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ACLU OF RI POSITION: AMEND

**TESTIMONY ON 26-H 7349,
RELATING TO OVERSIGHT OF ARTIFICIAL INTELLIGENCE TECHNOLOGY IN
MENTAL HEALTH CARE ACT
March 3, 2026**

This bill would commendably establish regulations regarding the use of artificial intelligence in mental healthcare treatment. The ACLU believes it is essential to closely watch the use of AI in the growing spheres in which it is being applied to guard against discrimination and bias in its application, to promote informed consent, to avoid clearly inappropriate guidance to unsuspecting AI users, and to prevent breaches of confidentiality. Thus, bills such as this one, which require that clients provide informed consent in the use of AI, serve an important role, and promote a goal that we strongly support.

However, we believe that the legislation is overly broad in one particular respect and should be amended to avoid its application to individuals and situations that should not fall within the scope of the bill's intended reach.

While the legislation is primarily aimed at setting standards for the use of AI by licensed professionals, the bill also bars any non-licensed individual from providing, advertising, or otherwise offering "therapy or psychotherapy services." §40.1-5.5-3(b). That term is broadly defined as any service "provided to diagnose, treat, *or improve* an individual's mental health or behavioral health." (emphasis added) The bill further contains only three exemptions from that broad definition of services: religious counseling, peer support, and "[s]elf-help materials and educational resources that ... do not purport to offer therapy or psychotherapy services." §40.1-5.5-5(c).

Our concern is that there are all sorts of services provided by non-licensed entities – whether involving AI or not – that may legitimately claim to be designed to improve mental health, broadly speaking, such as through sports, exercise, games or many other activities that could be helpful in that regard. In addition, under the bill's broad definition, there are innumerable self-help materials and educational resources that could "purport to offer" therapy or psychotherapy services (i.e., aim to "improve mental health"), and in doing so, therefore be considered unlawful. Indeed, most self-help materials, by their very nature, seek to do so. However, we believe that the bill's reach to cover and restrict such information raises significant First Amendment concerns.

We therefore urge the committee to consider narrowing the bill's scope to avoid this outcome. Thank you for considering our views.