

STRENGTHENING SCHOOL-BASED MENTAL HEALTH LITERACY IN TEXAS

AN EVALUATION OF EDUCATOR MENTAL
HEALTH TRAINING PROGRAMS AND
IMPLEMENTATION STRATEGIES

WESTLAKE HEALTH CONSULTING, LLC
COMMUNITY CENTERED. RESEARCH INFORMED.



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About HHCI

The Hope and Healing Center & Institute (HHCI) provides no-cost mental health support, education, and resources to individuals, families, and communities. Through Gateway to Hope (GTHU), our training program, we equip communities with practical skills and evidence-based trainings to respond to mental health needs with confidence and compassion.

Research is central to HHCI's mission. Through the ongoing evaluation of our clinical services and education programs, HHCI studies the effectiveness of its models to better understand what improves outcomes, expands access to care, and strengthens communities. Findings from this work drive continuous improvement across the organization and contribute to the development of innovative, evidence-informed approaches that can be implemented in healthcare settings, faith communities, schools, workplaces, and communities nationwide.

Clinical & Supportive Services

Reimagining Mental Health Care

Clinic

- Individualized, in-person therapy for up to 12 months
- Telepsychiatry & medication management
- Case management & referrals
- Consulting for family members
- Faith integrated
- Group therapy

Call: 713-871-1004 (ext. 570)

Support Groups

- *Addiction (12-step: AA, GA, SAA, and more)*
- *Mental health* (trauma recovery, grief support, and family-focused)
- *Caregiving* (Alzheimer's, mental distress in older adults, ethics, and more)

The Hope Line - mental health coaching over the phone, providing another accessible pathway to hope, healing, and care.

Open daily | 5 - 8pm | Offered in English and Spanish

Call: 832-831-7337

Education and Training

Raising Awareness and Reducing Stigma

Gateway to Hope (GTHU)

Providing Evidence-Based Mental Health Training to Individuals, Faith Communities, Schools and Workplaces

- Live online and asynchronous training, educational events and free resources via GTHU Learning Portal, including Mental Health Coaching
- Ongoing support to individuals, faith communities, schools and workplaces
- Vetted provider and community referral access via Mischer Behavioral Health Resource Center, Grace an AI assistant, and The Hope Line.

Learn more about HHCI at HHCI.org

**If you are experiencing an emergency, please call 911.*

Follow Us on Social Media!

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 [Hope and Healing Center & Institute](https://www.linkedin.com/company/hope-and-healing-center-institute)



MATTHEW S. STANFORD, Ph.D.

CHIEF EXECUTIVE OFFICER

Matthew S. Stanford, PhD, is Chief Executive Officer of the Hope and Healing Center & Institute (HHCI), where he is leading the effort to reimagine how mental health care is delivered and accessed. Since assuming leadership in 2015, he has transformed HHCI from a respected local nonprofit into a nationally recognized leader in developing innovative, community-based models of mental health care. Under his leadership, HHCI has expanded access to compassionate, evidence-based services while training more than 70,000 clergy, healthcare professionals, educators, caregivers, workplace leaders, and community members to recognize, respond to, and support those experiencing mental health challenges.



A neuroscientist by training and an innovator by nature, Dr. Stanford has spent more than three decades challenging conventional approaches to mental health care. Rather than accepting the limitations of traditional systems, he has dedicated his career to developing practical, scalable models of care that integrate clinical excellence, community partnerships, technology, and faith. His work is driven by a simple conviction: every person deserves timely, compassionate, and effective mental health care, regardless of financial resources or where they first seek help.

Under Dr. Stanford's leadership, HHCI has pioneered programs that extend mental health care beyond the walls of traditional clinics. By equipping churches, healthcare systems, schools, workplaces, and community organizations to become active partners in mental health care, HHCI has helped create a continuum of support that identifies needs earlier, reduces barriers to care, and strengthens long-term recovery. This vision has positioned the organization at the forefront of a growing movement to make mental health care more accessible, collaborative, and community-centered.

Before joining HHCI, Dr. Stanford served as Professor of Psychology and Neuroscience at Baylor University, where his research advanced the understanding of aggressive behavior and the relationship between faith and behavioral health. Today, he continues to serve as an adjunct faculty member at Baylor College of Medicine, UTHealth Houston, and Houston Methodist's Institute for Academic Medicine, ensuring that HHCI's work remains grounded in scientific evidence while addressing real-world community needs.

An internationally recognized authority on faith and mental health, Dr. Stanford is the author of five books, including *Grace for the Afflicted* and *Madness and Grace*, works that have helped churches, clinicians, and families better understand mental illness and recovery. His work has been featured by *The New York Times*, *The Wall Street Journal*, *USA Today*, *U.S. News & World Report*, and *Christianity Today*. He is a Fellow of the Association for Psychological Science and remains committed to translating research into practical solutions that improve lives.

