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BURIED IN TREASURES: A COMMUNITY BASED MODEL FOR TREATMENT OF HOARDING

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Objectives

- To summarize the core diagnostic features of Hoarding Disorder
- To understand the Buried in Treasures (BIT) treatment model
- To understand the BIT initiative at 423 Yonge St.



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What is Hoarding Disorder?



DSM-V Criteria for Hoarding Disorder

- A. Persistent difficulty discarding or parting with possessions, regardless of their actual value
- B. Difficulty is due to a perceived need to save the items and distress associated with discarding them
- C. Results in accumulation of possessions that congest and clutter living areas and substantially compromises their intended use.
- D. Clinically significant distress/impairment in social, occupational or other important area of functioning (including maintaining a safe environment for self/others)
- E. Not attributable to another medical condition
- F. Not better explained by another mental disorder

Specify if:

- with excessive acquisition
- insight is good/fair, poor, absent/delusional

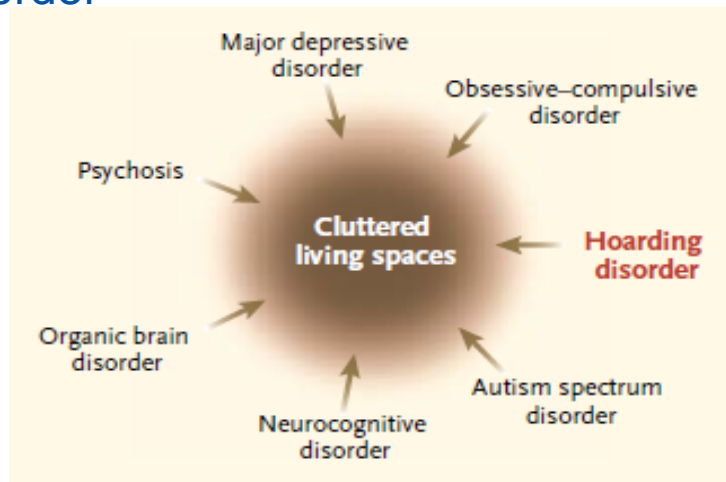
American Psychiatric Association, 2013



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Differential Diagnosis of Hoarding Disorder



Mataix-Cols, *New England Journal of Medicine* 2014



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What do we know about treatments for Hoarding Disorder?



OCD Treatment Guidelines

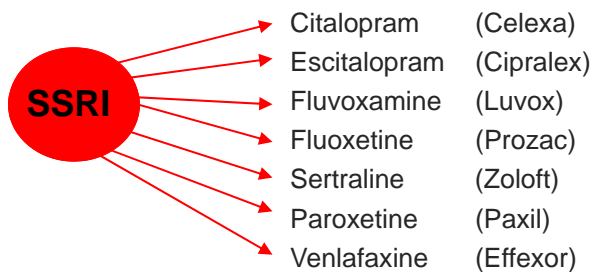
▪ CPA

Hoarding Treatment Guidelines...?

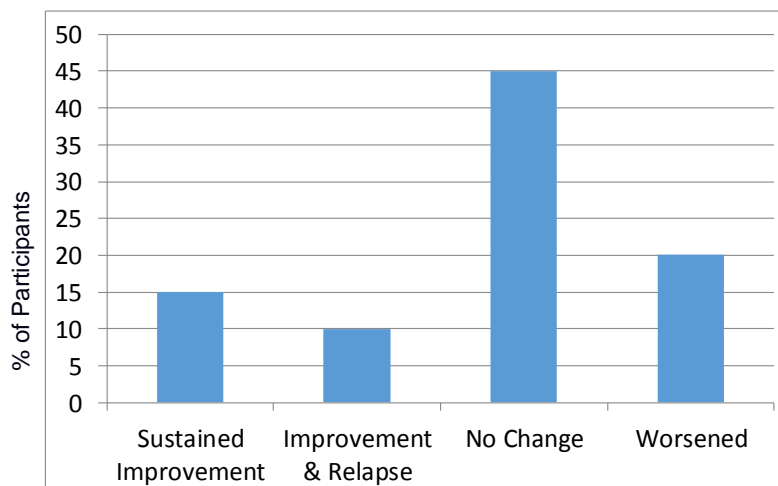
Medications for Hoarding

Selective Serotonin Reuptake Inhibitors

- Generally very well tolerated
- Effective for common comorbidity
- BUT may have limited efficacy for hoarding!



