everywhere else; and the table painter works only as hard in his or her occupation as is absolutely necessary.

TYPES OF HOARDERS

Animal hoarding

Most people think of the "crazy cat lady"

The term "animal hoarding" refers to the compulsive need to collect and own animals for the sake of caring for them that results in accidental or unintentional neglect or abuse.

Most animal hoarders fall victim to their good intentions and end up emotionally overwhelmed, socially isolated, and alienated from family and friends.

The problem causes immense suffering for both animals and people.

TYPES OF HOARDERS

Animal Hoarding: Specific Problem Areas

Animal hoarders have problems with acquiring animals and handling, managing, and getting rid of them.

They have every intention of caring for the animals, but their difficulties with organization, attention, and focus contribute to their living spaces becoming very messy with animal waste and clutter.

Hoarders have a hard time letting go of their objects or animals because they have a terrible time making even simple decisions;

For example, “Is this dog my favorite or should I adopt him out?” They also may have subtle memory problems and feel that they cannot trust their recall, so they keep things to preserve memories.

TYPES OF HOARDERS

Animal hoarding: Strong Emotional Attachments

Hoarders also have an intense emotional attachment to their animals. They avoid the pain of letting go of things that seem very special, even when clutter prevents comfortable living.

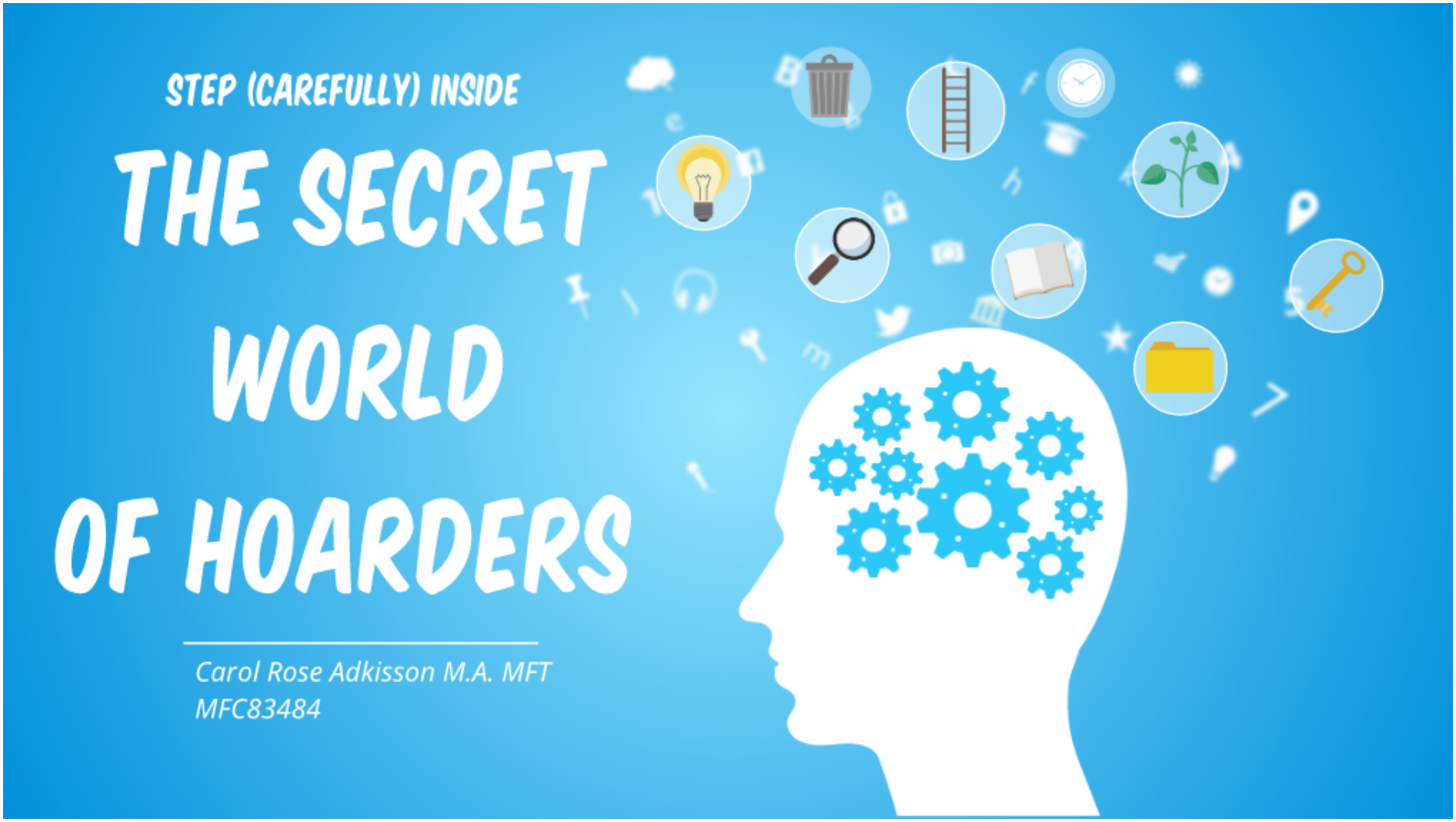


TYPES OF HOARDERS

Newspaper & Magazine Hoarding

Drive is not towards personal growth: to make them totally up to date with current affairs or their career, but involves fear of missing something that might have a detrimental affect on their lives, such as new rules and laws they may get into trouble for not observing.

Another aspect of written work hoarding has been guilt: people afraid that they have inadvertently written something about themselves in newspapers and magazines that carry stories that triggered this guilt (often sexual).


STEP (CAREFULLY) INSIDE
THE SECRET WORLD OF HOARDERS
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5 STAGES OF HOARDING
HOARDING SCALE
LEVEL 1
LEVEL 2
LEVEL 3
LEVEL 4
LEVEL 5

CLUTTER HOARDING SCALE

- The National Study Group on Compulsive Disorganization created a Clutter Hoarding Scale as a guideline for professional organizers making their first few contacts with clients.
- Has 5 different Levels



HOARDING LEVEL ONE:

Clutter is not excessive, all doors and stairways are accessible, there are no odors, and the home is considered safe and sanitary.

HOARDING LEVEL TWO:

Clutter inhabits 2 or more rooms, light odors, overflowing garbage cans, light mildew in kitchens and bathrooms, one exit is blocked, some pet dander or pet waste puddles, and limited evidence of housekeeping.

HOARDING LEVEL THREE:

One bedroom or bathroom is unusable, Excessive dust, heavily soiled food preparation areas, strong odors throughout the home, excessive amount of pets, and visible clutter outdoors.

