

Worksheet 5.6: Hopelessness: empowering carers when Edi feels it is all too much and may be expressing suicidal ideation

People with eating disorders often feel helpless and hopeless, and have a much higher risk of suicidal ideation than the normal population. It is so distressing for carers to hear their loved one repeatedly making statements such as:

- I can't go on.
- You would be better off without me.
- My life is pointless.
- Don't you just wish I was dead?/I wish I was dead.

Statements indicating hopelessness and talk of suicide should not be ignored and it is a myth that if a person is talking about they won't try it. The most important thing is for carers to try to keep a connection with the well side of their loved one and assure them that they are much loved and wanted. While it is terrifying to a carer to hear their loved one saying any of the above statements the most important thing is to stay calm and respond with unconditional love and compassion.

As a group or in pairs think up a scenario in which Edi is really struggling and displaying suicidal ideation. Alternatively use this scenario:

Molly, age 17, has gone to the supermarket with her Mum with the intention of buying everything on her shopping list so that she will be able to make all the meals on her meal plan for the next week. Molly wants to go to university next year and so feels this is a really important step. However when faced with the cold and busy supermarket Molly panics and can only pick up some salad. Her Mum gets really cross and says 'For goodness sake Molly you will end up starving to death if you just eat lettuce' to which Molly replies 'Maybe that would be better for everyone'.

Write down as many phrases as you can think of that you could use when your loved one is feeling so hopeless. Affirmations and unconditional love can really help to maintain a connection with the well side of Edi. For example:

Thank you for telling me how you are feeling and I am so sorry that this is happening and that you are in so much pain. We love you so much and will not let this illness take you from us.

By constantly repeating phrases such as these the carer will be maintaining connections with the healthy side of their loved one.

Samaritans and other useful resources

Carers can also show compassion and empathy as well as unconditional love by being curious about expressions of hopelessness and suicidal thoughts by asking specific questions such as:

- Do you have a plan? If so when, how, what, etc.
- Do you have these thoughts often? How often?
- Shall we talk about this or is there anyone else you would like to talk to?
- You know you can always talk to the Samaritans, day or night. Here is the number 116 123.

In addition, carers can also contact the Samaritans for help and guidance. See www.samaritans.org/how-we-can-help-you/what-speak-us-about/if-you%E2%80%99re-worried-about-someone-else/what-should-i-do-if-i

There is also a webinar at www.inourhands.com/mental-health/online-learning-session-14/ on talking to a young person about suicide as well as a simple risk assessment form.

It is worth keeping a record of suicidal talk and reporting this back to the care team or GP who might be inadvertently focusing on physical risk such as low BMI.

Many suicide attempts are on impulse and/or under the influence of alcohol, so if you believe your loved one might be having suicidal thoughts it is advisable to ensure that alcohol and medication (including paracetamol) are not freely accessible within the household.