



# Partner Impact Report

**October 1 - December 31, 2025**

# Table of Contents

<b>Executive Summary.....</b>	<b>2</b>
<b>Introduction.....</b>	<b>3</b>
<b>Implementation Partners.....</b>	<b>4</b>
<b>GPS Facilitator Training Impact.....</b>	<b>6</b>
<b>Support Group Expansion &amp; Direct Reach.....</b>	<b>7</b>
<b>Measurable Organizational Benefits.....</b>	<b>9</b>
<b>Strategic Use of Funding.....</b>	<b>11</b>
<b>Looking Ahead.....</b>	<b>12</b>
<b>Conclusion.....</b>	<b>13</b>
<b>About GPS.....</b>	<b>14</b>

## Executive Summary

GPS Group Peer Support's MASStrong is a statewide initiative committed to improving the mental health and well-being of medical and behavioral healthcare workers, non-clinical and support providers, and the communities they serve, throughout Massachusetts.

**By the end of December 2025, GPS onboarded eight funded partners and one non-funded partner. During this period, six of the new partners submitted their first quarterly report.** Due to the staggered onboarding of partners, this first quarterly report includes data beginning July 1, 2025.

MASStrong partnerships are strengthening workforce resilience, improving staff wellbeing, increasing reflective practice capacity, and expanding structured peer support across behavioral health, recovery, healthcare, and immigrant-serving organizations across Massachusetts.

Highlights include:

- **44 staff members trained** in GPS Facilitator Training
- Multiple organizations launched or prepared to launch GPS-style support groups.
- **Partners reported improved staff confidence, reduced burnout, enhanced communication, and increased retention.**
- Several organizations are enrolling additional cohorts of staff, demonstrating sustainability.



Participation in GPS and MASStrong helped our staff feel more supported, connected, and confident in setting healthy boundaries. We've seen more open communication among staff, better check ins during meetings, and a stronger sense of shared responsibility for wellness.

**Diego Leonardo**  
Executive Director  
Latinx Community Center for Empowerment (LCCE)

## Introduction

GPS Group Peer Support's MASStrong initiative continues to demonstrate measurable impact on workforce resilience, organizational capacity, and peer support infrastructure across Massachusetts. MASStrong equips partner organizations with structured facilitator training, implementation support, and a sustainable peer support model that can help amidst the rising rates of workplace stress and burnout.

For this first quarterly report, MASStrong engaged with six active partner organizations serving highly diverse and often marginalized populations, including immigrant communities, healthcare workers, individuals in recovery from substance use, youth, and individuals experiencing housing instability. Through facilitator training, structured support groups, and organizational mentorship, MASStrong is moving beyond one-time training events to embed trauma-informed, peer-led support into daily organizational culture.

The data collected reflects both quantitative reach and qualitative impact. Forty-four staff members were trained across multiple professional roles, including clinicians, peer support specialists, medical providers, and community-based staff. MASStrong implementation partners have launched and sustained structured support groups serving youth, healthcare workers in recovery, frontline staff, and high-stress community populations.

Of significance, **100% of reporting partners indicated satisfaction with the program**, with several enrolling additional staff cohorts and requesting advanced or population-specific curricula.

These initial results indicate not only strong program uptake, but institutional integration. Partners report improved morale, stronger reflective practice, increased confidence among facilitators, and reduced burnout among staff.

Demand for advanced training, technical assistance, and expanded support group offerings signals readiness for scale. Continued investment in MASStrong represents a strategic opportunity to stabilize the workforce, deepen equity-centered support systems, and strengthen care delivery statewide.

## Implementation Partners

Hundreds of medical and behavioral healthcare workers, as well as non-clinical and support providers— across hospitals, long-term care, and community-based settings have begun engaging with MASStrong.

**The following organizations participated in their first MASStrong quarterly report to GPS during this time period:**



**Center for Human Development:** The Center for Human Development (CHD) is one of the largest private, nonprofit, social service agencies in Western Massachusetts. Serving over 5,000 people a year, CHD provides a broad range of high-quality, community-oriented human services dedicated to promoting, enhancing, and protecting the dignity and welfare of people in need. Services are inclusive of, and not limited to, behavioral health and substance use treatment, residential programming and housing support and children's protective services.



**CHOICE Recovery Coaching:** Choice Recovery Coaching, Inc. (CRC), is an independent, 501-C3 nonprofit organization working in Massachusetts and beyond. They directly serve a few hundred individuals and families annually with peer support via recovery coaching. They also train the recovery workforce and help other systems build out their recovery workforce by training and supervision support.



