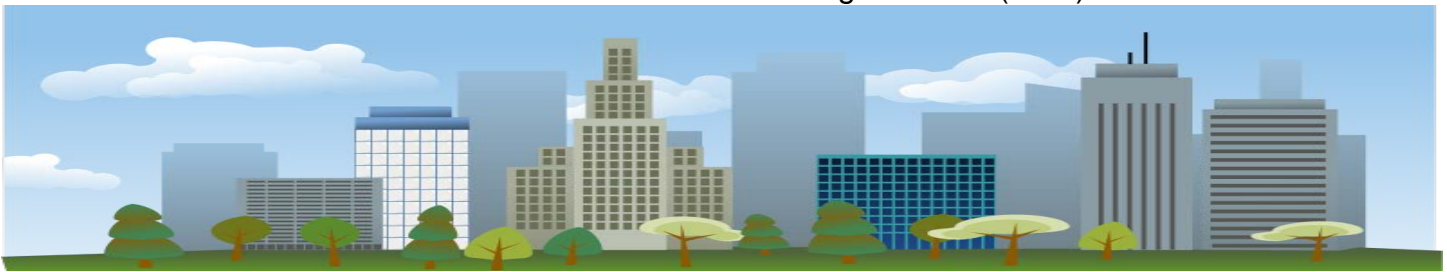


'Snapshot' of Hoarding in Edmonton

Initiative of the Edmonton Hoarding Coalition (EHC)



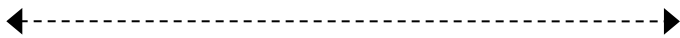
As the city of Edmonton continues to expand there are growing concerns regarding hoarding behaviours and their associated societal and functional consequences. High rates of social service access are often seen in individuals with hoarding disorder and compulsive hoarding has been demonstrated to be a significant contributor to public health burden. In an effort to better understand incidents of hoarding in our community the EHC conducted a data collection project in May 2016. The project employed an online survey to collect details about the frequency and duration of hoarding associated services *being accessed* by city residents. Information was also obtained about key safety and health risks that community agencies encountered in the course of service provision.

A total of 257 online surveys were submitted by 18 different community organizations, resulting in:

1111 total hours of service time
673 instances of service access
99 minutes on average per encounter

Participating agencies included: Bissel Centre, Bylaw, Canadian Mental Health Association, Community Geriatric Psychiatry, Edmonton Community Legal Centre, Environmental Public Health, Greater Edmonton Foundation, Glenrose Outpatient Psychiatry, Home Care, North Edmonton Seniors' Association, Primary Care Network, Terri Bailey Counselling Services, Seniors' Association of Greater Edmonton, 211 and various professional organizing companies.

On average agencies reported that 2 other services providers were known to be involved, with up to 7 involved agencies indicated in some cases.

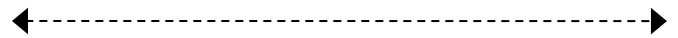


Household Composition:

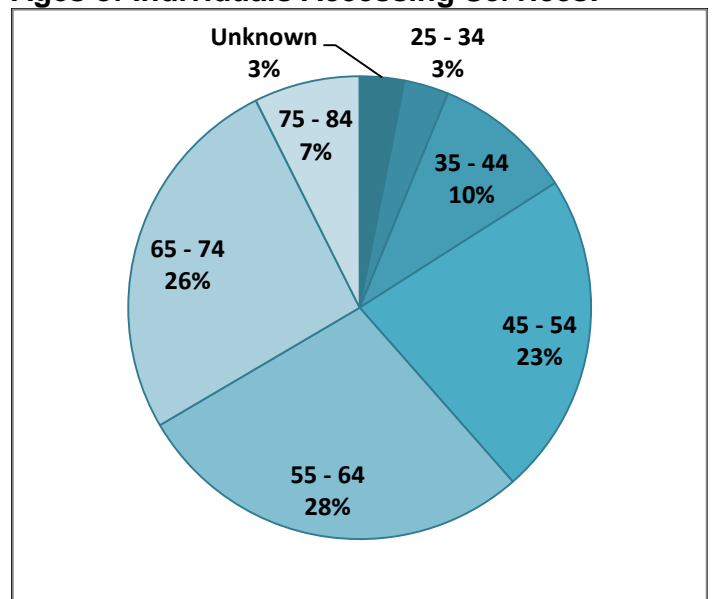
- ▶ 36% of residences were known have more than one individual living in the home
- ▶ 5% of residences were known to have domestic animals present in the home

Housing Information:

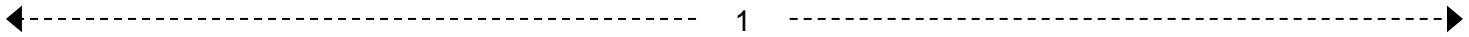
- ▶ Client known to be the home owner in 42% of cases
- ▶ The home was known to be subsidized in 20% of cases
- ▶ Of the known cases 18% had contracted clean-ups ordered in the past
- ▶ An eviction notice had been issued to the client in 8% of reported cases
- ▶ An unfit for human habitation order had been issued by the Department of Public Health in 9 of the 257 surveys submitted
- ▶ In 18 cases it was reported that the client had been unable to receive services of some kind due to the hoarded environment



