



Clearing Clutter, Changing Lives

Loneliness and Clutter
Issues in Older Adult
Populations

mhaosf
MENTAL HEALTH ASSOCIATION OF SAN FRANCISCO

Learning Objectives


- To learn what clutter is and who it most affects
- To understand how loneliness and serious clutter issues intersect in older adult populations
- To learn what resources are currently available in San Francisco to address clutter issues and the loneliness that accompanies them
- To understand what support we can provide for elders who have serious clutter issues



Who we are

MHASF Peer Response Team



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- The Peer Response Team is a group of individuals who have experienced serious problems—stress, anxiety, depression, stigma, damage to relationships, health and safety issues, eviction, isolation— when we lost control over our stuff.
 - We believe it is possible to regain control of your life.
 - We believe that non-judgmental peer support can help.
 - We are building a community of people affected by this issue.



What do we mean by
"clutter"?

DSM V: Diagnostic Criteria

- A. Persistent difficulty discarding possessions
 - i. Regardless of the value others may attribute to these possessions
- B. Caused by strong urges to save items
- C. Accumulation of a large number of possessions that render the home or areas of the homes not useable
- D. Cause clinically significant distress or impairment
- E. Symptoms are not due to a general condition

Clutterers Anonymous defines clutter as,

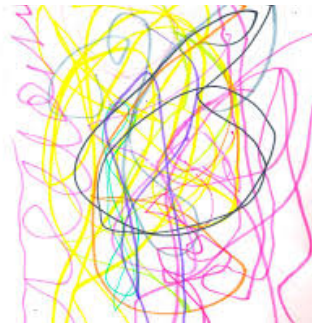
"...anything we don't need, want, or use that takes our time, energy, or space, and destroys our serenity. It can be outgrown clothes, obsolete papers, broken toys, disliked gifts, meaningless activity, ancient resentments, or unsatisfying relationships. We may be selective in some areas, but not in others. Objects may be strewn about or wedged in drawers; neatly stacked or stowed in storage."

Bottom Line: Got too much stuff?

- Nearly everyone in America periodically feels we have “too much stuff” and tries to simplify, organize, and de-clutter.
- Each of us deals with this challenge in our own unique ways.
- Sometimes we feel overwhelmed.
- You are not alone.

