



**Southern Caregiver Resource Center**  
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**Project Description: REACH-OUT**

**Evidence-Based Solution & Project Description:** Southern Caregiver Resource Center will adapt REACH-OUT (a translation of the REACH II intervention - Resources for Enhancing Alzheimer's Caregiver Health, developed by Dr. Lou Burgio at the University of Michigan). SCRC will utilize an interagency community-based service delivery system (AKA Dementia Care Network). The intervention includes a caregiver assessment, 4 in-home psycho-educational workshops, and 3 telephone support follow-up contacts. As a result of this translational effort, REACH-OUT program materials will be culturally adapted and translated into Spanish. Dr. Dolores Gallagher-Thompson, one of the developers of the REACH II intervention, will provide technical assistance and staff training for the program and Drs. Mario Garrett and Ramon (Ray) Valle of the Department of Gerontology at San Diego State University will oversee the project's evaluation.

**Community Based Organization:** Southern Caregiver Resource Center is a private, independent non-profit organization that helps families and caregivers by providing services that are inclusive of all issues related to caring for adults with chronic and/or disabling conditions. SCRC is funded by grants from the California State Department of Mental Health, San Diego County's Aging and Independence Services, private foundations and donations from individuals and corporations. The mission of SCRC is to help families and communities master the challenges of caring for adults through cost-effective and prevention-oriented programs and services that address the emotional, physical and financial needs of family caregivers.

**Target Population:** The project will be implemented to serve Hispanic caregivers of Alzheimer's disease patients in San Diego, California. Approximately 20 – 30 families will receive the REACH-OUT intervention in the first year of the project. Year one outcomes will primarily focus on issues of implementation and ensuring fidelity. This will include translating all of the protocol forms and materials used in the original model, training staff, establishing a process for regular and ongoing supervision and monitoring. Expected outcomes for the caregivers participating in the project are improvements in quality of life and fewer depressive symptoms.