



Your Guide to Mental Health Services in the UK:

What Support Exists and How to Access it

A practical guide for individuals, families and community members,
co-produced by people with lived experience and clinical expertise.

Produced by
The Muslim Lived Experience Network (2026)
www.mlxn.org.uk

This guide provides general information and is not a substitute for professional medical advice.

Contents

| | |
|---|-----------|
| Foreword | 3 |
| Introduction | 4 |
| About This Guide | 4 |
| Recognise when to seek support | 4 |
| Part 1: Getting Help and Support in the Community | 5 |
| What can I do if I'm struggling with my mental health? | 5 |
| What if talking therapy isn't enough for me? | 5 |
| What happens at the GP appointment? | 6 |
| Treatment options to think about before my appointment | 6 |
| Tips for advocating for myself | 7 |
| What if I'm not taken seriously? | 7 |
| Part 2: When More Support Is Needed: Hospital Care | 8 |
| What happens if I need more immediate support and care? | 8 |
| What is the Mental Health Act and what does it mean? | 8 |
| 'Section 2' | 8 |
| 'Section 3' | 9 |
| What are my rights while sectioned? | 9 |
| What to expect in hospital: | 10 |
| Frequently Asked Questions | 12 |

Foreword

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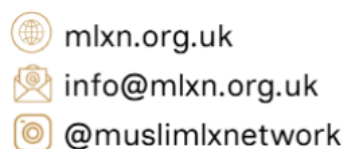
In the name of Allah, the Most Gracious, the Most Merciful

At MLXN, we understand from first-hand lived experience how confusing and overwhelming it can be to access and navigate NHS mental health services. Trying to do so while unwell can place an even greater burden on individuals and their families. For Muslims and people from marginalised backgrounds, these challenges are often intensified by additional barriers to access, unclear support options and a lack of trust in services.

Too often, support is only accessed when situations have reached crisis point and, in many cases, through force rather than choice. We believe mental health services should be accessible, responsive and able to serve all communities in the UK with dignity and respect. While mainstream services are far from perfect, having information, options and choice can make a meaningful difference to people's experiences of care and their recovery journeys.

This guide aims to help people understand what mental health support exists and how to access it before situations escalate. Our hope is that greater awareness enables individuals to seek support earlier, voluntarily, and in ways that feel therapeutic rather than traumatic.

We hope this resource benefits not only the Muslim community in the UK, but anyone experiencing mental health difficulties and unsure of where to turn.



Introduction

About This Guide

This guide highlights when, how and where to seek mental health support within the NHS.

This guide is free to access, download and share.

Note: This topic can be distressing to read or think about. Please take care of yourself as you go through this information. If you feel overwhelmed, reach out for support from a trusted friend, family member or mental health professional. You can also contact crisis services for immediate help. Remember, looking after your wellbeing is important and part of our faith as Muslims.




Recognise when to seek support

You don't need to wait for a crisis to reach out.

Consider seeking help if you experience:

- Persistent stress, anxiety or low mood
- Difficulty performing usual tasks at work, school or home
- Trouble sleeping or eating
- Feeling overwhelmed, hopeless or emotionally numb
- Recent major life changes or trauma
- Noticing that something feels "off"



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Part 1: Getting Help and Support in the Community

What can I do if I'm struggling with my mental health?

In an emergency, call 999.

If you feel unable to keep yourself safe or are experiencing extreme distress, see our [Immediate Support page](#) for helplines and organisations that can provide appropriate support.

**Speaking to a trained individual can help during periods of crisis.
Reaching out is an act of bravery.**

The first point of call would be to book an appointment with your GP to discuss your difficulties and explore what support may be beneficial. You can find your local GP here: <https://www.nhs.uk/service-search/find-a-gp>




You can also refer yourself to NHS Talking Therapies if you would prefer not to go through your GP. You can find your local talking therapy service here: <https://www.nhs.uk/nhs-services/mental-health-services/find-nhs-talking-therapies-for-anxiety-and-depression/>

What happens at the GP appointment?

To begin, ring your GP practice and briefly summarise what you're experiencing. You can say something like: *"I'd like an appointment to discuss a mental health-related concern."*

You may then be offered an appointment with a GP or another relevant professional, such as a mental health nurse. During the appointment, the GP or practitioner will discuss several treatment options with you. It's important to explore each option together so you can decide what feels most suitable.

