

EDUCATOR MENTAL HEALTH

REFERRAL PLAN

Reference Guide



WELCOME TO THE EDUCATOR

MENTAL HEALTH REFERRAL PLAN

This plan provides a **clear, compassionate**, and **trauma-informed** process for how an educator can refer a student to a school counselor without using a formal assessment tool. It emphasizes **professional observation, documentation, collaboration**, and **student dignity**.

Aligned with Empower Schools™ Mental Health Principles, this plan supports early intervention, clarity, and relational safety.

In this plan, the guiding principals are:

1. **Behavior is communication**

- a. Student behavior may signal unmet emotional, mental, or environmental needs.

2. **Observe, don't diagnose**

- a. Educators rely on professional observation, not clinical judgment.

3. **Document facts, not assumptions**

- a. Record what is seen, heard, or reported using objective language.

4. **Regulate, then refer**

- a. Ensure the student is calm and emotionally safe before initiating a referral.

5. **Protect student dignity and confidentiality**

- a. Conversations occur privately and respectfully.

This plan is more than just a collection of information—**it's a call to action**. It invites educators to move with intention, compassion, and clarity when a student shows signs of distress. By emphasizing observation over diagnosis, regulation before referral, and dignity throughout the process, this plan empowers educators to respond early and responsibly. Through thoughtful collaboration and timely referral, educators become a vital bridge to support—helping students access the care they need while preserving **respect, confidentiality**, and **emotional well-being**.

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EMPOWER SCHOOLS

Empower Schools™ serves as the foundational framework for this Educator Mental Health Referral Plan. Through evidence-based, trauma-informed training, Empower Schools equips educators with the knowledge and confidence to recognize early signs of student distress, respond with care and professionalism, and initiate appropriate referrals without the use of formal diagnostic tools. The training reinforces critical boundaries—observing rather than diagnosing, documenting facts rather than assumptions, and prioritizing regulation, dignity, and confidentiality at every step. By strengthening mental-health literacy and referral readiness among school staff, Empower Schools ensures that educators act as informed, compassionate first responders, supporting early intervention, relational safety, and timely connection to counseling services within a structured, student-centered system of care.



A PRAYER FOR EMPOWER SCHOOLS

Heavenly Father,

We thank You for the calling to care for students with wisdom, compassion, and understanding. As educators and leaders, guide our hearts and minds to see each child with empathy, respond with patience, and act with courage when support is needed. May Empower Schools equip us to be instruments of hope, safety, and restoration, creating spaces where students feel seen, valued, and supported. Grant us discernment in our actions and unity in our care, so that all we do reflects Your love and brings healing to those entrusted to us. Amen.

In Your name we pray,
Amen

Micah 6:8 — “He has shown you, O mortal, what is good. And what does the Lord require of you? To act justly and to love mercy and to walk humbly with your God.”

“

Attending this training was incredibly valuable for me. It provided clear, practical insights that I was able to apply immediately in my work as a settlement counselor, a teacher, and a mother of two teenage daughters. The trainers were knowledgeable, and the content was well organized and easy to follow. I highly recommend this program to school staff and to any parent raising teens or youth who wants to better understand and support mental health.

”

Zakereh T.
*Empower Schools
Training Participant*

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Step 1: Notice & Observe (Teacher Role)

Educators should pay attention to *patterns*, not isolated incidents.

Areas to Observe

- Behavioral changes (withdrawal, agitation, tearfulness, aggression)
- Academic changes (declining grades, incomplete work, loss of focus)
- Social changes (isolation, peer conflict, loss of interest)
- Emotional indicators (hopeless statements, excessive worry, fearfulness)
- Physical indicators (fatigue, frequent nurse visits, somatic complaints)

Use Assessing Psychological Distress Form on page 12 of this guide.

⚠ Teachers do not label or diagnose.

Step 2: Document Objective Observations

Documentation should be specific, factual, and time-based.

What to Include

- Date and time of observations
- What was seen or heard (direct quotes when possible)
- Duration and frequency
- Impact on learning or relationships
- Strategies already attempted and student response

What to Avoid

- Diagnoses (e.g., “anxiety,” “depression”)
- Assumptions about home life
- Emotional language or opinions

Example:

“Student put head down for 25 minutes during independent work and did not respond to redirection. This occurred 3 times this week.”

