

MARCH 2026

Aging Together

Landscape Report



Contents

Executive Summary 3

Introduction 5

The Growth of Older Adult Programming 8

The Expansion of Program Types and Topics 10

The Expansion of Program Models and Delivery Methods 12

What Libraries Need to Know about Older Adults 14

Understanding the Diversity of Older Adult Populations 14

Ageism and its Impacts on Older Adults' Lives 17

How Programs Can Improve Older Adults' Lives 20

Knowledge, Attitude, & Skills 21

Health & Wellbeing 25

Social Connectedness & Inclusion 27

Barriers and Ways to Overcome Them 30

Ageism 30

Practical, Logistical, and Institutional Barriers 35

Acknowledgments 38

References 39

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Recommended Citation: Bowen, E., Lewis, S., Brenner, C., and Jordan-Makely, C. (2026). Aging Together: Landscape Report.

Knology Publication #NPO.074.1030.01. Knology.

Executive Summary

In recent decades, programming for adults aged 65 and above has evolved into a distinct type of service for US public libraries.

These programs come in a variety of shapes and sizes, and engage a diverse array of topics—from health and fitness to literature and leisure, from careers and entrepreneurship to the arts and humanities, and from nature and the environment to digital technologies. Existing evaluations suggest that these programs can yield beneficial psychological, behavioral, and social outcomes. At the same time, researchers have identified “a number of weaknesses” (Sabo, 2017, p. 146) in libraries’ current approaches to older adult programming.

As a first step toward “creat[ing] a canon of evidence-based practices” (Maxwell, 2025, p. 437) for supporting older patrons, Knology and the American Library Association (ALA) conducted a review of the existing literature on this subject. Focusing in particular on programs designed to advance health and wellbeing, social connectedness, end-of-life care, and caregiver support, this review cast a wide net around publications related to these topics, surveying research conducted in and outside of the US to provide a “big picture” understanding of the current programming environment. In addition to mapping out this environment’s salient features, this review sought to identify the different impacts (both positive and negative) existing programs are having on older adults’ lives, and to summarize the lessons libraries have learned (both best and worst practices) from implementing them.

With regard to the current state of older adult programming, this study finds that libraries generally concentrate their efforts in four areas:

1. **leisure;**
2. **lifelong learning;**
3. **health;** and
4. **digital technologies.**

Each of these areas boasts considerable diversity. For example, while some health programs focus on increasing consumer health awareness (i.e., health literacy), others aim to promote physical and mental activity, to address basic healthcare needs, and to attend to other “intangible health needs” (Lenstra et al., 2021, p. 609) like the need for social connection. There is also considerable overlap between different programming domains. Most notably, digital literacy programs (which now rank among the most common programs offered to older adults) often seek to help older adults better locate, understand, and appraise internet-based health information (i.e., e-health literacy).

This review also identified a number of gaps in libraries’ programming efforts. Two of the most notable include end-of-life programs and caregiver support programs. While the existing research offers evidence of these programs, neither appear to be very widespread—with caregivers in particular being identified as “mostly an invisible audience” for libraries (Howrey, 2018, p. 251).

Whether offered as outreach services, on-site events, or virtual meetings, library programs are reaching an increasing share of the older adult population. Yet their impacts remain somewhat unclear. Existing data on

program effectiveness is severely limited, though the available evidence suggests that libraries are positively impacting older adults' lives in three main ways:

1. **improving knowledge, attitudes, and skills;**
2. **advancing physical, mental, and emotional wellbeing;** and
3. **strengthening social connectedness and feelings of community belonging.**

Importantly, these impact areas do not appear to be tied to specific programming categories. For example, while library-based exercise programs have been shown to improve balance and strength, the opportunities they provide for meeting and talking with others can also promote social connectedness. Similarly, while Memory Cafes and other dementia-friendly programs often seek to combat social isolation, they can also have therapeutic benefits—including improved cognitive function and lower rates of depression and apathy. These findings underscore the value of programs that take a holistic, intersectional approach to health, simultaneously attending to older adults' physical, mental, emotional, and social needs.

A second key finding from this study is that library programs can be tremendously beneficial in terms of helping older adults build two types of capital:

1. **identity capital**, which includes “soft skills” pertaining to self-confidence, self-efficacy, and self-image;
2. **social capital**, which has to do with relationships, connections, and networks that promote access to vital community resources.

By creating a safe, supportive programming environment that enables experimentation, risk-taking, and exploration, libraries are helping older adults build confidence in their capabilities and capacities, reducing fears and anxieties that might otherwise prevent the acquisition of new knowledge and skills. And by designing programs that allow for older adults to be both participants and (co-)leaders, libraries are increasing intergenerational cooperation in ways that combat social inequalities tied to aging. These findings suggest that the social dimension of programming cannot be overlooked, and provide further support for the idea that libraries should strive to create holistic programming environments that simultaneously attend to older adults' educational, social, and health-related needs.

While the above outcomes highlight some of the ways library programs benefit older adults, progress toward them has been hindered by two key barriers. On a sociocultural level, ageism is a negative factor in many older adults' library experiences. At times, library engagement with older adults has reflected and reinforced stereotypical views that equate aging with decline, debility, and dependency. For guidance on ways to better identify ageist practices and dismantle ageist attitudes and structures, numerous scholars suggest that libraries adopt principles from critical gerontology. On a practical level, resource-related constraints have diminished the extent to which libraries can actively involve older adults in community life. To solve these challenges in ways that foster greater cross-sector coordination and help them become part of a “wider ecology of support for older adults” (Maxwell, 2025, p. 438), the existing research suggests that libraries look to leverage partnerships with other local organizations. With these considerations in mind, libraries can build on the significant contributions they have already made to the creation of age-friendly communities, furthering their development as empowering spaces that promote learning, health and wellbeing, and social connectedness throughout the life course. ■

Introduction

In recent decades, programming for older adults¹ has evolved into a distinct type of service for US public libraries. Once a neglected area of service provision (Stephens, 2006), today, dedicated programs for Americans aged 65 and above can be found at libraries of all sizes and locations across the country. These programs come in a variety of shapes and sizes, and engage a diverse array of topics—from health and fitness to literature and leisure, from careers and entrepreneurship to the arts and humanities, and from nature and the environment to digital technologies.

The increased attention being paid to older adults is a product of four intersecting developments. First, as is true of citizens in many countries around the world, Americans are both living longer than ever before and remaining active for a greater proportion of their lives (Infobase, 2023). Older adults are in fact the fastest growing age demographic in the US (Lawley, 2022). Between 2010 and 2020, the country’s 65-plus population increased by 38.6 percent, a rate faster than any decade since the late 19th century—and five times that by which the total US population grew over the same period (Census.gov). In the next decade, the number of Americans aged 65 and older is expected to surpass the number of Americans under 18—something that has never happened before. By 2050, the 65-plus share of the population will increase from 17 percent to 23 percent (an increase from about 58 million to 82 million people).

In many ways, the growth of older adult programming in libraries reflects this demographic change. But policy imperatives have also contributed to the surge in programs for those aged 65 and over. Across the world, governments are increasingly embracing “aging in place”—that is, the idea that individuals should be able to live safely, independently, and comfortably in their homes and communities for as long as they like (instead of relocating to long-term care facilities) (Oswald & Wahl, 2005; Vasunilashorn et al., 2012). Surveys indicate that upwards of 90 percent of Americans want to remain in their homes as long as possible (Lenstra et al., 2022), although many doubt their ability to do so on account of concerns related to health, finances, and/or social isolation and loneliness (Dalmer & Griffin, 2023). To address these concerns, social institutions (including libraries) are becoming increasingly involved in the lives of older adults.

Governments are increasingly embracing “aging in place”—that is, the idea that individuals should be able to live safely, independently, and comfortably in their homes and communities for as long as they like.

The growing emphasis on aging in place has contributed to the expansion of older adult programming in libraries. And that expansion also reflects a third key development: libraries’ transformation into hubs of community life. Instead of only offering patrons a quiet place to read or study, libraries are now sites of social interaction.

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1. Understandings of who counts as an older adult vary widely, both in the US and around the world. The WHO defines those above 60 years of age as older adults, but for many US healthcare agencies (including the CDC and the NIH), the traditional threshold has been 65. This paper follows that practice, especially as 65 is the age at which Americans become eligible for Medicare and other benefits programs for older adults.

They offer access not just to books, information, and critical resources (including digital technologies and social services), but also, to “the company of other people” (Connolly, 2024, p. 6). Programs are a key way libraries are “moving toward broader engagement in the community” (Dickey, 2020, p. 117). Through their programming efforts, libraries are creating new spaces for people to come together, get to know each other, and expand their social networks (Lo et al., 2019). They are also fostering more positive social environments, and serving as a forum for addressing community concerns and advancing community interests. In the context of older adults, these new roles and responsibilities have manifested in libraries’ growing interest in supporting the growth of age-friendly communities—something that many programs name as an explicit goal (Lenstra et al., 2022; Zhang et al., 2023).

In many ways, this newfound interest reflects the actions of older adults themselves. Instead of being “passive service recipients” (Lenstra, 2016, p. 75), older adults are agents of libraries’ transformation into community hubs. As they become increasingly active in their communities post-retirement, many are rediscovering libraries. Across the world, research indicates that older adults often rank among the most active users of library services (Lo et al., 2019).² Within the US, a study of rural libraries found that older adults are “a very active patron group” that often makes wider use of materials and services than younger patrons (Hughes, 2017, p. 46). As more and more older adults become “regular library patrons who participate in programs and volunteer or join library Friends groups” (Mayo, 2009), they are actively shaping the kinds of programs and services libraries provide. In many ways, older adults’ perception of libraries as “de facto senior centers” (Cline and Jarvis, 2019) is a testament to the active role they have played in redefining these institutions as essential community spaces.

The evidence suggests that programs for older adults can yield beneficial outcomes on a number of different levels—both for individuals and society more broadly (Elgamal et al., 2024; Barrie et al., 2021). Psychologically, these programs can increase skills, competencies, and self-efficacy (that is, the belief in one’s ability to adequately perform tasks). Behaviorally, they can improve older adults’ capacity for applying new knowledge and skills in ways that support independent living and goals related to aging in place. Socially, they can help older adults maintain community ties (thereby boosting mental and emotional wellbeing) and counter ageist attitudes and other age-related inequalities.

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Yet despite these promising signs, libraries face many challenges in their attempts to meet older adults’ programming needs and interests. Researchers have identified “a number of weaknesses in planning and providing services” to older adults (Sabo, 2017, p. 146). More often than not, older adult programming is limited to “specific library systems or geographical locales” (Dalmer & Griffin, 2023, p. 157). While some have identified this group as a strategic priority and are securing funding with their needs and interests in mind, others have only begun to incorporate them into their service plans (Lenstra et al., 2021). Given existing constraints and pressures (including funding, staff shortages, and institutional inertia) many libraries find older adult programming “a difficult juggling act” (Hughes, 2017, p. 47).

2. This may be less true of the US, as some of the most recent available data (Horrihan, 2015) indicates that those over 65 are less likely to use libraries than those between the ages of 16 and 64.

Looking across the field as a whole, it is clear that older adult programming is very much a “patchwork system” (Winberry et al., 2025, p. 1)—one riven with inconsistencies, imbalances, and unevenness (Dalmer & Mitrovica, 2022; Lenstra et al., 2021). As is often the case for other age groups, programs for this demographic are designed in a decentralized, ad hoc manner (Connolly, 2024)—not as elements of a broader, formalized plan for incorporating older adults into the library’s day-to-day operations, but as “one-shot sessions” (Barr-Walker, 2016, p. 17) that do not extend beyond a particular project or grant.

In addition to this, the library and information science (LIS) field lacks a comprehensive understanding of what works and what does not when it comes to program design and implementation for older adults. While individual programs have yielded positive outcomes, these encouraging findings are nevertheless limited and cannot be generalized (Manafa & Wong, 2012). Evaluation is generally treated as an afterthought. While the ALA’s Project Outcome has greatly accelerated attempts to measure program impacts in a general sense (Public Library Association, 2023), the field currently lacks a standard set of tools for identifying and measuring age-specific program impacts. The absence of these tools has impeded the development of best practices for guiding current and future interventions. Along with this, though groups like the ALA’s Library Services to an Aging Population Committee have issued general guidance on older adult programming (American Library Association, 2017), the field has been unable to develop either a shared understanding or a common agenda around the topic of older adult programming.