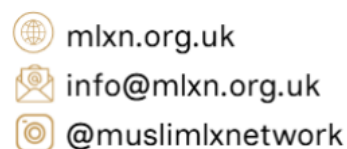


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Treatment options to think about before my appointment

Having an idea of what you might be open to can help you make an informed decision with your GP or practitioner:

- Referral to Talking Therapies
You may be offered psychological support to help you work through some of the difficulties you're experiencing. You may be asked to self-refer to Talking Therapies online or via telephone, or your GP may refer you.
- Medication
 - Your GP may suggest medication such as an antidepressant to support how you feel. There are many options available, so do ask questions if you're unsure or unhappy with what is prescribed.
 - Medication usually takes 6–8 weeks to have an effect, so follow your GP's guidance and try not to get discouraged. Finding the right medication can take time.
- Referral to the Community Mental Health Team/Hub (CMHT/CMHH)
If you have longer-term or what may be considered 'complex' mental health difficulties, you may be referred to the CMHT, who provide ongoing and more intensive support.
- Referral to a Specialist Service
Depending on your needs, your GP may refer you to specialist teams such as an eating disorder service, memory clinic or a substance misuse service.
- Signposting to Local Support
You may be signposted to community organisations, social support services, or voluntary groups that can offer additional help.
- Crisis Support
If you or the practitioner feel you are unable to keep yourself safe, you may be referred to a crisis team for immediate assessment and support, or the emergency department.
- Follow up
 - Your GP will usually book a follow up appointment in 3-4 weeks to review your progress on any referrals to Talking Therapies or medication initiated. It is important to attend or rebook your appointment if necessary.
 - If you have a difficult experience with your GP, it is worth booking in with another GP who suits your needs better.



What if talking therapy isn't enough for me?

If you have been referred to Talking Therapies and after your sessions things still feel difficult and you're struggling to manage, you may be offered extra sessions, a new therapist or a different type of talking therapy. In some cases, you may be referred to specialist mental health services for further support.

If none of the above options feel right for you, there are many charities and non-profit organisations that offer support. This includes faith-sensitive Muslim services such as MLXN, Inspired Minds, and the Muslim Youth Helpline, as well as organisations like Mind, Samaritans, and SANE.

Tips for advocating for myself

- Write down your symptoms or concerns before appointments. It can help to keep a diary noting relevant concerns such as mood, sleep, eating patterns, etc.
- Bring a supportive friend or family member
- Ask:
 - *“What are my options?”*
 - *“What's the next step?”*
 - *“Who do I contact if I need help between appointments?”*

What if I'm not taken seriously?

You can say: “These symptoms are affecting my daily life, and I need support. What other services can you recommend?”

You have the right to seek a second opinion.

You also have the right to complain. [PALS \(Patient Advice and Liaison Service\)](#) are a free NHS service that assist in resolving patient concerns about care, including information on how to make a complaint about an NHS service.



Part 2: When More Support Is Needed: Hospital Care

What happens if I need more immediate support and care?

Sensitive content: *The next part of this guide discusses hospitalisation and being sectioned. This can be a deeply distressing or traumatic experience for a lot of people. Please continue reading with care and pause if you need to. If you're feeling overwhelmed or would like to speak to someone for support, you can visit our [Immediate Support](#) page.*

Sometimes things can become overwhelming, and your safety or the safety of others becomes the highest priority. If this is at risk, you may be offered a voluntary stay at a psychiatric hospital. If you decline a voluntary stay and mental health professionals feel that you cannot be kept safe, this may result in you being 'sectioned'.

Being 'sectioned' refers to being placed under the Mental Health Act (1983, amended 2007) by a team of mental health professionals. This means being hospitalised for your safety and, by law, not being able to leave until you are assessed as safe to do so.



What is the Mental Health Act and what does it mean?

The Mental Health Act (MHA) is a law that allows someone to be kept in hospital for assessment and treatment of a mental health condition when mental health professionals believe it is necessary and the person is not able or willing to stay by choice.

'Section 2'

Under Section 2 of the MHA, a person can be required to stay in hospital for *up to 28* days so that mental health professionals can carry out a full assessment. This is not a voluntary stay, and the person cannot leave until they are assessed as safe to do so.



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When the 28-day period ends, the team will decide whether a longer stay is needed. They may either discharge you or place you under Section 3, which allows for further treatment in hospital.

