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REPORT

Social housing tenants and hoarding behaviour: a landlords' perspective

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1. Summary

Based on the WHO's International Classification of Diseases, hoarding behaviour is a medical condition, and it is characterised by difficulty in disposing of personal possessions, regardless of their value, resulting in accumulating them and causing severe congestion and clutter within the place where people live (WHO 2022). Notably, homes with persistent clutter can represent fire and environmental hazards and are an issue for the individuals who suffer from this condition, their neighbours, emergency services, healthcare, and housing providers (Holden et al 2019, Hanson and Porter 2021). Within this context, by using mixed methods of research, this study investigates social landlords' experiences of tenants with hoarding behaviours in Scotland, the challenges that landlords face and what instruments and approaches can help overcome them.

Findings from the study highlight a need for inter-agency work, more understanding of the issue as seen from both the housing and the health and social care viewpoints and provide an overview of approaches to intervention.

After first describing the context within which this study was conducted and the existing literature on hoarding intervention, the report outlines the methodology used and the key outputs before discussing the results and providing recommendations.

2. Background

Hoarding behaviour is associated with high housing and healthcare costs, poor mental health, and housing insecurity (Hanson and Porter 2021). It is estimated that 2-5% of the population worldwide hoards, but only 5% of them get the necessary support (Büscher et al 2014). Individuals with hoarding behaviour may also pose economic challenges to social landlords due to their complex needs requiring specialised teams (Neave et al 2017). As noted by Sampson (2013), hoarding behaviour can impact family relationships due to stigma and the negative feelings that individuals who hoard may provoke. This leads to isolation, increased distance from relatives and friends who may shy away, and experiences of rejection and hostility. People who hoard are less likely to access health care and, with poor support networks, may have no physical or emotional help to declutter their homes (Crone 2020).

Hoarded homes might not be easily identifiable as tenants might not seek or accept help due to them not recognising their hoarding as a problem or being embarrassed by how they live (Tomkins 2011). Based on Frost's study conducted in 2001, half of the people who had received a complaint due to hoarding behaviour did not acknowledge the lack of hygiene in their homes, and one-third were not keen on collaborating to resolve the issue. Consequently, landlords might discover their tenants' hoarding behaviours through third-party agencies such as social workers and contractors who visit their properties to provide maintenance and support on other matters.

Further to WHO's classification of diseases, the Adult Support and Protection (Scotland) Act 2007 and the Equality Act 2010 provide a legal framework for hoarding behaviour. As this condition impacts individuals' health and safety, adults who hoard are vulnerable and in need of support under section 53 of the Adult Support and Protection Act (Scotland) 2007. Since hoarding might involve long-term mental impairment affecting normal activities, the disorder could be classed as a disability under section 6(1) of the Equality Act 2010, which states that "a person (P) has a disability if— (a) P has a physical or mental impairment, and (b) the impairment has a substantial and long-term adverse effect on P's ability to carry out normal day-to-day activities". Therefore, social landlords must intervene when they acknowledge hoarding cases due to the health and safety risks involved. However, unsolicited intervention and decluttering can be a traumatic experience for the individuals, creating distress over parting with their possessions and intensifying the disorder's severity (Muroff et al 2011, Hanson and Porter 2021).

Notably, research evidence suggests that monitoring results regularly allows for adapting the course of action to the individual's needs and facilitates engagement leading to better outcomes. Motivational interviews and routine outcome monitoring are good practices for mental health practitioners (Crone et al 2020).

Many local authorities have set specific multi-agency protocols to enable services to respond effectively at the local level. Yet, these frameworks are not consistently adopted nationwide, and there might be barriers to collaboration between different agencies. Research on partnership working has highlighted issues with information sharing (Sharples et al 2002), conflicting perceptions of professional work boundaries and a lack of understanding of other agencies' roles in relation to housing and health and social care (Hudson 2002, Fraser 2019). Despite these challenges, the need for partnership between private and public agencies across many sectors is broadly recognised, and so is when supporting tenants with hoarding behaviour (Holden et al 2019, McQuaid 2010).

Some argue that individuals who hoard are more likely to be single or older (Neave et al 2017). This is due to health, sociodemographic factors and social contexts such as lower level of mobility, cognitive impairment or a weak social network which might worsen with ageing (Owen 2022, Sanders 2022). Therefore, individuals with hoarding behaviour may also form a significant group of council/housing association tenants, hence the focus of the study on social landlords.

3. Aims of the study

The objective of the study was to gain a better understanding and awareness of the way social landlords experience hoarding behaviours amongst their tenants and therefore aimed to:

- assess which factors might lead to positive outcomes of hoarding intervention and which, on the contrary, might make the intervention more difficult,
- investigate how landlords become aware of these behaviours,
- investigate the training, expertise, and services needed to provide support,
- shed light on the challenges faced by landlords in supporting tenants who are hoarders,
- identify the best approaches to tackle the issues caused by hoarding.

4. Methodology

The study combined quantitative and qualitative methods. Primary data was collected using a quantitative online survey (Appendix 1) administered to various social housing professionals. The survey also served a recruitment purpose for the study's second phase, which entailed semi-structured interviews that delved deeper into the challenges and barriers that housing organisations face. Also, one interview with a Group Analyst and Psychotherapist was conducted to gather more insight into hoarding behaviour as a mental health condition.