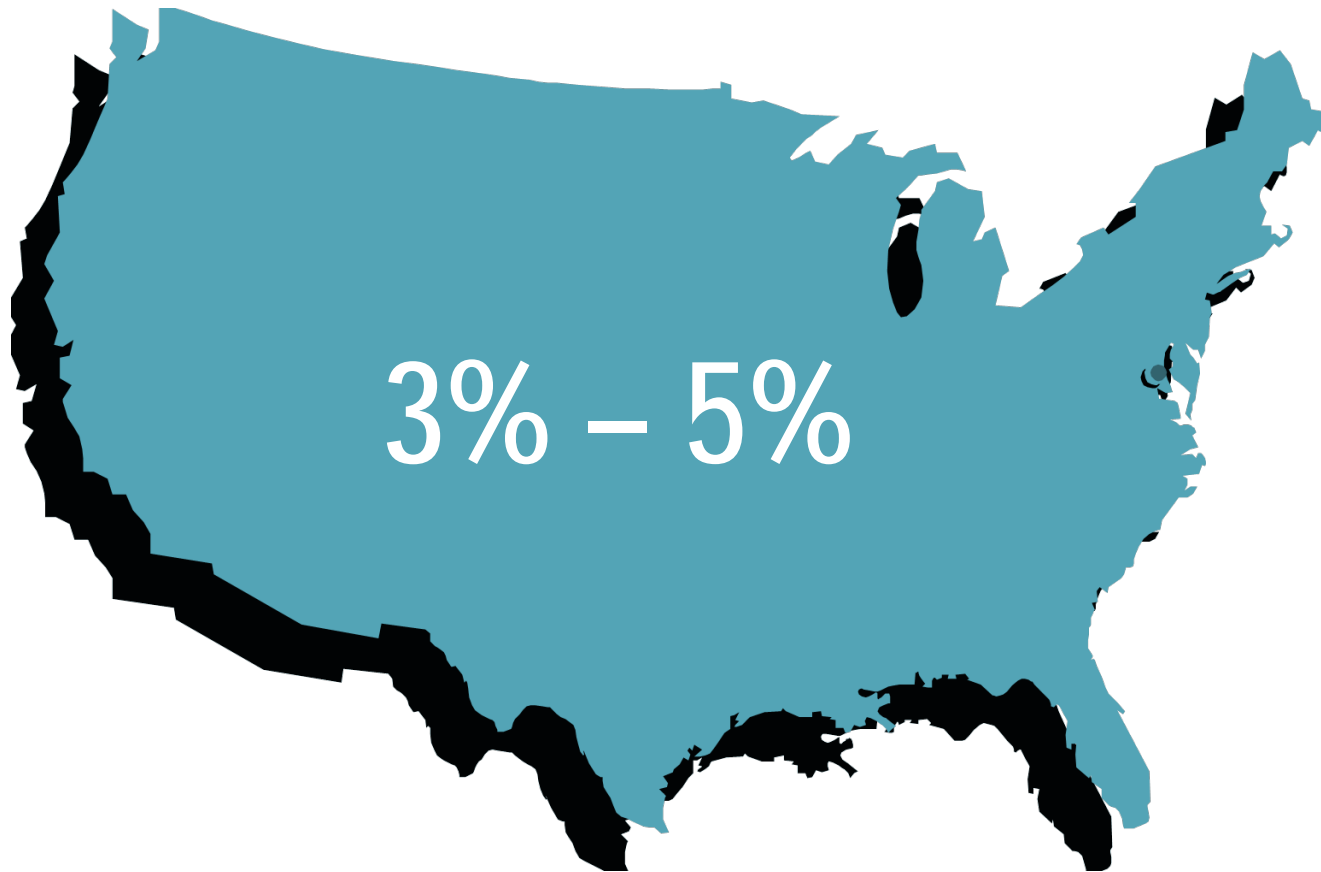
Group activity

Tell us about one thing you hold onto that anyone else would think is junk, and why you keep it.





Who does clutter affect?



Samuels, 2008



Clutter issues affect approximately the same percentage of the population as Alzheimer's Disease.

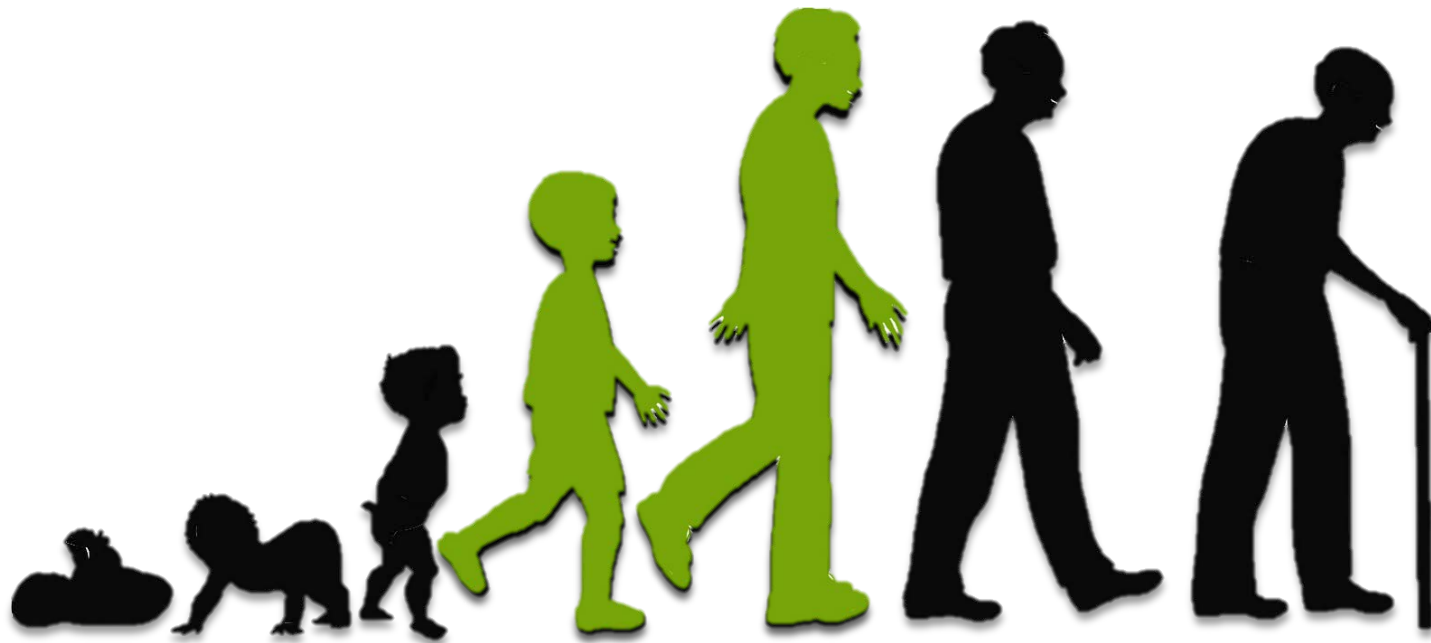
As with Alzheimer's, stigma around Hoarding Disorder can affect open discussion and willingness to seek treatment.





