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Library support for student mental health and well-being in the UK: before and during the COVID-19 pandemic

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Abstract

Libraries increasingly seek to support the mental health and well-being of students. This study reports on the results of a survey examining the range of such support activities offered by UK academic libraries prior to and during the COVID-19 pandemic. Prior to the pandemic libraries' emphasis was on new library specific services such as a fiction collection, a type of initiative taken to proactively align with institutional policy. During the pandemic focus shifted somewhat to addressing the anxiety related to finding e-resources. Drawing on the survey data a holistic model of library support for student mental health and well-being is developed, capturing its eight different aspects: inherent library value, library services impact, well-being as a library service, detection, hosting, signposting, library as a good partner and library staff well-being. This represents a framework through which to examine how an academic library can support student mental health and well-being, and complements the "whole university" approach being increasingly adopted in the UK.

Keywords: Mental health; well-being; bibliotherapy; alignment; COVID-19; pandemic

Introduction

The last five years has seen mounting evidence of the need for universities in the UK to increase their care for the mental health and well-being of students (Thornley, 2007; UUK, 2017, 2020). Well-being relates to an individual's ability to realise their abilities and cope with the ordinary stresses in life, thus enabling them to be a productive part of the community (Hermann et al., 2004). A sustained lack of well-being may be linked to the spectrum of forms of mental ill health. The growing concern about student mental health and well-being has been driven by evidence of an increasing rate of suicide among students and more widely increased use of university mental health services (Thornley, 2017). Mental health and wellbeing related issues have also been linked to the increased numbers of students leaving university without completing their qualifications. Good well-being is a foundation for the

challenging task of learning (Houghton and Anderson, 2017). The same concerns are evident in other countries, such as the United States (Benedetti et al., 2020) and Australia (Usher and Curran, 2019). As a result, since 2017, student mental health has become a formal part of the strategy of Universities UK (UUK), the umbrella organisation which represents the executive leadership of UK universities. *Not by degrees: Improving student mental health in the UK's universities*, a report commissioned by UUK from the Institute for Public Policy Research (Thornley, 2017), suggested that concerns around student mental health were so important that a sector-wide response was appropriate. From the resulting UUK Stepchange framework, rhetoric around a 'whole university approach' to mental health has developed, recognising the interplay between where students live, their learning, access to support and sense of community as integral in affecting mental health (UUK, 2017). A whole university approach aims to make the university a healthy setting and is intended to be strategic, aligned, adaptable, shared and evolving (UUK, 2020).

A literature is emerging that describes how academic libraries can contribute to student mental health and well-being in the context of this perceived crisis (Ramsey and Aagard, 2018). From the creation of leisure reading collections and designation of spaces for contemplation or napping, through to dog petting sessions, there appears to be a wide range of types of intervention that are being developed. However, there is a lack of systematic evidence about which types of activity are most common and more fundamentally how mental health and well-being are conceived within these initiatives. Questions have also been asked about how well the profession is using its knowledge base to carry out this role and how such initiatives should be evaluated (Authors).

The issue of support to mental health and well-being were brought into even stronger focus in 2020 by the COVID-19 pandemic because it created a new wave of mental health challenges for many groups in British society, as in other countries. Fear of the virus was one aspect of this, but loneliness due to social distancing, and indirect causes, such as the impact on employment of virus control measures all made COVID-19 a potential mental health crisis (Holmes, 2020). Young persons' anxieties in this period in the UK often revolved around their education and how the virus might affect the quality of their learning (Office for National Statistics, 2020). At the same time, traditional support services were more challenged in how they could offer support because of social distancing. University campuses including academic libraries were all closed. Thus, how libraries addressed the need to support student mental health and well-being during the pandemic is of interest in itself. Also, insights into library activity at this time might increase our understanding of the wider question of how libraries conceptualize their role in student mental health and well-being.

In this context, this paper investigates how UK academic libraries were seeking to support student mental health and well-being before and during COVID-19. More specifically it seeks to answer the following research questions:

1. What types of activity were UK academic libraries undertaking to respond to concerns about student mental health and well-being before the pandemic and how was success being measured?

2. What types of activity were UK academic libraries undertaking to respond to concerns about student mental health and well-being during the pandemic and how was success being measured?
3. How is library support to mental health and well-being conceptualized?

Literature

There is a growing literature around the role of academic libraries in supporting student mental health and well-being. Indeed, this role was a top trend globally in 2020 (prior to the pandemic) according to Benedetti et al. (2020:274) in the context of "rising rates of college students struggling with depression, anxiety, sleep deprivation, food insecurity, family responsibilities, and other factors impacting student wellbeing". It reflects the turn away from the library being seen primarily as place for books to it becoming a place for learning in the widest sense (Clement et al. 2018). Implicit is a growing concern with the library user as a whole person not just as an information seeker, especially if this were narrowly conceived as a purely cognitive process (Lenstra and Latham, 2019). As well as directly beneficial to students themselves, such care contributes to student retention and performance (Ramsey and Aagard, 2018).

