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AI-Enabled Mental Health Technologies in K-12 Schools

A Practical Guide for School and District Leaders

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Introduction

Artificial intelligence (AI) is becoming increasingly common in the technologies that districts and schools use to support student mental health and well-being. From student-facing platforms to the tools professionals use to identify needs, coordinate care, and deliver services, AI is reshaping how these technologies are designed and used.

At the same time, AI is becoming an increasingly common part of young people's lives. Although this guide focuses on school-procured mental health technologies, schools should recognize that students' experiences with other forms of AI may shape their expectations, trust, help-seeking behaviors, and interactions with AI-enabled mental health tools.

These changes create meaningful opportunities. They also raise important questions about evidence, safety, privacy, equity, implementation, and the appropriate role of AI in supporting young people. While the principles for evaluating effective mental health technologies remain the same, AI changes the questions schools and districts should ask before adopting and implementing these tools.

This guide is a companion to the K–12 Mental Health Technology Navigator (k12mentalhealthtech.org), which helps schools and districts choose and use effective digital well-being products. Within the broader landscape of digital well-being products addressed by the Navigator, this guide focuses specifically on technologies that use AI to support student mental health and well-being. It builds on the Navigator's framework with a specific focus on AI-enabled mental health technologies and their implications for emotional well-being and suicide prevention.

The purpose of this guide is not to encourage or discourage the adoption of AI-enabled mental health technologies, but instead to ensure that K–12 leaders have the information they need to make decisions about its use. Additionally, this document does not provide guidance on general-purpose AI tools, social media platforms, or broader AI policy except where those issues directly inform the evaluation or implementation of school-based mental health technologies.

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AI technologies, supporting evidence, and applicable laws continue to evolve rapidly. Schools and districts should conduct due diligence and consult appropriate legal, clinical, privacy, technology, and other experts to ensure compliance with applicable laws, regulations, and local policies before adopting or implementing AI-enabled mental health technologies.

How to Use This Guide

This guide addresses four practical questions:

1. **Where is AI being used within K–12 mental health technologies?**
2. **How might AI-enabled mental health tools influence student well-being and school mental health systems?**
3. **What questions should schools and districts ask when evaluating AI-enabled products?**
4. **What should schools and districts consider before and throughout implementation?**



Where is AI being used within K–12 mental health technologies?

AI is appearing across school mental health systems and student support ecosystems in a range of ways, from supporting school mental health staff behind the scenes, to interacting directly with students. Increasingly, AI is embedded in products rather than offered as a standalone.

The table on the following pages outlines product categories, where AI commonly appears within them, and initial questions to ask for each. More detailed evaluation guidance is found in the [‘What questions should schools and districts ask when evaluating AI-enabled products?’](#) section.



Before considering any AI-enabled product, districts should understand three things:



Where AI appears in student support systems



How AI functions across different products and services



Why different applications warrant varying levels of evidence, oversight, and governance

Common Uses of AI Across Mental Health Technologies

Product Category Definition	Where AI May Show Up	Questions to Ask
 Therapy Licensed clinical teletherapy or counseling delivered by a credentialed provider	AI-assisted intake; recording or transcription with appropriate consent; drafting or summarizing clinical notes; detecting possible risk language for clinician review; and therapist matching	<ul style="list-style-type: none"> What role does AI play: does it support licensed clinicians or does it replace clinical decision-making? Which outputs are reviewed by a clinician before they affect a student's care, record, or safety? How is consent obtained for recording, transcription, or analysis of interactions, and how is sensitive data protected?
 Coaching / Mentorship Structured, ongoing, non-clinical, delivered by a human coach, mentor, or near-peer	Matching students with human coaches or mentors; suggesting resources or discussion prompts; summarizing interactions for a human coach	<ul style="list-style-type: none"> How does AI support the human coaching or mentorship relationship? Which AI-generated recommendations, summaries, or other outputs are reviewed by the coach or mentor before they influence student support? Does the use of AI strengthen rather than substitute for the human relationship?
 Crisis Intervention Real-time response for a student in crisis or at risk of self-harm	Screening for risk language; triggering escalation workflows; drafting responses before human review	<ul style="list-style-type: none"> What happens from the moment the AI detects a possible safety concern until a qualified person reviews and acts on it? What are the expected response times, staffing requirements, escalation procedures, and accountability if the AI misses or incorrectly flags a signal?
 Screening / Assessment Structured, often validated tools used to identify students who may need support	Scoring responses; flagging risk patterns; recommending follow-up actions	<ul style="list-style-type: none"> Has the model been validated with populations similar to your students? Who reviews AI-generated recommendations before action is taken? Is there sufficient staffing to review outputs?

