What is the potential of public libraries to promote public mental 
health & wellbeing? Findings from a cross-sectional study of 
community-dwelling adults

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Abstract

The role of public libraries has changed significantly over the last few decades, but they remain popular and are increasingly 
well-positioned to support the mental health and wellbeing needs of members of the community. We conducted a cross-sectional 
online survey and interview-based study with community-dwelling adults to explore the potential of libraries as community hubs 
to tackle health and digital inequalities and promote mental and physical health and wellbeing. We analysed data from electronic 
survey and interviews to gauge perceptions. Descriptive statistics and thematic analysis were used to identify key trends and 
emergent themes. Our study findings show that libraries remain popular and are considered a ‘safe place’ by community 
members, irrespective of whether they are frequent users of services. Libraries already offer a variety of resources that either 
directly or indirectly support health and wellbeing, but public awareness of these services is limited and acts as a hurdle to 
improving community health and wellbeing. Targeted engagement with residents is needed to increase awareness of the services 
libraries offer, including community interventions to help tackle loneliness and inequalities in digital and health literacy. There 
was a clarion call for library staff to be more involved in decision-making. By acting as community hubs, libraries are ideally 
suited to deliver interventions to help tackle the existing and emergent health and digital inequalities following the advent of 
the COVID-19 pandemic.
What is the potential of public libraries to promote public mental health & wellbeing? Findings from a cross-sectional study of community-dwelling adults

<table>
<thead>
<tr>
<th>Name</th>
<th>Degrees</th>
<th>Designation</th>
<th>Institution</th>
<th>ORCID</th>
<th>Email</th>
</tr>
</thead>
<tbody>
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Abstract

Purpose of research
To explore the potential of libraries as community hubs to promote mental and physical health and wellbeing.

Design
Cross-sectional online survey and interview-based study with community-dwelling adults and library staff.

Methods
We analysed data from 58 respondents using a 14-item electronic survey and conducted interviews with 12 library users and staff to gauge perceptions. Descriptive statistics and thematic analysis were used to identify key trends and emergent themes.

Results
Libraries remain popular and are considered a 'safe place' by members of the community, irrespective of whether they are frequent users of services. Library users' lack of awareness of community-facing services could act as a hurdle to improving community health and wellbeing. Targeted engagement with residents is needed to increase awareness of the services libraries offer, including community interventions to help tackle loneliness and inequalities in digital and health literacy. Library staff often did not feel involved in important decision-making. Various barriers and drivers and practical recommendations were identified to leverage libraries as hubs to promote community health and wellbeing.

Conclusion
Libraries already offer a variety of resources that either directly or indirectly support the health and wellbeing of community-dwelling adults and young people, but public awareness of these services is limited. By acting as community hubs, libraries are ideally suited to deliver interventions to help tackle the increasing health and digital inequalities following the advent of the COVID-19 pandemic.

Keywords
Self-care, libraries, prevention, community development, public engagement, health, and wellbeing, loneliness
Introduction

Libraries have been providing services that reflect the needs of local communities since the nineteenth century in the UK (1). The public perception of what libraries offer may be gradually shifting because libraries are no longer used exclusively for accessing books but increasingly provide a wider range of public services that could positively impact the health and wellbeing of the community (2). Public libraries are also considered inclusive public spaces where individuals from a wide range of ages and backgrounds can interact, acquire knowledge and exchange ideas through a variety of services, including access to the internet, formal training events and makerspaces in a community setting (2, 3).

Demand for wellbeing services has increased dramatically in recent years and since the advent of the COVID-19 pandemic (4). Wellbeing is a broad concept essential both at the micro (personal) and macro (societal) levels and is usually measured through self-reporting (5). It involves a holistic assessment of one's mental health, physical health, living conditions, social life quality, ability to achieve self-potential, and overall life satisfaction (5, 6). Improved wellbeing is associated with better health, employment, economic consequences, and social outcomes (6, 7). For example, higher levels of wellbeing are associated with physical health benefits, including disease prevention, longevity, and even improved immune system functioning (8, 9).

Publicly funded libraries offer a variety of health, educational, social, and economic services that influence wellbeing (10). In addition to bridging cultural gaps as social entities with epistemic value, libraries offer a means to empower users through learning. They provide free and easy access to information, promote digital literacy skill improvement, support employment-seeking and, in these ways, can support individuals (10). Through their role in improving universal access to information, libraries contribute to overall knowledge, digital, and health literacy, in turn increasing employment levels, skillsets, health promotion, and social involvement, all of which contribute to improved wellbeing (11, 12). Libraries also offer social advantages to nearly all age groups (13, 14). They provide a low-cost means for entertaining children while also improving their social and literacy skills across essential transitions in their development (13). To the elderly or underprivileged with declining relationships and social interaction, libraries extend social, emotional and moral support and encourage connecting with similar individuals to reduce isolation (14). As early interventionists, librarians provide self-help methods for mild-to-moderate mental health conditions in a non-clinical, embraceable, and stigma-free space (15). Library staff also contribute to social and health equality by providing accurate, easy-to-understand guidance on health services to vulnerable groups (15). Above all, libraries offer a sense of belonging and a level of trust to the community (3). In a recent poll, British adults ranked librarians among the top five professions that could be trusted to give reliable information, with medical professionals topping the list (16).