Typically, in the emerging literature the topic is discussed through the benefits of new initiatives begun to impact well-being. A very wide range of these have been described, including:

- Stress "busting" activities during exam periods such as puzzles, games and refreshments (Newton, 2011; Brewerton and Woolley, 2016)
- Dog petting and other pet therapy (e.g. Bell, 2013; Lannon and Harrison, 2015)
- Spaces for meditation or mindfulness (Wachter, 2018), for napping (Wise, 2018) or taking exercise (Clement et al., 2018)
- Campaigns to promote mental health and well-being (Brewerton and Woolley, 2016)
- Building a sense of community and belonging to lower stress (Wise, 2018)

Many libraries seek to offer a wide range of such activities (Henrich, 2020; Brewerton and Woolley, 2016).

Advocates suggest that the library is a good location for such initiatives because it is a commonly visited space that is perceived as safe (Benedetti et al., 2020). Indeed, locating mental health initiatives in places such as the library, away from the usual locations such as medical centres, may reduce the stigma attached to them, making them more widely accessible (Ramsey and Aagard, 2018). Advocacy for this role is also often tied to the particular quality of librarianship as a profession. For example, Ramsey and Aagard (2018: 333) write:

> "Academic librarians are natural connectors, guiding their users to not only resources, but also connecting them to people, services, and spaces that can provide assistance"

The emphasis in the literature on marketing of well-being related activities is strong. For example it is interesting that Newton's (2011) early paper on dog petting was published in the marketing column of *Public Services Quarterly*. This perhaps reflects the growing centrality of marketing in library professional work. There is also a potential connection to a growing literature seeking to make librarians themselves more mindful (Moniz et al. 2015; Charney and Colvin, 2018; Ruhlmann, 2017), with its wider links to the notion of contemplative pedagogies. At the same time that it is claimed that it might be something that

libraries and librarians would be good at it is acknowledged that "collaboration is key" (Ramsey and Aagard, 2018: 332). The library is likely to be working with other campus services in supporting well-being.

The range of activities, the energy and the imagination being applied to this challenge are obvious, but it is perhaps less clear what the underlying conception of the problem addressed really is, and following from this how professional knowledge equips librarians to perform the role and how success should be evaluated (Authors).

Part of the answer to this may lie in the public library sphere. For while health and well-being related services are relatively novel for academic libraries, the concern is familiar from public library work. In her summary of how public libraries contribute to well-being of users Elia (2019) gives emphasis to:

- The provision of consumer health information
- Embedding health professionals
- Courses related to health and well-being

We could also mention bibliotherapy, be that through the provision of Cognitive Behavioural Therapy (CBT) or self-help books (as in the "books on prescription" scheme) or fiction (Brewster and McNichol, 2019). Brewster (2014:96) has also conceived of the public library itself as a therapeutic space, because it is "familiar, open and welcoming…comforting and calming…empowering". In a complementary way, Pyati (2019) suggests that the public library has the potential to be a contemplative space, in resistance to the information dystopia created by neo-liberalization – while recognizing the potential for mindfulness itself to be commodified, through the same process.

The recent stress on the potential of the academic library as a place to support wellness is in contrast to an extensive body of previous literature on "library anxiety". Mellon (1986) coined this term to refer to uncomfortable feelings some students feel about using the library or thinking about using it. Bostick (1992) built on this concept to develop a library anxiety scale, and a large body of subsequent work explores the variables shaping library anxiety and strategies for overcoming it. It links to a wider literature on information seeking anxiety and other forms of information anxiety (Naveed and Anwar, 2019) and ultimately the whole affective turn in the study of information seeking and other information behaviour, often traced back to Kulthau (2004). While the newer well-being literature tends to advocate the role of the library in addressing well-being in the context of increasing external stresses on the student, it perhaps neglects the anxieties partly created by library service design itself, which was the focus of this previous literature. The library is often claimed to be a safe neutral space, but the library anxiety literature points to the way that many find using it stressful.

Thus, there is a growing literature around the library role in mental health and well-being, with some roots in earlier research. It is typically based on case studies of local practices, often with an emphasis on the most novel and surprising. While this is informative for those wishing to emulate the practice, it gives us no sense of the wider range of routine and more typical practices. What is lacking is a holistic overview of the range of typical services libraries are developing and the drivers and conceptualisations that lie behind them. In addition, in the context of the COVID-19 pandemic there is as yet no literature on how libraries have responded to this specific challenges and whether this has changed the direction of services in a significant way.

Method

A 20 question survey was designed to gather data from UK academic libraries about their services during COVID-19 and before. Asking potential participants to identify their role and institution, it posed 9 multiple choice and one open ended question about the response to COVID-19 and a set of parallel questions about services prior to the pandemic. After piloting the questionnaire with library professional colleagues and gaining approval from the University of Lancaster ethics committee, the survey was open from 18th to 29th May 2020. This should be contextualised as towards the end of the academic year when students would still be studying and expecting exams/assessment. In the UK it was also in the early period of the COVID-19 pandemic in the UK, when much of the country was in lock down. The peak of infections was in April. Physical academic libraries and the rest of campuses were closed. Teaching had moved online, with students working from halls of residence or with their families. The lockdown was gradually eased through June to August.

The questionnaire was distributed by posting on a number of discussion lists (such as lis-link, lis-bibliotherapy), via social media accounts, via contacts in professional groups, such as the regional networks of Academic and Research Libraries Group (ARLG) of CILIP and via a direct message and reminder to The Society of College, National and University Libraries (SCONUL) directors (who represent all university libraries in the UK and Ireland..

