

Review Article

MENTAL HEALTH INITIATIVES IN LIBRARIES: A REVIEW OF EMERGING PRACTICES AND SERVICES

Dewangini Patel ^{1*}

¹ Librarian, Delhi Public School, Raigarh, Chhattisgarh, India



ABSTRACT

Mental health has become an important social and educational concern across the world. At the same time, libraries are changing from traditional information centres into more inclusive community and learning spaces. This changing role has created new opportunities for public and academic libraries to contribute to mental health and emotional well-being. The present paper reviews emerging mental health initiatives in libraries with particular attention to bibliotherapy, well-being collections, calming and supportive spaces, mental health information services, stress-reduction programmes, reading groups, digital resources, referral services and partnerships with mental health professionals. The study is based entirely on secondary sources and follows a structured narrative review approach. Peer-reviewed studies and authoritative reports published mainly between 2008 and 2026 were examined and organized through thematic analysis. The literature shows that libraries can contribute to mental well-being by improving access to reliable information, reducing isolation, encouraging reading, creating psychologically comfortable spaces and connecting users with appropriate support. Evidence for bibliotherapy and shared reading is promising, while recent studies show increasing use of wellness collections, relaxation activities, health guides and collaborative mental health programmes. However, the review also identifies important limitations, including inadequate staff training, limited funding, lack of systematic evaluation, privacy concerns, stigma and uncertainty about professional boundaries. The paper argues that libraries should not attempt to replace psychologists, counsellors or clinical mental health services. Their strongest role is preventive, informational, supportive and connective. A five-level Library Mental Health Support Continuum is proposed to explain how libraries can develop responsible services, beginning with reliable information and moving towards professionally supported referral and collaboration. The study concludes that mental health initiatives can become a meaningful extension of modern library service when they are evidence-based, inclusive, ethically designed and developed in partnership with qualified professionals.

Keywords: Mental Health, Libraries, Bibliotherapy, Student Well-Being, Public Libraries, Academic Libraries, Reading, Wellness Services, Mental Health Literacy

INTRODUCTION

Mental health is increasingly recognized as an important part of individual and community well-being. According to the World Health Organization, a substantial share of the global population lives with mental health conditions, while important gaps continue to exist between the need for support and the availability of effective services. Contemporary mental health policy therefore gives attention not only to treatment but also to prevention, community participation, social support and environments that promote well-being.

*Corresponding Author:

Email address: Dewangini Patel (Dewangini.Patel@outlook.com)

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Libraries are rarely considered mental health institutions, and they should not be treated as substitutes for professional mental health care. However, libraries occupy a distinctive position in communities and educational institutions. They are generally open, familiar and non-stigmatizing places where people can read, learn, spend time, use technology, meet others and obtain information without having to explain why they are there. This makes libraries relevant to mental well-being even when they are not providing formal mental health treatment.

The relationship between libraries and well-being is not completely new. Reading has long been associated with comfort, reflection and emotional support, while bibliotherapy has been studied as a structured use of books and reading materials for psychological benefit. What is new is the increasing variety of mental health initiatives appearing in public and academic libraries. These include well-being collections, mental health resource guides, reading groups, mindfulness activities, quiet zones, relaxation spaces, stress-management programmes, wellness kits, social-work partnerships, referral information and online support resources.

Academic libraries are particularly important in this discussion because students often spend long periods in library spaces during academically stressful periods. Public libraries are equally important because they provide low-cost or free community access without requiring users to enter a clinical setting. Research has described the public library as a potentially therapeutic environment because users may experience it as familiar, calming, welcoming and empowering.

The present study reviews the major forms of mental health initiatives being developed in libraries and evaluates both their possibilities and limitations. Rather than presenting libraries as treatment providers, the paper examines how their existing strengths in information, reading, community service, accessibility and partnership can contribute responsibly to mental well-being.

CONCEPT OF MENTAL HEALTH SUPPORT IN LIBRARIES

Mental health support in a library context should be understood broadly and carefully. It may include any library-based service, resource, programme or environmental feature designed to improve mental health literacy, emotional well-being, social connection, stress management or access to appropriate professional support.

This definition does not mean that librarians diagnose mental disorders or provide psychotherapy. Most librarians are not trained mental health professionals. Their role is generally more appropriate at the levels of information, prevention, early support, inclusion and referral.

