INSTITUTE FOR CHALLENGING DISORGANIZATION®
Education. Research. Strategies.

FACT SHEET INFO

Factors Associated with Disorganization

Disorganization may arise from various underlying factors. Engaging a qualified organizing professional, especially one specializing in chronic disorganization, can help individuals identify the primary causes of their challenges and formulate effective approaches to resolution. The categories below outline typical conditions and contributing elements associated with disorganization. This list is not comprehensive and should **not be used for diagnostic purposes**.

Brain-Based and Health-Related Factors	External and Interpersonal Factors	Beliefs and Mindset Factors
Neurological-Based Conditions	**Life Crisis**	**Beliefs about Possessions**
Refers to nervous system conditions (brain and nerves) that could interfere with activities of daily life (ADLs). • Dementia or Alzheimer's disease (AD) • Fibromyalgia • Parkinson's disease • Multiple sclerosis (MS) • Non-traumatic brain injury (NTBI) • Traumatic brain injury (TBI).	*Life events that have a major impact on the personal and family dynamics. What was known as normal is not anymore.* • Accident • Death of a loved one • Family/personal crisis • Grief • Health emergency • Job loss.	*Beliefs about possessions can significantly shape how individuals approach organization* • Object overvaluation • Scarcity mindset: *Fear of waste, acquisition for perceived future needs.* • Reluctance to discard • Legacy clutter: kept for sentimental *obligation, guilt.*
Neurodevelopmental conditions	**Transitions**	**Attachments to Possessions**
Individuals may process internal/ external information differently and with difficulty. • Attention deficit/hyperactivity disorder (ADHD) • Auditory or visual processing disorder • Autism spectrum disorder (ASD) • Nonverbal learning disability (NVLD) • Specific learning disorder (SLD).	*These changes can increase the level of disorganization but are often managed with adaptive systems and support.* • Birth or adoption of a child • Caregiving • Divorce or separation • Household merging • Relocation.	*Strong bonds with possessions can influence the perceived value.* • Attachment to objects due to sentimental, utility, or intrinsic reasons • Identity-based attachment: *self-worth, personal history, or legacy.*
Executive Function Challenges	**Family and Personal Dynamics**	**Emotional/Behavioral Patterns**

Skill challenges while performing common tasks.
• Impulse control—*distractibility, mindless acquisition*
• Flexible thinking—*inability to change plans if something gets out of control*
• Working memory—*forgetfulness, memory deficits, time blindness*
• Self-monitoring—underestimating how much time tasks require
• Planning and prioritizing—*difficulty in task breakdown/ineffective prioritizing*
• Task initiation—*being stuck in waiting mode/inability to make the first step*
• Organization—*losing things, decision-making difficulties, decision fatigue.*
	The way these dynamics flow may encompass additional challenges hindering the organizing process.
	• Abundance of possessions
	• Isolation/Solo-agers
	• Changes in social interaction
	• No social support system
	• Lack of goals
	• Uncertainty of the future
	• Over scheduling
	• Role overload.
		Emotions and behaviors can have an impact on organization.
		• Procrastination
		• Avoidance
		• Emotion-driven acquiring/saving
		• Overthinking—*stuck in the "what if"*
		• Decision fatigue
		• Limiting beliefs like:
		  ○ *I've always been disorganized*
		  ○ *I might need this someday*
		  ○ *I can't change*
		  ○ *I don't know where to start*
		  ○ *All or nothing thinking*
		• Fear of making mistakes—*perfectionism.*

ICD® Fact Sheet – Factors Associated with Disorganization - © 2026 ICD®.
This fact sheet may be reproduced for educational purposes only; copyright must be noted.
Fact sheets and other informational material may be obtained from the ICD® website at challengingdisorganization.org.

INSTITUTE FOR CHALLENGING DISORGANIZATION®
Education. Research. Strategies.

FACT SHEET INFO

Brain-Based and Health-Related Factors	External and Interpersonal Factors	Beliefs and Mindset Factors
Mental Health Conditions	**Communication Challenges**	**Perfectionism**
Conditions due to brain chemical imbalances, trauma, or genetics. • Depression disorder (DD) • Generalized anxiety disorder (GAD) • Hoarding disorder (HD) • Obsessive-compulsive disorder (OCD) • Post-traumatic stress disorder (PTSD) • Social anxiety disorder • Personality disorders.	*Communication is key to supporting the organizing process, especially when more than one individual is involved.* • Conflicting communication styles • Ineffective negotiation abilities • Unclear/nonexistent boundaries • Management and delegation practices.	*Focus on achieving perfection makes organizing goals feel like moving targets.* • Acquiring more/spending time trying to make things "perfect" • Waiting for the "perfect" moment or process • Resistance for fear of mistakes • Procrastination.
Learning Preferences	**Environmental Factors**	**Attitudes**
Preferences based on processing modality and learning style models and theories. • Visual thinker—*out of sight, out of mind* • Auditory learner • Kinesthetic learner—*movement, action, tactile sympathy* • Holistic thinker—*big/small picture.*	*Space where activities happen may be inadequate. Rearrangement of layout can enhance the use of the space.* • Inadequate/insufficient lighting • Disruptive traffic flow • Deferred maintenance • Shared living spaces • Safety and habitability concerns • No storage space.	*Attitudes towards the management of spaces and possessions impacts organization.* • Constant comparison to others • Denial of organizational needs • Resistance to get help • Entitlement • Indifference.
Addictive or Compulsive Behaviors	**Skills and Systems**	**Cultural Diversity**
Derived from addictions or compulsions. • Compulsive acquisition/saving • Substance use disorder • Urgency/thrill-seeking behaviors • Constant digital content consumption • Compulsive info-seeking (infomania).	*Organizing skills and systems can improve the quality of life.* • Ineffective/lack of systems • Inadequate organizing skills • Inconsistence maintenance.	*Idiosyncrasies that reflect individual and collective norms.* • Social customs • Gender/household/societal role expectations • Faith-based practices.
Aging/Health-Related Changes	**Digital Clutter/Information Overload**	**Socioeconomic Elements**
Acute or chronic medical conditions can impact organizing abilities. • Chronic medical conditions • Cognitive decline • Impaired mobility/physical challenges • Fatigue/sleep disorder • Medication side effects • Vision/hearing decline.	*Digital organization skills can be taught and maintained through intentional practices and boundaries.* • Abundance of apps/devices • Constant notifications • Information clutter • Tech novice/casual user • Digital hoarding.	*Availability and use of financial and physical resources.* • Financial or time constraint • Limited access to resources • Housing insecurity • Unavailability/unawareness of organizing services.

Many individuals experience temporary disorganization during acute stress or life transitions. When the stressors persist or overwhelm coping resources, these short-term disruptions can evolve into more enduring patterns. Sustained pressure may reduce executive functioning and emotional capacity, especially in the absence of supportive systems or skills. **Chronic disorganization** can therefore emerge from the long-term interaction of prolonged stress and limited coping mechanisms.

Chronic disorganization may not go away, but it can get easier

ICD® Fact Sheet – Factors Associated with Disorganization - © 2026 ICD®.
This fact sheet may be reproduced for educational purposes only; copyright must be noted.
Fact sheets and other informational material may be obtained from the ICD® website at challengingdisorganization.org.