Exploring the Onset, Expression, and Effects of Hoarding and Cluttering Behaviors in Older Adults: A summary of the research findings

Purpose of the Study

This qualitative study was conducted in order to gain a better understanding of hoarding behaviors from the perspective of older adults who are living in the community with these behaviors.

Overview of Participant Characteristics

Number and gender of participants	22 participants; 16 women and 6 men
Age	65 to 91, average age 74
Ethnicity	15 Caucasian, 3 African American, 1 Hispanic, 1 from India, 1
	Japanese-American, 1 Chinese-American
Marital Status	5 currently married, 9 divorced, 3 widowed, 5 never married
Employment Status	3 worked full-time, 1 worked part-time, 15 were retired, 3 were
	primarily homemakers
Home Ownership/	10 owned home and 12 rented home
Duration	9 had lived in their homes fewer than 10 years, 12 had lived in their
	homes for more than 20 years

Finding #1, The Process of Accumulation

All participants described a process of accumulation that included three phases: <u>acquiring</u>, <u>maintaining</u>, <u>and discarding items</u>. In the <u>acquiring phase</u>, participants described actively seeking out and bringing home items, such as buying many items at once to take advantage of a sale; or passively acquiring items such as keeping magazines, newspapers and catalogs that arrived in the mail.

In the <u>maintaining phase</u>, participants described their reasons for keeping items, which included the memories the items brought back of certain places visited or particular times in their lives, the utility of the item and how it could be useful to them in the future, or a worry that if they discarded items they would not be able to replace it in the future, either because of the cost or because the item was too unique.

In this phase, participants described strategies they used to conduct daily tasks at home. For example, some participants used the microwave to prepare meals because their stove and oven were inaccessible due to accumulation of belongings, while others slept on a reclining chair because their bed was covered with clothing. Other participants spent a considerable amount of time each day moving items from one area to another to make more usable space, such as moving items from a table to another location to make room to sit and eat a meal. While several

participants had attempted to organize, sort, or discard items, they often did not feel like they made very much progress regardless of how much time they spent on the task. Trying to organize or discard belongings frequently left participants feeling overwhelmed and frustrated at how difficult it was to complete these types of tasks. As one participant put it, she felt she lived in a "constipated house" where items came in, but had difficulty going out.

Participants described ways living in crowded and/or cluttered homes affected their day to day living. In addition to the altered sleeping and cooking arrangements already mentioned, several participants described how their home environment contributed to feelings of anxiety, depression and isolation. Participants generally gave very few people permission to enter their homes, and while some participants didn't mind socializing with friends and family outside of the home, a number of participants wished they could invite others over and felt isolated and lonely as a result.

Several participants expressed feeling depressed, sad, or frustrated that they were not able to make more order in their home despite their wish to live in a less cluttered home. Many participants said they would like their home to be a place of peace and comfort, but instead they felt like there were always tasks to be done and the constant reminder of projects left undone made them feel anxious and unable to relax.

In the <u>discarding phase</u>, participants described both barriers to discarding and reasons that motivated them to discard items. Barriers included the logistics of finding the right place to discard or donate various items, difficulty making decisions about what to dispose of and what to keep, and the physical difficulty of removing things from the home. The physical challenge of discarding items was particularly great for those who no longer drove or had health or mobility limitations. As another participant put it, "I don't have a hoarding problem, I have a disposal problem".

Several participants said they felt more motivated to discard items now that they were growing older. Some wanted to discard items while they were still in good health and physically able to take on the tasks, while others wanted to be sure they were the ones to decide what to keep and discard, rather than leaving the decisions to others. Some participants were motivated to discard things so that they could have more space in their home to do what they truly enjoyed during their "retirement" years. These motivations were not shared by everyone, however. A few participants felt relief that they had assigned trusted friends to decide what should be done with their belongings after they had died.

Finding #2, Two Patterns of Hoarding Behaviors

An unexpected finding from this study was that participants' behaviors generally fell into two patterns. I have called one of these patterns the "Impulsive Acquirer", and it is characterized by active and impulsive acquisition of items. Participants in this group described acquiring items as a highly pleasurable activity and were often unable to resist bringing home free items or items

that could be bought at a great discount. This type of acquisition resulted in very large numbers of items in the home that significantly reduced the participant's living space. Participants who fit this pattern found ways to work around the obstacles in their homes and generally were not as troubled or frustrated by the state of their home compared to other participants. These individuals also did not report feeling as lonely or isolated when compared with other participants.