The survey was first piloted with five housing professionals, volunteering and working at Housing Options Scotland and Stirling University, who provided feedback on the clarity of the questions. The survey was then sent to 130 housing associations and all councils' landlords in Scotland, to Housing Options Scotland's network and the Housing Studies students at Stirling University, via email and social media. Respondents were also asked to share the survey with their network. Therefore, not all members of the population are expected to have an equal chance of participating in the study (Bryman 2021). Survey data were coded and statistically analysed with SPSS (Statistical Package for Social Sciences). The Likert scales used in the questionnaire were tested for reliability, resulting in measures that produced consistent outcomes (Appendix 2). Cross-tabulations with Spearman Correlation tests were used to explore which factors make hoarding intervention more effective, therefore increasing the number of favourable case resolutions, and which ones can make dealing with hoarding cases easier. A thematic analysis was run on qualitative data from the survey and the interviews. The key outputs from the quantitative and qualitative analysis were combined so that the qualitative findings could explain and complement the quantitative data.

The study collected anonymised data, and no real names were used in the write-up to protect participants from future harm. Participants gave free consent to take part in the study and were informed about the research aims and their right to withdraw. Care was taken to ensure that any participant or tenant referred to during the interviews was not recognisable in the write-up. Confidentiality was also maintained by securely

storing the survey and interview data on the University of Stirling’s password-protected OneDrive account. Ethical approval was obtained by the University of Stirling General Ethical Panel (ref. no. 2022 7509 6192).

5. Key Outcomes

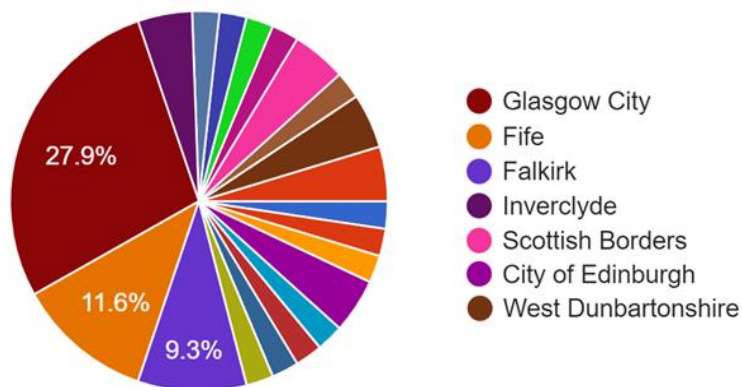
5.1 Responses

In total, 47 people filled in the online survey. Since seven did not fit the inclusion criteria of working for a social landlord in Scotland, their responses were removed from the study. Of the 40 participants included in the analysis, 37 were housing professionals (housing association directors, housing managers, operation managers, junior and senior housing officers, tenancy services and tenancy support officers, customer service officers, and neighbourhood community support officers). Three worked in a council’s Health and Social Care department (social workers and occupational therapists). 10 participants worked for a council, and the other 30 participants worked for housing associations.

One social worker and six housing professionals also agreed to participate in the interviews. One further interview was conducted with a psychotherapist, so in total eight interviews were carried out.

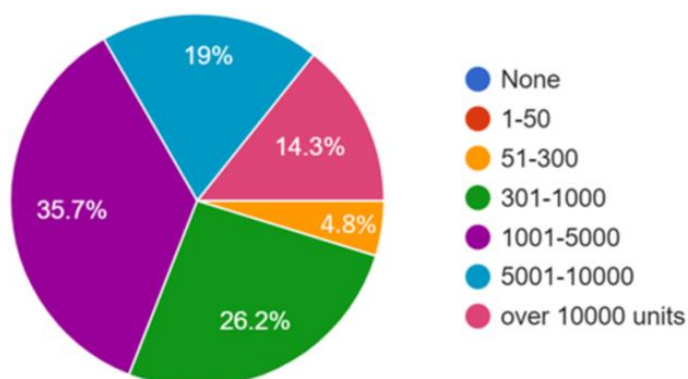
Survey respondents worked in 19 different local authority areas; 30% in Glasgow, 11.6% in Fife and 9.3% in Falkirk (Fig. 1). This data only partially reflects how housing stock managed by social landlords is distributed across Scotland. Based on the Scottish Government’s housing statistics (2022), Glasgow and Fife are the areas with the most significant number of social housing units, corresponding to 17.7% and 6.6% of the entire stock. Thus, these local authority areas are overrepresented in the study. As noted above, the response rate can be biased by the recruitment strategy, which was respondent driven, as participants were also used to identify other network members.

Figure 1: Q1 - Where do you primarily work?



Most participants worked for medium-sized organisations: 35.7% for landlords with 1001-5000 housing units and 26.2% for landlords with 301-1000 housing units. Only two participants worked for landlords with up to 300 housing units, and all social landlords with over 10,000 units were local authorities (Fig. 2).

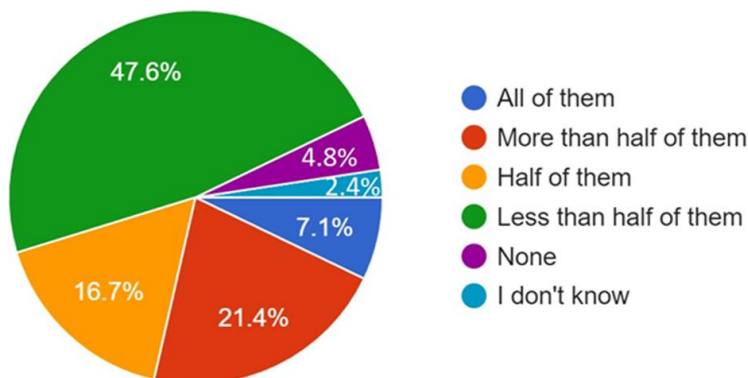
Figure 2: Q4 - How many housing stock units does your organisation own in Scotland?



