



# OPENING THE DOOR: BUILDING TRUST WITH CLIENTS LIVING WITH HOARDING DISORDER



For frontline professionals with clients living with hoarding disorder - practical, trauma-informed strategies to build trust and meaningful connection



# Clients Living with Hoarding Behaviours – Where Do We Start?



If you work in housing, health, social care, or any frontline support role, chances are you've encountered someone living with hoarding disorder – if you haven't yet, then it's a cert you will at one stage or another. These situations can feel overwhelming. The space might be unsafe. The risks are real. More often than not, your involvement usually begins when things are already at crisis point, and it can feel like the pressure is on to act quickly and decisively.

And for frontline professionals, the challenge isn't just about safety or tenancy. It's about building a relationship where change can begin.

This guide is designed to support housing officers, social workers, tenancy sustainment teams, and frontline practitioners who are often the first point of contact. It focuses on fostering engagement, reducing harm, and approaching the person in a way that's trauma-informed, sustainable, and grounded in dignity.

Inside, you'll find practical techniques, conversation starters, and strategies for building trust, even with clients who are hard to reach or have disengaged from services in the past. Because when we lead with curiosity instead of control, partnership instead of pressure, real change becomes possible... one small step at a time.

# What we know...

## What Is Hoarding Disorder?

Hoarding disorder is a recognised mental health condition, characterised by a persistent difficulty discarding or parting with possessions. This difficulty is driven by a strong need to save items and distress associated with letting them go. Over time, this can lead to accumulations that clutter living spaces, disrupt daily functioning, and pose risks to health, safety, and wellbeing.

Hoarding isn't about messiness or laziness. It's often connected to trauma, loss, anxiety, or other underlying conditions, and for many people, their belongings represent identity, memory, or security.

## How Common Is It?

Hoarding disorder is estimated to affect around 2%–6% of the population, according to current studies. However, many experts believe the true number is likely much higher.

Why? Because hoarding is often:

- **Hidden:** People may feel ashamed or fearful of judgement or intervention.
- **Misunderstood:** It may be dismissed as eccentricity, poor housekeeping, or a lifestyle choice.
- **Underreported:** People often don't come into contact with services unless there is a crisis, such as a fire hazard, eviction, or safeguarding concern.

This means that many individuals living with hoarding behaviours remain under the radar, receiving little or no support until the situation becomes severe.

## What are the risks?

Hoarding can pose serious safeguarding risks that affect not only the individual but also others living in or visiting the property. These risks may include fire hazards, blocked exits, unhygienic living conditions, increased risk of trips and falls, and restricted access to vital facilities such as bathrooms or kitchens. In more severe cases, hoarding may also lead to neglect, self-neglect, or vulnerable individuals living in unsafe environments. It's essential that safeguarding concerns are recognised early - but equally important that interventions are handled with sensitivity, to avoid further distress or disengagement from support.



# The issue of engagement

Engaging someone living with hoarding behaviours can be incredibly challenging, even for the most experienced frontline professionals. These clients may appear resistant, withdrawn, defensive, or even hostile – and this can leave support workers feeling stuck, frustrated, or unsure of how to move forward. The difficulty often lies in the deep emotional attachment many individuals have to their possessions, which may serve as sources of comfort, memory, control – or even protection – in a world that has otherwise felt unsafe or unpredictable.

Add to this the fear of judgement, previous negative experiences with services, and the intense shame many people feel about their living situation, and it's no surprise that engagement breaks down. For professionals under pressure to "solve the problem," it can feel like a constant cycle of disengagement – but the key lies not in pushing harder, but in approaching with curiosity, compassion, and patience, using tools that focus on building trust rather than demanding change too quickly.



*“Trust is the glue of life. It’s the most essential ingredient in effective communication. It’s the foundational principle that holds all relationships.”*

*Steve Covey*

# Understanding Disengagement: Why Clients Say “No”

Before we can respond effectively to refusal or disengagement, we need to understand what’s really behind it. On the surface, it might look like the person is being difficult, unmotivated, or simply doesn’t want help. But beneath that surface, there are often complex emotional, psychological, and situational reasons driving the behaviour.

If we don’t take the time to understand why someone is resisting, we risk pushing them further away – or reinforcing the very fears and barriers that led them to disengage in the first place.


