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**Sent:** Thursday, March 26, 2026 8:20 AM

**To:** BHSOAC Public Comment <[publiccomment@bhsoac.ca.gov](mailto:publiccomment@bhsoac.ca.gov)>

**Subject:** Public Comment - CBH Meeting 3/26/2026 (BHSA)

Dear Commission for Behavioral Health,

I write to you on behalf of the 490,000 family caregivers in San Diego County and the over 7 million family caregivers in the state of California to request that the mental health needs of adult and older adult unpaid family caregivers be included as a priority population under the BHSA on a local and state level.

We understand that under the new Behavioral Health Services Act (BHSA) eligibility requirements, forthcoming programs must serve priority populations as outlined in the BHSA policy language. However, the plans on a local county level (specifically in San Diego County), and on a state level, primarily reflect youth populations and support for programs for older adults is lean at best.

We know that caregivers frequently experience significant impairment and distress due to the demands of sustained caregiving, including moderate to severe depression, adjustment disorders, and generalized anxiety disorder. These conditions are recognized as mental health disorders under W&I Code § 14184.402(c) and are identified in DHCS guidance [13]. Yet adult and older adult family caregivers are not recognized as “specialty mental health criteria” by the County of San Diego BHS (not included in the Integrated Plan), nor by the California Department of Public Health (CDPH) Population-Based Prevention Program which were recently published. Family caregivers not only suffer from significant impairments but also experience a negative impact leading to isolation and depression as well as a negative bearing on their occupational duties such as employment.

FY24-25 California Caregiver Resource Center (CRC) data underscores the severity and prevalence of caregiver mental health challenges:

- **1 in 4 dementia caregivers have contemplated suicide more than once in the past year**
- **73%** of families assist with more than 10 care-related activities
- **83%** perform medical or nursing tasks in the home

- **73%** provide over 40 hours of unpaid care per week
- **62%** experience high caregiver strain
- **32%** report a decline in their own health in the past six months
- **20%** experience clinically significant loneliness and isolation
- **17%** report moderate to severe depressive symptoms

Our request is simple:

1. Include adult and older adult family caregivers who suffer from or are at great risk of distress (like moderate to severe depression, adjustment disorders, or generalized anxiety disorders) (*W&I Code section 14184.402, subdivision (c) and implemented in DHCS guidance [13]*), as a priority population in the Counties Integrated Plan (IP) and in the CDPH's Population-Based Prevention Program.
2. Restore funding for Southern Caregiver Resource Center's Caregiver Support Services program (contract 568046) as an Early Intervention program under the new County IP for Behavior Health Support Services (BHSS). The EI psychoeducational program has been eliminated in the County of San Diego.
3. Direct the DHCS, CDPH and Counties across the state keep their commitment to Age & Dementia Friendly Communities by incorporating evidence-based and community-defined programs designed to keep unpaid family caregivers, especially for Alzheimer's Disease and Related Disorders, as a priority.

Sincerely,

***Roberto Velasquez***

**President & CEO**



**Southern Caregiver Resource Center**  
*Caring for those who care for others*

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*Established in 1987 as a non-profit 501c3, Southern Caregiver Resource Center is the leading provider of caregiver support services for San Diego County, serving over 100,000 clients annually with a wide variety of support services that include education, case management, counseling, respite care and support groups. **Tax ID 33-0402867***

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