## Training Manual

# Young Muslim Minds Tackling Mental Health

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# Contents

# 1.0 Introduction

## 1:1 Aims and objectives

This training manual and associated workshop supports a collaborative project that focuses on Muslim young people's mental health. The aim of this programme is to increase knowledge about mental health and how it impacts young Muslims, how to build positive mental health habits, how to access culturally and religiously sensitive support and facilitate a deeper understating of the role of Islam in supporting mental health.

To meet this aim, the training manual and associated workshop has five objectives. The first objective is to define mental health. The second is to examine mental health as it relates to and is experienced by the Muslim community. The third objective is to facilitate an understanding of the provisions for supporting mental health in Islam. The fourth is to enable all individuals who complete this training to access religiously and culturally sensitive mental health support. The fifth objective is to enhance knowledge of self-care practices to effectively support positive mental health.

Therefore, by completing this training, you will:

1. Increase your understanding of mental health
2. Develop your knowledge of mental health issues relating to young Muslims.
3. Increase understandings of how mental health can be positively supported through Islam.
4. Increase awareness of how mental health can be positively supported through self-care.
5. Build your understanding of how to access mainstream and culturally and religiously sensitive mental health support.

# 2.0 Introduction to Mental Health

## 2:1 Defining mental health

There are different ways of defining mental health. Some definitions emphasise positive psychological wellbeing, while others say it as the absence of mental health issues or mental illness.

According to the UK government, mental health includes our emotional, psychological, and social well-being. The World Health Organisation defines mental health as not simply the absence of disorder but 'a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community' (WHO, 2022).

Mental health affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.
Over the course of your life, if you experience mental health problems, your thinking, mood, and behaviour could be affected. Many issues contribute to mental health problems, including:

• Biological factors, such as genes or brain chemistry
• Social inequalities, such as Islamophobia, racism and discrimination
• Life experiences, such as trauma, bereavement, or abuse
• Family history of mental health problems
• Poor physical health
• Substance use and misuse

## 2.2 Exploring Mental illness

Mental illness is referred to specific, diagnosed condition such as anxiety disorder.  Oxford Dictionary definition: A condition which causes serious disorder in a person's behaviour or thinking

No mental health illness or disorder and has Positive mental health

Diagnosis of serious mental illness and poor mental health

No Diagnosis

Severe Diagnosis

Stage 1

Stage 2

Stage 3

Stage 4

No diagnosed mental illness or disorder but has poor mental illness

Diagnosis of serious mental illness but mange's illness well and has positive mental health
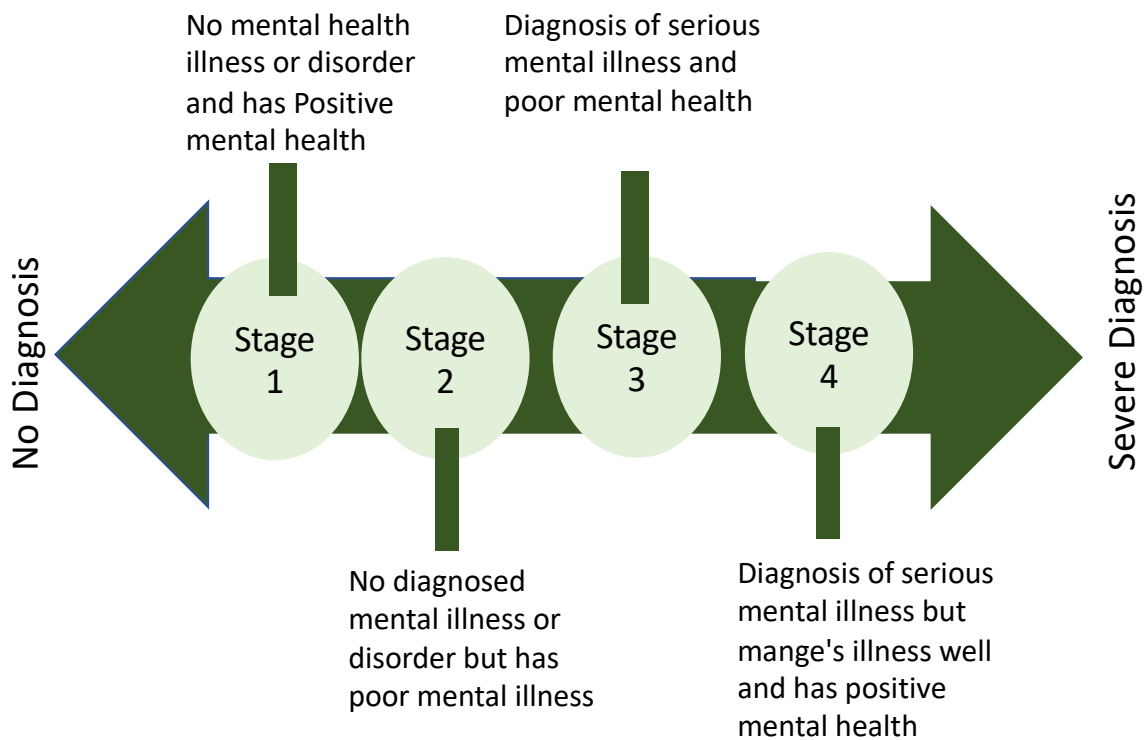
We can all have mental health and can move around from one stage to another.

