



## Research paper

## Scared and surrounded by clutter: The influence of emotional reactivity

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## ABSTRACT

**Background:** Home visits can improve treatment outcomes for hoarding disorder, but factors influencing the success of home visits remain unknown. As home visits expose individuals to clutter and fear, the present study examined the effect that fear and emotional reactivity have on the relationship between clutter and discarding behaviour.

**Methods:** Participants with at least subclinical discarding problems ( $n = 143$ ) were asked to save or discard personal possessions of varying value following an emotional induction that took place in either a tidy or cluttered context. Participants also completed questionnaires assessing hoarding severity, emotional state, and emotional reactivity, as defined by one's sensitivity, persistence, and intensity of reactions to emotional stimuli. **Results:** As expected, participants discarded more items in the presence of clutter and when feeling fearful. However, emotional reactivity moderated the relations between environmental context, acute emotional state, and discarding. Low sensitivity, low persistence, and high emotional intensity negatively influenced discarding in the cluttered context. When feeling fearful, low dispositional emotional intensity negatively influenced discarding in the tidy context.

**Limitations:** Individuals in the tidy environment reported higher levels of fear and anxiety than individuals in the cluttered environment after the fear induction. These differences could have contributed to the difference noted between the two contexts when examining the effect of emotional intensity tendencies.

**Conclusions:** Providing treatment in an environment more representative of the cluttered home can improve discarding or at the very least give therapists a more accurate picture of what clients do in the context that matters most.

## 1. Introduction

Excessive saving and persistent difficulty discarding possessions is a defining feature of hoarding disorder (HD) that leads to excessive clutter and distress (American Psychiatric Association, 2013). HD afflicts 2–5% of the population (Grisham and Norberg, 2010) and is associated with a quality of life as poor as that associated with schizophrenia (Saxena et al., 2011). Although effective, only a quarter of people who begin cognitive behaviour therapy (CBT) for HD experience clinically significant change (Frost et al., 2012; Gilliam et al., 2011; Muroff et al., 2012). For the average patient at the end of treatment, clutter remains three standard deviations above the normative mean (Tolin et al., 2015). The only known method for improving treatment outcomes is to provide more treatment sessions, including more home sessions, which have the benefit of reducing discarding difficulties (Tolin et al., 2015). However, more sessions are impractical for most clients and clinicians. Treatment is already costly at an average duration of 20 sessions (Tolin et al., 2015). Additionally, most clinicians are

unable to provide treatment outside of their offices. Thus, we urgently need to understand if provision of home sessions is the only method for increasing decluttering.

Emotion dysregulation is implicated as a maintaining factor for a variety of psychiatric disorders (Barlow, 1991; Davidson et al., 2002; Mennin et al., 2005) and may also play a role in HD. Individuals who have trouble regulating their emotions may turn to objects for emotional support, which may then further object attachment and make it more difficult to discard objects (Frost et al., 1995; Phung et al., 2015). Individuals with HD may be caught in a positive feedback loop when attempting to discard possessions. Thinking about discarding produces distress, distress leads to wanting objects for support, and then this increased emotional attachment leads to more distress about discarding. The high emotional reactivity associated with this feedback loop may impede discarding. The hyper-emotion theory of psychological illness proposes that the development and maintenance of behavioural and emotional problems stems from greater reactions to emotion-inducing stimuli (Johnson-Laird et al., 2006).

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In support of these assumptions, greater self-reported hoarding symptoms are associated with greater emotional reactivity in general and when imagining discarding (Shaw et al., 2015), greater sensitivity to anxiety (Hezel and Hooley, 2014; Timpano et al., 2009; Timpano et al., 2011), and more distress intolerance (Mathes et al., 2017; Phung et al., 2015). Moreover, individuals who tend to respond to aversive emotions with avoidance and impulsivity report being more attached to possessions and having greater problems with hoarding (Fernández de La Cruz et al., 2013; Phung et al., 2015).

A study by Timpano et al. (2014) suggested that fear may negatively impact discarding more than other emotions. In this study, participants watched four film clips meant to induce feelings of sadness, fear, disgust, and anger. After watching each clip, participants reported how strongly they felt the target emotion and how much they perceived they could tolerate that emotion. Timpano and colleagues then correlated these ratings with self-reported hoarding severity scores. Fear was the only emotion related to discarding difficulty. Greater difficulty discarding was associated with greater fear experienced during the film clip and greater perceived inability to tolerate that fear (Timpano et al., 2014). Unfortunately, Timpano and colleagues' study only tells us that fear is somehow related to discarding; it does not tell us how fear affects discarding when people are experiencing it in the moment.

To date, two experimental studies have examined how acute emotions influence discarding. In a non-clinical sample, individuals were randomised to a sad or neutral emotional induction and then asked to discard their personal possessions. For those assigned to the neutral emotion induction, greater object attachment predicted discarding fewer items. For those assigned to the sad emotion induction, greater chronic distress, greater perceived distress intolerance, and greater object attachment predicted discarding fewer items (Norberg et al., 2015). Despite different predictors of discarding, both groups discarded 37% of their belongings on average. In the second study, a non-clinical sample was randomised to undergo a psychosocial stress task or a non-stressful control task and then subsequently completed a hypothetical discarding task (Shaw and Timpano, 2016). The discarding task required participants to choose whether to save or discard items previously rated as difficult to throw away. Like the earlier study, greater perceived distress intolerance predicted less discarding for stressed but not control participants, but unlike the earlier study, participants in the psychosocial stress induction condition discarded more items than those in the control condition.