A distinction is therefore needed between clinical mental health intervention and library-based mental well-being support. Clinical treatment requires appropriately qualified professionals. Library support may include providing reliable books, facilitating reading activities, offering quiet spaces, organizing wellness programmes and directing users towards professional services.

This distinction is particularly important in bibliotherapy. Some forms of reading for well-being may be informal and recreational, while structured bibliotherapy used for specific mental health conditions may require careful selection of materials and collaboration with psychologists, psychiatrists, counsellors or other qualified practitioners.

REVIEW OF RELATED LITERATURE

FANNER AND URQUHART (2008)

Fanner and Urquhart conducted a systematic review of bibliotherapy for mental health service users. Their review found encouraging evidence that library-based information and bibliotherapy could benefit some mental health service users, while also noting that the evidence available for designing sophisticated library services was still limited. The study was important because it connected library services directly with rehabilitation and mental health information needs.

MACDONALD, VALLANCE AND MCGRATH (2013)

Macdonald et al. evaluated the Read Yourself Well bibliotherapy scheme delivered through a local library service in collaboration with general practitioners and community organizations. The researchers reported improvement in mental health measures after the intervention. The study is important because it demonstrated the potential value of collaboration between libraries and health professionals rather than expecting libraries to work independently.

BREWSTER (2014)

Brewster studied public libraries as therapeutic landscapes through qualitative research involving people with mental health problems. The library was described as familiar, welcoming, comforting, calming and empowering. This study moved the discussion beyond books and programmes and showed that the physical and social environment of a library itself may contribute to well-being.

HENRICH (2020)

Henrich discussed how academic library public services can contribute to holistic student success. The study emphasized that libraries can respond not only to academic needs but also to stress, food insecurity, social belonging and other factors affecting

student well-being. Collaboration with other campus units was identified as a practical way of offering low-cost supportive programmes.

COX AND BREWSTER (2021)

Cox and Brewster examined well-being services in academic libraries and identified important challenges. They argued that libraries need a clearer definition of well-being, appropriate methods for measuring programme outcomes and a better understanding of how mental-health-related activities connect with professional librarianship. Their work cautions libraries against introducing attractive programmes without clearly defining their purpose or evaluating their effect.

HALL AND MCALISTER (2021)

Hall and McAlister examined mental health resources and services in public and academic libraries through surveys, interviews and website analysis. Their study found that libraries had developed a wide variety of initiatives addressing mental health and emotional well-being. It also identified challenges in delivering these services, showing that interest in mental health was becoming a practical service issue for both academic and public libraries.

ABIDIN, SHAIFUDDIN AND WAN MOHD SAMAN (2023)

Abidin et al. conducted a systematic review of bibliotherapy practices in public libraries. Their analysis showed that different models of bibliotherapy were being used, but many had developed within specific national contexts. The study concluded that bibliotherapy has potential for supporting community mental health, although clear service criteria and appropriate implementation models are necessary.

BREWSTER AND COX (2023)

Brewster and Cox investigated the contribution of academic libraries to a whole-university approach to student mental health. Their analysis showed that libraries were participating in well-being activities, but questions of professional boundaries, resources and institutional responsibility influenced how far libraries could become involved. Their work suggests that libraries can contribute to a wider university mental-health strategy without becoming clinical services.

NAZI, ALI AND AKHOURI (2023)

In an Indian study, Nazi et al. investigated bibliotherapy and proposed its prospective use as an innovative library service. Their work involved expertise from both Library and Information Science and Psychiatry, illustrating the value of interdisciplinary collaboration. The study is especially relevant to the Indian context because it explored a structured model rather than treating bibliotherapy as simple recreational reading.

HILL AND COX (2024)

Hill and Cox studied well-being collections in six UK academic libraries. These collections had been developed comparatively recently and varied in content and institutional context. Collaboration played an important role in their development, although student involvement was limited. The authors also highlighted the need for better evaluation of such collections.

SRIVASTAVA AND JAISWAL (2025)

Srivastava and Jaiswal explored the readiness of Indian academic librarians to use bibliotherapy for the holistic development of students. Participants showed positive attitudes towards bibliotherapy and expressed willingness to collaborate with psychologists and counsellors. This study is particularly relevant to India because it demonstrates professional interest while simultaneously recognizing the need for additional skills and interdisciplinary support.

