

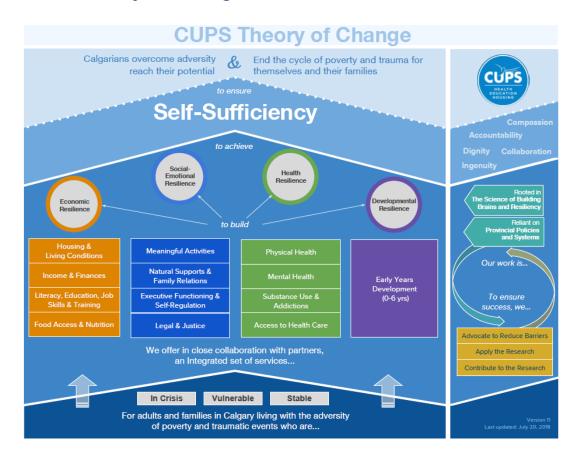
FISCAL YEAR 2019: APRIL 1, 2018 -MARCH 31, 2019

# **EXECUTIVE SUMMARY**

# **CUPS Evolving Work**

At CUPS, we are innovators and trailblazers in our sector. Over the past 30 years we have moved from a traditional charity model a science-based organization that is defining a new approach to the social challenges of poverty and trauma. CUPS programs and services support healthy brain development to improve lives for generations to come. As demonstrated in our Theory of Change, we focus on building resilience and creating lasting change, which requires an integrated approach. To help us understand the large, complex picture of an individual's health, we use a tool called the Resiliency Matrix and aim to build resilience in four domains; Economic, Social-Emotional, Health, and Developmental.

# **CUPS Theory of Change**



### **CUPS** Resilience Domains



### The Issues

#### Health Domain

Research on Adverse Childhood Experiences (ACEs) demonstrates that having 4 or more ACEs places an individual at a higher risk of negative health outcomes later in life such as:<sup>ii</sup>

 Heart disease, diabetes, cancer, heavy drinking, HIV, anxiety, overall poor mental health, early death, and more.

When compared with individuals who have an ACE score of zero, individuals who have four or more ACES are 3.9 times more likely to have chronic bronchitis or emphysema. Individuals are 2.4 times more likely to have a stroke, 2.3 times more likely to have hepatitis or jaundice, 2.2 times more likely to have fair or poor self-rated heath, 2.2 times more likely to have ischemic heart disease, 1.9 times more likely to have cancer, and 1.6 times more likely to have diabetes. Further, individuals with an ACE score of four or more are 3.6 times more likely to have depression, 2.7 times more likely to have hallucinations, 2.5 times more likely to have panic reactions, and 2.4 times more likely to have anxiety. All individuals who experience trauma are at risk of experiencing negative health outcomes. However, in order to meet the unique needs of women and children, CUPS provides Family Health Services that include antenatal/prenatal care, pregnancy care, and children's check-ups, as well as the Primary Care Clinic.

#### Social-Emotional Domain

Brain science research demonstrates that prolonged toxic stress results in:

- Social, emotional, and cognitive impairments
- A lack of core life skills such as executive functioning & emotional regulation

<sup>&</sup>lt;sup>1</sup> Felitti, V.J., Anda, R.F., Nordenberg, D., Williamson, D.F., Spitz, A.M., Edwards, V., Koss, M.P., & Marks, J. S. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. American Journal of Preventive Medicine, 14 (4), 245 – 258.

<sup>&</sup>lt;sup>ii</sup> Anda, R.F., Felitti, V.J., Bremner, V.J., Walker, J.D., Whitfield, C., Perry, B.D., Dube, S.R., & Giles, W.H. (2006). The enduring effects of abuse and related adverse experiences in childhood: A convergence of evidence from neurobiology and epidemiology. *Eur Arch Psychiatry Clin Neurosci*, 256 (3), 174-186.

<sup>&</sup>lt;sup>III</sup> Center on the Developing Child at Harvard University (2016). Building Core Capabilities for Life: The Science Behind the Skills Adults Need to Succeed in Parenting and in the Workplace. http://www.developingchild.harvard.edu.

