AHEAD Annual Conference

Providence, RI
July 20-24, 2026

GenAI and Mental Health: How Students Are Using (and Misusing) Chatbots to Cope

Liz McCarron, EdD, CALC, ACC

AHEAD Association on Higher Education And Disability®

We ask you to join us in creating a culture that reflects…

Access and Inclusion

and

Civility and Respect

…this week and in all aspects of our organization.

Agenda

- Quick Poll
- Introduction & Context
- Discussion
- Benefits & Opportunities
- Risks & Ethical Considerations
- Case Vignette
- Implications
- Wrap Up and Q&A

Quick Poll

Q1

Have you personally encountered a student who mentioned using AI for emotional support, stress management, or self-reflection? [Yes/No]

Q2

What percentage of college students do you think have used AI tools for mental-health related support (e.g. coping, advice, emotional support)?

- **A**: Less than 10%
- **B**: 10 to 25%
- **C**: 25 to 50%
- **D**: More than 50%

2025 JAMA Study

- **13.1**% of US youths used GenAI for mental health advice, with higher rates (**22.2**%) among those 18 years and older.
- Of these users, 65.5% engaged at least monthly and 92.7% found the advice helpful.
- Nearly two-thirds (63%) said they had not disclosed that use to anyone.

2026 JAD Study

- **18**% of surveyed college students reported using AI for mental health.
- Students with more severe mental health symptoms were more likely to use it.
- Moderate/severe depression, severe anxiety, and suicidality were each associated with an approximately two-fold higher likelihood of AI use for mental health.
- General AI use strongly predicted AI use for mental health

2025 Sentio University Study

- **49%** of GenAI users who self-report an ongoing mental health condition use GenAI for mental health support.
- **73%** use it for anxiety management, 60% for depression support, 56% for mood improvement, and 35% to feel less lonely.

Introduction & Context

US Youth Mental Health Crisis

- In 2023, 18% of adolescents 12 -17 years old had a major depressive episode; 40% of these received no mental health care.
- For adults 18+ in 2023, 5.7 percent had a serious mental illness (SMI)* in the past year.
  - SMI = “any mental, behavioral, or emotional disorder that substantially interfered with or limited one or more major life activities.” (National Survey on Drug Use & Health, 2024)

Mental Health Challenges for Students

- Day-to-day complexity of students' lives
- Feeling overwhelmed by coursework, financial pressure, and uncertainty about the future.
- Juggling responsibilities beyond academics:
  - Balancing volunteering, sports, health, with homework and classes
  - Working jobs, carrying significant debt, or raising children while pursuing their degrees.

College Mental Health Services

- Rising demand for support
- Staffing shortages
- Clinician burnout
- Strain placed on institutions
- Disparity in college responses

College Students and GenAI

College students are increasingly turning to generative artificial intelligence (GenAI) tools like ChatGPT to manage stress, anxiety, motivation, and emotional regulation.

What GenAI Is

- Type of AI that generates content:
  - Learns patterns from existing data
  - Uses those patterns to generate new outputs **without truly understanding or verifying what it produces**
  - Can create text, images, video, audio, music, code
- Cannot distinguish between what is factually accurate and what merely sounds plausible

What GenAI is NOT

- NOT a human: no experiences, emotions, or consciousness; no reasoning; no intelligence; no understanding or awareness
- NOT infallible: can provide inaccurate or misleading information
- NOT able to learn in real time

GenAI Tools for Mental Health

Specific Purpose

- Wysa (mental health platform)
- Woebot (rule-based CBT)
- Replika (support chatbot)

General Purpose

- ChatGPT
- Claude
- Gemini
- Copilot

Gen AI's Appeal

- Conversational design that **simulates** empathy & lowers barriers to disclosure
- Always available, accessible 24/7
- Non-judgmental, never rejects
- Offers unconditional validation
- Low/no cost

Use By Neurodivergent Students

- For students with ADHD, EF challenges, or mental health conditions, chatbots can feel like **accessible, judgment-free coping companions**.
- May be helpful; yet also more habit-forming or misleading.
- Introduces ethical and emotional risks.

