



A Place for Stuff: Clutter Can Be Hazardous to Your Health

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George Carlin's famous routine about your house as a place to keep your stuff while you go out and get ... more stuff, is true. We are surrounded by stuff.

Psychologists estimate that 4 million Americans do not ever throw anything away.

During the last 30 years the size of the average American home has grown 53 percent, from 1,500 square feet to a little over 2,300 square feet. There are now more than 35,000 long-term storage facilities nationwide. Despite the larger homes, 25 percent of homeowners with two-car garages utilize the space exclusively for storage and park their cars in the driveway. So great are our habit and attachment to acquiring stuff, we are willing to rent space to hold it, even though the monthly upkeep is typically greater than the worth of the contents themselves.¹

We are genetically programmed to collect, accumulate, and save a variety of things. Our forebearers saved anything that could be materially useful. They had to make everything themselves, and consuming, collecting, and storing food was critical to survive the long winters and famine. So to want more and to keep it is fundamentally human—a common, usually normal, and natural behavior.

Clutter—Not Just Junk

The word “clutter” usually evokes the thought of too many physical things in our office, home, or car; piles of papers on the table; or a hall closet stuffed with things you no longer need. However, clutter comes in many forms: material goods, resentment, investments, and relationships. Emotional clutter can be mild or toxic, somewhat limiting or downright devastating. Unhealthy relationships that drain our energy and spirit amount to emotional clutter, as do negative beliefs about ourselves that gnaw at our self-esteem, and the endless self-talk so many of us engage in throughout the day. Clutter is an irritating distraction that can make it difficult to relax or focus. As our physical environments become cluttered and disorganized, our thoughts and ideas also become more scattered or lost.

Clutter and Stress

Recent studies show there is a direct correlation between clutter and stress.^{1,2} It has been found that clutter can lead to health problems including stress, weight gain, and physical hazards from an unhealthy environment. Most experts agree clutter can be a contributing factor to noncompliance to taking medications and keeping appointments, being able to exercise and eat well, and other healthy behaviors.

Just sitting in a cluttered room can create stress. Even those who seem oblivious are aware of everything in their environment on a

subconscious level.

Living in a cluttered home can create subtle, constant, low-grade stress. Anxiety over clutter messes with your brain's alpha waves and interferes with your sleep, making you more fatigued, impacting your hormone levels, and increasing production of cortisol. Some researchers suggest this can ultimately lead to weight gain.³ The more clutter, the more overwhelming the thought of removing it becomes, leading to greater stress, overwhelming fatigue, and depression.

Clutter also drains us of our time. People in cluttered homes spend extra time looking for lost items such as keys, money, shoes, tools, and the remote. The American Demographics Society reports that Americans as a whole waste 9 million hours per day searching for misplaced items, and 23 percent of adults say they pay bills late, with penalties, because they lose them.¹

Excessive clutter and disorganization are often symptoms of bigger health problems. The thought of removing clutter often creates anxiety because it seems unattainable, and it is much easier to try and ignore it. However, by ignoring the task of de-cluttering, feelings of hopelessness and anxiety creep into our thinking. Studies show that anxiety and stress can also then cause medical problems.^{2,3} According to the Centers for Disease Control and Prevention, 80 percent of our medical expenditures are now stress related.

Unfortunately, the impulse to collect and save can develop into problematic behavior that experts consider a subcategory of clinical obsessive-compulsive disorder. Known as hoarding, it can lead to tragic consequences. Understanding the behavior of a clinically significant hoarder is difficult. The behavior appears in three major manifestations—compulsive acquisition of useless possessions, living spaces so cluttered they can't be used, and distress or an inability to function because of the hoarding.^{2,3} Researchers suspect that hoarding arises when fronto-subcortical circuits that normally inhibit this behavior are interrupted. The syndrome can appear in patients as young as age 13 and tends to worsen with age. However, the idea that clutter, at least in its extreme form, is a treatable illness is gaining support.

Cleaning up the Clutter

Practical and psychological methods of helping individuals overwhelmed by clutter range from common sense ideas to intense counseling and treatment. Whether it is hiring an organization expert, routinely setting aside a day to clear off the desk or clean the garage, or tackling the closets with each new season, it involves doing things differently. Resolving the emotional issues is much more difficult, but just as necessary and may require mental health counseling. Support groups exist and at least 50 cities in 17 states have chapters of Clutterers Anonymous, a 12-step recovery program.⁴

Changing the cluttering habit is the same as changing any other bad habit: The cluttering individual must want to change. We need to understand and learn how to avoid and stop bad habits by finding

He who hoards much loses much.