Stigma and Discrimination can be a barrier to recovery  - prevent the individual from seeking help and support including treatment.

Individuals can and do recover from mental health issues. What helps recovery are discussed in the following chapters.

## 2.3 Mental Health and Young Adults

The UK's Chief Medical officer wrote a report in 2014. It highlighted two things. Firstly, a need to focus on mental health care for children and young people; half of all adult mental illness starts before the age of 15 and 75% by the age of 18. Secondly, the report also showed that investment in support for children and young people can help to prevent problems in later life. Underinvestment in mental health services, particularly for young people, simply does not make sense for the person themselves or for the smooth running of society and the economy. According to a report published by the Mental Health Foundation and the London School of Economics and Political Science (LSE) mental health problems cost the UK economy at least £117.9 billion annually (McDaid et al,2022).

According to the World Health Organisation (2022), emotional disorders are common among adolescents. Anxiety disorders (which may involve panic or excessive worry) are the most prevalent in this age group and are more common among older than among younger adolescents. It is estimated that 3.6% of 10–14-year-olds and 4.6% of 15-19 year-olds experience an anxiety disorder. Depression is estimated to occur among 1.1% of adolescents aged 10-14 years, and 2.8% of 15-19-year-olds. Depression and anxiety share some of the same symptoms, including rapid and unexpected changes in mood.