Individuals who have four or more ACES are 5.6 times more likely to have a behavioural, emotional, or developmental problem. Further, individuals with four or more ACES are 3.1 times more likely to experience emotional distress and 2.3 times more likely to have relationship problems. While social-emotional challenges present differently across different ages, all individuals with trauma histories may experience diminished executive functioning and emotional regulation. However, it is important to provide parents with social-emotional support to encourage healthy parenting skills. Further, for those experiencing social isolation, providing community development support will strengthen their support networks and improve long-term outcomes. CUPS' Social and Emotional Supports provide parenting and community development programming to facilitate and support healthy relationships.

#### **Economic Domain**

A review of existing literature suggests that an individual's economic status as an adult is negatively impacted by exposure to adverse childhood experiences. Vi Vii Individuals who have four or more ACES are 2.3 times more likely to be unemployed and 1.6 times more likely to live in a household in poverty than individuals with an ACE score of zero. Vii Singles, couples and families can experience poverty that is compounded by trauma in many forms including housing insecurity, the inability to pay rent, and homelessness. In order to combat economic challenges, CUPS' Economic Supports provide support and stability to individuals requiring assistance.

### **Developmental Domain**

A child's cognitive outcomes can be negatively impacted by exposure to early life stress and trauma. Research has demonstrated that children who have three or more ACES are 3.5 times more likely to have attention problems, 2.7 times more likely to have social problems, 2.3 times more likely to exhibit aggressive behavior, and 1.8 times more likely to have below average literacy and language skills than children with an ACE score of zero. Developmental disabilities are challenging for children and their parents. Through providing developmental supports to children and their families, strong support networks can be established and resiliency in young children can be increased. Children with developmental disabilities are provided with wraparound supports as they prepare for grade school.

### **Poverty**

There is a strong cyclical relationship between poverty and trauma<sup>x</sup>

<sup>&</sup>lt;sup>IV</sup> Halfon, N., Larson, K., Son, J., Lu, M., & Bethel., C. (2017). Income inequality and the differential effect of adverse childhood experiences in US children. Academic Pediatrics, 17, S70-S78.

<sup>&</sup>lt;sup>v</sup> Anda, R.F., Fleisher, V.I., Felitti, V.J. Edwards, V.J., Whitfield, C.L., Dube, S.R., & Williamson, D.F. (2004). Childhood abuse, household dysfunction, and indicators of impaired adult worker performance. The Permanente Journal, 8 (1), 30-38.

vi Currie, J.C. & Widom, C.S. (2010). Long-term consequences of child abuse and neglect on adult economic well-being. *Child Maltreatment*, 15 (2), 111-120.

vii Metzler, M., Merrick, M.T., Klevens, J., Ports, K.A., Ford, D.C. (2017). Adverse childhood experiences and life opportunities: Shifting the narrative. *Children and Youth Services Review*, 72, 141-149.

viii Pechtel, P. & Pizzagalli, D.A. (2011). Effects of early life stress on cognitive and affective function: An integrated review of human literature. Psychopharmacology (Berl), 214 (1), 55-70.

ix Jimenez, M.E., Wade Jr., R., Lin, Y., Morrow, L.M., & Reichman, N.E. (2016). Adverse experiences in early childhood and kindergarten outcomes. Pediatrics, 137 (2).

<sup>&</sup>lt;sup>x</sup> Center on the Developing Child at Harvard University (2016). Building Core Capabilities for Life: The Science Behind the Skills Adults Need to Succeed in Parenting and in the Workplace. http://www.developingchild.harvard.edu.

- Poverty, in and of itself, is traumatic due to high levels of stress and having to choose between basic needs on a regular basis
- Approximately 69% of CUPS clients have an ACE score of 4+ (compared to approximately 12.5% of the general population with an ACE score of 4+)
- As a result, individuals living in poverty have most likely experience high levels of trauma that have negatively impacted their development

The societal impacts of poverty and trauma are costly to maintain:

- 402,000 individuals (approximately 120,000 children) live in poverty in Alberta<sup>xi</sup>
- Poverty costs Albertans between \$7.1 and \$9.5 billion every yearxii
- Estimates place the average lifetime cost of child maltreatment in the United States at approximately \$210,000 USD and \$1,272,900 USD per death

# Themes in this report

Telling Our Story Through Data. This section provides an overview of the demand for CUPS Programs and Services using client counts.