Despite the national lockdowns to tackle the COVID-19 pandemic, which had a massive impact on daily living, 7.6 million active library users borrowed books between 2019 and 2020, and 34% of all adults in England reported visiting a library in the past 12 months (13). Although overall library visits have decreased, there is evidence that a large portion of the UK community still values libraries, regardless of library use (17,
Despite library building closures during the lockdown, library memberships increased by 32%, 2.9 million people were proactively contacted, and more than 75% of libraries hosted online events and services (19, 20).

It is clear from the available evidence that public libraries have an important role to play in promoting mental and physical wellbeing, social inclusion and creating social connections. Library services are well-positioned to provide health and wellbeing needs for people of different backgrounds and can therefore be ideal for helping public healthcare institutions in communicating with diverse communities (21). There is a growing literature regarding the role of libraries in health and wellbeing, rooted in earlier research, which is primarily based on case studies emphasising the most novel practices of local libraries (22, 23). While those are informative, more insight is needed to understand the public perspective of the broader range of routine and more specific library services available to the public to improve health and wellbeing which this study aims to provide.

**Study objectives**

The purpose of this study was to explore the potential of libraries as community hubs to promote self-care, physical and mental health and wellbeing in the general population. We also sought to explore how libraries can be repositioned in the future to tackle inequalities in health and digital literacy.

**Methods**

**Study design**

A mixed-methods research study (a sequential explanatory design: participant selection model) using an eSurvey and a personal interview component was used to explore the potential of repositioning libraries as community hubs to promote self-care, mental and physical health and wellbeing (24). The study design involved three components: an online cross-sectional survey of community members (library users) in the London Borough of Hammersmith and Fulham to evaluate the role of public libraries in promoting community health and wellbeing. This was followed up by semi-structured interviews with seven library users to capture themes that explain data retrieved from the survey. An additional qualitative component of semi-structured interviews with five library staff members was held to understand their perspectives, and how their libraries can be repositioned to improve the health and wellbeing of their communities. A sequential explanatory design was adopted whereby contextual data from semi-structured interviews were used to interpret data collected from the eSurvey.

**Quantitative data (eSurvey)**

**Participants**

Members of the community who were 16 years of age or older with access to a smartphone or personal computer were invited to complete a short (<10 min) anonymous survey.
Posters with a QR code and a link to the survey were disseminated across six public libraries in the London Borough of Hammersmith and Fulham (Askew Road Library, Avonmore Library and neighbourhood centre, Fulham Library, Hammersmith Library, Hurlingham Academy School and Community Library, Shepherds Bush Library). Information about the study, including the Participant Information Sheet (PIS), was provided in the introductory section of the survey. The PIS detailed the study's objectives, protecting participants' data, their right to withdraw at any stage, information on where, when, and for how long data is retained, the study's investigator, and the survey's length. Consent for participation was taken, and the data collected were anonymised. Survey results were stored on a secure institutional database that was only accessible by the team of researchers involved in this study. No IP addresses were collected; therefore, the team could not identify any cases of duplicate entries. Potentially eligible participants were informed that their involvement was voluntary and that it was not linked to a monetary incentive. They were informed that their participation could help advance knowledge and future policies around wellbeing services provided by libraries and that they will have the opportunity to access a summary of the research findings.

Data Collection
Data from 58 respondents (library users) was collected using an anonymised electronic survey made available on the Imperial College Qualtrics platform for three months (15 November 2021 to 15 February 2022). Qualtrics's websites have first party cookies and allow third parties to place cookies on devices. The 14-item open survey was developed by a team of researchers and piloted by six researchers before its online dissemination. The survey included multiple choice questions and Likert-scale responses. Questions were aimed at understanding perspectives about the importance and utility of libraries in promoting community health and wellbeing. The survey included questions on respondent demographic characteristics (age, gender, ethnicity, educational level and employment status), and various questions to understand their perspectives about the value of libraries in the community setting and whether the libraries are well-positioned to deliver more health and wellbeing services and to help tackle inequality in health and digital literacy. Participants could review their answers before submitting them. The last question of the survey gave respondents the opportunity to provide their names and contact details in case they wished to be contacted by the study team to arrange an interview. The complete survey is available using the following link:
https: Anonymised

Data analysis
Survey responses were summarised using frequencies and percentages. Descriptive analysis was performed using Statistical Package for Social Sciences (SPSS) version 28.0.1. The quality of the survey was assessed by completing the Checklist for Reporting Results of Internet E-Surveys (CHERRIES) to guide reporting of the eSurvey (25).

Qualitative data (Interviews)
Participants
The qualitative portion of the study involved interviewing a convenience sample of library users and library staff. After receiving an invitation email including PIS and a
link to an electronic link to the consent form, library users were then contacted for an interview. Library staff who consented to be interviewed were identified through personal contacts. Community perspectives were gleaned from participants who consented to be contacted after completing the eSurvey.

**Data collection**
A total of 10 interviews (seven library users and five library staff) were conducted which lasted between 45 and 60 mins and were informed by the guides and allowed saturation. Three researchers not previously known to participants conducted the interviews virtually using Zoom or Microsoft Teams. The interviews were audio-recorded, auto-transcribed, and subsequently checked manually for accuracy. Only three authors, AEO, MK and MA interviewed participants and had access to complete transcriptions of interviews. Neither the interviews nor the transcripts were repeated or returned to participants.

