

February 2026

AI Chatbots

Samaritans is the charity that prevents suicide through the power of human connection. Connecting people in crisis with trained volunteers who will always listen.

We are seeing more people in the UK turn to using chatbots to support their mental health, often due to long delays to accessing NHS services leaving them with no other option for treatment. Chatbots and AI platforms offer an immediate and accessible alternative, as one of our lived experience advisors told us:

‘Therapy is expensive and waiting lists for NHS are very long. If someone needs support, this feels a lot more accessible than either of those options.’¹

However, we have serious concerns about the effectiveness and safety of the chatbot and AI platforms. Safeguards can weaken during long interactions leading to the exposure of suicide method information, and in some tragic cases, the encouragement of suicide and self-harm.

What is Samaritans calling for?

The Government must clarify and extend the scope of the Online Safety Act to explicitly cover AI chatbots. This must include urgently publishing clarity on which AI chatbot models are not currently covered by the Online Safety Act and why. Where gaps exist, legislation or statutory guidance should be introduced to explicitly bring all AI chatbot platforms within scope, regardless of whether they function as search engines or user-to-user services. This should include standalone, character-based and ‘companion’ AI systems.

The Government must address access gaps driving reliance on AI through a cross Governmental approach. There is evidence of a growing reliance on AI chatbots for mental health support driven in part by long waiting times and persistent barriers to accessing NHS services. Reducing these systemic pressures is essential to prevent AI systems being used as a ‘last resort’ by people in distress. This requires a coordinated, cross-government approach involving the Department of Health and Social Care, the Department for Science, Innovation and Technology and public health bodies, ensuring that mental health service provision, AI regulation and suicide prevention policy are aligned. Without such coordination, there is a risk that gaps in care will continue to be filled by unregulated or unsafe technologies.

¹ Samaritans’ Online Excellence Programme Lived Experience Panel – August 2025



Ofcom must publish dedicated guidance on AI chatbots under the Online Safety Act. The guidance should be clear, accessible and explain how the Online Safety Act duties apply to AI chatbot platforms, including expectations around suicide and self-harm content.

Ofcom should strengthen the oversight of the ‘small but risky’ taskforce. Despite promising rhetoric, we have seen little concrete action taken against smaller platforms. The taskforce must take urgent action relating to AI chatbot platforms that present risk of suicide and self-harm content.

Ofcom must monitor and respond to emerging harms linked to dependency and withdrawal. As use of AI chatbots for mental health support continues to increase, there is already clear evidence of associated risks, and it is essential that Ofcom remains responsive to new and evolving harms. This monitoring should include evidence of user dependency, unhealthy emotional attachment, and the potential mental health impacts of the sudden withdrawal or removal of chatbot services.

Evidence

Mental health problems, including suicidal ideation and behaviour, continue to carry stigma, which can prevent people from seeking help. In addition, there are practical barriers to accessing support, such as cost, time, availability, and cultural or language barriers. Online services can present an opportunity to overcome some of these challenges. Chatbots, in particular, can provide information and supportive messaging; however, this must be done carefully to avoid providing harmful information or increasing the risk of suicide or self-harm.

Use of AI chatbots for health-related purposes is already widespread. In 2024, a quarter of young adults under 30 reported using AI chatbots at least once a month to find health information and advice.² Research from the charity Mental Health UK found that more than one in three (37%) of adults said they have used an AI chatbot to support their mental health or wellbeing.³ Furthermore, a 2025 report from Common Sense Media found that 72% of teens had used an AI companion, and one third of users said they had chosen to discuss important or serious matters with AI companions instead of real people.⁴

We asked our online safety lived experience panel why people are turning to chatbots to support their mental health. Panel members highlighted that chatbots are always available

² Presiado, M., Montero, A., Lopes, L., & Hamel, L. (2024, August 15). *KFF Health Misinformation Tracking Poll: Artificial intelligence and health information*. KFF. <https://www.kff.org/public-opinion/kff-health-misinformation-tracking-poll-artificial-intelligence-and-health-information/>

³ Mental Health UK. (2025, November 18). *Over one in three using AI chatbots for mental health support, as charity calls for urgent safeguards*. Mental Health UK. <https://mentalhealth-uk.org/blog/over-one-in-three-using-ai-chatbots-for-mental-health-support-as-charity-calls-for-urgent-safeguards/>

⁴ Robb, M. B., & Mann, S. (2025). *Talk, trust, and trade-offs: How and why teens use AI companions* (Report). Common Sense Media. https://www.common Sense Media.org/sites/default/files/research/report/talk-trust-and-trade-offs_2025_web.pdf

and private, and can feel less judgmental, making it easier to open up. They may be particularly helpful for people who struggle to talk to humans, or as a “better than nothing” option, especially out of hours. Some panellists also noted that chatbots can help people calm down through kind, validating phrases and can feel comforting.

However, there are significant risks associated with the use of chatbots in the context of mental health and suicide prevention. Worryingly, this includes the provision of information or encouragement on how users can harm themselves, including access to lethal means. Whilst some platforms have implemented safeguards, in longer conversations, safeguards may be forgotten or eroded, increasing the risk that harmful content is generated. Chatbots may also fail to recognise or appropriately respond to the concealment of suicidal thoughts, reinforce maladaptive thinking patterns, validate harmful behaviours or encourage users to turn harmful impulses into actions. They may also create an illusion of empathy that is not matched by genuine understanding or accountability.