Product Category Definition	Where AI May Show Up	Questions to Ask
 Check-ins Brief, recurring prompts about mood or well-being that are lighter-weight than a formal screener	Personalizing check-in questions; detecting sentiment; summarizing trends for staff; recommending follow-up actions or content	<ul style="list-style-type: none"> ▪ Could frequent AI-driven check-ins create a sense of monitoring or conversely an emotional connection with an AI tool? ▪ Could check-ins end up substituting for conversations with peers and trusted adults?
 Curriculum / Lessons Structured instructional content, often health-education or life skills-aligned	Personalizing pacing; generating practice scenarios; adapting content	<ul style="list-style-type: none"> ▪ Is the AI adapting existing evidence-informed content, or generating new information or guidance? ▪ What evidence supports the accuracy and reliability of both the underlying content and AI-generated or adapted outputs? ▪ How have those outputs been reviewed for developmental appropriateness, accessibility, and cultural relevance, and do they reinforce life skills, human connection, and help-seeking?
 Self-Guided Activities Student-directed tools or exercises completed independently	Interactive exercises; chatbot-guided reflection or coaching; adaptive content; or other AI-generated guidance or support	<ul style="list-style-type: none"> ▪ Could conversational or chatbot-based tools drift into therapy, crisis intervention, or relationship simulation, or substitute for human support? ▪ If a student discloses distress, how is the data handled and how does the product respond? Is a pathway to a trusted adult prioritized?
 Administrative & Care Coordination Staff-facing systems: documentation, scheduling, referral tracking, summarizing information	Summarizing referral information or records across services; drafting care-coordination notes; tracking referrals and follow-up; prioritizing caseload review; and recommending administrative next steps	<ul style="list-style-type: none"> ▪ Which outputs are administrative summaries, and which could influence judgments about urgency, eligibility, referral, placement, or care? ▪ Who verifies AI-generated records, prioritizations, and recommendations before they become part of a student's record or affect follow-up?

Look Beyond Product Labels

Product categories are a useful starting point, but they do not fully describe how AI functions within a technology. A single product may span several categories, and companies may use terms such as “therapy,” “coaching,” “wellness,” or “support” differently. Two products marketed under the same label may therefore use AI in substantially different ways.

For example, one product described as a therapy platform may use AI only to support scheduling or draft documentation for a licensed clinician. Another therapy platform may use AI to conduct intake, recommend care, identify risk, or communicate directly with students. Districts should therefore evaluate the specific AI functions within a product, rather than relying on the product category or the company’s description of the service.



See [‘What questions should schools and districts ask when evaluating AI-enabled products?’](#) on page 11 for guidance on evaluating AI-enabled technologies in practice.



Considering Risk

In general, closer review is warranted as AI moves from supporting administrative tasks to interacting directly with students, informing decisions about their support or safety, or acting independently of human review. The following characteristics indicate where schools should expect stronger evidence, greater human oversight, and more robust safeguards:

- Interact directly with students, particularly around emotional well-being, mental health, or crisis.
- Sustain ongoing or relationship-like interactions with students over time.
- Influence decisions about student support, referrals, risk, safety, discipline, placement, or care.
- Manage sensitive student information, including mental health information, school records, device activity, or other information students or families may not realize is being collected or analyzed.
- Operate with limited human oversight, generating recommendations, alerts, or actions before review by a qualified professional.

Not every use of AI is appropriate for every age or developmental stage. Decisions about student-facing AI, in particular, should be made in the context of students’ evolving developmental needs.



How might AI-enabled mental health tools influence student well-being and school mental health systems?



Young people develop through experience. They build resilience, confidence, judgment, coping skills, and healthy relationships by navigating challenges, solving problems, making decisions, asking for help, and recovering from setbacks. AI has the potential to strengthen these experiences, make support more accessible, and improve school mental health systems. It also has the potential to replace or reshape some of the experiences, relationships, and systems that help young people develop and thrive.

When evaluating AI-enabled mental health technologies, schools and districts should consider not only whether a product is safe, effective, or easy to implement, but also whether it helps create supportive environments that reduce risk, strengthen connection, and make help easier to access.



Student and family perspectives are an important part of understanding how AI may affect well-being, relationships, trust, and help-seeking.

See '[Engaging Students and Families](#)' on page 10.



