# Financial Fraud of Older Adults During the Early Months of the COVID-19 Pandemic

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#### Abstract

**Background and Objectives:** Coronavirus disease 2019 (COVID-19) created a "perfect storm" for financial fraud targeting older adults. Guided by the Contextual Theory of Elder Abuse, we focused on individual and systemic contexts to examine how older adults became prey to financial fraud

**Research Design and Methods:** In July 2020, 998 adults who were 60–98 years of age (93% White; 64% female) completed an online survey about experiences with financial fraud. Participants were recruited from gerontology research registries at Florida State University, University of Pittsburg, Virginia Tech, and Wayne State University.

**Results:** Over half (65.9%) of the respondents experienced a COVID-19-related scam attempt, with charity contributions (49%) and COVID-19 treatments (42%) being the most common. Perpetrators commonly contacted older adults electronically (47%) two or more times (64%). Although most respondents ignored the request (i.e., hung up the phone and deleted text/e-mail), 11.3% sent a requested payment, and 5.3% provided personal information. Predictors of vulnerability included contentment with financial situation, concern about finances in the aftermath of the pandemic, and wishing to talk to someone about financial decisions. Respondents targeted for a non-COVID-19 scam attempt were less likely to be targets of a COVID-19-related scam.

**Discussion and Implications:** Older adults who were financially secure, worried about their financial situation, or wished they could speak with someone about their financial decisions appeared susceptible to falling victim to a fraud attempt. The high number of attempts indicates a need for a measurable and concerted effort to prevent the financial fraud of older adults.

Keywords: Contextual theory of elder abuse, Scams, Social distancing

In the United States, elder financial exploitation is associated with poor mental and physical health as well as increases in hospitalization and mortality (Burnes et al., 2017). A type of elder financial exploitation is financial fraud, which is defined by Hall et al. (2016, p. 35) from the Centers for Disease Control and Prevention as "Deception carried out for the purpose of achieving personal gain while causing injury to another party. An intentional distortion of truth initiated to convince another to part with something of value or to surrender a legal right." A meta-analysis completed by Burnes et al. (2017) found financial fraud to be a common problem affecting approximately one in 18 cognitively intact older adults living in community settings with a 1-year prevalence of 5.4%.

Conditions shaped by coronavirus disease 2019 (COVID-19) created a "perfect storm" for opportunistic financial

fraud directed at older adults. Social distancing, difficulties in accessing medical and social services, unprecedented job losses, increases in retirements, the infusion of stimulus funds into a volatile economy, misinformation surrounding the vaccine, and a heightened sense of fear among some older adults because of the health care dangers provided a veritable playground for fraudulent telemarketers and internet scammers. Reports of COVID-19 scams (e.g., fake cures, services, and charities) appeared in the press soon after the pandemic began and proliferated as it unfolded (e.g., Associated Press, 2020; Jarin, 2021). The Federal Trade Commission (FTC), which bases its numbers upon voluntary reports, found that between January 2020 and June 2022, it received more than 544,243 reports of fraud associated with COVID-19 and reports of fraud and identity theft with a median fraud loss of

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\$425 per person (Federal Trade Commission, 2022). People ages 60–69 experienced the highest dollar losses per person.

The purpose of our study was to embed the financial fraud of older adults within individual and systemic contexts of the Contextual Theory of Elder Abuse (CTEA; Roberto & Teaster, 2017) in order to examine types of perpetration (e.g., scams, fraud, phishing attempts, and identity theft) during the early months of the pandemic. We hypothesized that social distancing and other systemic changes contributed to the vulnerability of older persons to financial fraud. Specifically, we asked: What types of COVID-19-related fraud attempts did older adults experience, and how did they respond (RQ1)? Do demographic and situational variables predict how older adults responded to attempts of COVID-19-related fraud (RQ2)?

# **Understanding the Nature of Financial Fraud**

Most of what is known about the umbrella term "financial exploitation" concerns family members or trusted others known to the older adult. We know far less about financial fraud perpetrated by strangers (Burnes et al., 2017; DeLiema et al., 2017; Steinman et al., 2020). Using a random sample of older adults in Pennsylvania, Beach et al. (2010) found that, among African American respondents, most financial exploitation was actually financial fraud. In addition, Black older adults were disproportionately affected, especially those who lived below the poverty line.