Measuring Trauma. This section shows how we measure and understand trauma with clients at CUPS using the Adverse Childhood Experiences Survey.

**Building Resilience.** This section uses the preliminary results from the CUPS Resiliency Matrix to understand how we build resilience with our clients.

Research and Policy Advocacy. This section demonstrates how we connect research, policy, and practice to influence systems-level change.

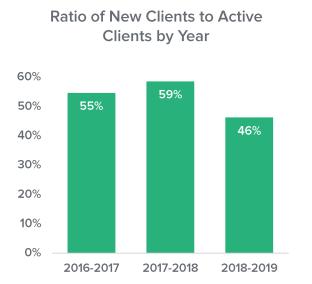
Resilience Domain Snapshots. This section highlights the impact of our programs and services through evidenced-based practice using outputs and outcomes data.

xi Using the Market Basket Measure: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016147.

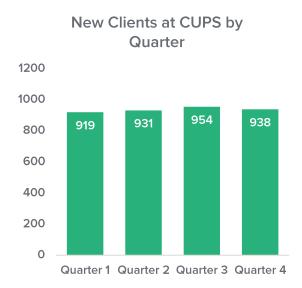
xii Poverty Costs 2.5: Investing in Albertans, (Vibrant Communities Calgary and Action to End Poverty in Alberta, 2014).

# **TELLING OUR STORY THROUGH DATA**

There were **8,084** active clients at CUPS this year. Active clients are individuals who are actively engaged in one or more programs and/or services. These clients carry over between quarters and years when they continue to access programs and/or services at CUPS over time.

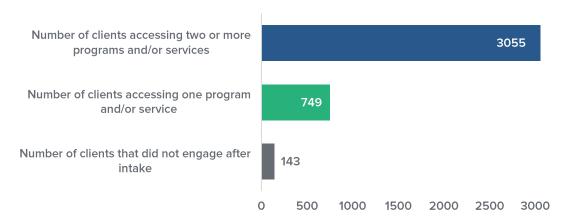


New clients by Year are individuals who came to CUPS for programs and/or services for the first time within this year. These clients have never accessed CUPS before.



New clients by Quarter are individuals who came to CUPS for programs and/or services for the first time within the current quarter. These clients have never accessed CUPS before.

**Quarter 4: Program and Service Access\*** 



<sup>\*</sup>Note: this table only includes clients in the ETO database and does not include clients in the WOLF (Health) database

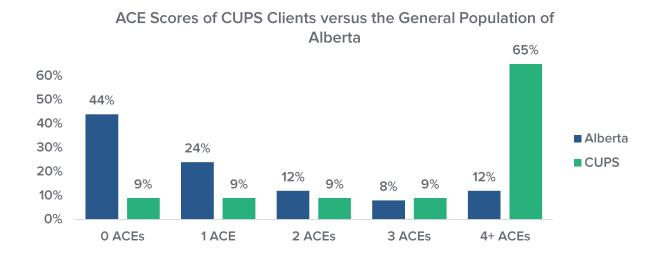
### **Insights: Client Data**

- Our client count has gone from over 11,000 last fiscal year to 8,084 in 2019. The reason is complicated, and it's
  also positive. We have changed the way we count our clients because we've changed the way we serve them: we
  focus on those who are actively involved in their care. As we continue to move toward evidence-based practice,
  the data we collect helps us better understand our clients and develop care plans tailored to each individual. This
  change mirrors our shift towards integrated care, rooted in the science of building healthy brains and resilience.
- The number of new clients at CUPS remains relatively consistent with approximately 900 new clients every quarter.
- The majority of clients in our ETO database are accessing multiple programs and/or services at CUPS.

# **MEASURING TRAUMA**

# Why Adverse Childhood Experiences?

The Adverse Childhood Experiences (ACEs) Survey measures stressful or traumatic events that happened in childhood. ACEs are strongly related to the development and prevalence of a wide range of health problems throughout a person's lifespan. Research shows that having four or more ACEs places an individual at a much higher risk for poor health outcomes later in life. The ACEs Survey is an important intervention tool that helps frontline workers at CUPS identify trauma and recommend services based on this need within a safe space. Moreover, the ACEs Survey is a positive educational resource that empowers clients as they work to build resilience.