Absent the development of an interconnected set of long-term priorities, libraries’ efforts to support aging in place will be hampered and incomplete (Lenstra et al., 2022). There is a definite need for a more comprehensive, data-driven approach to older adult programming in libraries (Connolly, 2024). In response to calls to “create a canon of evidence-based practices” (Maxwell, 2025, p. 437) for supporting older patrons, this paper seeks to offer research-backed guidance that libraries can use to create empowering programs for older adults across

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the US. Based on a review of the limited but growing LIS literature on this topic, the following discussion outlines what is currently known about effective practices and strategies for maximizing the impact of older adult programs. Focusing in particular on programs designed to advance health and wellbeing, social connectedness, end-of-life care, and caregiver support, this review addresses five key questions:

In keeping with current landscape review methodologies, this paper casts a wide net around publications related to these topics. It surveys research conducted in a variety of geographical settings (including those outside the US), at different points in time (with a focus on research published in the last 15 years), and distributed in a variety of formats—whether it be peer-reviewed articles and books, dissertations and theses, or as “grey literature” (including reports, position papers, magazine articles, and blog posts). Prioritizing breadth over depth, the review seeks not to offer detailed commentaries on individual publications, but instead, to provide a “big picture” understanding of the current programming environment. In addition to surveying this environment’s salient features, the review also highlights areas in need of further exploration. In offering a bird’s eye view of the research landscape, the paper seeks to help libraries become empowering, age-friendly community spaces that promote health and wellbeing, social connectedness, end-of-life care, and caregiver support.

This review is organized into four main sections. The first discusses the growth of programs for older adults, exploring two main axes along which libraries have increased their engagement with this patron group: (1) an expansion in the types of programs; (2) an expansion in program models and methods of implementation. After detailing the existing landscape of older adult programming, the paper’s second section highlights some of the salient facts libraries need to keep in mind when working with this audience—namely, older adults’ status as the most diverse demographic group in the country and the impacts ageism has on their experiences, expectations, and qualities of life. The paper’s third section looks at the different ways (both actual and aspirational) libraries can improve older adults’ lives, looking at what the existing LIS literature says about the impacts programs are having (or can have) on learning, health and wellbeing, and social belonging. From here, the paper addresses key barriers preventing libraries from having these impacts, while also summarizing some of the general recommendations LIS scholars have put forward as ways to remove these barriers.

As the topic of older adult programming is a relatively new one for LIS researchers, these recommendations should be taken as the final word on effective program design or implementation. The best practices outlined below reflect preliminary, emerging themes in the literature, and should be seen as a point of departure—as a set of high-level ideas and potential options that are very much in need of further exploration, refinement, and expansion. Our hope in sharing this initial assessment is to take a much needed first step in collecting these ideas and sharing them in ways that can stimulate the kinds of practitioner-led discussion needed to codify a more rigorously tested set of recommendations for guiding library practices.

The Growth of Older Adult Programming

Library programs for adults of any age are a relatively new phenomenon. While libraries have long offered programs for toddlers, children, and teenagers, those over 18 have historically not been seen as a key programming demographic. As recently as 2005, adult patrons were termed “the neglected stepchild of public libraries” (Rainer, 2005, p. 2).

It was only in the mid-twentieth century that US public libraries began systematically offering programming services to adults. In 1957, the American Library Association (ALA) established an Adult Services Division, which sponsored a variety of programs for adult patrons (including book talks, displays, and readers’ advisory councils) (Thorton, 2015). That same decade, the ALA also passed a national policy on services to older adults—a development that coincided with the rise of patron groups such as “Never Too Late” and “Going Like Sixty,” which promoted book delivery services and other forms of outreach to older Americans (Lenstra et al., 2021). The passage of the Older Americans Act in 1973 focused more professional attention on this demographic, but by the late 1980s, it was clear that this aspect of library services was “not keeping with the growth of the [older adult] population nor the complexity of their needs” (Lenstra et al., 2021).

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That situation changed only gradually. As part of an effort to promote older adults' inclusion in program planning efforts, in the 1980s, the ALA and the Reference and User Services Association (RUSA) formed the "Library Services to an Aging Population" committee (engAGED, 2021). That same decade witnessed the creation of "Adult Services in the Eighties" (1983–89) project, which helped usher in new types of programming models for older patrons (Heim and Wallace, 1990). Whereas older adult programming at this time tended to revolve around book clubs, lecture series, and movie screenings (Dickey, 2020), in the 1980s, libraries began to move beyond this traditional focus to include cultural events. A foretaste of this shift can be seen in a 1984 ALA publication that proposed a program called "Toast of the Town," in which libraries would work with local wine dealers to co-sponsor tastings and discussions highlighting the wines of different countries (Thornton, 2015).

These developments accelerated in the 1990s and early 2000s. In 2005, the ALA participated in a White House Conference on Aging, and proposed recommendations to make libraries part of emerging national plans to support healthy population aging (Shi & Luo, 2020). That same year, the Institute of Museum and Library Services (IMLS) convened a national forum called *Designs for Change: Libraries and Productive Aging*. In addition to fueling new grants like the "Transforming Life After 50 (TLA50)" initiative, the event led to a flurry of reports,

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articles, books, and websites focused on ways libraries could be more engaged with older adults (Perry, 2014). Books such as *Boomers and Beyond: Reconsidering the Role of Libraries* (2005) highlighted the need for libraries to develop a more complex understanding of aging, while resources like the ALA's *Guidelines for Library and Information Services to Older Adults* (2008) and *Keys to Engaging Older Adults at Your Library* (2010) offered practical recommendations and resources.

Publications such as these have invigorated older adult programming on a nationwide scale. Research conducted over the past 15 years indicates that libraries "have been very active in supporting senior citizens' life-long learning activities" (Wang, 2013, p. 522), that "more and more libraries are adopting innovative programs for older adults" (Zhang et al., 2023, p. 4), and that libraries now "offer a multitude of services and programs to support aging in place" (Lenstra et al., 2022, p. 7). While youth remain the predominant target of library's programming efforts (Na et al., 2024), and programs for older adults are often "simply lumped in with services aimed at adults in general" (Perry, 2014, p. 350), the situation is clearly improving.

Two particular developments illustrate this fact. First and foremost is the dramatic expansion of program types for older adults. As one recent review notes, "today's libraries offer an exciting array of programs and services for older adults" (engAGED, 2021). Moving beyond traditional focus areas, libraries are discovering ways to engage older populations through "more creative uses of programming time" (Dickey, 2020, p. 117). The existing literature details a wealth of innovative programs public libraries now offer older patrons—whether it be onsite, virtual, or as outreach services conducted throughout the community.

The Expansion of Program Types and Topics

At present, it appears there are four core programming domains for older adults: (1) leisure; (2) lifelong learning; (3) health; and (4) digital technologies (Shi & Luo, 2020). Each of these categories encompass a wide variety of programs. Under the leisure heading, one finds craft and hobby programs (e.g., knitting circles, painting or woodcarving classes, gardening, Xbox gaming), book and podcast clubs, writing groups, and a variety of programs tied to entertainment and the performing arts (film screenings, live music, poetry readings, dance, etc.) (Dalmer & Mitrovica, 2022). Programs within the lifelong learning category are similarly eclectic, touching on topics such as nature and the environment (e.g., mushroom hunting, beekeeping, foraging), mature driving, the creative arts (e.g., photography classes, painting classes, etc.), and financial planning, income tax services, and employment (Baluk et al., 2020; Hughes, 2017; Moffett, 2022; Perry, 2014).

Health-based programs also vary considerably. Historically, these programs have been information-based, with a key goal being the advancement of health literacy. Through partnerships with universities, clinics, and healthcare organizations, many libraries offer older adults access to workshops, trainings, and classes aimed at improving their ability to find and evaluate health information (Barrett, 2009; Barr-Walker, 2016). Health literacy programs often seek to increase consumer health awareness—for example, by teaching participants how to interpret medical instructions, communicate with healthcare providers, or navigate healthcare and health insurance systems (Ladd et al., 2019, Shi & Luo, 2020).

More recently, libraries have broadened the focus beyond health literacy, offering programs that promote physical/mental activity and address older adults' basic health needs. Examples of these include exercise programs (e.g., yoga and tai chi), the direct provision of health services (e.g., vaccination, early dementia screening, etc.), nutrition and food security workshops, and stress reduction classes (Shi & Lou, 2020). Many of these programs target health concerns of direct relevance to older adults—for example, memory cafés and other dementia-friendly initiatives (Dickey, 2020). Along with this, many libraries now offer educational programs focused on a variety of health-related topics, including lecture and discussion series on death and dying, mental and emotional wellbeing, and diabetes prevention (Hughes, 2017).

Libraries are also offering programs that target older adults' "intangible health needs"—including the need for social connection (Lenstra et al., 2021, p. 609). Some of these programs simultaneously embrace the physical, mental, and social aspects of health, including strength-training programs that begin or end with coffee and fellowship (Lenstra et al., 2021). As a variation on this theme, some libraries have set up e-Sport leagues like Wii bowling in dedicated "senior hangout" areas that also offer older adults a chance to "socialize, relax, and talk with others their age" (Choquette, 2021).

Other libraries simply give participants meaningful opportunities to interact with others and gain access to community resources. An example of the latter type are the numerous "Wisdom Cafés" created by the King

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County Library System (Washington) to address the “problem of isolation” (Pender, 2018, p. 169). Functioning as barrier free, typically eclectic conversational opportunities, the Wisdom Café seeks to help older adults form new friendships and experience a deeper sense of community as they exchange thoughts and experiences related to different aspects of life. Along the same lines, some libraries seek to reduce the social isolation that often comes with aging through pen pal programs launched in collaboration with senior living communities (engAGED, 2021).

Digital technologies are another key focus of older adult programming. In addition to providing access to computers and the internet, for decades, libraries have offered classes, workshops, and training sessions aimed at equipping older patrons with the knowledge and skills they need to effectively navigate rapidly evolving virtual environments. Studies indicate that technology training and related digital literacy programs rank among the most common programs offered to older adults (Hughes, 2017; Dalmer, 2022). Given the increasingly technology-driven environments that characterize modern life, this is not at all surprising, especially in light of evidence highlighting the generational nature of the digital divide and the close relationship between digital and social exclusion (Casselden, 2022).

Historically, many digital literacy programs for older adults have focused on health literacy. Research dating back to the early 2000s highlights some of the ways libraries have partnered with academic institutions and other

The proliferation of eHealth literacy programs is a reflection of the more general growth of digital technology training efforts focused on older adults.

healthcare partners to offer instruction on ways older adults can locate, assess, and make use of health information on the internet (Schwartz et al., 2002). Some of these programs have focused on specific topics—for example, how to effectively search the internet for information on cancer and cancer prevention (Hoffman-Goetz et al., 2006)—while others have offered more general guidance on searching for and evaluating online health information, including tutorials on the use of credible databases and websites such as [MedlinePlus.gov](https://pubmed.ncbi.nlm.nih.gov/) and [NIHSeniorHealth.gov](https://www.nih.gov/health-topics/senior-health) (Xie & Bugg, 2009).

Regardless of their scope, a key goal of these programs has been to boost eHealth literacy. Defined as “the ability to seek, find, understand, and appraise health information from electronic sources and apply the knowledge gained to addressing or solving a health problem” (Norman and Skinner, 2006), eHealth literacy is a key predictor of health-related behaviors and outcomes (Lin et al., 2020). As virtual care environments (including patient portals, telehealth services, and remote monitoring) become an increasingly prominent part of the US healthcare system (Wolff et al., 2022), libraries are responding with programs that train older adults in the use and evaluation of digital health information (Malone et al., 2017; Maxwell, 2025).

The proliferation of eHealth literacy programs is a reflection of the more general growth of digital technology training efforts focused on older adults. Since the COVID-19 pandemic, researchers have documented a “growing interest” in how libraries can deliver digital literacy training (Detlor, 2025, p. 6), and it appears that libraries are increasingly shifting their engagement with older adults toward programs focused on technology and digital literacy (Maxwell, 2025). Outside of health-related programs, attempts to improve digital literacy skills have taken a variety of forms, including workshops on how to navigate library webpages and electronic resources such as BorrowBox and Libby (Casselden, 2022; Horton, 2018). The recognition that older adults “increasingly own their

own digital devices” (Lenstra, 2017, p. 72)—and that most Americans aged 65 and over use the internet and are active on social media (Iglar & Chignell, 2022)—has also helped fuel the rise of drop-in tech support hours and classes such as “iPads for seniors” (Widman, 2023). The realization that many older adults are “comfortable using internet technology” (Lawley, 2022, p. 3) has prompted a shift toward the teaching of more advanced digital literacy skills—not just the basics of computer and internet use (for example, how to set up an email account or conduct searches), but making video recordings, conducting transactions, writing and publishing blogs, and participating in internet-based communities through forums, chatrooms, and social media sites (Elgamal, 2024). Programs of this sort are likely to become even more prominent in the coming years, as digital communications continue to displace traditional, print-based sources of information (Lawley, 2022) in ways that make digital literacy “an essential skill in our society” (Barrie et al., 2021, p. 385).