31.7% of participants dealt with an average of one or two cases of hoarding behaviour per year; the same percentage dealt with three to five cases, 17% with six to 10, and 17% with 10 to 20 cases per year. The fact that some of the respondents dealt with a high number of cases might suggest that there are specialised professional profiles who primarily work with individuals who hoard. This can be particularly true among health and social care workers, as noted in 5.7.4 below.

47.6% of participants said that less than half of hoarding behaviour cases were resolved. Yet, two participants, who worked respectively for a housing association and a local authority, said that all cases were resolved (Fig.3).

Figure 3: Q6 - How many cases are resolved?



5.2 Instruments for interventions

When looking at the instruments for intervention on hoarding, not all tools considered in the survey questions are used by respondents, either because, at an organisational level, they are not available or because, if they exist, there's a lack of awareness.

For instance, multi-agency hoarding protocols are not adopted by all landlords. Nearly half of participants were unaware of any protocol used by their organisations, although when there's a protocol in place, this provides a high degree of guidance. Therefore, many social landlords rely on legislation as the principal instrument to set intervention procedures. Furthermore, survey responses also showed that the clutter image rating, a measure to assess hoarding behaviour based on three series of pictures depicting the same rooms with different levels of clutter (Frost et al 2008, IOCDF 2022), is not well-known or used by housing professionals (Fig. 4).

Figure 4: Q7 - When supporting hoarding tenants, do you make use of the following instruments?

| | Not at all | Only a little | To some extent | Rather much | Very much |
|--|------------|---------------|----------------|-------------|-----------|
| Local authorities' multi-agency self-neglecting and hoarding protocols | 11 | 6 | 8 | 3 | 9 |
| My organisation's own protocol/toolkit | 9 | 5 | 6 | 4 | 12 |
| Clutter image rating | 24 | 2 | 2 | 2 | 6 |
| Legislation | 7 | 3 | 11 | 7 | 9 |
| I'm not aware of a protocol used by my Organisation | 13 | 2 | 2 | 2 | 4 |

5.3 Identifying a hoarded home

Based on survey data, hoarded homes are most likely to be initially identified by housing officers. Contractors who deal with maintenance and repairs are also highly likely to make the first contact with tenants. Yet, respondents who work in health and social care overall thought that health and social care professionals, primarily social and support workers, were most likely to identify tenants who hoard at first. Social workers receive many referrals from hospitals and health practitioners too. This shows that tenants might not be aware of their condition or feel ashamed and highlights a lack of support networks provided by family members and friends, as noted by Sampson (2013).

“I’ve worked with individuals who have been extreme hoarders and people whose property is quite messy most of the time. We get referrals from housing, but often these referrals come to us directly from the hospital ward, nurses, and consultants because we support people four weeks beyond being discharged from the hospital... And often, we find that there are hoarding behaviours and support issues for people when they get home” (P18 – Social Worker)

Early identification of hoarding can be difficult. However, factors such as tenants avoiding contact, never leaving home, and keeping their windows closed, might be indicators of a condition which prevents them from freely moving around due to excessive clutter but also of their intent to “build a barricade, to protect themselves with stuff, to store things as tight as possible” (P41). Since Hoarding can be classed as an obsessive-compulsive disorder (OCD), rigid and structured routines can also be an alarm bell.

“There were small warning signs ahead of that, and I was walking on those streets every day: the car was never moved, the client was never out, he never contacted me in six months, he never responded” (P10 – Customer Experience Lead)

“You might be alerted by people having a lot of protective routines that they feel keep them safe because there is a sense of not being safe, of loss. I think the whole picture is likely to be there, and you might see it reflected in another aspect of how they present themselves. But again, it’s a danger to put everybody into one category.” (P41 – Psychotherapist)

5.4 Partnership working

The survey data summarised in Figure 5 show that there’s partnership working between different agencies, which is particularly strong between mental health practitioners, social services and housing professionals.

Figure 5: Q10 - How frequently do you work in partnership with the following agencies to support a tenant who hoards?

| | Never | Rarely | Sometimes | Very often | Always |
|-----------------------------|-------|--------|-----------|------------|--------|
| Pest Control | 3 | 4 | 19 | 11 | 1 |
| Mental health practitioners | 0 | 5 | 12 | 17 | 6 |
| Social services | 0 | 3 | 10 | 17 | 9 |
| Environmental Health | 1 | 8 | 10 | 2 | 1 |
| Removal companies | 8 | 8 | 12 | 10 | 1 |
| Housing professionals | 0 | 3 | 10 | 13 | 11 |
| Fire Brigades | 3 | 7 | 12 | 10 | 7 |
| GPs | 4 | 11 | 8 | 13 | 2 |

23 participants (57.5%) answered that they always/very often work with social services, 26 participants (65%) responded that they always/very often work with mental health practitioners and 24 participants (60%) answered that they always/very often work with housing professionals. While fire brigade intervention and pest control are often required, removal companies tend not to be involved. However, some organisations would seek their help, as well as other contractors, to declutter tenants' rented properties. When looking at the agencies that respondents never/rarely work in partnership with, General Practitioners (GPs) are the least likely to be involved (37.5%). This might be due to an actual or perceived lack of time, as during the interviews a couple of participants acknowledged that GPs were very busy.

