



# Enhancing mental health with Artificial Intelligence: Current trends and future prospects

David B. Olawade<sup>a,\*</sup>, Ojima Z. Wada<sup>b</sup>, Aderonke Odetayo<sup>c</sup>,  
Aanuoluwapo Clement David-Olawade<sup>d</sup>, Fiyinfoluwa Asaolu<sup>e</sup>, Judith Eberhardt<sup>f</sup>

<sup>a</sup> Department of Allied and Public Health, School of Health, Sport and Bioscience, University of East London, London, United Kingdom

<sup>b</sup> Division of Sustainable Development, College of Science and Engineering, Hamad Bin Khalifa University, Qatar Foundation, Doha, Qatar

<sup>c</sup> School of Nursing, Tung Wah College, Hong Kong SAR, China

<sup>d</sup> Department of Nursing, University of Derby, Derby, United Kingdom

<sup>e</sup> Faculty of Health and Life Sciences, De Montfort University, United Kingdom

<sup>f</sup> School of Social Sciences, Humanities and Law, Department of Psychology, Teesside University, Borough Road, Middlesbrough TS1 3BX, United Kingdom

## ARTICLE INFO

### Keywords:

Artificial Intelligence  
Mental Health  
Teletherapy  
Psychology  
Diagnosis

## ABSTRACT

Artificial Intelligence (AI) has emerged as a transformative force in various fields, and its application in mental healthcare is no exception. Hence, this review explores the integration of AI into mental healthcare, elucidating current trends, ethical considerations, and future directions in this dynamic field. This review encompassed recent studies, examples of AI applications, and ethical considerations shaping the field. Additionally, regulatory frameworks and trends in research and development were analyzed. We comprehensively searched four databases (PubMed, IEEE Xplore, PsycINFO, and Google Scholar). The inclusion criteria were papers published in peer-reviewed journals, conference proceedings, or reputable online databases, papers that specifically focus on the application of AI in the field of mental healthcare, and review papers that offer a comprehensive overview, analysis, or integration of existing literature published in the English language. Current trends reveal AI's transformative potential, with applications such as the early detection of mental health disorders, personalized treatment plans, and AI-driven virtual therapists. However, these advancements are accompanied by ethical challenges concerning privacy, bias mitigation, and the preservation of the human element in therapy. Future directions emphasize the need for clear regulatory frameworks, transparent validation of AI models, and continuous research and development efforts. Integrating AI into mental healthcare and mental health therapy represents a promising frontier in healthcare. While AI holds the potential to revolutionize mental healthcare, responsible and ethical implementation is essential. By addressing current challenges and shaping future directions thoughtfully, we may effectively utilize the potential of AI to enhance the accessibility, efficacy, and ethicality of mental healthcare, thereby helping both individuals and communities.

## Introduction

The convergence of Artificial Intelligence (AI) and mental healthcare fields marks a significant transformation in healthcare [1,2]. The backdrop against this transformation is the evolving paradigm of mental health. What was once stigmatized and often overlooked is now recognized as a crucial dimension of overall well-being. However, this emerging awareness has also unveiled the scale of the mental health crisis that plagues societies worldwide. According to the World Health Organization (WHO), mental health disorders are now a substantial contributor to the global disease burden, with depression alone

representing the leading cause of disability globally [3]. The surge in the prevalence of mental health disorders has placed an unprecedented demand on healthcare systems, revealing the inadequacies of traditional models of mental health care [4,5]. The conventional approach, which heavily relies on in-person consultations and therapies, falls short of addressing the increasing demand for accessible, affordable, and easily expandable mental health services [4]. This disparity between the demand for and supply of mental healthcare highlights the pressing need for innovative solutions.

AI possesses remarkable capabilities, such as efficiently handling extensive datasets and facilitating the examination of complex patterns

\* Corresponding author.

E-mail address: [d.olawade@uel.ac.uk](mailto:d.olawade@uel.ac.uk) (D.B. Olawade).

