

WHITE PAPER

Before the Move

The missing middle of aging infrastructure

Published by HomeShare Oregon · homeshareoregon.org

About this paper

This paper asks a question we do not believe the field has yet articulated. We publish it as practitioners with an observation, not as researchers with findings, in the hope that better-resourced minds will take the question further. Nothing in it proposes a program. Nothing in it should be read as a solution.

The move has a name on it. The story does not.

A senior move usually arrives with a single name on it. A fall. A spouse's death. A property tax bill that finally outruns a fixed income. A phone call from a worried daughter. Whichever one tips the decision is the one that gets remembered, recorded, and cited. The story that gets told is the story of the day the move happened.

But what if that is not actually the story?

The more interesting question, the one this paper exists to ask, is what was happening in the five or ten years before. The years in which two or three forces were already pressing. The years in which the move was being made gradually, before anyone had a name for what was happening. The day the move arrived may have been the visible step at the end of a much longer process no one was tracking.

What if the most important housing transition begins years before anyone calls it a transition?

Why this question matters

If a pre-transition window of compounding vulnerability exists for older adults, three things follow that the field may not yet be acting on.

- **We may be measuring housing transitions too late.** Most data on senior moves captures the move itself. The intervention point may be years earlier, in a phase we do not currently know how to measure.
- **We may be investing in crisis response instead of prevention.** Shelter beds, assisted living, and skilled nursing sit downstream of the window. The most cost-effective interventions may sit upstream and currently uncategorized.
- **We may be missing the smallest, cheapest opportunities to help older adults stay stable.** Property-tax deferral, home modification, caregiver coordination, and shared living arrangements may matter more than their size suggests, because they intercept the cascade earlier.

These are claims worth testing. None of them is currently being tested as a category.

Catalysts we study one at a time

Five drivers recur across the research on why older adults leave their homes: affordability, health, lifestyle, family or caregiver pressure, and isolation. Each has a strong literature. AARP's 2024 Home and Community Preferences Survey found affordability dominating expected reasons for relocation among adults age fifty and older. The Joint Center for Housing Studies reported cost burden among Americans age sixty-five and older rising from 24.2 percent in 2019 to 27.6 percent in 2023. A 2024 study in Housing Studies found widows significantly more likely than widowers to move within the years following a partner's death. The U.S. Surgeon General has called loneliness a public health risk on par with smoking.

Each of these findings sits in a different field. Housing economists study affordability. Geriatricians study health. Family-systems researchers study caregiver dynamics. Public health studies isolation. The result is strong data on each force separately and very little on how they compound.

Compounding may be the part that matters. A health event may accelerate an affordability problem that was already building. A spouse's death may expose an isolation that was already present and remove the income that was already inadequate. The day a single force tips the decision, two or three others have usually been pressing for years. But the stack is what we are not yet measuring.

What if we have been studying the wrong moment?

The missing middle of aging infrastructure

Aging services has a continuum that is well understood within it: aging in place, independent senior living, assisted living, memory care, skilled nursing. Each step has a payer model, a regulatory framework, a research literature, and a category of professional attention.

The years before the first move have none of these.

This may be the missing middle of aging infrastructure. Missing as a category of attention, because no system is designed to see a senior who is still independent and still housed but accumulating catalysts. Missing as a category of intervention, because the relevant supports already exist in pieces, spread across housing, aging, public health, caregiving, and community systems, and have rarely been studied as one space.

The most visible downstream signal of failing to see the missing middle is senior homelessness. The population age fifty-five and older has been the fastest-growing age cohort in the homeless population in the United States for more than a decade. In Oregon, OPB reported that approximately one in four people experiencing homelessness in 2024 was over the age of fifty-five. These numbers do not look like sudden bad choices. They look like five-to-ten-year cascades that were not caught.

But homelessness is the dramatic case. Most failures of the missing middle are quieter and almost never counted. A premature move into a daughter's basement. An isolating move into a senior apartment two hundred miles from a long-time community. A panicked sale at a discount under family pressure. A fall and recovery that becomes a one-way transition when it could have been a two-way one. These do not show up in any system's tally. They may show up in lower well-being, faster health decline, higher Medicaid claims later, and a quiet sadness families learn to live with.

Does the pattern travel?

The longer we sit with this observation, the less certain we are that it is unique to aging. The shape recurs elsewhere. In homelessness, eviction prevention is one of the few interventions with consistent returns and remains a fraction of homelessness spending. In chronic disease, the years before diagnosis carry interventions rarely funded at the scale of treatment. In family caregiving, burnout is treated in crisis, not in the years it has been building. In youth mental health, the gap between the first signal and the first contact with care can stretch for years.

We are not experts in any of those fields. But we suspect we are not the only practitioners seeing systems built around the visible event rather than the compounding state that produced it.

Are we looking at a pattern, across many systems, of categories built

around crisis rather than compounding vulnerability?

Questions worth asking

This paper does not propose a program. It proposes a window, a category, and three questions.

For researchers. What might we learn if we studied the five catalysts as one interacting system across the years before a housing transition, rather than as separate variables at the moment of one?