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Step 3: Collect Supporting Evidence

Supporting documentation helps counselors understand the full picture.

Appropriate Attachments

- Samples of incomplete or concerning schoolwork
- Attendance or tardy patterns
- Behavior incident reports (if applicable)
- Notes from prior interventions

Use Referral Packet form on page 13 of this guide. Only include *relevant* materials.

Step 4: Regulate & Support the Student (If Appropriate)

Before referral (unless crisis):

- Offer grounding strategies
- Provide reassurance
- Maintain predictable routines

Educator Language:

“I’ve noticed you seem overwhelmed lately. You’re not in trouble, and you’re not alone.”

Step 5: Submit Referral to School Counselor

Referral Should Include

- Summary of concerns (1–2 paragraphs)
- Timeline of observations
- Documentation and attachments
- Any immediate safety concerns

Professional Referral Language Example:

“I am requesting a counselor check-in based on consistent changes in behavior and academic engagement observed over the past four weeks.”

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Step 6: Counselor Review & Next Steps

Counselor may:

- Meet privately with the student
- Conduct further screening
- Contact parents/guardians per policy
- Coordinate support plan

Educators do not investigate or contact parents independently unless directed.

Step 7: Follow-Up & Collaboration

After referral:

- Maintain confidentiality
- Implement recommended classroom supports
- Continue documenting progress or concerns
- Participate in team meetings if requested

Mental health support is ongoing, not a one-time action.

Step 8: Crisis Protocol (Immediate Action)

If a student expresses:

- Self-harm
- Suicidal thoughts
- Threats of harm to others

- ➔ *Follow school crisis protocol immediately*
- ➔ *Do not wait or document first*
- ➔ *Stay with the student until help arrives*

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REFERRAL PLAN

Administrator Responsibilities

- Ensure referral process is clear and accessible
- Train staff annually on documentation and boundaries
- Protect confidentiality
- Support educators emotionally through the process

Faith-Aligned Framing (Optional)

“Our role is not to fix, but to faithfully notice, care, and connect students to support.”

Outcome Goals

- Early identification of student needs
- Reduced classroom escalation
- Strong educator-counselor collaboration
- Student dignity preserved

NO.

ASSESSING PSYCHOLOGICAL DISTRESS

0 / 1 / 2

DOES NOT APPLY = 0 APPLIES SOMEWHAT = 1
CERTAINLY APPLIES = 2

1	DOES THE CHILD APPEAR WORRIED ABOUT MANY THINGS?	● ● ●
2	DID THE CHILD APPEAR MISERABLE, UNHAPPY, TEARFUL, OR DEPRESSED?	● ● ●
3	DID THE CHILD SHOW LITTLE ENJOYMENT IN THINGS?	● ● ●
4	DID THE CHILD HAVE TEARS ABOUT DOING SOME THINGS?	● ● ●
5	HAS THE CHILD BEEN IRRITABLE OR QUARRELSOME?	● ● ●
6	HAS THE CHILD BEEN COMPLAINING OF ACHES AND PAINS?	● ● ●
7	HAS THE CHILD BEEN WITHDRAWN AND QUIET?	● ● ●
8	DID THE CHILD APPEAR FORGETFUL OR SHOW POOR CONCENTRATION?	● ● ●
SCORE	<p>0 - 2: NO PSYCHOLOGICAL DISTRESS</p> <p>3 - 5: MILD PSYCHOLOGICAL DISTRESS</p> <p>6 - 8: MODERATE PSYCHOLOGICAL DISTRESS</p> <p>9 - 16: SEVERE PSYCHOLOGICAL DISTRESS</p>	__ / 16

REFERRAL PACKET

Student Name:

Grade Level:

School Name:

Date:

Behavioral / Academic / Social / Emotional / Physical Observations

Documented Change / Writings / Drawings / Etc.

Supporting Documentation

I am requesting a counselor check-in based on consistent changes in behavior and academic engagement listed above.

Referral Source: Educator Administration Staff Other: _____

Signature:

Date:



MENTAL HEALTH DISORDER FACT SHEETS

Understanding mental health is a critical first step in creating a safe, supportive, and compassionate school environment. GTHU's mental health disorder fact sheets are designed to provide educators with clear, concise, and practical information on key mental-health topics, helping staff recognize concerns early and respond appropriately.