There were a total of 59 valid responses, representing 50 different institutions (some institutions gave more than one answer). We de-duplicated the responses, removing 6 responses from 5 institutions, retaining the response completed by a member of staff with responsibility for well-being. We retained 4 responses from Cambridge colleges, because working in a decentralised institution they were considered to have potentially very different approaches. This left 53 responses from 50 different institutions. Of these 40/53 (75%) said that they had undertaken activities to support mental health and well-being during the pandemic.

There were responses from 13 different Russell group institutions (the larger, more research-intensive universities in the UK) with a good representation of other types of institution. Most responses came from England, with a good spread across the country, but the data included four from Scotland and two from Wales. One response from the Republic of Ireland was retained. Given that there are approximately 160 HEIs in the UK, this represents a response rate of 31% (49/160). This might be generally considered acceptable but does the raise the issue of non-response bias. Was it particular types of institution that responded, e.g. ones that were more active in the field of support for well-being? It is quite likely that active institutions would be more likely to respond, but this cannot be known with certainty without further research. Conclusions drawn should be tentative, therefore. For example, it cannot be assumed that ¾ of all academic libraries have actively responded to COVID-19 with revised services, as the data seemed to show. While the response rate is acceptable, the low number of institutions preclude testing for statistically significant correlations between answers.

Open text comments were analysed thematically, with the exception of a question about library structures where a more content analysis approach could be taken, by placing responses into one of six categories, derived from the data itself.

Of the responses 16 (30%) were from library directors and 13 (25%) from staff with a particular responsibility for mental health and well-being. The remaining were responses from other members of

staff. Given that the data showed that well-being was often deemed to be a responsibility of all staff these responses can still be considered useable.

The first part of the findings section presents the responses to questions about library activities pre-pandemic (actually the later part of the survey). The next section reports the findings for the pandemic period. In addition to the closed questions there were two main open-ended questions which invited participants to offer further comments relating to pre and during pandemic. Follow up with those who expressed a willingness to participate further in the study by email yielded three longer responses. These were analysed, along with the structured data, to produce the emergent model presented in the third section of findings.

Findings: Support prior to the pandemic

Table 1 What activities was the library conducting before the CV-19 pandemic? (N=53)

Recommending self help books	42	79%
Recommending the leisure reading collection	38	72%
Cards/ posters recommending taking a break	32	60%
Offering a specially designated space for well-being	30	57%
Improved spatial design, e.g. lighting	18	34%
Animal petting	11	21%
Mindfulness sessions	11	21%
Craft classes	9	17%
Yoga	6	11%

Responses suggested that the main approaches to well-being before the pandemic were based on the collection, either via self-help books or through leisure reading (Table 1). In addition, campaigns to take a break from study were quite common. Creation of specific spaces or spatial redesign were another frequent type of approach. More "imaginative" activities such as animal petting or relaxation classes were occurring in only about 1/5 of libraries, but there was a wide range of things going on in some institutions. In addition, 22 respondents mentioned "other activities" including a wide range of events, games, coffee mornings etc.

Table 2 What was the main reason you decided to prioritise mental health and well-being related activities within the library's work? (N=53)

We were taking the initiative to align with university strategy	25	46%
We were responding to student demand/ concerns	11	20%
We were formally coordinating with university strategy	6	11%
Other	6	11%
We had seen other libraries undertaking similar activities	3	6%
We were informed by research	2	4%

Table 2 summarises responses about how the library came to prioritise mental health and well-being. Many libraries might have wished to tick multiple boxes for this question, but the survey was deliberately designed to oblige them to choose one main answer. The data suggests that the main driver was alignment to the university, although there was a stronger emphasis on the library taking the

initiative, rather than formally aligning in a passive way. This is consistent with the previous answer, where libraries are seen offering a distinctive contribution via collections or spaces. Another 1/5 attributed the main driver directly to student demand. A few acknowledged the influence of other libraries.

Table 3 How would you define the problem you were trying to address? (N=53)

To address student concerns around study	46	87%
To build a sense of university community	44	83%
To address general anxiety	40	75%
To provide information about mental health problems	36	68%
To address stigma around mental health	25	47%
To address digital well-being as an aspect of digital skills	23	43%

Table 3 summarizes responses to how the problem was conceptualised. Respondents could tick all options that applied. The main reasons given were 1) specifically related to student worries about their studies 2) a more positive desire to build community 3) to address students' general anxiety. A significant number also saw it as about giving information about mental health problems. Significant minorities also ticked addressing stigma and digital well-being. This response suggests a multi-layered conceptualization of mental health and well-being, but at the heart is a recognition that studying itself is stressful.

Table 4 How was the success of these activities being evaluated? (N=53)

Library staff observation and reflections	36	68%
Number of people attending activities	24	45%
Responses on social media	24	45%
Comments within general/ annual library survey	20	38%
NSS	17	32%
Measuring service use e.g. number of books borrowed from specific collections	17	32%
Number of activities conducted	15	28%
We were not evaluating our well-being activities	14	26%
Specific survey/ questionnaire after events	13	25%
Impact on referrals to mental health services	2	4%

The approach to evaluating success, summarized in Table 4, emphasizes library staff reflections, rather than "objective" seeming measures. This seems to be supplemented by a) sheer numbers of attendees at events b) responses on social media and, quite low down the list, formal evaluation tools such as surveys. Surprisingly low were questionnaires after events. Very low is direct measurement of referrals to mental health services. This picture suggests a limited priority placed on evaluation; but reflects, perhaps, the difficulties of evaluating impact on a multidimensional and intangible issue.