"Half of all adult mental illness starts before the age of 15 and 75% by the age of 18."
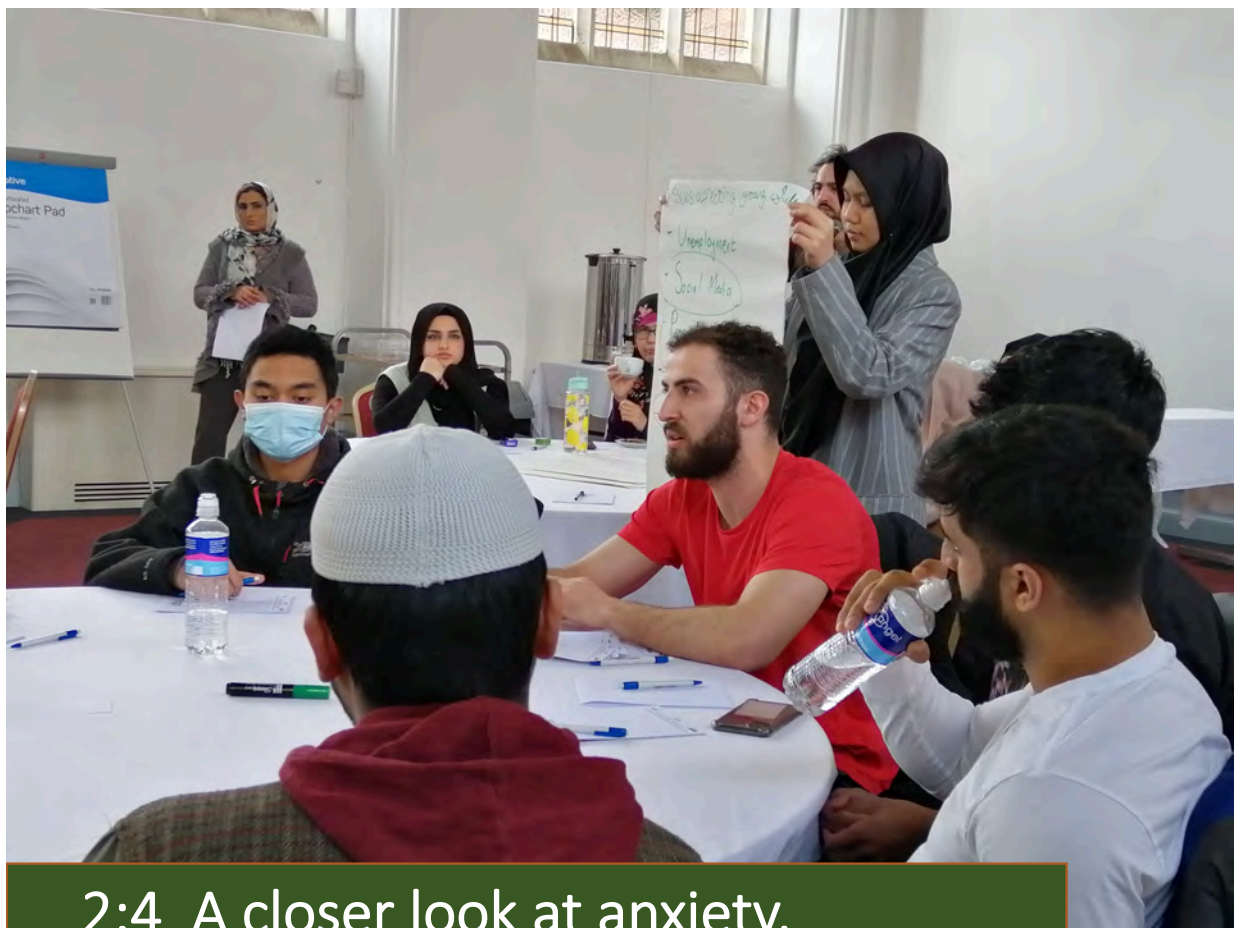
## 2:4  A closer look at anxiety, depression, and stress

### What is anxiety?

Anxiety is what we feel when we are worried, tense or afraid – particularly about things that are about to happen, or which we think could happen in the future. Anxiety is a natural human response when we feel that we are under threat. It can be experienced through our thoughts, feelings, and physical sensations. Most people feel anxious at times. It's particularly common to experience some anxiety while coping with stressful events or changes, especially if they could have a big impact on your life. It is possible to experience anxiety problems without having a specific diagnosis. However, if anxiety impacts your ability to live your life as fully as you want to professional support is available (see your GP or section 6 of this manual).

### What is depression?

Depression is a low mood that lasts for a long time, and affects your everyday life. In its mildest form, depression can mean just being in low spirits. It doesn't stop you leading your normal life but makes everything harder to do and seem less worthwhile. At its most severe, depression can be life-threatening because it can make you feel suicidal.

If you are given a diagnosis of depression, you might be told that you have mild, moderate or severe depression. This describes what sort of impact your symptoms are having on you currently, and what sort of treatment you're likely to be offered. You might move between mild, moderate and severe depression during one episode of depression or across different episodes.

Note: We acknowledge that the information in section 2:5 has been reproduced from the Mind UK website and is freely available to download at https://www.mind.org.uk

## A closer look at anxiety, depression, and stress

Stress is how we react when we feel under pressure or threatened. It usually happens when we are in a situation that we don't feel we can manage or control. When we experience stress, it can be as:

a) An individual, for example when you have lots of responsibilities that you are struggling to manage

b) Part of a group, for example if your family is going through a difficult time, such as bereavement or financial problems.

c) Part of your community, for example if you belong to a religious group that is experiencing discrimination

d) A member of society, for example during natural disasters or events like the coronavirus pandemic

Sometimes, a small amount of stress can help us to complete tasks and feel more energised. But stress can become a problem when it lasts for a long time or is very intense. In some cases, stress can affect our physical and mental health. This is what healthcare professionals refer to some types of stress as 'acute' or 'chronic':

**Acute stress** happens within a few minutes to a few hours of an event. It lasts for a short period of time, usually less than a few weeks, and is very intense. It can happen after an upsetting or unexpected event. For example, this could be a sudden bereavement, assault or natural disaster.