<https://doi.org/10.1016/j.glmedi.2024.100099>

Received 28 November 2023; Received in revised form 8 April 2024; Accepted 15 April 2024

Available online 17 April 2024

2949-916X/© 2024 The Author(s). Published by Elsevier Ltd. This is an open access article under the CC BY license (<http://creativecommons.org/licenses/by/4.0/>).

and relationships [6]. In the context of mental healthcare, where understanding complex human behaviors and emotions is paramount, AI offers the potential to revolutionize mental healthcare by providing insights and solutions that were previously beyond the reach of conventional methods [7,8]. It is a transformative tool that offers advanced detection approaches, tailored therapies, and virtual therapeutic platforms. It would potentially broaden the availability of healthcare, reduce stigma, and improve treatment outcomes [9,10].

Integrating AI into mental healthcare is reshaping the landscape of mental healthcare; it represents an evolution and a revolution in mental well-being [11]. However, while this transformation presents the potential for widespread access, facilitating early intervention, and personalizing treatments, it also gives rise to ethical considerations, regulatory challenges, and the need for ongoing research and development [12–14]. As the diverse range of applications and implications of AI in this field are explored further, the synergy between human expertise and AI capabilities holds the potential to usher in a new era of mental healthcare.

The escalating burden of mental health issues globally is nothing short of a pandemic, contributing to approximately 16 % of the global disease burden [15]. With prominent mental ailments such as depression and anxiety costing the global economy about 1 trillion USD annually in lost productivity, the urgency for effective solutions cannot be overstated [16]. The pervasive stigma surrounding mental health exacerbates the crisis, leaving countless individuals without the necessary care and contributing further to a cycle of neglect and suffering. However, the advent of Artificial Intelligence (AI) in healthcare presents a beacon of hope. By integrating AI into mental health services, there is a tangible opportunity to not only mitigate the effects of this global pandemic but to transform the landscape of mental health care. AI's potential to enhance early detection, provide personalized treatment options, and offer support through innovative platforms could revolutionize how we approach mental wellness, making care more accessible and less stigmatized. This narrative review arrives at a critical juncture. As the AI boom unfolds globally, it is imperative to assess both the strides made in the AI and mental health field and to anticipate the challenges and opportunities that lie ahead. By exploring the progress, prospects, and potential pitfalls of integrating AI into mental health care, this review aims to underscore the significance of this fusion in addressing one of the most pressing health crises of our time.

Methods

This paper adopts a narrative review approach to comprehensively investigate the utilization of Artificial Intelligence (AI) in mental healthcare. The screening and eligibility criteria for paper selection involved inclusion of papers published in peer-reviewed journals, conference proceedings, or reputable online databases, focusing on the application of AI in mental healthcare, including review papers providing an overview, analysis, or synthesis of existing literature. Exclusion criteria encompassed papers failing to meet the inclusion criteria, duplicates, non-English publications, or those unrelated to the review topic. The screening process consisted of three stages: title screening, abstract screening, and full-text eligibility assessment, with papers not meeting inclusion criteria being excluded at each stage. The search strategy aimed to identify relevant papers published on "Artificial Intelligence in Mental Healthcare" between January 2019 and December 2023, encompassing academic journals, conference proceedings, and reputable online databases. Following selection, review papers underwent further analysis for pertinent information, trends, examples, and ethical considerations concerning AI in mental healthcare.

Result

A total of 211 papers were found in four database searches, out of which 87 publications were excluded due to non-English language and

duplicates. Following the abstract and title screening, 32 articles were eliminated as they did not fulfill the eligibility criteria. Therefore, this review included a total of 92 eligible studies. (See Table 1).

History of AI in mental healthcare

The journey of AI's integration into mental healthcare can be traced back to the mid-20th century, a period marked by the emergence of the computing era, when scientists began to envision the possibility of robots imitating cognitive processes, thereby setting the stage for further advancement in this field [17–19]. In the 1950s and 1960s, AI pioneers Allen Newell and Herbert A. Simon embarked on groundbreaking research, aiming to develop AI models of human problem-solving [17, 18,20,21]. Their work laid the foundational concepts of symbolic AI, later proving instrumental in simulating cognitive processes in mental health contexts [21]. Though rudimentary by today's standards, this early AI research laid the foundation for a significant convergence of AI and psychology.