## **Insights: ACEs**

- 65% of CUPS clients have an ACE score of 4 or more, compared to just 12% of the general population of Alberta.
- The average ACE score of CUPS clients is 5.

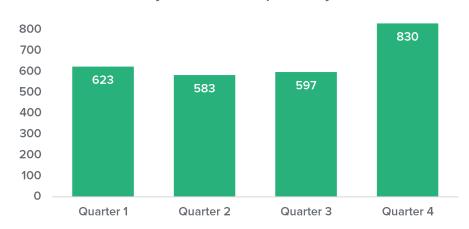
# **BUILDING RESILIENCE**

## Why the Resiliency Matrix?

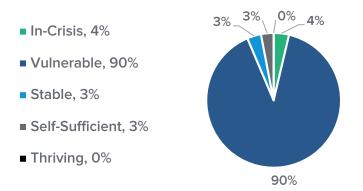
When a client comes to CUPS for the first time, we sit down with them to complete an intake and go through the Resiliency Matrix. The Resiliency Matrix is a Brain Story-based assessment tool, developed by CUPS, that helps us figure out what support clients need when they come to CUPS and how effective that support is over time. The Resiliency Matrix supports our approach to integrated care by helping us determine what set of services and programs a client with complex needs should access in order to build resilience.

This year 2,633 Resiliency Matrices were completed at CUPS.

### Resiliency Matrices Completed by Quarter



January 1, 2019 - March 31, 2019: Resiliency Matrix Scores
Upon Intake



# Resiliency Matrix Pre and Post - change in resilience score from intake to latest follow-up assessment



# Insights: Resilience Matrix

- There was a 39% increase in the number of resilience matrices completed in Quarter 4 of this fiscal year.
- 90% of clients who came to CUPS in Quarter 4 to complete an intake were vulnerable.
- The greatest change within the Resiliency Matrix was in the Housing & Living Conditions, Legal & Justice, and Access to Healthcare Subdomains
- The Resilience Domain with the largest positive change was the Economic Resilience Domain.

# **RESEARCH & POLICY ADVOCACY**

# Connecting Knowledge with Practice

At CUPS, we explore the linkages between research, policy, and practice to consolidate knowledge about "what works". We are creating an infrastructure to become more effective in applying and contributing to ongoing research on the science of brain-building and resilience. The following section provides insight into some of the policy advocacy and research initiatives going on at CUPs.



The Trauma-Informed Care (TIC) Collective aims to advocate for the Government of Alberta to adopt trauma-informed care. In the last year, led by CUPS, the TIC Collective grew to include approximately 18 agencies. Currently, the TIC Collective is working on writing a position paper making a case for the uptake of trauma-informed care to better serve Albertans.

CUPS is currently completing a one-year follow-up of the Working for Kids (W4K) Research Project. W4K is a community-based education program that gives parents the opportunity to learn about their child's development and discover games that encourage healthy brain development. The results of the follow-up study will help us understand how this program impacts the lives of clients and whether we should continue to use it at CUPS moving forward.



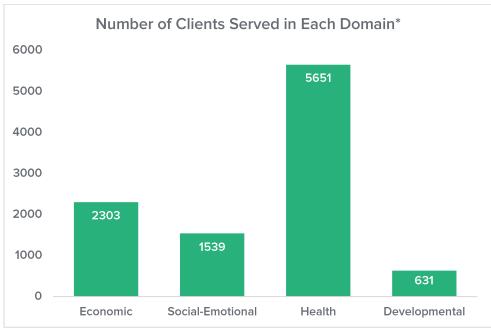


ATTACH is a research study that aims to promote secure attachment and the healthy development of children exposed to toxic stress through reflective functioning and emotional-regulation. CUPS plans to implement an ATTACH pilot project with 8-10 clients in June 2019.

Over 2,500 Resiliency Matrices have been completed at CUPS. The preliminary results of these assessments will allow us to explore our impact as an agency and better understand how we build resilience that spans generations.