## A closer look at anxiety, depression, and stress

**Chronic stress** lasts for a long period of time or keeps coming back. You might experience this if you are under lots of pressure a lot of the time. You might also feel chronic stress if your day-to-day life is difficult, for example if you are a carer or if you live in poverty.

This section has described the most common mental health struggles faced by young Muslims. Section 4, 5 and 6 will explore self-care behaviours and techniques and how to seek professional support.

If you are suffering from any of the conditions described above, please seek support from your GP or see section 6 of this manual.

"Stress can be part of your community, for example if you belong to a religious group that is experiencing discrimination, racism or exclusion from other groups/society."

# 3.0 Mental Health and Young Muslims

The Muslim population in the UK has the youngest age profile of all religious groups. Nearly half the population is under 24 years old and a third is under 15 years old. Therefore, the Chief Medical Officer's findings around mental health and young people are very important for the Muslim community and its future as a happy and thriving population in the UK.

In addition to having a young population, mental health awareness amongst Muslim is crucial because the WHO notes that some young people are at greater risk of mental health conditions due to their living conditions, stigma, discrimination or exclusion, or lack of access to quality support and services. These include young people from minority ethnic or backgrounds or other discriminated groups.

One of the most detailed overviews of UK islamophobia and its impacts on mental health found that the "chronic daily hassles' of living while Muslim increases the likelihood of developing mental disorders and experiencing stress and anxiety (Hankir et al., 2019). These findings are echoed in *Hidden Survivors: Uncovering the Mental Health Struggles of Young British Muslims* (Bunglawala, 2022) who found:

- Nearly 1 in 5 young Muslims said they had harboured suicidal thoughts "many times" (19%). An almost equal number said they had done so "sometimes" (18%) and about a 1/4 said they had "occasionally" experienced suicidal thoughts (24%).

- The most common mental health struggles faced by young Muslims are anxiety (53.8%), depression (49.4%) and stress (48.6%).

# Mental Health and Young Muslims

## Young Muslim minds: between society and community

The group of young people repeatedly identified that they suffer negative mental health outcomes because they are subject to form of **double stigma**. They defined double stigma as finding themselves caught between caught between a hostile social environment of pervasive Islamophobia and a culture of silence within the community.

The young people who took part in the seminar told us that their experiences of intersecting discriminations that they variously described 'racism', 'Islamophobia' and 'cultural differences' have a cumulative negative impact on their mental health. The feeling of never quite belonging creates a sense of despair.

The young people's testimonies align with current research around Islamophobia and mental health. Emerging research from North America shows persistent Islamophobia means young Muslims live in an 'alarmed state of mind' that induces negative mental health outcomes, including the highest rate of self-directed harm of all religious groups (Awaad et al., 2022). These patterns are also emerging in the UK context, Manzoor-Khan (2022) asserts that Islamophobia rooted in histories of colonialism 'generates terror in the people it targets' resulting in ongoing trauma for Muslim communities.

To exacerbate an increasingly hostile social landscape, the participants in our seminar overwhelmingly identified a culture of silence, shame and condemnation within Muslim communities and families around mental health. Conversations around mental health and subsequent support from within communities and families and are often rooted in

# Mental Health and Young Muslims

## 3:1 The triple pains of Muslim Youth

According to the Muslim Youth Helpline (2021) there is still very little research on mental health that centers the voices of young Muslims. To fill this gap, British Muslim Heritage Centre, Manchester City Council and Manchester Metropolitan University conducted a series of collaborative workshops with young Muslims.