The Expansion of Program Models and Delivery Methods

In addition to offering older adults an expanded range of programs, it is also true that there are now “multiple routes to developing library services for older adults” (Lenstra et al., 2019, p. 746). Until quite recently, these services focused almost exclusively on older adults unable to physically travel to the library. Through partnerships with long-term care facilities, libraries have long sought to provide materials and resources to those receiving institutional care and to those who are homebound on account of disability or illness (Bennett Kapusniak, 2013; Hughes, 2017; Kendall, 1996; Piper et al., 2009). While outreach to hospices, nursing homes, and homebound individuals remains part of how libraries engage older adults today (Sikes, 2019), it is no longer the case that this work comes “at the expense of the majority of older adults who are active and generally healthy” (Perry, 2014, p. 107). Today, increasingly, libraries are creating a variety of programs (both on-site and virtual) that incorporate older adults into their more general programming environments.

For many libraries, the most straightforward path to incorporating older adults into programs has been to modify existing offerings in ways that are more age-inclusive.

For many libraries, the most straightforward path to incorporating older adults into programs has been to modify existing offerings in ways that are more age-inclusive—that is, more accessible to individuals aged 65 and above. While programs of this sort are not marketed as being exclusively for older adults, their existence as “all ages” offerings is seen as a way to encourage attendance from members of this demographic. Craft workshops in library makerspaces and “drop-in tech support” hours are two well known examples of this type of program. Studies indicate that even without specifically targeting older adults, the attempt to attract a mixed-age cohort often results in situations where older adults account for the majority of program participants (Widman, 2023).

In addition to mixed-age programs that are open to both young and old alike (Hughes, 2017; Piper et al., 2009), some libraries are designing programs specifically for older patrons. Bearing titles such as “Senior Scam Prevention,” “Brain Games for Seniors,” and “55 Alive,” these age-specific programs reflect the recognition that older adults often have unique needs that merit attention apart from those of other age groups (engAGED, 2021). Programs

focused on digital literacy training (for example, “iPads for seniors”) are particularly likely to be age-specific in nature (Sabo, 2017). Another example of this approach can be seen in the various “creative aging” initiatives libraries have launched in recent years (Moffett, 2022).

Intergenerational offerings are yet a third approach libraries have taken to expanding older adult programming. While somewhat similar to mixed-age programs, intergenerational programs are unique on account of their deliberate attempt to bring younger and older patrons together. Instead of simply being open to all ages, intergenerational programs seek to foster relationships among different age groups. Examples of this include

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the “Techno Buddies” program offered by the Ottawa Public Libraries, in which youth help older adults acquire computer skills, and the “Grandparents and Books” program hosted by the Los Angeles Public Libraries, in which older adults read books to children (Sabo, 2017). As this second example indicates, intergenerational programs often exist to give older adults an opportunity for using and sharing their skills and knowledge with others (Baluk et al., 2021).

This is especially the case when older adults have the opportunity to serve as volunteer program leaders. Libraries have long served as a source of volunteerism for members of this demographic; one survey (Hughes, 2017) found that nearly 70 percent of rural libraries have older adult volunteers. Traditionally, volunteer labor has come in the form of assistance with relatively simple tasks—for example, shelving books or helping with crafts (Infobase, 2023). More recently, libraries have begun designing programs that draw on the expertise older adults bring to the table. One recent study of a public library system in the western US highlighted the role retired teachers and technology professionals are playing as volunteers during drop-in tech support hours and in connection with makerspace programming (Widman, 2023). Though this delivery model does not appear to be in widespread use, it is clear that offering older adults a way to give back to the community (for example, retired entrepreneurs offering job training) through the sharing of their skills, knowledge, and time is a valuable programming approach libraries would benefit from investing in (Maxwell, 2025).

If the above discussion testifies to the “substantial increase” in the number and variety of programs for older adults since the mid-1980s (Sikes, 2019, p. 365), it also bears noting that some important topics have not received much attention from libraries. Two particularly noteworthy gaps are programs focused on end-of-life concerns and caregiver support programs. A recent study (Irwin, 2024) uncovered evidence of a wide range of library programs (including book clubs, instructional presentations, Death Cafes, and other conversation-based activities) dealing with different end-of-life topics (for example, medical care, bedside comfort, estate planning, legal arrangements, and body disposition practices), but it does not appear these programs are very widespread.

The same is true of caregiver support. A survey of rural libraries (Hughes, 2017) found that programs for caregivers were among the least-commonly offered, with only eight percent of institutions having run them. Along similar lines, a study on family caregivers (Howrey, 2018) concluded that these individuals are “mostly an invisible audience” for libraries (p. 251). To the extent that libraries provide caregiver support, it seems that this comes as a component of programs designed primarily for other groups—for example, Memory Cafes and other dementia-friendly initiatives (Dickey, 2020). Given the fact that caregivers are the backbone of the country’s long-term care

system, there is a need to develop programs that revolve solely or primarily around the needs and concerns of this “novel target audience” (Howrey, 2018, p. 252). As Rothstein and Schull note in their book, *Boomers and Beyond: Reconsidering the Role of Libraries*, caregivers are “a group worthy of special attention in the older adult category”:

Providing health information, including resources on nutrition and exercise, as well as a place to meet and offer social support will be important. As the numbers told us, women are more likely to be widowed and to spend a portion of their later life alone, so the social support and self-help group potential of libraries will grow in importance as the boomers find themselves in need of these services (p. 13).

What Libraries Need to Know about Older Adults

Even if “more and more libraries are adopting innovative programs for older adults” (Zhang et al., 2023, p. 4), it nevertheless remains the case that population aging presents “serious challenges” for these institutions (Xie & Bugg, 2009, p. 1). The circumstances, needs, and preferences of older adults are often different from those of younger patrons, and at present, libraries have a limited understanding of these things. Historically, libraries have taken a “one size fits all” approach to serving older adults, viewing these individuals as a monolithic group of retired, sedentary, largely homebound individuals (Zeman, 2014). Thinking of older adults as a homogenous, inactive, and unified group is deeply problematic (Mayo, 2009).

Understanding the Diversity of Older Adult Populations

At present, the population of Americans aged 65 and above constitutes the most diverse demographic group in the country (Stephens et al., 2017). And as the US population continues to age, experiences of aging will only become more diverse (Lenstra et al., 2019). While problematic terms like “senior citizens” and “the elderly” seek to bring them into a single demographic category, these individuals comprise an “enormous spectrum” of experiences, attitudes, interests, and needs (Sikes, 2019, p. 9). As a recent commentary observes:

Seniors are a diverse group. Some are retired, while others work. Some are tech-savvy, while others are not. Some are surrounded by family and active in the community, while others have been displaced or isolated. The physical and mental impacts of aging affect people in different ways at different points in their lives. And like people of any age, seniors hold a wide spectrum of intersectional identities (Infobase, 2023).

In an attempt to better capture “the heterogeneity that characterizes aging” (Barrie et al., 2021, p. 384), some researchers divide the 65-plus population into two age-related tiers: (1) “third agers” (that is, those between 65

and 79); (2) “fourth agers” (those over 80). Those in the first category, LIS scholars explain, are generally new retirees in good health, with an abundance of leisure time on their hands and a greater level of familiarity with digital technologies (Kesselman, 2019). They may be looking for “encore careers” and are often highly active in the community, eager to volunteer their time, participate in programs, and assist with various outreach services (Mayo, 2009). By contrast, those in the “fourth ager” category may have more extensive, chronic health concerns, with some facing the prospect of transition to long-term care facilities or family members’ homes (Mayo, 2009). Along with this, so-called “fourth agers” have been characterized as the “least knowledgeable about consumer electronic products that can help with their quality of life” (Kesselman, 2019, p. 2).

While helpful in moving past simplistic conceptions of older adults as a single group, these age-based gradations may conceal more than they reveal. Regardless of their status as “third agers” or “fourth agers,” it bears noting that older adults sometimes have very little in common, as their backgrounds, needs, and interests can vary enormously. As an astute LIS scholar noted long ago, “the information needed by older adults will be as varied as that needed by the population as a whole” (Kendall, 1996, p. 18).

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For this reason, some researchers question whether age is a meaningful way of categorizing the lived experiences of those over 65 (Costa et al., 2019). As a recent guide for library workers notes, “older adults are not a monolithic demographic, nor is their only personality trait that of being ‘elderly’” (Brooks, 2021, p. 10). Indeed, there are many instances in which the focus on age as a marker of difference obscures other, more salient group-based differences. In a study of economic disparities, for example, Walker (2012) found that the income gap between rich and poor retirees was larger than that between young and old adults with similar class backgrounds. The enormous wealth gap between groups of older adults is largely the product of “cumulative advantage”—a concept highlighting the ways that economic, educational, and other privileges enjoyed early in life can “cumulate over the life course” (Crystal et al., 2017, p. 911).

An example of this is home ownership. Studies have shown that older adults’ housing wealth varies enormously by race. On average, White Americans who bought their first home before turning 35 reach the age of 60 with over \$125,000 in housing wealth. For Black Americans, the comparable figure is \$72,000. For those who only bought their first homes after turning 45, the gap is even greater: roughly \$105,000 in housing wealth for White Americans, and just \$27,000 for Black Americans. This economic disparity increases past the age of 60, meaning that those who benefit from cumulative advantage often have healthier, more comfortable late-life experiences. As a recent study puts it: “those with fewer disadvantages have a greater earning potential, and consequently more financial resources to save through the working life, which increases the potential for a well-funded retirement” (Carney & Nash, 2020, p. 74).

The phenomenon of minority aging is one reason older adults are “the most diverse of any chronological age group” (Carney & Nash, 2020, p. 72). Rates of inequality among older people are increasing, and in the coming decades, the impacts of cumulative advantage will likely only deepen (Crystal et al., 2017). Part of the reason for this has to do with the increasing racial and ethnic diversity of the 65-plus population. Between 2008 and 2018, the

number of racial and ethnic minority older adults increased from 7.5 million to 12.3 million—an increase from 19 percent to 23 percent of the overall population of older adults. By 2040, it is expected this figure will increase to 34 percent (Moffett, 2022).

All of this highlights the importance of intersectionality for understanding experiences of aging. Because aging is as much a social process as it is a biological one, experiences of privilege and oppression tied to race, gender, and socioeconomic status create vastly different experiences of “old age” among different groups (Holstein & Minkler, 2003). For example, an older adult employed at a desk job for the entirety of their working life may not face the

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same kinds of health challenges as someone with a history of physically intense labor (Kirman, 2023). As this suggests, their differential positions within existing social and political power structures give older adults disparate identities and qualities of life (Barrie et al., 2021). For example, whereas approximately 10 percent of White baby boomers live under the poverty line, 14 percent of Hispanic baby boomers and 22 percent of Black baby boomers live in poverty. For those aged 65–75, the disparity is even greater: just 8 percent of White Americans in this bracket are living in poverty, compared to 17 percent and 19 percent of Hispanic and Black boomers (Jacobsen, 2024).

Along with race, geography structures experiences of aging. Within the US, one of the most important developments in recent decades has been the migration of higher-income individuals and families to suburban and rural areas (Super, 2020). While the number of city-dwelling older adults is rising, increasingly, these individuals belong to lower-income groups. As this suggests, “regional populations are not aging uniformly” (Moffett, 2022, p. 2).

In an attempt to better capture “the heterogeneity that characterizes aging” (Barrie et al., 2021, p. 384), some have proposed generational difference as an additional means of drawing attention to the wide variety of circumstances and experiences seen in the lives of older adults. By looking at how a group’s needs, concerns, and interests are a product of their “unique placement in socio-historic time,” this approach helps foreground the complex, diverse nature of older adults’ lives and experiences (Quinn, 2010, p. 116). One adaptation of this approach can be seen in the concept of “technology generations,” which looks at the specific historical era in which individuals developed “early learning skills and foundational knowledge” to better account for some of the challenges certain individuals may face in connection with topics like digital literacy (Barrie, 2021, p. 384).