Cleanouts

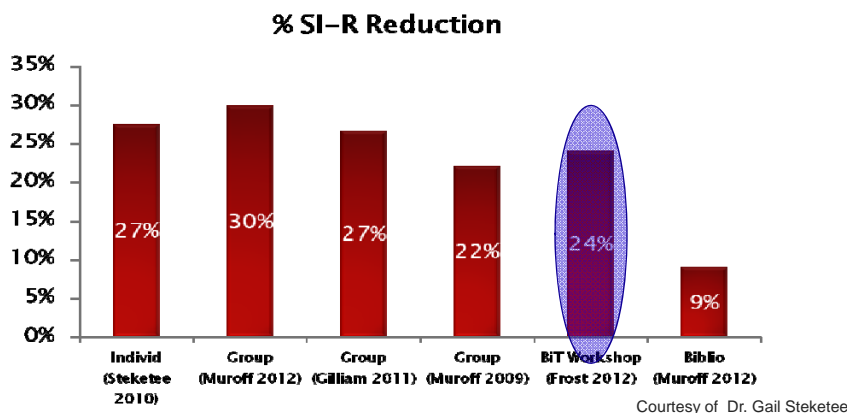


Steketee et al., Health Soc Wk, 2001; 26; 176-184

When Hoarding Compromises Safety....

- Forced “clean out” is the last resort
 - i.e. when poses fire/health hazard (vermin, rodents, toxins, or risk of falls)
 - POOR outcome long-term
- Consider risk management approach if possible
 - Slow gradual steps to establish trust, working relationship
 - Gradual reduction of risk

CBT for Hoarding Disorder: The Good News for Individual, Group and Bibliotherapy



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Treatment of Hoarding

Group CBT protocols developed for hoarding result in

- Over 70% improved/much improved
- Over 25% reduction in severity
- 30% remission rate

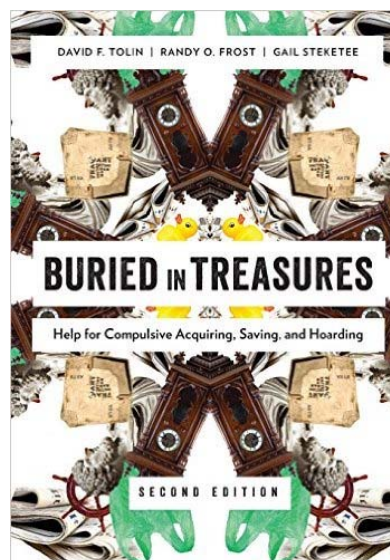
Muroff et al, 2009, 2012, 2015; Gilliam et al, 2011



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Why this plan?



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Buried in Treasures Workshop (Tolin, Frost, Steketee, 2013)

- Builds capacity
 - Peer support model
 - Training of housing staff
- Less client commitment required than more formal out-patient CBT
- Less dependent on clinician availability
- Lower intensity than out-patient CBT
- Tip of phased-care approach



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The Buried in Treasures Model

- A facilitated support group that is highly structured and time-limited
- Consists of 15 sessions spread over 20 weeks
- Each session corresponds to a chapter in the book
- Sessions facilitated by a nonprofessional who may have (or have had) hoarding disorder or a special interest in it
- Activities include discussion of each chapter, exercises from the book dealing with acquisition, discarding, and disorganization, and homework between sessions
- Based on CBT principles

Tolin, Frost, & Steketee
(2014)



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Peer Support

- Someone in the community with lived experience of hoarding
- Willing to share their own experience and encourage others to do the same
- Peer-support training programs, e.g. Mood Disorder Association of Ontario (MDAO)
 - **Peer-support groups often start being clinician-lead**
 - **It can take time to identify someone who is willing and able**
 - **Once there's someone in mind, they can co-lead with a clinician**



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Building blocks...

Meetings

- 2-3 pre-intervention
 - Assess feasibility
 - Identify needs of specific buildings
 - Determine roles and responsibilities
 - Assess progress: identify suitable and interested individuals (10-12 is ideal number!)
 - 1-2 mid-intervention
 - Monitor progress, trouble-shoot barriers
 - Post-intervention
 - Feasibility assessment
- } ← Haven't done this yet!



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...building blocks...

