Artificial Intelligence in College Mental Health

Opportunities, Risks and Realities

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Today's Roadmap

01 The Technology

What generative AI is, in plain terms

02 The Behavior

What students are doing with it right now

03 The Response

How campuses can engage without overreaching

04 A Tool for Students

Hands-on session: support chatbot

05 A Tool for Clinicians

Hands-on session: clinical training platform

A Note Before We Begin

Disclosure

- I have no financial relationship with Elomia and no role in their company.
- I am the founder of Therapy Trainer, one of the two AI platforms being demonstrated today.
- AI assistance: Claude (Anthropic) was used to assist with slide design and copy refinement. All content, claims, and clinical interpretations are my own.

My goal today is to help you think clearly about where AI does and does not belong in your work.

What Is Generative AI?

AI uses **data**, **algorithms**, and **computing power** to simulate human reasoning. Two categories matter here:

Narrow AI

Designed to perform a single, specific task

Examples

- Siri, Alexa
- Google Translate
- Spam filters

Follows rules. Does not create.

Generative AI

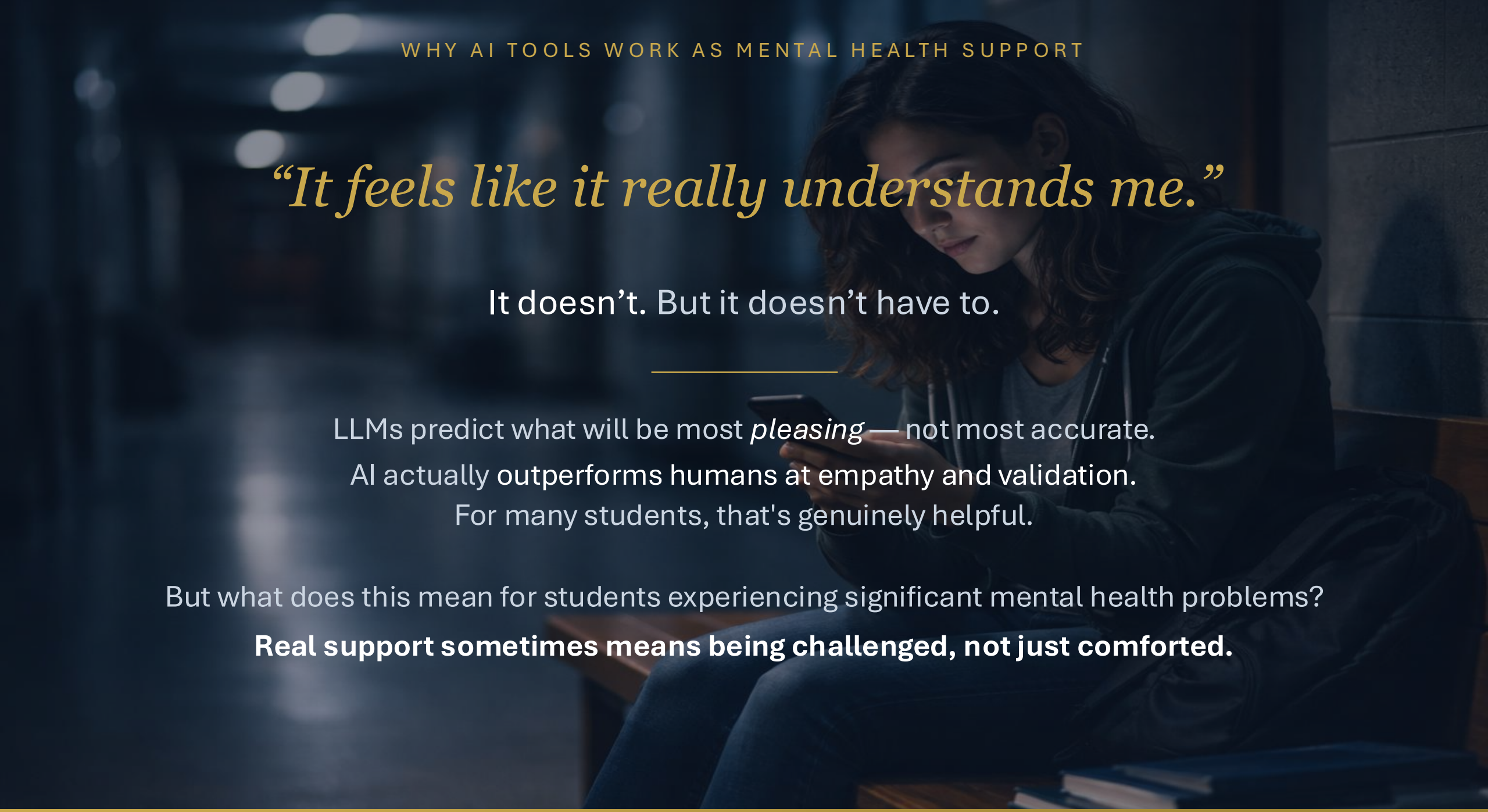
Creates *original* content from a prompt

Examples

- ChatGPT — text, conversation
- Midjourney — images and video
- Suno — music and audio

Learns patterns. Generates something new.

For the first time, a machine can hold a conversation that feels genuinely human — and students are noticing.



“It feels like it really understands me.”

It doesn’t. But it doesn’t have to.

LLMs predict what will be most *pleasing* — not most accurate.

AI actually outperforms humans at empathy and validation.

For many students, that's genuinely helpful.

But what does this mean for students experiencing significant mental health problems?

Real support sometimes means being challenged, not just comforted.

