HOARDING & SQUALOR

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- SQUALOR AND COMPULSIVE HOARDING HAS RECEIVED INCREASED ATTENTION.
- THE COMPLEXITIES WITHIN EACH CASE CAN BE VARYING/ DIFFERENT.
- THE WAY TO ACHIEVE SUCCESSFUL SUSTAINABLE OUTCOMES.



- HAVING A NON- JUDGEMENTAL APPROACH AND ATTITUDE IS IMPORTANT
- THIS WILL TRY YOUR PATIENCE HOWEVER TRY TO LEARN ABOUT THE BEHAVIOURS THAN THE MESS, RUBBISH YOU MAY SEE.



HOARDING AND CLUTTERING INVOLVES EXCESSIVE COLLECTION OF ITEMS (WHICH APPEAR TO HAVE LITTLE OR NO VALUE) AND A FAILURE TO REMOVE OR DISCARD THEM. THIS OFTEN MEANS THAT THE ENVIRONMENT IN WHICH THEY ARE BEING KEPT BECOMES SO CLUTTERED THAT IT CAN NO LONGER BE USED FOR THE PURPOSE FOR WHICH IT WAS DESIGNED. THIS WILL CONSEQUENTLY IMPAIR THE BASIC LIVING ACTIVITIES (SUCH AS COOKING, CLEANING, SLEEPING, SHOWERING AND MOVING) OF THE OCCUPANT. (CATHOLIC COMMUNITY SERVICES NSW/ACT SQUALOR AND HOARDING TOOLKIT)



• SQUALOR / SEVERE DOMESTIC SQUALOR REFERS TO HOUSEHOLDS THAT ARE EXTREMELY CLUTTERED, IN A FILTHY CONDITION, AND WHERE THE ACCUMULATION OF ITEMS SUCH AS PERSONAL POSSESSIONS, RUBBISH, EXCREMENT AND DECOMPOSING FOOD CREATES AN ENVIRONMENT THAT JEOPARDISES THE HEALTH AND WELLBEING OF THE OCCUPANT(S). FURTHERMORE, 'NORMAL' HOUSEHOLD ACTIVITIES SUCH AS COOKING BATHING AND SLEEPING ARE IMPEDED OR NOT POSSIBLE. IN EXTREME CASES, SEVERE DOMESTIC SQUALOR MAY ALSO HAVE AN IMPACT ON NEIGHBOURS BECAUSE THE PROPERTY MAY BE A FIRE HAZARD, EMIT A FOUL ODOUR AND HARBOUR VERMIN.' (GOVERNMENT OF SOUTH AUSTRALIA, SA HEALTH, 2013, P.8).



SELF-NEGLECT

• INVOLVES BEHAVIOURS IN WHICH AN INDIVIDUAL DOES NOT (EITHER INTENTIONALLY OR NON-INTENTIONALLY) APPROPRIATELY ADDRESS THEIR BASIC PERSONAL NEEDS. ISSUES OF PERSONAL HYGIENE, APPROPRIATE CLOTHING, FEEDING, BATHING AND MEDICAL NEEDS OFTEN GO UNATTENDED LEADING TO AN EXACERBATION OF MEDICAL ISSUES AS WELL AS SOCIAL EXCLUSION AND ISOLATION. IT IS IMPORTANT TO NOTE THAT SELF-NEGLECT HAS SERIOUS IMPLICATIONS FOR BOTH THE INDIVIDUAL AND THE COMMUNITY. (CATHOLIC COMMUNITY SERVICES NSW/ACT; WWW.CATHOLICCOMMUNITYSERVICES.COM.AU; SQUALOR AND HOARDING TOOLKIT)

HOW DO COMPULSIVE HOARDING BEHAVIOURS DEVELOP

- COMPULSIVE HOARDING BEHAVIOURS DEVELOP THROUGH COMPLEX COGNITIVE PROCESSES
 AND AVOIDANCE BEHAVIOURS THAT DRIVE THE DEVELOPMENT OF COMPULSIVE HOARDING.
 THESE COMPLEX COGNITIVE PROCESSES INCLUDE BUT ARE NOT LIMITED TO COMPULSIVE
 ACQUISITION, INCAPACITY TO DISCARD ITEMS AND POOR ORGANISATIONAL SKILLS.
- CLEANLINESS VARIES BETWEEN HOMES AND BETWEEN INDIVIDUALS AND CAN BE PRESUMED TO BE INFLUENCED BY MULTIPLE FACTORS, INCLUDING UPBRINGING, PEER AND FAMILY EXPECTATIONS, LIVING ARRANGEMENTS, SOCIAL AND FINANCIAL CIRCUMSTANCES, CULTURAL BACKGROUND AND SURROUNDINGS.