These disparities frequently manifest in connection with skills and levels of knowledge related to the areas libraries focus older adult programming efforts on. For example, while it is often assumed that all individuals over 65 are “digitally poor,” older adults are in fact “not homogenous” with regard to internet use or familiarity with internet-based technologies (Casselden, 2022, p. 705). In many countries, developments of the last few decades have made members of this demographic an “increasingly equipped and connected” population (Bourdaloie, 2018, p. 151). Since the start of the COVID-19 pandemic, older adults have rapidly accelerated their adoption of digital technologies; recent survey data indicates that 75 percent of Americans 65 or older use the internet, 61 percent own a smartphone, and 45 percent are active on social media (Iglar & Chignell, 2022). As “the fastest-growing group of

internet users worldwide” (Morrison et al., 2023, p. 438), older adults today rely on digital technologies for social interaction, accessing health and financial services, and acquiring basic goods through online shopping.

To be sure, many older adults still face significant barriers in accessing and using digital technologies. But a division within this demographic is emerging: while wealthy, highly-educated older adults are rapidly increasing their use and ownership of digital technologies, racially minoritized older adults with fewer financial resources are not (Peslak and Menon, 2025). As this suggests, the “digital divide” is less a product of age-based differences than commonly thought. A recent study found that among older adults, White men enjoy the highest levels of access to digital technologies, while Black and Hispanic women have the least access (Suntai et al., 2023).

The complex, non-linear nature of the aging process can also be seen in health data. Older adults often have vastly different experiences of health and illness—a fact that underscores the fallacies of treating chronological age as an indication of health status. Survey data from EU countries show that roughly 45 percent of individuals aged 75 and above experience illnesses or disabilities that hinder their ability to cope with everyday life. In the US, a recent CDC study (CDC, 2025) found that roughly two out of every five adults aged 65 and above reported living with a disability. As these figures suggest, many older adults “live their everyday lives actively and healthily” (Langmann, 2023, p. 137).

While wealthy, highly-educated older adults are rapidly increasing their use and ownership of digital technologies, racially minoritized older adults with fewer financial resources are not.

Data on health literacy also complicates assumptions about older adults being deficient and substandard compared to other groups. While survey data indicates that a significant majority of older adults lack basic health literacy skills, this is not always the case. Those with higher levels of social support, for example, tend to have higher health literacy rates (Liu et al., 2019). On the whole, it appears that “the nature of the association between aging and health literacy is unclear” (Kobayashi et al., 2016, p. 446). Observed age-based differences in health literacy may reflect educational differences (among other social, cultural, or economic phenomena) more than anything else.

Ageism and its Impacts on Older Adults’ Lives

If there is one thing older adults have in common, it is the experience of ageism. While there is no single, universally agreed upon definition of this term, ageism generally refers to negative assumptions about aging that adversely impact older adults’ experiences of health and wellbeing. When he coined the term in 1969, gerontologist Robert Butler simply defined ageism as “another form of bigotry,” arguing that this was no different than other “isms” such as racism and sexism in how it allowed people to see one group as different from themselves. Butler defined ageism as the “personal revulsion to and distaste for growing old” (Butler, 1969, p. 243), and explained that it caused young and middle-aged individuals to no longer identify with older adults as human beings.

In the more than 50 years since Butler’s early writings, definitions of ageism have grown considerably more complex. While some see it relatively straightforwardly as “prejudice against older individuals” or the

“association of negative traits with the aged,” these are only some of the shapes ageism can take (Gutterman, 2022, p. 26). On the broadest possible level, ageism can be defined as “a difference in one’s feelings, beliefs, or behaviors based on another person’s chronological age” (Gutterman, 2022, p. 26). Ageism is based on the idea that things associated with youth are inherently “good,” while those associated with old age are inherently “bad.” It includes thoughts (stereotypes), feelings (prejudice), and behaviors (discrimination), and can operate on either a conscious (explicit) or unconscious (implicit) level. It can be both other-directed and self-directed, and can manifest as a micro (individual), meso (social networks), or macro (institutional and cultural) level phenomenon. It includes prejudice or discrimination that is both against or in favor of any age group (Ayalon et al., 2023).

Like other types of prejudice, ageism is based on both “negative” and “positive” stereotypes. It includes ideas about older adults being incompetent, weak, frail, and unattractive, and associations between old age and wisdom, serenity, and dependability. Ageist behaviors based on the first set of stereotypes are often overtly hostile, while those associated with the second are sometimes termed “benevolent ageism” or “compassionate ageism.” Regardless of the form it takes, ageism creates “false images of older adults” that have unwelcome, often harmful effects (Gutterman, 2022, p. 40). It negatively impacts older people’s behaviors, intentions, self-concepts, and

The shift toward more youth-centered societies—have amplified stereotypes of older people being incompetent, frail, slow, depressed, burdensome, and unattractive.

outcomes. It is associated with loneliness, depression, and anxiety, and it often exposes older adults to harm and abuse (including various forms of exploitation) (Ayalon et al., 2023). Beyond this, ageism enables the discrediting and undervaluing of older adults’ voices and their opportunities for enhancing personal and collective wellbeing.

Ageism is not a new phenomenon. But developments of the late twentieth and early twenty-first centuries—in particular, the shift toward more youth-centered societies—have amplified stereotypes of older people being incompetent, frail, slow, depressed, burdensome, and unattractive. During the 1960s and 70s, older Americans were often seen as the deserving recipients of governmental assistance. This view

enabled the creation of Medicare and Medicaid, along with legislation such as the Older Americans Act (1965), the Age Discrimination in Employment Act (1967), the Employee Retirement Income Security Act (1974), and the Research on Aging Act (1974), which resulted in the creation of the National Institute on Aging. Beginning in the 1980s, however, older Americans were increasingly depicted as “prosperous, hedonistic, politically powerful and selfish” (Binton, 2010, p. 657). This stereotype of the “greedy geezer” fueled a growing perception that older adults had “too much power and influence,” and that they were “depleting shared resources” best preserved for younger generations (Levy et al., 2022, p. 746).

The passage of time has not altered this state of affairs much; if anything, it appears that younger generations today have more negative views on aging and older adults than was the case in previous decades (North & Fiske, 2012). Societies across the world are increasingly seeing older adults as a threat to their economic futures (Walker, 2012), with ageist rhetoric about “boomer greed” and the “crisis of population ageing” fueling a growing sense of intergenerational conflict (Calasanti, 2021). Ageism against older people appears to have intensified since the onset of the COVID-19 pandemic, as pre-existing associations between old age and infirmity “prompted social discourse that all older adults are vulnerable and sickly and in need of protection” (Levy et al., 2022, p. 745). In 2021, the

WHO’s “Global Report on Ageism” estimated that across the world, “1 in 2 people are ageist against old people” (WHO, 2021).

As all of this indicates, ageism is deep-seated and pervasive. Ageism is “widely adapted and normative for most cultures,” existing both on the macro (for example, anti-aging beauty campaigns) and micro (for example, negative comments about older people) levels (Gendron et al., 2016, p. 1). It is present in virtually all social institutions—from the workplace to the marketplace, the home to “third places” such as libraries and museums, and from the school system to the media. It is visible in popular culture, in government and corporate policies, and in people’s everyday interactions. Like other “isms,” ageism is something people gain familiarity with in childhood; if not identified and corrected early in life, ageist beliefs and behaviors will be strengthened and more widely applied in an individual’s life. Doing this is incredibly difficult, because ageism is a socially “normalized,” broadly accepted type of prejudice—something not countered to anywhere near the extent that racism, sexism, and ableism are (Gutterman, 2022).

Ageism can also be incredibly difficult to cope with. In contrast with Butler’s original formulation, researchers today know that ageism is somewhat unique as a type of bigotry. Whereas groups subjected to sexist and racist discrimination learn valuable coping mechanisms from childhood onward, ageism’s negative impacts generally only manifest late in an individual’s life—for example, after retirement or after turning 65. Many have thus not had a chance to develop any strategies for dealing with negative attitudes or discriminatory behaviors (Gutterman, 2022). Protecting oneself from the highly damaging impacts of ageism can be particularly challenging when these attitudes and behaviors are self-directed—that is, when they reflect negative ideas about aging that individuals have themselves brought into late life.

Whereas groups subjected to sexist and racist discrimination learn valuable coping mechanisms from childhood onward, ageism’s negative impacts generally only manifest late in an individual’s life.

Many of the inequalities that adults experience later in life are the result of ageism. A substantive body of research highlights ageism’s wide-ranging physical, psychological, cognitive, social, and economic consequences. In medical settings, ageism is a direct contributor to poor health outcomes, as older adults’ medical complaints are frequently dismissed, overlooked, or minimized—a phenomenon contributing to misdiagnosis, delays in treatment, and biased recommendations that reflect stereotypes more than patients’ actual health conditions (Chrisler et al., 2016). The adverse medical impacts of ageism can also be seen in older adults’ exclusion from clinical trials, including those for drugs explicitly designed to treat conditions more common in late life (Chang et al., 2020). For example, a study of Parkinson’s disease found that 49 percent of clinical trials related to this condition excluded older persons (Fitzsimmons et al., 2012). Internalized ageism also has a deleterious impact on mental health, as older adults with negative views of aging may experience low levels of self-confidence and self-esteem, which harms psychological wellbeing and increases the likelihood of stress, depression, and anxiety (Kang & Kim, 2022). Studies have also associated self-directed ageism with lower life expectancy, high blood pressure, and reduced self-esteem (Gendron et al., 2016).

Ageism’s negative impacts have also been documented in a variety of other social institutions. In employment settings, ageism makes older workers “less productive, less motivated, less adaptable, inflexible and reluctant to

change compared to their counterparts” (Bae & Choi, 2023, p. 725). Economically, ageism often leads to decreased or lost earnings that increase financial strain (Shippee et al., 2019), an increased likelihood of financial exploitation (Weissberger et al., 2022), and higher rates of inappropriate or unhelpful professional advice (Setzfang and Watson, 2015). Within the home, ageist attitudes can result in microaggressions that corrode family relations, breed cross-generational conflict, and reduce older adults’ autonomy (Gordon & Gonzales, 2022). And on a more general level, ageism fosters isolation through exclusionary, discriminatory practices that limit older adults’ capacities for forming meaningful relationships and taking on meaningful roles in society (Gutterman, 2022).

Part of what makes ageism so pervasive and difficult to counter is the fact that it frequently intersects with other forms of bigotry and oppression. As one among many examples of this, consider the experiences of older adults who identify as LGBTQUIA+. Compared to heterosexual older persons, these individuals are “more likely to be estranged from their families, less likely to have a partner in later life, less likely to have children, and less likely to have custody or contact with any children they may have had from previous heterosexual relationships” (Carney & Nash, 2020, pp. 74–5). They are thus less likely to receive the kinds of filial care that are increasingly important as individuals age. Moreover, because many long-term supportive facilities operate under a “universal heteronormative assumption” (Carney & Nash, 2020, p. 76), the care LGBTQUIA+ older adults receive from these institutions may be insufficient and even harmful. For example, “the ‘second coming-out’ to residents and staff when entering supported living is often traumatic and may push older LGBTQUIA+ adults back into the closet” (Carney & Nash, 2020, p. 77).

How Programs Can Improve Older Adults’ Lives

While libraries are offering more programs to older adults than ever before, little is known about the impacts these programs are having. Claims about programs having a “significant and undeniable impact on the lives of elder users” (Sikes, 2019, p. 22) sometimes go unsupported. Often, the only data speaking to program benefits comes in the form of immediate feedback—for example, statements about how participants “expressed appreciation” or “stated they learned a lot” (Ladd et al., 2019, p. 120). Evidence such as this underscores the fact that assessment is frequently “an afterthought of library programs” and highlights the need for “more robust methods” of measuring long-term outcomes, including significance testing and systematic thematic analysis (Barr-Walker, 2016, p. 17). As one recent study notes, existing programs “have not been evaluated or synthesized with the express purpose of gaining generalizable knowledge of the outcomes of older adult library use” (Maxwell, 2025, p. 426).

To determine whether programs are actually beneficial for older adults, eliciting their input is “absolutely crucial.”

A particular stumbling block here is the absence of patron perspectives. To determine whether programs are actually beneficial for older adults, eliciting their input is “absolutely crucial” (Baluk et al, 2021, p. 487). But libraries often take a unidirectional approach to older adult programming, neglecting to offer assessment mechanisms

that encourage patron feedback (Kirman, 2023; Na et al., 2024). As Dalmer (2017) notes, libraries require “more frequent data collection on services to older adults to ascertain the efficacy and degree of fit between services and older adults’ actual needs” (p. 8).