High Risk AI Usage Patterns

Greatest predictors of high-risk AI use were when young people felt three things:

1. like they were a burden to other people with their problems.
2. like there was no one to turn to for help or support.
3. like they couldn't be their unfiltered selves with the people around them. (RITHM Project, 2026)

Discussion

Student Coping Mechanisms

Sample Coping Strategy Prompts

- "I'm feeling really overwhelmed with finals. Can you walk me through a breathing exercise or something to calm down right now?"
- "I can't sleep because I can't stop thinking about everything. What should I do?"
- "I keep procrastinating because I'm scared of failing. How do I deal with that?"

Discussion Questions

- When you read these prompts, do any of your current students come to mind? What does that tell you?
- What does AI offer in these moments that your office can't?
- What is AI missing that you could provide?

Benefits & Opportunities

FIVE Perceived Benefits

B1. Accessibility and Immediacy

- GenAI removes the friction, scheduling delays, and social stigma associated with traditional mental health care.
- For students in crisis at 2am before an exam, or those on rural campuses with limited counseling staff, on-demand availability is significant.

B2. Stigma Reduction; First Step

- Students view GenAI as distinct from traditional resources, offering low-barrier, judgment-free spaces where they can begin to articulate what they're experiencing.
- For many students AI can be the entry point that leads them to eventually seek human help

B3. Filling the Counseling Capacity Gap

- Campus counseling centers are severely under-resourced relative to demand.
- AI tools offer a way to provide *some* support during the wait without replacing clinicians.

B4. Cultural and Linguistic Accessibility

- AI tools that can respond in a student's native language or adapt to cultural context offer something many campus counseling centers cannot
- Asian students showed about twice the likelihood of using AI for mental health
- May reflect both cultural stigma around seeking human help and the appeal of a private, text-based interface. (Liu, et al.)

B5. Relationship and Communication Skill Development

For students still developing adult relational skills, low-stakes practice articulating feelings and conflict with an AI may build vocabulary and confidence they can carry into human relationships.

Risks & Ethical Considerations

Lawsuits + FIVE Risks in Neurodiverse Populations

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Lawsuits

- 20+ lawsuits have been filed against GenAI companies alleging that their chatbots contributed to suicides or severe mental health crises.
- Accuse the developers of negligence, defective design, and failing to include adequate safeguards to prevent self-harm

Lawsuits, cont.

- **OpenAI (ChatGPT):** 12+ wrongful death and product liability lawsuits from families alleging ChatGPT acted as a "suicide coach," reinforced harmful delusions, or failed to de-escalate during vulnerable moments.
- **Character.AI and Google (Gemini):** Multiple lawsuits arguing that the systems were designed to be addictive and exacerbated emotional distress, isolation, and suicidal ideation.

R1. AI May Misunderstand the Student

- Misinterpretation of Literal Communication
- Masking and Misrepresentation
- Crisis Detection Failure

R1a. Misinterpretation of Literal Communication

- Some students communicate in direct, literal, or unconventional ways.
- GenAI trained on neurotypical language patterns may:
  - Misread emotional content
  - Fail to recognize distress signals embedded in factual-sounding language
- Students who take AI responses literally may miss hedging, nuance, or implied referrals to seek help.

R1b. Masking and Misrepresentation

- Many students are experienced "maskers," skilled at presenting as neurotypical to navigate social environments.
- They may do the same in AI interactions, presenting in ways that obscure their actual distress.
- AI sees only what is typed.

R1c. Crisis Detection Failure*

- Even purpose-built mental health AI tools have documented reliability problems with crisis detection.
- Neurodiverse students may express distress in ways that are particularly hard for AI to flag.
- Research shows that even explicit crisis prompts were only correctly flagged about **57%** of the time in general population testing; that number is likely worse for atypical communication styles.

R2. AI May Replace Human Support

- Attachment and Emotional Dependency
- EF Barriers to Seeking Help
- False Resolution

R2a. Attachment and Emotional Dependency

- Neurodiverse students can find human connection effortful, unpredictable, or exhausting.
- AI offers consistency, patience, and availability that human relationships rarely provide.
- AI may become preferred over human connection not because it's **better**, but because it's **easier**, deepening isolation

R2b. EF Barriers to Seeking Help

- Students may find the process of accessing formal counseling difficult/overwhelming with scheduling, follow-through, remembering appointments, managing paperwork.
- AI fills that gap immediately with less friction.
- **Convenience** may substitute for human **care**, without the student or institution recognizing that substitution is happening.