5.5 Statistical analysis

Cross-tabulations with Spearman Correlation tests were used to explore which factors make hoarding intervention more/less effective, therefore increasing the number of favourable case resolutions and which ones can make dealing with a hoarding case less challenging (Appendix 2).

Overall, all significant correlations were weak/moderate, which could be due to the small sample size (Bryman 2021).

The analysis shows a positive correlation between the portion of fully resolved cases of hoarding and work in partnership with social services. This means that the more organisations refer hoarding tenants to social services, the better the results they achieve. Similarly, respondents who worked for organisations with clear guidance on hoarding intervention had more cases resolved and rated dealing with these cases less burdensome.

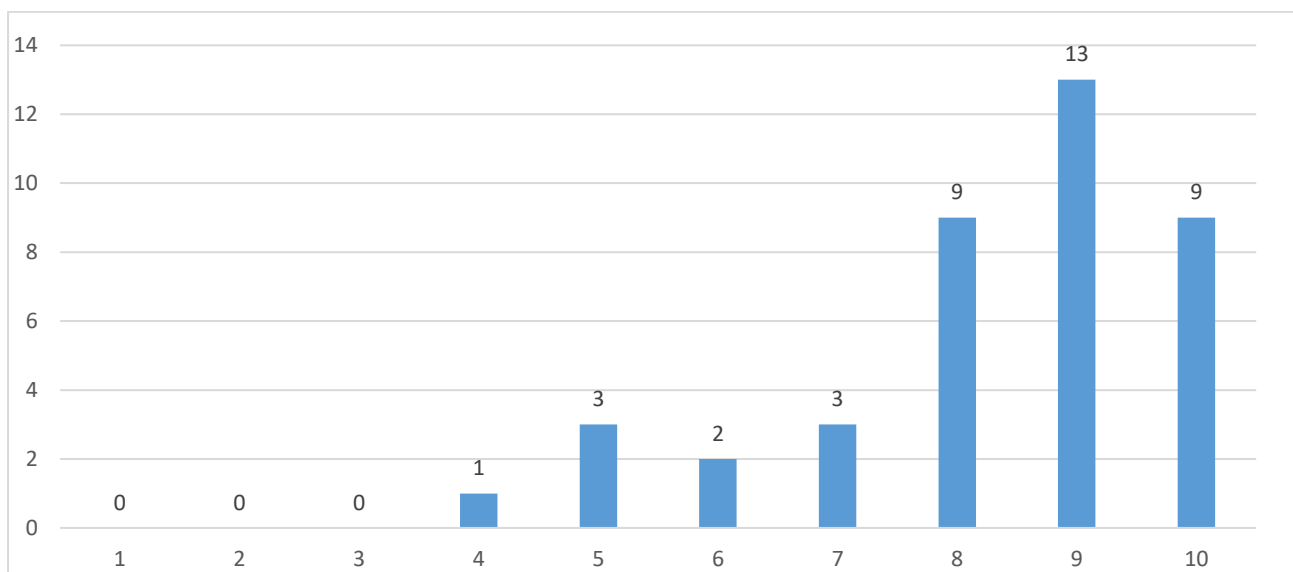
The self-rated level of difficulty experienced by respondents is also positively correlated to whether they would be willing to make referrals to an organisation specialised in hoarding behaviour.

Overall, organisations with clear guidance tend to have their protocol or use their local authority's multi-agency frameworks, which involve working in partnership with mental health, social workers, and GPs. Respondents who work for these organisations rely more on legislation and clutter images to assess a case and are more likely to be trained on best practice.

5.6 Barriers to hoarding interventions

Overall, hoarding intervention was rated as very challenging by participants. In fact, on a scale from 1 to 10, 70% of respondents selected 8-10 as a degree of difficulty (Fig. 6).

Figure 6: Q12 - On a scale of 1 to 10, how easy/difficult do you find dealing effectively with hoarding cases?



Although no statistically significant relationship was found between the degree of difficulty and the other factors investigated through the survey and included in the analysis, the qualitative data provided insight into the main barriers hindering hoarding intervention. These were a lack of effective interagency work, a lack of time and resources, an inability to keep engagement with tenants, and tenants' reluctance to acknowledge their situation and accept help. These barriers align with the evidence provided by the existing literature on housing and hoarding behaviour. Other challenges were a lack of protocols and cooperation between different teams. Respondents knew what best practice entails but felt that positive outcomes were difficult to achieve given the limited resources.

5.6.1 Lack of tenants' engagement and resistance to changing their behaviour

One of the main challenges for housing professionals is engaging with tenants in the first place and encouraging them to open up to receiving support. Respondents mentioned that tenants might not be aware that hoarding is an issue and a risk to them, their property and their neighbours.

"It's quite difficult for the individual who hoards to have insight into their condition and for them to get to a stage where they are ready to accept help, and sometimes you don't get past that stage" (P29 – Lead Housing Officer)

A lack of cooperation from the tenants manifesting itself through their refusal to work alongside housing professionals to declutter their homes is shown in their reluctance to acknowledge the issue, their unwillingness to part with items, and their resistance to changing their behaviour.