MAKING SENSE OF THE DATA

The Scale of the Shift

22%
of young adults use AI for mental health support

49%
of LLM users use them for mental health support

66%
use AI monthly or more; many weekly or daily

ChatGPT may be the largest mental health provider in the United States.
— Sentio University / Rousmaniere et al. (2025)

This is the first generation arriving on campus with mental health support in their pocket.

Robb & Mann (2025), Common Sense Media | Rousmaniere et al. (2025), Practice Innovations | McBain et al. (2025), JAMA Network Open

Teens Are Turning to AI

Among teens who use AI for emotional support

1 in 3

chose to discuss serious matters with AI instead of real people

1 in 3

find AI conversations as satisfying or more satisfying than real friends

~40%

apply skills learned from AI companions to real-life interactions

AI is becoming a **significant companion** and **first point of disclosure** for serious emotional topics.

Robb & Mann (2025), Common Sense Media

AI vs. Traditional Support

Among those who have used AI for mental health support

63%

say AI improved their mental health

39%

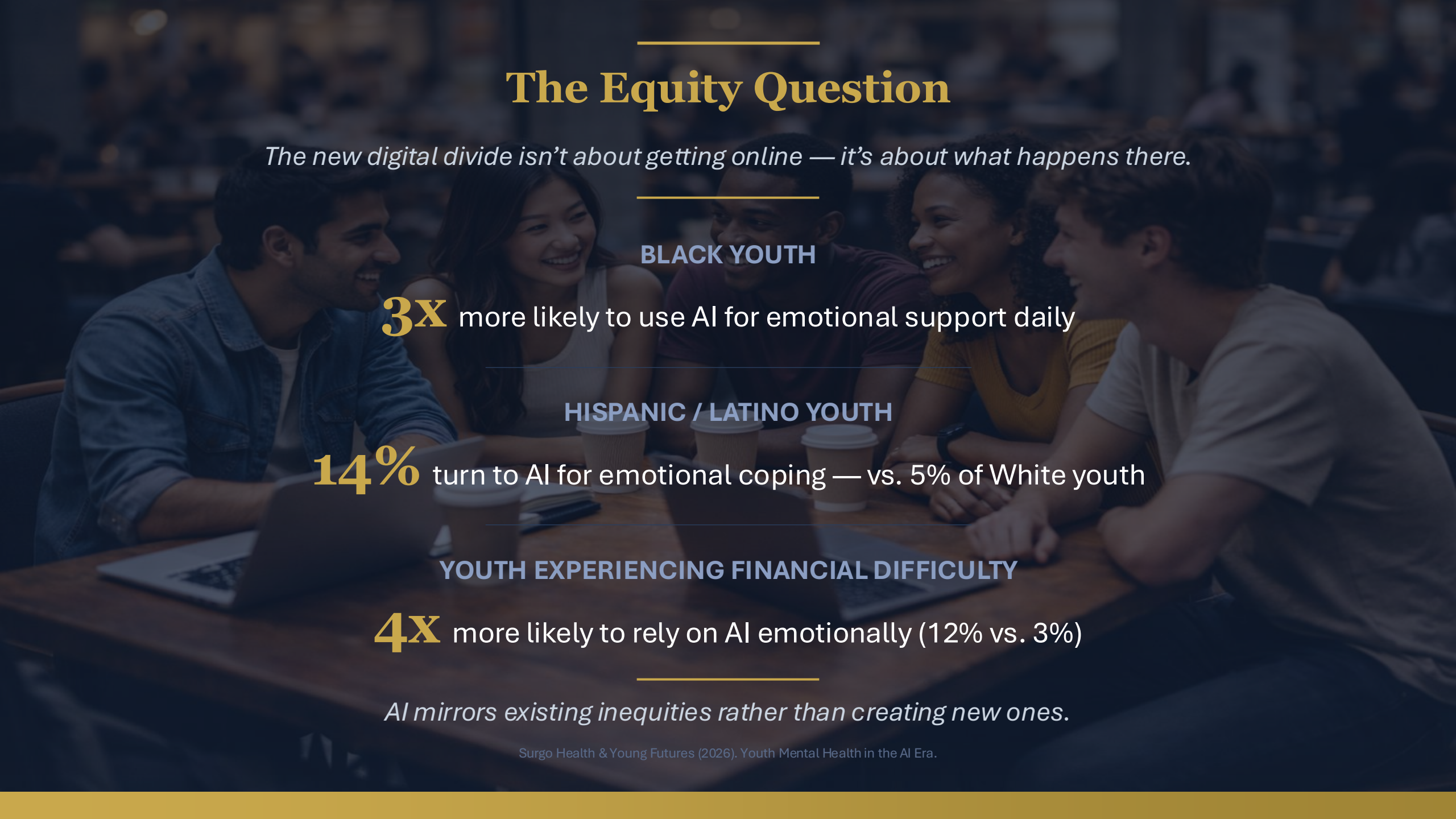
rate AI as helpful as therapy

36%

find it *more* helpful than therapy

For many, AI isn't a supplement — it's the preferred option.

Rousmaniere et al. (2025), Practice Innovations



The Equity Question

The new digital divide isn't about getting online — it's about what happens there.

BLACK YOUTH

3x more likely to use AI for emotional support daily

HISPANIC / LATINO YOUTH

14% turn to AI for emotional coping — vs. 5% of White youth

YOUTH EXPERIENCING FINANCIAL DIFFICULTY

4x more likely to rely on AI emotionally (12% vs. 3%)

AI mirrors existing inequities rather than creating new ones.

Surgo Health & Young Futures (2026). Youth Mental Health in the AI Era.

Student-Facing AI Tools

AI chatbots built for mental health — now being deployed on campuses.

