

# COUNTY OF SANTA BARBARA CALIFORNIA

## RESOLUTION HONORING COAST CAREGIVER RESOURCE CENTER ON THEIR 25<sup>TH</sup> ANNIVERSARY OF SERVING FAMILY CAREGIVERS OF DEPENDENT ADULTS

WHEREAS, Family and other unpaid caregivers provide most of the long term care for dependent adults in the United States of America; and

WHEREAS, there are over 240,000 family and friend caregivers in the tri county area served by Coast Caregiver Resource Center (CCRC). Caregivers in our local area provide nearly 2 million dollars in unpaid care, often at great economic, physical and emotional cost to themselves; and

WHEREAS, caregiving, while rewarding, is also stressful and demanding and impacts both the physical and mental health of the caregiver; and

WHEREAS, a grassroots effort in 1976 indentified the need for services to caregiving families. A statewide system of caregiver resource centers was established between 1984 and 1989 through the California Department of Mental Health to provide assessment of caregiver need and deliver relevant support; and

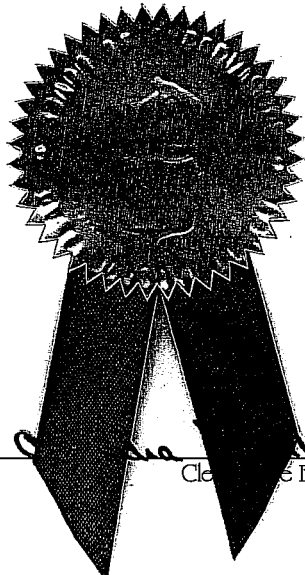
WHEREAS, Coast Caregiver Resource Center (CCRC) was established in 1987 by Rehabilitation Institute at Santa Barbara to serve Santa Barbara, San Luis Obispo and Ventura counties and continues to provide service as a program of Cottage Rehabilitation Hospital ; and

WHEREAS, CCRC has provided specialized information, education and training, support groups, respite care, counseling, family consultation and emotional support to over 10,000 family and professional caregivers since it's inception; and

WHEREAS, without CCRC support and guidance many families would be unable to continue providing care for their loved ones at home.

NOW, THEREFORE, BE IT RESOLVED that this Board of Supervisors honors Coast Caregiver Resource Center for its dedication to serving unpaid caregivers in Santa Barbara County for the past 25 years.

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Barbara, State of California, this 10<sup>th</sup> day of April 2012 by a unanimous vote of all members present.



ATTEST:

*[Signature]*  
Clerk of the Board

*[Signature]*

Supervisor - 1st District

*[Signature]*

Supervisor - 2nd District

*[Signature]*

Supervisor - 3rd District

*[Signature]*

Supervisor - 4th District

*[Signature]*

Supervisor - 5th District