Table 5 Which library staff team(s) are responsible for work supporting student mental health and well-being? (N=53)

Everyone	14	26%
Multiple teams	12	23%
One team primarily	12	23%
An ad hoc working group	6	11%
One person	5	9%
No one	2	4%
No answer	2	4%

The responses summarised in table 5 were about how the library organized responsibility for supporting student mental health and well-being. This question was an open text box, with the answers being categorised by the researchers. These responses reflect the diverse organisational structures in libraries, but also very differing priorities. It is hard to make complete sense of these structures from a short answer, e.g. is saying that it is everyone's responsibility equivalent to saying that it has low priority or high priority? As with the response to evaluation, it suggests a diverse response to a rather complex agenda.

Table 6 What training do library staff team(s) with responsibility for supporting student mental health and well-being have? (N=53)

Short courses on mental health and well-being run by your university	42	79%
Customer service training	35	66%
Marketing training	9	17%
Formally accredited training on mental health	9	17%
No specific training	6	11%

Library staff training was primarily through short courses run through the institution (Table 6). In addition, it seemed to be seen as a part of customer service training. The amount of formally accredited training on mental health was relatively low.

Summary

Most activities to support student well-being appeared to relate directly to "traditional" library services, such as new collections, provision of information, the creation of dedicated spaces or spatial redesign. More "imaginative" approaches, such as animal petting, were relatively rare. They are given prominence in the professional literature, but this may be because they are striking examples of very novel practice. This is a strong stance because it is rooted in common understandings and capabilities of a library, e.g. as a collection, source of information and a space. It is also an indication that the priority for well-being reflected university priority, but not in a passive way simply referring to wider initiatives, but through making a distinctive contribution. The library was actively seeking to engage with the agenda.

The conception of the problem was partly directly relating to study issues; partly recognizing generalised anxiety; and also a positive desire to create a university community. The approach to evaluation rested on staff observation and reflection. This could be seen as positive in terms of not over-relying on quantitative metrics for an inherently complex construct, yet also is problematic in terms of

demonstrating value. The approach to training suggests that in general student mental health and well-being is seen as adequately addressed by CPD and perhaps seen as an aspect of customer service.

Support during the pandemic

Table 7 What kinds of activities are being specifically offered by the library to support student mental health and well-being during the CV-19 pandemic? (N=40)

Giving students access to additional learning materials online	36	90%
Reassuring messages via social media	35	88%
Reorganising website to emphasise digital support options	34	85%
Suspension of fines	34	85%
Linking to home university well-being related services	30	75%
Recommending leisure reading and content streaming sources	26	65%
Listing remotely-available well-being related books	24	60%
Highlighting lighthearted and/or distracting content via social media	22	55%
Offering webinars on other topics students are concerned about e.g. accessing resources remotely	18	45%
Additional FAQ related to well-being	8	20%
Offering webinars on well-being related topics	6	15%

Table 7 suggests that the main need was seen to be to guide students to electronic resources (this was also suggested by the answers to the question about how the problem was conceived). This answer suggests that well-being was being seen during the pandemic as tied to library support of study and that student anxiety relates specifically to access to the means of study: digital access to resources. The reorganisation of the website also suggests this. So the issue was not primarily seen through the lens of the impact of the pandemic on students' feelings of well-being e.g. through social distancing but much more in terms of the stress caused by shifting library services themselves and study concerns.

At the same time sending reassuring messages and recommendations of leisure reading more directly address well-being needs in themselves. A significant number of institutions were also linking to leisure or well-being specific books. Linking to university sites represents more of a "signposting" approach, that is to point people to more appropriate services, rather than dealing with the issue directly.

Most libraries were using the library web site (33/40 or 83%) and Twitter (32/40 or 80%) as well as Facebook and Instagram for this messaging. No libraries were using the Chinese equivalent, weibo Chinese students being the largest body of international students in the UK.

The target audience was universally undergraduate and masters students (100%), but a substantial majority also saw PhD students (36/40 or 90%) and academic staff (32/40 or 80%) as an audience for this material.

Table 8 How is the success of these activities being evaluated? (N=40)

Thank you messages received from students/staff	19	48%
Number of people accessing recommended resources	19	48%
Retweets/ favourites of content	17	43%

Number of messages distributed/ broadcast	12	30%
Number of people attending webinars	12	30%
We do not evaluate our well-being activities	11	28%

The approach to evaluation summarised in Table 8 reflects the focus on addressing well-being via facilitating access to electronic resources, e.g. measuring access to those sources. Thank you messages, rather than some more proactive measure were also being used.