The work was led by young Muslims living in Greater Manchester and highlighted key issues around mental health that are priorities for them. Those issues were grouped together and pattens were identified, one pattern was that young Muslims face three intertwined issues around mental health. We call these the *Triple Pains of Muslim Youth* and together they encapsulate the urgent need to raise awareness of young Muslim mental health within the community, families, and mental health care providers.
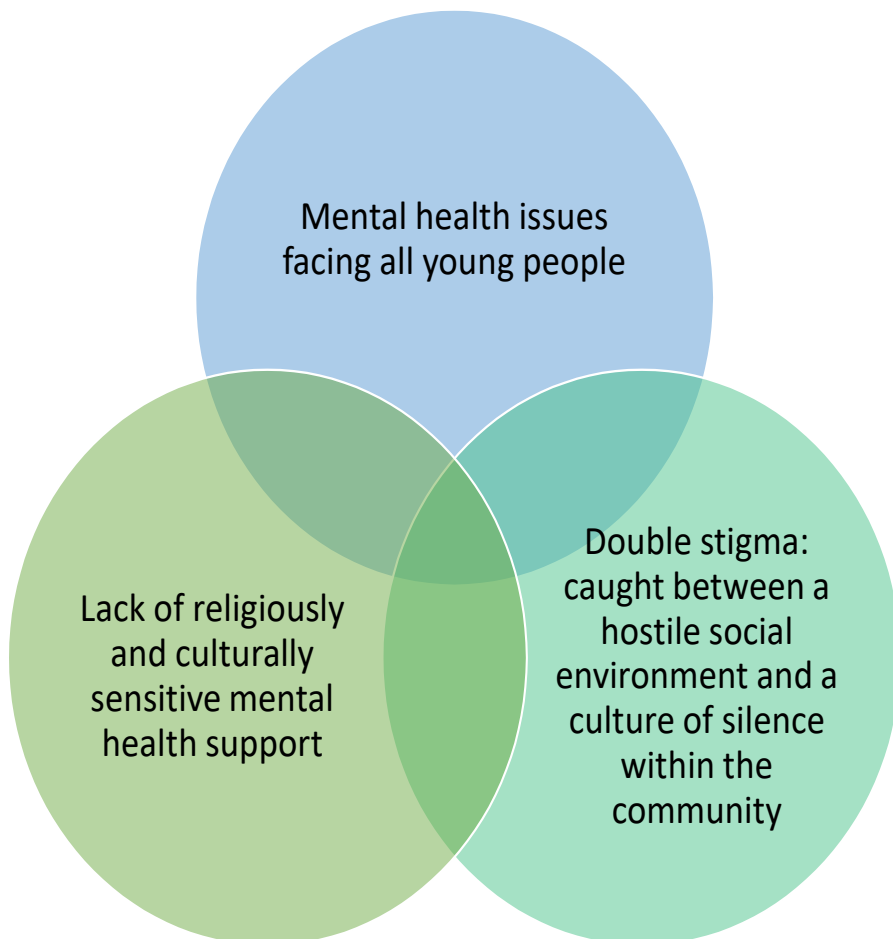
The triple pains faced by young Muslims are:

## a) Mental health issues faced by all young people:

As noted above, young Muslims face the same mental health struggles as non-Muslims. The most common mental health issues identified by both groups are emotional issues such as anxiety, stress and depression. The young people said they were most likely to experience emotional issues as a result of academic stress, lack of employment, social media and interpersonal relationships.

# Mental Health and Young Muslims

The triple pains of Muslim Youth

Mental health issues facing all young people

Lack of religiously and culturally sensitive mental health support

Double stigma: caught between a hostile social environment and a culture of silence within the community

# Mental Health and Young Muslims

## b) Caught between chronic Islamophobia and a silent community:

The group of young people repeatedly identified that they suffer negative mental health outcomes because they are subject to a form of double stigma. They defined double stigma as finding themselves caught between a hostile social environment of pervasive Islamophobia and a culture of silence within the community.

The young people who took part in the workshops told us that their experiences of intersecting discriminations that they variously described 'racism', 'Islamophobia' and 'cultural differences' have a cumulative negative impact on their mental health. The feeling of never quite belonging creates a sense of despair and constant contradiction and exclusion.

The young people's testimonies align with current research around Islamophobia and mental health. Emerging research from North America shows persistent Islamophobia means young Muslims live in an 'alarmed state of mind' that induces negative mental health outcomes, including the highest rate of self-directed harm of all religious groups (Awaad et al., 2022). These patterns are echoed in the UK context, Manzoor-Khan (2022) asserts that Islamophobia rooted in histories of colonialism 'generates terror in the people it targets' resulting in ongoing trauma for Muslim communities. While Hankir (2019) found young Muslims live in a state of hypervigilance, always alert to the chronic dangers of living while Muslim.

Exacerbating an increasingly hostile social landscape, the participants in our workshop overwhelmingly identified a culture of silence, shame and condemnation within Muslim communities and families around mental health. Conversations and support around mental

# Mental Health and Young Muslims

Conversations and support around mental from within communities and families are often rooted in demonological explanations, avoiding psychological and evidence-based understandings. The young people identified an urgent need for open, bi-directional conversations around mental health issues and 'support without stigma' from within the communities and communities and across generations. They suggested community mental health hubs and mental health training programmes for young people, families, and caregivers, insisting on a need to 'train the community and not just individuals.'