By identifying the underlying causes of disengagement, we can begin to respond with more compassion, clarity, and confidence – using approaches that reduce fear and build trust, rather than overwhelm or pressure.

Here are some of the most common reasons why clients affected by hoarding behaviours may disengage or refuse support:



## Emotional Attachment to Belongings

One of the main reasons clients disengage is their intense emotional attachment to their belongings. For them, what might appear to others as clutter or rubbish is often connected to personal memories, a sense of identity, or emotional comfort. The thought of someone else moving, touching, or discarding their items can feel invasive and deeply unsettling, making it incredibly difficult to let go of things, no matter how seemingly insignificant they may seem to an outsider.



### Shame and Embarrassment

Shame is a powerful barrier to engagement. Many clients are acutely aware of the state of their home and are deeply embarrassed by it. This shame can make them feel exposed and vulnerable, as if they are being judged. The fear of being humiliated or misunderstood can be so overwhelming that they avoid seeking help altogether. Simply having someone show up at their door can trigger a sense of dread or refusal, as they feel it might expose something they've worked hard to hide.



### Past Negative Experiences and Trust Issues

For some, past interactions with service providers have left them feeling disrespected or rushed. Negative experiences can instill a profound mistrust. When previous engagements have been marked by insensitivity or a lack of understanding, clients may be wary of any new efforts to intervene. There is often a lingering fear that their personal space will be violated again, leading them to disengage even before the process begins.



### Co-existing Mental Health Challenges

Hoarding behavior frequently co-exists with underlying mental health issues such as depression, obsessive-compulsive disorder, or trauma-related conditions. These mental health challenges can amplify the difficulty of making decisions about one's possessions and engaging with change. When compounded by feelings of self-doubt and anxiety, even the smallest steps toward decluttering can seem insurmountable, making professional help both necessary and fraught with emotional risks.



### Fear of Unwanted Consequences

Many hoarding clients live in fear of the ramifications that could follow from accepting help. They worry that opening their homes to professionals might lead to drastic outcomes, such as eviction, intervention from social services, or the loss of personal independence. This fear can be so strong that it not only discourages them from engaging with services, but also from considering any changes that might alter their current way of living.



### Executive Dysfunction

Clients may genuinely want to take action, but struggle with the mental steps required to begin. Executive dysfunction - commonly associated with OCD, ADHD, depression, or trauma - makes it difficult to plan, prioritise, initiate tasks, or make decisions. They may freeze, procrastinate, or avoid contact, not out of defiance but due to sheer cognitive overload.



### Lack of Readiness

Finally, some individuals, while acknowledging the need for help in theory, are simply not ready to take the plunge. They might be in the midst of other personal crises such as grief, health issues, or major life changes, which only serve to reinforce the status quo. In these moments, even a well-intentioned offer of support can feel premature, causing further withdrawal from a process that already seems too daunting.

Understanding these multifaceted reasons behind disengagement is crucial for anyone working with hoarding clients. A trauma-informed, non-judgmental approach that respects their emotional well-being and provides gentle encouragement is essential. Taking time to build trust, break down tasks into manageable steps, and consistently demonstrate empathy can gradually open the door to effective intervention and lasting change.



# Five sure -fire ways to engage your client and build the trust

These tactics combine trauma-informed communication, behavioural psychology, and practical structure. They work whether you're trying to prevent a first-visit refusal or win back a client who has gone quiet.

## 1. Show Up Consistently - Why Reliability Builds Safety

For many clients who hoard, life has been shaped by unpredictability, whether through trauma, unstable relationships, eviction threats, or inconsistent experiences with services. That's why consistency plays a huge part in the therapeutic process, rather than simply a professional standard.

When you, as a frontline worker, show up at the agreed time, keep appointments (even if they're short), and follow through on what you say you'll do, you're offering something rare: stability. You become someone they can begin to rely on.

Consistency might mean:

- Arriving even when you know they might not answer the door, and leaving a gentle note instead of walking away in frustration.
- Checking in regularly without pressure to act. Simply reminding them you're still there will lend itself to the feeling that you don't have an agenda.
- Respecting boundaries while remaining available. Not pushing for access, but always showing up when invited will lead to them letting you know when they are comfortable to let you in.