Student Considerations

Consider whether the AI tool is likely to **support** or **undermine** these aspects of student well-being:

- Relationships and social connection, including opportunities to build and maintain trusted relationships with adults, peers, caregivers, and other sources of support.
- Healthy development, such as chances to build social, emotional, communication, coping, decision-making, and problem-solving skills through real-world experiences.
- Help-seeking, including students' willingness and ability to seek support from trusted adults and appropriate services.
- Agency, confidence, and independence, which develops when students build self-efficacy rather than becoming too reliant on technology.
- Privacy and trust, particularly whether students and caregivers understand what information is collected and how it's used, including what happens after a student discloses sensitive information.
- Safety, including how technologies identify and respond to distress, self-harm, suicide risk, abuse, or other situations requiring timely human intervention.





Spotlight: Conversational and Relational AI and Human Connection

Conversational AI is one increasingly common way AI appears in mental health technologies. Some tools use AI to answer questions, guide coping exercises, or help students access resources. Others are designed to remember previous conversations, personalize responses over time, encourage ongoing engagement, or simulate empathy, companionship, or emotional relationships. These design choices can affect help-seeking, relationships, emotional reliance, and healthy development.



JED believes AI designed to simulate companionship or ongoing emotional relationships is not developmentally appropriate for minors. Mental health technologies should strengthen pathways to trusted adults and professional support, not position AI as a substitute for those relationships.



Implications

- Avoid mental health technologies that use AI to simulate companionship or ongoing emotional relationships.
- Evaluate whether conversational AI strengthens pathways to trusted adults, school mental health professionals, and appropriate care rather than substituting for them.
- Determine whether AI interactions are brief and task-specific or persist across time through memory, personalization, notifications, or repeated engagement. Features designed to sustain interaction warrant closer review.
- Help students understand what AI can and can't do, and reinforce when support from a trusted adult or mental health professional is the appropriate next step.
- Monitor implementation for unintended effects on help-seeking, trusted relationships, and student well-being.



School and System Considerations

Also consider whether the technology **strengthens or undermines** your school's ability to:



- Foster life skills by supporting, rather than replacing, opportunities for students to develop social, emotional, communication, coping, and problem-solving skills.
- Promote connectedness and a positive school culture, including meaningful relationships with trusted adults and peers.
- Recognize and respond to signs of distress, strengthening, not replacing, professional judgment.
- Reduce barriers to help-seeking by making it easier for students to access trusted adults and appropriate supports.
- Ensure access to effective mental health care, including coordination across school, family, health care, and community systems.
- Establish systems for safe and effective crisis response, with clear protocols, human oversight, and escalation pathways.



Spotlight: Engaging Students and Families

Students and families are essential partners in decisions about whether, when, and how AI-enabled mental health technologies are used in schools. Choices about AI shape how students receive support, how sensitive information is collected and used, and where essential human judgment is incorporated into student mental health pathways. These decisions should reflect the needs, priorities, experiences, and values of the communities schools serve.

Meaningful engagement begins before a product is selected and continues throughout implementation and evaluation. Students and families can surface important priorities, concerns, and unintended consequences, and provide perspectives that may not be apparent to educators, technology leaders, or companies alone.

Transparency is fundamental to that partnership. Students and families should be informed about and kept updated on when and how AI is used, what information is collected and relied on, product limitations, the role of human oversight, and how questions or concerns will be addressed.



Implications

- Engage students and caregivers before decisions are made about adopting AI-enabled mental health technologies.
- Include students and families in product selection, implementation planning, evaluation, governance, and continuous improvement.
- Select products whose providers clearly communicate how the AI system works, what information it uses, its limitations, and the role of human oversight on an ongoing basis.
- Establish clear, accessible processes for students and families to ask questions, raise concerns, opt in or out of participation, and provide ongoing feedback.
- Revisit AI governance, communication, and engagement as technologies, evidence, and community needs evolve.



What questions should schools and districts ask when evaluating AI-enabled products?



These considerations are intended to be used alongside existing evaluation processes to help districts ask additional questions about how AI may influence safety, effectiveness, implementation, and student well-being.

Before evaluating an AI-enabled product, districts should have a clear understanding of the need they are trying to address, the outcomes they hope to achieve, and the role AI is expected to play in meeting those goals.



Use alongside the Navigator's Product Assessment section at k12mentalhealthtech.org/product-assessment



Sizing Up the AI

AI is not one technology. A single product may use several AI capabilities at once, each with different levels of influence, evidence, oversight, and risk. Before evaluating a product, first understand how AI is being used.