Covering common mental-health conditions and evidence-based support strategies, these fact sheets offer a foundational level of mental-health literacy for school communities. They are intended to equip educators with the knowledge and confidence needed to foster informed conversations, reduce stigma, and support students with care, professionalism, and understanding.

“

This course helped me learn how to listen and speak about difficult topics—such as suicide—that are often avoided out of fear. It emphasized the importance of recognizing, relating, and revealing, and provided clear guidance on how to approach these conversations with care. It is an excellent course, and I highly recommend it.

”

Alicia R.
*Empoderar Escuela
Training Participant*

ADHD

About ADHD

ADHD is a neurodevelopmental disorder that affects an individual's ability to focus. ADHD can also affect an individual's ability to function in daily activities depending on the severity and can interfere with interpersonal relationships. Treatment for ADHD includes therapy and/or medication.

ADHD Facts



ADHD Symptoms are Present in Two or More Settings

To meet the criteria to be diagnosed with ADHD, several symptoms must be present in two or more settings. For example, difficulty focusing at school as well as driving difficulties due to being distracted.



Individuals with ADHD Display Certain Strengths

Those with ADHD have strengths. If the task is something the individual is highly interested in, they often find themselves in a hyper-focused state. Individuals with ADHD can also be spontaneous, creative, and think outside of the box!



Different ADHD Types Have Different Symptoms

There are three different types of ADHD. Those who have Predominantly Inattentive Presentation will typically display symptoms, such as difficulty focusing, finishing tasks, and following conversations. Individuals with Predominantly Hyperactive-Impulsive Presentations will fidget and struggle to sit still. Those with Combined Presentation have symptoms of both subtypes.



Prevalence

6%

of children in the U.S. are diagnosed with ADHD.



Most individuals who get diagnosed with ADHD will get diagnosed in their school-aged years. Some people will never seek nor receive a diagnosis.

Anxiety

About Anxiety

Anxiety is a natural part of the human experience. It serves an important role in being alert and can be helpful in many ways. Anxiety becomes an issue when it interferes with your ability to function regularly. Although very unpleasant, panic attacks are common and closely related to anxiety. If you experience anxiety or panic attacks, talk to a professional as there are several ways to treat anxiety effectively.

Anxiety Facts



Anxiety Can Cause Physical Symptoms

Although some symptoms of anxiety are mental, many symptoms are physical. Nausea, hot flashes, numbness in your hands and feet, and dizziness are all common physical anxiety symptoms.



Exercise Can Help an Individual Manage Their Anxiety

Research shows that exercising can serve as an effective tool in managing anxiety. An intense workout is not required to enjoy the mood boosting effects of exercise. Low intensity exercises are as effective at decreasing stress hormones so find something that is enjoyable for you!



Women are Twice as Likely as Men to Develop Anxiety

Women experience anxiety disorders at a much higher rate than men. This is due to hormonal fluctuations, brain chemistry differences and societal factors.



Prevalence

31%

of the U.S. population will experience an anxiety disorder. Making anxiety the most common mental illness in the U.S.



Approximately 284 million individuals experience anxiety in a given year.

Bipolar Disorder

About Bipolar Disorder

Bipolar disorder is a mood disorder that is categorized by drastic highs and lows. This mood disorder can be dangerous if not treated as manic episodes are categorized by impaired judgment and impulsive decisions. Suicide is also a risk with bipolar disorder, and suicidal thoughts can occur both in a depressive or manic state. Effective treatment for this disorder can help individuals with bipolar disorder manage their symptoms.

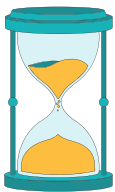
Bipolar Disorder Facts

There are three types of bipolar disorder



Bipolar I is categorized by manic episodes and depressive episodes. Bipolar II is categorized by depressive episodes and at least one hypomanic episode (less severe than mania). Finally, cyclothymic is mood changes that are not severe enough to fit the Bipolar I or II criteria.

Cycles of depression and mania vary



Individuals with bipolar disorder will see cycles of mania and depression with varying times in between cycles. Additionally, the length of each episode of mania and depression will vary from person to person, and even for the individual. Typically, depression will last longer than mania.