In addition to the absence of patron voices, the library field’s difficulties in ascertaining program impacts reflect the “limited diversity” of existing evaluative data (Barrie et al., 2021, p. 400). Existing studies frequently note how reported impacts “cannot be generalized to all seniors” (Hoffman-Goetz, 2006, p. 36) on account of difficulties engaging different types of older populations—including adults over 75, non-native English speakers, individuals from under-resourced communities, and those with disabilities. While some studies examine programming efforts aimed at historically and persistently marginalized groups (Casselden, 2022; Detlor, 2025; Xie & Bugg, 2009), the field’s knowledge of impacts is largely confined to White older adults between the ages of 65 and 75 with high educational and economic status. Because existing knowledge of older adults’ programming experiences is not broadly representative of this demographic, future examinations of this topic will need to examine patrons with diverse racial identities, socioeconomic circumstances, and linguistic practices (Widman, 2023).

As all of this makes clear, the current data on program effectiveness is severely limited. With that rather large caveat in mind, the following discussion summarizes what is known about outcomes and impacts associated with older adult programming in libraries. Though evidence of program efficacy is often “mixed” (Lenstra, 2017, p. 66), there are many cases in which programs have yielded tangible quality-of-life improvements for older adults. In addition to reporting on these observed benefits, the discussion below shares evidence of more aspirational benefits—that is, hoped-for outcomes that have not yet materialized in any particular programming context. By summarizing both the actual and the ideal, this discussion aims to provide a sense of what libraries could hope to maximally obtain through their efforts—and to facilitate the design of more evidence-based older adult programming.

Whether real or potential, the existing literature details the beneficial impacts of older adult programming on three areas: (1) knowledge, attitudes, and skills; (2) health and wellbeing; and (3) social connectedness and inclusion. Interestingly, there is not always a correlation between program topics and the above benefits; programs focused on health literacy can reduce social isolation, while those focused on digital literacy can improve participant wellbeing. Because of this, the following discussion does not connect these impacts to any of the program types discussed in the previous section.

Knowledge, Attitude, & Skills

Learning is often an explicit motivation for older adults who participate in library programs (Sikes, 2019).

The LIS literature suggests that older adults are generally “interested in using their increased leisure time for educational, intellectual, and creative self-development” (Kendall, 1996, p. 18)—and that for many, the library is “a preferred place for learning” (Sabo, 2017, p. 41). Many learn simply for the joy of learning, while others want to improve current skills (Horton, 2018). Whether it be a straightforward desire to “keep mentally active” (Sabo, 2017, p. 42) or to expand their knowledge and abilities in ways that help them more fully participate in society, the

existing literature highlights a number of positive impacts library programs are having on older adults' knowledge, attitudes, and skills.

These impacts are especially evident in the areas of digital literacy and health literacy. Given that older age is “often negatively associated with lower health and eHealth literacy” (Malone & Clifton, 2017, p. 137) and “remains the strongest single predictor of (decreased) internet access and use” (Dalmer & Mitrovica, 2022, p. 7), many libraries see these as areas of critical concern for older patrons. Through the hosting of workshops, courses, and training sessions, their efforts are helping these patrons make more informed healthcare decisions and more effectively participate in digital life.

One way libraries are doing this is by helping older adults build “identity capital.” Defined as “the characteristics of the individual that define his or her outlook and self-image” (Schuller et al., 2004), identity capital can help counter those anxieties and fears that discourage individuals from developing new knowledge and skills. Along with self-confidence and self-image, a core part of identity capital is self-efficacy, which refers to “the belief in one’s capabilities to perform tasks and organize information” (Barrie et al., 2021, p. 385).

The most effective educational experiences are those that counter ageist stereotypes by building self-confidence, self-efficacy, and a positive self-image. On that score, it appears that libraries are making significant strides.

Given the negative impacts ageist stereotypes can have on older adults' educational experiences, building identity capital is an essential part of their learning process. Among other things, internalized ageism makes older people “underestimate their own knowledge,” as can be seen in comments such as “I don’t know anything because I’ve never had the formal training because I’m old” (Barrie et al., 2021, pp. 391–392). The belief that older adults lack the kinds of “technological intuition” needed to gain digital or health literacy skills is a key barrier to learning (Barrie et al., 2021, p. 391). It also prevents those with expertise and skills to share from volunteering their time in ways that can benefit others. In a study of digital learning, Lenstra (2017) encountered this attitude during an interview with a tech-savvy older patron. In response to a question about why they had not offered to teach digital literacy skills, this patron said:

I’m old! They [other older adults] don’t want help from me! I get by with technology... And if I get stuck I can figure it out. Usually. [Laughs] When it works, it works. But when it doesn’t. [Laughs] Help someone else here at the center? No, no, no. That is for you [young people] to do. You know this stuff in and out. What could I add? (p. 74).

Because of that, the most effective educational experiences are those that counter ageist stereotypes by building self-confidence, self-efficacy, and a positive self-image. On that score, it appears that libraries are making significant strides. In a world full of touch screens and smartphones, older adults may think of themselves as “outsiders,” and this mentality can prevent them from becoming interested in digital resources and services (Lawley, 2022, p. 3). Even those who are interested in technology experience “intimidation and fear of failure” (Detlor, 2025, p. 1). Studies suggest that library-based training environments can promote self-efficacy by increasing older adults' comfort levels around digital technologies. As a participant in a digital literacy course remarked, libraries offer a supportive place to “try different techniques and talk with other people, which gives you some confidence... you’ve

seen how things work and things aren't going to collapse if you push the wrong button" (Barrie et al., 2021, p. 396). A separate study found that training sessions with built-in experimentation times generated "a lot of increase in confidence," as older adults overcome their initial fears of technology by learning that "they are not going to mess anything up or create any huge problems on their device by just playing around and getting to know it" (Elgamal et al., 2024, p. 8).

Similar results have been reported in the literature on e-health literacy programs. Given that low self-efficacy often makes older adults distrustful of internet-based content, an explicit goal of these programs is to alleviate some of the sources of this distrust—for example, "finding the internet confusing, finding too much information, or not being able to discern the trustworthiness of a website" (Lin et al., 2020, p. 3). Surveys of participants in e-health workshops point to "an increase in self-efficacy in searching for and evaluating health information online" (Barr-Walker, 2016, p. 6). Evaluations have also linked participation in these workshops to decreases in computer anxiety and increases in the belief that the internet can be a valuable tool for improving the quality of health-care decisions (Xie, 2012). An evaluation of an eHealth literacy course based on the NIH SeniorHealth Toolkit for Trainers found that this resource "increased participants' confidence in searching online for health information" (Malone & Clifton, 2017, pp. 143–4). In another study, researchers found that taking a hands-on approach to digital education led to "improved understanding of internet search strategies and increased confidence to search independently for cancer resources" (Hoffman-Goetz et al., 2006, p. 37).

Building identity capital requires the presence of a safe, supporting learning environment that enables experimentation, risk-taking, and exploration. When investigating the various factors that facilitate the development of digital literacy skills, Detlor (2025) found that older library patrons were especially appreciative of instructors who relieved their fears and anxieties about "breaking the technology or making an irreparable mistake" (p. 395). This outcome has also been reported in the literature on creative arts programs. In a study of Delaware's "Creative Aging in Libraries" project, Moffett (2022) found more than half (56 percent) of participants gained self-confidence in learning new skills. Key to their development of new artistic skills was the ability to take risks in a "less inhibited" setting that granted them the freedom to experiment (p. 34). As one participant described the experience:

I always knew I could learn new skills, but after being in a "bubble" for over a year, it was great to be in a situation in which I had to do so and was successful. As one grows older this becomes more in question. I try to learn new things periodically so I don't forget I can (p. 34).

Experimental activities such as this are particularly valuable for "anxious learners," who tend to rely on memorization-based approaches that may not always impart the types of skills needed for life in the digital world. As exploration and wayfinding are "critical to gaining digital literacy skills," experimental learning is a key strategy for libraries to pursue when working with older adults (Barrie et al., 2021, p. 386).

The LIS research also suggests that hands-on, practical learning is particularly effective in helping older adults acquire new knowledge and skills. In a recent study, Winberry et al. (2025) found that older adults appreciated having time to use what they had learned about digital technologies before completing a training session. Taking things slowly enough that participants have time to "write notes" and practice a technique or skill "at least once" before being dismissed is essential, one older patron said (p. 6). The older adults interviewed in a study

of makerspaces similarly reported that consistent hands-on support was “consequential for engagement with technology learning” (Widman, 2023, p. 1571). Echoing these findings, a study of digital literacy training emphasized the value of experiential, hands-on training—particularly activities that inadvertently teach computer skills (for example, “having students do a card sorting exercise on their iPads as a means of teaching them how to use an iPad”) (Elgamal et al., 2024, p. 8). Other research confirms the effectiveness of educational programs that offer “hands-on and user-appropriate learning” (Barrie et al., 2021, p. 382).

For some adults, the most effective educational experiences are those that allow for self-directed learning. Studies show that outcomes improve when older adults take charge of their learning—including planning, implementing, and evaluating (Wang, 2013). By allowing participants to proceed at their own pace, libraries can act as effective self-learning moderators and motivators (Xie & Bugg, 2009). Being able to modify educational programs based on patrons feedback is also helpful in this regard, because it makes older adults more responsible for what they are learning (Elgamal et al., 2025).

Self-directed learning does not mean leaving older adults entirely to themselves. While in some cases, this occurs without much in the way of instruction or interaction, on a more general level, self-directed experiences are those that are responsive to learners’ interests, needs, and concerns. It includes things like modifying programs on the basis of patron feedback, as this promotes more self-directed learning. Involving older adults in the program development process has been cited as “a key factor in a positive learning environment and in addressing ageism” (Barrie et al., 2021, p. 398).

Many older adults also appreciate having opportunities to receive professional guidance. A study on health information found that many older adults are interested in learning “the basic science behind medical conditions that frequently occur among older adults,” and in receiving practical recommendations from professionals with clinical expertise (Shi & Luo, 2020, p. 342). Educational programs led by subject matter experts can provide “a tangible sense of accomplishment” (for example, certificates of completion or merit) and “materials perks” (for example, book vouchers) can help boost learners’ self-esteem (Na & Lee, 2024, pp. 5–6).

Self-directed learning also means incorporating group or buddy learning systems into the learning environment (Detlor, 2025). The social elements of learning may be especially significant for older adults. As one study notes, these elements

augment the traditional focus on technical skill acquisition with holistic learning environments that leverage social interaction and experiential learning. This could fill a gap in current educational theories that may not fully address the unique learning needs and preferences of older adults (Elgamal et al., 2024, p. 10).

Digital literacy skills are best acquired “through social practice and group interaction”—that is, in settings “where family, peers, mentors, and gatekeepers come together to provide an environment for exploration” (Barrie et al., 2021, p. 386).

The evidence from intergenerational programs is particularly promising here. In a study of library makerspaces, Widman (2023) found that many older adults “reported originally learning technology tools from younger

makerspace staff” (p. 1571). Interestingly, as these older adults became more proficient with different technologies, they began teaching and assisting each other “as well as younger participants, moving the group collectively from primarily crossgenerational learning to increasingly more intergenerational learning” (p. 1571).

It is important to note that older adults are not the only patrons capable of gaining new knowledge and skills. Intergenerational programs can teach younger generations compassion and empathy, and programs led by older adults offer a way to “disseminate knowledge about aging” in ways that correct misconceptions and teach ways to “detect and resist ageist assumptions” (Baluk et al., 2021, p. 485).

As the above discussion indicates, library programs can have positive impacts on older adults’ knowledge, attitudes, and skills. The value of educational programs for older adults has been thoroughly documented in the literature. In a 2009 study, Xie and Bugg provided an apt summary of the relevant scholarship on this topic:

Research shows that learning in later life can compensate for negative changes associated with the aging process (Hooyman & Kiyak, 1999; Schneider, 2003), and help older adults stay physically and mentally healthy and socially active (Dench & Regan, 2000; Duay & Bryan, 2006; Purdie & Boulton-Lewis, 2003). Computer learning can provide great opportunities for personal growth, which is a key indicator of psychological well-being (Ryff, 1989; Ryff & Keyes, 1995). This emphasis on learning as an end in itself is also consistent with the mission of public libraries, which stresses the importance of public libraries serving not only the information needs but also the learning needs of older adults (Van Fleet, 1995; Van Fleet & Antell, 2002) (p. 11).

