

The majority of patients with cancer are adults aged 65 years or older. Despite this, their special needs are generally under-recognized and under-researched. This includes the lack of awareness about scams targeting vulnerable older adults. The purpose of this article is to share knowledge and resources about financial exploitation of patients aged 65 years or older. Enhanced recognition of this phenomenon can facilitate oncology nurses' early identification and interventions for at-risk older adult populations.

AT A GLANCE

- Advanced age is the greatest risk factor for cancer. Older adults represent 16% of the U.S. population; however, this group accounts for 64% of all cancer diagnoses.
- There is growing evidence of financial exploitation of adults aged 65 years or older.
- Oncology nurses at the point of care can facilitate education, patient safety, and advocacy by using practical information, such as fact sheets related to financial exploitation and scams.

KEYWORDS

exploitation; financial; older adults; scam; geriatric; patients with cancer

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Older Adults and Scam Awareness

Exploring vulnerability within geriatric oncology

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Older adults in the United States bear a disproportionate burden of cancer. They represent 16% of the U.S. population; however, they account for 64% of all cancer diagnoses (Miller et al., 2019). This prevalence is expected to escalate significantly as the baby boomer generation ages (Bluethmann et al., 2016). Despite this reality, geriatric oncology has not been broadly accepted as a formal subspecialty within cancer care. Therefore, numerous sequelae of growing old and living with cancer remain under-recognized and under-researched.

The term “geriatric syndrome” is used to identify common conditions experienced by older adults that do not fall into specific clinical categories (e.g., falls, incontinence, delirium, malnutrition, skin impairment) (Senn & Monod, 2015). Abuse and neglect are also considered geriatric syndromes; however, unlike conditions with a clinical etiology, less is known about these phenomena. For example, a 2019 comprehensive literature review undertaken by the current author in collaboration with two academic librarians revealed the absence of any publications addressing the nature and scope of mistreatment of older adult patients with cancer. This observation highlights the need for increased awareness and advocacy in oncology nursing practice. The aim of this article is to provide an overview of financial exploitation, one type of elder mistreatment. Recognition of this geriatric syndrome across oncology settings can optimize patient safety and quality care.

Mistreatment Initiatives

The World Health Organization (WHO) has identified elder abuse as a serious global human rights and public health problem of significant magnitude. The WHO (2018) defines elder abuse as follows:

A single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. This type of violence constitutes a violation of human rights and includes physical, sexual, psychological, and emotional abuse; financial and material abuse; abandonment; neglect; and serious loss of dignity and respect. (p. 1)

Hallmarks of elder abuse include its significant underdetection, complexity, cultural corollaries, and adverse health and psychosocial outcomes (Dong, 2015; Stodolska et al., 2019). Within the past six years, mistreatment of older adults has been the focus of major social and policy initiatives in the United States. Consider the following timeline and actions:

- 2014: The Special Committee on Aging issued a warning to older adults about targeted financial scams (U.S. Senate Special Committee on Aging, 2014).
- 2015: The White House Conference on Aging (2015) prioritized elder mistreatment as one of the top four issues affecting older adults in the United States.

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