Holtfreter et al. (2014) compared exploitation by family members to fraud across three specific types, finding that 42.9% and 25.7%, respectively, spent the victim's money or sold something without permission; 50% and 30%, respectively, forged the victim's signature; and 29.6% and 39.2%, respectively stole money or took items from the victim.

While no single, reliable predictor of fraud susceptibility exists, DeLiema et al. (2017) found that participants in the National Health and Retirement Study who were younger, mean age 63.2, male, better-educated, and depressed most often reported being victimized. Lichtenberg et al. (2015) also found the same predictors, with higher education emerging as the strongest predictor of fraud. Moreover, a study of scams during COVID-19 by Nolte et al. (2021) suggested that older age might serve as a protective factor against fraud, as did a COVID-19 study by Mueller et al. (2020).

#### **Theoretical Framework**

Acknowledging the unique environmental context—the early phase of the COVID-19 pandemic—our study was guided by the CTEA (Roberto & Teaster, 2017), specifically, the individual and societal contexts of the theory. Building upon Bronfenbrenner's (1986) ecological model of human development and the Centers for Disease Control's (2015) socialecological model for violence prevention, the CTEA includes individual, relational, community, and societal contexts. The individual context, our primary focus, involves biological and personal factors that influence how individuals behave, how risk factors increase the likelihood of becoming a victim or perpetrator, and how factors (e.g., poor health and dementia) affect individuals during and after an abusive situation, especially one that could be hidden within the isolation set in motion by the pandemic. Variables of particular interest in this study include personal characteristics (e.g., age, sex,

gender, and race/ethnicity); education; habilitation (rural or urban geographic area); income; physical health; emotional health; and decision-making capacity. In addition, we emphasized the *societal context*, which considers broad ideological values and norms that create a climate in which abuse is normative or non-normative. Age-related changes in social position and access to financial resources can heighten the risk of late-life abuse. Societal tolerance for abuse within the United States is reflective of ageist attitudes (Roberto & Teaster, 2017). However, the enactment of state laws and penalties demonstrates a shift toward growing societal intolerance for the exploitation of older adults. Widespread government actions that support the welfare of older adults are representative of the societal context of CTEA (Roberto & Teaster, 2017).

#### Method

#### Sample

We invited older adults aged 60 and older enrolled in gerontology research registries at four universities to complete an online survey about their experiences with financial fraud: Florida State University (FSU), University of Pittsburg (PITT), Virginia Tech (VT), and Wayne State University (WSU). Initially, registry participants were recruited from community gatherings of older adults, social media campaigns, and other research studies. Collectively, 6,488 older adults in the registries agreed to be contacted to learn about future research projects at their respective sites (FSU, n = 2,700; PITT, n = 2,300; VT, n = 269; and WSU, n = 460). Members were sent an e-mail invitation to participate in the COVID-19 exploitation study in July 2020. Responses to the survey were pooled for a response rate of 15.4% and a final sample of 998 older adults. While the sample size is adequate, we acknowledge the relatively low response rate. Because data collection occurred during unprecedented historical times, the research group decided to contact the older adults only one time in order to avoid survey anxiety or fatigue anticipated by collecting two more waves of data in 2020. Consequently, while generalizability may be limited, our findings nonetheless shine a light on the issue of the financial fraud of older adults during the pandemic.

Table 1 provides detailed descriptive information about the respondents, who ranged in age from 60 to 98 (M = 71.3; standard deviation [SD] = 6.8). Most identified as White (93.4%), female (64.2%), and living with a spouse/partner (58.1%). In response to questions about their health, most respondents did not perceive any changes in physical health (70.1%) or emotional well-being (60%) in the 2 months prior to completing the survey. When changes occurred, respondents were more likely to report a decline in emotional well-being (32.5%) than their physical health (17.9%). About the same percentage of older adults responded that compared to prior to the start of the COVID-19 outbreak, their current feelings of social isolation and loneliness stayed about the same (41.8%) or increased (54.8%). Only about 1% of the older adults reported having had COVID-19, although about 5.8% reported that someone close to them had the virus.