"The issue is beyond a clear-out of a property; it is about getting the person to change the way they live and their mindset, to work with you to declutter" (P25 – Tenancy Support Officer)

A mental health practitioner provided a psychological perspective on hoarding behaviour, which might help housing professionals who face these challenges.

"As people focus on the specific disordered behaviour, that intensifies because there's a kind of reinforcement of the idea that's what is troubling them" (P41 - Psychotherapist)

Therefore, it might be helpful to work with the individual and address the underlying causes of hoarding issues, although there's no "gold standard" for a specific approach.

"The best you can do is get alongside the individual, help them think about what is struggling them, apart from that behaviour, and try to ensure they know you understand where they're coming from and gradually try to help them to perhaps see things in a different way. But these sorts of things are very difficult to tackle. What is in someone's head becomes not just what's in their head, but a kind of fundamental truth, so the idea that they can't throw anything away, they have to keep hold of everything, becomes a fundamental truth" (P41 - Psychotherapist)

5.6.2 Lack of time and resources

Many respondents pointed to a lack of time, physical support, and financial barriers as a challenge in effectively dealing with hoarding cases, further highlighting the importance of partnership working.

This appears to be an issue primarily in smaller organisations, where there isn't a dedicated tenancy sustainment/support team, and housing officers tend to have a broad remit as they manage their workload and are required to engage with vulnerable tenants regularly.

"There's a massive cost implication too in terms of intense time and resources required to resolve these cases, but also housing associations tend to shoulder a lot of the financial cost of removals/clearances/staff to resolve the situation" (P10 – Customer Experience Lead)

"The time required to spend with tenants to understand better their behaviour is often beyond a Housing Officer's scope" (P36 – Housing Manager).

5.6.3 Partnership working

There's a lack of cooperation and communication between different organisations at times and of someone who takes ownership, and it's not always clear how responsibilities are shared between different sectors and organisations. Some respondents felt it was challenging to get help and support from the adult protection and social care team unless the tenant has other mental health conditions or support needs apart from hoarding. This is unsurprising due to limited time and resources; further, when the support provided to tenants is withdrawn, hoarding habits might arise again, which is difficult to monitor for housing staff.

"Housing officers will always submit an AP1 [Adult Protection Referral form], however after the immediate risk is dealt with, follow-up interventions and support are poor, meaning problems reoccur" (P7 – Housing Manager)

Notably, the issues caused by cluttered homes should be tackled gradually after gaining the tenants' trust, which is a key requirement.

"We had some cases we had to bring in the support workers from the mental health team, and we set just small tasks for the person, so it's a very slow process. You just have to work in small bits and tackle small parts of rooms. A big barrier is trust; we have to go slow; if we don't build up trust, they won't work with us. These things mean a lot to that person, so it's a very slow, gradual process" (P28 – Housing Manager)

Yet, the housing staff felt they should act quickly due to the risks involved for tenants and their neighbours, such as fire safety, compliance with repairing standards and homelessness prevention measures. In some participants' opinions, the dangers of hoarding are not entirely understood by external agencies, who sometimes seem unaware of protocols. This might result in enforcement action, which is not considered a positive outcome.

"I think partnership working would be better if the other agencies also understood the dangers of hoarding, particularly flammable items. Depending on what people have collected, also condensation and dampness. You've got long-term damage to the property" (P17 - Director)

"I have found it difficult to get social workers involved in many cases unless they deem it essential. Linking with organisations and getting them involved as there are waiting lists/ longer timescales meaning the tenant doesn't have the immediate support required once the property is cleared" (P28 – Housing Manager)

5.7 Intervention approaches

Based on participants' responses, housing professionals must use patience and empathy, have negotiation and listening skills, and understand mental health issues and OCD when dealing with hoarding cases. A supportive, non-confrontative and person-centred approach and the ability to build trust are paramount.

Moreover, participants thought it important to interpret the law and explain this to tenants, agree on an action plan and maintain contact, possibly through weekly visits, to ensure that the plan is adhered to, and see the person's space as a marker of the way they are coping. Tenants cannot be forced to change, and good communication is fundamental to allow them to understand each step of the process and which other agencies will be involved.

5.7.1 Multi-agency approach

This is the most effective approach to getting positive outcomes and preventing tenants from returning to hoarding habits once their homes have been decluttered. However, the multi-agency approach can take different shapes depending on the organisation's size, internal resources, and how promptly statutory bodies respond.

For instance, big organisations might be more financially resourceful, allowing more time to engage with tenants and coordinate with support agencies.

“My job was to ensure that the tenancy conditions were being met; everything else I could do was because I had the privilege of working for a very large organisation. My priority was ensuring the tenant could get to his bed, get stuff cleared, access external storage facilities, and have local health service provisions. I was on my own, but I could pay for services and assistance, and I could work with the individual and the social work team”
(P10 – Customer Experience Lead)

Notably, individuals who hoard might be vulnerable and have support needs due to physical or mental health conditions or learning difficulties. Thus, when tenants are already receiving support from statutory bodies or local charities, housing organisations would try to involve the support agencies.

“We look at what other agencies are going into the house and try to link with them. Most likely, if they [tenants] have social work contact, we would work with the social worker or a support provider” (P17 - Director)

5.7.2 Referrals to specialised Organisations

Most participants stated they would be willing to make referrals to external organisations specialising in hoarding interventions. Some had referred their tenants to Clutter Chat and Life-Pod (Appendix 3), directly or through the social work team.