**Data analysis**
Grounded theory approach was used whereby thematic analysis was conducted on interview transcripts by identifying codes and constructing themes (26). MK, female carried out the data analysis with support from MA female and ES female. Researchers reviewed the transcripts and agreed on emerging themes, which were later discussed with a wider research team. Emerging themes were grouped into clusters and categorised. A conceptual map was developed to illustrate the relationship between the categories and themes derived from qualitative data. Anonymised ad verbatim quotes from the transcripts were noted to illustrate a selection of key themes. The Consolidated criteria for Reporting Qualitative research (COREQ) Checklist was used to guide reporting of interviews (27). The study team did not discuss findings with participants but were keen to share publications with anyone who expressed interest.

**Results**
A total of 58 respondents completed the survey, and contextual data was collected from 12 participants (seven members of the community and 5 library staff).

**Demographic profile of study participants: eSurvey**
The electronic survey captured responses from 58 respondents from across London. Two respondents were excluded as they did not complete the full survey. This resulted in a final sample of 56 library users. More than half (57.0%) of the respondents were aged 31-50 years old. Most respondents (73.2%) were male, and almost half (48.2%) identified their ethnicity as from a white ethnic background (Table 1). More than half (64.3%) of respondents were educated to undergraduate degree or higher level, and 68% were in full or part-time employment. The complete characteristics of eSurvey respondents are shown in Table 1.
Table 1: Characteristics of Respondents

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<thead>
<tr>
<th>Characteristic</th>
<th>N</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>15</td>
<td>(26.8)</td>
</tr>
<tr>
<td>Male</td>
<td>41</td>
<td>(73.2)</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under 20</td>
<td>6</td>
<td>(10.7)</td>
</tr>
<tr>
<td>21-30</td>
<td>9</td>
<td>(16.1)</td>
</tr>
<tr>
<td>31-50</td>
<td>20</td>
<td>(35.7)</td>
</tr>
<tr>
<td>51-60</td>
<td>12</td>
<td>(21.4)</td>
</tr>
<tr>
<td>60 and over</td>
<td>6</td>
<td>(10.7)</td>
</tr>
<tr>
<td><strong>Ethnicity</strong></td>
<td></td>
<td></td>
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<tr>
<td>White</td>
<td>27</td>
<td>(48.2)</td>
</tr>
<tr>
<td>Mixed/ multiple ethnic groups</td>
<td>5</td>
<td>(8.9)</td>
</tr>
<tr>
<td>Asian/ Asian British</td>
<td>11</td>
<td>(19.6)</td>
</tr>
<tr>
<td>Black/ African/ Caribbean/ Black British</td>
<td>7</td>
<td>(12.5)</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>6</td>
<td>(10.7)</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed secondary school</td>
<td>5</td>
<td>(8.9)</td>
</tr>
<tr>
<td>Graduated from High School / College</td>
<td>15</td>
<td>(26.8)</td>
</tr>
<tr>
<td>University degree or higher</td>
<td>36</td>
<td>(64.3)</td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time employed</td>
<td>28</td>
<td>(50.0)</td>
</tr>
<tr>
<td>Part-time employed</td>
<td>10</td>
<td>(17.9)</td>
</tr>
<tr>
<td>Retired</td>
<td>1</td>
<td>(1.8)</td>
</tr>
<tr>
<td>Self-employed</td>
<td>6</td>
<td>(10.7)</td>
</tr>
<tr>
<td>Student</td>
<td>9</td>
<td>(16.1)</td>
</tr>
<tr>
<td>Unemployed</td>
<td>2</td>
<td>(3.6)</td>
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Table 2: Main Survey Findings