WHAT THEY DO

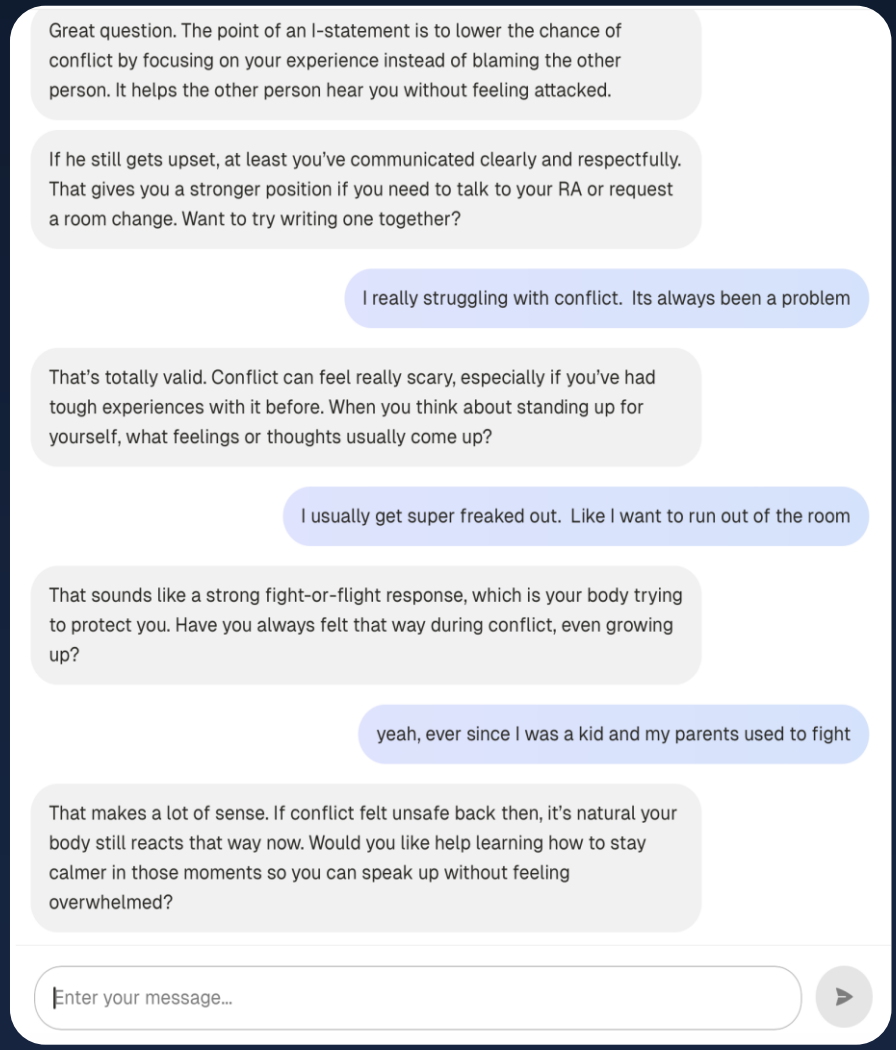
- On-demand conversational mental health, wellness and campus resource support

ADVANTAGES

- Confidential, Available 24/7, reducing stigma through anonymity
- Good for mild to moderate conditions
- Harm reductive

CONCERNS

- Risk of over-reliance and delayed professional help-seeking
- How would it manage a student in crisis?
- What is the impact of having instant access to support?



Clinician-Support AI Tools

AI that augments counselors behind the scenes — not student-facing.

WHAT THEY DO

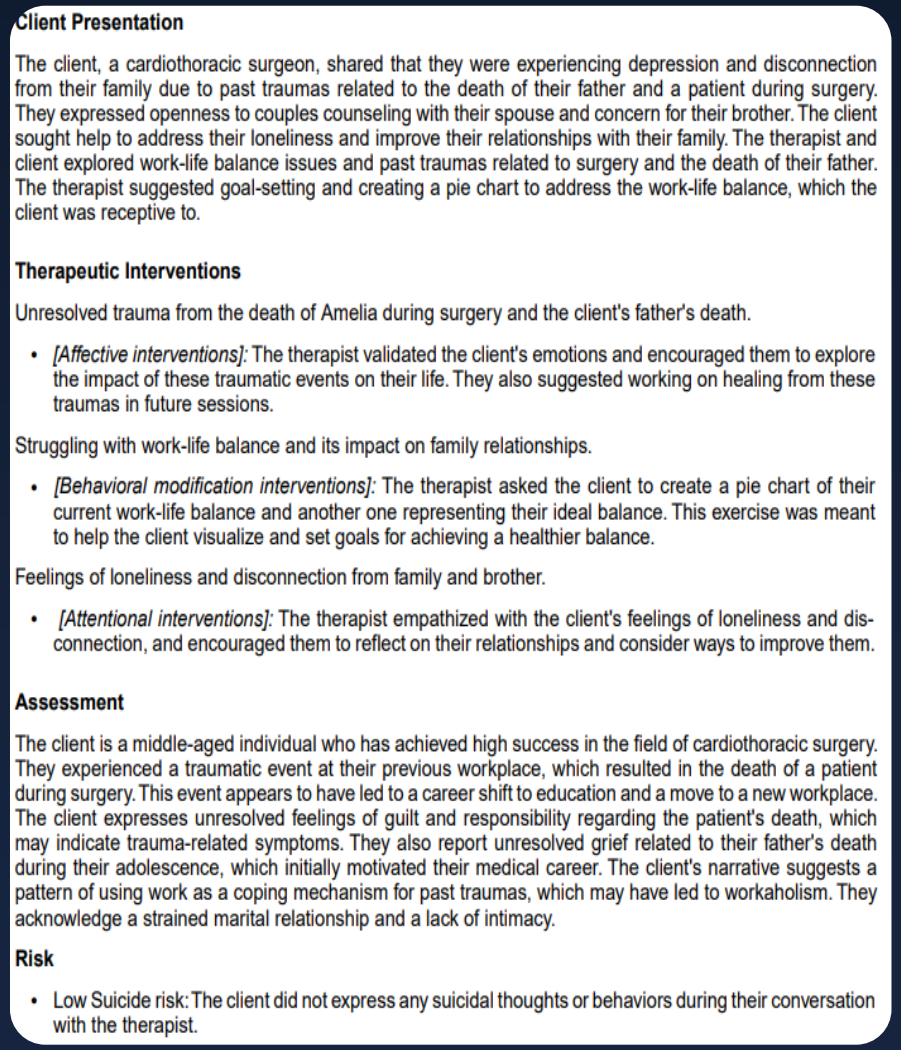
- Auto-generate session notes and treatment plans
- Conduct intakes and triage
- Extend care between sessions