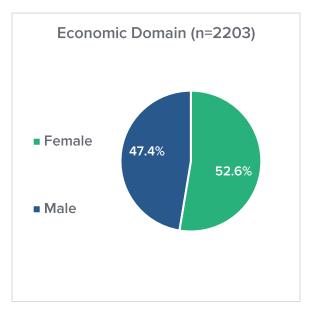
# RESILIENCE DOMAIN SNAPSHOTS

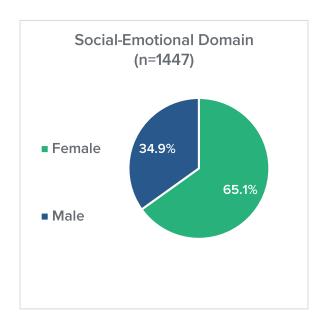


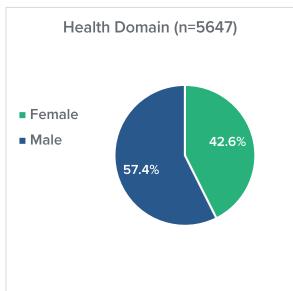
<sup>\*</sup>the number of clients served in each domain are not mutually exclusive from one another as one client may be receiving services across several domains

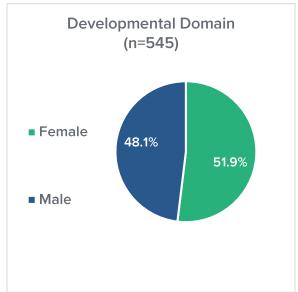
# Client Demographics by Domain

# Gender

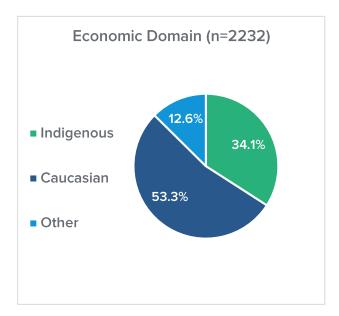


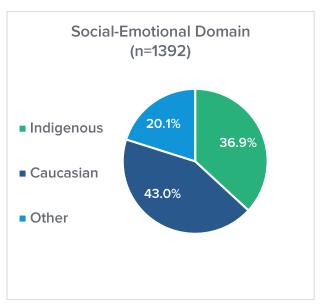


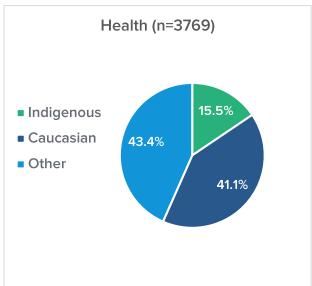


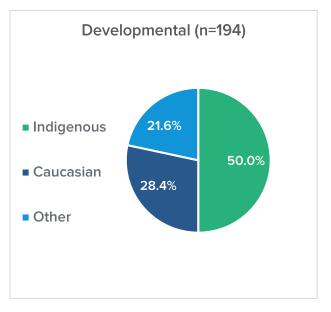


# Cultural Background









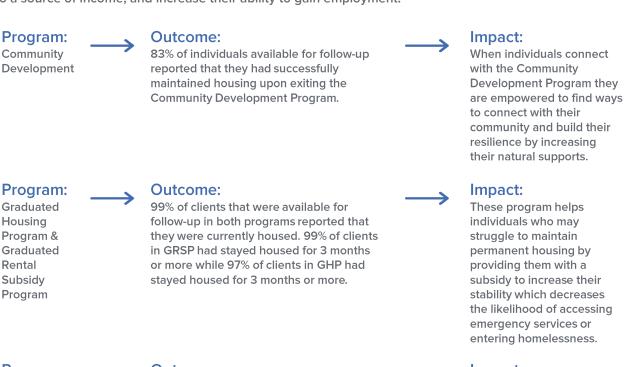
# Outputs, Outcomes, and Impact

It is important that as an agency we are able to show our impact. Outputs measure the "what" of a program while outcomes measure the "why". For example, when we say how many individuals were housed, this number is an output that does not give a holistic picture of the impact of our housing programs. However, when we say what percentage of individuals were able to maintain housing, we are using an outcome to understand the success of the housing program. Reporting both outputs and outcomes demonstrates how CUPS programs and services have an impact on the lives of individuals and families living with the effects of poverty and trauma.