Despite this, there are clear gaps in our understanding of how library programs can meet older adults’ educational needs. As a study of programming on end-of-life issues puts it, “much remains unknown about these programs and the impact that they have” (Irwin, 2024, p. 97). The field’s limited knowledge of program impacts and outcomes (especially in the long term) underscores the need for “innovative, evidence-based approaches” to serving older patrons (Lenstra et al., 2021, p. 598).

Health & Wellbeing

Libraries can enhance the health and wellbeing of older adults in a variety of ways. Whether it be facilitating access to reliable health information, offering programs that support physical and mental health, or simply reducing social isolation (Baluk et al., 2020), much of the work libraries do with older adults helps improve overall wellbeing. To yield health-related gains, these programs need not focus explicitly on health. While fitness and exercise programs may improve physical functioning, and health literacy courses may help older adults make better therapeutic decisions, other types of programs can also contribute to wellbeing in a more general sense—for example, creative writing and memoir programs that leave older adults feeling more energized and positive in their outlook on life (Griffin & Harvey, 2024).

Yet while the impact libraries have on the general health and wellbeing of older adults “cannot be overstated” (Sikes, 2019, p. 20), knowledge of how exactly these programs translate into improved healthcare outcomes is

underdeveloped. In some cases, there is evidence of gains in learning leading to improved health-related abilities or behaviors. For example, in a study of an e-health literacy course, Xie & Bugg (2009) found that 75 percent of participants said the knowledge they acquired had affected a health-related decision. Two-thirds (67 percent) said they would be likely to discuss what they had learned with a healthcare provider, and nearly half (48 percent) said the course had changed how they took medicine. Similarly, in a study of a 12-week, video-based, on-site exercise program launched through collaboration with a fitness company, Lenstra & Oguz (2020) found that many of the participants they surveyed reported improvements in physical health—whether it be better balance, the ability to stand up and/or walk without assistance, reduced fear of falling, or simply an increase in their overall energy levels. In addition to reporting gains in physical health, participants also agreed that the program had helped “lift their spirit or put them in a better mood” (Lenstra & Oguz, 2020, p. 4).

In addition to reporting gains in physical health, participants also agreed that the program had helped “lift their spirit or put them in a better mood.”

Outside of studies such as these, however, there is very little evidence of library programs directly improving older adults' health outcomes. Feedback on e-health programs is “consistently positive” (Barr-Walker, 2016, p. 18), and studies often report on how training helps older adults “find the health information they need” (Barrett, 2009, p. 461). But the existing data does not usually extend beyond results such as these. LIS scholars often issue statements as to the “important role” libraries can play in helping older adults gain access to high-quality information and services that “enhance healthy behavior and health outcomes in their communities,” but evidence to that effect is often lacking (Lin et al., 2020, p. 1). Data on long-term impacts is practically non-existent, and often, the only evidence of positive outcomes appears in brief post-program surveys that speak in very general terms.³ As an example of this, consider the feedback received through evaluation of a SeniorNavigator training program, which only two participants completed:

Both attendees rated the class as outstanding and reported that they believed that the class should be offered again. Also, verbal feedback from attendees following the program was positive. Both attendees stated they learned a lot from the program and expressed appreciation (Ladd et al., 2019, p. 120).

Not surprisingly, impact assessment has been identified as an area of improvement for libraries engaged in health literacy efforts. As Barr-Walker (2016) writes, assessment

is often an afterthought of library programs, and previous reviews of library outreach efforts have highlighted weaknesses in the quality of measurement, analysis, and design (Whitney, 2013). The most common form of evaluation for health literacy programs in libraries remains the pre- and post-test survey that uses self-report to gauge impact and effectiveness (Aspinall et al., 2012; Kouame & Young, 2014; Strong et al., 2012; Xie, 2011). While this method can be useful for pilot studies, more

3. One likely reason for the lack of in-depth programming evaluation, it should be noted, is the library field's commitment to patron privacy. To uphold older adults' privacy rights (ALA Council, 2002), libraries refrain from collecting or retaining personally identifiable information linked to patrons' information access.

robust methods of assessment should be considered, including significance testing, systematic thematic analysis, and measuring long-term outcomes or impact. Utilizing such methods may be challenging for librarians who deliver one-shot sessions; for this reason, integration of health literacy into all library services is ideal in order to measure comprehensive impact (p. 17).

Much of the evidence of the beneficial role libraries can play in terms of improving older adults' health comes not from evaluations of past or present programs, but from more general scientific knowledge. For example, when highlighting the benefits of an e-health literacy program that increased older adults' confidence in independently searching for cancer resources, Hoffman-Goetz et al. (2006) pointed to previous research showing how “use of the Internet for cancer information is associated with increased social support and decreased loneliness and depression” (p. 37). No evidence was provided of these impacts within the context of the particular program under examination.

Similarly, much of the evidence highlighting the positive role programs can play in improving the health and wellbeing of older adults with dementia is non-evaluative in nature. Based on an understanding of the scientific literature on dementia, Dickey (2020) argues that programs that incorporate reading, storytelling, poetry, music, and other creative arts help stimulate the mind in ways that lead to “decreased agitation” and “increased alertness” (p. 126). Interaction with music is especially beneficial, the author argues, as it activates multiple neural pathways that are more “generalized throughout the brain” (p. 128). But direct evidence of the therapeutic benefits associated with dementia-friendly programs such as Memory Cafes (whether it be reduced heart rates, lower blood pressure, or a reduced risk for the onset of delirium) for older patrons remains lacking. As such, it is difficult to determine if library efforts such as these offer “a good defense against the risk and progress of dementia” (Dickey, 2020, p. 126).

As all of this indicates, little is known about how health literacy programs targeting older adults translate into improved healthcare outcomes. Though published more than a decade ago, the conclusion reached by Manafó and Wong (2012) still applies to the library field: “more research is needed to identify the role for health literacy skills in potentially contributing towards the promotion of overall health and well-being among the aging” (p. 957).

Social Connectedness & Inclusion

Enhanced feelings of social belonging are one of the most frequently reported outcomes in the LIS literature on older adult programs. Given their status as communal institutions that help patrons enjoy the company of others, it should not be surprising that older adult library programs are frequented by patrons hoping to socialize. As they provide opportunities for community members to “meet and get to know one another” (Lo et al., 2019, p. 198), libraries are increasingly seen as “an invaluable service in the fight against loneliness” (Connolly, 2024, p. 33).

At times, this outcome is an explicit goal of these programs. For example, in a study of Wisdom Cafes, Pender (2018) found that many of the libraries launching these are directly and intentionally responding to the social isolation experienced by older community members. The evidence from these programs suggests that by giving these patrons a chance to share their stories, Wisdom Cafes are facilitating relationship formation and community building. Survey results indicate that 95 percent of participants met at least two new people through Wisdom

Cafes, and that 93 percent felt a deeper sense of community. Regardless of the topics covered in these meetings, participants came away feeling more connected to those around them. As one participant said: “I learned I’m not alone” (Pender, 2018, p. 177).

Many other library programs seek to give older adults opportunities for socializing—including book clubs, writing groups, knitting circles, movie showings, arts and crafts events, and fitness classes (Baluk et al., 2021). For some older adults, participating in these programs is “their only opportunity to connect with others” (Connolly, 2024, p. 1). Older adults often create social groups within library settings, joining these simply so they can “expand their social circles” (Lo et al., 2020, p. 200). Many seek to bond with library workers themselves; as one study found, “older adults may simply enjoy having interactions with a library staff member who is friendly, appears knowledgeable, and takes the time to listen to patrons’ information requests” (Piper et al., 2009, p. 114).

Social connectedness can also be an unintended outcome of library programs (Maxwell, 2025). In the case of health-related programs, it often feeds into and out of the physical and mental health benefits participants receive. In an evaluation of a library-based exercise program for older adults, Lenstra et al. (2022) reported that the most commonly discussed benefits revolved around socialization—that is, “having opportunities to interact

Social connectedness can be an unintended outcome of library programs.

with others” (p. 14). Beyond simply having “physical time for our bodies,” participants valued the chance to share coffee and fellowship with others, noting that this helped them make new friends and maintain a positive outlook on life. “I enjoy socializing while exercising,” one said, explaining how this “really helped my depression and attitude about living. [I’m] thankful that the library offered it” (p. 15). Reflecting on comments such as these, the study’s authors stressed how library health programs are “multifaceted and

interconnected in ways that encompass physical, mental, and social dimensions” (p. 17). By structuring programs with these three components of health in mind, they added, libraries can maximize the positive impacts of their healthy-aging interventions.

Social connectedness has also been reported as an unanticipated benefit of digital literacy programs. A 2009 study by Xie and Bugg found that the socialization occurring during computer training sessions was a contributing factor to older adults’ learning gains. Being able to interact and form relationships with instructors and fellow learners also played a direct role in improving participants’ sense of wellbeing—perhaps even more so than the training itself. Along similar lines, a more recent study stressing the value of longer, six-to-eight week training programs noted that older adults need “sufficient time for socializing and making friends” (Elgamal et al., 2024, p. 7). As one of the participants interviewed for this study put it: “Sometimes with older adults, it’s not so much the skills development, it’s the social connections that are made during the learning process. The social connections are just as important as the information that’s being transmitted” (Elgamal et al., 2024, p. 8). Making social interaction and experiential learning an intentional part of digital literacy initiatives, this study argues, can create the kinds of “holistic learning environments” needed to fully address older adults’ unique educational needs (p. 10).

As all of this suggests, the social dimension of library programs cannot be overlooked. While feelings of social belonging are an important outcome in and of themselves, they are also intertwined with other program impacts—including therapeutic benefits. This is especially the case for older adults living with dementia. Loneliness and social isolation often accelerate the cognitive decline associated with this condition, while social contact and interaction

can improve brain health and promote emotional resilience (Dickey, 2020). Memory Cafes and other dementia-friendly programs often seek to stimulate conversations and socialization, which can “improve cognitive function and counter both depression and apathy in dementia patients” (Dickey, 2020, p. 122).

Community-based initiatives can be especially beneficial for older adults who either live alone or are no longer in their homes. These individuals generally have “fewer opportunities or spontaneous triggers for their long-term memories” (Kendall, 1996, p. 20). By stimulating “vivid topics of conversation and shared experience,” programs that involve writers and artists (for example, oral history and reminiscence projects) can trigger these memories, bringing an improved quality of life to those unable to age in place (Kendall, 1996, p. 20).

Outcomes related to learning and wellbeing can also promote social connectedness. Given the connection between social and digital exclusion, it may not be surprising to learn that these effects are often associated with digital literacy programs. Since the COVID-19 pandemic, digital literacy has become more and more of a prerequisite for participating in society (Seifert, 2020). When older adults gain digital knowledge and skills, they gain access to new forms of social interaction and engagement; as a result, they feel more relevant in society (Casselden, 2022). By acquiring digital skills and knowledge, older adults often discover strategies for reconnecting with old friends, keeping in touch with their families, and meeting new people—all of which can support a sense of community belonging (Casselden, 2022). By embedding digital inclusion in their programs, libraries can promote older adults’ social inclusion more generally.

Programming can also help older participants build social capital—that is, the kinds of relationships, connections, and networks that lead to greater cooperation and resource sharing between community members (Lo et al., 2019). As an illustration of this, a study of an e-health training course noted multiple instances in which “participants invited friends to join them for classes” and “share[ed] resources from the Toolkit with family, friends, and church groups” (Malone & Clifton, 2017, p. 145). Part of the process of building social capital is giving back to the community. By volunteering their skills, time, and knowledge, older patrons gain more opportunities to build social connections—especially with younger community members. This includes younger adults: in their research, Baluk et al. (2020) heard from library workers highlighting the benefits of intergenerational family support. As one put it:

We’ve noticed there are a lot of families that are single moms or single dads, and so they don’t have the network that other families might have. So it’s really good for them to have that opportunity to have some older adults (p. 482).

As this suggests, part of the social capital older adults build through library programs has to do with being identified as a “resourceful agent”—that is, someone “who can create and foster relationships through mutual respect” (Dalmer & Mitrovica, 2022, p. 1126).

On a broader note, there is evidence of library programs helping to reduce some of the social inequalities older adults experience in their daily lives. By simply offering an accessible space for social interaction, along with free resources and services, libraries are countering some of the exclusionary forces in older adults’ lives (Baluk et al., 2020). As Maxwell (2025) writes, libraries are often “simply places for older adults to exist without financial or other burdens” (Maxwell, 2025, p. 434).