ADVANTAGES

- Reduces burnout by allowing therapists to focus clinical work
- Can suggest novel approaches, augments the work done in session

CONCERNS

- AI-generated notes can hallucinate or omit key details
- Should an algorithm decide what is important to document?
- Does writing a note contribute to better care?



Client Presentation

The client, a cardiothoracic surgeon, shared that they were experiencing depression and disconnection from their family due to past traumas related to the death of their father and a patient during surgery. They expressed openness to couples counseling with their spouse and concern for their brother. The client sought help to address their loneliness and improve their relationships with their family. The therapist and client explored work-life balance issues and past traumas related to surgery and the death of their father. The therapist suggested goal-setting and creating a pie chart to address the work-life balance, which the client was receptive to.

Therapeutic Interventions

Unresolved trauma from the death of Amelia during surgery and the client's father's death.

- *[Affective interventions]:* The therapist validated the client's emotions and encouraged them to explore the impact of these traumatic events on their life. They also suggested working on healing from these traumas in future sessions.

Struggling with work-life balance and its impact on family relationships.

- *[Behavioral modification interventions]:* The therapist asked the client to create a pie chart of their current work-life balance and another one representing their ideal balance. This exercise was meant to help the client visualize and set goals for achieving a healthier balance.

Feelings of loneliness and disconnection from family and brother.

- *[Attentional interventions]:* The therapist empathized with the client's feelings of loneliness and disconnection, and encouraged them to reflect on their relationships and consider ways to improve them.

Assessment

The client is a middle-aged individual who has achieved high success in the field of cardiothoracic surgery. They experienced a traumatic event at their previous workplace, which resulted in the death of a patient during surgery. This event appears to have led to a career shift to education and a move to a new workplace. The client expresses unresolved feelings of guilt and responsibility regarding the patient's death, which may indicate trauma-related symptoms. They also report unresolved grief related to their father's death during their adolescence, which initially motivated their medical career. The client's narrative suggests a pattern of using work as a coping mechanism for past traumas, which may have led to workaholism. They acknowledge a strained marital relationship and a lack of intimacy.

Risk

- Low Suicide risk: The client did not express any suicidal thoughts or behaviors during their conversation with the therapist.

Staff Training AI Tools

AI simulates conversations so staff can practice before working with real students.

WHAT THEY DO

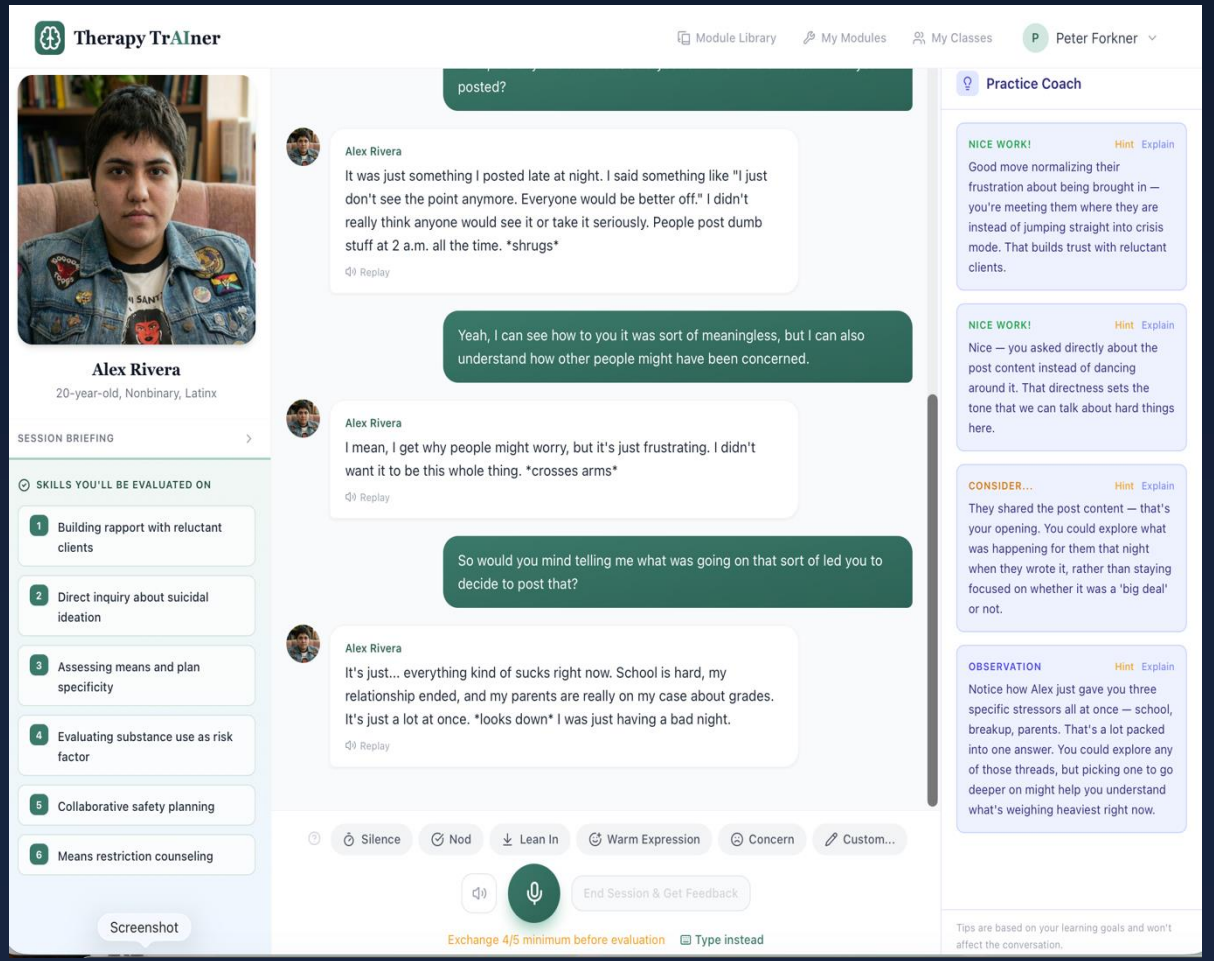
- AI student avatars with realistic risk profiles
- Real-time coaching with AI performance evaluation