Consider	Example
☒ What capabilities does the AI have?	AI may create or summarize content, analyze information, identify patterns or risk, personalize experiences, communicate with users, make recommendations, automate tasks, initiate workflows, or complete actions. Most products combine several capabilities.
☒ What information does it know and use?	Some AI relies primarily on publicly available general information, while others are grounded in evidence-based resources, specialized mental health knowledge, district information, or other trusted sources. Some systems continuously retrieve current information, while others rely on information available when the model was developed. AI may use, remember, and learn from information entered by students or staff, conversations, school records, mental health information, information inferred about students, or information remembered over time. Some systems also learn from or retain information across interactions.
☒ How connected is it?	Some AI operates within a single product. Others connect to other systems like calendars, messaging platforms, student information systems, learning management systems, electronic health records, wearables, or other tools and data sources. These connections expand both capability and responsibility.
☒ How independently does it operate, and what can it affect?	AI may respond only when prompted, operate within predefined workflows, require human approval, or act proactively. Outputs may support administrative tasks, inform professional judgment, interact directly with students, influence decisions about student support or safety, or act on behalf of students or staff.



Demonstrated Evidence of Outcomes

Products should be able to demonstrate they achieve the outcomes they claim for the students and settings in which they will be used. For AI-enabled mental health technologies, evidence for the broader platform does not automatically apply to AI features. A product may have strong evidence for its human-delivered components, while the AI feature is new or not yet independently evaluated. Companies should also be able to articulate how AI performance is evaluated as models and features evolve over time.

Look for evidence that...

- ✓ specifically supports the AI-enabled functionality, not just the broader platform or its human components;
- ✓ comes from independent evaluation or external review, and includes enough detail about how the evaluation was conducted, what was found, for whom, and its limitations to judge the company's claims, rather than only company-selected highlights;
- ✓ reflects the students, settings, and intended use of the product, recognizing that evidence from other populations or settings does not transfer reliably to K–12 settings;
- ✓ includes health and student outcome measures, not simply engagement or satisfaction (i.e., student well-being, safety, connection to trusted adults and supports, access to care, or other intended impacts);
- ✓ product documentation clearly describes the intended use, intended users, known limitations, and the evidence supporting claims;
- ✓ the company evaluates and communicates model or feature updates before release; and
- ✓ the company has processes to identify, investigate, and respond to unintended outcomes or changes in AI performance over time.



Privacy, Data Use, and Security

AI-enabled mental health technologies may collect, generate, combine, infer, and retain sensitive student information in ways that differ from traditional digital tools. Through conversations, journaling, check-ins, reflection prompts, and other open-ended interactions, students may share personally identifiable information (PII), details about their mental health, family members, peers, or other highly sensitive information. Even seemingly routine prompts, such as what a student likes to do after school, can elicit sensitive disclosures.

Districts should understand not only what information a product collects, but also what students are reasonably likely to disclose, what the AI system generates or infers from those interactions, how that information is used, who has access to it, how long it is retained, and how it is protected. The level of privacy and security protections should reflect both the sensitivity of the information involved and the role AI plays within the product.

Look for evidence that...

- ✓ the company clearly describes what information the product collects, generates, infers, or retains, where it's stored, who has access to it, and how long it's kept;
- ✓ student or staff data is used to train, fine-tune, or improve AI models, including third-party foundation models, and whether districts can opt out, and how these practices are documented;
- ✓ data collection, retention, and sharing are limited to what is necessary for the product's intended purpose, with appropriate safeguards to protect PII and other sensitive student information throughout storage, transmission, and deletion;
- ✓ the company is transparent and clear about what inferences, recommendations, or predictions the product generates about students, how they are used, whether they are reviewed by humans, and whether they can be corrected or challenged;
- ✓ the company demonstrates compliance with federal and state privacy laws, including [COPPA](#) and [FERPA](#), and [HIPAA](#), where applicable. Some companies may also note compliance with international privacy frameworks, such as Europe's [GDPR](#); and
- ✓ security practices, incident response procedures, breach notification process, and independent certifications or audits (e.g., SOC 2 or ISO 27001, where applicable) are clearly documented.



Safety, Crisis Response, and Harm Prevention

AI-enabled mental health technologies can influence student safety through direct interactions with students, through the information they provide to school staff, and through the decisions they help inform. Districts should evaluate not only how products respond during moments of crisis, but also how they identify, test for, and mitigate potential safety risks associated with AI. The level of scrutiny should reflect both the role AI plays within the product and the level of influence it has on students, professional decision-making, and systems of support.

