



Guidance for the Use of AI to Support Mental Health and Substance Use Health in Canada

What we heard:

The Mental Health Commission of Canada (the Commission) and the Canadian Centre on Substance Use and Addiction (CCSA) are leading the development of Canada's first national guidance for the use of artificial intelligence (AI) to support mental health and substance use health (MHSUH).

Interest in the use of AI across health care systems continues to grow rapidly. At the same time, there are increasing concerns related to trust, accountability, privacy, oversight, safeguards, and the potential impact of AI on care delivery and therapeutic relationships.

National polling conducted by the Commission and Mental Health Research Canada (n = 3,519) in February 2026 highlights a significant gap between AI innovation and public confidence:

Trust in AI to deliver effective and safe mental health support



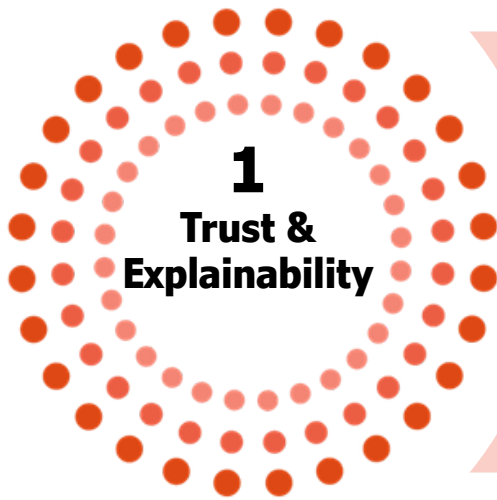
These findings reinforce the importance of human oversight, transparency, accountability, and meaningful consent in building public trust in AI-enabled MHSUH care.

This multi-year initiative responds to a clear and urgent need for practical, ethical, and system-informed direction to support the safe, effective, and equitable use of AI in care delivery. A multi-phase mixed methods approach is being used to synthesize existing evidence and gather new data by consulting with a diverse range of experts in multiple sectors.

The current phase of work represents a critical shift from conceptual considerations to the development of actionable guidance, implementation-oriented criteria, and practical resources to support adoption across the MHSUH ecosystem.

What we learned:

Findings from an environmental scan, literature review, and consultations with clinicians, researchers, policy makers, digital and AI tool developers, and people with lived and living experience reinforced **three core themes** related to the use of AI to support MHSUH.



From transparency to usable clarity

It is important to ensure that AI tools can be understood, evaluated, and used responsibly in practice. The focus must shift toward practical clarity to help users make relevant decisions. Practitioners require sufficient AI literacy to understand when and how tools should be used responsibly and to have confidence in the reliability of the tools' outputs.

Key insights:

- AI literacy efforts must be ongoing, supported, and embedded at the system level.
- Transparency should prioritize clear communication of risks, limitations, and data use.
- Continuous monitoring, validation, and oversight are essential but must be feasible across organizations.
- Current approaches risk placing unrealistic accountability requirements on clinicians, particularly under “human-in-the-loop” models, where a human is expected to oversee, validate, and take responsibility for AI-generated outputs, despite having a limited ability to fully interpret or challenge how those outputs are produced.





2 Human- Centred Care

Preserving the therapeutic relationship

AI should enhance care without disrupting the therapeutic relationship. Human-centred care must remain foundational, with AI supporting rather than replacing human connection, empathy, and clinical judgment.

Key insights:

- Informed consent mechanisms to use AI must be meaningful, dynamic, and understandable.
- AI must support and enhance human-centred care, particularly in relational and clinical decision-making contexts.
- Shared accountability among clinicians, organizations, and regulators is essential to avoid shifting risk onto providers, while preserving clinical judgment and respecting the client's role in decision making.
- Individuals must retain real control over their personal data, including the ability to opt out without losing access to care.



3 Equity & Data Governance

Addressing structural risk

Fairness, inclusion, privacy, and responsible data use must be promoted while recognizing and preparing for inevitable risks.

Key insights:

- AI must address data gaps and ensure representation of diverse populations and perspectives.
- MHSUH data require heightened privacy, security, and governance protections.
- Strong safeguards must be paired with clear accountability and breach response mechanisms.
- Not using AI may also exacerbate inequities, particularly in access to care.

Where we are going:

In the next phase of work, these considerations will be translated into formal guidance with actionable criteria. Implementation resources will be tailored to the following priority groups:

- **clients and service users**
- **clinicians and service providers**
- **developers and technology organizations**
- **policy makers and researchers**

A central focus of this work is ensuring that health-care systems share accountability for safe and ethical AI use, rather than individual clinicians or service users being solely accountable.

This work represents a shift toward system-enabled and governance-driven AI integration, positioning Canada as a leader in responsible AI use in MHSUH care. By advancing clear, practical, and evidence-informed guidance, this initiative aims to support safer, more equitable, and more effective integration of AI across the Canadian MHSUH landscape.

The final project guidance is expected to be released in 2027.

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Scan to stay informed about the progress of this project.



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on Substance Use
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