**Massachusetts Peer Support for Nurses:** MAPSN is a peer support organization established by nurses, for nurses across the state of Massachusetts, serving around 100 nurses a year. MAPSN understands the unique challenges that nurses face when battling substance use disorder. The MAPSN community is built upon a foundation of empathy, shared experiences, and the collective strength of those who have triumphed over substance use disorder. MAPSN believes in the power of unity and the profound impact of hearing stories from those who have been there, stories that inspire hope, resilience, and the belief that recovery is attainable.



**Latinx Center (LCCE):** The Latinx Community Center for Empowerment (LCCE) is a nonprofit organization dedicated to uplifting and empowering Latinx individuals and families through education, workforce development, civic engagement, and cultural preservation. Based in Lowell, MA, LCCE provides programs such as HiSET preparation, English language classes, youth leadership development, and community events like the Hispanic & Latinx Festival, all aimed at fostering inclusion, opportunity, and community resilience.



**New England Behavioral Health Services Inc:** NEBHSI provides culturally responsive, person-centered behavioral health care that empowers individuals and families toward emotional wellness, recovery, and lifelong success. NEBHSI delivers outpatient mental health and substance use disorder services throughout Massachusetts. Their programs include therapy, clinical case management, recovery coaching, and support for individuals across the lifespan, especially those from underserved and marginalized communities.



**Riverside Community Care:** A community-based nonprofit organization serving more than 40,000 people a year in Massachusetts, Riverside is a leading provider of mental healthcare, developmental and brain injury services, early childhood and youth programs, addiction treatment, suicide education, trauma response, and more. Our mission is to make a difference in the lives of individuals, families, and communities through innovative and compassionate community-based behavioral healthcare and human services. At this time we have peer workers in three of our divisions and are continuously looking to grow our lived experience workforce. We are interested to see how this opportunity can be utilized in our programs.

These partnerships have allowed GPS's MASStrong program to reach across the entire state, supporting a range of individuals, including those in rural communities with high rates of poverty, intergenerational trauma, and lack of transportation.

## GPS Facilitator Training Impact

A total of **44 staff** across diverse professional roles were trained, including behavioral and mental health professionals, peer support specialists, recovery coaches, community-based providers, medical providers, allied health professionals, and administrative staff.



The GPS model truly strengthens reflective practice for clinicians by enhancing the capacity to integrate clinical insight, self-awareness, and mutual accountability into mentorship conversations.

**Jon Van Rader, Sr.**  
President/CEO  
New England Behavioral Health Services Inc

Partners consistently reported that GPS training strengthened reflective capacity, deepened trauma-informed understanding, and increased facilitator confidence. **Staff left not only with tools, but with a clearer framework for how to hold space safely and sustainably.**

One partner described the impact as “the clinical application of trauma theory in organizational mentorship,” noting that the GPS model enhanced clinicians’ ability to integrate insight, self-awareness, and accountability into supervision and mentorship conversations. Another emphasized that the most valuable components were “reflection, peer connection, and practical tools that staff could immediately apply to their work,” highlighting the program’s balance between structure and lived experience.

For several organizations, training catalyzed momentum rather than concluding it. NEBHSI reported plans to enroll seven additional staff members to deepen trauma-informed mentorship capacity. Others are preparing new facilitator cohorts or embedding GPS tools directly into existing team structures. This signals that MASStrong is not functioning as an external add-on, but as internal infrastructure.

Importantly, partners serve populations experiencing high levels of stress, trauma exposure, and systemic inequities, including immigrant families, healthcare workers in recovery, youth, and individuals navigating behavioral health challenges. Strengthening facilitator competency within these contexts is not merely professional development, it is a stabilizing intervention for high-demand systems.

This first round of data is telling: Organizations are investing in peer-led, structured support not as a wellness initiative, but as a strategic approach to sustainability. Through facilitator training, MASStrong is expanding the number of individuals capable of leading emotionally safe, structured spaces, and in doing so, building the conditions necessary for long-term workforce resilience.

## Support Group Expansion & Direct Reach

The true measure of MASStrong’s reach is not only how many facilitators are trained, but how many structured spaces are actively operating as a result. During this reporting period, partner organizations moved from capacity-building into implementation, launching and sustaining GPS-style support groups serving youth, healthcare workers, recovery communities, frontline staff, and high-stress populations.

Across partners, support groups met weekly or monthly, with participation typically ranging from 4 to 10 individuals per session. Topics addressed included burnout management, shame and recovery, youth connection, emotional regulation, and community belonging.

The qualitative impact described by partners reveals what these spaces are making possible. One partner serving healthcare providers in recovery noted that participants reported **“a sense of belonging and feeling connected,”** a critical protective factor in professions with high isolation and stigma.