Known for pursuing ideas others consider impossible, Dr. Stanford believes innovation is most meaningful when it expands access to care for those who need it most. His vision is to reimagine mental health care by creating practical, evidence-based models that empower communities to become part of the solution, bringing hope, healing, and recovery within reach of every person and every family.

Strengthening School-Based Mental Health Literacy in Texas

An Evaluation of Educator Mental Health Training Programs and Implementation Strategies

Gateway to Hope | Mental Health Literacy Project | Updated August 2, 2026

EMBARGOED UNTIL Wednesday, August 5, 2026, at 10:00 a.m. CT

27

Programs Initially
Reviewed

10

Programs in Final
Analysis

9/10

Texas HB3 Compliant

25

CFIR Dimensions
Evaluated

Introduction

Schools are increasingly recognized as essential partners in supporting student mental health. Because educators often have the earliest opportunity to observe changes in student behavior, emotional well-being, and academic engagement, school-based mental health literacy has become an important component of efforts to identify concerns early, connect students with appropriate support, and strengthen overall student well-being. In Texas, state requirements for educator mental health training have created both opportunities and implementation challenges for school districts. Available programs vary in educational approach, accessibility, cost, evidence base, implementation requirements, and alignment with district needs. This executive summary presents findings from an independent landscape review of school-based mental health literacy training programs available to Texas schools. Conducted by Westlake Health Consulting, LLC and commissioned by the Hope and Healing Center & Institute (HHCI), the review examined program characteristics, implementation considerations, accessibility, and alignment with evidence-informed practices that support adoption and long-term sustainability. EMPOWER Schools was one of 10 programs included in the comparative analysis. The findings are intended to inform decision-making by school leaders, policymakers, and community partners rather than endorse a single program.

Background & Policy Context

Youth mental health has emerged as a defining public health challenge of the 2020s. The U.S. Surgeon General's 2021 Advisory, combined with CDC documentation of rising anxiety, depression, and suicidal ideation among adolescents, and the post-COVID disruption of school-based mental health infrastructure, have elevated school-based MHL training from a programmatic option to a policy imperative. Teachers and school staff are the primary first-line detection and referral infrastructure for youth experiencing mental health challenges - and research consistently documents that staff with adequate MHL are significantly more likely to identify students in distress and facilitate timely care.

HB 3 (LegiScan, 2023) established a statutory framework requiring districts to provide evidence-based mental health first aid training to all school employees and authorizing state allotment funding for approved programs. HHCI developed EMPOWER Schools to provide structured, free, fully virtual MHL training designed for teachers, administrators, and school staff, eliminating cost and access barriers for districts of all sizes.

Methodology

The landscape search was conducted between January and March 2026 using combined web-based and AI-assisted searches across Google, Safari, organizational websites, and searches of professional associations (ASCD, CASEL, NASP,

NASW) and federal mental health networks (MHTTC, NCTSN, SAMHSA). All results were independently verified through direct program website review.

Programs were included if they were: (1) designed for school-based settings (K-12 or adult professionals serving K-12 students), (2) offered structured training with a defined curriculum or certificate pathway, (3) designed for adult participants (teachers, administrators, counselors, or school staff), and (4) addressed mental health recognition, response, referral, or wellness promotion. Clinical licensure programs and general wellness platforms without MHL-specific content were excluded. Twenty-seven records were initially identified; 17 were screened out; 10 programs were included in the final CFIR analysis across 25 dimensions organized into six domains: Innovation Characteristics, Outer Setting, Inner Setting, Characteristics of Individuals, Implementation Process, and Evaluation Outcomes.

Key Finding: EMPOWER Schools is the only free, fully virtual, HB 3-compliant MHL training program in the landscape, and the only program with an active pathway to TEA reimbursement approval, making it the highest-leverage option for Texas district-wide adoption without budget barriers.

Overall Rankings & Composite CFIR Scores

EMPOWERSchools ranks 2nd overall among all 10 programs assessed with a composite CFIR score of 4.36, trailing only Youth MentalHealth First Aid (YMHFA; 4.48), which benefits from decades of national implementation, RCT-level evidence, and explicit statutory recognition under HB 3. EMPOWER Schools outperforms YMHFA on Innovation Characteristics (4.50 vs. 4.17) and InnerSetting (4.60 vs. 4.00), the two domains most directly linked to program design quality and school-level deployability.