## c) Nowhere to turn: A lack of religiously and culturally sensitive support:

Young Muslims are feeling under siege due to increasing Islamophobia and its "chronic daily hassles" Hankir et al., (2019) and the silence around mental health from their communities and caregivers. Making this situation much worse, is the lack of mainstream service providers who offer religiously and culturally sensitive support to meet Muslim young people's specific mental health demands.

If all these points are considered together, this means young Muslims in the UK have nowhere to turn for support and often endure their problems alone. Bunglawala (2022) highlights the urgent need to bridge the gap in mainstream mental health services by noting that three in five young Muslims (61%) say it is important to them that mental health services display cultural/ faith sensitivity and nearly two in five young Muslims say they would prefer to see a Muslim counsellor or therapist, (39.5%).

# 4.0 Supporting Positive Mental Health

## 4.1 Role of Islam

Bunglawala's study on Muslim youth mental health (2021) found faith plays a positive role in supporting mental wellbeing among young Muslims, with the majority of participants (59%) agreeing that it does. Islam values the importance of good mental health and emotional wellbeing. We know this because the Qur'an is the revelation from Allah, and it is also a guide for those suffering with emotional distress. This section will offer a brief guide about how mental health is considered in Islam.

Thousands of years before the development of western psychology, the Qur'an described destructive emotions and harmful conditioning as the *nafs al-ammara and* advises believers on how they can ameliorate its impact by bringing about the peaceful self, the *nafs al-mutmainna.*

## 4.2 Seeking support

Seeking advice and support from mental health professionals is explicitly supported in Islam.

*"O Allah's Messenger! Should we seek medical treatment for our illnesses? He replied: 'Yes, you should seek treatment, because Allah, the Exalted, has let no disease exist without providing for its cure." Hadith.*

# 4.0 Supporting Positive Mental Health

See the final section of this training manual for details on how to access religiously and culturally sensitive mental health support.

## 4.3 Paying attention to each other's emotional needs

Allah (SWT) has given us emotional needs which must be met if we are to be healthy. As Muslims, we must therefore respect those needs in ourselves and in our family and community members. Through paying attention to each other's mental health needs, we can build healthier families, communities and therefore, societies.

*"The Muslim Ummah is like one body. If the eye is in pain, then the whole body is in pain, and if the head is in pain, then the whole body is in pain." Hadith.*

This Hadith shows us that, as Muslims, we must pay attention to each other's suffering, including to the suffering caused by adverse mental health issues.
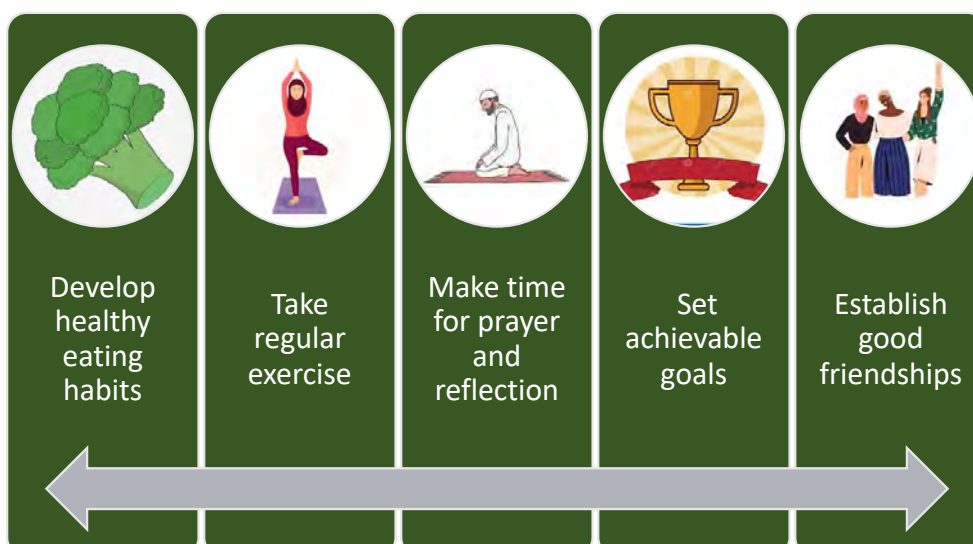
The concept of *Khidmat* or service is also important. To support or serve issues larger than ourselves is a vital religious and spiritual practice. In the context of performing *Khidmat* to support family and community members emotional needs, the following practices are a good place to start.

