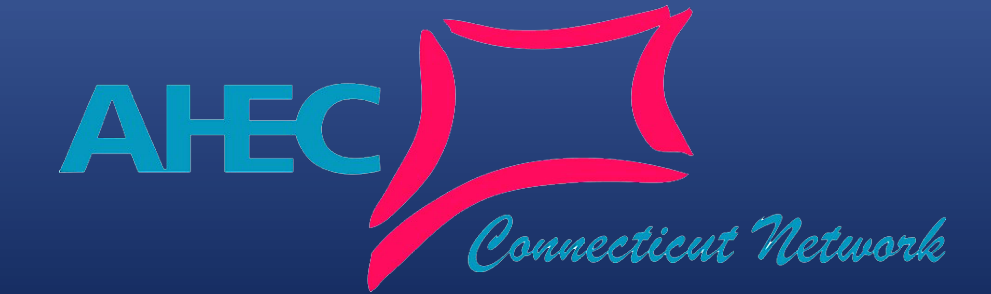




Developing Financial Harm Reduction for Older Adults through Interprofessional Student Collaboration



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Background

Older adults face disproportionate risk of financial exploitation, medication-related scams, and fraudulent health practices. Age-related cognitive changes, social isolation, chronic disease burden, and increasing digital exposure contribute to vulnerability. Financial exploitation is one of the most common forms of elder abuse and is frequently underreported.

In response, the Geriatrics Interest Group developed a student-led, interprofessional harm-reduction initiative aimed at increasing awareness of common scams and empowering older adults with practical prevention strategies. This project aligns with our goal to reduce financial harm among older adults at senior centers.

Through educational presentations and distribution of a pocket guide featuring conversational red flags, screening questions, and safety resources, we aim to strengthen patient advocacy, improve trainee communication skills, and foster sustainable community partnerships.

Objectives

- Increase awareness of financial exploitation, medication-related scams, and fraudulent health practices
- Enhance communication and trust between healthcare trainees and older adults
- Provide accessible educational resources for community awareness campaigns
- Strengthen community partnerships with senior centers

Methods

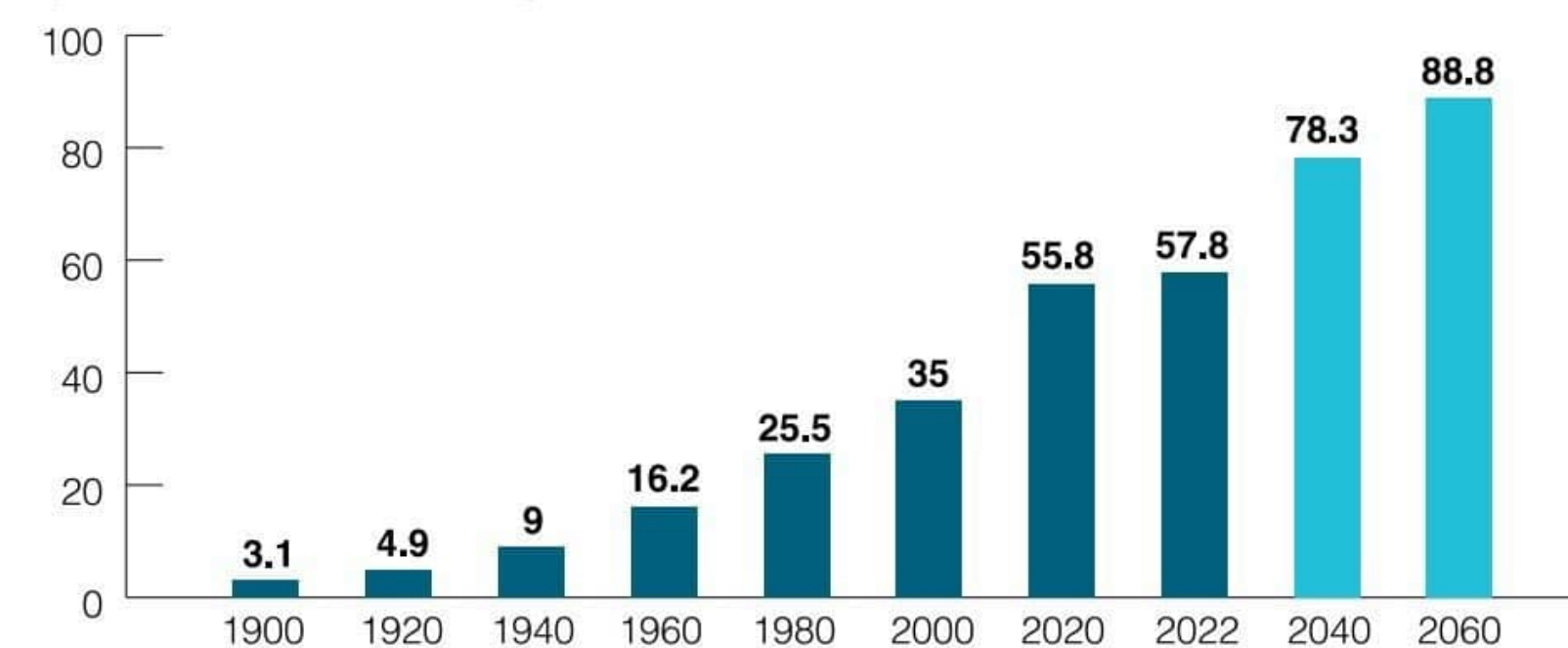
- Obtain subject matter expert presentation
- Identify and consolidate verified resources into an organized and manageable format
- Provide accessible educational resources, including pocket guides designed to reinforce harm-reduction strategies
- Engage with community members and present financial harm reduction presentation at senior community center