Most respondents had an annual household income of \$50,000 or more (65.1%). When asked about their finances, 94.8% indicated that they managed their own finances; 88.8% reported having no difficulties in the 2 months prior to the survey handling their bills and banking on their own;

**Table 1.** Demographic Characteristics of Study Participants

Variable	M (SD)	N	%
Age (in years; range = 60–98; <i>n</i> = 968)	71.25 (6.76)		
Race $(n = 970)$			
White		906	93.40
African American		49	5.05
Asian		2	0.21
American Indian		3	0.31
Other		10	1.03
Female ( $n = 971$ )		623	64.16
Living with spouse/partner ( $n = 968$ )		562	58.06
Marital status ( $n = 975$ )			
Married/partnered		558	57.23
Widowed		152	15.59
Separated		16	1.64
Divorced		166	17.03
Never married		83	8.51
Changes in physical health ( $n = 957$ )			
Improve a little or a lot		115	12.02
No different		671	70.11
Gotten a little or a lot worse		171	17.87
Changes in emotional health ( $n = 954$ )			
Improve a little or a lot		72	7.55
No different		572	59.96
Gotten a little or a lot worse			
Loneliness due to COVID-19 directives ( $n = 957$ )		310	32.49
Increased somewhat/greatly		524	54.75
Stayed about the same		400	41.80
Decreased somewhat/greatly		33	3.45
Did you have COVID-19? $(n = 959)$		10	1.04
Did a friend/family member have COVID-19 ( $n = 957$ )		55	5.75
Income ( $n = 927$ )			
Under \$10,000		11	1.19
\$10,000–\$19,999		45	4.85
\$20,000–\$29,999		73	7.87
\$30,000–\$39,999		98	10.57
\$40,000–\$49,999		97	10.46
\$50,000 or more		603	65.05
Manage your own finances ( $n = 973$ )		922	94.76
Difficulty handling your bills ( $n = 914$ )			
None		812	88.84
A little		77	8.42
Some		15	1.64
A lot		10	1.09
Felt comfortable with financial situation ( $n = 963$ )			
Not comfortable		53	5.50
Somewhat comfortable		182	18.90
Comfortable		395	41.02
Very comfortable		333	34.58
Felt anxious about daily financial decisions ( $n = 965$ )		27.4	20 = 1
Never		374	38.76
Rarely		353	36.58
Sometimes		212	21.97
Often		26	2.69

Table 1. Continued

Variable	M(SD)	N	%
Wished you had someone to talk to about your financial decisions ( $n = 960$ )			
Never		389	40.52
Rarely		343	35.73
Sometimes		199	20.73
Often		29	3.02
Attended an educational program ( $n = 918$ )		50	5.45
Anyone engaged you in a non-COVID-19 scam in the past 2 months ( $n = 914$ )		188	20.57

Notes: Missing values were less than 8.5% of the total sample. COVID-19 = coronavirus disease 2019; SD = standard deviation.

and 75.6% indicated that they were comfortable with their financial situation. Most of the older adults reported never (38.8%) or rarely (36.6%) feeling anxious about their day-to-day financial decisions and indicated that they never (40.5%) or rarely (35.7%) wished that they had someone to talk about their financial decisions. Approximately 5% (5.5%) of respondents had attended educational programs or workshops about how to respond to telemarketers or potential scams.

#### **Procedures**

The VT portion of the team managed the survey. Individual registry owners sent a recruitment e-mail message that included a description of the issue under study, the study purpose and participant commitment, and a link to the online survey. When a response to the survey was received, the older person's e-mail address was automatically linked to a random identification number; university partners did not know who from their registries elected to participate in the study.

#### Study Measures

Many of the questions in the survey were similar to the questions we have asked in our previous studies. Because of the time-sensitive nature of the survey, we relied on questions from other surveys, including those of the authors. Colleagues working on the study pilot-tested the survey for completeness, understanding, and workability of skip patterns.

The internet survey consisted primarily of structured, forced-choice single-item questions designed to capture older adults' perceived encounters with attempted financial fraud. Variables identified in the literature associated with the risk of abuse informed the development and inclusion of the individual items, including demographic characteristics (e.g., age, race, and living arrangements; Storey, 2020); social isolation and loneliness (Pillemer et al., 2016); financial confidence and uncertainty (e.g., managing day-to-day finances and making financial decisions; Lichtenberg et al., 2015); attending education/training programs about telemarketing (James et al., 2014), and common responses to scams. Survey items about specific types of exploitation encountered focused on the early phase of the pandemic when most of the United States was under some level of shelter-in-place orders and social distancing directives. The research team identified common financial fraud based on their respective expertise and research programs, notices issued by federal agencies (e.g., Federal Communications Commission; Federal Deposit Insurance Corporation), the American Association of Retired Persons (AARP), and state and local on-line new stories and other social media venues.