Training

- Haven't done this yet! → 1.5 days (LOFT Staff) + 1 day (TCHC maintenance, superintendent, MSW students)
- Epidemiology and etiology of Hoarding Disorder
 - CBT principles of HD
 - Ethical considerations
 - Assessment
 - Motivational and communication strategies



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...building blocks

Recruitment

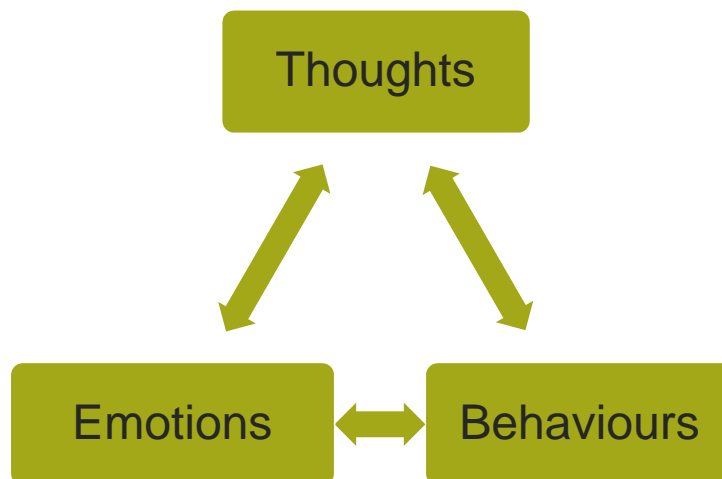
- Identify potential group participants
 - Rating of 4-6 on Clutter Image Rating Scale is ideal; can accommodate those at 7-9
 - Express interest in participation
- Use a non-judgemental communication approach
- Enhance motivation using Motivational Interviewing strategies



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Cognitive Behaviour Therapy



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Specialized CBT for Hoarding

Must target:

1. Acquiring
2. Discarding
3. Clutter

Core components:

- Psychoeducation
- Skills Training
 - Organizing
 - Problem Solving/Decision-making
- Behavioural exposures
 - Discarding
 - Nonacquiring
- Cognitive strategies to address hoarding beliefs (meaning of possessions)

Steketee & Frost, 2007; Muroff et al, 2009

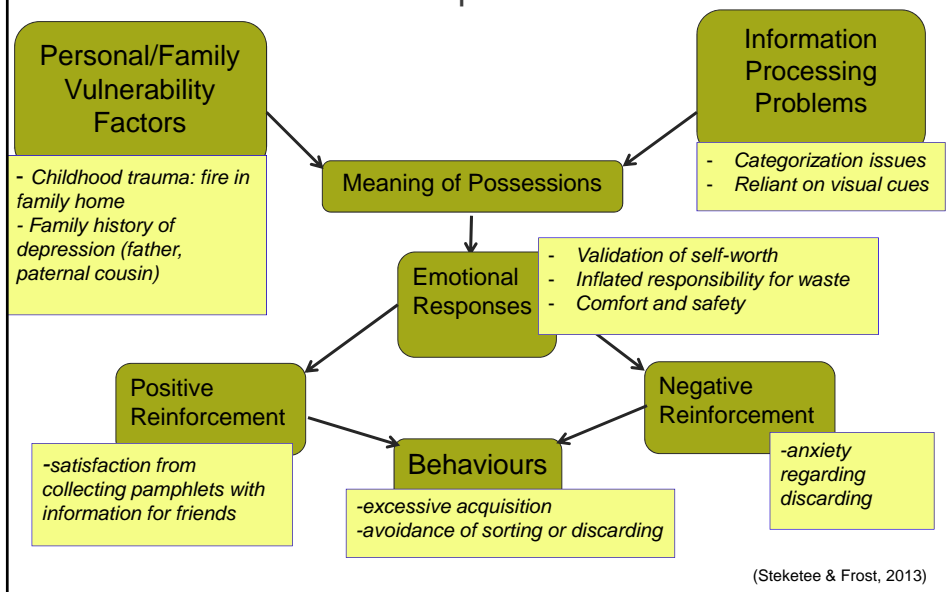


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Conceptual Model of Hoarding

An example: Esther



6 Key Interpersonal Aspects of Hoarding Intervention

1. Manage your reactions
2. Be thoughtful and purposeful in your language use
3. Focus initially on relationship, not the (removal of) stuff
4. Roll with resistance
5. Enhance internal motivation
6. Provide mutual support

(Bratotis, Sorrentino Schmalisch, Steketee, 2012)



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Manage Your Reactions

- Upon entry into a hoarded home, not uncommon to experience feelings of disbelief, dismay, fear & frustration
- Necessary to show professional restraint– non-judgmental attitude
- Remember that the person with lived experience of hoarding may have shame, guilt, embarrassment
- A person who hoards has a mental illness– the manifestation of the illness (clutter) is not the product of laziness, lack of standards or immorality

