Making Room for Better Multiagency Approaches to Problematic Hoarding
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Session Agenda

• Understanding problematic hoarding as a psychiatric condition.
• Identifying frustrations commonly voiced by EHOs regarding ineffective multiagency working.
• Why ‘blitz cleans’ are a monumental waste of money.
• What the Care Act 2014 means for EHOs.
• Case Study
• Lobbying locally for coherent, multiagency approaches.

Defining Hoarding Disorder
Characterised by:
- Compulsive acquisition of possessions
- Inability to discard possessions
- Accumulation of substantial clutter of living space
- Living spaces are sometimes no longer be used for intended purpose (Frost & Hartle, 1996)
- An issue of clinical concern when hoarding behaviour causes distress or functional impairment (Steketee et al., 2000)
- Chronic, entrenched problem (Frost et al., 2009)
- Unsatisfactory living conditions (Frost et al., 2007)
- Impaired ability to undertake daily living activities (Jackson et al., 2005)
- Substantially increased risk of fire (Jackson & Frost, 2005)

People can live in cluttered, unsanitary properties without having hoarding disorder.

What causes someone to hoard?

• Learned behaviour from parents
• Evidence of possible genetic component? (Iervolino et al. 2009)
• Often triggered by loss or significant trauma (Spillane, 2014)
• Disproportionately represented in people with co-morbid issues of depression, anxiety and obsessive-compulsive disorder. (Frost et al., 2011)
• More prevalent in older adults. (Grisham et al., 2005)
• Perfectionist tendencies. (Grisham et al., 2009)
• Some evidence of executive dysfunction and frontal lobe impairment. (e.g. Samara, 2004)

Reasons for saving?
Ayers (2013)

• Feeling uncomfortable about discarding (the person may not know why).
• Seeing beauty in everything and wanting to keep it.
• Disposing of something considered wasteful (probably most common reason).
• Object has emotional significance (e.g. a newspaper from a time the person was happier)
• Fear of losing important information (especially paper, newspapers & magazines).

A distinct mental health condition

• Recently classified as a diagnosable mental health disorder in its own right in the most recent version of the Diagnostic & Statistical Manual for Mental Disorders (American Psychological Association, 2013).
• HD should no longer be seen as a lifestyle choice. It is a diagnosable psychiatric condition with its own treatment pathway (Singh, 2015).
• Yet nationally, NHS Mental Health Trusts tend to prefer using the World Health Organisation’s competing International Classification of Diseases (ICD).
• Anticipated that ICD11 will follow suit and recognise Hoarding Disorder as a mental health condition in 2018 (Fontenelle & Grant, 2014).
An expensive problem for Local Authorities

- Epidemiological studies estimate prevalence rates of clinically significant hoarding being between 2% and 5% of the general population (Semmel et al. 2008; Muller et al., 2009; Motex-Cho, 2011).
- Average costs per case estimated at between £35,000 and £45,000. (National Housing Federation, 2015)
- Current local authority interventions nevertheless remarkably ineffective. (Chartered Institute for Environmental Health, 2012)
- A growing problem in Britain. (National Housing Federation, 2015)

Hoarding and the Care Act 2014

Gives problematic hoarding some kind of a statutory footing for the first time.

- Self-neglect now potentially falls within the remit of adult safeguarding, with problematic hoarding cited as a specific example of self-neglect.
- New Pan-London Safeguarding Adults Policy & Procedures further clarify that problematic hoarding can now be considered as a safeguarding matter.
- Eligibility for LA social care & support arguably explicit in the Care Act, as severe hoarding can often result in inability to undertake outcomes stipulated in the act.
  1. Being able to make use of the adult’s home safely.
  2. Maintaining a habitable home environment.
  3. Ability to maintain personal hygiene

Safeguarding Enquiries

Section 42 of Care Act 2014: Local authority adult social services now have a statutory obligation to make relevant safeguarding enquiries to decide whether any action should be taken when a person neglects or, is at risk of, abuse or neglect

(a) has needs for care and support (whether or not the authority is meeting any of those needs)
(b) is experiencing, or is at risk of, abuse or neglect
(c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it

Arguably increases the profile of problematic hoarding. People sit up and take notice of safeguarding issues.

Requires social services to coordinate a multiagency response seeking input from appropriate professionals (EHOs have an obvious role here).

An Environmental Health Perspective


Legal obligation for EHOs to act… but actions often felt to be uninformed, inappropriate and “doomed to failure”

Clinical and statutory interventions often resisted by person who hoards and success rates frequently poor.

Strongly advocates a strong, multiagency response to hoarding cases. However, stated a strong belief amongst EHOs that efficacy of both social workers and mental health professionals as being very low/completely absent. However, EHOs feel that such multiagency input deemed essential in achieving long-term, positive outcomes.

Clouds End CIC

- A Community Interest Company (CIC).
- Provides a de-cluttering service with a difference.
- Focuses on “human de-cluttering” rather than enforced “blitz cleaning”.
- Service user actively participates in process and retains a degree of control.
- Service user participation reduces their anxieties and trauma. Less chance of immediate relapse once space cleared.
- Provision of a therapeutically-inflected approach to the de-cluttering process.
- Helps the person who hoards to better understand their hoarding behaviour. Uses cognitive behavioural techniques such as setting ‘homework’ tasks between visits.

Endorses concept of Hoarding Advisory Panels (HAPS)
- Consists of representatives from various agencies meeting regularly to discuss cases referred to panel.
- Individual practitioners from a range of disciplines can present cases to panel when they become ‘stuck’ on a case.
- HAPS have role in facilitating a coordinated, joint approach to hoarding cases.
- Bringing issues to Haringey HAP enables sharing of risk and accountability across partnership.

London Borough of Merton Hoarding Policy (2014)

Nottinghamshire Hoarding Policy (2015)

Pan London Hoarding Task Force

Multiagency forum consisting of multiple stakeholders from across London.
Promotion of evidence-based, cost-effective interventions from across London.
Enables sharing of ideas and best practice between voluntary and charity sectors from all over the country.
Grassroots organisation....they love to see new faces.

Web Resources

- www.hoardinguk.org
- www.ocdaction.org.uk
- www.helpforhoarders.co.uk/resources/

Self Help Resources based on empirical research
References