Ages of Individuals Accessing Services:



*no responses returned involving individuals under 25 or older than 84

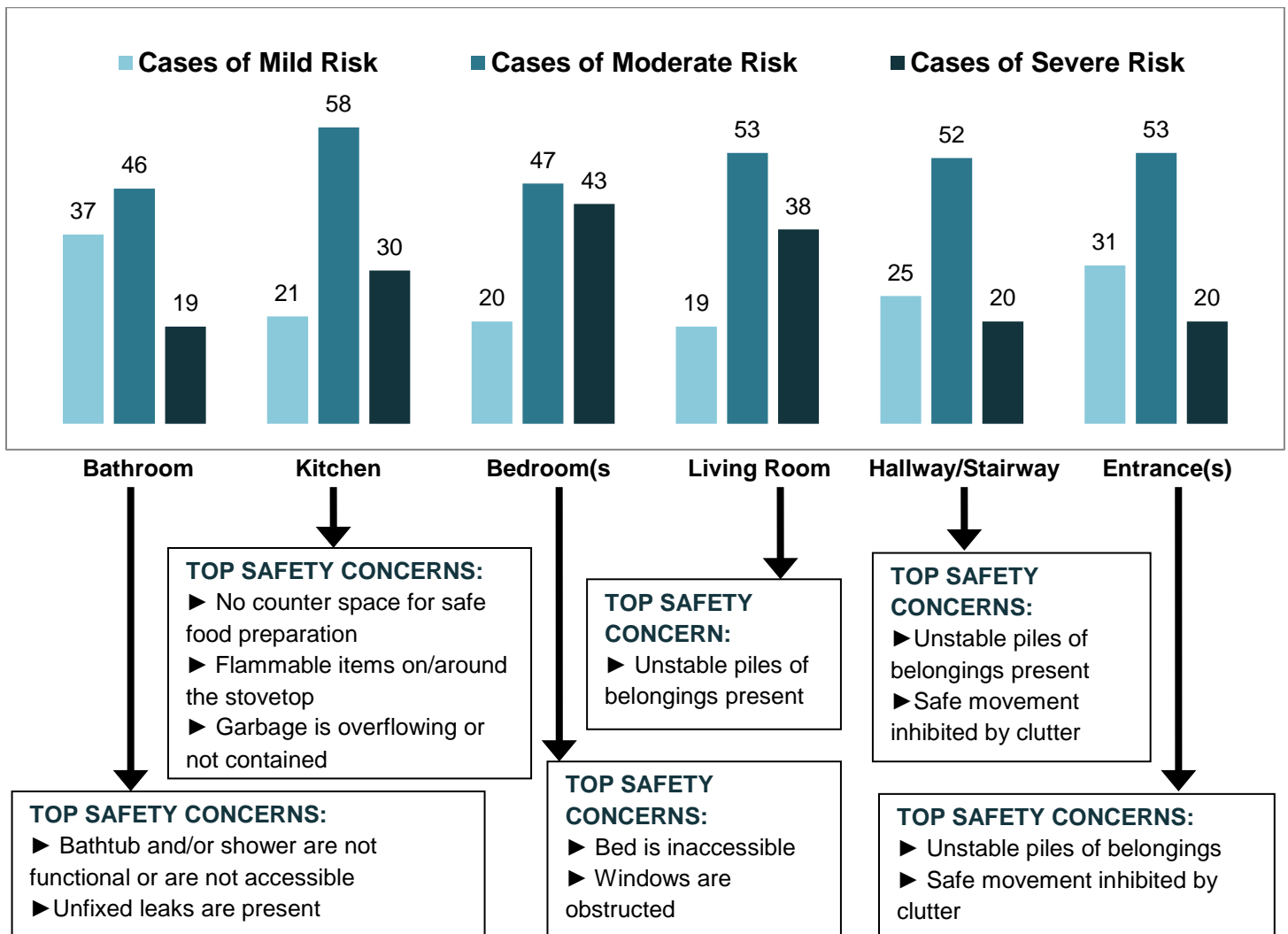


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Overall Risk Assessment Ratings: If conditions were known service providers were asked to rate the severity of the hoarded environment based on descriptions of mild, moderate or severe risk.

Mild risk level ▶	Manageable level of clutter; interferes with optimal use of room; no difficulty navigating; clutter creates temporary hazards
Moderate risk level ▶	Clutter impedes free movement in the room; functional use of the room is impaired; clutter creates moderate hazards
Severe risk level ▶	Clutter is severe; navigation is difficult; use of the room is nearly impossible; serious hazards due to clutter



Other Reported Environmental Safety Concerns:

- ▶ Structural concerns (e.g. damaged floors, leaking roof, mould, caved walls)
- ▶ Access to utilities is restricted (e.g. no running water, non-functioning furnace)
- ▶ Fire safety concerns (e.g. inappropriate use of extension cords, clutter within 3 feet of a heat source, blocked or unsafe heat vents, smoke alarms not present or non-functioning)
- ▶ Restricted access to and/or use of medical equipment (e.g. walker, CPAP machine)
- ▶ Hoarded environment resulting in need for medical care (e.g. air quality concerns, falls, inpatient admissions within the last year)
- ▶ Delayed discharge from hospital due to hoarding related safety concerns