



The predictive value of different reasons for saving and acquiring on hoarding disorder symptoms

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ABSTRACT

Few studies to date have studied the particular reasons endorsed by individuals with hoarding disorder (HD) for why they save or acquire certain objects. Understanding how reasons for saving and acquiring objects influence hoarding severity and the degree to which the relationship depends on gender or age differences can have implications for the treatment of HD. The current study looked at reasons for saving and acquiring in 84 individuals diagnosed with HD. Consideration of the usefulness of an object as a reason for saving was the most consistently uniquely predictive of all of the reasons examined for saving and acquisition when controlling for gender differences and other endorsed reasons. These results may suggest that targeting specific reasons for saving and acquiring may be an efficient way to reduce hoarding severity, specifically related to ideas of utility and waste.

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1. Introduction

Individuals diagnosed with hoarding disorder (HD) are characterized by urges to save objects, difficulty discarding current possessions, and homes with rooms cluttered as to prevent their intended use (American Psychiatric Association, 2013). One aspect of HD that is little understood is the relationship between hoarding severity and the reported reasons those with HD endorse for saving or acquiring objects. Often, hoarding studies have speculated the reasons for saving and acquiring objects, such as that an object contains important information or would otherwise be useful (Steketee, Frost, Wincze, Greene, & Douglass, 2000). Few investigations to date have studied the particular reasons for saving or acquiring objects in this population. Of those that have examined individual rationale for saving/acquiring, most utilized samples with “compulsive hoarding” or “hoarding symptoms,” and not individuals meeting the DSM-5 criteria for HD. Further, many utilized non-clinical, college-aged samples. The following study will explore reasons for saving/acquiring in a formally diagnosed HD sample.

Investigations have shown a link between the number of reasons to save or acquire items in both HD and non-clinical samples. In the early cognitive-behavioural conceptualization of

compulsive hoarding symptoms, it was believed that those with hoarding saved items due to sense of responsibility (being prepared and preventing harm to object), sentimental attachments, or for instrumental reasons (such as future need) (Frost & Gross, 1993; Frost & Hartl, 1996; Frost, Hartl, Christian, & Williams, 1995). These initial cited reasons for saving have held up over the years with subsequent investigations and continue to be further refined.

A study on reasons for saving in college students found that a higher endorsement of reasons for saving newspapers and magazines was strongly related to the perceived value of the periodicals and negatively associated with the intentions of the students to discard the magazines and newspapers (Frost, Steketee, Tolin, & Renaud, 2008). Among this nonclinical sample, higher endorsement of reasons for saving and the perceived value of periodicals were both significantly associated with hoarding symptom severity. Frost et al. also found that 14 self-identified individuals with compulsive hoarding reported more reasons for saving objects than did 13 non-clinical individuals, but the specific reasons endorsed by the hoarding group were not identified. The self-identified HD individuals also perceived items as having higher value than did their non-hoarding counterparts (Frost et al., 2008), although no conclusions can reliably be made as to whether individuals with hoarding disorder would be able to generate more reasons to save an object because of the higher value that they place on it.

The Savings Cognition Inventory (SCI; Steketee, Frost, & Kyrios, 2003) has been utilized to investigate beliefs about items when considering whether or not to throw them away. The four

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categories of reasons for saving examined in the SCI include emotional attachment, memory, control, and responsibility. Individuals with compulsive hoarding (with and without co-morbid OCD) report significantly higher cognitions about saving items (as measured by the SCI) than do non-hoarding controls (with and without OCD), with reasons involving emotional attachment being endorsed most highly by all groups (Gordon, Salkovskis, & Oldfield, 2013; Steketee et al., 2003). Individuals meeting the proposed DSM-5 criteria for HD have also been found to rate items on the SCI higher than self-identified “collectors,” with both groups scoring highest on the emotional subscale (Nordsletten, Fernandez de la Cruz, Billoti, & Mataix-Cols, 2013). Finally, Reid et al. (2011) examined the relationship between reasons for saving and hoarding severity in a sample of community-dwelling, non-hoarding older adults. Higher scores on a revised version of the SCI correlated moderately with the Saving Inventory-Revised (SIR; Frost, Steketee, & Grisham, 2004) total score and all three subscales (Difficulty Discarding, Acquisition, and Clutter). Thus, the frequency and strengths of beliefs about objects is associated with hoarding severity. This suggests that, in general, individuals can recall more instances of having saved an item because of an emotional reason than because of memory issues, feelings of control, or responsibility toward the object. Further, individuals who save items more (i.e., self-identified compulsive hoarding individuals) are also more likely to endorse having reasons to save items.