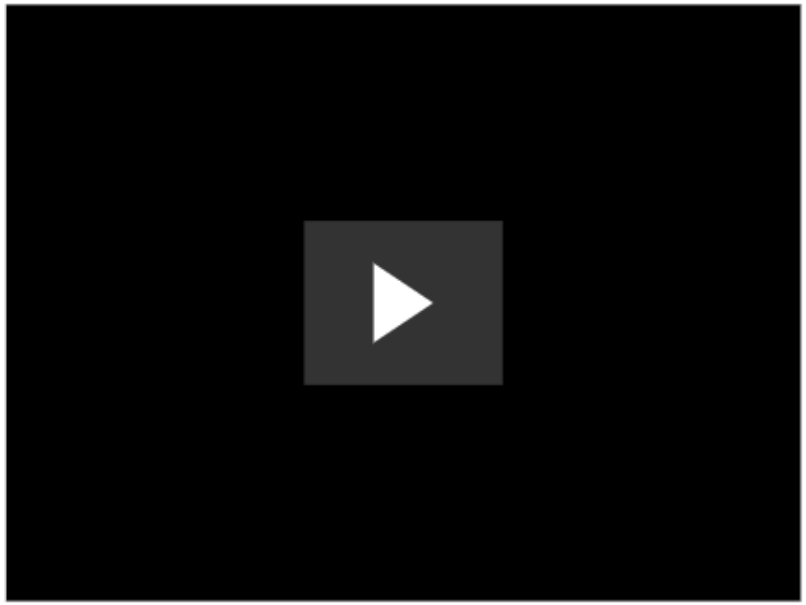


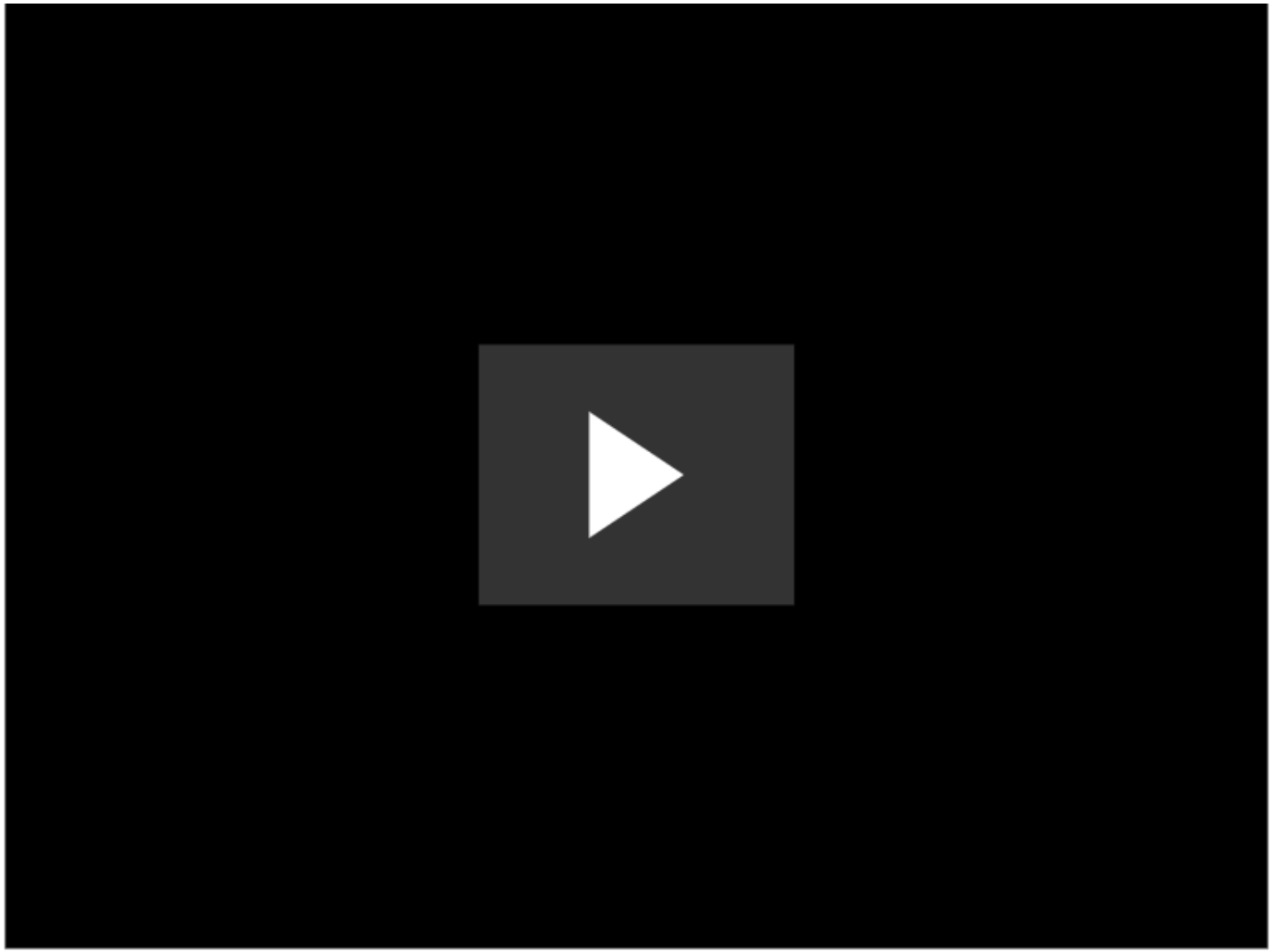
HOARDING LEVEL FOUR:

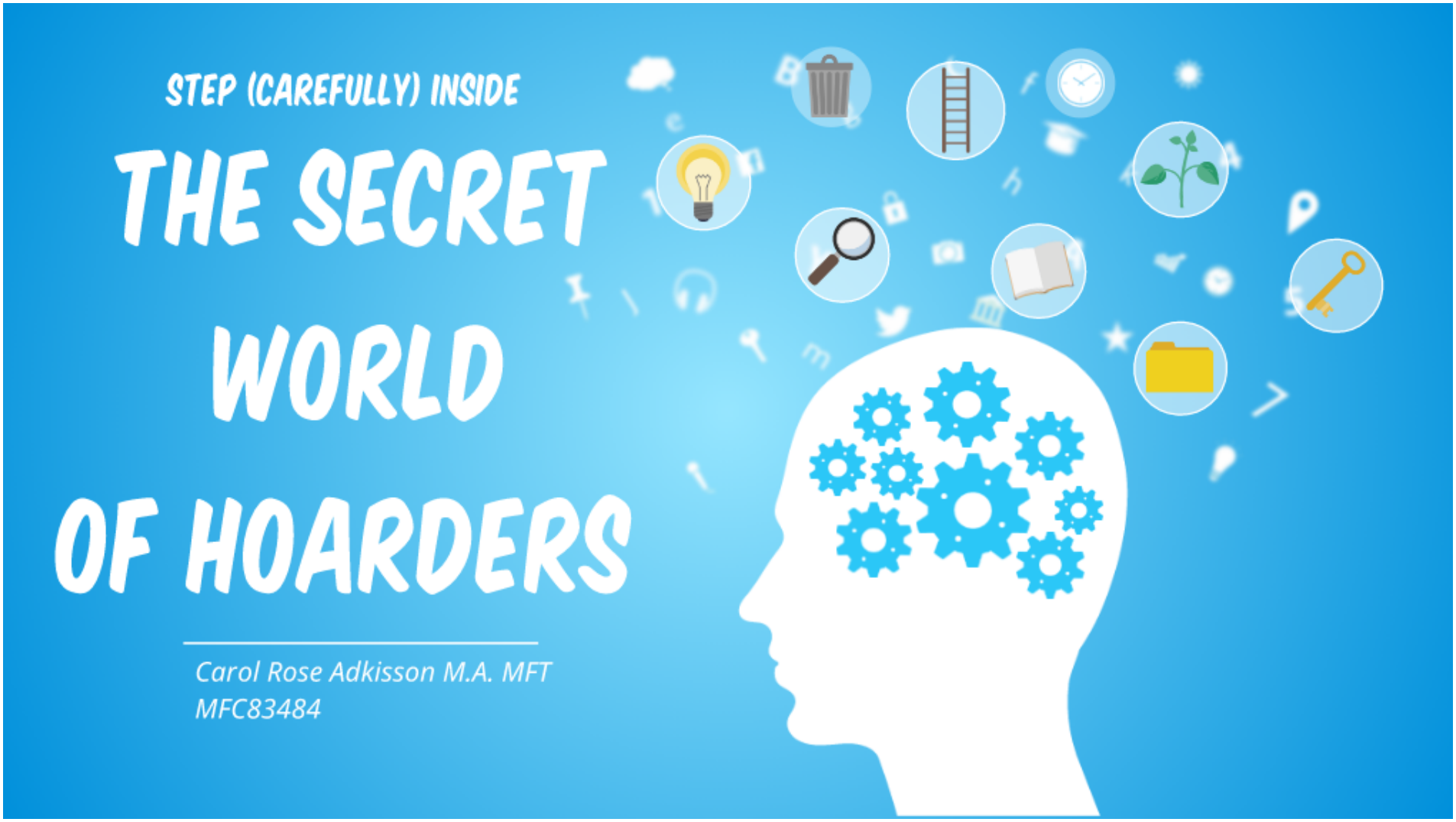
Sewer backup, hazardous electrical wiring, flea infestation, rotting food on counters, lice on bedding, and pet damage to home.