Results

- **Pocket guides created and distributed to trainees and clinicians**, providing practical screening questions, conversational red flags, and concise strategies to identify and address potential financial exploitation in older adults at the point of care.
- **Educational presentation delivered by a community partner**, including a guest lecture by Robert E. Roush, EdD, MPH, focused on preventing elder investment fraud and assessing vulnerability to financial exploitation, with emphasis on real-world application and patient communication.
- **Centralized QR code resource hub developed**, compiling evidence-based tools and community resources identified through literature review and collaboration with clinical and community partners, enabling quick, real-time access for both trainees and older adult participants.
- **Interactive presentation delivered to older adults at a senior community center**, focused on increasing awareness of common scams, recognizing warning signs of financial exploitation, and providing practical, easy-to-apply strategies to protect financial independence and safety.

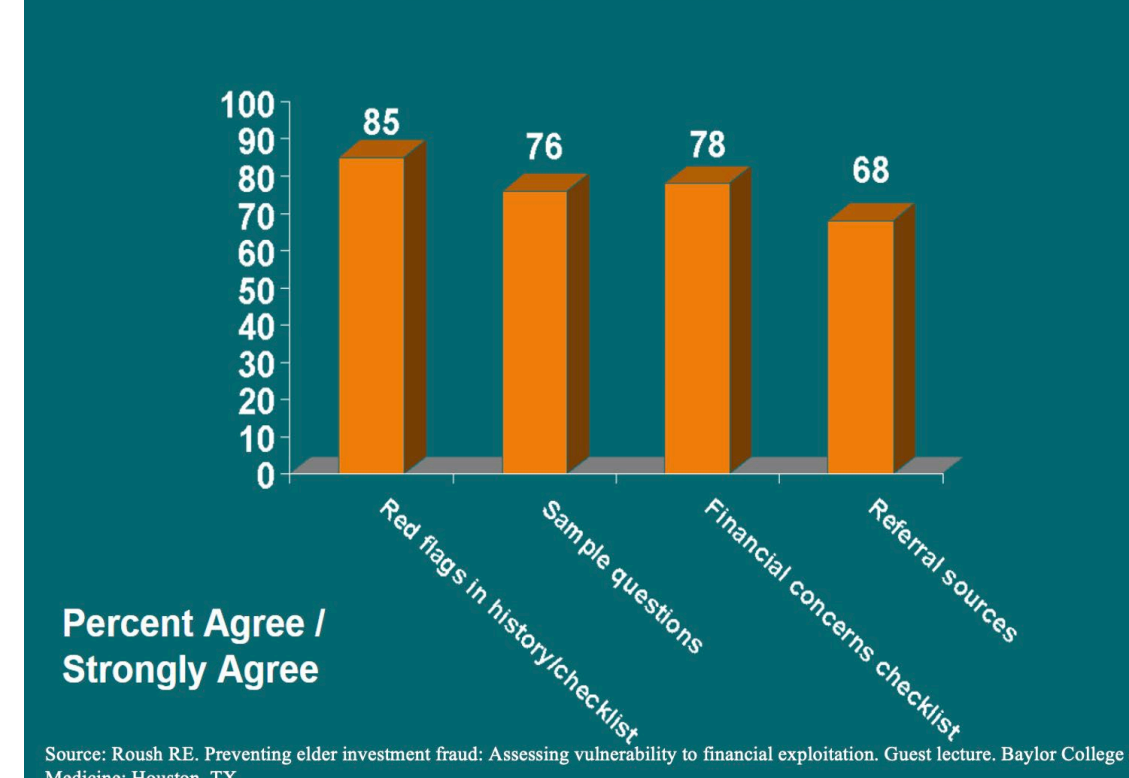
Need for an intervention

Number of Persons Age 65 and Older, 1900 - 2060 (numbers in millions)



Note: 2040 and 2060 are projections
Source: U.S. Census Bureau, 2020 Decennial Census, Population Estimates and Projections

Clinician Guide Usefulness



Source: Roush RE. Preventing elder investment fraud: Assessing vulnerability to financial exploitation. Guest lecture. Baylor College of Medicine, Houston, TX.

Pocket Guide

Conversational Red Flags

Warning Signs of Scam Risk in Older Adults

(Screen further using questions on back side)

- Urgent Money Requests:** Mentions needing to send money "right away."
- Secrecy or Isolation:** Says they were told to keep it secret or not tell family.
- "Safe" Accounts:** Describes moving money to a "safe" or "protected" account.
- Unusual Payments:** Reports buying gift cards, wiring money, or sending cryptocurrency.
- Impersonation Calls:** Says a caller sounded just like a family member (AI voice scam).
- Fake Officials:** Mentions being contacted by someone claiming to be from their bank.
- Verification Code Requests:** Says they were asked to provide a code sent to their phone.
- Online Romance Scams:** Talks about a new relationship that now involves money.
