



Edsell-Vetter: Help available for hoarders

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Recent media coverage of severe cases of hoarding - including a Bellingham couple who died in their home amid floor-to-ceiling clutter - have done a good job of drawing attention to an issue housing advocates have been wrestling with for years.

Television "reality" shows about hoarding show dramatic and tear-filled clean-outs, the backing-up-the-dump-truck-and-shoveling-out-the-home solution to the problem. The real reality, however, is far from that, and rarely do media portrayals of hoarding cases focus on the complexity and spectrum of the problem, the mental health implications, and the ways to successful outcomes.

Hoarding is a mental health condition. It has a chronic and progressively worsening course: Clutter will continue to build until someone draws attention to a hoarder's situation - a housing inspector, a protective services representative, a family member, the police. Many hoarding situations become known only when injury or death occurs.

Because hoarding is progressive, early multidisciplinary intervention works. The team approach - where mental health professionals, hoarding specialists, visiting nurses, code enforcement officials, counselors and social service providers work with the hoarder to form his/her own plan to reduce clutter, teach the skills needed to make decisions about what to keep and what to throw out, and help the hoarder recognize when he/she needs help - works best long term in curtailing hoarding and preserving a safe living environment.

The dramatic footage of hoarders' homes and their clean-outs may provide entertainment. But it's the multidisciplinary teams across the country who are intervening successfully, using cognitive behavior techniques, case management, and other resources to create long-term change for these people.

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