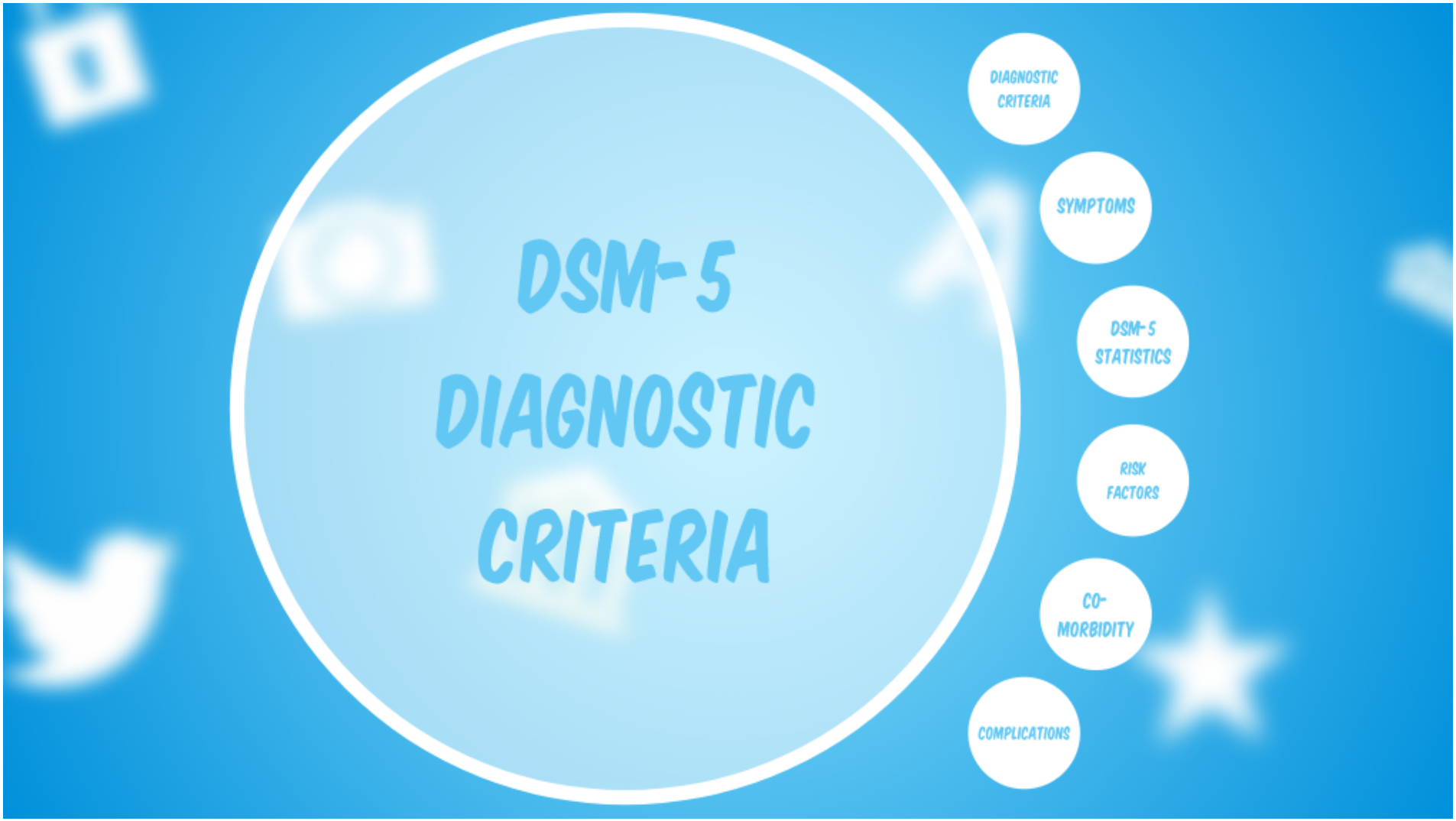
HOARDING LEVEL FIVE:

Rodent infestation, kitchen and bathroom unusable due to clutter, human and animal feces, and disconnected electrical and/or water service.






STEP (CAREFULLY) INSIDE
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DSM-5
DIAGNOSTIC
CRITERIA
DIAGNOSTIC CRITERIA
SYMPTOMS
DSM-5 STATISTICS
RISK FACTORS
CO-MORBIDITY
COMPLICATIONS

DSM DIAGNOSTIC CRITERIA

DSM DIAGNOSTIC CRITERIA

1.Persistent difficulty or parting with possessions, regardless of their actual value.

DSM DIAGNOSTIC CRITERIA

2.This difficulty is due to a perceived need to save the items and to distress associated with discarding them.

DSM DIAGNOSTIC CRITERIA

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 (eg. Family members, cleaners, authorities).

DSM DIAGNOSTIC CRITERIA

4.The hoarding causes clinically significant distress or impairment in social, occupational or other important areas of functioning including (including maintaining a safe environment for self and others).

DSM DIAGNOSTIC CRITERIA

5.The hoarding is not attributable to another medical condition (eg., brain injury, cerebrovascular disease, Pracer-Willis syndrome).

DSM DIAGNOSTIC CRITERIA

6.The hoarding is not better explained by the symptoms of another mental disorder (eg. Obsessions in obsessive-compulsive disorder, delusions in schizophrenia or another psychotic disorder, cognitive deficits in major neurocognitive disorder, restricted interests in autism spectrum disorder).