Specifically, participants were asked if they were contacted by phone, e-mail, text, or mail or had responded to a website solicitation regarding the following six categories of scams: (a) COVID-19 treatments, cures, and precautionary/sanitary supplies, health insurance; (b) assistance for a specific person need because of COVID-19 such as a request to pay for a friend's or relative's care; relative in trouble and needs money; (c) finances related to COVID-19 such as stimulus checks, employment opportunities, tax relief, and financial assistance: (d) contributions to a local or national charity to help with COVID-19 costs; (e) help available during COVID-19 like grocery pick-up/delivery, Heating, Ventilation, and Air Conditioning services; and (f) other COVID-19 opportunities (asked to describe). A binary score representing any of these COVID-19 scam categories was coded as Yes (1) if an older adult was contacted for any of these six areas of scam and No (0) if a participant reported not being contacted by any COVID-19-related scam areas.

For each "Yes" response to scam categories, participants were asked to provide details about the encounter, including (a) when, how, and how many times they were contacted; (b) who they believed contacted them (e.g., government representative, local agency, and person from outside of the United States); (c) what they were asked to provide (e.g., social security number, bank account number, and credit card information); (d) how they responded (e.g., hung up phone or deleted text/e-mail, exchanged with contact, but did not act, and gave information requested); and (e) who they told (e.g., family member, banker, and police). Participants could choose more than one response option for each item. The most common methods of contact by exploiters were collapsed across scam categories. Similarly, how older adults commonly responded to scam attempts was collapsed across scam categories. For example, if they hung up the phone, deleted the text/email communication, exchanged contact but did not act as requested, responses were coded as ignored scam attempts (0). If they gave information as requested, responses were coded as responded to scam (1).

#### Analyses

Descriptive statistics were used to identify how older adults responded to perceived COVID-19 exploitation attempts (RQ1). Demographic and situational characteristics of older adults who responded to the scam were compared to those who ignored the scam attempts using t-test statistics and a proportions test (prtest) to compare binary variables. Logistic regression was also used to identify demographic and situational predictors (that had an association with a p value less than 0.20) of how older adults responded to scam attempts

(RQ2). In addition, changes in physical and emotional health in the last two months were included as covariates. All analyses were performed using STATA v.16.

#### Results

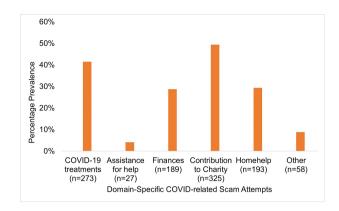
From the beginning of the pandemic until the end of July 2020, approximately two thirds of respondents (n = 658; 66%) reported experiencing a scam attempt related to COVID-19. Among the respondents who reported a COVID-19-related scam, 134 also reported at least one non-COVID-related scam. About one fourth of the respondents (n = 241; 24%) reported not experiencing any scam attempt during the study period.

Fraud related to charity contributions (49%) and those related to COVID-19 treatments or equipment (41.5%) were the most common types (Figure 1). Perpetrators frequently contacted older adults two or more times (64%), with most of the contact via electronic pathways (47%; Figure 2). Most older adults ignored the perpetrators request by hanging up the phone (23%), deleting the text/e-mail (55%), and throwing away the mail (32%). However, 16.5% gave the perpetrator personal information (5.3%) or sent a requested payment (11.3%; Figure 2). Older adults who gave the perpetrators personal information or sent payments were significantly more comfortable with their financial situation (t = -2.79, p < .01); however, they were more likely to wish to have someone to talk about their financial decisions (t = -2.20, p < .05). There were no other differences found between the two groups (Table 2).

The logistic regression model in Table 3 shows the association between demographic characteristics (e.g., age, sex, change in physical and emotional health during the pandemic) and attendance at any financial educational programs on responding to scam attempts, specifically giving money or information. Older adults who were more comfortable with their financial situation were at 84% higher odds of getting scammed and giving personal information or sending requested payments than their counterparts who were less comfortable with their financial situation. Older adults who wished they could talk to someone about their financial decisions were at 61% greater odds of succumbing to a perpetrator's request for personal information or financial information. Similarly, worrying about their financial situation during COVID-19 put all the older adults in our sample at a 51% increased risk of falling victim to financial fraud. Older adults who were contacted for non-COVID-19 financial fraud during the duration of the study period were at 53% lower odds of being a victim of a COVID-related fraud attempt.