By the late 1960s and early 1970s, Joseph Weizenbaum created one of the earliest AI applications in psychology [18]. His program, ELIZA, was a chatbot that simulated a Rogerian psychotherapist [22]. While ELIZA's responses were relatively simplistic, they could engage users in text-based conversations, providing a glimpse into the potential for technology to support mental health interactions [22,23]. The use of AI in mental healthcare over the decades has experienced a progressive expansion. The development of expert systems, rule-based AI systems designed to emulate human expertise, commenced in the 1980s [11,24]. These systems aimed to provide diagnostic and treatment recommendations across several psychological domains [1,25]. Although the skills of the early AI systems were somewhat limited compared to modern AI, they represented a notable advancement in integrating technology and mental health [26,27].

The late 20th century witnessed the emergence of computerized cognitive-behavioral therapy (CBT) programs [28,29]. These interactive software applications aim to provide evidence-based therapy interventions for prevalent mental health conditions. Although the initial efforts were somewhat rudimentary compared to today's AI-powered interventions, they signified a transition into utilizing technology to enhance the accessibility of mental healthcare [28]. As computing power advanced, AI's role in mental healthcare evolved exponentially. The advancement of AI in the 21st century has encompassed various aspects of mental healthcare, including early identification of mental health problems, individualized treatment plans, virtual therapists, advances in teletherapy, and continuous monitoring [9,10]. These

Table 1  
Keyword search and paper selection process.

Database/ Source	Keywords used	Initial number of papers	Papers screened out	Number of papers after screening	Number of papers after eligibility
PubMed	"Artificial Intelligence in Psychology"	62	28	34	27
IEEE Xplore	"AI in Mental Health Therapy Review"	24	9	15	8
PsycINFO	AI Applications in Mental Healthcare Review"	37	14	23	19
Google Scholar	"AI Trends in Mental Health"	88	36	52	38
Total		211	87	124	92

contemporary applications of AI have the potential to revolutionize the field by making mental health care more accessible, effective, and data-driven.

Overall, the history of AI in mental healthcare is marked by a series of evolutionary milestones, from early cognitive modeling to today’s advanced AI-driven interventions [30]. This journey reflects the ever-growing recognition of technology’s potential to support and enhance mental well-being, suggesting a future where AI plays an integral role in addressing the global mental health crisis. Table 2 below highlights specific AI tools used in current mental healthcare.

The role of AI in diagnosis

AI has emerged as a valuable tool in the early detection and prediction of mental health disorders [30]. These technologies, whether analyzing speech, text, facial expressions, or electronic health records, are transforming how mental health is diagnosed and managed [1,51]. With the aid of predictive models, AI enhances early intervention, personalizes treatment plans, and improves overall mental well-being [10, 52]. Fig. 1 highlights the application of AI in mental health diagnosis.

Early detection of mental health disorders

AI-driven tools have made significant strides in analyzing speech, text, and facial expressions to identify early signs of mental health disorders. Natural Language Processing (NLP) techniques enable extracting valuable insights from written or spoken words [53,54]. For example,

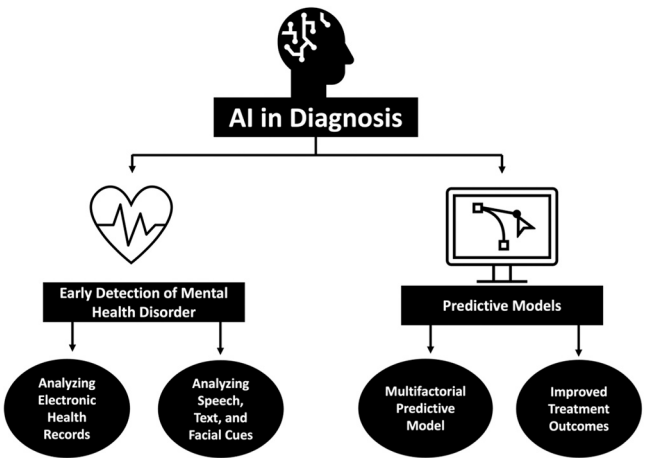


Fig. 1. Application of AI in mental health diagnosis.

sentiment analysis can identify nuanced changes in an individual’s emotional condition by examining social media posts, chat logs, or written diaries [55].