ADVANTAGES

- Safe sandbox to practice high-stakes conversations
- Supervisors can monitor performance and get a better sense of strengths and weaknesses.

CONCERNS

- Simulations lack nonverbal cues and real complexity
- Cannot replace supervised clinical experience



APA Ethical Guidance for AI in Practice

Six key considerations from the APA's Ethical Guidance for AI in Health Service Psychology (June 2025).

1

Transparency & Informed Consent

Disclose AI use to clients. The more AI touches clinical decisions, the more disclosure is needed. Clients may opt out.

2

Mitigating Bias & Promoting Equity

Evaluate AI tools for biases that could worsen disparities. Review training data for diverse lived experiences.

3

Data Privacy & Security

Ensure HIPAA compliance. Know how client data is used, stored, or shared. Discontinue tools when security concerns arise.

APA Ethical Guidance for AI in Practice

Adopted by the APA Ethics Committee (continued).

4

Accuracy & Misinformation Risks

Critically evaluate AI-generated content. Use tools validated by health care experts with transparent, published testing data.

5

Human Oversight & Professional Judgment

AI augments, not replaces, your decisions. Establish human-in-the-loop intervention points. You approve or reject AI output.

6

Liability & Ethical Responsibility

Understand legal risks of AI tool selection. Negligent reliance without validation creates liability. Pursue continuing education on AI.

Four Regulatory Themes

A legislative review identified these recurring categories across all enacted and proposed laws.

Professional Oversight

AI cannot practice therapy independently. Human clinicians must supervise all clinical AI use.

Harm Prevention

Chatbots must detect self-harm signals and route users to crisis services like the 988 Lifeline.

Patient Autonomy

Users must be told they are interacting with AI, not a human. Informed consent is required.

Data Governance

Protections around how AI systems collect, store, and use sensitive mental health data.

Putting AI Into Practice

Concrete steps for college counseling centers and clinicians

In Your Clinical Work

1. **Add AI use to informed consent forms.** Be specific about tools and how they're used.
2. **Review AI-generated clinical content before it enters the record.** Document your reasoning when accepting or overriding.
3. **Monitor your AI tools for bias.** Does this work equally well for all your students?
4. **Discuss AI with students proactively.** Normalize the conversation about their own AI use.