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<tr>
<th>Service Description</th>
<th>N</th>
<th>(%)</th>
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<tbody>
<tr>
<td><strong>How often do you go to the library?</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than once a week</td>
<td>7</td>
<td>(12.7)</td>
</tr>
<tr>
<td>About once a week</td>
<td>6</td>
<td>(10.9)</td>
</tr>
<tr>
<td>About once a month</td>
<td>10</td>
<td>(18.2)</td>
</tr>
<tr>
<td>A few times a year</td>
<td>16</td>
<td>(29.1)</td>
</tr>
<tr>
<td>Rarely or never</td>
<td>16</td>
<td>(29.1)</td>
</tr>
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<td><strong>Which type of library do you usually go to</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local authority funded library</td>
<td>36</td>
<td>(65.5)</td>
</tr>
<tr>
<td>Other (Charity run, School or University library)</td>
<td>23</td>
<td>(41.8)</td>
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<td><strong>Which services are you familiar with at your local library?</strong></td>
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<tr>
<td>Borrowing books or e-books or other items (e.g., CDs, DVDs, computer games, talking books)</td>
<td>43</td>
<td>(76.8)</td>
</tr>
<tr>
<td>Café/shop</td>
<td>15</td>
<td>(26.8)</td>
</tr>
<tr>
<td>Free access to Internet/computer</td>
<td>32</td>
<td>(57.1)</td>
</tr>
<tr>
<td>Photocopying/printing/faxing</td>
<td>26</td>
<td>(46.4)</td>
</tr>
<tr>
<td>Accessing information e.g., about/or the local community, Newspapers/magazines</td>
<td>18</td>
<td>(32.1)</td>
</tr>
<tr>
<td>Adult training courses on offer (literary courses, computer skills/IT sessions, employment skills, financial skills training)</td>
<td>11</td>
<td>(19.6)</td>
</tr>
<tr>
<td>Bibliotherapy activities (e.g., books on prescription, therapeutic reading groups, computer-based cognitive behavioural therapy)</td>
<td>12</td>
<td>(21.4)</td>
</tr>
<tr>
<td>Children's activities (e.g., story time, Summer Reading Challenge)</td>
<td>13</td>
<td>(23.2)</td>
</tr>
<tr>
<td>Health services (e.g., health checks, health information &amp; advice, exercise classes)</td>
<td>5</td>
<td>(8.9)</td>
</tr>
<tr>
<td>Lectures/readings/special events</td>
<td>15</td>
<td>(26.8)</td>
</tr>
<tr>
<td>Reading groups</td>
<td>10</td>
<td>(17.9)</td>
</tr>
<tr>
<td>Room hires</td>
<td>14</td>
<td>(25.0)</td>
</tr>
<tr>
<td>Services for groups with special needs (e.g., housebound/visually impaired)</td>
<td>7</td>
<td>(12.5)</td>
</tr>
<tr>
<td>Socialising</td>
<td>7</td>
<td>(12.5)</td>
</tr>
<tr>
<td>Space to wait/relax, work, or study</td>
<td>32</td>
<td>(57.1)</td>
</tr>
</tbody>
</table>
Other 4 (7.1)

To what extent do you feel libraries are suited to promote physical & mental health & wellbeing?
- Not at all 3 (5.5)
- Slightly 6 (10.9)
- Moderately 11 (20.0)
- Very 20 (36.4)
- Extremely 15 (27.3)

What aspects of health & wellbeing are libraries well positioned to provide?
- Healthy living/wellbeing centres 33 (60.0)
- Library space for health checks etc 17 (30.9)
- Mental Health Awareness Days/activity 36 (65.5)
- Health promotion & Health information activity 31 (56.4)
- Support/provision for self-help/support 34 (61.8)
- Signposting to other services 29 (52.7)
- Support for other organisations (Events and activities /& use of the space) 27 (49.1)
- Reading groups 36 (65.5)
- Book/reading clubs with specific health or target group focus 37 (67.3)
- Other (please specify) 3 (5.5)

Visiting the library helps get me out of the house, get advice & feel connected
- Agree 39 (69.6)
- Neither agree nor disagree 11 (19.6)
- Disagree 6 (10.7)

Libraries are/can be the hub of cultural & social gatherings & activities
- Agree 45 (83.3)
- Neither agree nor disagree 5 (9.3)
- Disagree 4 (7.4)

Using the library service can help people who may be feeling isolated and/or lonely
- Agree 47 (87.0)
- Neither agree nor disagree 6 (11.1)
- Disagree 1 (1.9)

I enjoy visiting libraries to take part in clubs (e.g., books, meetings, fitness clubs)
- Agree 23 (44.2)
- Neither agree nor disagree 17 (32.7)
- Disagree 12 (23.1)

Libraries help me access digital services (e.g., internet access)
- Agree 35 (64.8)
- Neither agree nor disagree 10 (18.5)
- Disagree 9 (16.7)

Libraries are a good place for trusted information & gaining knowledge or skills
- Agree 49 (90.7)
- Neither agree nor disagree 4 (7.4)
- Disagree 1 (1.9)

Libraries help me learn about healthy eating options
- Agree 26 (49.1)
- Neither agree nor disagree 15 (28.3)
- Disagree 12 (22.6)

Visiting the library can improve my mental health & wellbeing
- Agree 40 (75.5)
- Neither agree nor disagree 10 (18.9)
- Disagree 3 (5.7)

Information about health & wellbeing services delivered by the library is not advertised enough
- Agree 44 (83.0)
- Neither agree nor disagree 6 (11.3)
- Disagree 3 (5.7)

Which of the following aspects of health & wellbeing would you like to see being promoted more often?
- Exercise & fitness classes/ activities (Taiichi, yoga for children and/elderly (e.g., with chair) 36 (64.3)
- Sessions on healthy behaviours (exercise, diet, smoking, drinking etc.) 36 (64.3)
- Mental health & Mindfulness activities & groups 40 (71.4)
- Boardgame sessions/ groups (for socialising & brain training) 28 (50.0)
- Film club 24 (42.9)
- Coffee morning / Chatty cafes 30 (53.6)
- Knitting 18 (32.1)
- A local group for people with similar health issues 22 (39.3)
- Quiet place to relax or study 36 (64.3)
- Friendly – spaces, staff, activities 27 (48.2)
Survey findings

Over half of the respondents (59%) rarely visited the library (only a few times a year), compared to 12.7% who frequented the library more than once a week. Generally, 65.5% used publicly funded libraries, as opposed to a charity run, school and university libraries.