The second pattern of behavior I have called the "Worried Keeper". In contrast to those in the "impulsive acquirer" group, these participants did not bring home large numbers of items, but were best characterized by the worry and indecision they felt when deciding whether to discard an item or not. These participants tended to keep items as a safeguard against future need and to help them feel more secure and self-sufficient. While their homes generally had more uncluttered living space compared to those in the "impulsive acquirer" group, they experienced more isolation, anxiety, and frustration with their living space as compared to those in the other group. Individuals in this group also spent considerably more time trying to sort and organize their belongings than those in the "impulsive acquirer" group.

While some participants fit clearly into one pattern of behavior or another, some described aspects of both of these types. These findings underscore the complexity of human behaviors and the importance of understanding what factors are the most significant for each individual. One interesting aspect of this finding was that most of the men fit into the "impulsive acquirer" group, possibly indicating a difference in behaviors related to gender. The table below outlines the key differences between these two patterns of behavior:

Impulsive Acquirers	Worried Keepers
9 Participants (5 of 6 men)	13 Participants (1 man)
Acquire a large number of things actively, impulsively, for the thrill of "gaming the system"	Acquire some things actively, but also a substantial amount passively
Keep items because they reflect personal interests, past experience	Keep items as a safeguard against worry, potential future need
Adapt to the crowded environment rather than try to change environment	Have tried multiple strategies to modify environment
Cite logistical barriers to discarding things	Cite difficulty with decision making and declining health/mobility limitations as barriers to discarding
Self-report symptoms of attention deficits, including impulsivity	Self-report symptoms of anxiety or depressed mood
Report that hoarding behaviors interfere with normal activities of daily living (sleeping, bathing, preparing food)	Report several negative effects of hoarding behaviors on daily life including: interference with normal activities of daily living, increased isolation, and negative effects on mental health (such as increased feelings of anxiety or depression)

Finding #3, Dynamic between Hoarding Behaviors and the Aging Process

All of the participants in this study reported having collecting behaviors or difficulties discarding items for many years. However, as participants grew older, they identified ways that these behaviors became more problematic for them. Three age-related factors that interacted with their hoarding behaviors were described: health related changes, changes in social context, and home changes.

Several participants had experienced health issues that decreased their strength, stamina, or mobility. These health changes made living in crowded, cluttered environments even more challenging than when they were younger or in better health.

Many participants described how social changes, such as becoming divorced or widowed or retiring from work, had negatively impacted their ability to manage daily activities at home. For example, some participants said they no longer felt the need to keep things in order after becoming widowed. In several cases it had been a family member who kept the amount of clutter in the home in check and without that person living at home, the clutter accumulated substantially. Another example of a social change that impacted their home environments was retiring from work. Several participants reported that when they retired they brought home boxes of papers, files, and other items from their workplace, which they thought they may use again one day. Some of these participants recognized they no longer need these items, but had a hard time discarding them.

Those participants who had lived in their home for decades described how belongings accumulated slowly over time, an experience that is familiar to almost anyone who lives in one place for many years. However, nearly half of the participants in this study had moved within the past 10 years and they described how moving contributed to their homes becoming more crowded and cluttered. Most of these participants were unable to sort through and cull their belongings prior to the move for various reasons, including lack of time and difficulty making decisions. In most cases items were packed by others and the participants had very little help unpacking items and organizing belongings in their new homes. For many, this lead to items remaining stacked in boxes, unpacked or only partially unpacked, for years. These boxes not only took up space, making their homes more crowded, but also made belongings inaccessible so that participants bought duplicate items to replace those things that were still packed.

Conclusion and Acknowledgements

Because of the 22 individuals who volunteered to participate in this study we have new information about what it is like to live with hoarding behaviors. I am grateful for their willingness to share their stories with me. By identifying factors that are important and unique to older adults, targeted interventions to promote quality of life and minimize the risk for harm can be developed.

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For further information about this study and suggestions for the practical application of the findings, please contact the study's principle investigator, Monika Eckfield, RN, PhD, by email at monika.eckfield@ucsf.edu.