SIRISENA ET AL. (2025)

Sirisena et al. conducted a realist review of reading for well-being and identified several possible mechanisms through which reading may contribute to well-being, including temporary distance from daily stress, perspective taking, memory, intellectual stimulation, shared meaning and supportive group environments. The authors concluded that reading may support positivity, self-understanding, empathy and connectedness.

ZHANG, SANCHEZ AND REDDY (2026)

One of the most recent comprehensive reviews examined mental health services in public and academic libraries. The authors identified six major groups of services: collection development and reference, space design, activities and materials, instruction, referrals and collaborations, and digital resources. They also found that systematic evaluation was uncommon. Major barriers included limited resources, inadequate staff training, privacy concerns, stigma, lack of awareness and difficulties in matching services with user needs.

RESEARCH GAP

The reviewed literature confirms growing interest in mental health and well-being within public and academic libraries. However, several gaps remain. First, a substantial part of the earlier literature concentrated mainly on bibliotherapy. Contemporary libraries are now offering a much wider range of services, including digital information, relaxation spaces, wellness programmes, community partnerships and referral support. These developments need to be examined together rather than as unrelated activities.

Second, many studies describe programmes but do not provide strong outcome evaluation. Recent review evidence specifically observes that systematic evaluation of library mental health services remains uncommon. Third, much of the available research has emerged from the United Kingdom and United States. Indian research is developing, particularly around bibliotherapy, but evidence concerning wider mental health initiatives in Indian academic and public libraries remains comparatively limited.

Fourth, the professional boundary between mental health support and mental health treatment is sometimes unclear. A library may be able to support well-being without being an appropriate setting for diagnosis or clinical intervention. The present review addresses these gaps by bringing together different types of library mental health initiatives and proposing a structured continuum that defines a responsible role for libraries.

OBJECTIVES OF THE STUDY

- 1) To review the emerging mental health and well-being initiatives offered by public and academic libraries.
- 2) To examine the role of bibliotherapy and reading-based activities in mental health support.
- 3) To analyse how library spaces, collections, programmes and digital resources may contribute to emotional well-being.
- 4) To examine the importance of partnerships between libraries and mental health professionals.
- 5) To identify major barriers and ethical concerns associated with mental health initiatives in libraries.
- 6) To examine the developing Indian context of library-based mental health support.
- 7) To propose a practical framework for responsible mental health initiatives in libraries.

RESEARCH METHODOLOGY

RESEARCH DESIGN

The present paper follows a structured narrative literature review design. It is based entirely on published secondary sources and does not involve primary survey data.

SOURCES OF LITERATURE

Relevant literature was identified through academic and professional sources including PubMed, SAGE Journals, Taylor & Francis, Wiley, ScienceDirect, Journal of Information and Knowledge, professional library sources, institutional research repositories and World Health Organization publications.

SEARCH TERMS

The literature was examined using combinations of terms such as libraries and mental health, academic libraries and student well-being, public libraries and mental health, bibliotherapy, reading and well-being, mental health services in libraries, well-being collections, therapeutic library spaces, library mental health programmes and bibliotherapy in India.

INCLUSION APPROACH

Priority was given to peer-reviewed studies directly connected with libraries, reading-based mental health support, well-being services and library-health partnerships. Foundational studies published before 2020 were retained where they were important for understanding bibliotherapy or the concept of libraries as supportive spaces. Recent research up to 2026 was emphasized to capture emerging practices.

METHOD OF ANALYSIS

The selected literature was analysed thematically. Findings were grouped according to the major forms of mental health support identified across the studies. The purpose was not to calculate a pooled clinical effect but to understand the range, development, strengths and limitations of mental health-related library practices.

EMERGING MENTAL HEALTH INITIATIVES IN LIBRARIES BIBLIOTHERAPY

Bibliotherapy is one of the most established links between libraries, reading and mental health. It involves the purposeful use of books or other reading material to assist individuals in understanding experiences, developing insight or coping with difficulties. Research suggests that appropriately designed bibliotherapy can be beneficial in some contexts. Libraries can contribute by developing carefully selected collections and making evidence-based reading material easy to locate. However, clinical bibliotherapy should not be conducted independently by untrained staff when it is intended to address diagnosed mental health conditions.