Look for evidence that...

- ☒ the product responds safely and appropriately when students disclose distress, self-harm, suicidal thoughts, abuse, or other safety concerns, with clear protocols for involving appropriate human supports;
- ☒ the company clearly explains its crisis escalation protocols, including the roles of school personnel, parents or caregivers, emergency services, and after-hours response, where applicable;
- ☒ the company has identified, tested for, and mitigated potential safety risks associated with the product's use of AI, including known limitations and failure modes, and can demonstrate that it has been evaluated for AI-related risks (e.g., inaccurate or inappropriate responses, reinforcement of distorted thinking, delayed or displaced help-seeking, emotional reliance, errors in decision support, and differential performance across student populations);
- ☒ the company can demonstrate how the AI responds in realistic scenarios involving children and adolescents, rather than relying only on written safety policies or documentation;
- ☒ qualified professionals review AI-generated recommendations, risk assessments, or crisis alerts before they inform decisions about student care or safety; and
- ☒ safety protections are built into the product, tested before deployment, and monitored as models and features evolve, and the product clearly communicates the role(s) and limitations of AI, including when human judgment or intervention is required.



Access, Accessibility, and Fairness

AI-enabled mental health technologies should be accessible, relevant, and effective for the students they are intended to serve. Districts should consider not only whether students can access a product, but also whether the AI performs fairly across student groups. Aggregate results can hide meaningful differences in accuracy, safety, and outcomes, particularly for students whose language, disability, identity, culture, or access to technology may not be well represented in the product's design or testing.

Look for evidence that...

- ✓ the product works across the devices, browsers, and internet access available to students, staff, and other users, with realistic technical requirements;
- ✓ the product meets recognized accessibility standards, including the Web Content Accessibility Guidelines (WCAG), and the company provides accessibility documentation (e.g. VPAT), demonstrating it can be used effectively by students of all abilities;
- ✓ translated content and AI interactions have been reviewed for accuracy, cultural relevance, and mental health context, rather than relying only on automated translation;
- ✓ the product has been designed and tested with students who reflect the district's population and the company can describe the populations included in that work;
- ✓ the company provides subgroup performance data, including false positives/negatives, safety outcomes, and differences in recommendations or referrals, and identifies any known limitations in performance across student groups;
- ✓ personalization, risk detection, and recommendation features don't produce unequal experiences or outcomes;
- ✓ student-facing features are developmentally appropriate, understandable, and effective for the intended age group;
- ✓ pricing, licensing, training, and technical requirements don't create avoidable barriers for under-resourced schools or students; and
- ✓ young people and their caregivers, including those from historically underserved groups, have informed the product's design, testing, and ongoing improvement.



Implementation Fit and Other Considerations

Even effective AI-enabled mental health technologies may fail to achieve their intended impact if they do not integrate well with existing school systems. Before adopting a product, districts should understand how it fits within their existing mental health infrastructure.

Look for evidence that...

- ☒ the product integrates with existing school systems (i.e., student information systems, learning management systems, electronic health records), and the company provides technical documentation describing supported integrations, interoperability, APIs, or data exchange standards, as appropriate;
- ☒ the product supports existing school mental health workflows, referral pathways, documentation practices, and multidisciplinary teams rather than creating parallel processes;
- ☒ AI capabilities, intended uses, known limitations, and the role of human oversight are clearly documented for educators, school mental health professionals, students, and families, as appropriate;
- ☒ the company provides a documented implementation approach, including onboarding, role-specific training, resources, and ongoing technical support for schools;
- ☒ administrators have appropriate visibility into AI functionality, including reporting, audit logs, user permissions, administrative controls, and the ability to review or override AI-supported decisions where appropriate;
- ☒ the company has documented processes for evaluating, testing, and communicating model or feature updates that may affect product performance, safety, or intended use; and
- ☒ the company clearly states expectations for product oversight, incident response, and customer support.



What should schools and districts consider before and throughout implementation?



Selecting an AI-enabled product is only the beginning. The decisions that follow determine whether AI strengthens student support systems, builds trust, and improves student well-being. Successful implementation depends on thoughtful planning, shared leadership, meaningful community engagement, professional learning, and ongoing evaluation. **Since AI keeps evolving, implementation is an ongoing process rather than a one-time event.**



Implementation is an ongoing cycle. Use the [checklist on page 19](#) to plan for launch and revisit key decisions as the technology, evidence, and needs of your school community evolve.