Table 9 How would you define the problem you're trying to address? (N=40)

Student concerns about study/ access to resources	38	95%
Building sense of university community	27	68%
Loneliness during self isolation / social distancing	24	60%
General anxiety and depression	19	48%
Digital well-being as an aspect of digital skills	16	40%
Boredom	11	28%
Misinformation about the virus/fake news	9	23%
Stigma around mental health	8	20%
Worries about coming out of lockdown	7	18%
Health concerns about the virus	5	13%
Prejudice towards some groups of students, e.g. Chinese students	3	8%

The driver that all respondents recognised in Table 9 was the specific anxiety students might have about access to resources. In addition to this for many there was a sense of a desire to create a community and more specifically a sense of the issues around COVID-19 relating to social distancing (not at this point worried about coming out of lockdown or specific health concerns relating to the virus). What might be deemed information literacy type issues such as digital well-being or fake news come relatively low down the list, while not being insignificant.

Table 10 What was the main reason you decided to prioritise mental health and well-being related activities at this time? (N=38)

We have taken the initiative to align with university strategy	13	33%
We are formally coordinating with university strategy	9	23%
We are responding to student demand/ concerns	8	21%
Other	7	18%
We have seen other libraries undertaking similar activity	1	3%

Table 10 summarizes answers to how the approach to supporting mental health and well-being was aligned to the university. The question required respondents to pick one option, when they may well have had a mix of drivers. Alignment to the university strategy was an important driver, but it was more usually seen as shaped by the library's own initiative, not passively following institutional lead. Student demand was less often seen as the key driver.

Summary

The responses on the kind of activities being carried out during the pandemic suggest that the problem was primarily seen as linked to the shift to digital content for study, rather than anxiety directly related to the pandemic itself, though not to the exclusion of that. The library was proactively developing activities, not merely falling into line with university policy or merely signposting, though that was happening too. The audience was seen as the entire university community but emphasis was given to taught students.

An emerging holistic model of library support to student mental health and well-being

In addition to the data from the structured questions in the questionnaire, there were open text boxes for comments. These gave more context to the structured answers and also reveal a wide range of underlying attitudes to the support of mental health and well-being. What emerges from the range of activities and motivations articulated through the survey is a sense of the diverse ways the academic library could be involved in supporting student mental health and well-being. This section presents an outline model of these aspects as a tentative framework for summarising the character of library approaches to supporting mental health and well-being, consisting of eight aspects. All received some mention in survey responses, though, as discussed below, some were mentioned significantly more than others. COVID-19 also prompted a shift of emphasis. Each aspect carries some assumptions about what mental health and well-being mean. It follows that measuring success in each area implies applying different criteria. Each is also relevant to a different area of library work and so set of library staff. Each aspect complements the others and potentially a holistic approach might include all eight elements. Equally some emphasis could be given to one or several. They are often not clearly differentiated in actual statements.

Inherent library value

In this account the library as a whole from its usual, inherent functions impacts positively student mental health and well-being, because it contributes in a profound way to learning and the growth of the learner. The view is reflected in a statement such as the following:

> "The library has a central role to play in student mental health, not only in terms of supporting knowledge and research required for programmes and further research but also skills development for coursework , employability and life. Library can be a significant contributor to positive self image and identity , being a good/capable/able/successful/studious student/fellow groupworker. encouraging and facilitating curiosity. However, it can impact negatively if students perceive the library as not a place for them, or see barriers in engagement with texts, services and support"

This view focuses on positive mental health and well-being arising from psychological maturity. The impact could not really be measured. It is implicitly relevant to all library staff work.

Library services impact

Another aspect is to focus on specific services and their potential to be stress free or to create stress. It implicitly assumes that a cause of mental health and well-being issues is a particular type of study-

related satisfaction/ worry, specifically relating to library use, e.g. library anxiety. It would be potentially relevant to any particular staff work, but might be a new consideration for reviewing how a service is delivered. This was evident in the emphasis given to supporting students in the transition to e-resources after COVID-19. It is also implicit in this quote:

> *"Our Healthy Libraries project is reviewing all of the services we align to the [University] Student Health and Wellbeing Strategy, over the next few years we will be looking to embed our HL vision into all of our decision making through a re-alignment of our services and projects. "*

An example of the way that well-being might be a consideration for revising existing library arrangements is captured in this quote:

> *"Calming all spaces down by making them quiet, collaborative rather than group spaces as the noise was off putting to students and areas of the library had lost their focus on study"*

Another response mentioned the importance of presenting "as friendly a face as possible."

A further quote illustrates the way that considerations around well-being are relevant to any service and so integral to all library activities:

> *"It is difficult to draw the line between supporting well being and simply highlighting services that were already on offer but that students may not have been aware of e.g. certain eresources."*

Well-being as a library service

In this aspect the library can develop special library services to improve student well-being, such as special collections of leisure material/CBT books, specially designed relaxing spaces or the provision of mental health information, such as a libguide to information about wellness. The survey results showed that these were key activities pre-pandemic, and this is also reflected in comments such as the following:

> *"We started an [NAME] campaign a couple of years ago to support reading for pleasure & wellbeing (rather than reading for academic success) where we choose a wellbeing theme and buy a selection of fiction and non-fiction books which we then leave around campus for people to find/read and pass on. We put a specially designed book plate and review card in each book, tie it up with string and attached a library branded label with our social media handle and hashtag. We then encourage to tag us on social media when they find a book and share any comments. It has received a lot of praise and recognition and we have presented at several library conferences on the topic."*

Implicitly, rather than locating the issue as directly arising from library services, as in the previous aspect discussed, well-being is addressed more as an issue arising elsewhere that could be partly addressed through such new library services. The type of service offered would imply a concept of well-being. Thus creating a leisure collection or a relaxing library space implies a stress release model; a CBT collection is more directed to mental ill health. Success would be measured by use of these special services. As it is a particular library service, it would be a few specialist staff involved in developing such services that have the responsibility for student mental health and well-being, and they are likely to have specialist expertise.