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good alternatives. Many of our repeated behaviors are cued by everyday environments. Changes in the environment promote changes in behavior. Therefore, it is important to create environments that make it easier to deal with existing chaos, frustration, and stress.

Clutter causes stress, daily frustration, time wasted, and it is a stressor we can control. Clearing clutter is very similar to going on a diet, learning to manage your time, or finally getting into an exercise routine. The process is the same...break the task into smaller, simpler steps.

All change is hard. With relatively rare exceptions, your current physical and mental condition is a result of habit. Working hard is a habit. Accomplishing more than is required or expected and delivering on your promises are habits. Happiness is a habit. A fulfilling social and family life and involvement in your community and in causes for which you are passionate are habits. Exercise, eating, and sleeping are habits. Research on personal change has demonstrated that successful change comes in well-defined stages.^{5,6}

Additional research into smoking cessation and alcohol abuse has advanced our understanding of the change process. Behavior change is rarely a discrete, single event; the patient moves gradually from being uninterested (pre-contemplation stage) to considering a change (contemplation stage), deciding and preparing to make a change, then taking and maintain actions that support change.⁵

Pre-contemplators haven't yet decided to make a change. Although you know exercise is healthy you aren't quite convinced the benefits outweigh the trouble of getting started. Clutter reduction is often the first step for people who struggle with time management.

Contemplators are thinking about change but seem to exist in a state of inertia. There's some tension or unease in their lives that could be eased if they changed some of their behavior and are becoming aware of what that something needs to or could change.

Any change in behavior requires preparation, a plan that you will keep your awareness and commitment high throughout the change. Making change without preparing can lead to feelings of frustration and stress. You are breaking long-established patterns. Informing family and friends of your goal, arranging your environment to avoid things that hinder success, putting the appropriate support in place, and finally, expecting a certain event to occur, then behaving in a way as to bring it about, all lead to success.

Doing things outside your routine is stressful. Lists, plans, and best intentions require a wealth of support to become fully integrated into your life.

Recognize it will take twice as long as you think to implement change and that you may fall back into old patterns of behavior. If you're prepared, you can minimize the effect a relapse has on

your change efforts, both physically and emotionally, and get back on track.

Finally you reach a point when the change is no longer change, but just how you do things. You have integrated the new behavior into your lifestyle. But it is important to keep a level of awareness, especially in times of stress. Studies show that in times of stress or conflict, people are most likely to go back to comforting behaviors.

Behavior change is not always easily accomplished in one step and often involves going through different stages at your own pace. It takes time and attention, and on some days, both can feel like taking two steps forward and one step back. The key is persistence, being kind to yourself, remembering that you're human.

Getting organized is unquestionably good for both mind and body. Taking action—even if it only involves committing 10 minutes of your time each day to organize—is empowering, reduces feelings of helplessness, and relieves stress.

Make Room for Something Better

Making a lasting change in behavior is rarely a simple process, and usually involves a substantial commitment of time, effort, and emotion. Most people will contribute significantly to their sense of personal control and peace of mind by systematic de-cluttering their work or living space. When your space is filled with too much stuff, there isn't room for anything new to come to you. The most effective strategy is the one that works for you. Give or throw away those things that are detracting from your time and energy. Keep everything that adds real purpose and value to your life. After all, maybe the children will need them someday. ■

Resources

1. Flom J. The Psychology of Clutter. *Chicago Wellness Magazine*. 2008; 2:12.
2. Steketee G, Frost R. Compulsive Hoarding: Current Status of the Research. *Clinical Psychology Review*. 2003; 23, 905–927.
3. Saxena S. Recent Advances in Compulsive Hoarding. *Current Psychiatry Reports*. 2008; 10(4):297-303.
4. <http://www.mentalhealthamerica.net/>
5. Norcross J, Prochaska J, DiClemente C. *Changing for Good*. 1994. William Morrow & Co Inc.
6. Walsh P. *It's All Too Much: An Easy Plan for Living a Richer Life with Less Stuff*. 2007. Free Press.