Effective treatments for bipolar disorder exist



Treatment for bipolar disorder includes medication and therapy. Symptom monitoring and self-care are also important components of this disorder. Stopping bipolar disorder medication without speaking to a professional can be dangerous.



Prevalence

4.4%

of the U.S. population experience Bipolar Disorder in the U.S. The median age of diagnosis is 25, but bipolar disorder can be diagnosed at any age.



Research has shown links between creativity and bipolar disorder. Finding a creative outlet can be beneficial for these individuals.

Marijuana

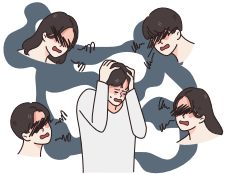
Marijuana misuse is often seen as less harmful than other substances, but it's not without risks. Some people underestimate its potential for addiction and its impact on mental health. Abuse can involve using marijuana excessively, leading to addiction, cognitive impairments, and mental health disorders.

Marijuana Abuse Facts



Dependence and addiction risks exists with marijuana

Contrary to popular belief, marijuana can be addictive. While marijuana is not as addictive as substances like opioids or stimulants, some individuals can develop a dependence on it and may experience symptoms of withdrawal upon cessation of use.



Users of marijuana can experience psychosis

Research demonstrates that individuals who use marijuana and have a predisposition to psychosis may experience psychotic effects as a result of this drug. Additionally, prolonged use can lead to anxiety and depression.



Marijuana use causes short and long-term cognitive impairment

Marijuana use can lead to both short-term and long-term cognitive impairments. In the short-term, it can disrupt memory, attention, and learning abilities. Prolonged and heavy marijuana use, especially in adolescents, can make it hard for them to think and learn even after they stop using marijuana.



Prevalence

18%

18% percent of Americans have used marijuana at least once making it the most commonly used federally illegal drug in the United States.

3 in 10

3 in 10 people who use marijuana have marijuana use disorder which is a clinical diagnosis used to describe a problematic pattern of marijuana use that leads to significant distress or impairment in various areas of life.

Opiates

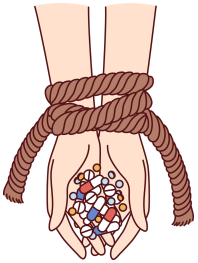
Opiate abuse is a widespread issue with devastating consequences. Opiates are powerful pain relievers prescribed for severe pain, but they can also be highly addictive. Abuse involves taking opiates without a prescription, taking higher doses than prescribed, or using them for non-medical purposes. This can lead to addiction, overdose, and long-term health problems.

Opiates Abuse Facts



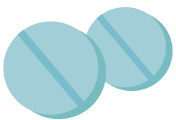
Opiates can be used for both medical and non medical purposes

Opiates are often prescribed to alleviate severe pain. However, when used outside of a legitimate medical context, opiates can be subject to misuse and abuse for their euphoric effects, leading to addiction and various health risks.



Opiates are highly addictive

Opiates are highly addictive substances, leading to a strong physical and psychological dependence in users. Their potent effects on the brain's reward system can quickly lead to cravings and withdrawal symptoms upon cessation, making addiction a significant risk for those who use these drugs.



Synthetic opioids fuel the overdose crisis

Fentanyl is a synthetic opioid that is extremely potent (50 times stronger than heroin) and poses a significant risk for misuse, addiction, and overdose. The devastating rise of overdoses can be greatly attributed to synthetic opioids like fentanyl.



519.38%

Overdose (OD) deaths involving opioids increased 519.38% from 1999 to 2019.



Almost 50,000 people die every year from opioid overdose. Additionally opioids are a factor in at least 7 out of 10 overdose deaths.

Porn Addiction

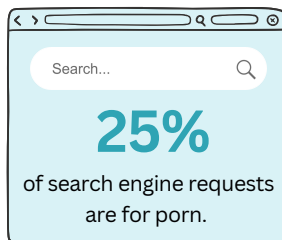
To not be confused with Sex Addiction Disorder, Porn Addiction Disorder refers to an emotional dependence on pornography. Addiction alters the body's dopamine system causing the individual to continue to participate in an activity, even if it results in problems with their loved ones or their livelihoods. Unlike sex additions, an individual is able to watch porn alone and create a space of isolation.