Detection

Some responses suggested that the library is a place where students feel safe to confide their problems. In this sense the library has a special role in detecting issues, as a trusted, safe place.

> *"The Library is seen as a neutral zone. Students may have concerns about mental health issues ending up on their records and feel that they can speak to Library Staff without risk."*

Any sort of mental health or well-being concern could be addressed in this way, from exam stress to serious mental health issues. All front facing staff would have a responsibility to be aware of this issue and one might seek to develop greater sensitivity to detecting issues and liaising with other services to intervene.

Hosting

In this aspect, the library is a venue for holding events that relate to well-being. These are not inherently library related events, though it is critical that the library is a convenient large venue where people feel comfortable. Asked about what types of activity they organised a number of libraries mentioned animal petting, mindfulness sessions, craft classes and yoga. "Other types of activities" that were mentioned in response to this question included:

> *"Puzzles, Play Doh, Lego, Drawing etc."*

> *"Inspirational quotes, houseplants give-away, colouring-in, board games, blind date with a book"*

This would be relevant just to the few library staff responsible for running events.

Signposting

In this aspect, the approach is merely informing people of the services available to them, what in the UK is referred to as "signposting". The library is not seen as centrally concerned with mental health and well-being. The emphasis is on referring people on to more appropriate services, such as medical services.

> *"As previously mentioned we are mainly a referral route for student mental health and well being our focus is more on teaching and learning support plus signposting."*

This aspect might result from medicalising mental health and well-being, implying it is primarily the domain of expertise of another group or service. Probably this activity does not need to be measured as one would not see the library as needing to be evaluated in these terms. All customer facing library staff need to be aware of relevant information, at a basic level.

Library as a good partner

In this account emphasis is given to partnerships with other services around the university, rather than specific library services. Implicitly well-being is seen as multi-dimensional issue requiring multi-professional support.

> *"We found that the University was doing a lot in separate departments, often united but excluding the Library which was frustrating so we reached out to other leads in those departments and we now have a more united approach. It's important to see the whole picture so we are not duplicating efforts or being protective about what is 'our domain'."*

> *"Has to be done as part of the University approach or it can come over as tone-deaf or even hinder wider projects."*

This aspect relates strongly to detecting, hosting and signposting as these all imply participation in wider initiatives; but it could relate to any library role. Success is measured through the strength of partnerships.

The following quote combines detection, well-being as a library service and the partnership aspects, with also the dimension of co-creation with students (though stress is given to the collaboration with other service professionals). This was the only explicit mention of co-creation with students in the data, despite an increasing emphasis on this arising from Student Minds (2020).

> *"We work closely with colleagues in Student Services and observe that often, people seek advice and require support in the library and confide in staff who work on the frontline. Often, these conversations happen late at night, so we are conscious that all front line staff are key to supporting student mental health and wellbeing.*
>
> *We also feel strongly that a collaborative approach across the University is most effective and we are pleased to be part of the mental health strategy group for the University. Our [self help book] collection has been built collaboratively with colleagues in Student Services and we conducted a number of halls engagement and creative conversation events with the express purpose of building relationships and creating a collaborative and supportive environment through mapping user experience and understanding their needs. Small details, such as supportive messages on our white boards and random acts of kindness (tea bags and notes hidden in book shelves) go a long way with our students and we receive many comments of thanks.*
>
> *We developed a 'collaboration' space within the main library and used user feedback to develop the service. Students could make tea and coffee, use microwaves, be creative with lego etc."*

Mental health and well-being might be seen a liaison role for a few individuals in the library.
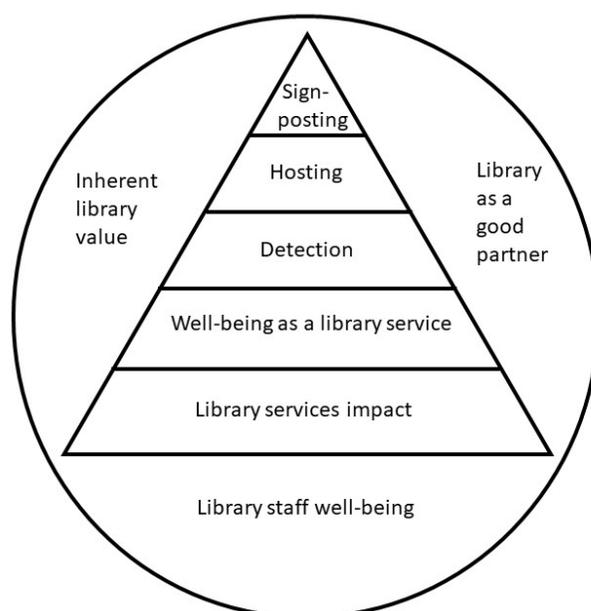
Library staff well-being

Our survey did not directly ask about the issue of library staff well-being, but this could be seen as another dimension to the picture as some respondents commented, because staff ability to support students could be seen as premised on their own well-being:

> *"We have also focused on the mental health and wellbeing of library staff, so they are well-placed to meet the needs of students when they engage with us."*

Discussion

Figure 1. A holistic model of library support to mental health and well-being

Thus, eight aspects of library support to mental health and well-being are identified, and are visualised in Figure 1. In the Figure the positioning within the central pyramid reflects the strength of commitment required, with the review of all services as the strongest and so at the base of the pyramid, and signposting as the weakest level of commitment, at the apex. Inherent library value is in the outer circle because it suggests that all aspects of the library contribute to student well-being. Library as a good partner might be demonstrated or supported through specific aspects in the pyramid, so is also presented outside the pyramid. Support to library staff well-being is also a background to other potential aspects, as the argument is usually that better staff with good well-being are better able to support students' well-being.