| Practice active listening | Offer a safe and non-judgemental space | Signpost to professional support | Discuss self-care and the concept of 'tie your camel' | Keep in touch |
|---|---|---|---|---|

# 5.0 Self –care for positive mental health

In addition to seeking support through Islam (previous section) and seeking support from mental health professionals (next section), it is worth considering how you can help yourself, through self-care. After all, the Messenger himself recommended that we should tie our camel! A hadith narrated by al-Tirmidhi, outlines the story of a Bedouin man who was leaving his camel without tying it. The Prophet (PBUH) asked him "Why don't you tie down your camel?" The Bedouin answered, "I put my trust in Allah." The Prophet then replied, "Tie your camel first, and then put your trust in Allah." How can we "tie our camel" when it comes to supporting our own mental health?

One thing we cand do is educate ourselves on the issues facing young Muslims that cause adverse mental health outcomes and what form those adverse mental health outcomes take. We can also look after our own mental health through self-care. Self-care includes avoiding factors that exacerbate negative mental health and cultivating protective behaviours and habits.

| Develop healthy eating habits | Take regular exercise | Make time for prayer and reflection | Set achievable goals | Establish good friendships |
|---|---|---|---|---|

# 5.0 Stress Management

## 5:1 Stress Management: the stress bucket activity

As noted above, one of the main issues faced by all young people, regardless of religion, is stress. This section describes a technique to manage stress called the "Stress Bucket" (developed from an idea by Brabban and Turkington, 2002).

We all experience stress to some degree. Some stress can be good, it can push us to work hard. But too much stress can make us feel overwhelmed, and prolonged stress can eventually lead to problems. The stress bucket is a way to visualise this. Above the bucket are clouds – the things that cause you stress. These rain into the bucket and gradually fill it up. You release the stress by doing things you enjoy or that help you to stress less.

# 6.0 Accessing religiously and culturally sensitive mental health support

## 6.1 Religiously and culturally sensitive support

While there is still a need for increased accessibility to religiously and culturally sensitive support for Muslims generally, there are existing organisations who are committed to providing Muslim specific help.

### 1. The Muslim Youth Helpline:   MYH is an award winning charity that has been providing support for Muslims in need of mental health and emotional support. Their helpline workers are from diverse Muslim communities in the UK. They understand the issues Muslim communities face and are trained in faith and cultural sensitivity providing faith and culturally sensitive support to Muslim youth in the UK via their confidential helpline which is open 4 pm-10 pm 7 days a week, 365 days a year including on Eid. The helpline provides support at the point of crisis for those that need emotional support and signposting.

**Telephone 08088082008/ Email info@myh.org.uk/ Website  www.myh.org.uk**
In this podcast Maaria Mahmood (MYH director) and Hadil Nour (MYH helpline manager) share how they are providing confidential faith and culturally-sensitive support   https://www.good-thinking.uk/podcast-muslim-youth-helpline-maaria-mahmood-hadil-nour/

### 2. Muslim Women's Helpline: Telephone Support as well as Text line, Email, and Webchat. They will support women of no faith as well as any faith, you do not have to be Muslim to access their support. Will provide listening support, help women in a crisis situation as well as providing information about legal rights.

**Telephone 0800 999 5786/ Email info@mwnhelpline.co.uk / Website www.mwnhelpline.co.uk**

# 4.0 Accessing religiously and culturally sensitive mental health support

### 3. Inspirited Minds

A Muslim charity providing mental health support and advice via email and online support centre. Also provide training and workshops to mosques and other organizations. Response time is usually around 7 days.

**Website** www.inspiritedminds.org.uk

### 4. Muslim Community Helpline

A national organisation for women, men, youth and children providing a confidential, non-judgemental listening and emotional support service. The service operates Monday to Thursday 10 am to 1 pm, Friday 10 am to 4 pm. They can also support with talks and training.