Barriers to Treatment

Individuals often find themselves dealing with a combination of feelings like shame, guilt, and low self-esteem. The longer this addiction goes untreated the individuals may neglect their partner, lose their job, or have fractured relationships with others.

The most common treatment for Porn Addiction Disorder is:

- Cognitive Behavioral Therapy
- Acceptance and Commitment Therapy
- Psychodynamic Psychotherapy
- Medication



10 signs to watch out for

1. You can't stop
2. You want more
3. You've lost time
4. You've lost interest in sex
5. You're more demanding
6. You've lost attraction
7. You're in physical pain
8. You're losing money
9. You're distracted
10. You're angry



1 in 6

**Women struggle with
porn addiction.**

Sex Addiction

Compulsive sexual behaviors refer to excessive sexual thoughts and desires that can't be controlled. This intense focus on sexual fantasies and urges often causes distress and problems in relationships and other areas of an individual's life. They may participate in these sexual experiences to a degree that they feel it's beyond their control.

- Masturbation
- Sexual arousal via text
- Multiple sexual partners
- Use of pornography
- Paying for sex



Complications

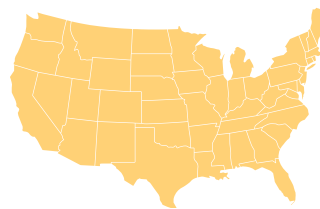
1. Lack of healthy relationships
2. Decrease work performance
3. Financial problems
4. Health consequences due to pregnancy or sexually transmitted infections
5. Risk of substance abuse
6. Mental health struggles
7. Problems with the law

Should I seek help?

Seeking help from a professional can be difficult due to how personal the matter is. Getting the right treatment can help the individual gain control of their relationship and livelihood.

Ask yourself...

- Can I manage my sexual impulses?
- Am I distressed by my sexual behaviors?
- Are my sexual behaviors hurting my relationship?
- Are my sexual behaviors affecting my work?
- Are my sexual behaviors getting me into legal problems?
- Do I try to hide my sexual behaviors?



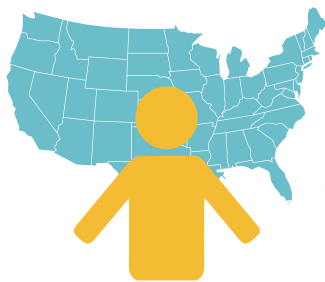
Hypersexuality appears to affect about 3 to 10% of the U.S. population.

Social Media Addiction

Like other behavioral additions, excessive use of social media can have a negative impact in the way that the brain processes pleasure and reward. On average, individuals spend more than 6 hours everyday on social media.

When do I know my social media use could turn into an addiction?

- When you're overly concerned about social media.
- When you have an uncontrollable urge to use social media.
- When the time spend using social media impairs relationships with others and work.
- When you use social media to forget personal problems persistently.
- When you experience withdrawal symptoms and feel restless if you're not using social media.



Experts estimate up to 10% of people in the United States have social media addiction.



Negative Effects

A well-balance use of social media can come with some benefits. However, increase time can come with a few negative effects.

1. Low self-esteem
2. Comparing yourself to others
3. Increase isolation and loneliness
4. Exposure to cyber-bullies
5. Disruptive sleeping patterns
6. Decrease physical activity
7. Poor performance at school/work
8. Depressive symptoms
9. Exposure to misinformation
10. Fracture relationships

Stimulants

Stimulant abuse is a significant concern, especially among students and young adults. These medications, like Adderall and Ritalin, are prescribed to treat attention disorders but can be abused for their stimulating effects. This can lead to addiction, cardiovascular problems, and mental health issues. Stimulants also include drugs such as cocaine and Methamphetamine which are highly addictive and potent.



Stimulant Abuse Facts

Stimulant abuse causes physical health consequences



Stimulant abuse can lead to severe physical and psychological health consequences. Prolonged misuse of stimulants like amphetamines or cocaine can result in cardiovascular problems, including high blood pressure, irregular heartbeats, and even heart attacks.