Moreover, voice analysis can detect alterations in speech patterns, encompassing variations in pitch, tone, and rhythm, which might potentially serve as indicators of anxiety, depression, or other mental health conditions [56,57]. Facial expression analysis, often coupled with computer vision, can provide insights into an individual’s emotional

Table 2  
AI tools used in current mental healthcare.

AI tools	Chatbot-based therapy
1. Woebot	Woebot is a chatbot that provides CBT-based therapy for depression and anxiety. It has been shown to be effective in reducing symptoms of depression and anxiety in clinical trials. [31]
2. Wysa	Wysa is a chatbot that provides therapy support for a variety of mental health conditions, including depression, anxiety, stress, and loneliness. It uses a combination of CBT, mindfulness, and positive psychology to help users improve their mental health. [32]
3. Talkspace	Talkspace is an online therapy platform connecting patients with licensed therapists through video, text, and audio messaging. It uses AI to match patients with therapists best suited to their needs. [34]
4. BetterHelp	BetterHelp is an online therapy platform that connects patients with licensed therapists. It uses AI to match patients with therapists but offers a broader range of therapeutic approaches, including cognitive-behavioral therapy (CBT) and psychodynamic therapy. [33]
AI tools	Emotional health apps
1. Moodfit	Moodfit is an app that uses AI to track and analyze users’ moods and emotions. It can help users to identify patterns in their moods and to develop strategies for managing their emotions. [35]
2. Happify	Happify is an app that uses AI to help users build resilience and happiness. It offers a variety of games, activities, and exercises designed to improve users’ mood, well-being, and resilience. [36]
3. Headspace	Headspace is an app that offers guided meditation and mindfulness exercises. It uses AI to personalize the meditation experience for each user. [37]
4. Calm	Calm is an app offering guided meditation and mindfulness exercises. It also offers other relaxation and sleep-aid features, such as sleep stories and ambient sounds. [38]
5. Shine	Shine is an app that provides personalized daily inspiration and support. It uses AI to learn about users’ needs and interests and then provides content and resources tailored to each user. [39]
6. DBT Coach	DBT Coach is an app that provides users with tools and resources to help them practice dialectical behavior therapy (DBT), which teaches people how to manage their emotions, thoughts, and behaviors healthily. [40]
7. Companion	CBT Companion is an app that helps users practice cognitive-behavioral therapy (CBT), which teaches people how to identify and change negative thought patterns and behaviors. [41]
8. MindShift CBT	MindShift CBT is an app that helps users practice CBT techniques for anxiety and depression. It offers a variety of interactive exercises and tools to help users manage their symptoms and improve their mood. [42]
9. PTSD Coach	PTSD Coach is an app that provides users with tools and resources to help them manage post-traumatic stress disorder (PTSD), a mental health condition that can develop in people who have experienced or witnessed a traumatic event. [43]
10. SuperBetter	SuperBetter is an app that helps users build resilience and achieve their goals by gamifying the process. It offers a variety of challenges and rewards to help users stay motivated and make progress. [44]
AI tools	Smart mental health tools
1. Kintsugi	Kintsugi utilizes facial and voice analysis to provide real-time emotional feedback to therapists, aiding in the early detection of emotional distress. [45]
2. IBM’s Watson Health	IBM’s Watson Health employs AI to predict disease progression and treatment outcomes by analyzing comprehensive patient data. [46]
3. Cerebral	Cerebral utilizes AI to support therapists in refining personalized treatment plans for patients with mental health conditions. [47]
4. Mindstrong Health	Mindstrong Health employs AI to analyze smartphone keyboard interactions during teletherapy, providing therapists with insights into emotional states. [48]
5. Smartwatch	Smartwatches equipped with AI algorithms monitor changes in sleep patterns, physical activity, and heart rate, offering valuable insights for mental health monitoring. [49]
6. Pear Therapeutics’ reset	Pear Therapeutics’ reSET is an FDA-approved prescription digital therapeutic that tracks patient engagement and progress, enabling data-driven treatment adjustments. [50]