A Section 2 or Section 3 can also end early if the team feels that you no longer need to remain in hospital for assessment or treatment.

‘Section 3’

If mental health professionals decide that you need to stay in hospital for a longer period, you may be placed under Section 3 of the Mental Health Act for treatment. This means you can be required to stay in hospital for *up to* 6 months, and this is not a voluntary stay.

After the initial 6-month period, the section can either be renewed for another 6 months if further treatment is needed, or you may be discharged.

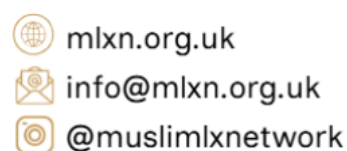
Some people who are discharged from a Section 3 may leave hospital under a Community Treatment Order (CTO). A CTO allows you to live in the community but with certain conditions, such as taking prescribed medication and attending appointments. If these conditions are not followed, or if you become significantly unwell again, you can be brought back to hospital quickly for further assessment or treatment.

There are other types of sections under the Mental Health Act, but Section 2 and Section 3 are the most commonly used in relation to hospital care and treatment.

What are my rights while sectioned?

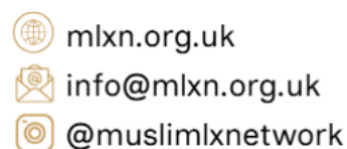
Even when you are detained under the Mental Health Act, you still have important rights. Staff **must** explain these to you clearly and make sure you understand them. These include:

- The right to be informed
You must be told why you are being detained and what section you are under. A member of staff should sit with you and go through your rights in a way you can understand.
- The right to appeal



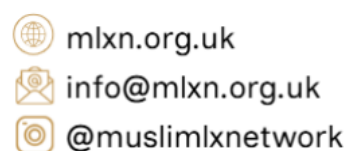
If you disagree with the section, you can appeal the decision to a mental health tribunal. You are entitled to free legal aid to support you with this.

- The right to refuse medication (under Section 2)
While under Section 2, you generally have the right to refuse medication. However, treatment may still be given in certain circumstances if mental health professionals believe it is necessary to prevent serious deterioration or to keep you or others safe.
- Treatment rights under Section 3
 - Under Section 3, the rules around refusing medication are more limited. Medication can be given without your consent if professionals believe it is necessary for your health, safety or treatment.
 - However, you can refuse treatment after the first 3 months. At that point, a Second Opinion Appointed Doctor must review your situation before treatment can continue.
- The right to communication
You have the right to send and receive mail and make phone calls unless there is a specific and justified reason to restrict this.
- The right to practice your religion
You can practice your faith while in hospital. You can request same-sex staff for personal care, and the hospital should make reasonable efforts to honour this.
- The right to Section 117 aftercare (under Section 3)
If you have been detained under Section 3, you are entitled to free Section 117 aftercare once you are discharged. This helps support your recovery in the community and may include housing, employment and welfare support.
- The right to an Independent Mental Health Advocate
You can ask to speak with an Independent Mental Health Advocate at any time. They help you understand your rights, express your wishes, and take part in decisions about your care. You should contact them if you feel unheard or unfairly treated.
- The right to complain
If you are unhappy with your care or feel your rights have been violated, you can make a complaint. This can be directed to hospital management or to the [Care Quality Commission \(CQC\)](#).



What to expect in hospital:

- You will be placed on observations, which means a member of staff will check on you a certain number of times each hour to monitor your wellbeing.
- Sometimes, you may need enhanced observations, meaning one or more staff members will stay with you at all times. This is used when there is a concern about safety and is intended to protect you and others from harm. Enhanced observations can include a staff member being present while you attend to personal care. **Remember, you have the right to ask for a staff member of the same sex during any personal care.**
- There may be restrictions on certain items you can have on the ward. Some items may be allowed only under supervision, meaning you will need to request them from staff and use them while being monitored. These rules are in place to maintain safety on the ward.
- If you would like to leave the hospital grounds, you may be able to do so with Section 17 Leave, which must be approved by a doctor. This allows you to leave the hospital temporarily, sometimes with conditions such as being accompanied by staff or returning by a set time.
- Restraint
 - In situations where you are deemed at risk of harming yourself or others, staff may use physical or chemical restraint. This should *only* ever happen as a last resort, using the least amount of force necessary and for the shortest possible time. **Any restraint must be reasonable, proportionate, and clearly justified by the level of risk.**
 - If you have any concerns about how you have been treated, you can speak with an Independent Mental Health Advocate, talk to the ward manager, or report any unethical behaviour or potential violations of your rights to the [CQC](#) as soon as you feel able.