Implementation Checklist

Use this checklist before launch and revisit it throughout implementation as technologies, evidence, and community needs evolve.

Start With the Need

- ☐ Have we completed a needs assessment and clearly defined the need we are trying to address?
- ☐ Is the product aligned with the need we've identified, or would a non-AI solution be equally or more effective?
- ☐ Have we defined clear goals, success measures, and the outcomes we hope to improve?

Engage Community Members Throughout

- ☐ Have school mental health professionals, educators, technology leaders, students, caregivers, and other community members been engaged in planning?
- ☐ Have we established ongoing opportunities for community members to provide feedback throughout implementation?

Establish Leadership, Governance, and Accountability

- ☐ Have we identified who is responsible for implementation, oversight, company management, and responding to safety concerns?
- ☐ Have we established policies describing when AI should be used, when human review is required, and when AI should not be used?

Prepare People and Integrate Into Systems

- ☐ Will staff receive training on both the product and the capabilities, limitations, appropriate uses, and risks?
- ☐ Will implementation strengthen existing student support systems, referral pathways, and crisis response processes?

Communicate Clearly and Build Trust

- ☐ Do students, families, and staff know when and how AI is being used, what information it collects, and how that information is protected?
- ☐ Have we established two-way channels for students and families to ask questions, raise concerns, opt in or out, and shape how AI is used, along with a process for acting on their feedback?

Monitor Outcomes, Risks, and Changes Over Time

- ☐ Have we established a plan to monitor implementation, intended outcomes, unintended consequences, and community feedback?
- ☐ Do we have a process for reviewing significant AI updates and determining whether implementation should be refined, expanded, paused, or discontinued?

Start with the Need

As with any new mental health technology, implementation should begin with a clearly defined need. AI-enabled technology is one potential approach to addressing a specific challenge or opportunity. Districts should identify the need they are trying to address, determine whether AI is the appropriate solution, and define how success will be measured before selecting or implementing a product.



Questions to consider include:

- What student, staff, or system need is this technology intended to address?
- Is AI necessary to address this need, or would a non-AI solution be equally or more effective?
- How will this technology strengthen existing systems of support, rather than creating parallel processes?
- How will success be measured, and what outcomes would indicate the technology is achieving its intended purpose?



Find more in the Navigator's Needs Assessment section at k12mentalhealthtech.org/assess-student-needs

Engage Community Members Throughout

Successful implementation depends on engaging the people who will use, support, and be affected by AI-enabled mental health technologies. Students and families can surface priorities, unintended consequences, and effects on trust and help-seeking. Educators and school mental health professionals can identify workflow challenges, implementation barriers, and situations where AI supports or complicates professional judgment. Engagement should begin before implementation and continue through evaluation and improvement.



Keep in Mind: Student, family, and staff experience is essential evidence for understanding how AI-enabled technologies are working in practice.



Implementation Strategies

- Engage students, families, educators, school mental health professionals, technology leaders, and community partners throughout, from needs assessment to continuous improvement.
- Clearly define how community input will inform decisions, governance, communication, and future product updates.
- Create multiple opportunities for community members to provide feedback through approaches that are accessible, developmentally appropriate, and representative of the communities the district serves.
- Review community feedback alongside implementation data, safety outcomes, and product performance when making decisions about refining, expanding, pausing, or discontinuing AI use.
- Share what was learned and how community feedback influenced district decisions to strengthen transparency, trust, and accountability.



Find more in the Navigator's Community Engagement section at k12mentalhealthtech.org/community-engagement

Establish Leadership, Governance, and Accountability

Implementing AI-enabled mental health technologies requires coordination across student services, school mental health, instruction, technology, privacy, procurement, legal, communications, and district leadership. No single leader should carry this work alone: A cross-functional team should share responsibility for planning, selection, implementation, and continuous improvement. Establishing governance early helps clarify responsibilities, define where professional judgment is required, and ensure AI strengthens, rather than replaces, existing systems of care.



Keep in Mind: AI-enabled products evolve rapidly. Establish a process to review significant product or model updates and determine whether changes to policy, training, or implementation are needed.



Implementation Strategies

- Establish clear leadership, roles, and decision-making responsibilities before launch.
- Define where human review and professional judgment are required within AI-supported workflows, for example, before any actions are taken.
- Clarify responsibilities for technology partner management, safety oversight, and incident response.
- Integrate AI governance into existing district leadership and student support policies (e.g., acceptable use policies, student handbooks).
- Set up a regular cadence to review whether the product continues to align with district needs, goals, and the broader ecosystem of supports.