state [58]. AI systems can detect micro-expressions and subtle changes in facial features that may indicate underlying psychological conditions [59]. This technology benefits remote mental health monitoring through video consultations or mobile apps. The current trend in this domain involves advancing AI algorithms capable of discerning and comprehending these subtle indicators with notable precision. As AI systems continue to improve, they hold the potential to provide early warning signs of mental health disorders, allowing for timely intervention and support. The AI-driven mental health app "Woebot" employs sentiment analysis to analyze user text input [31]. If a user consistently expresses sadness, hopelessness, or despair in their chat interactions, Woebot recognizes these patterns and offers guidance or recommends professional help. In voice analysis, "Cogito," an AI platform used in telehealth services, monitors patient speech changes during therapy sessions [60, 61]. If there are shifts in pitch, tone, or rhythm that may indicate anxiety or depression, Cogito alerts the therapist to address these emotional cues during the session. Facial expression analysis is another valuable tool in early detection. "Affectiva," a pioneering company in emotion AI, has developed facial expression analysis tools [62]. These tools have been employed in various mental health studies. For instance, researchers used Affectiva's technology to examine the facial expressions of individuals with depression, shedding light on potential early diagnostic markers [63].

AI has also shown promise in analyzing electronic health records (EHRs) to aid in the early diagnosis of mental health disorders [52,64]. Machine learning algorithms can sift through vast patient data, including medical histories, diagnostic tests, and clinical notes, to identify patterns suggesting a mental health condition [65,66]. These algorithms can flag patients at risk, ensuring that healthcare providers pay closer attention to their mental well-being during routine care. Additionally, AI can facilitate the integration of mental health data into a patient's overall health profile, enabling a more holistic approach to healthcare [67,68]. This trend toward personalized medicine aids early detection as it considers an individual's unique medical history, genetics, and lifestyle factors.

The "Google Depression Screening Tool" is a prime example [69]. When users search for depression-related terms on Google, the tool prompts users to complete the Patient Health Questionnaire-9 (PHQ-9), a clinically validated questionnaire [69–71]. Based on the user's responses, it provides guidance on seeking professional help if necessary. This integration into one of the world's most widely used search engines significantly increases the potential reach of mental health assessments.

### *Predictive modeling*

AI is increasingly used to develop multifactorial predictive models for mental health [1,51,72]. These models consider a wide range of factors, including genetics, environmental factors, lifestyle choices, and social determinants of health. By combining these variables, AI can predict an individual's risk of developing a mental health condition. For example, genetic information can provide insights into predispositions, while environmental factors such as traumatic events or social isolation can be integrated to enhance accuracy further. The mental health platform "Ginger" utilizes predictive analytics to identify individuals at risk of developing mental health conditions [73]. By analyzing usage patterns and assessment responses, Ginger proactively reaches out to users who may require additional support. For example, if a user displays a combination of behaviors such as increased stress levels, disrupted sleep patterns, and social withdrawal, Ginger's predictive model may prompt a mental health coach to offer assistance [74].

One of the notable trends in predictive modeling is the integration of wearable technology and mobile health apps [28,75]. These tools collect real-time data on individuals' behaviors, such as sleep patterns, physical activity, and social interactions, which can be invaluable for creating accurate predictive models [72].

Predictive modeling helps identify individuals at risk and improves

treatment outcomes. AI-driven models can predict how a patient may respond to different treatment approaches, whether psychotherapy, medication, or lifestyle changes [10,76]. This personalized approach ensures that individuals receive tailored interventions, optimizing the chances of recovery and minimizing the risk of adverse effects [77]. Furthermore, predictive models have the capability to forecast disease progression, thereby assisting healthcare providers in making well-informed decisions about treatment plans and resource allocation [78]. By predicting the probable course of mental health disorders, healthcare systems can enhance their readiness to address the requirements of mental health services and effectively allocate resources accordingly. For example, IBM's "Watson for Drug Discovery" uses AI to analyze vast genetic and chemical information datasets to identify potential drug candidates for mental health conditions such as schizophrenia and bipolar disorder [79]. This accelerates drug development, potentially offering more effective treatments for these conditions.