Youth groups launched through Riverside Community Care created structured support environments for children ages 7–11, while other organizations began preparing staff-focused burnout groups to stabilize internal teams. In recovery settings, groups addressed themes such as “Recovery Isn’t Linear” and “Silence, Secrets, and Speaking our truths,” demonstrating how the GPS model adapts to context while maintaining structure.

Several organizations are transitioning from pilot implementation to ongoing integration. **Partners report plans to continue weekly groups, launch new cohorts, and use trained facilitators to expand offerings in early 2026.** This progression, from training to activation to institutionalization, reflects sustainable growth rather than short-term programming.

Support group expansion also deepened reach into historically marginalized communities, including Latinx and immigrant families, individuals in recovery from substance use, healthcare workers with lived experience, and youth navigating high-stress environments. By embedding peer-led support within organizations already serving these populations, MASStrong amplifies both staff wellbeing and community care quality.

The expansion of support groups demonstrates that MASStrong is not only building knowledge, it is building active, operational infrastructure for emotional safety and workforce sustainability across Massachusetts.

### Support Group Examples:

#### Center for Human Development (CHD)

- Staff support group
- Topic: Burnout Management
- 10 participants

#### CHOICE Recovery Coaching

- Monthly support groups since July 2025
- Topics included:
  - “Shame and Feelings Surrounding the Past”
  - “Recovery Isn’t Linear”
  - “Silence, Secrets, and Speaking our Truths”
- 4–6 participants per session

#### Massachusetts Peer Support for Nurses (MAPSN)

- Weekly healthcare recovery groups
- Topic: Recovery
- 3–6 participants per session

### Riverside Community Care

- Two ongoing youth support groups (weekly)
  - Topics: Relationships, community-building, general mental health
- One peer support gathering (weekly)
  - Topics: Friendship skills, coping skills, general mental health
- 5–6 participants per session



Our staff really enjoyed GPS support groups. For many it was the first time they felt they could speak their truths

**Sarah Ahern**

Recovery and Harm Reduction Services Coordinator  
Choice Recovery Coaching

## Measurable Organizational Benefits

While MASStrong begins with training and structured support groups, its impact ultimately shows up at the organizational level. Across reporting partners, the benefits described extend beyond individual skill development to measurable shifts in workplace culture, communication patterns, and staff retention.

Partners consistently reported that participation in MASStrong strengthened staff morale and reduced burnout. However, the more meaningful theme was sustainability. One organization noted that the training “helped us work more sustainably rather than pushing through burnout,” signaling a shift from crisis endurance to intentional workforce care. Another emphasized that supporting staff wellness “is not extra. It is essential. When our team is supported, our community is supported.”

Several organizations observed improved communication and stronger team cohesion. Staff began integrating structured reflection into meetings and check-ins, creating more open dialogue about stress, boundaries, and workload. Leaders reported that teams felt more confident setting limits and supporting one another without absorbing the full emotional weight of their roles alone.

Retention and morale were also directly impacted. One partner shared that MASStrong strengthened their “capacity to grow responsibly,” highlighting how workforce development and structured peer support create conditions that allow organizations to scale without destabilizing their teams. Rather than reacting to turnover, organizations are proactively building cultures that reduce it.

For partners serving high-stress populations, including immigrant families, individuals in recovery, youth, and healthcare workers, these internal shifts translate outward. Staff who feel supported are better able to provide consistent, compassionate, and culturally responsive care. The link between staff wellbeing and community impact became clear across responses.

**Multiple organizations are choosing to expand participation by enrolling additional staff cohorts and embedding MASStrong practices into supervision and mentorship structures.** This signals that the perceived benefits are not isolated to early adopters but are influencing broader organizational strategy.

The measurable organizational benefits of MASStrong reflect a deeper transformation: moving from episodic wellness interventions to embedded infrastructure for workforce resilience. In doing so, MASStrong is strengthening not just individual practitioners, but the systems that rely on them.



**Team members will continue to use the skills and approaches taught in GPS to benefit their support of those we support and to reduce their own burnout.**

**Amie Sica**  
Vice President, Recovery and Peer Services  
Riverside Community Care

## Strategic Use of Funding

Partner organizations reported using MASStrong funding strategically, not simply to offset program costs, but to remove barriers that often prevent workforce initiatives from taking hold. Funds supported staff participation time, stipends, coordination and logistics, outreach materials, facilitator compensation, and group supplies. **In several cases, funding made it possible for organizations to prioritize training and structured support without compromising direct service capacity.**

Many partners serve communities experiencing high levels of trauma, economic stress, housing instability, or substance use challenges. Staff in these environments often operate at full capacity. By compensating participation time and covering coordination costs, MASStrong funding ensured that engagement was intentional rather than burdensome.