Between 25,000 to 50,000 adults in San Francisco face hoarding and cluttering challenges – and that estimate may be low.

Age of Onset



Most reported



Clutter issues disproportionately affect older adult populations. Why?

- Elders have lived long enough to accumulate more stuff.
- They have a greater likelihood of experiencing a life-altering event.
 - Death of a loved one
 - Health crisis
 - Loss of a job or retirement
- They may have experienced downsizing, especially in conjunction with custodial care of items left behind by loved ones who have died.

Loneliness and clutter

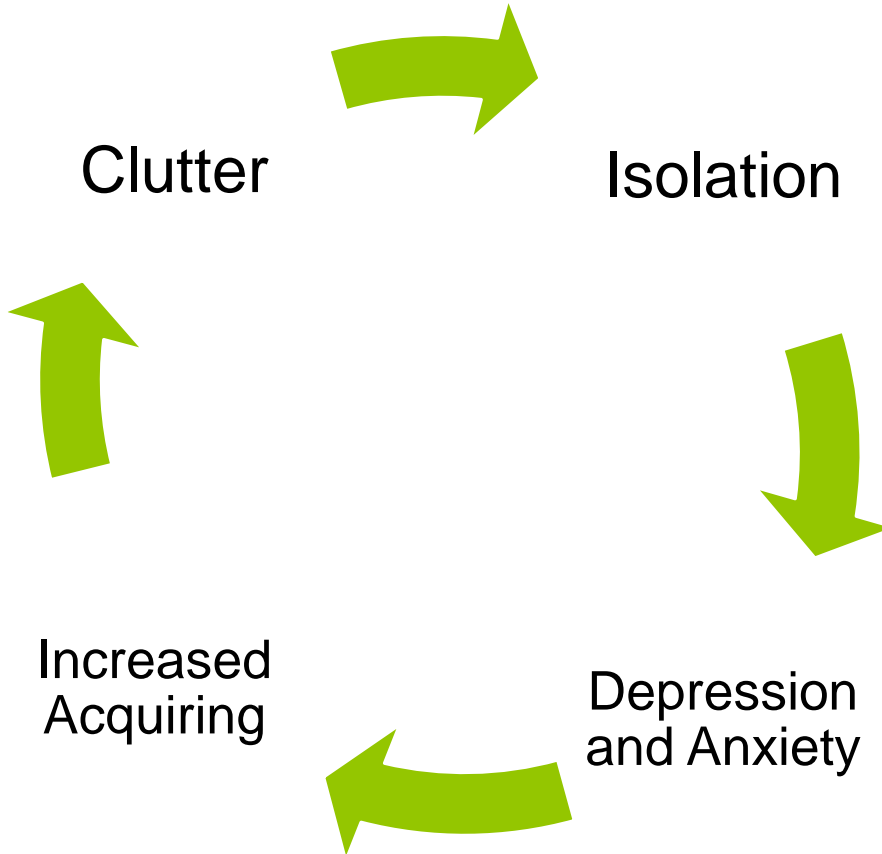
The vicious circle

Clutter

Isolation

Increased
Acquiring

Depression
and Anxiety



Many people who seek treatment cite lapsed social connections as their primary motivation for wanting to beat clutter.



Many people who deal with clutter are exceptionally social and are greatly afflicted by loneliness and isolation.





A personal story

Sharon Scott Kish



How has MHASF addressed
loneliness and clutter in
San Francisco?

- We identified social connection as a key to recovery.
- We offered 1:1 In-Home Peer Support.
 - Not sustainable in the long term due to travel and increased reliance on Peer Responders for alleviating social isolation
- We engage individuals and encourage them to join an increasing variety of groups.
- We provide opportunities for social connection and community building.

Why groups?

- Groups, rather than individual therapy, are becoming the gold standard for treatment of clutter issues.
- Groups provide not only an optimum learning environment for new skills and strategies, but are also a way of addressing isolation.
- Groups provide individuals with a way to connect with clutter buddies – another means of alleviating social isolation.