### *AI in treatment*

AI is reshaping the landscape of mental health treatment through personalized interventions and the rise of virtual therapists and chatbots [80–82]. These trends signify a pivotal shift towards potentially more effective, accessible, and scalable mental healthcare. Fig. 2 below highlights the application of AI in mental health treatment.

### *Personalized treatment plans*

Integrating AI into mental health treatment has brought a profound shift toward personalized interventions. Fueled by vast datasets and machine learning capabilities, AI algorithms can analyze an individual's unique characteristics and needs [83,84]. This includes genetic predispositions, past treatment responses, behavioral patterns, and real-time physiological data. This comprehensive analysis allows AI to customize treatment plans unprecedentedly, ensuring appropriate interventions are matched to individual patients. AI can analyze a patient's genetic makeup to predict their response to various antidepressant medications [85,86]. For example, a patient with a specific genetic profile may be more likely to respond positively to a particular class of antidepressants. Personalized treatment plans can significantly enhance the chances of recovery and minimize the side effects of ineffective medications.

The impact of personalized treatment plans on therapy efficacy could be significant. Traditionally, mental health treatments have followed a one-size-fits-all approach, sometimes leading to suboptimal outcomes. AI-driven personalization enables therapists to design interventions that align precisely with an individual's specific challenges and strengths [87,88]. This leads to more effective treatments, shorter recovery times, and improved patient satisfaction. In the context of addiction treatment, AI can continuously observe and analyze a patient's behavioral patterns, such as triggers, stressors, and substance use [89,90]. AI can alert therapists and patients to potential relapse risks in real-time by identifying high-risk situations. This proactive approach allows for timely interventions and the modification of treatment strategies.

AI is also pivotal in guiding treatment decisions throughout the therapeutic journey. Algorithms continuously analyze patient progress, adjusting treatment plans in real-time based on evolving needs and responses [91–93]. This dynamic approach minimizes the trial-and-error often associated with mental health treatments, optimizing the therapeutic process and maximizing the chances of success. AI-driven algorithms can adapt CBT interventions based on the patient's progress and unique cognitive patterns [94,95]. For instance, if a patient exhibits perfectionist tendencies, the AI may effectively adapt the therapeutic approach to address these traits. This tailored approach enhances the effectiveness of CBT for different individuals.



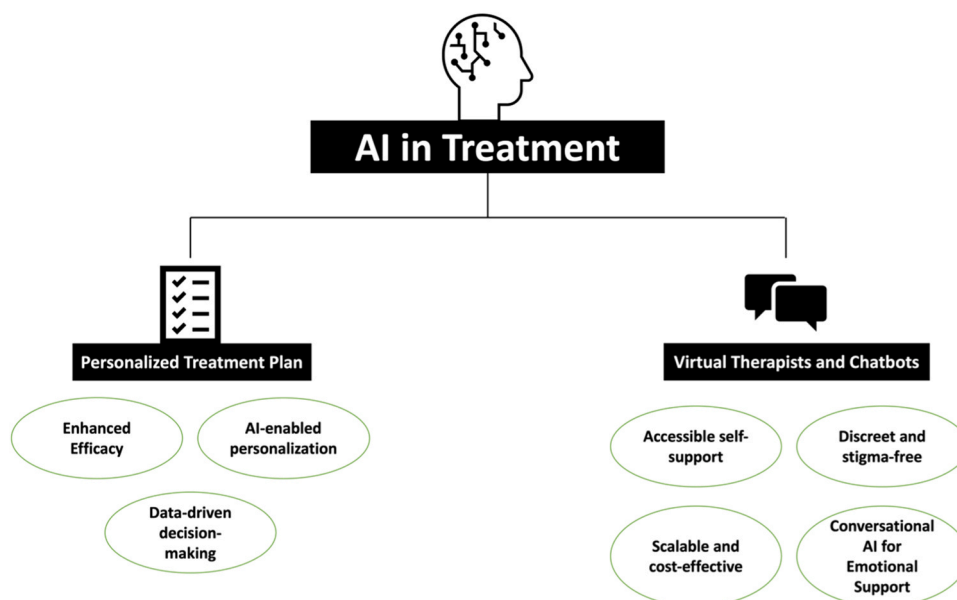


Fig. 2. Application of AI in mental health treatment.