Library programs can also support the creation of more age-inclusive communities. Whenever their efforts counter stereotypes about aging, libraries can reduce some of the inequalities older adults experience (Dalmer & Griffin, 2023). Through the provision of medical information and resources, for example, libraries can help reduce older adults' healthcare costs and enable them to “constructively cope with future aging issues” (Lin et al., 2020, p. 9). Programs that increase access to internet-based technologies (including smartphones and iPads) can reduce the digital divide (Casselden, 2022). Programs that bring different groups together and allow for the dissemination of diverse knowledge and experience can counter ageism—particularly when these programs give older adults a chance to “showcase their skills and knowledge” (Baluk et al., 2020, p. 3).

Giving older adults a place to “mix and mingle” with family, friends, and others, to build social networks, or even just to “kill” time: these are some of the primary ways library programs reduce social isolation and enhance feelings of community belonging (Lo et al., 2020, p. 209). By combining program activities like these with refreshments and snacks, libraries are creating an inclusive, welcoming environment that can bridge social divides and promote social capital. Their programming efforts are helping to alleviate social inequalities and build more age-friendly, age-inclusive communities (Baluk et al., 2020).

Barriers and Ways to Overcome Them

As sites of institutional power, libraries have the ability to both improve and worsen older adults' quality of life. While many positive impacts of services designed for older adults have been reported, the LIS literature also highlights a number of instances in which these patrons' experiences have been negative and harmful. Acknowledging these experiences, the following discussion details a number of barriers libraries are currently confronting in their attempts to create programs for older adults. To help libraries overcome these barriers, this section of the review also lists a number of best practices that can guide programming efforts for members of this demographic. Adhering to these practices can ensure that libraries effectively advance older adults' diverse interests and result in outcomes that improve their health, wellbeing, and overall functioning.

Ageism

Ageism is the most significant barrier confronting libraries' older adult programming efforts. Because these efforts are “shaped in the context of societal ageism” (Lenstra, 2018, p. 68), libraries' attempts to meet the needs of this demographic are “not immune” (Maxwell, 2025, p. 429) to stereotypical views that equate aging with decline, disability, and dependency. Seen in both what libraries have done and what they have not done, ageist attitudes and behaviors have manifested in a number of ways within library settings—some subtle, some more overt (Dalmer, 2017).

One example of this can be seen in how libraries have historically offered “few programs and services to healthy, active older adults” (Bennett-Kapusniak, 2013, p. 207; see also, Dalmer & Mitrovica, 2022). Despite the increased scale and scope of older adult programming today, in some cases, services to older adults have not moved beyond the provision of large-print books and outreach to the homebound and institutionalized (Sikes, 2019). Libraries that exclusively or primarily target older adults with disabilities or chronic conditions—or that only offer programs on topics such as fall prevention, dementia, and end-of-life care—can unintentionally amplify discourses that associate aging with decline, debility, and dependency (Dalmer & Mitrovica, 2022).

Older adults may distance or exclude themselves from library programs explicitly labeled or advertised for them.

Ageist attitudes can also be seen in the language used to label, describe, and promote older adult programs. Following best practice guidelines laid out by the American Geriatric Society and others (Lundebjerg et al., 2017), libraries are increasingly adopting “older adult” as a default term for describing those over 65. But outdated, problematic terms such as “elderly,” “the aged,” and “senior” are still part of LIS discourse—as can be seen in contemporary programs with titles such as “Senior Scam Prevention,” “Senior Bookmobile,” “Brain Games for Seniors,” and in projects like “SeniorsConnect.” Studies of program marketing and promotion have found that older patrons are generally displeased with the term “seniors,” fearing that they may be treated worse because of this label. In one reported case, a library decided to rebrand a “Senior Series” program after learning that “the older adults don’t feel like they’re seniors” (Baluk et al., 2021, p. 481). In another study (Dalmer et al., 2024), interviewees said that even the phrase “older adults” was objectionable, as it tended to put people in an age-defined box. On the basis of this discovery, the study’s authors concluded that “older adults may distance or exclude themselves from library programs explicitly labeled or advertised for them” (Dalmer et al., 2024, p. 6).

In other contexts, ageism may be producing “potentially exclusive library environments with ill-fitting and underused programs and services” (Dalmer, 2017, p. 18). For example, in a study of Washington County Public Libraries (WCPL) in rural Virginia, Sikes (2019) found that courses on internet-based technologies failed to generate interest among a group of older adults; the need for digital literacy instruction, they found, “seemed far more pressing for WCPL librarians than for users” (p. 18). In other instances, the assumption that all older adults “need help with the basics” of digital technology use—along with refusal to acknowledge the existence of “tech-savvy seniors” (Infobase, 2023)—has led to situations where there are “insufficient intermediate-level digital literacy training opportunities” (Detlor, 2025, p. 1). Researchers have also documented instances where digital literacy programs have reflected ageist assumptions about older adults’ use of computers and smart phones, including the belief that “what older adults do with technology is not important enough to support and foster” (Lenstra, 2017, p. 74).

Ageism can also surface through routine staff-patron interactions. Most often, this occurs as a form of “compassionate ageism”—an interactional approach that combines positive, warm perceptions of older people with assumptions of dependence, passivity, frailty, and (in some cases) victimhood (Cuddy et al., 2008). Speaking to this, an older patron interviewed by Winberry et al., (2025) remarked on how staff “treat me differently”:

Sometimes it’s annoying. If I’m about to walk up steps and somebody runs up and wants to give me a hand, I find that that’s annoying. Because I can do it myself (Winberry et al., 2025, p. 8).

While sometimes beneficial, compassionate ageism is nevertheless rooted in biased assumptions of older adults' abilities and competence—most notably, the stereotype of the “doddering but dear” older adult (Cuddy & Fiske, 2002). As researchers have noted, compassionate ageism can have harmful effects when targeted at those who neither need nor want help—potentially resulting in the phenomenon of learned helplessness (Vervaecke & Meisner, 2021).

Another prominent example of compassionate ageism is the use of “elderspeak.” Similar to “baby talk,” elderspeak is a type of linguistic over-accommodation in which younger people use simple vocabulary and sentences (along with higher pitch, louder voice, and slower speech rates) when talking with older people (Baker et al., 2025). In library settings, elderspeak commonly manifests in the use of “honey,” “dear,” “sweetie,” and other terms of endearment (Dalmer et al., 2024). Though used to signal care for older individuals, studies show that this language is often regarded as infantilizing and disrespectful (Shaw & Gordon, 2021). Because it presents older adults as childlike and denies them the maturity that comes with age and experience, elderspeak “implicitly questions the competence of older adults” (Gendron et al., 2016, p. 3).

As problematic as “compassionate ageism” is, the harm it perpetuates cannot be undone simply by turning deficit-based perspectives on their head. Even perspectives that emphasize older adults' strengths, abilities, and assets can devalue people's lived experiences of aging. Concepts such as “positive aging,” “successful aging,” “active aging,” and “productive aging” have become incredibly popular in recent decades, and many see them as a way to move past stereotypical views of aging as “a state of unwelcome decline and dependence” (Mandville-Anstey

As problematic as “compassionate ageism” is, the harm it perpetuates cannot be undone simply by turning deficit-based perspectives on their head.

et al., 2022, p. 4). Libraries have at times warmly appropriated these ideas, as can be seen in the Institute of Museum and Library Services' (IMLS) 2006 volume *Designs for Change: Libraries and Productive Aging*. But even as these concepts emphasize the positive features of old age and remind people of the valuable contributions older adults make to society, they can also stigmatize and marginalize segments of the older population.

As many critics have pointed out, ideas about “active aging” and “productive aging” often liberate “healthy and capable” older adults from negative age stereotypes while treating the unhealthy and unwell as failures—as individuals who “have not worked hard enough on themselves” (Van Dyk, 2014, p. 96). These new discourses make successful aging an expectation

and a duty for older adults, and celebrate those who exhibit agelessness (Mandville-Anstey, 2022, p. 13). They suggest that “to age well is to not age at all” (Dumas, 2012, p. 376) and reflect ageism's more general dislike of the aging process.

Most importantly, with all of these purportedly anti-ageist concepts, the basis for determining whether someone is aging successfully is not that individual's subjective sense of wellbeing, but instead, external criteria that connect worth with social value. This can be seen in standard definitions of “healthy aging” and “productive aging”—both of which stress the idea that older adults should be accepted and valued to the extent that they exist as productive contributors to society (through either paid or unpaid labor) (Mandville-Anstey, 2022). Libraries themselves sometimes reproduce these views. For example, the aforementioned IMLS report presents older adults as “resources for our communities and libraries,” and highlights ways these institutions can open up possibilities “for

harnessing the energy and experience of older Americans for the benefit of their communities” (Zeisel, 2006, pp. 7, 10). Though this is certainly true, the instrumental view of older adults set forth here reflects some of the ways that the criteria for “productive aging” is, not being. Through this approach, older adults who are not perceived to be valuable human resources may be treated inhumanely and seen as a burden to society.

Anti-Ageist Practices

To ensure that programs do not play into ageist stereotypes, many LIS scholars have called upon library workers to adopt a critical gerontology lens in their work with older adults (Dalmer, 2017; Kirman, 2023; Maxwell, 2025). Rejecting the individualistic focus of “successful aging” and associated concepts, critical gerontology calls attention to the social and structural dynamics that shape older adults’ experiences (Blix & Ågotnes, 2023). Instead of presenting these experiences as the result of biological processes or lifestyle choices, it foregrounds the role that socioeconomic conditions, power imbalances, and prevailing ideologies tied to race, class, gender, sexuality, and disability play in late life outcomes (Doheny & Jones, 2021). A recent review (Geneviève et al., 2025) highlights five key tenets of critical gerontology:

1. **Acknowledging the centrality of ageism** and its negative impacts on expectations and experiences of aging;
2. **Drawing attention to the social construction of aging**, including how different political, social, cultural, and economic forces shape older adults’ lives;
3. **Foregrounding anti-essentialism and intersectionality**, which highlight the diverse nature of aging experiences and the ways these are influenced by “interlocking social identities such as gender, race, and class” (p. 99);
4. **Undertaking holistic analysis**, which promotes investigation of age-related processes at the micro, meso, and macro levels;
5. **Listening to and amplifying the voices of older people**, and opening up pathways for these individuals to more fully participate in the development of aging-related policies, practices, and procedures.

By promoting age consciousness (that is, a broader awareness of age-related biases—whether personal, institutional, or social) and collective responsibility, critical gerontology offers a framework for challenging the various inequalities older adults live with (Moody and Sasser, 2018).

One way to incorporate critical gerontology into program planning is to actively inquire into the perspectives, concerns, circumstances, and interests of older adults themselves. Given their diverse experiences, it is essential to “ask older adults what their needs are, rather than assuming that these needs are self-evident” (Piper et al., 2009, p. 116). Through the appointment of an older adult outreach librarian, the establishment of older adult advisory groups, or the periodic conducting of informal focus groups or community forums (Mayo, 2009), libraries can discover ways to be in “constant consultation with older adult patrons, garnering feedback to discover and respond to new and changing needs” (Dalmer, 2017, p. 17). By creating “more opportunities to receive ideas” from them (Dalmer & Mitrovica, 2022, p. 3), libraries can learn about older adults as “composites of diverse ethnicities, sexual orientations, family arrangements, religious affiliations,” etc. (Dalmer, 2017, p. 14). That new knowledge can be used to adapt existing programs to older adults’ diverse needs and interests—including those with differing cognitive and/or physical abilities. It can also spur new program ideas. As an example of this, Baluk et al. (2021)

discuss an instance where “a conversation with a library patron after an informational session about online financial security led them to develop a new program about online dating later in life” (p. 484).

Engaging with older adults can help libraries move beyond the current focus on “productive aging.” By expanding the current programming environment “beyond just employment or productivity” (Maxwell, 2025, p. 439), critical gerontology can help make libraries “spaces that mitigate or even challenge the potential negative effects of productive aging and the aging enterprise” (Dalmer, 2017, p. 17). One possible way to do this is to host events and programs about ageism itself. Educational initiatives aimed at stimulating conversation and dialogue can be effective in challenging stereotypical representations of older adults’ lives (Dalmer and Griffin, 2023). By engaging in topics such as “How Does Ageism Impact Us?” (Pender, 2018), libraries can promote public examination of the social construction of old age and aging (Dalmer, 2017). These programs can benefit multiple audiences: while younger groups can learn strategies for identifying and countering other-directed ageism, older adults can develop techniques for overcoming internalized ageist stereotypes.