Most respondents were familiar with traditional library services such as borrowing books (76.8%), accessing a computer and/or the internet (57.1%), using a photocopier, printer, or fax machine (46.4%), or as public spaces to wait, relax, work, or study (57.1%). Significantly fewer respondents were familiar with some of the more specific health and wellbeing-related services that many public libraries offer, including health services (8.9%) such as health checks, health information and advice and exercise classes, socialising (12.5%), or services for groups with special needs (12.5%) including activities for individuals who are housebound or have a visual impairment.

More than half (63.7%) felt libraries are 'very' or 'extremely' suited to promote overall physical and mental health and wellbeing in service users (Figure 1). Only a minority (5.5%) thought libraries are not at all suited to promote the physical and mental health and wellbeing of service users. Almost all respondents (90.7%) agreed that libraries are good places to acquire trusted information, new knowledge, or skills. A considerable percentage agreed that visiting the library helps them get out of the house, get advice, and feel connected (Figure 1). Many respondents (87.0%) agreed that using library services can help people who may be feeling isolated or lonely improve their mental health and wellbeing (75.5%), and that libraries can be a hub of cultural and social gatherings and activities (83.3%).

Many respondents (83.0%) agreed that health and wellbeing services provided by libraries are not advertised enough. When asked about the barriers to promoting health and wellbeing services in libraries, the three most common barriers stated by respondents were 'lack of awareness about services offered' (73.2%), 'insufficient funding' (69.6%), and 'library staff not feeling supported' (58.9%) (Figure 2).
Figure 1: Agreement levels to statements regarding how public libraries could impact the health and wellbeing of service users and the community (Green = agree; Blue = Neither agree nor disagree; Red = Disagree)

Figure 2: Health and wellbeing aspects respondents want their local library to promote
Interviews

Demographic profile of interview participants
Two focus groups and six interviews, ranging from 25 to 60 mins each, were conducted with a total of 12 participants (five library staff and seven library users) during the study timeline (Table 3). The library staff sample included library managers and community engagement officers; three were female and two were male, ranging between 35 and 50 years old. The sample of library users consisted of four females and three males aged between 19 and 45 years old. A total of five themes were retrieved from the interviews: (1) perceptions of libraries and (2) how libraries evolved (3) library services, (4) extant barriers to promoting health and wellbeing in libraries, and (5) recommendations to efficiently promote health and wellbeing (Figure 3).

Table 3: Characteristics of Interviewees

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Perception of libraries
When asked about their perceptions of libraries, library users and staff felt that libraries, as public buildings, are considered a 'safe place' by many and that they are often "a quiet and productive place" Almost all participants felt that the libraries were friendly, familiar, and welcoming to people from all walks of life. There was also unanimous agreement that libraries offered a good range of activities for various groups with different needs.

"It was somewhere familiar and safe and welcoming, and a place I could go to. There are sessions like coffee mornings, where local elderly people could go and sit and chat, and a regular member of staff would coordinate it so, they had that familiarity." (P3, age 39)

"...people were walking into libraries as soon as we opened after the lockdown. It's like they gravitated to libraries. That's because we're free, we're safe, we're non-judgmental. Even now, people complain that they're trying to get hold of other departments in the council, but the library - we're frontline. Our doors are always open, and we don't have barriers like saying you are not welcome." (P10, age 45)
Members of the community felt that libraries were not only a reliable source of information but also a place to borrow books and learn new things. For some, the library had sentimental value, such as recollecting memories and passing on the love of books and libraries to children.

"You know I will probably never stop going to the library. You know I've passed that [tradition] on to my daughter in the same way that it was passed on from my parents, so I hope my daughter will keep going." (P11, age 37)

Almost all respondents considered the library as a social space, where there is routine interaction between people, and the interactions were different in that "it's not like we're buying and selling things." A library-using mother felt the library was a space to spend quality time with her children. Two library users interviewed, did not perceive the library as a place to socialise and connect with others.

"To be honest, no! Like I don't go to a library to socialise, and I feel like when I go there, I go there to be productive, and for that, I need to be quiet. I don't see the library as a place where I can hang out with my friends. Maybe it will change." (P7, age 19)

The evolution of libraries
Almost all staff acknowledged that libraries had undergone significant restructuring over the years in how they are managed, run and in the type of services they provide. Positive changes included the diversification of services that can help build community resilience and improve literacy levels. The role of library staff has also changed to include more person-centred approaches.

"...When we interview for a job at the library, we're really looking for someone who loves people because it's not just about borrowing books and CDs now, it's about interacting with people and being at the heart of the community." (P1, age 50)

The negative changes perceived by librarians were a reduction in the number of staff, library staff feeling devalued, lesser footfall, and fragmented library services.

"On the one hand, libraries are imagined to be places where skilled community development happens. Yet, on the other hand, people(staff) feel quite devalued, and they are referred to as assistants." (P5, age 49)

Most library users mentioned that they viewed libraries merely as a place to borrow books and read in a quiet space (in the past). They assumed that it was a place where people who had nowhere else to go, sat for the day, accessed the internet, and read newspapers.