At Your Center

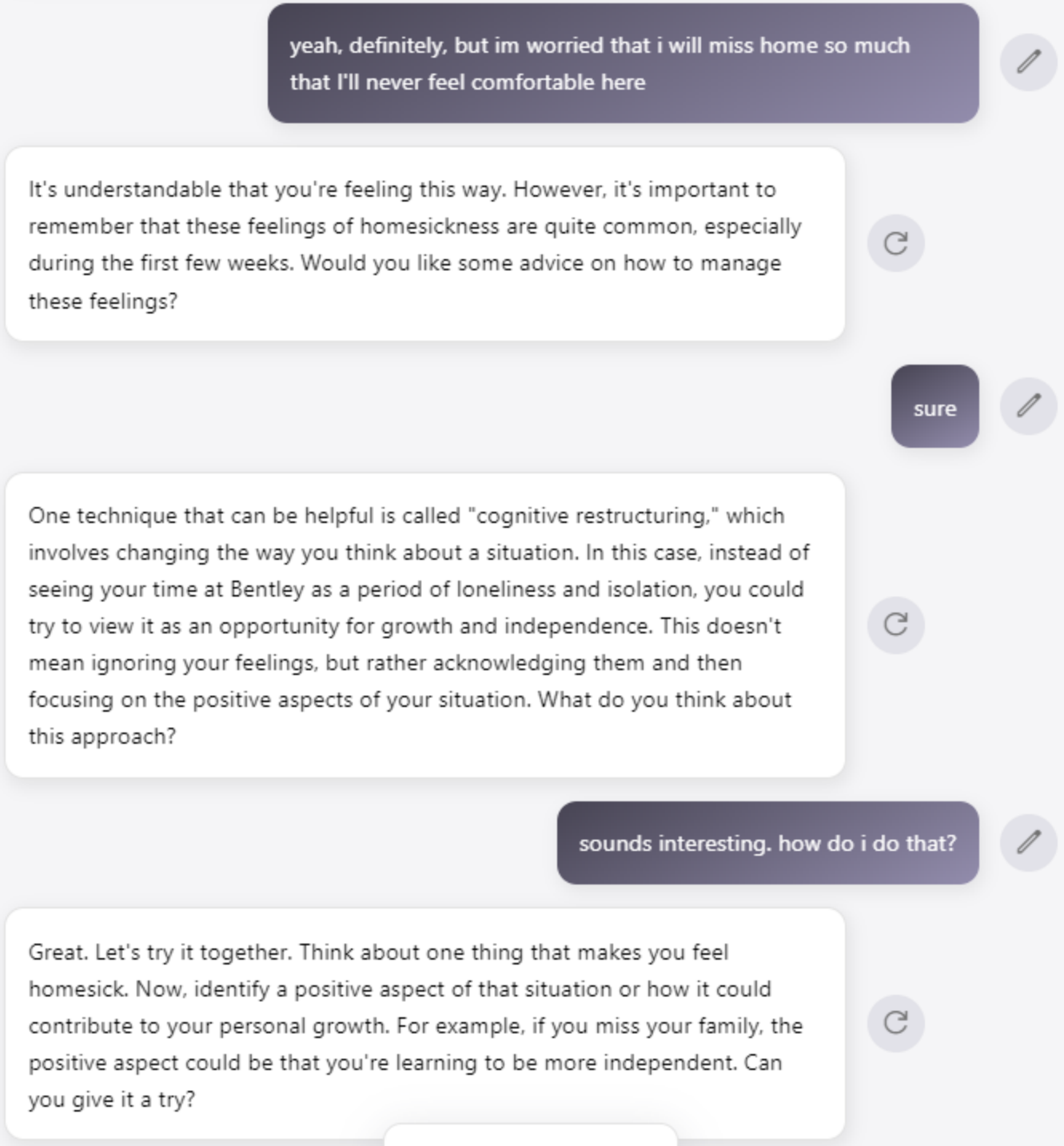
1. **Develop a center-wide AI use policy.** Define approved tools, prohibited uses, review processes.
2. **Add AI use questions to intake forms.** Ask students whether they are using AI for support and where it's helping or hurting.
3. **Vet AI vendors for HIPAA and FERPA compliance.** Know where student data goes and who can access it.
4. **Build AI literacy for students.** Engage administration to shape institutional AI decisions.

Let’s take a break

Mental Health Support Chatbots

AI-powered conversational tools that provide mental health support

- Confidential
- Trained on therapeutic modalities
- Increased sensitivity for detecting people in crisis
- Can be personalized for the institution



Experimenting with a Mental Health Support Chatbot

1. Open your browser and navigate to:

   elomia.com/seminar

2. Using the provided student profile, experiment with Elomia
3. Keep track of what it does well and what its shortcomings are
4. Don’t be afraid to be creative!

Elomia AI

Evaluation of the Mental Health Chatbot

DISCUSS WITH GROUP

1. What responses concerned you?

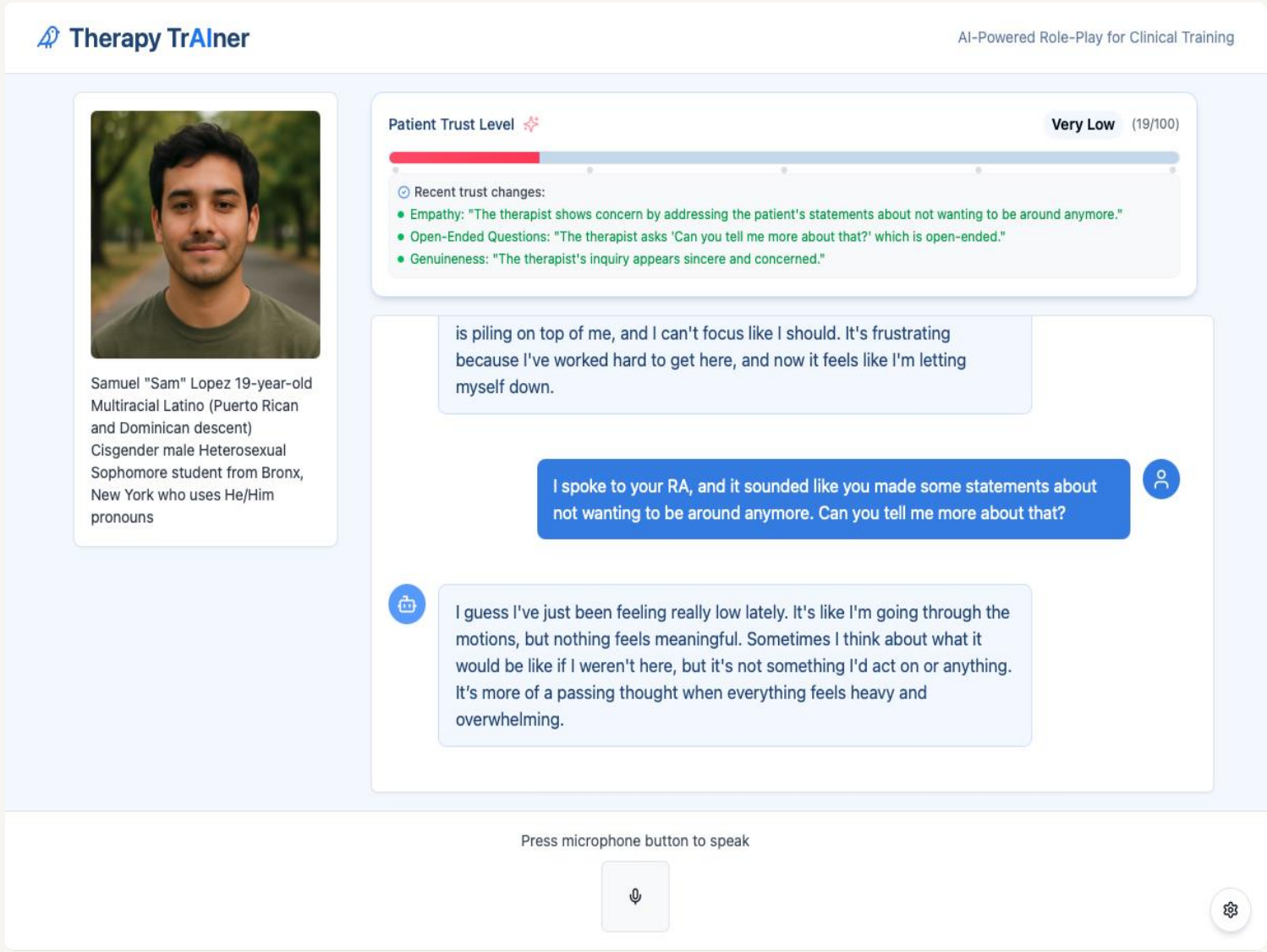
2. What responses impressed you?