# **Economic Resilience Snapshot**



CUPS aims to build economic resilience by helping individuals achieve a stable living situation, gain access to a source of income, and increase their ability to gain employment.



# Program: Key Case Outcome: 82% of the cli

Management

82% of the clients in the Key Case Management Program came from chronic homelessness while 18% came from episodic homelessness. Furthermore, 50% of clients had spent 5 or more years in homelessness. Impact:
This measure demonstrates that this program helps individuals who were previously homeless achieve stability and remain housed. As a result, individuals are less likely to inappropriately access public systems saving tax payer dollars as well as helping build resilience for individuals who have a greater chance of reentering homelessness.

### **Program:**

Identification Program

#### Outcome:

99% of application requests for ID were accepted. The main reason for requesting ID was access to transit, then banking, and finally access health care.

### Impact:

Reducing barriers to obtaining ID enables individuals to access crucial services, such as the health care system, banks, government programs, and educational services.

# Social-Emotional Resilience Snapshot









CUPS aims to build social-emotional resilience by helping individuals participate in meaningful activities, develop supportive relationships with family and/or friends, exercise their executive functioning and self-regulation in different social situations, and limit their interactions with the justice system.

### Program:

Community Development

#### Outcome:

34% of individuals reported that they had experienced a positive change in their social participation upon exit from the program.

# Impact:

Reducing social isolation helps increase mental health and support overall well-being as clients build resilience.

### **Program:**

Nurturing Parenting

# Output:

This year, 52 individuals attended the 18session Nurturing Parenting classes. The average attendance rate was 65%.

### \_\_\_ Impact:

Increasing parenting skills has a positive impact on the parent-child relationship and aids in overall child development.

### Program:

Nurturing Father Figures

### Output:

64 fathers/male caregivers attended the Nurturing Father Figure Program this year. During the course of this program, caregivers learn new parenting that will help their children reach their developmental milestones.

# Impact:

Both male and female parents and guardians provide positive experiences that can tip the child to more positive life outcomes.

#### **Program:**

Graduated Housing Program

### Outcome:

68% of individuals reported that they experience a positive change in social participation upon exit of the Graduated Housing Program.

# Impact:

Reducing social isolation helps increase mental health and support overall well-being as clients build resilience.

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# Health Resilience Snapshot









CUPS aims to build health resilience by helping individuals manage and prevent chronic physical and mental health conditions, reduce reliance on substances, and gain access to primary health care.

### **Program:**

CUPS Health Clinic



5651 individuals served by CUPS Health this year, generating 44 029 points of service. CUPS Health saw a 38% increase in points of service within this fiscal year, which includes both appointments and case management.



Connecting patients to an interdisciplinary primary care team has been demonstrated to ensure better health outcomes and health equity.

### **Program:**

Connect 2 Care (C2C)



50% of unhoused C2C clients were successfully housed after engaging with the program. 60% of C2C clients were connected to primary care & obtained medication coverage after working with the team. Total average Emergency Department visits for C2C clients were cut in half after enrolment and inpatient stays reduced by two thirds, leading to a \$10,000/client cost savings.

### Impact:

C2C clients have an improved connection to community resources, such as housing and primary care, and have seen a significant reduction in inappropriate acute care use.

#### **Program:**

CUPS Shared Care Mental Health (SCMH)

#### Outcome:

Due to the addition of 3 mental health clinicians, there was a 53% increase in access to mental health counselling this year.

# $\longrightarrow$

#### Impact:

Access to mental health support helps individuals living with the negative effect of trauma begin to understand and mitigate the impact as they build resilience.

# Program:

Dental

#### Output:

340 individuals were served by the CUPS Dental Clinic this year, between extractions and restorative services. There were 190 visits for cleanings and restorative care and 489 teeth were extracted.

### $\longrightarrow$

#### Impact:

Low income Calgarians with partial insurance coverage still face challenges accessing dental services due to out of pocket fees. The restorative clinic partnership with TREC allows CUPS to provide low barrier access to restorative dental care and cleanings without cost to clients.

### **Program:**

CUPS Opioid Agonist Treatment (OAT)

### Output:

CUPS has facilitated 229 OAT initiations within this fiscal year and currently has 114 individuals actively engaged with the program.



