

Forgetful and Forgotten: When Hoarding and Dementia Collide

Holly Zaborowski, LCSW NCG
Shay Jacobson, RN MA NMG
Martha Kern



“I let things slowly get away from me.”

This is what Mildred told us as she teetered atop a pile of garbage at the front door of her suburban townhome.

Mildred, an 80-year-old woman, lived alone and had clearly experienced steady erosion in her cognitive status. She was unable to comprehend and respond to a series of overtures made by the village concerning the condition of her home. After Mildred failed to respond to several letters, a village employee paid a visit to the house. The employee attempted to discuss the violations with Mildred but it soon became apparent that she was unable to manage a clean-up that would, by necessity, be impressively large; she was in violation of countless ordinances. The village employee contacted the local Department on Aging who made a referral to LCG.

Field of Debris

LCG paid a visit to Mildred and found her home to be in deplorable condition. Although Mildred had two bedrooms upstairs, they were both too hoarded with clothing, newspapers and other household items to be used by Mildred. The upstairs bathroom and washer and dryer were in obvious disrepair and buried under debris, making

access impossible. Downstairs Mildred had a very old and filthy sofa that she was using as a bed. Mildred's kitchen was very dirty with dishes piled high in the sink and pots of left-over food spoiling on the stove top. The downstairs bathroom was also in disarray with no working lights and no shower. It was obvious from the looks of Mildred that she had not bathed or worn clean clothing in a very long time.

After talking with Mildred and two of her neighbors it was determined that Mildred never had children and her husband had passed away suddenly a few years before. It was likely that Mildred had begun to develop dementia before the passing of her husband as he was managing all of the bills and the upkeep of the small townhome. After his death, Mildred, by her own admission, felt her world slip from her control.

Mildred lived across the street from the local hospital and it was there that she found hot meals in the cafeteria. The staff at the hospital stated that she had been wearing the same clothing every day for approximately six months. When Mildred did try to cook for herself she used matches to light her gas burner as the starter on her stove was not functioning. Hundreds of spent match sticks could be seen all over Mildred's counter tops and kitchen floor.

Most of Mildred's bills, we discovered, were automatically debited from her checking account, a service established by her husband; a review of her checking account statement revealed, however, that Mildred was being routinely debited by an array of charities that had likely coaxed banking information from Mildred over the phone.

Mildred was living on a fixed income and could not afford the money that she was spending monthly on charitable donations, nor could she remember or understand the possible origins of these charges.

Problems, Solved

Mildred was living in a home that was likely to be condemned by the Village, could not manage her own financial affairs and had not been to her doctor, filled her prescriptions or bathed in the better part of a year. Mildred needed help desperately. With the blessing of Mildred's sister who had been located in Tennessee, LCG became Mildred's guardian of person and estate. LCG took Mildred on tours of area supportive living programs and helped her to choose a facility after she reported that she did not want to live alone any longer.

LCG used its sister company, Lifecare Home Solutions (LHS), to find a caregiver for Mildred to keep her safe in her own home until the application process for supportive living was completed. When it was determined that none of the furniture in Mildred's home could be salvaged for use in her new facility, LCG staff helped Mildred shop for a new bed, mattress, dresser and other furnishings to make her new home comfortable. LCG took all of Mildred's clothing to the laundry and found personal keepsakes and photographs to personalize Mildred's space. We even found the urn holding Mildred's late husband's ashes. Mildred had lost this urn in the chaos of her home years before and was overjoyed to have it back.

After Mildred was safely transitioned to her new supportive living center, the Lifecare Home Solutions Property Services team cleaned out Mildred's personal property, spruced up the interior of the house with paint and a carpet cleaning, and hired a realtor to list the home for sale. After the home was sold, LCG put the proceeds from the home sale into a pooled income trust and sought and obtained Medicaid benefits for Mildred.

Mildred, Act II

Mildred is now living happily at a supportive living community that accepts her Medicaid coverage and takes care of her medical needs. Mildred takes nothing for granted. She is excited to receive regular haircuts and manicures and enjoys dressing in clean clothes every day. Her space is clean, comfortable and personalized for her; many of her hoarding behaviors have been replaced through ongoing "coaching" from our staff and a marked increase in her social activities. After worrying about her safety for years, Mildred's sister and her old neighbors report that they are grateful to see her so well cared for and in such a safe environment. The collaborative efforts of the Lifecare Team and our Surround Care model made it possible to rescue Mildred from her disorganized and distressing environment, and from the confusion that completely undermined her own problem-solving abilities.

There are thousands of Mildreds in the world, living alone, cognitively impaired, and incapable of improving their own situations. They tend to escape notice, except perhaps by those who would exploit them. Mildred told us she "let things slowly get away from her" and it was truly a privilege to give what she valued most back to her – her dignity and the sense that her world is in order.