"When I was little, you had this image of the sort of people who had nowhere to go in the day, homeless people, elderly people went to the library. There was always like a joke that if you couldn't afford to put the heating on or keep your house warm during the day, go and sit in the library for the day and read the
newspaper and read the books because it was a warm space, and nobody could chuck you out." (P11, age 37)

Many respondents (library users and staff) listed introducing computers and having free access to the internet, expanding community engagement activities, and diversification of services as recent and ongoing changes in the library. Some library users expressed that they would like libraries to be more digital and almost all expected more digitalisation in the future. Most users and staff thought that all, if not most, activities or services will and should shift online and become more accessible to people. Few respondents stressed that the downside of online delivery of services might cause minimal engagement with the community and the exclusion of people who are digitally inactive or unfamiliar with technology.

"All going to be shifted online and become more digital because even now, a lot of people access their books online and there are services and activities online, especially after COVID." (P6, age 25)

Library services
When asked what existing health and wellbeing services or activities were available in their library, all librarians were aware of the services and listed various activities provided by their library, particularly services related to health and social activities. Librarians indicated that (online) coffee mornings, ESOL (English for Speakers of Other Languages) conversation groups, and free yoga and meditation sessions were some of the most popular services that gained traction by users.

Conversely, most library-users were not aware of many services and activities provided by libraries. Very few library users knew that libraries offer such health and wellbeing services or, at most, were only able to list a few available services.

"I haven't heard, I haven't been aware that libraries do that kind of stuff, and I think that would be a great idea, especially if it was free. But no. Yeah, I had no idea that you could get that. I think if I knew that there were that sort of like activities or services available, I would probably at least consider popping along." (P12, age 27)

Barriers to promoting health and wellbeing
Lack of community awareness, funding concerns, staff-related barriers, and services were identified as a barrier to promoting health and wellbeing in the community.

(a) Community awareness
All participants agreed that community members are unaware of all services provided by the library. In response to a question about library promotion and marketing, librarians stated using "word-of-mouth" and “making people aware of the activities when they visit the library” were common practices used to spread awareness of health and wellbeing services. After the Covid-19 pandemic, librarians used social media for the first time to promote their services and connect with their communities.
“Some people don’t ever come into a library so wouldn’t know. Some people don’t use social media so wouldn’t know. So, if those two things are combined, how would they know about the library service? So, what one thing we need working on.” (P10, age 45)

“They are like, yeah, I’m sure that they are a bit of an untapped resource like we do not have people knowing, yeah, but it’s available.” (P11, age 37)

(b) Funding concerns
The librarians felt there was a limitation to what could be offered due to high demands on them without proper funding, staffing, and training. In parallel, most library users acknowledged that services are extremely stretched, budgets are tight, and that lack of funding could be linked to issues with staffing and services.

“You know, we are the only council’s walk-in service. Anyone can come in, there’s no restriction and because of all the cutbacks, there are hardly any community centres or days centres, so we are really important. But with that comes quite a lot of issues as well that we’re not always very well equipped to deal with because we get a lot of.” (P4, age 35)

(c) Staff-related barriers
Most library-using participants mentioned that library staff were amiable, helpful, warm, and welcoming. Many users mentioning that staff had gone above and beyond to help people in need, and when they could not, they pointed users in the right direction to get further help. On the other hand, many participating librarians felt devalued. Some staff cited the hurdles to promoting health and wellbeing when using libraries as a vessel such as lack of staff dedicated to specific aspects of library activities, lack of training and involvement in decision-making. Additionally, resistance to change could be felt from some staff participants during the interviews.

“I mean, it’s fascinating, isn’t it? Because it boils down to a very specific collection of skills that are quite difficult to acquire. Librarians as sort of counsellors, advisors, performer straddler and critic. Yeah, you know, it’s like a dilettante sort of sharing your appreciation of things. It’s such a range of skills, and yet the staff are generally, I think, are quite devalued.” (P5, age 49)

(d) Services
In addition to unawareness of the services provided, some librarians felt that services and activities on offer were “not connected to today’s youth”. Few young library-using participants mentioned there is a potential for libraries to be perceived as “uncool” and that young people may avoid libraries due to fear of bullying. Other concerns raised by library users were inadequate access to services, a faulty perception of the library, a lack of designated areas for activities, timing for activities that were often inconvenient, and challenging user behaviour.
“Also, I feel like there’s a stereotypical library image where younger kids are looked down upon. So, like going to a library, you may be considered a geek or stereotypical stuff like that, but that needs to change because children’s, especially mental health is becoming increasingly aware we need places where kids can actually go and become educated and have a safe place to go.” (P7, age 19)

” Young people from local schools asked her if they could use the office after school because they wanted to do some schoolwork and so on, but they didn’t want to do it in the library there. They wanted to come to her office.” (P5, age 49)

Recommendations
When asked what needs to change in libraries so that they are better equipped to promote public health and wellbeing successfully, key recommendations included increasing community awareness, providing diversified and accessible services, and hiring specialised staff.

(a) Increasing community awareness
All participants mentioned that increasing awareness about the breadth of services provided by local libraries is key. Service users felt that building community trust and assessing and addressing the community's needs where possible, were important starting points. Many stated that targeted communication and promotion strategies tailored to different segments of the community are imperative to connecting with youth or people who may be digitally excluded.