Table 11 below further elaborates the model indicating how each aspect implicitly views mental health and well-being and how such a service might be evaluated. It also suggests which library staff might be responsible, and indicates how "library" each is, in the sense of how far it is a library specific activity.

Table 11. The eight aspects of the holistic library model

Name	Summary of how library impacts well-being	Implicit view of mental health and well-being	How impact measured	Who in the library is involved	Frequency of mention	"Libraryness" of aspect
Inherent library value	Through doing what we always do	Rounded person; education is key to well-being	Overall service quality	All – through all work	Rare	High - library inherently contributes to well-being

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Library services impact	Through reviewing how we do things	Stress created by certain library processes	Successful destressing of processes	All – an aspect to review for all work	Common in relation to COVID-19	High - standard library operations could contribute to stress or well-being
Well-being as a library service	Through developing a new service	Targeted issues, it could be mental health via CBT or it could be de-stressing via space	Use of these services	A few specialist staff	Common pre COVID-19 responses	High - library can solve stress created elsewhere
Detection	Through strengthening sensitivity	Multi-dimensional	Referrals	All front line staff	Rare	High - library as safe space where people can share their problems
Hosting	Through hosting	Multi-dimensional	Attendance at special events	Events team	Common	Medium= the library is seen as a suitable venue, but there could be others
Signposting	Through signposting relevant services	Any, but stress of medical conditions	Referrals	All front line staff	Rare	Low
Library as a good partner	Through being a good partner	Multi-dimensional	Strength of collaboration	Liaison staff	Common	High - librarian as a good professional
Library staff well-being	Through attending to our own well-being	Multi-dimensional	Measures of staff well-being	Library leadership	Not addressed in the survey – but mentioned in comments	Low - these considerations apply to any service role

Much of the new writing around academic libraries and student well-being mentioned in the literature review above links to the model, especially well-being as a library service, as well as hosting and signposting. Many examples of novel services are given in the literature, with parallels too in the literature for public libraries. The literature often emphasizes the layer of partnership working implied by these activities (e.g. Ramsey and Aagard, 2018). The aspect of "Library services impact" has a strong link to the literature around library anxiety, since this research has always focused on library created issues for students, as opposed to addressing anxiety in student lives as a whole. Attending to library staff well-being links to the emerging work around the mindful librarian and contemplative pedagogies (Moniz et al. 2015; Charney and Colvin, 2018; Ruhlmann, 2017). The inherent library value aspect links to much wider literatures about the value of the library as an institution. Arguably a rounded response to the mental health and well-being agenda should consider all these eight aspects. Whereas, a minimal response might reduce the offering to signposting to other more appropriate service points. But one could also imagine a library focussing purely on the well-being of its own staff or focussing on re-evaluating library services' impact on student stress.

The impression from the survey is that pre-COVID activities focussed around well-being as a library service: new initiatives to impact well-being but reflecting a distinctive library contribution to a wider institutional well-being agenda. However, this could have arisen from a non-response bias. Libraries with novel services were more likely to respond to the survey. Few respondents did reduce the role to signposting, but that could also reflect a non-response bias. If a library did view the agenda in this light it would be less likely to complete the survey. Table 2 indicates the frequency with which different aspects were mentioned in our data, but given the nature of the sample this should be interpreted with caution.

It is logical to assume that what would affect the choice of emphasis in provision among the eight aspects would be:

1. The strength and nature of the wider institutional commitment.
2. Institutional structures, notably where the library is part of a broader student services, or as in Cambridge colleges, where students live in college.
3. The degree of enterprise of the library in creating partnerships and willingness of other services to respond to partnership offering.
4. Staff interests: a particularly committed librarian/ director might take services in a particular direction.
5. Contingent events, such as particular cases that might have shaped the direction of travel of the service.

Differences of emphasis were reflected in the survey responses about where well-being was placed organisationally and how much resourcing it received, this would follow in the logic of the model where different aspects seem to be tied to different roles (see Table 2 column 5).

Hosting seems to be over-represented in the professional literature, where novel aspects such as dog petting appear to be given a lot of emphasis, perhaps simply because they are a new idea.

Taken as a whole the model demonstrates a broad understanding of the potential role of the library in mental health and well-being across the library community. The most commonly mentioned interventions do seem to be rooted in the knowledge base of librarianship, e.g. the creation of collections of leisure or self-help reading. Column 7 of Table 11 below indicates the "libraryness" of each

aspect. The stress on active alignment with institutional priorities, suggest a positioning which is active in seeking to demonstrate the distinctive contribution of the library, rather than passively following a wider agenda or being merely performative.