Prepare People and Integrate Into School Mental Health Systems

Successful implementation depends on preparing educators, school mental health professionals, district leaders, students, and caregivers to use AI-enabled tools safely, appropriately, and effectively. Professional learning should evolve alongside AI capabilities, emerging evidence, and district practice.



Implementation Strategies

- Involve school mental health professionals in defining appropriate use cases and implementation planning.
- Provide ongoing professional learning on AI capabilities, limitations, risks, and appropriate use.
- Train staff to protect student privacy when using AI, including not entering personally identifiable information, mental health information, or other sensitive student data into general-purpose AI tools unless the district has explicitly approved the tool and that use of the data.
- Help staff understand where AI can support professional practice and where independent professional judgment remains essential.
- Provide students and caregivers with developmentally appropriate guidance about AI, healthy use, and when to seek support from a trusted person.
- Integrate AI into existing referral pathways, crisis response procedures, and systems of care, and train students, staff, and families in how to use and navigate these supports, as appropriate.

Communicate Clearly and Build Trust

Clear, ongoing communication helps build trust and supports informed use of AI-enabled technologies. Students, families, educators, and the broader school community should understand why AI is being used, the role it plays within a product, and the safeguards supporting responsible implementation. Communication should be proactive, use plain language, and evolve alongside the technology.



Implementation Strategies

- Clearly communicate the purpose and intended use of AI-enabled technologies.
- Explain when and how AI is being used, what information it collects, and how student information is protected.
- Make information about district policies, privacy practices, and human oversight easy to access.
- Provide clear pathways for students, families, and staff to ask questions, raise concerns, or opt in or out of participation.
- Update communications as technologies, evidence, and district practices evolve.



Find more in the Navigator's Community Engagement section at k12mentalhealthtech.org/community-engagement



Spotlight: Helping Students Navigate General-Purpose AI

Students are already using general-purpose AI tools to learn, create, solve problems, navigate relationships, process difficult experiences, and seek advice or emotional support. These experiences shape students' expectations about AI long before they encounter school-based mental health technologies.

For many young people, AI is becoming a routine part of everyday life. It may be the first place they ask sensitive questions, explore difficult emotions, or seek guidance because it's immediate, always available, and feels private and free of judgment. These interactions can create opportunities for learning and reflection, but they also raise important questions about accuracy, privacy, critical thinking, emotional reliance, and help-seeking. AI may provide inaccurate, misleading, or unsafe responses with confidence. It may reinforce distorted thinking, fail to recognize when a young person is at risk, or delay connection to trusted adults and/or appropriate care.

Schools do not control students' use of general-purpose AI, but they play an essential role in helping young people develop the knowledge, judgment, and life skills to navigate an AI-shaped world. AI literacy can help students understand what AI can and can't do, protect their privacy, evaluate AI-generated information critically, recognize when AI is not the right resource, and know when to reach out to a human for help.



Implications

- Recognize that students' everyday experiences with AI influence how they engage with school-based mental health technologies.
- Integrate AI literacy into digital citizenship, health, and mental health education, including AI's capabilities, limitations, and appropriate uses.
- Prepare educators and caregivers to have open, nonjudgmental conversations about how young people are using AI, including for emotional support.
- Reinforce that AI is not a therapist, counselor, or trusted adult, and strengthen pathways to human help.
- Avoid policies or messaging that discourages students from disclosing their use of AI, particularly when they are seeking support for emotional or mental health concerns.

Monitor Outcomes, Risks, and Changes Over Time

Implementation should be evaluated on an ongoing basis. Districts should monitor whether AI-enabled technologies are achieving their intended goals, while also remaining attentive to unintended consequences, changes in product performance, emerging evidence, and evolving student needs.



Implementation Strategies

- Monitor implementation fidelity alongside intended student and system outcomes.
- Collect regular feedback from students, families, educators, and school mental health professionals.
- Review significant product and AI model updates as part of ongoing implementation.
- Use emerging evidence and local data to refine implementation over time.
- Establish clear processes for modifying, expanding, pausing, or discontinuing implementation when appropriate.



Find more in the Navigator's Implementation section at k12mentalhealthtech.org/implementation



Enduring Priorities for Student Well-Being

AI will continue to evolve faster than any guidance document can. The principles that support young people's well-being are far more enduring. Young people need trusted adults, meaningful relationships, and school communities that foster belonging and hope. They need opportunities to build life skills, practice judgment, ask for help, support one another, and develop confidence in their ability to navigate hard moments. AI-enabled mental health tools should always strengthen and not weaken the systems of support that help young people thrive.