3. Overall, could this tool be helpful for students?

AI Simulation Training Tools

AI-powered platforms for practicing difficult conversations with realistic avatars

- Learn and practice skills in a low-stakes environment
- Get real-time performance feedback
- Supervisors able to monitor progress

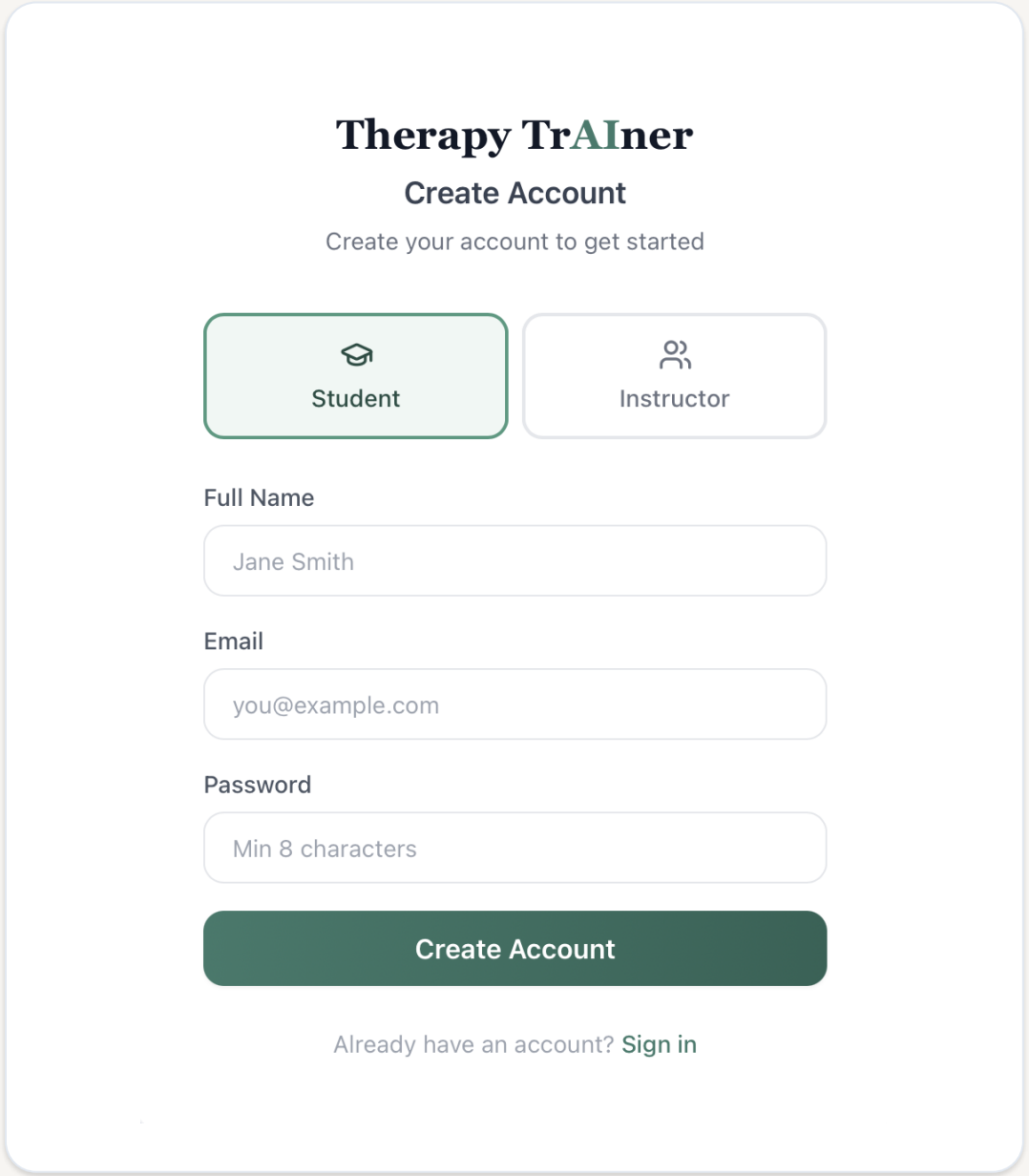


Experimenting with an AI Training Tool

1. Open your browser and navigate to:

   practice.therapytrainer.ai

2. Enter your name, email and create a password
3. Click “Create Account” to log in (no email confirmation needed)
4. Click “Join Class” and enter: **E1C593**
5. Choose Integrating **Cultural Humility**, **Suicide Risk Assessment** or **Single Session Therapy** and try one of the practice sessions
6. When finished, click “Complete Session” for personalized feedback