"I think, you know, the library could just do that little bit more to sort of push itself into the community and into schools, and since they're doing so many lovely things with children and with adults, I think they could be a bit more confident about what they have on offer and push it out there because I think they've got people like me hooked." (P10, age 45)

(b) Diversified and accessible service provision
Several library users and library staff felt that continuing and increasing their online activities and services which were held during the pandemic would be beneficial. They also pointed out that balancing in-person and online services is vital even with increasing digitisation and to ensure equal access for members. A few library users also felt that there should be targeted activities and services aimed to cater to a different audience at different times, such as morning and afternoon activities designed for older people or people who have been quite isolated throughout the Covid-19 pandemic and mothers with young children. More respondents proposed increasing the provision of afterschool activities for youths and office workers in the late afternoon to evening period. Many participants stressed the need for separate dedicated spaces to host activities so that they do not encroach on quiet spaces.

"You know it's about getting the balance right, and I think as we're all aware of, the need to be with other people physically is almost greater than the need for, you know, just being able to have that flexibility and to do something from the comfort
of your own home. Actually, you do need to meet people and interact." (P11, age 37)

(c) Hiring specialised staff
Most staff indicated that hiring individuals dedicated to promoting health and wellbeing would help further promote community engagement and resilience. All respondents felt that involving staff in decision-making, providing more funding and training to better support library users could help promote health and wellbeing.

"I think I would want to have dedicated staff employed to start some of these projects and it shows because at the moment it's very haphazard and you know if you had a dedicated person or two people then you would have the time and the energy to really put into and you know use the library in that way." (P2, age 49)

Discussion
This study sought to explore the potential of libraries as community hubs for promoting public health and wellbeing. Our findings show that libraries could act as a safe and reliable source of information for health and wellbeing within communities. Most surveyed participants believed that libraries are extremely suited to promote overall physical and mental health and wellbeing. Some suggestions included educational interventions and community activities related to fitness activities and health-related vocational sessions, around topics such as exercise, diet, smoking, alcohol consumption and mindfulness activities (Figure 3).

Whereas library staff were well-aware of the library's health and wellbeing-related services on offer, most of the community dwelling adults and service users interviewed were not. This disconnect highlights the need for better community outreach to promote libraries' existing spade of health and wellbeing services. Promoting further engagement to make the public aware of libraries' range of services by developing realistic and positive perspectives on what libraries can offer, via an effective outreach and communication strategy, is a key objective of the council-led Libraries Taskforce mission designed to strengthen library services (28). Public engagement programmes and partnerships of libraries with higher education local schools, GP surgeries, and other community organisations is an ongoing theme across libraries in the UK. Upscaling and expanding this initiative could help libraries reach out to new audiences, change perceptions of what libraries offer, and empower communities (29).

In line with our research findings, having a sense of belonging within their community can help improve people's wellbeing. Studies have shown that while individual factors are strongly linked to wellbeing, situational and place-based factors that are beyond the individual's control play an equally essential role in modulating their sense of wellbeing (30-32). 'Sense of community,' 'local pride' and 'belonging' have all been linked to community wellbeing, as emphasised in the policy ‘Wellbeing of Future Generations (Wales) Act 2015’ and, ‘The UK Government's Levelling Up Policy’ (30, 33, 34).
Figure 3: A conceptual map of library user’s and librarian’s perspectives on the potential of libraries to promote health and wellbeing in the community setting
Our study showed that libraries hold the potential to support health and wellbeing due to the high levels of trust and support expressed by service users. These findings are consistent with previous survey results in the UK and US, where the public agreed that libraries are safe places and trusted sources of information, highlighting the position of libraries as welcoming hubs for community action and wellbeing (16, 35). Various successful initiatives across the UK highlighted the important role that libraries can play in helping to tackle “wicked problems” including social isolation, loneliness, and poor mental health (36-38). The support expressed towards libraries in our study was independent of the frequency of use of their service, mirroring the findings of another online UK survey conducted in 2015, which recorded that 90% of respondents said their library service should be protected, regardless of whether they used the service regularly or not (28, 39).

The main barrier to promoting health and wellbeing by the library service was a lack of community awareness, which was emphasised by most participants. This could act as a hurdle to promoting health and wellbeing in libraries. Rigorous and disciplined marketing and promotion has been shown to improve the outreach of library resources to match community needs for the greatest impact (40, 41). Such systematic approaches help improve the visibility of the library, to promote the value of the library to community members (42). Other important barriers to the promotion of health and wellbeing included a lack of financial and human resources as well as insufficient training and involvement of staff. The existing literature shows that involving staff in decision-making and seeking early input from them, may help them feel supported and valued, in turn positively affecting service delivery and implementation (41). Increasingly, during tough financial circumstances, the library staff’s in-depth knowledge of users can add high value to the service design, planning, and delivery (41). With local authorities implementing a reduction in funding, libraries may benefit from saving costs and diversifying their streams of income to support and develop new and existing health and wellbeing services such as fundraising, partnering with the private sector, and exploring opportunities to partner with other libraries through the integration of shared resources and services (21, 41).