### Virtual therapists and chatbots

Virtual therapists and AI-powered chatbots represent a significant trend in enhancing the accessibility of mental health resources [96,97]. These digital entities provide around-the-clock support to individuals with mental health concerns, irrespective of geographical or time constraints. This accessibility addresses a critical gap in mental healthcare, ensuring individuals can seek help whenever needed. Crisis hotlines are utilizing AI-powered chatbots to provide immediate support to distressed individuals. These chatbots can engage in empathetic conversations, offer coping strategies, and connect users with human therapists or crisis helplines when necessary. For instance, Crisis Text Line employs a chatbot that has handled millions of conversations and provided support during moments of crisis [98].

Virtual therapists and chatbots provide a discreet and stigma-free platform for individuals to engage with mental health support [96]. Many people hesitate to seek in-person therapy due to the perceived stigma associated with mental health. AI-driven solutions address this concern, allowing users to receive support in the privacy of their own space, thereby reducing barriers to care. These virtual therapists engage users in text-based conversations, providing evidence-based interventions such as cognitive-behavioral techniques. Users can access these resources discreetly and conveniently, promoting regular self-care.

AI-driven virtual therapists and chatbots offer scalable solutions to the growing demand for mental health support. With the ability to interact with multiple users simultaneously, these digital entities provide cost-effective alternatives to traditional therapy. This scalability is particularly crucial in addressing the shortage of mental health professionals. For instance, AI-driven virtual therapists have been developed to provide therapy for children with autism spectrum disorder [99–101]. These virtual therapists use facial recognition technology to analyze a child's facial expressions and adjust their interactions accordingly. They can teach emotional recognition and social skills in a controlled and supportive environment. The sophistication of conversational AI models enables these to engage in empathetic and therapeutic dialogues. These chatbots can actively listen, provide emotional support, and even deliver cognitive-behavioral interventions. Individuals gain access to a broader spectrum of mental health resources by leveraging AI for emotional support.

### AI in therapy delivery

The integration of AI into therapy delivery is reshaping the mental healthcare field, presenting novel approaches that improve the effectiveness of therapy sessions and amplify the ability of therapists [6,102]. These trends make mental healthcare more accessible, effective, and data-driven. The collaboration between AI and therapists may improve treatment outcomes and enhance the overall quality of mental health care.

### Teletherapy enhancement

AI potentially enhances the quality of teletherapy sessions by analyzing patient emotions in real-time. For example, AI algorithms can analyze facial expressions, voice tone, and speech patterns to gauge a patient's emotional state during a video therapy session [103,104]. This analysis provides therapists valuable insights, allowing them to adjust their approach and interventions based on the patient's emotional cues. For instance, Kintsugi is an AI-driven teletherapy platform that utilizes facial and voice analysis to provide real-time emotional feedback to therapists [45]. By analyzing the patient's facial expressions and voice tone, Kintsugi helps therapists understand the patient's emotional state, improving the therapeutic process.

AI-powered teletherapy transcends geographical barriers, making mental healthcare more accessible to individuals in remote or underserved areas [52,105]. Through secure video conferencing platforms augmented with AI, patients can connect with qualified therapists, ensuring they receive the support they need, regardless of location [106]. For instance, BetterHelp is an online counseling platform that utilizes AI to match patients with licensed therapists [34]. It offers teletherapy sessions, enabling individuals to access mental health support from the comfort of their homes, irrespective of their geographical location.

### Therapist assistance

AI assists therapists by analyzing vast datasets, including patient histories, treatment responses, and progress reports [92,107]. AI can provide therapists with data-driven insights that inform treatment decisions and interventions by identifying patterns and trends in this data. Cerebral is an online mental health platform that employs AI to support

therapists in their practice [47]. It analyzes patient data and provides therapists with insights into treatment progress and potential areas for adjustment. This collaborative approach enhances the therapist's ability to make informed decisions and tailor treatments effectively.