(Bratotis, Sorrentino Schmalisch, Steketee, 2012)



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Resistance

- Anticipate strong emotions
- Expect motivation and insight to fluctuate
- Attempt to understand the source— fear, worry, past experience
- Avoid persuasion or argument
- Use encouraging language
- Highlight strengths
- Praise change efforts



(Bratiosis, Sorrentino Schmalisch, Steketee, 2012)



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Relationship



- It's an honor to be invited into someone's home
- Understand the person's goals, values, perspective, emotions
- Avoid touching/moving objects without permission
- Avoid making suggestions about what to do with objects
- Focus initially on safety and not on removal of items
- Take your client's perspective

(Bratiosis, Sorrentino Schmalisch, Steketee, 2012)



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APPENDIX



BIT Session Outline

Session	Title
1	Getting to know each other
2	Do I Have A Problem?
3	Meet the Bad Guys
4	The Good Guys!
5	How Did This Happen?
6	Enhancing Motivation
7	Help with Reducing Acquiring
8	Help with Reducing Acquiring part 2
9	Sorting and Discarding: Getting Ready
10	Sorting and Discarding: Let's Go!
11	Sorting and Discarding: Succeeding!
12	Here Come the Bad Guys!
13	Taking On Your Brain
14	Maintaining Success
15	Re-uniting for Success

How to Talk to Someone with Hoarding: Do's and Don'ts

Cristina M. Sorrentino, PhD, LCSW

DON'T

- **Use judgmental language.** Like anyone else, individuals with hoarding will not be receptive to negative comments about the state of their home or their character (e.g., "What a mess!" "What kind of person lives like this?"). Imagine your own response if someone came into your home and spoke in this manner, especially if you already felt ashamed.
- **Use words that devalue or negatively judge possessions.** People who hoard are often aware that others do not view their possessions and homes as they do. They often react strongly to words that reference their possessions negatively, like "trash," "garbage," and "junk."
- **Let your non-verbal expression say what you're thinking.** Individuals with compulsive hoarding are likely to notice non-verbal messages that convey judgment, like frowns or grimaces.
- **Make suggestions about the person's belongings.** Even well-intentioned suggestions about discarding items are usually not well-received by those with hoarding.
- **Try to persuade or argue with the person.** Efforts to persuade individuals to make a change in their home or behavior often have the opposite effect—the person actually talks themselves into keeping the items.
- **Touch the person's belongings without explicit permission.** Those who hoard often have strong feelings and beliefs about their possessions and often find it upsetting when another person touches their things. Anyone visiting the home of someone with hoarding should only touch the person's belongings if they have the person's explicit permission.

Retrieved from www.masshousing.com on Oct7,2015



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How to Talk to Someone with Hoarding: Do's and Don'ts

Cristina M. Sorrentino, PhD, LCSW

DO

- **Imagine yourself in the hoarding client's shoes.** How would you want others to talk to you to help you manage your anger, frustration, resentment, and embarrassment?
- **Match the person's language.** Listen for the individual's manner of referring to his/her possessions (e.g., "my things", "my collections") and use the same language (i.e., "your things", "your collections").
- **Use encouraging language.** In communicating with people who hoard about the consequences of hoarding, use language that reduces defensiveness and increases motivation to solve the problem (e.g., "I see that you have a pathway from your front door to your living room. That's great that you've kept things out of the way so that you don't slip or fall. I can see that you can walk through here pretty well by turning sideways. The thing is that somebody else that might need to come into your home, like a fire fighter or an emergency responder, would have a pretty difficult time getting through here. They have equipment they're usually carrying and fire fighters have protective clothes that are bulky. It's important to have a pathway that is wide enough so that they could get through to help you or anyone else who needed it. In fact, the safety law states...so this is one important change that has to be made in your home.")
- **Highlight strengths.** All people have strengths, positive aspects of themselves, their behavior, or even their homes. A visitor's ability to notice these strengths helps forge a good relationship and paves the way for resolving the hoarding problem (e.g., "I see that you can easily access your bathroom sink and shower," "What a beautiful painting!", "I can see how much you care about your cat.")
- **Focus the intervention initially on safety and organization of possessions and later work on discarding.** Discussion of the fate of the person's possessions will be necessary at some point, but it is preferable for this discussion to follow work on safety and organization.

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Link to Buried in Treasures facilitator manual:

- <https://hoarding.iocdf.org/>
- http://208.88.128.33/hoarding/self_help.aspx