One partner explicitly noted that **funding reduced drop-off and increased training completion rates.** Others highlighted that support for logistics and program coordination enabled smoother implementation and sustainability planning. In recovery-focused settings, stipends honored participants' lived experience and strengthened engagement. In community-based organizations, funding allows leadership to protect time for reflection and skill-building, an investment that pays dividends in retention and morale.

Funding was not treated as supplemental, it was catalytic. It allowed organizations to build internal infrastructure for peer-led support rather than relying on temporary or volunteer-driven efforts.



We are incredibly grateful to have been chosen as a recipient of MASStrong funding to support the GPS partnership. CHD prides itself on identifying effective and innovative ways to support our staff in doing the challenging work they do every day, in a way that feels empowering and thoughtful.

**Shannon Hicks**  
Senior Program Director  
Center For Human Development

## Looking Ahead

The reporting period reflects more than program satisfaction. It signals readiness for expansion. Across partners, requests for advanced or refresher trainings, specialized curricula, expanded support group offerings, and technical assistance reveal a clear pattern: Organizations are not questioning whether MASStrong is valuable. They are asking how to deepen and broaden its integration.

Several partners are enrolling additional staff cohorts. Others are embedding GPS practices directly into supervision, mentorship, and standing team meetings. Support groups that began as pilots are transitioning into ongoing, weekly infrastructure. This movement from introduction to institutionalization reflects maturation and demand.

Partners also expressed interest in population-specific curricula, including content tailored to healthcare providers in recovery, immigrant-serving organizations, BIPOC staff, supervisors, and frontline community navigators. This feedback offers a roadmap for strategic program growth grounded in real-world application.

Looking forward, MASStrong has the opportunity to:

- Expand facilitator pipelines within partner organizations
- Deepen culturally responsive and population-specific programming
- Strengthen implementation coaching and follow-up supports
- Increase geographic and sector reach across Massachusetts

The foundation is strong with high satisfaction, demonstrated organizational benefit, and tangible workforce stabilization outcomes. Continued investment would allow MASStrong to scale deliberately, maintaining fidelity while broadening impact.

**At a time when behavioral health, healthcare, and community-based systems face ongoing workforce strain, MASStrong represents more than training. It represents infrastructure: building organizations that can sustain their people, and in turn, the communities they serve.**

## Conclusion

The impact of MASStrong is not measured only in the number of staff trained or support groups launched. It is reflected in the quieter, systemic shifts happening inside implementation partner organizations across Massachusetts. Staff who once carried stress in isolation are now engaging in structured reflection. Supervisors are building cultures of accountability and emotional safety. Organizations are moving from reactive burnout management to proactive workforce stabilization.

Across behavioral health, recovery services, and healthcare settings, partners describe a common shift. Teams feel more connected, more confident, and better equipped to sustain the emotional demands of their work. The introduction of structured, peer-led support has strengthened not just individual resilience, but organizational capacity. Several partners are already enrolling additional staff, planning new cohorts, and integrating MASStrong practices into standing meetings and supervision structures, evidence that this work is being embedded, instead of remaining peripheral.

The demand for advanced training, specialized curricula, and continued funding further signals that MASStrong is meeting a real and urgent need. Organizations are not asking whether they should continue this work; they are asking how to deepen and expand it.

At its core, MASStrong is building infrastructure for sustainability. By investing in the people who hold complex, trauma-exposed systems together, the initiative strengthens care delivery at every level. When staff are supported, organizations are stabilized. When organizations are stabilized, communities receive more consistent, compassionate, and effective care.

As we look ahead, the opportunity is clear: Scale what is working, deepen integration, and continue building a workforce that does not merely endure the work, but can sustain it.

## About GPS

GPS Group Peer Support provides structured, non-clinical group peer support for individuals experiencing stress and challenge.

This evidence- and trauma-informed model has been successfully implemented across a range of populations and settings, delivering impactful results. GPS incorporates structured peer support practices informed by trauma-informed principles and facilitated group processes. The model allows for rapid replication in an easy-to-learn format for both peer specialists, people with lived experience, volunteers, and lay leaders, as well as professionals. GPS trainings are interactive, ensuring participants gain a comprehensive understanding to begin using this proven, impactful approach in their communities. GPS's innovative, scalable, and replicable approach aims to foster a supportive environment where individuals can find the resources and strength to move through difficult times with confidence and resilience.

### Contact Us:

**Website:** [GroupPeerSupport.org](https://www.grouppeersupport.org)

**Facebook:** <https://www.facebook.com/grouppeersupport>

**Instagram:** [@grouppeersupport](https://www.instagram.com/grouppeersupport)

**LinkedIn:** <https://www.linkedin.com/company/gps-group-peer-support/>

**Email:** [Info@grouppeersupport.org](mailto:info@grouppeersupport.org)