Stimulants are used both medically and non medically



Stimulants are used in the treatment of ADHD and narcolepsy. These stimulants can still be abused by taking the drug in another way than intended. Illegal stimulants, such as cocaine, bath salts, and methamphetamines.

Stimulant abuse can lead to serious mental health issues

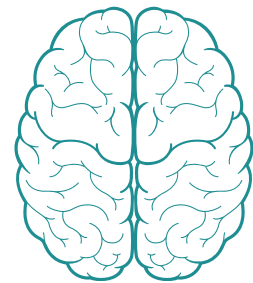


Users may experience anxiety, paranoia, hallucinations, and in some cases, stimulant-induced psychotic disorders, which can be long-lasting and challenging to treat.

Prevalence

20%

It is estimated that 20% of college students abuse prescription stimulants.



Due to the highly addictive nature of methamphetamines, and how the substance alters the users brain chemistry, these users are the most challenging to treat among other drug users.

Substance Abuse & Addiction

About Substance Abuse & Addiction

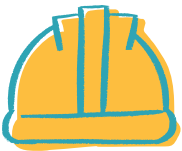
Substance and alcohol are often used to self-medicate from heightened stress or psychological distress. This often can cause behavioral issues or relationships to be damaged. Substance use disorder (SUD) is a treatable mental disorder that affects a person's brain and behavior, leading to their inability to control their use of substances, such as legal or illegal drugs, alcohol, or medications.



Substance Abuse & Addiction Facts

Substance Abuse in the Workplace

According to the National Safety Council, jobs in construction, truck driving, mining, and some service industries have higher rates of alcohol and substance use disorders which is a medical condition characterized by uncontrollable use of alcohol or other substances despite the negative consequences.



Impact of Substance Abuse

Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.



Statistics

Only 10.3 percent of people with SUD received SUD treatment this past year.



17 Million

U.S. adults experienced both a mental illness and a substance use disorder in 2020.



Individuals resort to substance and alcohol abuse to cope with work stress.

Trauma

About Trauma

Across the globe, exposure to at least one traumatic event is the norm. The American Psychiatric Association (2013) defines trauma as experiencing an event in which a person is faced with “actual or threatened death, serious injury, or sexual violence.” Traumatic events include, but are not limited to war or combat, threatened or actual physical / sexual assault, being kidnapped, experiencing wartime violence, natural or human-made disasters, and severe motor accidents. Experiencing trauma can have lifelong effects on mental, physical, relational, and spiritual health. Seeking support and navigating these challenges early on can positively influence a persons overall health following trauma exposure.



Trauma Facts

Childhood Trauma



In the US, 64% of adults report experiencing at least one adverse childhood experience (ACE). ACEs are forms of childhood trauma, which include experiencing or witnessing violence, abuse, or neglect; death of a loved one by violence; unstable parent support; or a caregiver being imprisoned. These experiences negatively impact learning, relationships, health, brain development, attention and decision making in children.

Trauma in Women



Globally, it is reported that 1 in 3 women will experience interpersonal violence either physically or sexually at some point in their life. Women are more likely than men to develop Post Traumatic Stress Disorder (PTSD) when exposed to the same traumatic experience.

Trauma in Men



While men and women can experience the same types of sexual interpersonal trauma, men are likely to experience traumatic events related to accidents, disasters, war or combat, or nonsexual physical assaults. The highest probability of PTSD results from interpersonal violence and military combat.

Prevalence
60-70%

of people experience at least one exposure to a traumatic event in their lifetime.



Globally (736 million), or 1 in 3 women will experience an interpersonal trauma (physical or sexual) at some point in their life.

Vaping

Vaping is often perceived as a safer alternative to traditional smoking, but it carries its own set of risks. The increase in popularity of e-cigarettes has contributed to many health risks for young people because of the excessive use of vapes which often have high-nicotine content. This leads to potential nicotine addiction, lung damage, and other health complications.

Vaping Abuse Facts



Young people are at risk for vaping abuse

Many young individuals are attracted to vaping due to its perceived social acceptance, marketing practices that target young people, enticing flavors, and the misconception that it is less harmful than traditional smoking.



Vaping can cause serious long-term health consequences

Vaping abuse can lead to serious health consequences, including respiratory problems, cardiovascular issues, and potential long-term lung damage, even in young and healthy individuals.