**Helpline numbers02089086715 & 02089048193/ Website details** https://muslimcommunityhelpline.org.uk

# Mainstream Mental Health Support

## 6.2 Mainstream Mental Health Support

## 1. Samaritans

Confidential support for people experiencing feelings of distress or despair.
**Phone: 116 123 (free 24-hour helpline)**
**Website: www.samaritans.org.uk**

## 2. Mind

Promotes the views and needs of people with mental health problems.
Phone: 0300 123 3393 (Monday to Friday, 9am to 6pm)
**Website: www.mind.org.uk**

## 3. Men's Health Forum

24/7 stress support for men by text, chat and email.
**Website: www.menshealthforum.org.uk**

## 4. Anxiety UK

Charity providing support if you have been diagnosed with an anxiety condition.
**Phone: 03444 775 774 (Monday to Friday, 9.30am to 10pm; Saturday to Sunday, 10am to 8pm)**
**Website: www.anxietyuk.org.uk**

## 5. Family Lives

Advice on all aspects of parenting, including dealing with bullying.
**Phone: 0808 800 2222 (Monday to Friday, 9am to 9pm and Saturday to Sunday, 10am to 3pm)**
**Website: www.familylives.org.uk**

# 7.0 Appendices

## 7.1 Evaluations

Thank you for completing the training evaluation form.  The information we gather will help us to learn and to refine our practice.  Please complete part one before the training begins, and part two after the training is complete. Scan the QR codes to access the questionnaires when you are prompted by the facilitators.
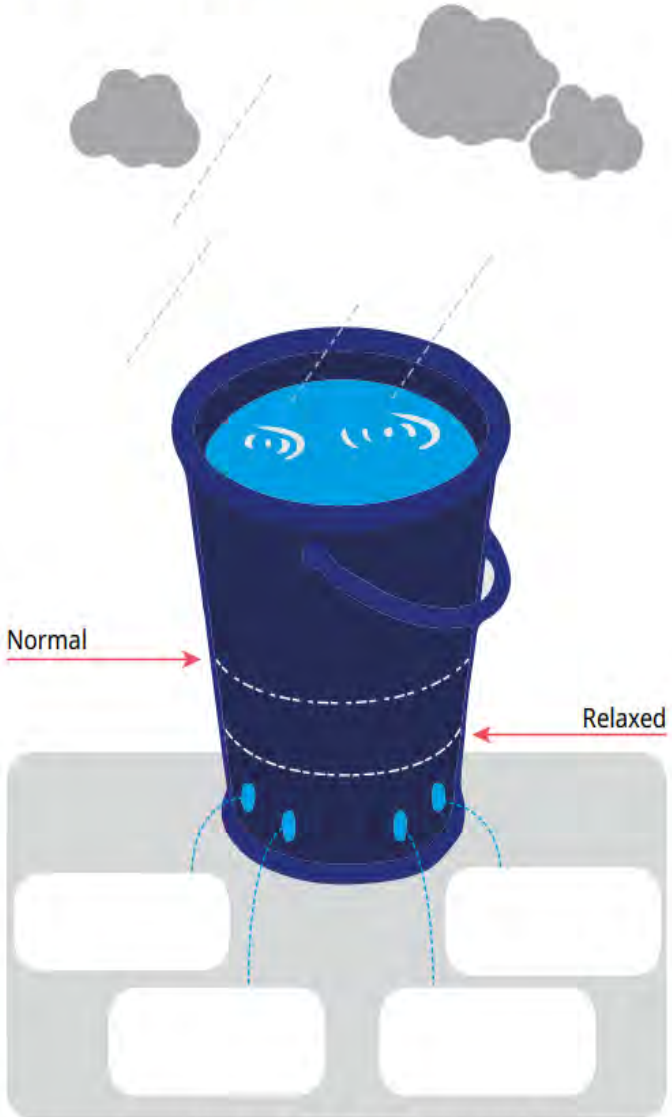
**Part one: Pre-training**

## 7.2: Stress Bucket: Activity

Complete your own stress bucket below. Identify the things that cause you stress (the clouds) and the things you do to manage them (your taps).

**Also consider:**

What size and shape is your stress bucket?

How full is it?

What are the signs that your bucket is getting too full?

Are all of your taps working?

Do you turn to unhealthy ways to release stress and what does this look like?



Normal

Relaxed

Developed from an idea by Brabban and Turkington (2002)