“There’s a charity, we have recently linked to them to get some support [Clutter Chat]. They give a leaflet to tenants and engage them in a conversation to start clearing their clutter” (P17 - Director)

“I think what’s been helpful over the last ten years is the emergence of the organisation Life-Pod; they are great at working with the tenants if they will accept support, and they raise the profile of the mental health condition and recognise that and provide a mechanism I suppose to do something positive because our role of social landlords is to sustain tenancies and that is what you aim to do so having that option is helpful” (P28 – Housing Manager)

5.7.3 Partnership working with the Fire and Rescue Service

From the participants’ responses, the fire and rescue team can help support tenants who hoard by providing information and helping them understand the risks connected to their condition. They also appear to be more authoritative than the housing staff, and thus tenants might be more willing to follow their advice.

“The main challenge is to get people to understand the danger. In a previous case, we involved the fire brigade, and we asked them to chat with the lady to try to explain the risks. We had a couple of cases living in flats so if anything happens, a fire, that’s a risk for the whole block” (P17 - Director)

“We also link clients to the fire services, which are very good. They do joint visits with us. We had them in this week for a talk with our staff and their team just to give us some wee general fire safety awareness stuff that we can pass on to the tenants, and ...they do see signs of hoarding that sometimes housing officers would miss and tenants will take more notice of them. They’ve also got links with the mental health team, which they can refer to as well. Sometimes social work takes more notice of referrals coming from the fire service than they do from housing” (P28 – Housing Manager)

Whilst the fire and rescue team might find it easier to identify early signs of hoarding, such as small piles of flammable items, the housing staff could make enquiries related to even a low level of clutter in their tenants’ homes.

“I guess they could question people as well if they notice a pile of newspapers, they might gently enquire, they might just sort of remark on it and try and get some sense of what’s going on for that person” (P41 – Psychotherapist)

However, tenants should acknowledge their condition as linked to various risks, including making their tenancy unsustainable and potentially leading to homelessness.

“Fire service would explain from the fire safety point of view but not from the tenancy sustainment point of view, which is what we’ll be looking at” (P28 – Housing Manager)

5.7.4 Multi-Agency protocol

Respondents working in local areas where a multi-agency protocol on hoarding behaviour and self-neglect is in place found it very useful. Where there’s no protocol in place, respondents said that a protocol would be helpful for more guidance and set procedures to share information and co-operate with other departments.

“The next big improvement is the development of the protocol that certainly Glasgow and Edinburgh have and allows for better joint working between organisations because it has to be more of a multi-agency approach, so that’s been a big step forward as well and a positive and that helped smaller organisations like ourself adding a way to have larger organisations like the council to take charge in a way and stir with input from others to make sure that the services are in place to support the tenants to get the right help” (P29 – Housing Manager)

There’s no protocol in West Dunbartonshire and Inverclyde. Still, participants would very much welcome one, as this could facilitate information sharing and set out the role of all parties involved by providing standard procedures.

“Each of these agencies has their mean of business, and some specialised people in each agency almost do that as a core element of their job. We have a gentleman in our team, who is a social worker assistant, and about 60-70% of his work is about supporting people who have hoarding as an issue. These people can cut through all the red tape and get quickly to other parts of other services because they have the contacts, but that is done in a kind of informal way. And that’s why there should be protocols that work between agencies so that it’s not on an informal basis and people can quickly cut through things” (P18 – Social Worker)

“A protocol would be beneficial, a procedure to follow to contact different departments, the social work but they need to have the staff of their own to pick up from there and work together, the housing officers and the persons from the mental health team, maybe doing joint visits, working out a kind of action plan with the person. They’ve got to agree as well, and often, there’s disagreement from the tenant. So, some kind of clear guidance would be good. It would be helpful to know what has worked for other housing associations” (P26 – Housing)

5.8 Increasing number of cases

Some participants have observed an increased number of cases of hoarding behaviour amongst their tenants recently. The Covid-19 pandemic affected people’s mental health and lifestyles; thus, this could have been one of the triggers.

“One lady over lockdown hoarded items bought online; they are all in boxes. I think it has to do with people’s mental health and isolation. Maybe somebody who delivers a parcel at the door makes it feel good, but as you know, it’s a big issue” (P26 – Housing)

From a psychological perspective, a further explanation could be linked to loss and fear of not having enough possessions which makes individuals keep as much as possible.

“Covid was about loss, there was the loss of friends, relatives, and also there were times when there was a genuine fear to run out of things when you couldn’t get pasta, or you couldn’t get toilet rolls. Ordinary people would have to hoard things, so for someone with a kind of mentality or psychological predisposition to hoarding, this would make things worse because it would legitimise their behaviour. I think that loss is probably somewhere at the bottom of what is going on for people who hoard. They are terrified of loss, and they are not able to process loss in their life. And that gets translated into holding on to things because it’s the only way that can keep them safe” (P 41 – Psychotherapist)

6. Conclusions

Findings from this study confirm that social landlords face many challenges when dealing with cases of hoarding behaviour. High amounts of time and financial resources are required, and not all landlords are equally resourceful. Tenants' vulnerability is a barrier to engagement, as it prevents the individual with hoarding issues from seeing the problem and accepting help and does not allow for enforcement action. However, enforcement action is rarely pursued and housing professionals agree that a holistic and person-centred approach involving working alongside tenants to provide the support they need leads to better results. Yet, one of the main challenges arises from balancing a quick response that minimises health and safety risks for tenants and their neighbours, and more individual-focused intervention. Ultimately, partnership working might not always be efficient due to a lack of resources and clear guidance, and landlords in local areas with no multi-agency protocol are more likely to find engaging with statutory bodies difficult.