TIER 1 (3.80+)	YMHFA (4.48) EMPOWER Schools (4.36) Classroom WISE (4.08) Notice. Talk. Act. (3.88)
TIER 2 (3.00-3.79)	LEAD School MH Certification (3.68) MH Essentials for Educators (3.68) MH Essentials for Coaches (3.68) William James College (3.64) School-Based PFA (3.20)
TIER 3 (Below 3.00)	School Mental Health Program - The Reach Institute (2.84)

Domain-Level Comparative Performance

EMPOWERSchools ranks first or second in every CFIR domain. Its strongest performance is in Inner Setting (4.60, #1) and InnovationCharacteristics (4.50, #1), reflecting intentional design for scalable, low-barrier implementation. Evaluation Outcomes-the lowest-scoring domain across the entire landscape (mean 3.40) - represents the primary growth opportunity for all programs,including EMPOWER Schools.

CFIR Domain	Score	Rank	Comparative Position
Innovation Characteristics	4.50	#1 of 10	Leads on adaptability, design quality, and cost-free access
Outer Setting	4.25	#2 of 10	Strong HB 3 alignment; gap in peer pressure/cosmopolitanism
Inner Setting	4.60	#1 of 10	Strongest domain; leads all programs on deployability
Characteristics of Individuals	4.00	#1 (tied)	Above average; tied with YMHFA and Classroom WISE
Implementation Process	4.20	#2 of 10	Strong TA ecosystem; planning and evaluation are gaps
Evaluation Outcomes	4.50	#2 of 10	Reach documentation is the primary near-term priority

EMPOWER Schools' Comparative Advantages

EMPOWER Schools holds a uniquely differentiated position in the landscape. No other high-performing program simultaneously offers free access, fully virtual self-paced delivery, and HB 3 compliance. On individual CFIR dimensions, EMPOWER Schools scores 5/5 on Adaptability, Cost, Patient Needs & Resources, External Policy & Incentives, Structural Characteristics, Networks & Communications, Implementation Climate, Demonstrated Reach, and Planning - a performance profile that reflects intentional design for scalable, low-barrier, policy-aligned implementation.

Comparative Summary: EMPOWER Schools occupies a strategically differentiated position - free, virtual, HB 3-compliant, and TEA reimbursement-eligible. Its primary comparative gap relative to YMHFA is statutory recognition and RCT-level evidence, and both are directly addressable through policy engagement and the evaluation infrastructure being built through the Gateway to Hope study.

Texas HB 3 Policy Landscape

Nine of ten programs in the landscape meet or can meet HB 3 (LegiScan, 2023) requirements, reflecting the statute's broad definition of evidence-based mental health first aid training and raising the baseline for policy alignment. YMHFA is the only program explicitly named in HB 3, conferring an initial statutory advantage. However, YMHFA's fee structure creates a cost barrier for smaller and rural districts. EMPOWER Schools' pending TEA reimbursement approval, combined with its free, virtual delivery model, would make it the most accessible HB 3-compliant option available, removing cost barriers entirely while maintaining full policy compliance.

Strategic Lever: EMPOWER Schools' TEA reimbursement pathway is its single most important near-term strategic lever in the Texas market. Approval would make it the only program offering districts both zero-cost access and state reimbursement eligibility - a combination no current program can match.

Field-Wide Gaps & Emerging Opportunities

Outcomes (mean 3.40) is the lowest-scoring domain landscape-wide, driven by gaps in Demonstrated Reach and Implementation Status for newer programs, reflecting a field investing in development and delivery before systematic impact documentation. Peer Pressure/Cosmopolitanism (mean 3.2) is the single lowest-scoring individual dimension across all programs, indicating that normative adoption pressure and cross-district replication evidence are largely absent. Evidence Strength (mean 3.5) is a field-wide gap: only YMHFA and the Reach Institute program hold RCT-level evidence. The first program beyond YMHFA to publish peer-reviewed outcome data specific to the school MHL context will hold a decisive comparative advantage.

Conclusions & Strategic Recommendations

This analysis confirms that EMPOWER Schools holds a strong, strategically differentiated second-place position in the school-based MHL training landscape. The structural characteristics required for district-wide scaling are in place. The critical investments needed to advance from second place to field leadership are concentrated in evidence strength, reach documentation, and policy engagement.

01	Prioritize TEA Reimbursement Approval Approval would make EMPOWER Schools the only zero-cost, reimbursement-eligible HB 3-compliant program in Texas - a combination no current competitor can match and the highest-leverage near-term policy investment.
02	Commission a Quasi-Experimental or RCT Evaluation Publishing peer-reviewed outcome data specific to the school MHL context is the single most effective action to close the evidence gap with YMHA and establish EMPOWER Schools as the evidence-based alternative to a fee-based program.
03	Build and Publish Demonstrated Reach Data Systematically collect participant counts, school and district penetration rates, and geographic distribution. Report annually in an HHCI Impact Report. Peer Pressure/Cosmopolitanism - the lowest individual dimension at 3/5 - is directly addressable through documented multi-district adoption.
04	Develop a School Implementation Playbook Create a timeline, roles matrix, facilitation guide, and embedded evaluation plan to formalize EMPOWER Schools planning infrastructure and further differentiate it from less structured programs.
05	Pursue National Registry Listing and Conference Presence Target SAMHSA National Prevention Programs registry listing and visibility at national education conferences (CASEL, ASCD, NASP) to build normative adoption pressure and cross-state visibility beyond the Texas market.