The use of vapes is rapidly rising

Vaping culture is becoming mainstream, especially for young people. Social media, the appealing look and flavors of vapes, and the relative accessibility of these devices have contributed to the shocking increase in vaping and nicotine addiction.



Prevalence 1 in 7

In 2022, about 1 of every 7 high school students reported that they had used electronic cigarettes in the past 30 days.



The United States has **9 million** people who regularly vape, giving the U.S. the highest number of vaping consumers in the world.

Video Gaming Addiction

Also known as Internet Gaming Disorder, which includes gaming on the internet or any electronic device. The gaming habits become all-consuming for the individual, significantly impacting their daily functionality. It also has a negative consequence to their relationships, school, and workplace life.

Behavioral Risk Factors

- Spending a significant amount of money on gaming.
- Increase weekday gaming time.
- Giving up other activities they enjoyed to gaming.
- Attending offline gaming community meetings.
- Having a gaming community.
- Relationship and work stability problems due to gaming.



A study suggests, that

Males

have a genetic predisposition to be more susceptible to compulsive gaming.

Treatment Options

- **COGNITIVE BEHAVIORAL PROBLEM (CBT)**
- **FAMILY THERAPY**
- **GROUP THERAPY**
- **SUPPORT GROUPS**



When is escapism a bad thing?

A long discussion around gaming and escapism has surrounded the debate around Gaming Addictions. When gaming is an outlet for stress or dealing with tough emotions, individuals are engaging in healthy coping skills for distraction. However, when this starts to alter reality and it's the only answer to dealing or ignoring issues. Gaming can become a problematic tool rather than a helpful one.



GTHU RESOURCES AND REFERRAL NETWORK

GTHU's Resources, Digital Media Library, and Referral Network are designed to support educators with accessible, practical tools that strengthen student mental-health support systems. These resources provide reliable information, skill-building content, and guided pathways to additional support, helping educators respond with clarity and confidence.

Through on-demand digital media, printable resources, and a trusted referral network, GTHU equips school staff to reinforce classroom learning, support student regulation and well-being, and connect students and families to appropriate services when additional care is needed. Together, these resources promote early intervention, informed decision-making, and coordinated support within a safe, student-centered framework.

“

After taking this training, I feel more confident recognizing mental health stigma and misinformation about mental illness. I'm better equipped to respond to someone in distress and more prepared to guide them toward the professional help they need.

”

LaJohn B.
*Empower Faith Communities
Training Participant*

EMPOWER SCHOOLS

DIGITAL MEDIA RESOURCES

Educational Webinars

Access on-demand, expert-led webinars designed to equip educators and school leaders with practical, trauma-informed mental health knowledge. Available through learn.gthu.org and the Gateway to Hope YouTube channel, these digital learning experiences cover key mental health topics, early intervention strategies, and real-world applications that can be used immediately in school settings.



SCAN ME

Grounding Techniques

Explore proven, easy-to-use grounding techniques that help calm the nervous system, reduce anxiety and stress, and restore emotional balance. These tools are designed for use with students, staff, and families—supporting emotional regulation, focus, and a greater sense of safety during moments of overwhelm or distress.



SCAN ME

Empower Schools Educator Resource Portal

Your one-stop resource center for educator, administrator, and youth-serving professionals. The Empower Schools Educator Resource Portal brings together educational webinars, grounding techniques, mental health fact sheets, classroom-ready lesson plans, resilience posters, and referral support tools—all in one place. Users also gain access to the GTHU app, providing ongoing learning, digital media resources, and practical supports to strengthen school-wide mental health and student well-being.



SCAN ME



THE HOPE LINE & GRACE CARDS

HHCI® Hope and Healing Center & Institute

The Hope Line

(832) 831-7337

Relational Issues | Work Stress | Recent Trauma | Mental Health Resources

Open daily, 5 PM - 8 PM CT

www.hhci.org In case of emergency, please call 911.

HHCI® Hope and Healing Center & Institute

La Línea de la Esperanza

(832) 831-7337

Problemas Relacionales | Estrés Laboral | Traumas Recientes | Recursos de Salud Mental

Abierto todos los días de 5 PM - 8 PM CT

www.hhci.org En caso de emergencia, llame al 911.