Yet, despite the challenges that coordination between different agencies entails, partnership working is fundamental to successfully supporting tenants with hoarding behaviour. While the fire and rescue service can help individuals understand the risks connected to cluttered homes, and many referrals are made to health and social care providers, third-sector organisations such as Life-Pod and Clutter Chat are an increasingly important source of support for housing organisations and individuals.

Further to partnership working, inter-agency protocols and organisations' clear guidance on hoarding intervention are useful instruments to achieve good outcomes.

Crucially, all agencies involved, whether they are contractors entering a property to provide maintenance, support workers, social workers, or housing professionals, should have a good understanding of hoarding behaviour as a mental health condition, and thus know what might cause it and trigger it, such as a sense of loss or isolation. More awareness could also help identify early signs of hoarding and facilitate working alongside tenants, gaining their trust, and making them more open to receiving support.

7. Recommendations

Based on the findings discussed above, several recommendations can be made to assist social landlords' intervention in hoarded homes and help define approaches to support tenants. However, every case is different, and thus best practice should be evaluated on an individual basis.

- Consider further developing interagency protocols and implementing them in all local authorities. Protocols provide a high degree of guidance and are welcome by housing professionals. When not possible, standardise the referral system across teams to allow more efficient information sharing;
- Look at warning signs to identify tenants who might have or be likely to develop hoarding behaviours, including tenants' protective routines, contact avoidance, or the accumulation of small piles of items. It is recommended gently enquiring at first sight of clutter to understand if this might be the first stage of a gradual build-up;
- Gain trust and tackle the issue gradually by working at the pace of the tenant and setting achievable goals;
- Focus on reducing the risks of harm rather than decluttering. Involve the fire and rescue service team to inform tenants about the risks arising from hoarding. Further, explain the risks from a tenancy sustainment point of view;
- Work alongside the individuals and help them see what is troubling them apart from the hoarding behaviour. Step by step, help them see things differently and get support for all their needs;
- Make sure that intervention is rooted in an understanding of legislation and that this is clear to tenants.
- Work in partnership: think about support agencies, family and community that can provide support and link tenants to them, make referrals to the social work team and to organisations specialised in hoarding such as Clutter Chat and Life-Pod.

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Appendix 1: Survey questionnaire

Your Organisation

- 1) What type of organisation do you work for? *
 - Local Authority
 - Housing Association
 - Other: _____
- 2) Where do you work primarily?
- 3) What is your job position? If applicable, please also specify your department. *
- 4) How many housing stock units does your organisation own in Scotland?
 - None
 - 1-50
 - 51-300
 - 301-1000
 - 1001-5000
 - 5001-10000
 - over 10000 units

Your Experience of Tenants with Hoarding Behaviour

- 5) On average how many cases of hoarding do you deal with every year?
- 6) How many cases are resolved (e.g., the tenant's home is decluttered, and the tenant gets the support needed)? Please provide your best estimate (all of them, more than half of them, half of them, less than half of them, none, I don't know)
- 7) When supporting hoarding tenants, do you make use of the following instruments? (not at all, only a little, to some extent, rather much, very much)
 - Local authorities' multi-agency self-neglecting and hoarding protocols
 - My organisation's own protocol/toolkit
 - Clutter image rating (see an example here <https://hoardingdisordersuk.org/wp-content/uploads/2014/01/clutter-image-ratings.pdf>)
 - Legislation (eg. The Adult Support and Protection Act (Scotland) 2007, the Equality Act 2010, The Mental Health Care and Treatment (Scotland) Act 2003, The Adults with Incapacity (Scotland) Act 2000)
 - I'm not aware of a protocol used by my Organisation
- 8) Do you use other instruments not listed above? Please specify.
- 9) Based on your experience, who is most likely to identify a hoarding home initially? Select 3 options.
 - Housing officers
 - Support workers
 - Social workers
 - Health professional
 - Maintenance/Repairs workers
 - Neighbours
 - Family members
 - Charity workers/volunteers
 - Other: _____
- 10) How frequently do you work in partnership with the following agencies to support a tenant who hoards? (always, very often, sometimes, rarely, never)

- Social services
- Housing professionals
- Removal companies
- Fire Brigades
- GPs
- Mental health practitioners
- Pest Control
- Environmental Health

11) Do you work in partnership with any other agency? Please specify.

12) Thinking about the challenges that your profession involves, on a scale of 1 to 10, how easy/difficult do you find dealing effectively with hoarding cases? *

1 2 3 4 5 6 7 8 9 10

Very easy Very difficult

13) Based on your professional experience, what are the main challenges related to hoarding intervention and the barriers to effectively supporting tenants? *

14) Based on your professional experience, what are the skills needed to effectively support a tenant who hoards? *

15) To what extent do you agree with the following statements? (strongly agree, agree, neither agree nor disagree, disagree, strongly disagree)

- I would be keen to refer a client to an organisation specialised in hoarding intervention
- My organisation has clear guidance in place regarding hoarding intervention
- I received training on best practice related to hoarding intervention
- I received training on trauma-informed practice
- I would be keen to refer a client to an organisation specialised in hoarding intervention
- My organisation has clear guidance in place regarding hoarding intervention
- I received training on best practice related to hoarding intervention
- I received training on trauma-informed practice

Your Contact Details

Thank you for taking the time to complete my survey.

