

A photograph of a forest with tall trees and bright sunlight filtering through the canopy, creating a hazy, ethereal atmosphere.

BREAKING THROUGH THE STIGMA: FIVE SURE-FIRE WAYS TO ENGAGE



A guide for professionals
working with people living
with hoarding disorder and
chronic disorganisation



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.

But here's the truth: long-term progress rarely comes from quick interventions.

At the heart of every successful support journey is engagement, and not just surface-level cooperation, but genuine, trusting, sustainable relationships that allow people to move forward at their own pace, with dignity.

This guide is designed to help you do just that.

We'll explore practical ways to build rapport, reduce resistance, and create momentum, even in situations where someone seems stuck, withdrawn, or unwilling to engage. We'll unpack the reasons behind disengagement, highlight the impact of trauma, and offer simple tools and prompts to open up meaningful conversations without overwhelming the person you're supporting.

Whether you're a seasoned professional or new to hoarding work, this guide offers a grounding in what really works, drawing on harm-reduction, trauma-informed practice, and cognitive behavioural techniques adapted for real-world use. Because supporting someone who hoards isn't about fixing, clearing, or controlling.

It's about connection, compassion, and helping people feel safe enough to take the first step.

Let's begin there.

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 re-engage your client time and time again

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. Lead with Empathic Curiosity

How to apply it:

1. Begin every contact with a single, open question that invites feelings rather than facts: "Which part of the home feels most stressful or unsafe to you right now?"
2. Mirror their answer back in your own words so they hear themselves validated: "You're worried about tripping over the boxes in the hallway."
3. Offer one, safety-centred next step they control: "Would you be comfortable if we spent just 15 minutes widening that hallway path?"
4. Explicitly promise you won't touch anything else without permission.

Why it re-engages

Hoarding clients are primed for shame and judgment. Empathic curiosity shows genuine respect, lowers defensiveness, and reframes the visit as protecting them, not attacking their belongings. By turning the goal into "reduce a danger you named," you replace overwhelming "declutter" pressure with an actionable, self-protective choice.

2. Work in 15-Minute Micro-Sessions, One Hazard at a Time

How to apply it

1. Set a visible timer for exactly 15 minutes.
2. Identify a single hazard (loose rug, spoiled food, blocked exit).
3. Stop the moment the timer sounds—even mid-task.
4. Acknowledge the win out loud and record it (photo, notebook, whiteboard).
5. If the client's anxiety spikes, pause and restart only if they consent.

Why it re-engages

Executive dysfunction and overwhelm make large tasks feel impossible. A rigidly time-boxed, one-hazard focus shrinks the mental load to something the client can tolerate and predict. Repeated micro-successes build self-efficacy: "I can do this again," which keeps them coming back.

3. Create a Safety-First Map

How to apply it

1. Draw or print a simple floorplan.
2. Walk through the home together, placing red stickers on urgent dangers, amber on moderate concerns, and green on safe zones.
3. After each micro session, convert one red sticker to amber or green.
4. Photograph the updated map and send it to the client between visits.
5. Keep the map on a fridge or door so progress is always visible.

Why it re-engages

Clients often struggle to see incremental change in a sea of possessions. A colour coded map externalises both risk and progress, providing a visual “scoreboard.” Tangible proof that danger is receding, even in tiny steps, reinforces hope and motivates further co-operation.

4. Introduce a “Non-Negotiable” Box

How to apply it

1. Find a clear plastic box and label “Do Not Touch.”
2. Invite the client to place any irreplaceable or anxiety-triggering items inside.
3. Promise in writing that nothing in the box will be moved or discarded without explicit future consent.
4. Keep the box in sight during sessions; it serves as a visible guarantee.
5. Review its contents only when the client volunteers.

Why it re-engages

The greatest trigger for refusal is fear of sudden loss. A protected, visible container proves you respect their attachments. This psychological safety net allows them to tolerate intervention elsewhere, because they know their most precious items are off-limits.



5. Anchor Every Session to a Personal Value

How to apply it

1. Early on, ask: "If your home felt a bit safer, what could you do or enjoy that you can't right now?"
2. Translate their answer into a harm-reduction target (e.g., "make room for your grandchild to play safely").
3. Begin each visit by restating that link:
4. "Today's 15 minutes moves us closer to a safe play area for your grandchild."
5. Celebrate even tiny wins tied to that value
6. Periodically revisit and, if needed, update the chosen value as progress is made and priorities shift.

Why it re-engages


People persist with hard change when the outcome advances something they personally cherish — not an outsider's standard of tidiness. Value based framing taps into intrinsic motivation, making each micro-task feel meaningful rather than arbitrary. When progress aligns with their own "why," they're far less likely to withdraw.

These five techniques create a harm-reduction framework that protects the client's immediate safety without stripping away dignity, autonomy, or ownership. By opening with empathic curiosity, we affirm the client's experiences and invite them to steer the agenda, preserving their sense of control. Time sensitive, micro-sessions and the colour coded safety map break an overwhelming task into visible, achievable wins; each success subtly rewires thought patterns from "nothing can change" to "small changes are possible."

The Non-Negotiable Box honours emotional attachments, proving that collaboration does not equal forced loss, while value focused goals ensure every action serves something the client personally cares about.

Together, these elements offer a controlled therapeutic environment where risk is reduced, insights are gained, and new decision-making habits can form, all while the individual remains the primary director of each step.

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.



Safety first :

Harm-reduction goals (clear exits, remove mouldy food) and predictable session structure



Lowers the threat response and makes engagement possible.

Choice & collaboration:

Shared decision-making tools (e.g., "Non-Negotiable" box, colour-coded safety map)



Restores autonomy and counters learned helplessness.

Trustworthiness:

Transparent communication, written agreements, no surprise disposals



Rebuilds trust eroded by past judgment or forced clear-outs.

Empowerment :

15 minute mini tasks and immediate praise for small wins



Reinforces self-efficacy and shifts self-talk from "I'm hopeless" to "I can do this."

Respect for lived experience:

Value focused goals ("space for the dog," "tea with friends")



Aligns the work with what truly matters, boosting intrinsic motivation and long term sustainability.

Further courses and resources available to professionals, including:

- **Conversation Starters**
- **The Art of Socratic Questioning**
- **Reframing and Cognitive shifts**
- **Guiding Avoidance into Action**
- **Desensitisation and Exposure techniques**
- **Consultancy and Advanced Support**



A Little About Me...

Rachel is a qualified hoarding specialist with a background in psychology and a passion for compassionate, person-centred care. Based in Reading, Berkshire, Rachel began her career in education, where she earned a strong reputation as a respected member of the local authority, curriculum developer, and advocate for inclusive learning.

In 2021, Rachel made the bold decision to step away from teaching and launch her own business. What began as a domestic cleaning service soon evolved into a highly specialised biohazard cleaning company — driven by Rachel's deep interest in how environments affect mental health.

Her work led her to explore the psychology behind hoarding disorder, drawing on her academic background and first-hand experiences to build an approach grounded in empathy, education, and trauma-informed practice. Now a qualified hoarding specialist, Rachel collaborates with social care teams, housing associations, NHS professionals, mental health and homelessness charities across the South East. She supports both individuals and organisations, offering direct services as well as training and consultancy on implementing effective, multi-agency responses using a small-steps approach.

Passionate about lifelong learning, Rachel is currently furthering her expertise with additional qualifications in Cognitive Behavioural Therapy (CBT) and hypnotherapy. She is also a proud mum of two grown-up children and continues to inspire professionals through her advocacy for respectful, therapeutic interventions in complex environments.



Rachel