SYMPTOMS

SYMPTOMS

Hoarding disorder is a DSM-5 (Diagnostic and Statistical Manual of Mental Disorders 5th ed.) diagnosis assigned to individuals who excessively save items and the idea of discarding items causes extreme stress .

Hoarders cannot bear to depart from any of their belongings, which results in excessive clutter to an extent that impairs functioning and may create health and safety risks. Hoarding disorder is more than collecting a little clutter.

SYMPTOMS

- Unable to discard possessions
- Severe anxiety over the idea of discarding possessions
- Limited living space in the home
- Floor and counter space within common areas of the home (such as the kitchen and living room) are seen as storage space
- Isolation
- Loneliness
- Depression
- Fear or embarrassment of having visitors in the home
- Withdrawn
- Disorganized
- Indecisive about where to put things



SYMPTOMS

People with Hoarding Disorder have rooms that are stacked full with items, hallways are difficult to pass through because of the amount of clutter, and sinks and tables unusable.

They may come to the attention of authorities (i.e code compliance, APS, neighbors) because of health and safety concerns of their homes. Hoarders are not comfortable inviting guests over and guests do not feel comfortable in the hoarders chaos.

SYMPTOMS

Hoarding disorder is different from collecting. People who have collections, such as stamps or model cars, deliberately search out specific items, categorize them and carefully display their collections. They aren't usually cluttered and they don't cause the distress and impairments that are part of hoarding disorder.





SYMPTOMS

Hoarding Thought Process:

People with hoarding disorder typically save items because:

- They believe these items are unique or will be needed at some point in the future
- The items have important emotional significance — serving as a reminder of happier times or representing beloved people or pets
- They feel safer when surrounded by the things they save
- They don't want to waste anything

DSM-5 STATISTICS

DSM-5 STATISTICS

The hoarder engages in excessive acquisition, buys items that are unnecessary and they do not have have space for. The hoarder may have good insight and realize that their hoarding is a problem or have poor insight and not recognize their behavior is unhealthy.

According to (DSM-5) 80-90% of hoarders also engage in excessive shopping and buying unnecessary items.

DSM-5 STATISTICS

DSM-5 reports that 2% to 6% of the population have a hoarding disorder. Although hoarding is more common in older adults (55-94 years), it appears to begin at 11-15 years, and starts to cause significant impairment when people are in their 30's (DSM-5).

Hoarding is no longer considered a type of obsessive compulsive disorder (OCD), but 20 percent of people with hoarding disorder also have OCD, and are likely to collect strange objects like trash, feces, urine, nails, hair and rotten food (DSM-5).

DSM-5 STATISTICS

Frost, Steketee, Tolin, et al, (2011) found that those diagnosed with hoarding frequently also have diagnosis of depression (57%), social phobia (29%), generalized anxiety disorder (28%) and attention deficit disorder.

Hoarders often have tendencies towards perfectionism, indecisiveness, procrastination and difficulties planning. When people have large numbers of animals they cannot adequately care for it is referred to as animal hoarding.

RISK FACTORS

RISK FACTORS

Personality

Many people who have hoarding disorder have a temperament that includes indecisiveness.

RISK FACTORS

Family history

There is a strong association between having a family member who has hoarding disorder and having the disorder yourself.

RISK FACTORS

Stressful life events

Some people develop hoarding disorder after experiencing a stressful life event that they had difficulty coping with, such as the death of a loved one, divorce, eviction or losing possessions in a fire.

RISK FACTORS

Causes

Causes cannot be surmised but genetics, brain functioning and stressful life events are being studied as possible causes.

CO-MORBIDITY

COMORBIDITY

Many people with hoarding disorder also experience other mental health disorders, such as:
Depression
Anxiety disorders
Obsessive-compulsive disorder (OCD)
Attention-deficit/hyperactivity disorder (ADHD)

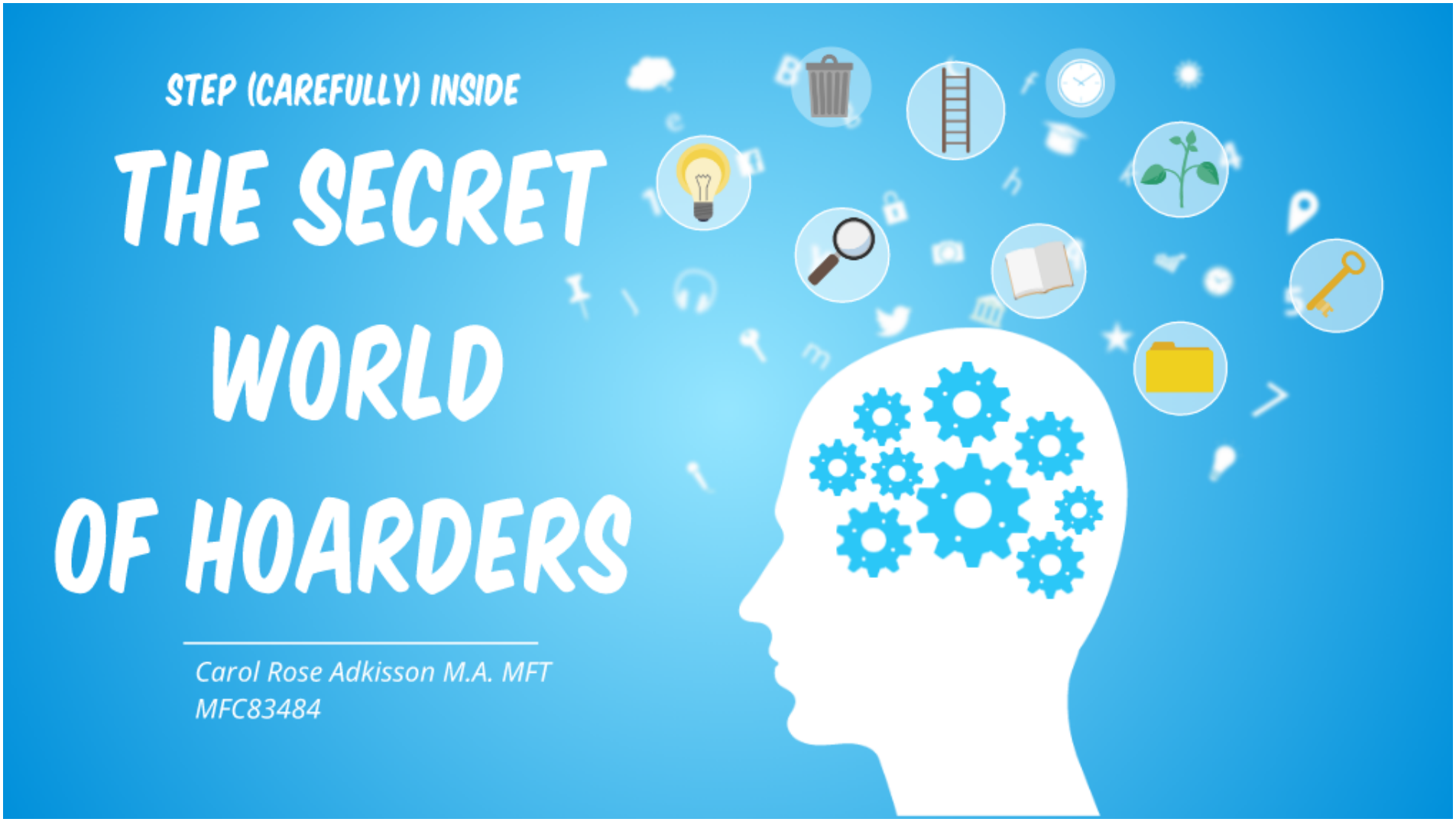
COMPLICATIONS

COMPLICATIONS

Hoarding disorder can cause a variety of complications, including:

- Increased risk of falls
- Injury or being trapped by shifting or falling items
- Family conflicts
- Loneliness and social isolation
- Unsanitary conditions that pose a risk to health
- A fire hazard
- Poor work performance
- Legal issues, such as eviction
- Unattended death risk




STEP (CAREFULLY) INSIDE
THE SECRET WORLD OF HOARDERS
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TREATMENT
APPROACHES
COMMUNITY
MEDICATION
THERAPY
TIPS
ADDICTION?
COPING

COMMUNITY APPROACH

COMMUNITY APPROACH

People with hoarding disorder are not always aware of the seriousness of their problems and only go for treatment when pressured by family or are at risk of being convicted from their home.

Since hoarding can create safety and health risks harm reduction may be a main focus of treatment.

A community approach to hoarding has shown positive results with helping seniors stay in their homes.

This community approach involved nurses, social workers, organizers, and support groups.

MEDICATION

MEDICATION

The normal medication of choice for OCD: serotonin reuptake inhibitors (SSRI's) do not seem to be as effective with hoarders.

However it has been suggested that, as with other resistant anxiety disorders, some kind of 'medication mix' might work better and this would have to be worked out with a doctor.

One charity client with these problems found that an anti-depressant augmented by a major tranquillizer was effective.

PSYCHOTHERAPY

COGNITIVE BEHAVIORAL THERAPY

Group cognitive-behavioral therapy has shown to decrease hoarding symptoms, and symptoms of depression and anxiety (Gilliam et al., 2011).

COGNITIVE BEHAVIORAL THERAPY

Challenge cognitive belief system

Exposure therapy pros and cons

Genogram-family system

COGNITIVE BEHAVIORAL THERAPY

Assess hoarders home

Complete intake and possible trauma events

TIPS FOR THERAPISTS

TIPS FOR THERAPISTS

- Decluttering is important
- It's important to find a good hoarder cleaning expert
- How you to relate to possessions needs to change
- Talking to the hoarding causes an argument, as it would with any addict

Practical Solutions(psorganizing.com) vs. Other Decluttering Choices

ADDICTION?

IS HOARDING AN ADDICTION?

Based on the differences between an addiction and hoarding, it is not technically an addiction.

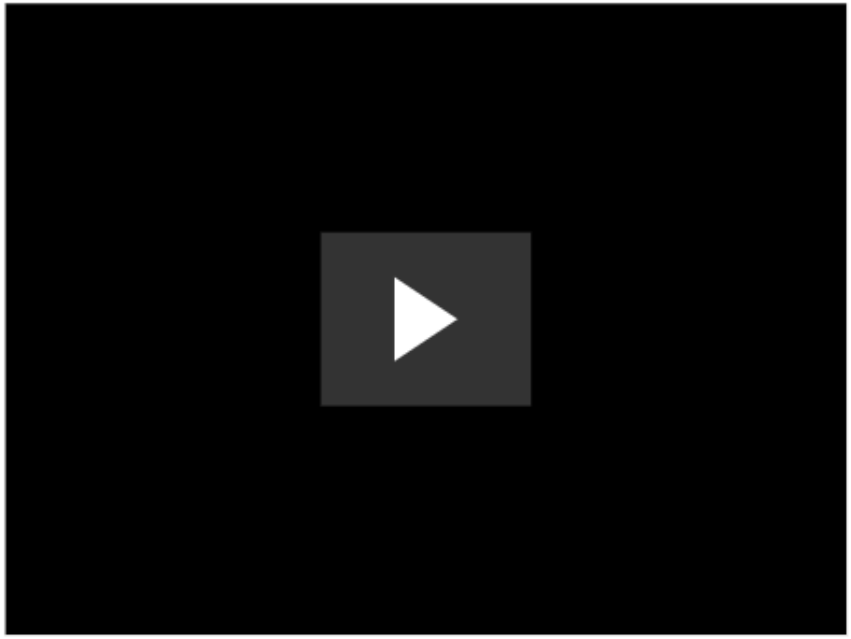
Use 12 step Codependent Techniques to break the enmeshment and enabling with the family members.