#### **Discussion**

The COVID-19 pandemic provided a unique opportunity to examine how a global event influenced financial fraud attempts targeting older adults. Guiding our investigation, the Contextual Theory of Elder Abuse was value-added to our research. Not only does the theory specifically addresses complexities inherent in the problem of elder fraud but also the theory enables and enhances focus and framing of the research methods, findings, and recommendations. To date, most research has involved retrospective accounts, months, or even years after its occurrence. Making use of older adults



**Figure 1.** Percentage of participants who encountered COVID-19-related scam attempts by specific domains. COVID-19 = coronavirus disease 2019

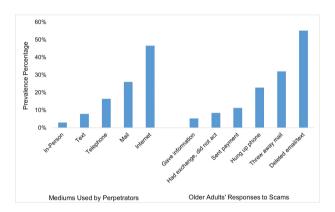


Figure 2. Common mediums used by perpetrators and older adults' response to them.

who agreed to participate in a gerontology research registry, our examination of attempted acts of financial fraud advances an understanding of dynamics at play concerning the financial fraud of older adults during the foothills of the pandemic. Over half of our study sample experienced a COVID-19 fraud attempt.

#### The Individual Context for Financial Fraud

The nearly 1,000 respondents to our survey were predominately young-old, White, female, and living with a spouse/ partner. At the time they completed the survey, about half reported that their physical and emotional health was good. However, for the third of respondents who reported experiencing a change in health during this time, they reported that their health changes accompanied a decline in emotional well-being. Also, slightly more than half reported an increase in feeling socially isolated and lonely. This figure is somewhat higher than a pre-COVID-19 estimate that found that a fourth of community-dwelling older adults were considered socially isolated and 43% reported feeling lonely (Luchetti et al., 2020; Rodney, 2021). Poor mental health status is linked to the abuse risk factors of social isolation and loneliness (Wu, 2020). Prior to the pandemic, loneliness and social isolation were already acknowledged public health issues with links to increased risk of morbidity and mortality (Gerst-Emerson & Jayawardhana, 2015).

Table 2. Comparison of Older Adults Who Ignored and Responded to Exploitation Attempts

Variable	Ignored the scam $(n = 357)$	Responded to the scam $(n = 112)$	t test (t)/prtest (z)	
Age (in years)	70.72	71.21	-0.69	
Sex (reference = female; %)	65.07	67.86	-0.54	
Lives with spouse (%)	58.59	54.05	0.84	
Manages own finances (%)	96.35	93.75	1.19	
Participated in educational program about responding to potential scams (%)	5.76	9.01	-1.20	
Confident in making financial decisions <sup>a</sup>	2.92	2.88	0.95	
Comfortable with one's financial situation <sup>b</sup>	2.92	3.20	-2.79**	
Difficulty handling bills and banking <sup>b</sup>	1.16	1.18	-0.39	
Anxious about your day-to-day financial decisions <sup>b</sup>	2.03	1.89	1.43	
Wished you had someone to talk about financial decisions <sup>b</sup>	1.91	2.11	-2.20*	
Relationship with a family or friend become strained due to finances <sup>b</sup>	1.68	1.57	1.25	
Worry about financial situation since pandemic <sup>a</sup>	1.65	1.71	-0.82	
Lonely/socially isolated since pandemic <sup>c</sup>	0.67	0.75	-1.10	
Physical health changed in last 2 months <sup>d</sup>	-0.10	-0.11	0.13	
Emotional health changed since last 2 months <sup>d</sup>	-0.33	-0.27	-0.84	

Notes: aScale range = 1 (not) to 3 (a lot).

<sup>b</sup>Scale range = 1 (none or never) to 4 (a lot or often).

<sup>d</sup>Improved a lot (2), improve a little (1), no different (0), gotten a little worse (-1), and gotten a lot worse (-2).

\*p < .05; \*\*p < .0.