The model reflects that the mental health and well-being agenda is multidimensional. It relates to every student (and staff) member's good well-being. It considers the impact of the stress of study as a whole, library related anxiety, and to more medical related issues as well. As an inclusive concept that is relevant to all staff and students it is hard to compartmentalise who should be responsible or what type of response is appropriate. The model also reflects that it is a fundamental issue that calls for the reassessment of all aspects of an institution's work, including all aspects of the library's activities, as well as the creation of new services.

This also implies a rather complex challenge in terms of measuring effectiveness, since each of the eight aspects might be best measured in a different way (or even be considered beyond measurement, as with the inherent library value aspect) as evidenced in Table 11, column 3. This could be thought to underlie the rather under-developed approach to evaluation reflected in survey responses. On the one hand this is positive in that a reductive approach to measuring something as complex as mental health and well-being has not been taken. On the other hand, it does make it hard to robustly justify how the library impacts well-being.

The impact of COVID-19

Our data showed that the COVID-19 pandemic did have a significant immediate impact on how mental health and well-being was being addressed by UK academic libraries. It seemed to create a strong sense of the need for a review of library services' own impact on well-being because the shift to digital learning was creating stress, as students struggled to adjust to a greater reliance on e-resources. So, the issue was seen as a type of study related stress. The impact of social distancing was also perceived to be a major issue for student mental health and well-being. At the same time many pre COVID-19 interventions relied on physical presence in the library, which suddenly became impossible. Thus, library well-being services such as relaxing spaces or nap stations and hosting well-being related activities became less relevant. Clearly much greater emphasis had to be placed on digital based responses, such as through the library web site and social media. Not surprisingly in a crisis situation evaluation of services appeared to rely more on informal feedback than formal mechanisms. This should not mask significant continuities, such as emphasis on the value of fiction and CBT collections. The stance of the library towards proactive alignment to institutional agendas did not shift.

The survey was conducted early in the pandemic. At the time of writing it seems highly likely that the crisis will be felt well into the academic year 2020/21. In particular, social distancing conventions will continue to constrain how libraries operate as physical spaces, shifting emphasis to digital support. Local patterns of shut down and release will have a differential effect around the country as well as differences in national guidelines between England, Scotland, Wales and Ireland. The model provides a framework for analyzing these shifts. It is too early to know whether this will lead to a long-term change in how mental health and well-being are addressed. This may depend on whether the shift towards digital is maintained. It is highly unlikely that mental health and well-being will not remain key priorities for institutions and so for academic libraries.Conclusion

This paper offers an analysis of how academic libraries in the UK are supporting student mental health and well-being. In addition to analyzing data from around one third of UK universities about their activities prior to the COVID-19 pandemic, it also includes some data about how UK libraries were responding to the pandemic in May 2020. Together the data offers the foundation for a larger theorisation of the range of responses of academic libraries to this increasingly important agenda, compared to previous research which consists primarily of case studies of particular libraries' innovations. The resulting holistic model of library support to student mental health and well-being offers a new framework of how libraries conceptualise the issue, how they respond to it and how they evaluate the success of these activities. It also adds to our picture of the gradual evolution of the academic library away from a place purely to store books or even digital information, repositioned as a service organization, aligned to institutional priorities and with a stress on excellent partnership working (Cox, 2018). The framework could be useful for practitioners to reflect on the range of services they wish to develop and how these should be evaluated. Currently most libraries seem to be addressing some of these aspects, the model assists in identifying different dimensions of the issue to see how it can be more fully conceptualized and addressed. In the UK context it can be seen as complementing the whole university approach, the UUK (2020) vision of the healthy university, where well-being is addressed across the four domains of learning, support, work and life and in ways that are strategic, aligned, adaptable, shared and evolving. A library is a support service but also a place where learning happens. It is a workplace for some. All these dimensions should be seen as impacting well-being. The model offers a way to think about the approach strategically, and ways the response to the agenda can adapt or evolve, e.g. from just signposting to more complete services. The good partner aspect suggests the importance of alignment.

It must be acknowledged that the current model is based on limited survey data, from a fraction of university libraries, almost entirely in the UK. We suspect that non-response bias means that the extent of activity in this area is over-emphasised in our findings, because those libraries with a particular

investment in the topic were more likely to respond. Non-responding libraries were likely to be more passive in their approach, e.g. restricting their response to signposting other university services. Having acknowledged this, another factor impacting the response rate was probably the demands of COVID-19 and the furloughing of many staff. Certainly, however, our comments on the frequency with which particular aspects of the model are followed should be treated with caution. Furthermore, it is an evolving landscape. As these types of service are developed professional understanding and responses to the agenda will mature. Furthermore, as an agenda shaped significantly by policy at national level and by institutional level decisions, external factors will also lead to changes in priority. For example, we should expect an increasing stress on services being co-produced with students (Student Minds, 2020). In addition, the later parts of the pandemic crisis may also lead to shifts in understanding of the need and means of addressing it. Thus, further research in the UK is required to develop the model further. Data from other countries is also needed. In particular, a qualitative study of a range of institutions which organize mental health and well-being related services differently would expand our understanding of how such activities fit into shifting conceptualizations of the library and librarian identities.

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