If you would like to be contacted to participate in a follow-up interview by phone call or video call, then please tick the box below and provide your contact details.

1. I consent to be contacted to participate in a phone or video semi-structured interview (Yes/No)

If you agreed to participate in the interviews, please provide your contact details (name, organisation, email and/or phone number) _____

Appendix 2: Statistical Analysis

2.1 Reliability

Reliability is the consistency of a measure across different situations (Bryman 2021). Data were collected through the online survey.

Case Processing Summary

| | | N | % |
|-------|-----------------------|----|-------|
| Cases | Valid | 17 | 42.5 |
| | Excluded ^a | 23 | 57.5 |
| | Total | 40 | 100.0 |

a. Listwise deletion based on all variables in the procedure.

| Cronbach's Alpha | N of Items |
|------------------|------------|
| .787 | 19 |

| Scale | Number of items | Cronbach's Alpha |
|--------------|-----------------|------------------|
| Likert scale | 19 | .787 |
| Total | 19 | >.700 |

Cronbach's Alpha produced internal consistencies that exceeded the minimum value of .700 required for acceptable reliability (Cronbach & Shapiro 1982). Therefore, the Likert scales used are reliable.

2.2 Spearman correlation

Correlation coefficients range between -1 and +1, values close to +-1 indicate a strong relationship.

Spearman's Rho correlation coefficient is used when one or more of the variables are ordinal, like most Likert scales (Bryman 2021).

Correlation between number of cases resolved and organisations' clear guidance on hoarding intervention

| Cases resolved | Organisations' clear guidance in place regarding hoarding intervention | |
|----------------|--|-------|
| | Spearman Correlation | 0.365 |
| | Sig. (2-tailed) | 0.021 |
| | N | 40 |

Correlation is significant at the 0.05 level (2-tailed).

Correlation between number of cases resolved and partnership working with social work services

| Cases resolved | Partnership working with social workers | |
|----------------|---|-------|
| | Spearman Correlation | 0.345 |
| | Sig. (2-tailed) | 0.029 |
| | N | 40 |

Correlation is significant at the 0.05 level (2-tailed).

The more respondents work in partnership with social workers, the more hoarding cases are resolved. There's a positive weak correlation between working in partnership with social workers and the number of cases resolved. 0.345 correlation is significant at the 0.05 level (2-tailed) which means that the correlation is not due to random sampling error.

Correlation between self-rated level of difficulty and willingness to make referrals to a specialised organisation

| Self-rated level of difficulty of hoarding cases | Willingness to make referrals to an organisation specialised in hoarding intervention | |
|--|---|-------|
| | Spearman Correlation | 0.369 |
| | Sig. (2-tailed) | 0.019 |
| | N | 40 |

Correlation is significant at the 0.05 level (2-tailed).

Correlation between self-rated level of difficulty and organisations' clear guidance on hoarding

| Self-rated level of difficulty of hoarding cases | Organisations' clear guidance in place regarding hoarding intervention | |
|--|--|--------|
| | Spearman Correlation | -0.315 |
| | Sig. (2-tailed) | 0.047 |
| | N | 40 |

Correlation is significant at the 0.05 level (2-tailed).

Appendix 3: Useful resources

Life-Pod - <https://life-pod.co.uk/>

Life-pod is a not-for-profit organisation formed by a team of practitioners who support people suffering from chronic disorganisation and hoarding disorder. Focused on improving the life and well-being of individuals, they use evidence-based therapeutic techniques. They provide help to the individual across Edinburgh and the Central Belt, training for organisations and support to create hoarding policy and practice guidelines.

Clutter Chat - <https://clutterchat.co.uk/>

Clutter Chat is a registered Charity that provides support, encouragement and suggestions to deal with clutter. Based in Glasgow they organise regular online meetings in person and online.

Hoarding UK - <https://hoardinguk.org/>

Hoarding UK supports people affected by hoarding behaviour UK-wide and aims to improve professional practice. They have a support phone line, provide legal assistance in case of eviction threats via Legal Aid, and offer Zoom group sessions. They also provide training programmes for both people with hoarding behaviour and professionals who work with them.

Association of Professional Declutterers & Organisers (APDO) - <https://www.apdo.co.uk/find-an-organiser/>

Professional declutterers and organisers can be found locally through the APDO's website.

Chartered Institute of Housing (CIH) - <https://www.cih.org/search?q=hoarding&p=1>

Resources on hoarding and training can be accessed by housing professionals who are members of the CIH

Mind - [https://www.mind.org.uk/information-support/types-of-mental-health-problems/hoarding/about- hoarding/](https://www.mind.org.uk/information-support/types-of-mental-health-problems/hoarding/about-hoarding/)

Hoarding Support - <https://hoarding.support/>

Hoarding Support provides support, guidance and information on hoarding.

Clutter Image Rating - [https://hoardingdisordersuk.org/wp-content/uploads/2014/01/clutter-image- ratings.pdf](https://hoardingdisordersuk.org/wp-content/uploads/2014/01/clutter-image-ratings.pdf)

Hoarding Disorder UK - <https://hoardingdisordersuk.org/>

Based in England, they provide advice, telephone and virtual support group for people affected by hoarding behaviour, and professional training to raise awareness of hoarding as a mental health disorder.