Table 3. Logistic Regression Predicting Giving Information or Money When Scammed

Variable	OR	Coeff	SE	95% CI	
				LL	UL
Sex (reference = female)	1.12	0.11	0.28	0.68	1.82
Age (in years)	1.00	0.01	0.02	0.97	1.04
Comfortable with one's financial situation	1.84	0.61**	0.30	1.35	2.53
Wished you had someone to talk about financial decisions	1.61	0.48**	0.24	1.20	2.16
Worry about financial situation since pandemic	1.51	0.41*	0.31	1.01	2.25
Physical health changed in last 2 months	0.88	-0.12	0.16	0.63	1.25
Emotional health changed since last 2 months	1.28	0.24	0.24	0.88	1.85
Attended educational program about responding to potential scams	1.47	0.39	0.62	0.64	3.36
Experienced non-COVID-19 scam attempt	0.47	-0.76**	0.14	0.26	0.83
Constant	0.01	-4.67**	0.01	0.00	0.18

Notes: CI = confidence interval; Coeff = coefficient; COVID-19 = coronavirus disease 2019; LL = lower limit; OR = odds ratio; SE = standard error; UL = upper limit.\*p < .05; \*\*p < .01.

About two thirds of respondents reported experiencing attempted financial fraud early in the pandemic when chaos and inconsistent information about COVID-19 were presented via multiple communication mediums and when approaches to treating the disease were ambiguous at best. Respondents indicated that perpetrators encouraged them to contribute to charities, to people in their communities, and to receive COVID-19-related resources. Perpetrators appeared to frame the fraudulent attempts based on what they surmised that the older adults saw on the news or via a streaming service (e.g., loss of work, suggesting that donations could be applied to people unable to pay their rent, people who were food insecure, and people were without basic necessities of daily living). Our findings were similar to the FTC report (October 20, 2021) concerning fraud (e.g., fake cures, services, and charities). Furthermore, few of our respondents

reported experiencing non-COVID-19 fraud attempts. We suggest that the perpetrators of elder financial fraud were quick to take advantage of current events, which implies a heightened need for practice and prevention efforts on local, state, and national levels, especially those efforts that target fraud awareness of older adults on an individual level.

Most participants reported that they were comfortable with their financial situation and that they managed their finances without difficulty. Notable is that these were the same older adults who more likely responded to an overture of financial fraud. While, in this instance, our findings are counter to findings reported by Burnes et al. (2017), we offer at least two explanations. First, Burnes' meta-analysis used studies conducted in typical times, not during a global pandemic when older persons who were more financially well off may have been more lenient in providing personal information or sending requested payments than their counterparts who were less comfortable with their financial situation (and use of the internet). Their actions may demonstrate a greater ability or overconfidence to take a financial risk or make a financial contribution to a cause, characteristics also demonstrated in a number of pre-COVID-19 studies (Bennett et al., 2012; Metlife Mature Market 2009, 2011).

Second, those attempting to defraud older adults likely continued using their previous techniques but added a new and compelling set of methods involving COVID-19, taking advantage of persons who were dependent, more than usual, on informational and communication technologies due to the older adults' containment restrictions (Lee et al., 2021). The social disruption caused by the pandemic may have given perpetrators new opportunities to victimize older adults (Payne, 2020). In 2021, older adults lost \$1.7 billion to "financial exploitation schemes," a nearly \$8 billion increase from 2020 estimates (Kelly, 2022).

The finding that those experiencing a non-COVID-19 fraud attempt were less likely to respond to COVID-19 attempts deserves comment. It suggests that as people are exposed to financial fraud attempts, they may become better at avoiding becoming victims. A small percentage of respondents had attended programs about how to respond to telemarketers or scammers, and while these programmatic mechanisms might be useful in preventing elder financial fraud, our numbers were too small to demonstrate a preventive or protective effect (Pillemer et al., 2016; Warren & Blundell, 2019). With the advent of new tools to assess the financial decision-making of older adults (Conrad et al., 2010; Lichtenberg et al., 2015), opportunities exist for reducing financial fraud among the older adult population.

Related to the earlier, some older adults who wished that they had someone with whom to talk about their financial decisions prior to making them appeared to be at a heightened risk for being exploited. Face-to-face avenues for interaction and intervention that might have existed prior to the pandemic were closed to many older adults, at the time, indefinitely. Known and unknown contours of the pandemic made it highly unlikely that many older adults could visit one another or their family members. Perhaps, as others have shown (Beach et al., 2018), if they had members of their social network with whom they felt comfortable to discuss their finances, they might have discussed a perpetrator's overture and avoided responding to it. Furthermore, respondents could have interpreted the question within the context of their own lives, resulting in differing responses, but regardless, the findings suggest that they did not have someone with whom

to talk, which appeared to heighten their risk of falling prey to a fraudulent attempt.