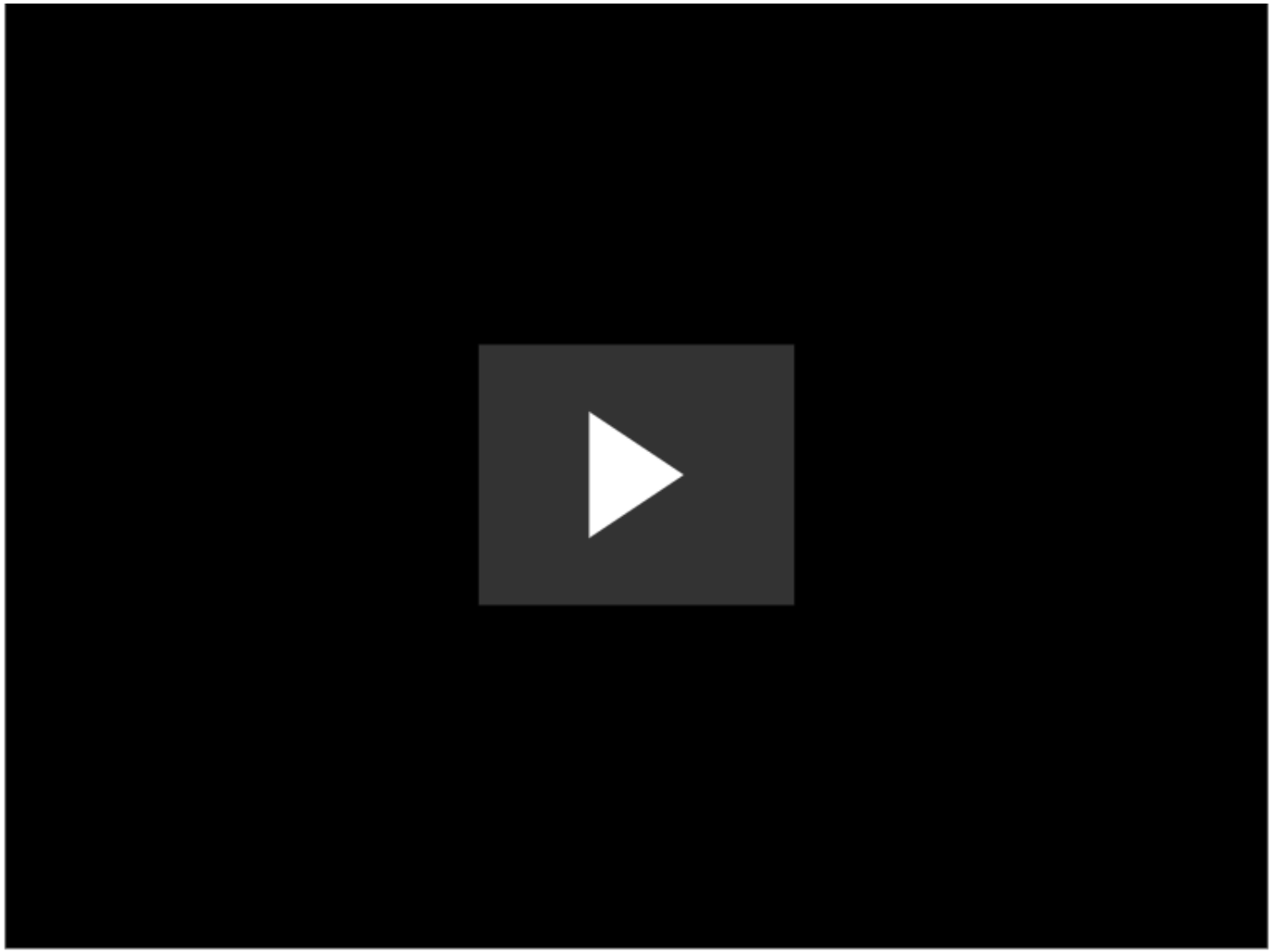


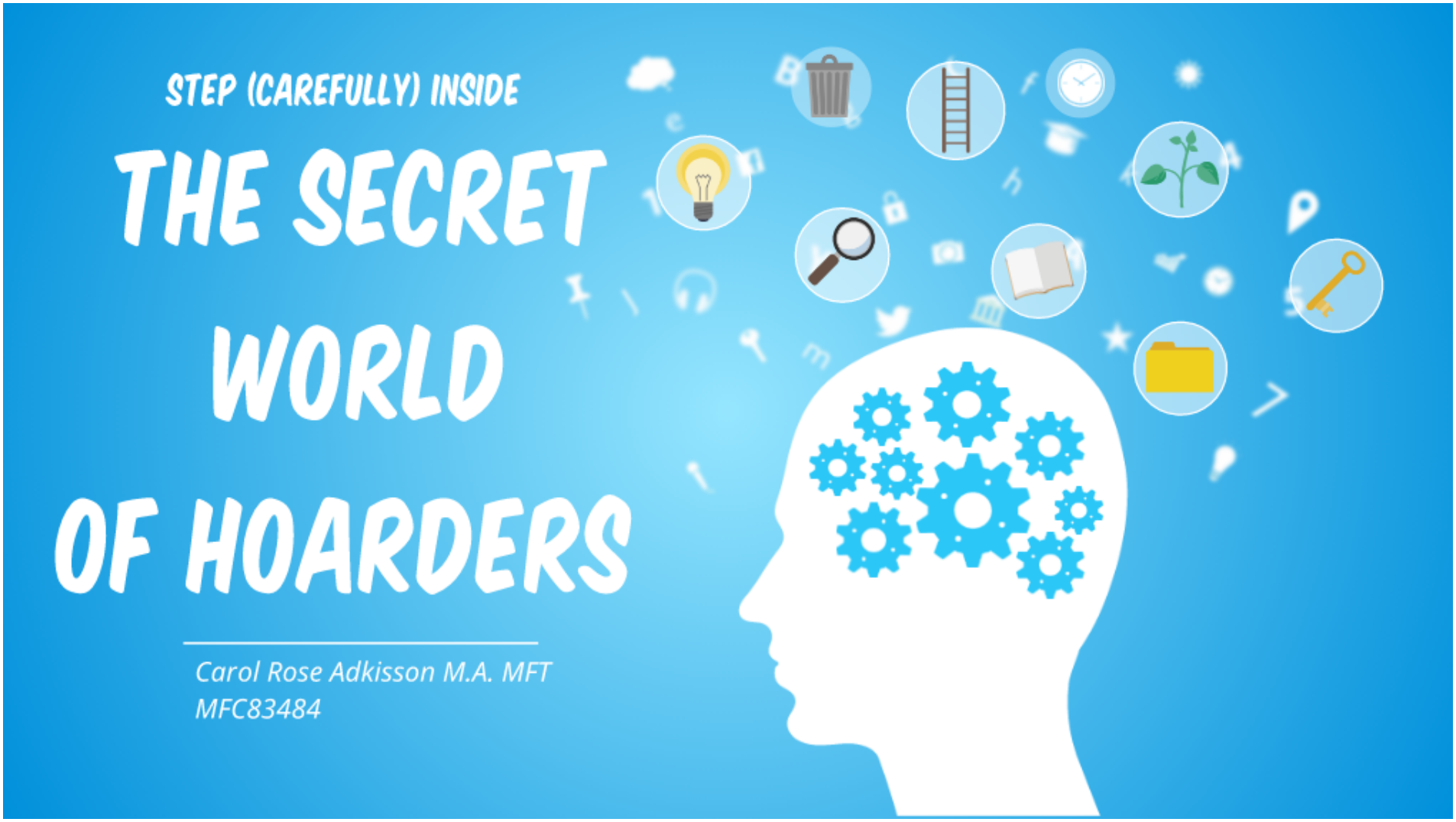
COPING

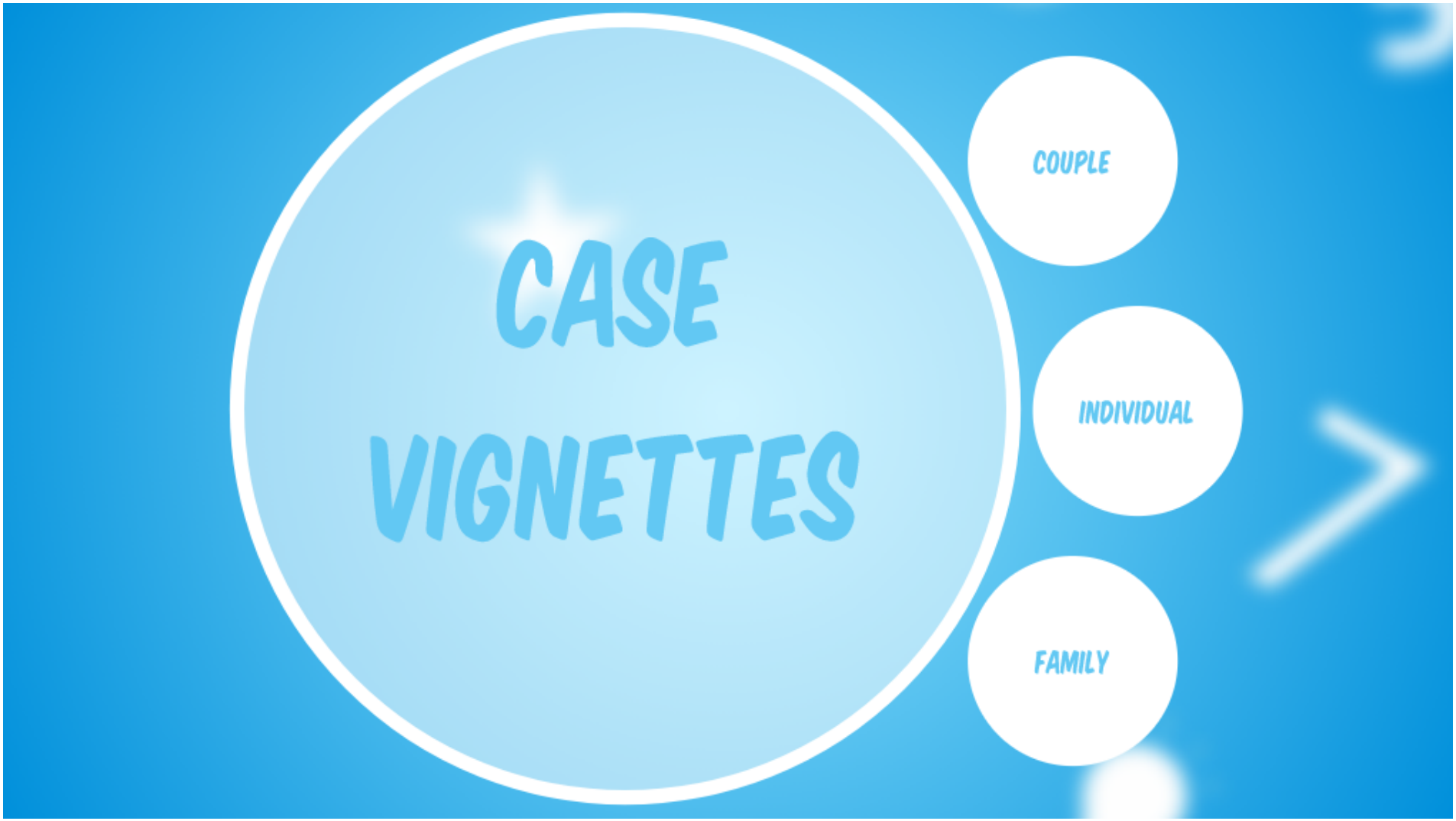
Stripping the hoarder of their coping skill of hoarding

- Anxiety coping skills
- Reality testing
- Actions vs stated goals





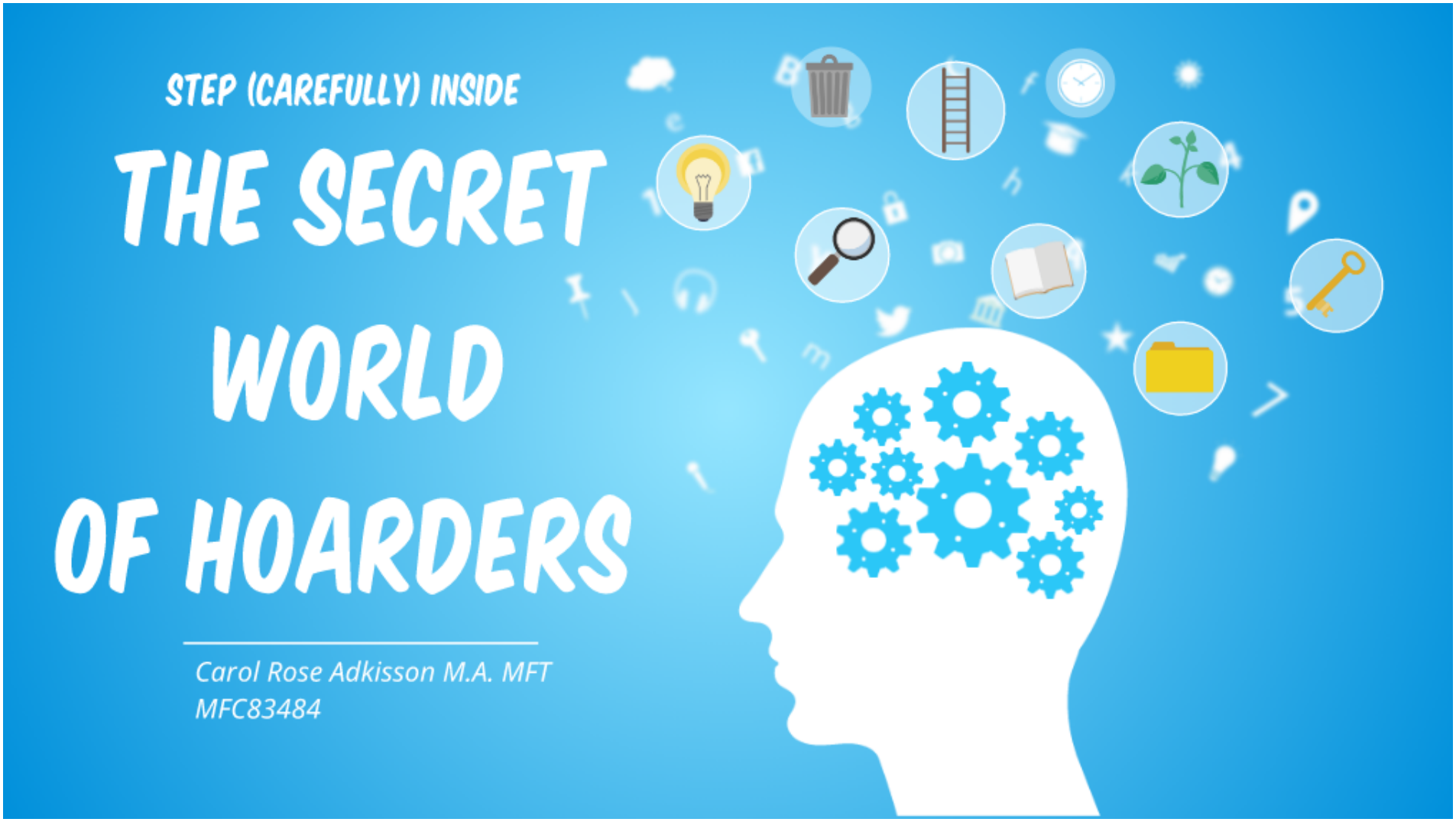

STEP (CAREFULLY) INSIDE
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CASE VIGNETTES
COUPLE
INDIVIDUAL
FAMILY


STORAGE BOXES
Cottonelle


table grapes


TLC


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MORE RESOURCES
COURSE CERTIFICATION
REFERENCES
Q & A
CONTACT

COURSE CERTIFICATION

Online course to certify clinicians that work with hoarding behaviors will be available by the end of the year

SUPPORT FOR HOARDER FAMILY MEMBERS

YOU WANT A RELATIONSHIP WITH YOUR LOVED ONES THAT IS POSITIVE, CARING, AND LOVING. ONE WITHOUT THE GUILT AND THE SHAME. TO BE A FAMILY THAT HONORS EACH OTHER'S EXPERIENCES AND COPES WITH THE HARD TIMES WITHOUT HURTING EACH OTHER OR RELYING ON DYSFUNCTIONAL BEHAVIOR PATTERNS.