Another option is to build anti-ageism into new and existing programs. For example, as they learn new informational technology skills, older adults can be challenged to develop “alternative narratives” that reinforce their capacity to “gain digital literacy” and “integrate technology use into their daily lives” (Barrie et al., 2021, p. 401). To support the production and circulation of these narratives, libraries can address the “fear of failure” that older adults sometimes bring into digital literacy programs, and ensure that participants can see themselves reflected in them (Detlor, 2025). Programs and services in which all facilitators and volunteers are younger people reinforce ageist assumptions about them being the “natural technology tutors of old people” (Lenstra, 2017, p. 74). By giving tech-savvy older adults a chance to lead or co-lead programs, or by having staff learn new technologies alongside participants, libraries can productively counter these assumptions.

Co-designing programs with older adults has been cited as “another way to avoid perpetuating ageist ideas and assumptions” (Baluk et al., 2020, p. 15). Among other benefits, treating older patrons as program consultants can lead to instances where these individuals might develop and/or lead programming. Tapping into older adults’ expertise and abilities can further the expansion of volunteer opportunities and spur new types of programs (Mayo, 2009).

Scholars also suggest that intergenerational programs also have great potential when it comes to overcoming ageism. Older adults regularly express interest in programs that seek to foster relationships among people of different age groups. In one study, older patrons highlighted the value of having opportunities to “talk to younger people and share their stories with them,” sharing that programs of this sort “help(s) with the younger generation learning compassion and empathy” (Baluk et al., 2021, p. 482). On the flip side, an older participant in another study remarked on how “essential” it was for members of their demographic to “respect young people’s perspectives and try to learn about [them]” (Winberry et al., 2025, p. 8). LIS scholars have begun documenting the benefits of these exchanges. In a study of intergenerational makerspaces, for example, Widman (2023) spoke of how they

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frequently observed grandparents or other older family members or caregivers collaborating on projects with children. They often engaged with technology like the vinyl cutter and laser cutter to support youth in their projects, and some branched out to work on their own projects as well. In one example of this, a grandfather who had come in with his daughter and grandchildren was overheard on the phone excitedly telling someone about the “cool tools” they had at the makerspace. He later came back several times to use the laser cutter (p. 1571).

By building intergenerational programming environments, libraries can bridge social divisions by “equip[ping] individuals to detect and resist ageist assumptions” (Baluk et al., 2021, p. 485). Regardless of the exact approach taken, it is clear that “older adults need to be included in programming choices by encouraging feedback and dialogue” (Kirman, 2023, p. 127). The literature suggests that improving upon the current situation means shifting to a programming model that “incorporates and encourages open and dialogue and feedback from (its) older patrons” (Dalmer, 2017, p. 14).

Practical, Logistical, and Institutional Barriers

As institutions with limited resources, it is not easy for libraries to financially support older adult programming. In some cases, their expansion of services for older patrons may be seen as an example of “mission creep,” and as LIS scholars have noted, libraries that take on new responsibilities are often not acknowledged or funded “for the added work they do” (Lenstra, 2021, p. 608).

From a practical standpoint, two of the most challenging barriers to creating effective programs for older adults are “limited staff capacity and limited financial resources” (Baluk, 2021, p. 484). In many cases, effectively supporting older adults’ needs requires the hiring of additional personnel, but many libraries lack the financial wherewithal to bring on staff for the express purpose of establishing and maintaining relationships with older members of the community. Finding adequate financial support from government agencies and other sources is essential to expanding this programming direction, but as LIS scholars have noted, funding is frequently in short supply (Baluk et al., 2020; Hughes, 2017; Perry, 2014).

Leaving aside considerations related to location, space, staff capacity, and financial resources, there is often tension around how to balance programs for older adults with those targeting other patron groups. “There are so many people who come to the library with different needs and we try to offer the best for each of them,” said a library worker interviewed in one study, “but sometimes it’s very difficult” (Baluk et al., 2021, p. 480). Others have noted how “competition with other services within the library [is a] real challenge” (Baluk et al., 2021, p. 480).

A related concern has to do with feelings of low competence and confidence among library workers. While research indicates that libraries can improve rates of health literacy among older adults, in some cases, libraries are hesitant to offer programs on this subject because they feel they lack adequate knowledge of credible health information resources. Because of this, among library workers, there is often a “fear of being asked for medical advice”—along with “a fear of mis-informing a patron” (Lin et al., 2020, p. 8). Similarly, in a study of end-of-life programming,

Irwin (2024) found evidence of libraries abandoning their plans on account of “concerns about offending library patrons and about the library staff’s expertise on the topic” (p. 91).

With regard to digital literacy programs, another obstacle pertains to the potential negative effects that “technologized visions of the public library” might have on older adult engagement (Dalmer & Mitrovica, 2022, p. 7). Among some members of this demographic, it appears there is a strong desire for libraries to exist “in the traditional sense”—that is, to focus on print-based resources and other familiar materials (Connolly, 2024, p. 22). How will these patrons fare in library spaces where internet-based technologies and virtual hubs predominate? Given the fact that age remains one of the strongest predictors of internet use (Dalmer et al., 2022), it is possible that older adults who struggle with or are uninterested in digital technologies may experience “exacerbated feelings of social exclusion” in the library (Dalmer et al., 2022, p. 7).

The Value of Partnerships

There is no single solution for addressing these resource-related challenges. But whether tied to funding, staff needs, or other institutional concerns, the LIS literature points to partnerships as a key asset. Regardless of location, the existing scholarship indicates that this is a clear area of improvement for all libraries. A study by Perry (2014) found that only 56 percent of suburban libraries reported “ongoing relationships” with community organizations serving older adults (p. 360). Similarly, in a study of small and rural libraries, Lenstra et al (2021) found that only 50 percent reported strong relationships with local agencies that specialize in aging.

Investing more in these relationships can help libraries fill a number of holes, scholars suggest, leading to new program ideas, increased funding, and a more evenly distributed workload. For those libraries that have partnered with other community organizations, the results have been promising; as one library worker reported, “There are a lot of organizations that want to serve older adults and they’re not aware the library is a fantastic place to do it” (Choquette, 2021). Partnerships can help libraries listen to older adults’ voices, giving them access to important input and feedback on current and future programs (Mayo, 2009). In addition to helping libraries better identify community needs, researchers report that partnerships may make it possible to pool resources in ways that strengthen local services, increase the community’s ability to meet diverse needs, and enhance older adults’ wellbeing (Elgamal et al., 2024). By partnering with organizations that have a similar mission (Rietkirk, 2024), libraries can make referrals for services and identify co-sponsors for events and programs (Mayo, 2009). On this last point, it bears noting that in some cases, it is “not even necessary for librarians to spearhead these programs; they may be able to find roles supporting existing programs or activities with information resources” (Irwin, 2025, p. 95).

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As all of this suggests, partnerships can help libraries become part of a “wider ecology of support for older adults” (Maxwell, 2025, p. 438). By leveraging the experience and expertise of local partners, libraries can help “establish potential areas of interest among older adults” (Baluk et al., 2020, p. 10), while also increasing their access to trustworthy resources and information (Shi & Luo, 2020). Partnerships can reduce redundancies and fill gaps in existing services. A review

of older adult health programming concluded that partnerships help libraries “extend beyond institutions into the surrounding community” (Ladd et al., 2019, p. 120). In one case, a health literacy course launched by Virginia public libraries in collaboration with the Virginia Center on Aging, the Lifelong Learning Institute, and the College of Allied Health Professions “led to invitations from other community groups to conduct similar sessions to senior citizens in the Greater Richmond area” (Ladd et al., 2019, p. 120).

In its official guidance, the ALA recommends libraries establish partnerships with any and all organizations dedicated to serving older adults, including: (1) local agencies on aging; (2) senior centers; (3) healthcare centers; (4) gyms and health clubs; (5) AARP chapters; (6) rotary clubs; (7) the American Red Cross; (8) United Way; (9) OASIS; and (10) recreational organizations. The existing LIS literature speaks to the wide variety of other organizations libraries can collaborate with. In the health programming domain, the LIS literature suggests that libraries establish partnerships with a variety of stakeholders, including the geriatric departments of medical facilities, older adult research centers and academies, retiree unions, and senior centers (Shi & Luo, 2020). Partnerships with the private health sector may also be beneficial (Lenstra & Oguz, 2020). Multi-sector partnerships may enhance older adults’ access to healthier lifestyles (Lenstra & Oguz, 2020) and improve self-efficacy in choosing health insurance and evaluating online health information (Markhenke & Howrey, 2014).

Partnerships with local medical centers have helped libraries launch healthy literacy programs and free health screenings (Xie & Bugg, 2009), while collaboration with local, state, and federal arts agencies have spurred numerous Creative Aging programs (Zeman, 2014). Partnerships enable successful initiatives like the Creative Aging in Libraries program—a collaboration between Delaware public libraries, the Delaware Department of State, Aroha Philanthropies, and the National Assembly of State Arts Agencies (Moffett, 2022). A study on end-of-

life programming detailed initiatives launched with hospices and hospice organizations, law offices, funeral parlors, religious congregations, hospitals and medical clinics, cemeteries, and schools, colleges, and universities (Irwin, 2024).

Making older adult programming a core library service requires an investment in infrastructure and staff development.

Making older adult programming a core library service requires an investment in infrastructure and staff development (Lenstra et al., 2019). According to the RUSA of the ALA, effective programming requires staff who are “trained to understand the multidimensional aspects of aging” (ALA, 2017; quoted in Lenstra et al., 2020, p. 740). As older patrons have

themselves testified, training helps library workers “foster an environment that is welcoming and inclusive” for older adults (Rietkirk, 2024). In a study of one library system’s old programming efforts, a participant in a drop-in technology troubleshooting program explained how they “love that I have people I can ask questions to and not feel stupid” (Widman, 2023, p. 1571). In a study of South Korean libraries, Na et al. (2024) similarly found that older patrons appreciate the personalized assistance and guidance library workers can provide. At the same time however, these patrons highlighted the difficulties in finding staff with the right disposition and competencies; as one said, “it’s not always easy to find someone to help out” (Na et al., 2024, p. 6).

Knowing that some staff may either deliberately or unintentionally make them feel unwelcome, older adults often look to establish relationships with specific library workers (Lenstra, 2017). Through partnerships, library workers can acquire vital knowledge and skills for countering ageism, increasing the likelihood that older patrons will see

them as a respected, trusted source of information and assistance. By improving their ability to communicate with older adults, library workers can respond more appropriately to the needs of this patron group. As a participant in an anti-ageism training session put it, events like this help “open up people’s eyes and give(s) them more compassion and the tools to work with people” (Baluk et al., 2021, p. 483).

Perhaps most importantly, partnerships can foster greater cross-sector coordination and support the creation of an overarching programming infrastructure. In a recent study, Dalmer and Griffin (2023) argue that libraries would benefit from the creation of a backbone organization capable of providing “national-level planning, support, management, and coordination of initiatives” across the field of older adult programming (p. 157). An organization akin to the RUSA’s “Library Services to an Aging Population Committee,” they suggest, could nurture a common programming agenda, circulate innovative programming ideas, resources, and curricula, and enable more frequent communication and collaboration between libraries and other relevant organizations. All of this could set the stage for collective impact, ensuring that programs for older adults move beyond the current, somewhat fractured and piecemeal state of affairs.

Acknowledgments

This project is generously supported by The John A. Hartford Foundation, a private, nonpartisan, national philanthropy dedicated to improving the care of older adults. The leader in the field of aging and health, the Foundation has three priority areas: creating age-friendly health systems, supporting family caregivers, and improving serious illness and end-of-life care. Learn more at johnahartford.org.

This report was authored by Elliott Bowen, Writing and Communications Lead at Knology, a social science think tank, in collaboration with the American Library Association (ALA) Public Programs Office and the Public Library Association. Knology and ALA would like to acknowledge the input of colleagues who helped shape this review and thank them for their ideas and expertise, particularly Rebecca Joy Norlander, Corinne Brenner, Joanna Laursen Brucker, Larra Clark, Hannah Arata, Meghan Gieseke, and Samantha Oakley.

The authors would like to thank Erin Simmons for proofing this report.

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This project is generously supported by
The John A. Hartford Foundation, a private,
nonpartisan, national philanthropy dedicated to
improving the care of older adults.

Knology Publication Number:
NPO 1030 ALA Hartford