#### Impact:

As a part of the community response to the Opioid Crisis CUPS has increased access to low barrier Opioid Agonist Treatment with the aim of reducing drug related harms and strengthening connections to primary care services.

# Developmental Resilience Snapshot



**EARLY YEARS DEVELOPMENT (0-6 YEARS)** 

CUPS aims to build developmental resilience in children age 0-6 by reducing interactions with Child and Family Services and enabling children to reach their developmental milestones.

### Program:

Child Development Centre

#### **Output:**

In the 2017-2018 school year 64 children attended a total of 6,923 days of school.

#### Impact:

Attending the Child
Development Centre
promotes school readiness
for children when they enter
the public-school system
and helps children from lowincome families achieve
success later in life.

### **Program:**

Child Development Centre

#### Outcome:

CUPS provides rides to school via two bus routes for children that attend the Child Development Centre. As a result, the average attendance rate was 80%, demonstrating that most children were at school on most days throughout the year.

### Impact:

Ensuring children have access to transportation increases the attendance rate and provides access to programming that helps children achieve reach their developmental milestones.

### **Program:**

Child Development Centre

#### Output:

32 children in the Child Development
Centre received Program Unit Funding,
meaning they had a severe disability or
delay in one or more areas of development.
23 of these children were diagnosed with a
severe language delay while 9 were
diagnosed with a severe
emotional/behavioural disability. Through
the Child Development Centre, these
children have access to a speech and
language pathologist, occupational
Therapist, physio therapist, psychiatrist
and/or psychologist

## Impact:

Access to specialists helps children with their Social-emotional development which is a predictor of later academic, social, and emotional success. Children with these skills build a stronger foundation for future school achievement.

# Learnings

From the tracked Resiliency Matrix data, we learned that clients who accessed CUPS programs and services moved from a Resiliency Matrix score of 2 (vulnerable) at intake to a score of 3 (stable) at follow-up assessments. However, the tracked data shows that when the Resiliency Matrix is broken down into its subdomains, there are certain subdomains that have greater improvements and are statistically significant between pre and post scores than other subdomains. With this information, we are looking at how these differences show up depending on specific programs, and from there, finding new ways to change or add to our existing practices to ensure that larger improvements are seen across all the RMx subdomains.

With more program-specific measurement tools, our conversations about the tracked data demonstrates that there is variability in the effectiveness of the different tools in capturing the improvements that frontline staff see happening with our clients. From these conversations, we are improving the way data is collected, entered, and stored in our databases, as well as trialling new measurement tools that are better aligned with the programs' intended outcomes.

# Stories of Impact

When Carol\* was granted guardianship of her 3-year-old grandson, Grayson, who had previously been living in care, she was asked to leave her adult-only home. In addition to searching for a new place to live, Carol was forced to quit her job to set up school and daycare to make sure Grayson had the supports he needed. As a result, Carol was unable to save the money required for a damage deposit and first month's rent on a new rental for her and her young grandson.

During the interim, while living with family, Carol realized that she needed financial support and decided to come to CUPS. After completing an intake, Carol accessed the Crisis Intervention Fund which provided her and Grayson with the extra financial support they needed to move into their new home. Since coming to CUPS, Carol and Grayson have moved into an affordable housing unit and are working on applying for guardianship of Carol's other grandson, Carl, to join them in their new home.





When Reba entered the Child Development Centre at CUPS, she had recently been placed in foster care and was experiencing a great degree of change in her life. When she was assessed by the specialists and teachers, Reba presented with no speech and was hypervigilant of both the staff and her surroundings. As a result, she would not allow staff to touch her other than to change her pull-up. Due to the severity of Reba's development, the CUPS staff came together to provide wrap-around support in order to see Reba succeed.

As the school year progressed, Reba had access to various specialists and received specific interventions to help her reach her developmental millstones. Furthermore, the Child Development Centre Staff patiently worked with Reba to build important skills in the classroom. As a result of these interventions, Reba began to communicate with other children and regularly seek comfort from staff members. She learned to use up to 20 words as well as interact and play with the other children in the classroom. CUPS staff also collaborated closely with Child and Family Services, Reba's foster family, and her biological family to make sure she had the highest level of support possible to continue building her skills.

\*Names changed to maintain anonymity