WELL-BEING COLLECTIONS

A growing practice in academic libraries is the development of dedicated well-being collections. These may contain books on stress management, sleep, mindfulness, emotional resilience, relationships, loneliness, study pressure, self-care and mental health awareness. Such collections may make supportive information easier to discover and can normalize discussions of mental health by placing relevant materials within an ordinary educational environment. Collection development should nevertheless be evidence-based, and libraries need procedures for reviewing outdated, misleading or potentially harmful mental health information.

LIBRARIES AS CALM AND SUPPORTIVE SPACES

The physical environment of a library may itself have value. Public libraries can be experienced by some users as familiar, calm, welcoming and empowering environments. Modern mental-health-sensitive library design may include quiet areas, comfortable seating, natural light where possible, clearly identified low-noise areas, relaxation rooms, accessible spaces, sensory-friendly areas and private areas for accessing support information. A supportive library environment should not be confused with a therapeutic clinic. Its contribution comes from accessibility, calmness, dignity and the freedom to use the space without being labelled as a mental health patient.

STRESS-REDUCTION AND WELLNESS ACTIVITIES

Libraries increasingly organize activities intended to reduce stress, particularly during examination periods. Examples include mindfulness activities, yoga, relaxation programmes, creative activities, reading clubs and other forms of low-intensity wellness engagement. These programmes may be useful because students often already use academic libraries during periods of high academic pressure. However, programmes should not be selected only because they are popular. Clear objectives and simple evaluation methods should be developed so that libraries understand whether the initiative is useful to their users.

SHARED READING AND READING FOR PLEASURE

Reading for mental well-being is broader than clinical bibliotherapy. Shared reading groups, book discussions and recreational reading may support relaxation, social connection and reflection. Research on reading for well-being identifies possible mechanisms such as distance from everyday stress, perspective taking, memory, intellectual stimulation and shared interpretation. Libraries are well suited to shared reading because reading groups already fall naturally within their professional and community role.

MENTAL HEALTH INFORMATION AND LITERACY

One of the safest and strongest roles for libraries is providing access to credible mental health information. Mental health information can be difficult to navigate online. Users may encounter unverified advice, commercial claims, misinformation and oversimplified explanations. Libraries can help users locate information from reliable health organizations and identify appropriate services. Mental health literacy programmes can also teach users to distinguish general well-being advice from clinical treatment and to understand when specialist support is required.

REFERRAL AND SIGNPOSTING SERVICES

Libraries do not need to provide treatment in order to improve access to treatment. A simple but important service is signposting. Libraries may maintain current information about university counselling centres, community mental health

organizations, government health services, crisis services, social support organizations and qualified professional services. The role of the librarian in this context is to connect rather than diagnose.

COLLABORATION WITH COUNSELLORS, PSYCHOLOGISTS AND SOCIAL WORKERS

The strongest initiatives in the literature frequently involve collaboration. Mental health professionals contribute clinical knowledge, while librarians contribute expertise in collections, information access, user education, community engagement and programme delivery. Collaborative models reduce the risk of librarians being asked to perform work outside their professional competence.

DIGITAL MENTAL HEALTH RESOURCES

Libraries increasingly provide support beyond physical buildings. Digital initiatives may include online mental health resource guides, e-books, curated websites, webinars, online reading groups, links to counselling services and information about emergency or community support. Digital resources can increase privacy and convenience, but they also create responsibility for regular updating. An outdated link to a support service can reduce trust and may be harmful in urgent situations.

A LIBRARY MENTAL HEALTH SUPPORT CONTINUUM

On the basis of the reviewed literature, the present paper proposes a five-level Library Mental Health Support Continuum. The purpose of the continuum is to show that libraries can contribute to mental well-being without becoming clinical treatment centres.