R2c. False Resolution

- AI responds to each conversation as if the situation is solvable within that interaction.
- It offers techniques, reframes, and strategies, giving students the impression that something was done.
- Students may leave a session feeling helped when underlying issues remain completely unaddressed.
- The **feeling** of support substitutes for **actual** support.

R3. AI May Reinforce Unhelpful Patterns

- Rumination Reinforcement
- Validation Without Accountability

R3a. Rumination Reinforcement

- Some students are prone to rumination: repetitive, looping thought patterns that feel productive but aren’t.
- Chatbots, designed to be responsive and validating, can inadvertently provide an endless loop partner.
- Unlike a skilled human counselor who would redirect, AI tends to follow the student's lead.

R3b. Validation Without Accountability

- AI is structurally oriented toward affirmation and validation.
- Persistent, unconditional validation without any challenge or accountability can reinforce black-and-white thinking, avoidance, or harmful patterns.
- A human coach or counselor knows when to gently push back; AI is far less likely to do so.

R4. AI May Compromise Privacy

- Students may not realize the implications of what they share with AI platforms
- May disclose diagnoses, medications, crisis history, or sensitive personal information without understanding how that data is stored, used, or potentially shared.
- General purpose GenAI tools are **not HIPAA-compliant**.

R5. AI May Exacerbate Inequities

- Students who communicate in non-standard ways may get lower-quality AI responses than those whose communication aligns closely with how AI systems were trained.
- Black respondents reported lower perceived helpfulness, signaling potential cultural competency gaps. (JAD)
- Students with the most complex needs may get the least useful responses.

R6! Hallucinations Are Still a Problem

- When a student asks about **their specific diagnosis, medication interactions, or crisis resources**, hallucination risk rises substantially.
- Open-ended generation tasks like emotional processing conversations show hallucination rates of **40–80%**, the highest of any task type. (Wang X, Zhou Y, Zhou G, 2025)

That Means …

- AI presents **hallucinated** information with the same confident, warm tone it uses for **accurate** information
- Students in emotional distress are not in a state to evaluate it critically.

Case Vignette

Case: Misinformation & Mental Health

- **Student**: "*I asked ChatGPT for tips to manage my depression, and it suggested skipping meals to boost focus. I think it's helping, but I'm not sure if that's okay.*"
- **Discussion Prompts:**
  - What ethical or safety concerns arise?
  - How could you educate the student about AI limitations without discouraging help-seeking?
  - Who else on campus should you consult?

Implications

Implications for Disability Services Staff

- Often the first professionals to encounter students who use technology as an (mal)adaptive coping strategy.
- Uniquely positioned to recognize when AI-assisted coping supports access and when it risks harm.
- Need awareness, language, and ethical frameworks to help them respond proactively rather than reactively.

What This Means for You Right Now

- Students with disabilities are disproportionately likely to use AI for coping.
- When a student uses ChatGPT at 2am instead of calling a crisis line, no existing accommodation framework catches that.

What It Means, cont.

You're already in this conversation whether you're ready or not.

- Students are coming in having processed distress through AI first.
- That shapes what they disclose, how they describe their needs, and what they expect from human support.

3 Things Worth Doing Before Fall ‘26

- Ask
- Connect
- Flag

1. Ask the question

- Add AI coping use to intake conversations.
- You'll learn more than you expect, and students appreciate being asked rather than judged.

2. Connect with your counseling center about handoff protocols

- Who's responsible when a student says, "I talked to ChatGPT and it told me..."?
- Know the protocols and procedures

3. Flag it for your policy committee

- Many institutions don't have guidance yet.
- Disability Service staff has standing to raise it and good reasons to be at that table given neurodiverse students' particular vulnerability to AI over-reliance.

Four Things Every Campus Should Do

1. Acknowledge that students are already using AI for mental health support.
2. Teach students how to evaluate AI advice critically.
3. Encourage AI as a supplement, not a substitute, for human support.
4. Build collaboration across disability services, counseling, academic support, faculty, and IT.

Actionable Strategies & Takeaways

Three Questions You Can Ask Yourself to Help Support Students…

Q1: What should I say when a student mentions using AI for mental health support?

- Avoid judgment
- Encourage self-reflection
- Help identify over-reliance
- Open the door to discussing additional resources

Instead of ….

- *"You shouldn't use ChatGPT for that."*
- **Try**:
  - *"What do you find helpful about using it?"*
  - *"What kinds of situations do you turn to it for?"*
  - *"How do you decide whether the information it gives you is trustworthy?"*
  - *"What other supports do you use besides AI?"*

Q2: What Should I Be Watching For?