- CHARACTERISTICS AND BEHAVIOURS OF HOARDING AND/OR SQUALOR
- HOARDING AND SQUALOR IS A COMPLEX SET OF CONDITIONS AND MAY BE IDENTIFIABLE BY SOME OR ALL OF THE FOLLOWING BEHAVIOURS AND CONDITIONS:
- HOME ENVIRONMENTS AND LIVING CONDITIONS ARE FILTHY, UNSANITARY AND COULD BE CLASSIFIED BY SOME AS UNINHABITABLE
- LARGE VOLUMES OF ITEMS ARE HOARDED WHICH IMPAIRS THE FUNCTIONALITY OF THE HOME AND LIVING AREAS. RESIDENTS OF THE HOME ARE THEREFORE UNABLE TO UNDERTAKE EVERYDAY LIVING TASKS SUCH AS BATHING, COOKING, SLEEPING AND CLEANING

- NEGLECTING OF HOUSEHOLD MAINTENANCE BOTH INTERNAL AND EXTERNAL (INCLUDING LACK OF FUNCTIONING UTILITIES)
- UTILITIES ARE NOT FUNCTIONING
- FAILURE TO ATTEND TO INDOOR AND OUTDOOR MAINTENANCE
- UNCONVENTIONAL BEHAVIOURS AND LIFESTYLES
- POOR PERSONAL HYGIENE AND INSUFFICIENT NUTRITION DUE TO A LACK OF SELF-CARE

- SIGNIFICANTLY POOR PERSONAL APPEARANCE. FOR EXAMPLE AN INDIVIDUAL MAY APPEAR
 TO HAVE NOT CHANGED THEIR CLOTHES OR BATHED FOR SUBSTANTIAL PERIODS OF TIME
 INCLUDING WEEKS, MONTHS AND EVEN YEARS
- SOCIAL MARGINALISATION AND ISOLATION, UNWILLINGNESS TO SOCIALISE WITH OTHERS
- MISSING MEDICATION DOSES, NOT ATTENDING MEDICAL APPOINTMENTS
- INABILITY TO SUSTAIN SECURE HOUSING
- THE BEHAVIOURS ASSOCIATED WITH HOARDING AND SQUALOR MAY STEM FROM ONE OR MORE OF THE FOLLOWING FACTORS/ EXPERIENCES:

- TRAUMAS STEMMING FROM; VIOLENCE, CHILDHOOD ABUSE, WAR, PHYSICAL AND EMOTIONAL ABUSE, NEGLECT AND MORE
- PREVIOUS AND CURRENT SUBSTANCE ABUSE FOR EXAMPLE ALCOHOL, ILLICIT DRUGS AND PRESCRIPTIONS MEDICATION
- MENTAL HEALTH DISORDERS CAN CAUSE DAMAGE TO THE FRONTAL LOBE OF THE BRAIN
 IMPAIRING CONCENTRATION, PROBLEM SOLVING, SOCIALISATION AND IMPAIRED RISK TAKING
 AND RULE OBEYING FUNCTIONALITY. SOME OF THESE DISORDERS INCLUDE SCHIZOPHRENIA,
 DEPRESSION, PERSONALITY DISORDERS, AUTISM, OBSESSIVE COMPULSIVE DISORDER (OCD)
 AND ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

- DEMENTIA AND OTHER AGE RELATED ISSUES
- POVERTY
- PHYSICAL HEALTH DISORDERS
- REFERENCE: CATHOLIC COMMUNITY SERVICES, 2013, SQUALOR AND HOARDING TOOLKIT, NSW, ACCESSED HTTP://SQUALORANDHOARDING.CATHOLICCOMMUNITYSERVICES.COM.AU/GETTING-STARTED/FEATURES-AND-CHARACTERISTICS

RISKS AND CONSEQUENCES CONNECTED TO HOARDING AND SQUALOR

TAKE A MOMENT TO INTRODUCE YOUR SELF TO A PERSON SITTING NEAR YOU

DISCUSS THE POSSIBLE RISKS THAT MAY BE CONNECTED TO HOARDING & SQUALOR FOR:

- I. THE INDIVIDUAL
- 2. FAMILY MEMBERS
- 3. THE NEIGHBOURS
- 4. THE COMMUNITY



TREATMENT OPTIONS

- TREATMENT CAN HELP PEOPLE WITH HOARDING DISORDER (HD) TO DECREASE THEIR SAVING, ACQUISITION, AND CLUTTER, AND LIVE SAFER, MORE ENJOYABLE LIVES. THERE ARE TWO MAIN TYPES OF TREATMENT THAT HELP PEOPLE WITH HOARDING DISORDER:
- COGNITIVE-BEHAVIOURAL THERAPY (CBT)
- MEDICATION
- DURING CBT, INDIVIDUALS GRADUALLY LEARN TO DISCARD UNNECESSARY POSSESSIONS WITH LESS DISTRESS,
 DIMINISHING THEIR EXAGGERATED PERCEIVED NEED OR DESIRE TO SAVE FOR THESE POSSESSIONS. THEY ALSO LEARN
 TO IMPROVE SKILLS SUCH AS ORGANIZATION, DECISION-MAKING, AND RELAXATION. FOR MANY PEOPLE, CERTAIN
 ANTI-DEPRESSANT MEDICATIONS MAY BE HELPFUL AND MAY PRODUCE MORE RAPID IMPROVEMENT.
- (HTTP://WWW.PSYCHIATRY.ORG/HOARDING-DISORDER)



RESOURCES

(HTTP://WWW.PSYCHIATRY.ORG/HOARDING-DISORDER

(CATHOLIC COMMUNITY SERVICES

NSW/ACT; <u>WWW.CATHOLICCOMMUNITYSERVICES.COM.AU</u>; SQUALOR AND HOARDING TOOLKIT)

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