- Legal & Financial Changes:** Mentions altering power of attorney, will, or joint accounts.
- Avoiding Financial Discussions:** Expresses reluctance to discuss finances openly.

Questions to Ask:

Screening Guide for Possible Scam Victimization of Older Adults

- How comfortable do you feel managing your bills or accounts right now?
- Has anyone contacted you about a "problem" with your bank, Medicare, or insurance?
- Has anyone new offered to help you invest, donate, or move your money?
- Who do you usually talk to before making large financial decisions?
- Have you received calls that sounded like a family member or authority asking for money urgently?

Resources



Discussion

Having an interprofessional team for the project has strengthened the content as well as improved communication between the team and older adults. Students from different healthcare disciplines contribute unique perspectives to the project.

This project also has a few limitations. The intervention was conducted with a relatively small and localized population from specific senior centers, which limits the generalizability of the findings. Additionally, outcomes are to be measured by self-report confidence rather than objective measurements, such as behavioral change or reduction in the number of scam victims. It's also hard to determine if the participants will retain the information to apply the strategies in a real-world situation.

Our future focus is on expanding the program to a larger and more diverse population of the elderly. Adding a follow-up assessment to help with evaluating long-term knowledge. Additionally, including caregivers and family members in conversations may further strengthen the intervention as well as provide support for the older adults at risk.

Conclusion

This project provided students with an opportunity to address financial exploitation and medication-related scams in older adults through an interprofessional, student-led approach. Through direct engagement and the use of practical educational tools such as pocket guides, participants improved their ability to recognize risk factors, communicate effectively with vulnerable populations, and promote patient safety. This experience highlights the value of interprofessional, community-based education in enhancing advocacy, strengthening partnerships, and reducing harm in aging populations.

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