

Distinguishing Between Clutter and Hoarding

Clutter is anything we don't need, want, or use that takes our time, energy or space, and destroys our serenity. Cluttering can become so substantial and severe that it compromises the safety of a living space, and it can sometimes be connected to serious disorders, such as hoarding. Hoarding Disorder is a mental health diagnosis characterized by the persistent difficulty of letting go of possessions, household items, or animals due to a strong emotional attachment or perceived need.

Potential Contributors to Cluttering

- No single physical or mental health condition causes cluttering; it can arise in many scenarios.
- No two scenarios are identical; consider the unique circumstances:
 - Thought processes including: perceiving items as valuable or a source of security, fear of loss, perfectionism, indecisiveness, etc.
 - Housing unit not designed for long-term tenancy
 - Family history, cognitive impairment (e.g. dementia), learning disabilities, mobility challenges
 - Depression, anxiety, PTSD, ADHD, OCD, psychosis, substance use

How Do I Help?

HFH promotes a **harm reduction approach to decluttering**, with a focus on making homes safe, healthy, and comfortable. Rather than trying to remove as much clutter as possible, take steps to promote participant safety in their living space.

- Meet in the home regularly to build rapport and assess immediate safety risks.
- Be trauma-informed, respectful, sympathetic, and kind. Use soft words.
- Maintain a calm, factual, but caring and supportive approach.
- Respect the participant's right to make decisions for their home, including living with some risk, and never throw away items without their permission.
- Start with the least intrusive intervention and anticipate slow, incremental progress. Offer breaks for stress relief when decluttering.
- Understand the participant's unique qualities, experiences, and strengths, and recognize them as the key to moving toward progress.
- When care planning together, be very specific. "Create a walkway to the toilet" is more effective than "clean the bathroom."
- With participant approval, seek to involve more care team members.
- Remember, some of us are comfortable having much more clutter than others.

Risks



Fire / Hazards

- Too much paper, batteries, chemicals, etc.
- Clutter blocking stovetops, heaters, electrical outlets, smoke detectors, fire extinguishers, etc.
- Insufficient space to escape during emergencies
- Interference with ADLs



Contagion / Disease

- Too many animals
- Interrupted access to utilities, impacting cleanliness and hygiene
- Unsanitary conditions including animal feces, spoiled food, insect/rodent infestation, excess dust allergens, etc.

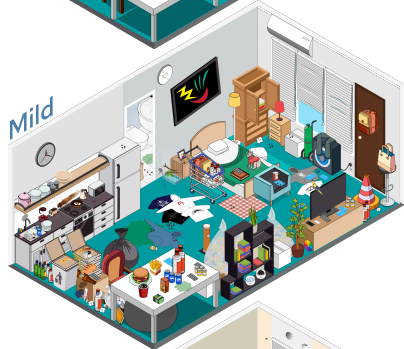


Isolation / Eviction

- Conflicts with neighbors
- Splintered relationships
- Potential loss of child supervision rights
- Feeling ashamed by clutter
- Lease violations; eviction

ICMS Action Steps

Updating the Care Plan to support decluttering involves ongoing in-home meetings to build rapport, assessing immediate danger, helping in one small space at a time, and connection to community supports that enhance safety and comfort.



Housing Retention Visit

Meet participant in-person at their home to build rapport, understand their unique situation, promote collaboration, and support needs.

Assess Clutter Level and Safety Risks

- FIRE RISKS
- DISEASE VECTORS
- HYGIENE ISSUES
- MOBILITY CONSTRAINTS
- LEASE VIOLATIONS
- ADLS INTERFERENCE



EMERGENCY RESPONSE

Take immediate action for emergencies (fire, medical, structural) by calling 911, ensuring participant safety.



ASSISTANCE FUNDS

Participant Assistance Funds may be necessary for some decluttering supplies and services.

Action Step Options for Any Clutter Level

- Case Conference with Clinical Supervisor
- Connect to Caregiving
- Discard Expired Food
- Try Clutterers Anonymous
- Take Before and After Photos
- Pest Control
- Obtain Storage Bins
- Clear Pathway to Kitchen Sink
- Clear Off Stove Top
- Create Space to Store Medication
- Clear Pathway to Window
- Spay/Neuter Pets
- Adopt Out Some Pets
- Make Space to Sleep on Bed
- Make Space to Open Front Door
- Clear Air Vent Obstruction
- Clear Smoke Detector Obstruction
- Make Electrical Outlet Accessible
- Clear Path to Toilet
- Clear Path to Shower
- Coordinate with Property Management
- Offer Referral to SUD Treatment
- Submit PH² Referral

IF EXTREME MULTIPLE HAZARDS; UNLIVABLE CONDITIONS

- File an APS Report
- Unit Clear Out
- Refer to Higher Level of Care

Update Care Plan Quarterly

Monitor progress and adjust strategies based on participant feedback and changes in clutter level and safety.