As part of the recommendations, participants called for assessing community needs; building trust, providing tailored services, raising awareness of services, hiring dedicated staff to address health and wellbeing related services, training staff, and dedicated funding and space for activities aimed at expanding and improving these services. The Library Taskforce has developed a toolkit to encourage libraries to identify local area needs, measure the impact of local library services, and redesign and improve services to develop more evidence-based provisions (41, 43). For instance, initiatives such as ‘Read my Mind’ by Norfolk Library, which gained popularity after the Covid-19 pandemic, have allowed for a wider community outreach programme through online platforms to tackle the negative issues of mental wellbeing (44).

Library staff and service users expressed similar viewpoints on how libraries can be repositioned to improve their planning and delivery of health and wellbeing services. Overall, the findings suggest that there is a great public interest in utilising health and
wellbeing services, provided that proper awareness is extended to the community through diversified and targeted communication and that additional support is granted to librarians and other library staff members. Despite the concern of digital exclusion when engaging with the public through online activities, a recent independent evaluation of ‘Engaging Libraries Phase 2’ showed that participants had greater confidence, active participation, convenience, and relevance to those shielding and unable to leave their home due to the Covid-19 lockdown(45). Consistent with the research findings, both groups of participants in this research expressed positive comments about online activities run by libraries during the lockdown and the desire for these online activities to continue alongside face-to-face activities. Shifting to digital whilst promoting digital literacy through personalised onboarding, training, and staff support is imperative for highly satisfactory public engagement.

The educational, social, and cultural value of libraries and their positive influence on the community’s mental and physical wellbeing is evident. However, measuring the potential long-term direct and indirect economic contribution/monetary valuation of libraries and their services/activities is challenging but essential(10). A cost-benefit analysis (CBA) methodology pioneered by The Greater Manchester Combined Authority (GMCA) Research Team has been used by public, private, voluntary and community sector partners across the country to consider ‘the value for money’ presented by different interventions that may otherwise not be straightforward to compare(46). The CBA model can enable libraries to make a more comprehensive ‘economic case’ or for public value to be articulated fully, enumerating the economic and social benefits that could reflect on individuals and businesses in terms of improved individual health and wellbeing and as an output quantification of the return-on-investment potential.

Overall, wellbeing is impacted by an array of interlinked components such as an individual’s quality of relationships, health, places they call home, income, etc. The influence of each to wellbeing cannot be understood in isolation and with declining Gross Domestic Wellbeing (GDWe)(31) against the backdrop of the COVID-19 pandemic, which has further exacerbated and exposed social and economic inequality. It is evident that the wellbeing of current and future generations is at risk. Libraries have the potential to act as a buffer zone for community members, policymakers, governing bodies, and organisations to come together to promote and simultaneously mitigate hurdles to the promotion of health and wellbeing in the community setting. More research on this topic is needed to best identify the needs and potential outcomes of all actors involved.

**Strengths and limitations**
To our knowledge, this is the first study in the UK to investigate the potential of libraries as community hubs to promote public mental health and wellbeing in the general population since the advent of the Covid-19 pandemic. However, the findings of this study may not be generalisable due to the relatively small sample size. Although posters were displayed in six public libraries in London & the midlands and on social media outlets, participation was suboptimal, which raises the question of whether community outreach in library settings is currently effective. Outreach for participation could have been affected because of fewer in-person library visits during the pandemic and post-lockdown.
We acknowledge that whereas the sample of participants was almost equally represented in terms of ethnic backgrounds, it may not be representative of the whole UK population as most participants were between the ages of 30 and 50. Further data collection may be needed to understand the perspectives of individuals of different ethnic backgrounds, genders, and ages (especially adolescents, young adults, and the elderly). As participation in the eSurvey and interviews was voluntary, respondents deciding to take part might be more inclined to use libraries than the general population and thus not be fully representative of the UK population.

**Conclusion**

Libraries are untapped and underutilised resources with hidden potential to improve community health and wellbeing. Libraries already offer a variety of resources that either directly or indirectly support the health and wellbeing of community-dwelling adults, young people and children and are ideally suited to tackle health and digital inequalities. Libraries may benefit from reconnecting and/or strengthening the already-existing connection with the community to overcome user’s lack of awareness of library services and to better position libraries to influence community health and wellbeing. Moreover, dedicated funding and improving staffing capacities and their involvement in decision-making is key to successfully promoting health and wellbeing in libraries. As services restart after the Covid-19 pandemic, libraries could be an ideal setting to deliver community engagement and to increase community resilience and public mental health provision, including interventions to tackle loneliness and social isolation and to help tackle inequalities.

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**Data sharing statement:** The data that support the findings of this study are available from the corresponding author, MK, upon reasonable request.

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**Competing interests:** The researchers involved in this study do not have backgrounds that conflict or influence the findings in any form. No other competing interests to declare.
Ethics
The study was given ethical approval by Imperial College Research Ethics Committee (ICREC #21IC7274). Participants consented to take part in the survey. The survey is anonymous, and respondents were not asked to provide personal details unless they voluntarily expressed to be contacted for a follow-up interview. Participants were asked to give written and oral consent before the start of the interviews. Participants were free to withdraw from the survey or interview at any time. Interview data was pseudonymised. The interviews were transcribed with the principle of anonymity in mind, and transcriptions were not outsourced. Therefore, no confidentiality agreements were required. All data generated or analysed during the study are included in this published article.

Patient and public involvement
Patients were not involved.

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