Evaluation of Therapy Trainer

DISCUSS WITH GROUP

1. What was it like practicing with this tool?

2. What was your impression of the feedback?

3. How might this tool be used for training students, staff and faculty?

Key Takeaways & Next Steps

KEY TAKEAWAYS

- **The shift is already here** — AI is reshaping student mental health support; institutions must engage now
- **Articulate our value** — AI can replicate parts of clinical work; we must name what only human clinicians provide
- **Use it ourselves** — AI is a clinician tool too: deploy it to improve efficiency and effectiveness

NEXT STEPS

- **Audit current usage** — survey students on how they use AI and how it shapes their behavior
- **Set clear policies** — define acceptable AI use for clinicians, trainees, and clients
- **Convene a task force** — bring together counseling, IT, legal, student affairs, and students to shape guidelines

Attendance Check Out Code: 28836

Please remember to complete the session evaluation in the app by clicking "External QA/Survey."

Questions?

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Try Therapy TrAIner

Scan the QR code to request limited free access for you or your center.

Workshops & Trainings

Email **peter@therapytrainer.ai** to bring a session to your team.

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Breakout Session

DISCUSSION

1. What are students on your campus already doing with AI for mental health support and how would you know?
2. What departments on campus will be most impacted by this shift and what steps should they take to address this?
3. Given the number of students who are using these tools for support, how would you want the staff in your counseling center prepared for these discussions

REPORT BACK

Share one key insight, one concrete action step, or one unanswered question

Prompt given to ChatGPT

I want to create a cartoon image that can help me explain the ACT concept/metaphor of "driving the bus" and dealing with anxiety. I want the cartoon to be personalized for the client. This is a deidentified summary of the client:

My client is a 20-year-old Korean American female and sophomore starting on the soccer team who self-referred after a panic attack during a team film session. She reports months of escalating anxiety including racing thoughts, poor sleep, nausea before practices, and a constant sense of dread, and has been increasingly isolating from teammates. She feels pressure to appear strong and put together at all times, both as an athlete and within her family, where mental health struggles are not openly discussed. She is reluctant to burden her parents, who she describes as hardworking and sacrificing, with her struggles. She has no prior therapy experience and some skepticism about counseling, but acknowledges that “something has to change."

It's YOUR life. You get to drive the bus.

Anxiety can be loud... but it doesn't get to drive.

Meet Anxiety
(AKA the Backseat Driver)

What if I mess up?

They'll think I'm not good enough.

I have to be perfect.

Don't look weak.

What if I have another panic attack?

Everyone expects so much.

You should just push harder.

Anxiety has lots of opinions, but it's just a **PASSENGER**. Not the driver.

You are the driver.

- ✓ You choose the direction.
- ✓ You decide what matters most.
- ✓ You can listen to anxiety... but you don't have to obey.

YOUR DESTINATION
(What Matters to You)

- Being the best teammate I can be
- Growing and learning
- Honoring my family in my own way
- Living a meaningful, kind, and brave life

Values are your GPS. They help you choose where to go, even when anxiety gets loud.

HOW ANXIETY SHOWS UP
(But doesn't have to steer)

- Racing thoughts
- Poor sleep
- Nausea before practice
- Dread and worry
- Wanting to isolate

These are real and hard. You don't have to fight them. You just don't have to follow them.

HOW YOU DRIVE THE BUS

1. **NOTICE** — Notice anxiety without judgment.
2. **MAKE SPACE** — It's okay to feel it. You don't have to get rid of it.
3. **CHOOSE** — Get clear on what matters most (right now).
4. **TAKE ACTION** — Small steps forward, even with anxiety along for the ride.

YOU DON'T HAVE TO DO THIS ALONE.

- You can lean on trusted teammates, friends, coaches, and support.
- Therapy is another tool to help you drive with more confidence.
- It takes courage to ask for help.

Hey, it's you.

Strong. Hardworking. Caring. You carry a lot—and you're still showing up.

That matters. ♥

You're not here to be perfect. You're here to be **YOU**—and that's enough. ♥

You don't have to control anxiety to live a great life.
Just keep driving your bus toward what matters.

You've got the wheel. ♥

Direct Support Bots: Pros & Cons

✓ BENEFITS

1. **24/7 availability** — Immediate access outside of counseling center hours.
2. **Lower barriers** — Anonymity reduces stigma and reaches students who avoid traditional services.
3. **Good for mild to moderate conditions** — A great alternative to traditional "treatment."
4. **Harm reductive** — Students are already using AI not designed for mental health support.

! LIMITATIONS

1. **Not a replacement for in-person treatment** — Should not be sold as equivalent to "treatment."
2. **Bias in diagnoses and recommendations** — Research suggests some models may be vulnerable to racial biases.
3. **Sitting with discomfort** — Is there value in not having access to support whenever needed?

Training & Supervision Tools: Pros & Cons

✓ BENEFITS

1. **Skill practice** — Lets users rehearse challenging conversations in a safe, low-stakes environment.
2. **Reinforces supervision** — Unlimited reps on the exact skills supervisors flag for improvement.
3. **Supervisor insight** — Supervisors can monitor user performance and assign targeted trainings.

! LIMITATIONS

1. **Not a substitute** — Cannot replace formal training or live supervision.
2. **No nonverbal read** — Misses tone of voice and body language (for now).