For funders, public agencies, and policymakers. What if the most cost-effective interventions for older adults are the ones that look smallest? What is the cost of failing to study them as a single category of upstream investment?

For communities and families. What would change if we named what we are seeing in the years before the move, while we are seeing it?

A closing image

A seventy-one year old in a four-bedroom house, mail open on the table, the math no longer working. Five years from now, somebody will be telling the story of how she ended up in a one-bedroom apartment near her daughter, or in an assisted living facility a state away, or briefly in a shelter, or in a house she was finally able to share. The story they tell will have a single name on it. The truer story will be the one we are too rarely watching.

What is happening in her life that we are not noticing?

Appendix

A short reference set for the frameworks and sources cited in the body.

A. The five catalysts

The drivers most consistently identified across the research as precipitating older-adult housing transitions. Presented here as forces that may compound rather than operate independently.

Catalyst	How it shows up in a life
Affordability	Fixed income against rising property taxes, utilities, insurance, and maintenance. Often the longest-running of the five.
Health	A fall, a diagnosis, mobility loss, or the slow accumulation of conditions that make a familiar home harder to manage.
Lifestyle	Desire for warmer climate, proximity to family, a smaller home, or a change of pace. The most often voluntarily chosen of the five.
Family or caregiver pressure	Adult children or other family members urging a move out of concern. Usually responds to changes the senior has been managing alone.
Isolation	Loss of a spouse, friends moving away, fewer reasons to leave the house, fewer people in it. The hardest of the five to see from outside.

B. The continuum, and where the missing middle might sit

The aging-services continuum below is well understood within the field. The missing middle described in this paper would sit between the first and second categories.

Category	What it is
Aging in place, full stability	Senior lives independently in their own home, all catalysts at low intensity. The starting state.
The missing middle (proposed)	Senior remains housed and independent, but two or more catalysts are accumulating. Possibly five to ten years long. Currently uncategorized.
Independent senior living	Age-restricted apartment or community without medical services. The first formal step.
Assisted living	Residential care with help for daily activities.
Memory care	Specialized residential care for cognitive impairment.
Skilled nursing	Twenty-four hour medical care.

C. What this paper offers and does not claim

What this paper offers

- A hypothesis that a pre-transition window of roughly five to ten years exists for many older Americans who experience a forced housing move.
- An observation that the five recurring catalysts are well documented individually and rarely studied as a compounding system.
- A frame, the missing middle of aging infrastructure, for the years that lie between full housing stability and the first formal step of the senior-services continuum.
- An open question about whether the same pattern recurs across other fields organized around crisis rather than compounding state.

What this paper does not claim

- That any single intervention, including home sharing, is the answer for the population described.
- That all forced senior moves are preventable. Many are appropriate, necessary, and chosen.
- That the catalyst weights or window duration are empirically validated figures. They are directional.
- That the pattern observed in aging applies cleanly to the other fields mentioned. That is a question for those fields.

D. Open questions for the field

A starter list of questions worth studying. Offered not as the right ones, but as the ones we have found ourselves unable to answer alone.

- How long is the typical pre-transition window, and how does its length vary by income, geography, household composition, and health trajectory?
- Which combinations of the five catalysts most reliably precede a forced move, and at what intensities?
- What proportion of older adults entering homelessness pass through a window that would have been visible to a coordinated screening process?
- Which upstream interventions in the missing-middle design space have the strongest evidence at small scale, and what would it take to study them together?
- Is the missing-middle pattern observable in other fields (eviction prevention, chronic disease, caregiver burnout, youth mental health, financial instability), and are the design implications transferable?

E. Sources and further reading

Cited in this paper

- AARP, 2024 Home and Community Preferences Survey (December 2024).
- Joint Center for Housing Studies, The State of the Nation's Housing 2025.
- Joint Center for Housing Studies, Housing America's Older Adults 2023.
- Joint Center for Housing Studies, The Dual Burden of Housing and Care for Older Adults.
- U.S. Surgeon General, Our Epidemic of Loneliness and Isolation (2023).
- National Academies of Sciences, Engineering, and Medicine, Social Isolation and Loneliness in Older Adults (2020).
- Cognitive Function and Ageing Study, Relocation at Older Age.
- Health and Retirement Study, Health Trajectories Among Older Movers.
- Housing Studies (Tandfonline 2024), Home after widowhood.
- Oregon Public Broadcasting, In Aging Oregon, Older and Vulnerable Adults Struggle to Get By (September 2025).
- Oregon Housing and Community Services, Older Adult Housing analyses (2025).

Adjacent fields the missing middle draws from

- Naturally Occurring Retirement Communities (NORC) research and practice.
- Accessory dwelling unit and shared-housing policy literature.
- Property-tax deferral programs at the state level.
- Caregiver support and family-caregiving research.
- Home modification and universal design literature.
- Eviction prevention and homelessness prevention design.

About HomeShare Oregon

HomeShare Oregon publishes this paper as students of aging, housing, and community infrastructure. We operate one of many possible interventions in the missing middle. We believe the most useful contribution we can make to the larger field is to add a frame and a research agenda, rather than to argue for our particular role within it. If you are working on related questions, we would like to hear from you.

executivedirector@homeshareoregon.org · homeshareoregon.org