Why this helps:

Each time you follow through, it chips away at the belief that services are only there to judge, rush, or disappear. Consistent presence becomes a quiet reassurance that change doesn't have to come with chaos. It lays the groundwork for emotional safety – which is essential before any behavioural change can happen.

Clients may not remember everything you say, but they will remember how you made them feel. When you become someone predictable in a life full of overwhelm, you become safe. And safety is the foundation of trust.





## 2. Listen to Understand, Not to Solve - Holding Space Without Agenda

In work with people who hoard, listening becomes an act of validation, rather than just a communication skill. Many clients have had their voices overlooked or replaced by assumptions, for example that they're lazy, resistant, or irresponsible. When you take time to truly listen, without interrupting, redirecting, or jumping to solutions – you offer something deeply healing: respect.

This means allowing silence. Letting the client share at their own pace. Using reflective responses like “That sounds difficult” or “Can you tell me more about that?” instead of immediately steering the conversation toward change. You might hear about grief, trauma, fear, or the meaning behind certain possessions. Stay open, not clinical.

It's also important to listen for the unsaid, noticing discomfort, body language, or subtle cues that indicate where trust is fragile or shame may be present.

Why this helps:

Being genuinely heard, without judgment or agenda, gives clients the dignity of being seen as a whole person – not just a ‘case’. It helps reduce defensiveness, fosters rapport, and can unlock powerful self-reflection. Clients who feel listened to are far more likely to begin trusting, engaging, and eventually taking steps forward – because the process feels safe, and they feel respected.



### 3. Lead with Curiosity, Not Assumption – Creating Space for Story, Not Stigma

One of the most powerful ways to build trust with clients who hoard is to replace judgment with genuine curiosity. Instead of focusing on what's "wrong" with the environment, be curious about what it means to the person. Ask open-ended, gentle questions that allow the client to tell their story in their own words – without pressure or shame.

Try phrasing like:

- "Can you tell me about this space and what it means to you?"
- "What would you like this room to feel like one day?"
- "Has anything changed recently that's made things harder?"

Leading with curiosity helps shift the tone of the conversation from problem-solving to partnership. It invites dialogue rather than defensiveness and acknowledges the client as the expert in their own life. This also helps you understand not just the behaviour, but the beliefs, emotions, and past experiences that influence it.

Why this helps:

Hoarding isn't just about stuff. It's about safety, loss, identity, and control. When you lead with curiosity, you give clients permission to explore their experiences without fear of judgment. This deepens trust and encourages reflection, which are both essential before any meaningful change can begin. Curiosity fosters connection, and connection is where healing starts.

### 4. Support Autonomy & Choice – Let the Client Lead the Way

For individuals who hoard, the experience of having control taken away, whether through trauma, loss, or service intervention, is often central to their current struggles. That's why restoring autonomy isn't just respectful; it's therapeutic.

Supporting autonomy means inviting the client to make decisions, no matter how small. It could be something as simple as choosing whether to talk in the hallway or over the phone, deciding which area feels okay to discuss, or even just choosing the language used to describe their space.

Instead of, "We need to clear this room," try:

- "What would feel like a good place to start, if at all?"
- "Is there a space you'd like to feel more comfortable using again?"
- "What do you feel ready for today, even if it's just talking about what's hard?"

You're not pushing; you're offering... and that difference matters.

Why this helps:

Hoarding is often a protective response to deep emotional pain, where possessions have come to represent comfort, control, or identity. Forcing decisions or actions strips away that protective layer, often triggering shutdown, fear, or resistance. But when clients feel in control of the process, they begin to build confidence, safety, and a new relationship with decision-making.

Reinforcing autonomy gives your client the chance to reclaim agency in their life, and that's the real foundation for lasting change.

## 5. Introduce Support Services Thoughtfully – Aligning with Their Values, Not Forcing a Fix

When working with someone who hoards, introducing outside support, such as therapeutic cleaners, harm-reduction teams, or specialist hoarding services, can feel overwhelming or threatening if done too quickly or without consent. Many clients have experienced past breaches of trust, shame, or uninvited intrusion into their personal space. So, how you introduce support matters just as much as what you're introducing.