Level	Library Role	Examples	Professional Boundary
Level 1: Inform	Provide reliable information	Books, e-resources, mental health guides, credible websites	Core library role
Level 2: Support Environment	Create conditions supportive of well-being	Quiet spaces, relaxation areas, inclusive design	Core/supportive role
Level 3: Engage	Provide preventive well-being activities	Reading groups, creative activities, mindfulness sessions, wellness events	May involve trained facilitators
Level 4: Guided Support	Structured programmes developed with experts	Well-being workshops, professionally designed bibliotherapy programmes	Collaboration strongly required
Level 5: Connect and Refer	Link users with qualified services	Counselling referrals, community mental health partnerships, social-work support	Professional mental health care remains external/specialist

The value of this continuum is that it prevents a false choice between two extremes: either libraries should do nothing about mental health or they should become mental health clinics. The evidence supports a middle position. Libraries can contribute substantially while remaining within professional and ethical boundaries.

CHALLENGES IN IMPLEMENTING MENTAL HEALTH INITIATIVES

LACK OF STAFF TRAINING

Mental health information is sensitive and complex. Librarians may feel unprepared to answer questions involving psychological distress. Basic training should focus on communication, boundaries, reliable information sources, privacy and referral procedures rather than attempting to turn librarians into counsellors.

PROFESSIONAL BOUNDARIES

Libraries must clearly define what they can and cannot provide. Mental health awareness and well-being promotion fit naturally within community and educational support. Diagnosis and treatment do not normally fall within general librarianship. Clear referral procedures are essential when users require professional support.

FUNDING AND STAFF CAPACITY

Wellness programmes compete with other library priorities. Limited budgets and existing staff workloads may make long-term programmes difficult to sustain. Programmes should therefore be realistic and sustainable rather than dependent on one enthusiastic staff member.

STIGMA

Mental health stigma can reduce participation in programmes or use of dedicated collections. Some users may avoid clearly labelled mental health services because they do not want others to know what information they are seeking. Libraries can reduce this problem through discreet access, broad well-being language and confidential information practices.

PRIVACY

A person looking for information about anxiety, depression, substance use, trauma or other sensitive issues may have strong privacy concerns. Library policies should protect confidentiality wherever possible. Digital resource guides may be especially useful because they allow users to explore information privately.

LACK OF SYSTEMATIC EVALUATION

One of the clearest weaknesses in the literature is limited outcome evaluation. The existence of a programme does not prove that it improves mental health. Libraries should use simple but meaningful indicators such as programme participation, resource use, user feedback, perceived usefulness and referral uptake. Claims about clinical improvement should require stronger research designs and appropriate professional involvement.

INDIAN CONTEXT

The idea of library-based mental health support is still developing in India. Nevertheless, recent studies show increasing academic interest in bibliotherapy and related well-being initiatives.

Nazi et al. demonstrated an interdisciplinary bibliotherapy study involving Library and Information Science and Psychiatry at Aligarh Muslim University. Their work proposed the possibility of introducing bibliotherapy as an innovative library service while grounding the intervention in mental health expertise.

Srivastava and Jaiswal examined academic librarians readiness to use bibliotherapy for holistic student development. The positive response of participating librarians is encouraging, particularly because participants also recognized collaboration with psychologists and counsellors as important.

Indian libraries could initially focus on services that involve relatively low clinical risk: curated well-being collections, verified mental health information, reading-for-well-being programmes, quiet and supportive study spaces, mental health awareness displays, links to institutional counselling services, collaboration with psychology departments and student well-being workshops led by qualified experts. Before formal bibliotherapy for diagnosed conditions is widely introduced, stronger guidelines, staff development, professional collaboration and Indian evidence are needed.

DISCUSSION

The literature indicates a significant shift in how library contribution to mental health is understood. Earlier studies concentrated strongly on bibliotherapy, whereas current initiatives involve the full library environment: information, collections, physical space, digital access, social interaction, programmes and professional partnerships.

This shift is important because mental well-being is affected by more than access to treatment. Libraries cannot solve the treatment gap, but they can operate within the wider environment that influences how people obtain information, connect with others and approach support.

The literature also shows that the library's value may partly come from its normality. A counselling clinic is entered specifically for support. A library can be entered for many reasons. A person can read, sit quietly, attend a group or look for information without publicly identifying themselves as someone experiencing a mental health difficulty. This low-stigma environment may be an important advantage.