Gateway to Hope
Training Program of HHCI

Grace, Friendly AI Assistant

Have questions about mental or behavioral health? Talk to Grace.

Our friendly AI assistant can guide you in supporting yourself or a loved one.

Things you can ask Grace:
"Am I depressed? Do I need medication?"
"Is my child an addict?"
"What do I do when my family member lashes out at me?"
And much more!

In case of emergency, please call 911.

Gateway to Hope
Training Program of HHCI

Grace, Asistente de Inteligencia Artificial Amigable

¿Tiene preguntas sobre salud mental o conductual? Hable con Grace.

Nuestra amigable asistente de inteligencia artificial puede guiarlo para que pueda ayudarse a sí mismo o a un ser querido.

Cosas que puedes preguntarle a Grace:
"¿Estoy deprimido? ¿Necesito medicación?"
"¿Mi hijo es adicto?"
"¿Qué hago cuando un familiar me ataca?"
"¡Y mucho más!"

En caso de emergencia, llame al 911.

GATEWAY TO HOPE

gatewaytohope@mentalhealthgateway.org

346.335.8700

TOP RESOURCES

Unlock the Power of Knowledge with Grace



Do you have questions about behavioral health or addiction? **Talk to Grace, our friendly AI assistant**, to find out more about how to help yourself or a loved one. She can provide you with information and resources for your behavioral health and addiction questions. Visit GTHU.org/Wellness-and-Brain-Health/ to access all its great resources. Our goal is to empower you with knowledge and support, ensuring you never feel alone on your journey to better mental health.

The Hope Line

Are you going through a tough time? Do you need someone to talk to? The best thing you can do is call **The Hope Line at 832-831-7337** from 5-8pm. Talk with someone who gets you. You are not alone. For more information, visit HopeandHealingCenter.org/Get-Help-Hope-Line

Mental Health Gateway App

Offers evidence-based training, tested tools, and ongoing support for anyone looking to compassionately support those in distress and help build a community-based response to the mental health crisis.



DOWNLOAD
OUR MENTAL
HEALTH
GATEWAY APP

Follow Us on Social Media & Stay Connected



[@GatewayToHope](https://www.instagram.com/GatewayToHope)

RESOURCES CONTINUED

Empower Trainings

Mental and behavioral health issues can affect anyone, anywhere. Imagine having the power to make a positive impact on those in mental distress, right at your fingertips. Our evidence-based trainings are created to build your knowledge and response techniques within faith communities, schools, and workplaces. Explore a life-changing journey of mental health awareness and become a beacon of hope in your community. Visit our [Training Course Catalog](#) and start your transformative journey today!

Mental Health Coach Training

Looking to further your mental health education? Our advanced [Mental Health Coach Training](#) prepares you to support those in mental distress with therapeutic peer coaching, becoming a beacon of hope, supporting and guiding individuals to the mental health resources they need. When you complete your training, you will have the opportunity to join a community of coaches. Begin by participating in our Forums and Groups in the [Learning Portal](#), networking with other Mental Health Coaches during our regular online gatherings and join a specialization group. The specialization trainings for you to explore are Addiction & Behavioral Health Disorders, Child & Adolescent Mental Health, Aging & Elder Care, and Trauma.

Additional Support

Our GTHU Team is here for you. If you have any questions on launching your mental health ministry or need help with our trainings, please reach out to GatewaytoHope@mentalhealthgateway.org



This training reinforced the importance of listening openly and attentively, and of observing the behaviors and actions of each child and young person. I would love to see more workshops offered with greater continuity.



LaJohn B.
*Empoderar Escuela
Training Participant*

GTHU RESOURCES NOW AVAILABLE IN SPANISH

Mental health knows no language barriers, and we are committed to providing accessible support for everyone. That's why we offer all trainings and resources in Spanish, designed to equip individuals and ministries with the tools they need to address mental health challenges effectively.

From practical guides and fact sheets to training materials and educational content, our Spanish-language resources are culturally relevant and easy to use. Additionally, our referral network includes bilingual professionals to ensure no one has to navigate this journey alone. Together, we can build stronger, more compassionate communities—no matter the language.



AN EMPOWER SCHOOLS RESOURCE



GTHU.ORG