Group offerings at MHASF

- Drop-In Group
- Treatment Group
- Buried in Treasures
- Unburied from Treasures
- Action Group
- WRAP for Finders/Keepers
- Open House Group (LGBT Center)

PCORI (Patient-Centered Outcomes Research Institute) Study with UCSF

- Researching Therapist-led vs. Peer-led groups
- 15 Treatment Groups vs. 15 Buried in Treasures Groups over 3 years
- 300 total participants
- Bay area locations in San Francisco, Alameda, and San Mateo Counties

1st annual MHASF Peer Convening for Finders/Keepers



1st Annual Peer Convening for Finders/Keepers!
Friday, May 16, 2014 2-6 pm
1st UU Church 1187 Franklin St.



Join the MHASF Peer Response Team for this historic first convening of peers with lived experience of collecting challenges to:

- Discuss current theory, resources, and supports
- Give feedback on MHASF programs
- Develop a peer voice around issues and policies
- Socialize with your peer community

Light supper will be served; please RSVP :
John@mentalhealthsf.org 421-2926 x314

16th Annual ICHC Conference, Nov. 6 – 7, Hilton San Francisco – Financial District

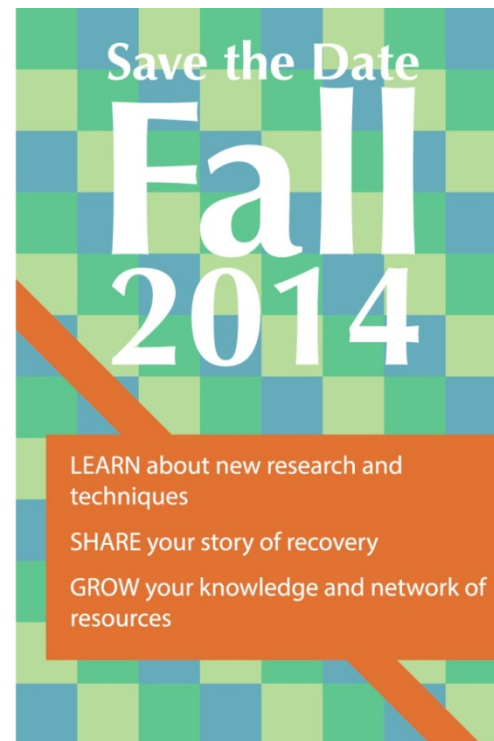
16th Annual International Conference on

Hoarding & Cluttering

"Clearing Clutter, Changing Lives"

Be part of the support community that brings together clinicians, researchers, advocates, and individuals living with hoarding and cluttering challenges.

Need help now? To register for training opportunities and consultant services offered nationwide and year-round see our website
<http://www.mentalhealthsf.org/programs/ichc/>
or contact Mark Salazar 415.421.2926 ext. 317




Other collaborations

- SF Task Force on Compulsive Hoarding
- HI/TPP (Hoarding Intervention Tenancy Preservation Project)



What can we do to support
elders on their journey of de-
cluttering?

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- First, do no harm.
 - Recognize it's not about the stuff.
 - Clear the air before you clear the stuff.
 - Be cautious of the “helper mentality” – we're here to empower, not to rescue.
 - Maintain a non-judgmental attitude – roll with resistance.

- Help the individual to identify their resources, but always let them be in charge – it won't work otherwise.
- Support their process, even/especially if it doesn't match your own.
- Help connect them with community – like MHASF.
- Remember that the stuff didn't get there overnight, and it's not going to get clear overnight.
- Know that alleviating isolation and loneliness first can have a positive effect on motivation to address clutter issues.

Harm Reduction

- The goal of harm reduction is to reduce the harm involved in a situation and to manage the behavior.
- The goal **IS NOT**:
 - To eliminate the behavior
 - To get rid of all of the belongings
- It's more important that the person lives safely at home than that they live in a completely neat and tidy home.
- Harm reduction is a "first step" towards creating a new, less-cluttered living space.

SAMPLE HARM REDUCTION PLAN

Harm Reduction Target	Strategies and Solutions
1) Stove Top	1) No items on the stove top 2) No items within 12 inches of the stove top
2) Expired Consumables	1) Throw out all spoiled food from the kitchen and refrigerator every month 2) Only purchase food that you are going to eat for the week
3) Toilet	1) Clear things away from the toilet so toilet can be used
4) Hallways and Doors	1) Ensure that there is sufficient space for the door to open fully
5) Bed	1) Clear away items from top of the bed so it can be used



Q & A

John Franklin

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Cluttering Response Team

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**Thank you,
and please
stay in touch!**