Grisham et al. (2009) examined reasons for saving and hoarding severity as predicting attachment to objects in self-reported OCD patients with clinically severe hoarding problems. Although both hoarding severity and higher SCI scores were significantly related to the attachment endorsed for a newly acquired object, only the level of attachment at the time of acquirement significantly predicted the level of attachment to the object one week later (Grisham et al., 2009). Although individuals with hoarding problems may initially feel emotionally attached to an object based on their abilities to generate reasons to save it, their attachment to the object at a later time may not be predicted by either the amount of reasons endorsed about why they may wish to save it or their overall hoarding symptoms. Grisham et al. (2009) did not explore which particular items in the SCI predicted attachment of the newly acquired object. Further, the analyses were conducted on individuals with hoarding symptoms as a result of OCD, not HD.

Although the SCI represents an already validated measure assessing reasons for saving, the SCI focuses more on reasons representing non-normal relationships with objects (e.g., “I am responsible for the well-being of this possession;” Steketee et al., 2003) and not on more general reasons for saving or acquiring possessions that are more likely to be endorsed by non-clinical individuals. This represents a major limitation of the SCI because it is not able to assess reasons for saving or acquiring that represent more normal relationship with objects, such as that an object might possess important information or have sentimental value. Further, the SCI assesses reasons for saving objects through specific but indirect items (e.g., “Throwing away this possession is like throwing away a part of me;” Steketee et al., 2003) instead of directly querying participants if they save items for a particular broad category of reasons (e.g., emotional attachment), which might manifest in different specific cognitions in different participants. A further limitation of the SCI is that the SCI is limited to why patients chose to save an object, not why they chose to acquire it in the first place. Although individuals with HD often acquire objects passively (e.g., junk mail or empty food containers), some participants diagnosed with HD may also have problems with excessive acquisition of new possessions (American Psychiatric Association, 2013). There has not yet been a systematic investigation of the possible reasons that individuals with HD

might choose to excessively acquire objects. Thus, there is a need to investigate the levels with which individuals with HD endorse different general categories of reasons for saving and acquiring objects.

Nordsletten et al. (2013) queried 29 individuals meeting the proposed DSM-5 criteria for HD and 20 self-identified collectors about specific reasons they might have difficulty discarding possessions (e.g., Useful in future, Sentimental attachment, Monetary value, Avoid waste, Object is unique, Misuse of personal info, Taught to save, Item part of personal identity, Fear bad consequence) and the reasons they acquire new items (e.g., Useful in future, Compelled to acquire it, Fear bad consequence, Compulsive shopper). The most frequently endorsed reason for acquisition or difficulty discarding in both samples was the idea that an object might be useful in the future (Nordsletten et al., 2013). The only items to differentiate collectors from individuals with HD were “Avoid waste” and “Misuse of personal info” as reasons for difficulty discarding as well as “Useful in future” and “Compulsive shopper” as reasons for acquisition. Unfortunately, Nordsletten et al. (2013) did not examine the degree to which endorsement of each item predicted hoarding severity, nor did they control for demographic variables such as gender.

A recent presentation at the Association for Behavioral and Cognitive Therapies (Sinopoli, Frost, Tolin, and Steketee, 2010) examined the influence of endorsement of different reasons for saving or acquiring objects on hoarding severity in individuals with compulsive hoarding, as well as in individuals with OCD or with no clinical diagnoses. Based on prior clinical experiences, Sinopoli, Frost, Tolin, and Steketee (2010) queried participants on the frequency with which they saved items because of reasons of information, emotional attachment, avoiding waste, or aesthetics. Their sample was mostly female (68%) and middle-aged (48.7%). Participants with compulsive hoarding problems more highly endorsed significantly more reasons for saving than the OCD or control groups, and there was no difference in the frequency of reasons endorsed between the OCD and the control group. Individuals with compulsive hoarding reported that avoiding waste was the most frequent reason for saving an object, while the OCD and community control groups reported emotional reasons as their most frequent reason for saving objects (Sinopoli et al., 2010). Within the compulsive hoarding group, when controlling for all other reasons for saving, both avoiding waste and information were significantly predictive of the SI-R total; information, emotional reasons, and avoiding waste were significantly predictive of the SI-R Difficulty Discarding; and only avoiding waste was significantly predictive of both the SI-R Clutter and the SI-R Acquisition. Unfortunately, no information is available about how the sample was recruited or diagnosed and so generalizations cannot be made about whether or not the participants in the study would have met DSM-5 criteria for HD.

With respect to compulsive buying, a phenomenon closely related to HD, individuals report that the acquisition of objects would compensate, reward, or neutralize negative feelings (Krios, Frost, & Steketee, 2004). Individuals suffering from compulsive buying report similar reasons for acquiring items compared to compulsive hoarding samples, including emotional attachment and feelings of security (e.g., Frost & Gross, 1993; Frost & Hartl, 1996; Frost et al., 1995). Further, those with self-reported compulsive buying endorsed greater concerns about maintaining control over their buying and choices. However, beliefs about the power of buying to reduce negative emotions, emotional attachments, concerns about lost opportunities, and beliefs of uniqueness of the purchase were more strongly related to actual buying behaviour than concerns about control.

The current study aimed to further research on reasons for saving and acquiring in individuals with HD in two major ways: (1) examine any differences in level of endorsement and

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