Rather than presenting external help as a requirement or solution, frame it as a potential partnership that fits within the client's own goals and values. Use phrases like:

- "I know someone who works slowly, without pressure, and really listens to what people want. Would you like to meet them at some point?"
- "There's a team that works alongside people, never forces anything – just one small step at a time, when you feel ready."
- "If you're ever interested, I can introduce you to someone who works in a gentle, therapeutic way – you'd stay in control the whole time."

Reassure them that you would never bring someone in without their permission and that they'll remain in control of the process. You can also offer introductory visits with no expectations attached – just a conversation, a hello, or even a phone call – as a way of easing in.

Why this helps:


When clients feel services are being "done to" them rather than with them, it reinforces feelings of powerlessness and distrust. But when services are introduced carefully, transparently, and as part of a collaborative approach, they become part of a support system – not a threat. Aligning support with the client's own language, values, and pace preserves dignity, reduces anxiety, and creates the conditions for long-term engagement.

## Why These Five Foundations Set the Stage for Long-Term Change

Each of the five approaches – showing up consistently, listening deeply, leading with curiosity, supporting autonomy, and carefully introducing external services – is more than just good practice. Together, they form the foundation of a trauma-informed, person-centred relationship that maximises the chances of real, lasting transformation.

When these principles are applied well, they do the critical groundwork for specialist services to be effective. Trust, once established through your role as a social worker or frontline professional, becomes the bridge that allows therapeutic teams like ours to step in without triggering fear, shame, or resistance. In short: how well you do these five things directly influences how successfully your client can engage with external help – and whether that help actually sticks.

# Take Homes



A trauma-informed approach infused with gentle therapeutic elements is the most sustainable and successful way to help people who hoard. It recognises that clutter is often a surface symptom of deeper wounds such as grief, loss, shame, or chronic stress. Therefore healing must happen alongside practical change, not after it.



These methods:

- Reduce immediate risks through gentle, client-led harm reduction.
- Strengthen emotional safety, which is essential for behavioural change.
- Encourage internal shifts in thinking – moving from overwhelm and avoidance to curiosity and decision-making.
- Reinforce the client’s sense of control and ownership, so change becomes something they do, not something done to them.
- Build momentum over time, setting up a sustainable path forward – not just a quick fix.

Your role really is vital for laying the groundwork so that when the time is right, the support offered feels like a natural next step. That’s when real progress happens: when a person feels safe, heard, and in charge of their own journey, supported by professionals working in alignment.

## Further courses and resources available to professionals, including:

- **Online/in person training for individuals and teams**
- **Introduction to Understanding Hoarding Disorder Interventions:**
  - **Reframing and Cognitive shifts**
  - **Guiding Avoidance into Action**
  - **Desensitisation and Exposure techniques**
- **Consultancy and Advanced Support**



# A Little About Me...

## About Me

I am a qualified hoarding specialist, Cognitive Behavioural Therapy (CBT) practitioner, trainer, and consultant working nationally with organisations responding to hoarding and complex living environments. My professional background began in education, where I built a strong reputation as a respected practitioner, curriculum developer, and advocate for inclusive learning within the local authority. My work in education was always rooted in understanding people, behaviour, and the barriers that prevent individuals from thriving. In 2021, I made the decision to step away from teaching and establish my own environmental services business. What began as a domestic cleaning service quickly developed into a specialist biohazard and complex property remediation service. Through this work, I witnessed first-hand how closely our environments are connected to mental health, trauma, and life circumstances, particularly in cases involving hoarding disorder.

This experience led me to deepen my knowledge and training in hoarding support and behavioural change. I now work directly with individuals and their loved ones, while also supporting organisations to develop more compassionate, effective responses to hoarding situations.

Today I deliver training programmes and consultancy across a range of sectors including housing associations, local authorities, social care services, NHS teams, education settings, charities, homelessness organisations, and government bodies. My work focuses on helping professionals build confidence and practical skills when supporting individuals living in complex environments.

Alongside direct support, I provide strategic consultancy, workforce training, and multi-agency guidance to organisations seeking to strengthen their response to hoarding cases and embed trauma-informed, person-centred approaches within their services.

I am passionate about lifelong learning and continue to expand my knowledge in behavioural change and therapeutic practice. Through my guides, training, and consultancy work, my aim is to bridge the gap between frontline practice and psychological understanding, helping professionals respond to hoarding with confidence, compassion, and practical tools that create lasting change.



Rachel