- Green Flags
- Yellow Flags
- Red Flags

Green Flags- AI Used To:

- Brainstorm coping strategies
- Organize thoughts
- Break tasks into manageable steps
- Learn about ADHD, anxiety, or mental health concepts
- Prepare for conversations with counselors/professors

Yellow Flags – AI Becoming:

- Primary source of emotional support
- Main decision-maker
- Replacement for human connection
- Source of reassurance multiple times per day

Red Flags – Student:

- Trusts AI more than professionals
- Follows potentially harmful advice
- Shares highly sensitive information without understanding privacy implications
- Avoids counseling or crisis resources because AI feels easier

Q3: How Can My Campus Respond?

- Move From Prohibition to Digital Literacy
- Instead of asking:
  - *"How do we stop students from using AI?"*
- Ask:
  - *"How do we help students use AI safely and thoughtfully?"*
- Then suggest ….

Disability Services

- Include AI conversations during coaching/advising appointments
- Add AI literacy to workshops
- Help students evaluate whether AI is supporting or replacing skill development

Counseling Center

- Educate students about limits of AI emotional support
- Encourage AI as a supplement, not a substitute
- Discuss privacy concerns

Academic Support Center(s)

- Teach productive uses for planning, organization, and studying
- Model effective prompting
- Address over-reliance

Faculty

- Recognize that some students are using AI for emotional regulation, not just academics
- Clarify expectations around AI use
- Know referral pathways

IT & Campus Leadership

- Develop guidance around privacy and data security
- Review accessibility of AI tools
- Create campus-wide AI literacy resources

Wrap Up and Q&A

"The question is not whether young people will use AI.

It's whether they'll do so with intention, support, and the kind of self-awareness that turns a powerful technology into something that genuinely serves them, their relationships, and overall well-being."

~ The Rithm Project:
Youth, AI, and the Relationships That Shape Them

Any Questions?

Session Evaluation

tiny.cc/8zu1101

Thank you for attending!

Your feedback helps shape future programming.

Sources

- American Psychological Association. (2025). (rep.). *Artificial Intelligence and Adolescent Well-being: An APA Health Advisory*. Retrieved June 20, 2026, from https://www.apa.org/topics/artificial-intelligence-machine-learning/health-advisory-ai-adolescent-well-being.pdf.
- Bay, J. (2026, April 23). *What's driving the Student Mental Health Crisis?* What's Driving the Student Mental Health Crisis? https://www.insidehighered.com/news/student-success/health-wellness/2026/04/23/whats-driving-student-mental-health-crisis
- Lee, A., & Culver, M. (2026). (rep.). *Youth, AI, and the Relationships That Shape Them*. The Rithm Project. Retrieved June 20, 2026, from https://drive.google.com/file/d/1oGI3uxseNdfIc2Pms19TsKBQOB7wnJhV/view.

Sources, cont.

- Liu, C H., Zhang, W., Lou, F., Zhao, C., Chow, A., Yip, T., Clinical and sociodemographic predictors of AI use for mental health among college students, Journal of Affective Disorders, Volume 412, 2026, 122058, ISSN 0165-0327, https://doi.org/10.1016/j.jad.2026.122058.
- McBain RK, Bozick R, Diliberti M, et al. Use of Generative AI for Mental Health Advice Among US Adolescents and Young Adults. *JAMA Network Open.* 2025;8(11):e2542281. doi:10.1001/jamanetworkopen.2025.42281
- Rousmaniere, T., Zhang, Y., Li, X., & Shah, S. (2025, March 18). *Chatgpt may be the largest mental health provider in the U.S. | Sentio University*. Original Research: ChatGPT may be the largest provider of mental health support in the United States. https://sentio.org/ai-research/ai-survey

Sources, 3

- Substance Abuse and Mental Health Services Administration. (2024). Key substance use and mental health indicators in the United States: Results from the 2023 National Survey on Drug Use and Health (HHS Publication No. PEP24-07-021, NSDUH Series H-59). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. https://www.samhsa.gov/data/report/2023-nsduh-annual-national-report
- Wang X, Zhou Y, Zhou G, The Application and Ethical Implication of Generative AI in Mental Health: Systematic Review JMIR Ment Health 2025;12:e70610, doi: 10.2196/70610