At the same time, enthusiasm for mental health initiatives needs to be balanced by professional caution. A relaxation event that students enjoy should not automatically be described as a mental health intervention. A well-being collection should not be assumed to improve depression simply because it contains self-help books. Strong claims require strong evidence.

The most sustainable model therefore appears to be one in which libraries build upon their existing professional strengths and collaborate where specialist knowledge is required.

MAJOR FINDINGS

- 1) Libraries are increasingly becoming part of wider mental health and well-being support systems.
- 2) Bibliotherapy remains the most established mental-health-related library intervention, but modern initiatives now extend far beyond bibliotherapy.
- 3) Reading can support relaxation, reflection, perspective taking, empathy and social connection, although outcomes vary by individual and programme design.
- 4) Public libraries may function as psychologically supportive environments because they can be familiar, accessible, calm and non-stigmatizing.
- 5) Academic libraries are increasingly developing well-being collections and stress-reduction programmes for students.
- 6) Mental health information and literacy represent one of the strongest professional areas in which librarians can contribute.
- 7) Signposting and referral allow libraries to connect users with professional support without attempting to provide treatment themselves.
- 8) Collaboration with psychologists, counsellors, health professionals and social-service agencies improves the credibility and safety of mental health initiatives.
- 9) Indian research demonstrates emerging interest in bibliotherapy, but wider evidence relating to mental health services in Indian libraries remains limited.
- 10) Staff training, funding, privacy, stigma and unclear professional boundaries are important barriers.
- 11) Systematic evaluation remains one of the weakest areas of library mental health practice.
- 12) Libraries are best positioned as supportive, preventive, informational and connective institutions, rather than clinical mental health providers.

SUGGESTIONS

- 1) Libraries should develop a written policy defining the scope of mental health and well-being services.
- 2) Librarians should receive basic mental health awareness and referral training without being expected to perform clinical roles.
- 3) Academic libraries should collaborate with institutional counselling centres and psychology departments.
- 4) Public libraries should build partnerships with recognized community and government health services.
- 5) Well-being collections should be developed using credible and regularly reviewed sources.
- 6) Libraries should maintain updated lists of qualified local and institutional support services.
- 7) Mental health information should be available in formats that protect user privacy.
- 8) Reading groups and bibliotherapy programmes should distinguish clearly between recreational well-being activities and clinical interventions.
- 9) Structured bibliotherapy addressing diagnosed conditions should involve appropriately qualified mental health professionals.
- 10) Quiet, inclusive and sensory-sensitive library spaces should be considered where resources permit.
- 11) Digital mental health guides should be reviewed frequently to remove broken links and outdated information.
- 12) Libraries should evaluate programmes through participation data, anonymous feedback and clearly defined outcomes.
- 13) Students and community users should be involved in designing well-being collections and programmes.
- 14) More research should be conducted in Indian academic and public libraries.
- 15) Future Indian studies should examine whether library well-being programmes influence stress, belonging, mental health literacy and willingness to seek professional support.
- 16) National and professional library bodies may consider preparing ethical guidelines for mental-health-related library services.

CONCLUSION

Mental health initiatives represent an important but sensitive area in the changing role of libraries. The reviewed literature shows that libraries can contribute to mental well-being through several pathways: reading, reliable information, supportive spaces, social participation, well-being programmes, digital resources and connections with professional support.

The evidence is particularly encouraging for reading-based activities and bibliotherapy when interventions are appropriately designed. Recent research also shows that well-being collections, calming spaces and collaborative services are becoming more visible in both academic and public libraries. However, the rapid expansion of such initiatives should not lead to an unrealistic understanding of librarians responsibilities.

A library is not a psychiatric clinic, and a librarian is not automatically a counsellor. The most responsible model is one in which libraries remain within their professional strengths while establishing strong partnerships with qualified mental health professionals.

The Library Mental Health Support Continuum proposed in this review places reliable information at the foundation, followed by supportive environments, preventive engagement, professionally guided programmes and referral. This approach allows libraries to contribute meaningfully without crossing clinical boundaries.

The future importance of libraries may therefore include not only helping people find knowledge but also creating environments in which people feel informed, connected, respected and able to reach appropriate support. Mental health initiatives can become a valuable part of modern librarianship when they are based on evidence, professional ethics, user privacy, inclusiveness and interdisciplinary collaboration.

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