Research suggests that commonly used chatbot models tend to perform better at the low and high ends of the suicide risk spectrum, but struggle to respond appropriately to intermediate levels of suicide risk.⁵ Consistent with this, our online safety lived experience panel expressed concern that chatbots may not recognise a crisis, the seriousness or urgency of a situation, or may misunderstand nuance.⁶

Concerns have also been raised about boundaries, particularly in relation to relational simulation. Risks appear to cluster around “companion” AI systems. Clear boundaries are required: emotionally responsive companions should not be accessible to minors, and for all users, relational modelling should be limited to practising specific skills such as communication or problem-solving, rather than simulating friendship, romance, or therapy. Without such boundaries, simulated intimacy risks deepening loneliness, delaying disclosure to real people, displacing human relationships, hampering the development of life skills, and reinforcing unhealthy dependence. The online safety lived experience panel also highlighted concerns about boundary-setting.⁷

Additional risks include the development of unhealthy attachments and over-reliance on chatbots, and the potential for increased loneliness, a key risk factor for suicide.⁸ While there is some evidence that carefully designed chatbot responses can reduce loneliness, this benefit is not guaranteed. Other concerns include age-inappropriate responses, low-quality outputs and misinformation, and the potential for large-scale psychological harm if users who have become attached to chatbots experience sudden removal of those products.

⁵ McBain, R. K., Cantor, J. H., Zhang, L. A., Baker, O., Zhang, F., Burnett, A., Kofner, A., Breslau, J., Stein, B. D., & Mehrotra, A. (2025). *Evaluation of alignment between large language models and expert clinicians in suicide risk assessment*. *Psychiatric Services*, 76(?), 944–950. <https://doi.org/10.1176/appi.ps.20250086>

⁶ Samaritans’ Online Excellence Programme Lived Experience Panel – August 2025

⁷ Samaritans’ Online Excellence Programme Lived Experience Panel – August 2025

⁸ Rodríguez-Martínez, A., Amezcua-Aguilar, T., Cortés-Moreno, J., & Jiménez-Delgado, J. J. (2023). Qualitative Analysis of Conversational Chatbots to Alleviate Loneliness in Older Adults as a Strategy for Emotional Health. *Healthcare (Basel, Switzerland)*, 12(1), 62. <https://doi.org/10.3390/healthcare12010062>

Policy context

The Online Safety Act 2023 was presented as being ‘future-proof’, with the ambition of responding to emerging online harms; however, less than three years after its passage, that ambition appears to be falling short.⁹ As drafted, the Act applies to “user-to-user services and search engines”, and in response to parliamentary questions, government ministers have indicated that AI chatbots fall within this framework. Nevertheless, there remains uncertainty about whether all chatbot models are in fact covered. For example, some interactions with platforms such as ChatGPT do not involve searching the internet, while smaller platforms and character-based models may also operate without any search functionality, raising questions about whether they clearly fall within the Act’s scope.

In a response to the Science, Innovation and Technology Committee on the 3rd December 2025, the Secretary of State, Liz Kendall stated that she had tasked officials in the department with whether all chatbots are covered in the Act. ‘It is my understanding from their work that they aren’t. I am now looking at how we will cover them and if that requires legislation that is what we will do.’¹⁰ We welcomed this contribution from the Secretary of State and we are pleased that this is an urgent issue for the department. However, we would like details of which chatbots are not covered by the act, and why.

The Secretary of State’s confirmation that some platforms are covered by the Online Safety Act is welcome. Whilst there are no specific measures in the Act relating to AI chatbots, the measures in the Act introduce duties for platforms hosting chatbots. In practice, this means that chatbot platforms must assess and mitigate the risk of illegal and harmful content, prevent the generation or dissemination of illegal material (such as content encouraging suicide or self-harm), and put in place proportionate safety systems and processes. Relevant duties include conducting risk assessments.

Samaritans’ work to reduce harm

Samaritans’ Online Excellence Programme (OEP) aims to minimise harms online and maximise the opportunities for support and prevention of suicide and self-harm. The programme includes a ground breaking research and insight programme; world leading industry guidelines for online platforms; an online safety advisory service; and a hub of online resources for users, parents and carers and practitioners.

⁹ Department for Science, Innovation and Technology. (2025). *Statement of strategic priorities for online safety*. GOV.UK. https://assets.publishing.service.gov.uk/media/6863afdd1c735341c2111b58/Final_Statement_of_Strategic_Priorities_for_Online_Safety.pdf

¹⁰ UK Parliament, *Science, Innovation and Technology Committee: Oral evidence: Work of the Secretary of State for the Department for Science, Innovation and Technology*, HC 1543 (3 Dec. 2025), UK Parliament, available at <https://committees.parliament.uk/oralevidence/16843/pdf/>

We are working closely with industry to ensure that chatbots are developed in a safe way, which is conscious of suicide and self-harm content. Through our OEP advisory service, we have supported a range of platforms on their chatbots and AI tools ensuring that they minimise access to harmful content relating to self-harm and suicide and they maximise support opportunities for their users. We are also undertaking research exploring the ways in which people use AI to seek support for self-harm and suicide to gain a greater understanding of the benefits and risks.

The OEP works to promote consistently high standards across the sector by providing a centralised space for those working in and around the industry to find support and guidance, providing opportunities to convene and share best practice. In 2025 the OEP hosted roundtables to bring together academics, tech industry and third sector organisations to discuss the risks of chatbots, safeguarding and best practice for suicide prevention. We have also worked with our lived experience panel to ensure that we can influence best practice. This includes information sharing via the UK Safer Internet Centre Early Warning Working Group, Internet Matters Vulnerable Users Group and Department of Health and Social Care Concerning Methods Working Group.