The different emotion inductions and/or discarding tasks used in these two studies may explain why negative emotions facilitated discarding rates in one study but not the other. The hypothetical discarding task required people to imagine a residential fire and needing to flee. This scenario may have invoked the fight-or-flight response. Likewise, fear induced by the social stress task in this study may also have invoked the fight-or-flight response (Moscovitch, 2009; Steinbeis et al., 2015). Stimuli that present an immediate threat are met with automatic physiological responses and freeze, escape, or resistance behaviours that allow an organism to cope with the immediate stressor (Barlow, 2002; Cannon, 1929; Lang, 1994). To produce goal directed behaviours, arousal increases and attention becomes focused on the immediate situation and information salient to the organism's survival (Cannon, 1929). This state of arousal and focused attention overrides everyday preoccupations. In the case of HD, fear may overcome one's usual avoidance of discarding by overriding any anxious concerns about needing possessions in the future. Thus, fear inductions may acutely increase discarding rates. On the other hand, sadness is associated with a need for social support (Balsters et al., 2013; Rivers et al., 2007). As social support is often unavailable for individuals with HD who tend to experience a high degree of interpersonal problems and social isolation (Steketee et al., 2001), acute sadness may increase their perceived need to rely on objects for emotional support. Thus, different emotions may impact discarding differentially. Acutely, sadness may be detrimental to treatment goals, but fear may be facilitative.

The presence of clutter may also influence treatment goals. Being around clutter, as opposed to a tidy therapist's office, may remind clients of the bigger picture (Frost and Steketee, 2014). Rather than focusing on just a few items brought into the session, clutter may help to remind clients of the negative consequences of their saving, and hence facilitate discarding. When individuals are discarding a sampling of their possessions within the therapist's office, their clutter may be out of sight and out of mind. This form of clutter blindness may lead them to discard fewer objects within the therapist's office than when at home. Then again, clutter may increase discarding by increasing stress. Anecdotally, many therapists have suggested that participants with HD appear overwhelmed by the enormity of the task when faced with discarding decisions in the home environment (Frost and Steketee, 2010). Behavioural and developmental studies have found that cluttered environments are associated with increased stress (Coldwell et al., 2006; Corapci and Wachs, 2002; Dumas et al., 2005; Evans et al., 2001), and if the stress is high enough to induce the fight-or-flight response, it may facilitate discarding behaviour by prompting action.

Patterns of responding to fear and clutter for those with HD may be influenced differentially by the three facets of emotional reactivity – sensitivity, persistence, and intensity. Although a tendency to experience high emotional intensity may assist in invoking escape and resistance fight-or-flight responses in the context of a fear stressor and lead to an acute increase in discarding, emotional sensitivity and persistence may encourage freezing or avoidance of discarding in the context of a fear stressor. Emotional sensitivity refers to how easily one becomes overwhelmed by emotional responses to various stimuli, whereas emotional persistence refers to the duration of an emotional response (Nock et al., 2008). When escape and resistance to threat are ineffective or unavailable, a freeze response is more likely to occur (Arduino and Gould, 1984; Korte et al., 2005). For example, individuals who are sensitive to anxiety report more perceived immobility when subjected to the fear response through breathing CO<sub>2</sub>-enriched air than those less sensitive to anxiety (Schmidt et al., 2008). Anxiety sensitivity is typically associated with a prolonged reaction and increased alertness to anxiety-producing stimuli (Reiss et al., 1986), and thus individuals who recover slowly from emotions may also be inclined to freeze rather than mobilise when feeling fearful. In a hoarding context, freezing may resemble the saving of possessions.

Based on these assumptions, we expected that individuals would discard more possessions 1) when feeling fearful than when experiencing a neutral emotional state and 2) when surrounded by clutter as opposed to a tidy environment, 3) such that individuals will discard the most when in a cluttered, fearful context and the least when in a tidy, neutral emotional context. However, we expected that these relationships would be moderated by emotional sensitivity and emotional persistence, such that high emotional sensitivity and high emotional persistence would negate the beneficial effects that fear and physical context have on discarding. To test these hypotheses, we randomly assigned persons to either a fearful or neutral emotional induction and to either a tidy therapist's office or a cluttered living room and then asked them to discard their personal possessions.

## 2. Methods

### 2.1. Participants

Participants included students and community members who were recruited via flyers distributed on the same university campus where the research was conducted, via social media, and from the psychology undergraduate research participant database. Recruitment materials directed potential participants to complete an online pre-screening eligibility survey that collected scores from the discarding subscale of the Saving Inventory – Revised (SI-R; Frost et al., 2004). To be invited to participate in the study, individuals were required to be 18 years of

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