Resources

The resources below provide additional guidance for schools and districts navigating AI in student mental health contexts. Because AI technologies, laws, policies, and the evidence base are changing rapidly, consult the most current guidance available and work with legal, technology, privacy, and student support teams before adopting new tools.

K–12 Mental Health Technology Navigator | k12mentalhealthtech.org

A free, web-based resource that helps schools and districts choose and use effective digital tools for student mental health and well-being. Guides school leaders through the full product procurement journey, from assessing student needs and engaging communities through product selection, funding, implementation, and monitoring.

AASA, The School Superintendents Association | aasa.org/resources/technology-ai

Resources for technology and AI for school system leaders, including Bringing AI to School: Tips for School Leaders, co-authored with the Association for Supervision and Curriculum Development (ASCD), International Society for Technology in Education (ISTE), National Association of Elementary School Principals (NAESP), and the National Association of Secondary School Principals (NASSP).

American Psychological Association (APA) | apa.org/topics/artificial-intelligence-machine-learning

Guidance and research on child development, digital technology, and AI use, including APA health advisories on Artificial Intelligence and Adolescent Well-being and Use of Generative AI Chatbots and Wellness Applications for Mental Health, and guidance on Responsible Use of AI in Assessment

Common Sense Media | commonsense.org/ai

K–12 digital citizenship curriculum including AI literacy, product reviews, and research and guidance for educators and families.

Consortium for School Networking (CoSN) | cosn.org/ai

K-12 AI guidance focused on district readiness, implementation, and responsible adoption, including the CoSN/Council of the Great City Schools K-12 AI Maturity Tool.

Council of Chief State School Officers (CCSSO) | learning.ccsso.org/ccssos-artificial-intelligence-ai-resource-hub

AI Resource Hub aggregating state education agency guidance across the country.

Digital Promise | digitalpromise.org/initiative/artificial-intelligence-in-education/our-ai-portfolio/

Research and implementation resources on use of emerging technologies in schools, including A Framework to Understand, Evaluate, and Use Emerging Technology and an AI product certification.

EDSAFE AI Alliance | edsafeai.org

Multistakeholder initiative focused on SAFE by Design frameworks, guidance, and resources for safe, accountable, fair, and effective AI for students and schools.

EdSurge | edtechindex.org

Product Index includes information about evidence-based certifications obtained by products.

ISTE + ASCD | iste-ascd.org/ai

Educator resources on AI, digital learning, and technology integration, including a product evaluation tool.

NIST Artificial Intelligence Risk Management Framework (AI RMF) | nist.gov/artificial-intelligence

A framework for identifying, assessing, managing, and governing AI-related risks across the AI lifecycle.

TeachAI AI Guidance for Schools Toolkit | teachai.org/toolkit

A coalition led by Code.org, ETS, ISTE, Khan Academy, and the World Economic Forum has an AI Guidance for Schools Toolkit.

U.S. Dept. of Education | ed.gov

Federal guidance on responsible AI use in education, including the [Empowering Education Leaders toolkit](#).

About This Resource

This guide was developed by **The Jed Foundation (JED)** in partnership with **SecondMuse's Headstream program** as part of the K–12 Mental Health Technology Navigator. JED is a nonprofit that protects emotional health and prevents suicide for teens and young adults.

About Headstream Innovation

Headstream Innovation, a program by SecondMuse, is committed to leading and coordinating efforts to increase the utilization of digital well-being solutions in school systems and out-of-school programs.

As part of this work, Headstream convened a diverse group of 12 leaders in the space whose collaboration resulted in a Roadmap outlining 10 key recommendations for action. These recommendations laid the foundation for the K-12 Mental Health Tech Navigator, developed in partnership with JED and the Meadows Mental Health Policy Institute, who brought invaluable expertise and perspectives to building this resource. To learn more, visit [Headstream's K-12 Well-being Program](#).

About The Jed Foundation

The Jed Foundation (JED) is a nonprofit that protects emotional health and prevents suicide for our nation's teens and young adults. We partner with districts, colleges, and youth serving community-based organizations to strengthen their mental health, substance misuse, and suicide prevention programs and systems. We equip teens and young adults with skills and knowledge to help themselves and each other. We encourage community awareness, understanding, and action for young adult mental health. To learn more, visit jedfoundation.org.

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