Our findings show that those with better finances were more susceptible to exploitation and that there was no difference in "worry about financial situation since pandemic" between those responding and not responding to fraud attempts. Many older adults communicated by telephone; those fortunate enough to have the bandwidth and the acumen to use it communicated using internet-dependent platforms. Practicing physical distancing to reduce the spread of the virus further isolated many older adults (Bundy et al., 2021; Heid et al., 2021); the usual community supports of neighborhoods, volunteer sites, and faith communities were significantly altered or shuttered for a time. Even health care visits were reduced during this time of uncertainty, with some closed for weeks until new protocols were put in place. Anxiety over the vacillating circumstances of the spread of the virus, such as when and where new hotspots arose, served to increase older adults' uncertainty and reduce their social contacts.

#### Older Adults and the Societal Context of COVID-19

Our study reflects a particular and peculiar time in the history of the nation and does not reflect individual or societal conditions that prevailed previously. Many older adults were susceptible to the effects of the virus and appeared as a group to be targets for financial fraud due to the social isolation imposed on them, especially early in the pandemic (RQ1). Staying in the home or a long-term care setting may have dampened the ability of older adults to reach out to others to ask for help in pressure situations such as those presented in fraudulent attempts (Le Couteur et al., 2020).

Participants in our study experienced a high number of financial fraud attempts, likely due to opportunities presented during a historical period of intense social disruption (RQ2). Many did not fall victim, although some did. During the early months of the pandemic and the concomitant environmental uncertainties, large-scale social changes (e.g., early market crashes that could have affected retiree resources, pressures of lockdown contributing to job loss, the possible introduction of new fraudsters relying on scams to supplement lost income, reduction in access to social services and supports, and attitudes toward the protection of older adults) that placed older adults at increased risk for financial fraud may have contributed to the propensity of older adults to fall prey to financial fraud.

#### Limitations

Four gerontology research registries served as our study population, which resulted in a study sample who, as a group, were more educated and better off financially than the U.S. population of older adults and so may not be representative of the general population of older adults. The adults could participate online only, hence we failed to reach the 25% of adults aged 65 and older who were not using the internet at the time of the survey (Anderson & Perrin, 2017). In addition, the 15% response rate is relatively low; our use of a single e-mail invitation without follow-ups may have increased chances of nonresponse bias. The COVID-19 pandemic caused a surge in research activity related to older adults while restricting data collection methods, leading to a rise in survey-based studies. Early on in our decision-making, we determined that we should make only one attempt to gather data for each

wave of our survey (this article reflects data collection from the first wave) to avoid survey fatigue, as many investigators were making use of the universities' registries during the early months of the pandemic.

# Recommendations for Future Research, Practice, and Policy

The time during which our study took place involved high levels of fear and uncertainty that set in motion an opening for those who sought to take advantage of newly altered individual and social contexts created by COVID-19 by seeking to attempt the financial fraud of older adults. The perpetrators likely capitalized on the heightened vulnerabilities of many older adults (e.g., social, financial, mental, and physical; Cross, 2020). Future research, both theoretical and applied, is needed to advance an understanding of the individual characteristics and pathways of older adults who do and do not become entangled in fraudulent attempts by perpetrators.

A number of older adults in our study wished that they had someone with whom to talk to discuss financial decisions prior to making what could be a disastrous decision related to a COVID-19 scam. Their desire for discussion suggests that an opportunity exists for health care, social service providers, and other professionals to locate supports for those wishing to discuss a decision regarding their finances. One possibility might be to connect older adults to a rapid-response support network that would allow them to discuss a possible fraud attempt so that they do not imperil their finances, themselves, or both. Also, because so many of the fraudulent attempts were made via the internet, it is important to put in place assistance with internet technology, a technology to which many older adults do not have access at present, assistance that is easily accessible for individual older adults. In addition, prevention and intervention programs and practices at both local and national levels are needed to draw attention to the financial fraud of older adults. At the societal level, policies should help protect older adults from financial fraud that include efforts to combat ageism, including those that dispel a societal misconception held by many that older adults do not use/know how to use the internet, as well as laws that hold perpetrators accountable. On a local level, a solution such as BankSafe (AARP BankSafe, n.d.) should be more widely utilized. Until then, older adults, their family members, and their communities should maintain a high index of suspicion when receiving messages from anyone whom they do not know, especially if pressured to make a quick decision or action that is out of the ordinary or appears implausible.

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#### **Conflict of Interest**

None declared.

### **Data Availability**

Data and materials are not available as the authors have not completed their original work with the data set.

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