Frequently Asked Questions

Q) Do I have to tell my GP about my mental health?

No, you don't have to. However, your GP is often the main route into NHS mental health services. You can choose what to share and request specific support such as therapy or a referral.

Q) What is 'IAPT'?

IAPT stands for Improving Access to Psychological Therapies. It is the NHS programme that provides free talking therapies for conditions like anxiety and depression, now known as 'NHS Talking Therapies'.

Q) What if I have or am given a mental health diagnosis I don't agree with?

You are allowed to question or disagree with a diagnosis. You can request a second opinion if you feel it would be helpful.

Many people with lived experience also choose not to identify with the diagnoses they've been given. There are alternative ways of understanding mental health-related experiences beyond the mainstream biomedical model, which often focuses on illness or disorder. Approaches such as Peer Support, Tree of Life and Narrative Therapy offer different frameworks that centre personal meaning, strengths and lived experience.

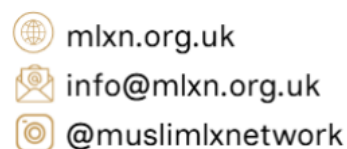
Q) Will this information be kept on a record which people can see?

Yes, staff will keep electronic clinical notes, but these are confidential and only accessible to professionals directly involved in your care. They cannot be shared with family, employers, or schools without your consent. You can request access to your own records if you wish.

Confidentiality breaches are taken very seriously under GDPR laws. If you believe your information has been shared inappropriately, you can report this to your NHS service provider or directly to the [CQC](#).

Q) Will having a mental health diagnosis affect my future prospects?

You choose when, how, and what you disclose to an employer. The Equality Act 2010 offers protection from discrimination related to mental health.



Q) How long will I have to wait for talking therapies?

The current national average wait is around 6 weeks, though this may vary by area.

Q) What should I do if I'm on a waiting list and things are getting worse?

You can contact the service for an update, speak to your GP again, or reach out to crisis lines. You can find these on the [MLXN website](#).

Q) Can I get help without my family knowing?

Yes. Services are confidential, especially if you are over 16. Your consent is usually required before information is shared with anyone else.

Q) Is mental health support free?

Yes, NHS mental health services are free. Some private options or therapy apps may charge, but NHS mental health support is available even if you cannot pay.

Q) What staff are in Community Mental Health Teams?

CMHTs typically have consultant psychiatrists, doctors, nurses, team managers, peer support workers, social workers, psychologists, occupational therapists and support workers.

Q) What staff are on hospital wards?

Wards are staffed 24/7 by mental health nurses and support workers. During the working week, you may also see doctors, ward managers, peer support workers, social workers, psychologists and occupational therapists.

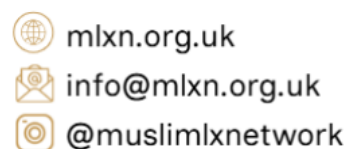
Q) What if I don't like my therapist?

You can request a different therapist and this should be accommodated if the team is able to do so. A good therapeutic relationship is important, and it's okay to ask for someone who feels like a better fit.

Q) Who decides if someone should be sectioned?

To be sectioned, two doctors (one must be a psychiatrist) and an Approved Mental Health Professional (usually a social worker) must agree that:

- *you have a mental health condition,*
- *you're at serious risk to yourself or others,*



- *and you need hospital care.*

The AMHP makes the final legal decision to apply the section.

Q) Can I have visitors while in hospital?

Yes, visiting is encouraged, as it can be helpful to see loved ones. Staff must ensure it is safe, and visitors are required to follow the ward's rules.

Please be aware that mental health services can vary across different NHS trusts, so your experience might not match this guide exactly. For any questions, contact info@mlxn.org.uk, your GP, or your local NHS mental health trust.

Final note: We understand that some of the topics covered in this guide may be distressing. As mentioned, please reach out for support if you need it.




We pray for the safety and wellbeing of all people and hope this guide has been of benefit.

Abu Huraira reported Allah's Messenger (ﷺ) as saying:

“Strive for what will benefit you, seek assistance from Allah and do not give up.”

[Source: Hadith, Sahih Muslim 2664]



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