When you first noticed your loved one struggling to handle her trauma and anxiety, you promised yourself you'd help her through. You believe in strong family values and feel called to help when the people you love are in need. *But you never thought it would turn into this.* That you wouldn't be able to walk in the front door of the house because there were too many cardboard boxes in the way. Or having to wear a mask when you finally battled your way in, because the smell was just that bad.

Instead, you imagined coming over for tea and being a shoulder to cry on.

HEALING
THROUGH CONNECTION

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9161 Sierra Ave #213
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INLAND EMPIRE: Fontana and surrounding areas. Including Rialto, Rancho Cucamonga, Ontario, Hesperia and Eastvale

Phone: (909) 693-3177
Email: email@caroladkisson.com

Appointment Request

HOARDING COUNSELING

YOU WANT FREEDOM FROM THE PAIN AND WORRY THAT MAKE YOU FEEL PROFOUNDLY DIFFERENT FROM EVERYONE ELSE. TO LIVE A LIFE WITHOUT BEING BURDENED BY CONSTANT WORRY. ONE WHERE YOU DON'T HAVE TO COLLECT OBJECTS TO COPE WITH YOUR ANXIETY OR FEEL MORE IN CONTROL.

Before your hoarding behaviors became out of control, you never saw the harm in holding on to a few extra items. Your collections brought you comfort when you were feeling so anxious you could barely function. The objects you possessed didn't judge you or make you feel less than because living in the world is hard for you. Instead, you felt empowered by the idea of curating the environment around you and surrounding yourself with important things that brought you joy and helped you forget the horrible things you've been through.

You promised yourself, this was just something you did to make life a little easier, a little more fun. You never saw yourself getting carried away collecting objects or becoming so attached that there was no feasible way for you to get rid of any single thing you came in contact with.



Carol Rose Adkisson
Licensed Marriage and Family Therapist
#83484

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Appointment Request

HOARDING CONSULTATION AVAILABLE BY APPOINTMENT

1. Hoarding client
2. Hoarding friends and family
3. Therapeutic consultation

REFERENCES

http://www.compulsive-hoarding.org/Research.html
http://www.compulsive-hoarding.org/First.html
http://www.compulsive-hoarding.org/First.html
http://www.compulsive-hoarding.org/First.html
https://www.theravive.com/therapedia/hoarding-disorder-dsm--5-300.3-(f42)
http://www.anxietycare.org.uk/docs/hoarding.asp
http://www.compulsive-hoarding.org/Families.html

Tolin, D. F., Frost, R. O., & Steketee, G. (2014). Buried in treasures: Help for compulsive acquiring, saving, and hoarding. Oxford: Oxford University Press.

Steketee, G., & Frost, R. O. (2014). Treatment for hoarding disorder. New York, NY: Oxford University Press.

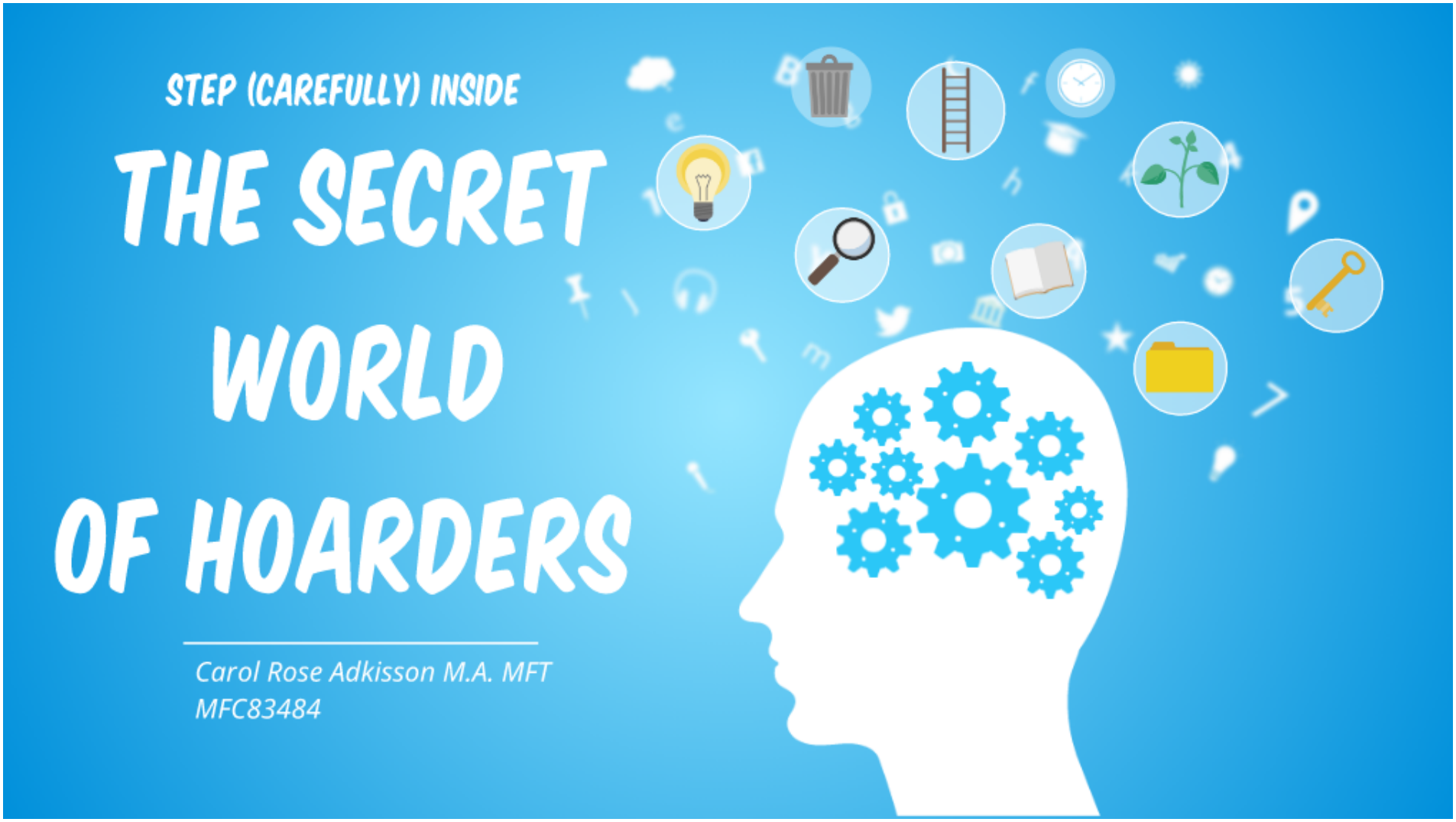
Frost, R. O., & Steketee, G. (2014). The Oxford handbook of hoarding and acquiring. New York: Oxford University Press.

Epidemiology of Hoarding Disorder-Ashley E. Nordsletten, Abraham Reichenberg, Stephani L. Hatch, Lorena Fernandez de la Cruz, Alberto Pertusa, Matthew Hotopf and David Mataix-Cols


Q & A

WANT TO KNOW MORE?

Email me at
email@caroladkisson.com
for further information about upcoming online hoarding certification course.


STEP (CAREFULLY) INSIDE
THE SECRET WORLD OF HOARDERS
Carol Rose Adkisson M.A. MFT
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