For the full 25-dimension CFIR matrix, program profiles, and references, see the complete Landscape Analysis Final Report.

HOPE AND HEALING CENTER & INSTITUTE

GatewaytoHope | MentalHealthLiteracy Study

TEXAS SCHOOL POLICY REPORT: AT A GLANCE

EMBARGOED UNTIL Wednesday, August 5, 2026, at 10:00 a.m. CT

3

HB 3 Compliance Pathways

10

RequiredCompetencies (A–J)

2028–29

FullComplianceDeadline

900+

CharterCampusesOutside the
Mandate

What is HB 3? House Bill 3 (88th Texas Legislature, 2023) requires every Texas school district employee who regularly interacts with students to complete evidence-based mental health training, phased in through the 2028–2029 school year. It's the largest mandated mental health literacy training initiative in Texas history.

Why It Matters

- ✓ Districts are selecting training programs right now to meet the active 25% deadline.
- ✓ Competency coverage (not a program's name) is the real compliance bar under TEA's rule.
- ✓ Charter schools fall outside HB 3 entirely, opening a voluntary-adoption market.
- ✓ No mandated refresh cycle; training is one-time only, so first-entry positioning matters most.

The Three Pathways

- 1** Pathway 1 — TEA/HHSC/ESC recommended list. Lowest documentation burden.
- 2** Pathway 2 — Prior YMHFA or MHFA certificate. No retraining required.
- 3** Pathway 3 — Any locally selected program covering all 10 competencies. Empower Schools' door.

Where the Gaps Are

- ⚠ MHFA (Adult) does not fully address Competency C (child development / ACEs).
- ⚠ MHFA (Adult) does not fully address Competency G (support for students with IDD).
- ⚠ Neither YMHFA nor MHFA build in a dedicated staff-wellness component (Competency J).
- ⚠ Both are generalist programs and not written specifically for the K–12 school setting.

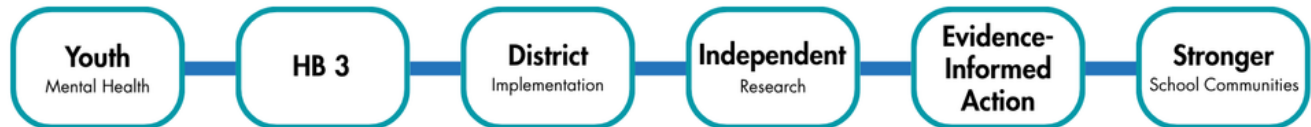
Empower Schools' Position

Full 10-competency coverage, with a documentation kit that closes the exact gaps found in both comparison programs, plus The Hope Line and ongoing post-training support.

Full details, evidence, and citations are available in the complete Texas School Policy Report and its four appendices.

INFOGRAPHICS:

From Policy to Practice



Research at a Glance



Mental Health Literacy – EMPOWER Schools Landscape Analysis & Comparative Analysis Final Report



Source: Hope and Healing Center & Institute Mental Health Literacy Project | Research conducted by Westlake Health Consulting, LLC.

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INFOGRAPHICS:



Program Rankings & Composite Scores

Rank	Program	Developer	Format	Cost	HB 3	Row Avg
1	Youth Mental Health First Aid (YMHFA)	Nat'l Council for Mental Wellbeing	In-person	Fee	✓	4.48
★ 2	Gateway to Hope – EMPOWER Schools	Hope & Healing Center & Institute	Virtual	Free	✓	4.36
3	Classroom WISE	MHTTC & National Center for School Mental Health (NCSMH)	Virtual	Free	✓	4.08
4	Notice. Talk. Act.® at School	APA Foundation	Online modules	Free	✓	3.88
5	LEAD School MH Certification	Let's Empower, Advocate & Do Inc.	Virtual	Fee	✓	3.68
5	Mental Health Essentials for Educators	Mental Health Collaborative, Inc.	Virtual/In-person	Free	—	3.68
5	Mental Health Essentials for Coaches	Mental Health Collaborative, Inc.	Virtual	Free	—	3.68
8	William James College – Leading Transformative MH	William James College – Behavioral Health Education and Leadership Series (BHELS)	Virtual/In-person	Cohort fee	✓	3.64
9	School-Based Psychological First Aid	Various / NCTSN	Virtual/In-person	Varies	✓	3.2
10	School Mental Health Program	The Reach Institute	Virtual	Fee varies	—	2.84

Source: Hope and Healing Center & Institute Mental Health Literacy Project | Research conducted by Westlake Health Consulting, LLC.

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