AI can suggest interventions and treatment strategies based on the patient's profile and progress [92]. For instance, if a patient has not responded well to a particular therapy approach, AI can recommend alternative strategies that may be more effective. Wysa is an AI-powered mental health chatbot that offers therapeutic interventions based on cognitive-behavioral principles [32]. It suggests coping strategies and exercises to users based on their interactions, providing immediate support and actionable recommendations.

AI collaborates with therapists to extend their capabilities. By automating certain administrative tasks and offering real-time data analysis, AI allows therapists to focus more on the therapeutic aspects of their work, ultimately improving treatment outcomes [67]. Talkspace is an online therapy platform that incorporates AI to assist therapists in managing their caseloads efficiently [33]. It handles administrative tasks such as scheduling and billing, allowing therapists to dedicate more time to their patients. AI also supports therapists in providing evidence-based interventions and tracking progress.

#### *AI in monitoring and follow-up*

AI's role in monitoring and outcome assessment in mental healthcare is a game-changer. Continuous monitoring powered by AI-enabled devices offers early detection of relapses and a deeper understanding of patients' mental health patterns [108]. AI-driven outcome assessments provide objective measurements that guide data-driven decisions for treatment plans, ultimately improving treatment efficiency and patient outcomes [77].

#### *Continuous monitoring*

Wearable devices equipped with AI technology are emerging as powerful tools for continuously monitoring physiological and behavioral markers indicative of mental health status [109,110]. These devices, such as smartwatches and fitness trackers, collect data on heart rate variability, sleep patterns, physical activity, and speech patterns. AI algorithms analyze this data to identify deviations from baseline, offering early insights into changes in mental health. For example, The Oura Ring is a wearable device that employs AI to monitor sleep patterns, activity levels, and physiological metrics like heart rate variability [111]. It can detect changes in a user's sleep quality and patterns, which may indicate stress or mood disturbances. Also, Mindstrong Health has developed an app that uses AI to analyze smartphone keyboard interactions, such as typing speed and errors [48]. These patterns can indicate changes in cognitive function and mental health. The app offers insights into the user's mental well-being by continuously monitoring these interactions.

Continuous monitoring powered by AI enables the early detection of relapses or deteriorations in mental health [77,112]. For individuals with conditions like depression or bipolar disorder, changes in sleep patterns, physical activity, or speech can serve as early warning signs. AI algorithms can flag these changes, alerting patients and healthcare providers for timely intervention. Continuous monitoring facilitates early detection and supports long-term mental health care. By collecting a wealth of data over time, AI helps therapists and patients better understand the patient's mental health patterns [51,112,113]. This information provides crucial insights for making treatment decisions and facilitates the development of more effective, personalized interventions.

#### *Outcome assessment*

AI-driven assessments provide objective measurements of treatment

progress and effectiveness. These assessments extend beyond traditional self-report questionnaires and incorporate data from various sources, such as patient surveys, physiological data, and behavioral observations [93,112]. AI analyzes this data to gauge treatment outcomes. For example, reSET is a US Food and Drug Administration-approved prescription digital therapeutic for substance use disorder [114]. It uses AI to track patient engagement and completion of therapeutic modules. The data generated by reSET enables therapists and patients to assess treatment progress objectively and adjust interventions as needed.

AI-generated outcome assessments empower therapists to make data-driven decisions regarding treatment plans [10,92]. Therapists can track the effectiveness of interventions in real-time and adjust treatment strategies based on the patient's progress. This approach minimizes the reliance on subjective evaluations and has the potential to enhance the precision of therapeutic decisions. This may accelerate the path to recovery and reduce the potential for patients to undergo prolonged, ineffective treatments.

## **Discussion**

### *Ethical considerations in AI for mental healthcare*

It is crucial to balance the advantages of AI with ethical considerations, ensuring that these technological advancements are harnessed responsibly and in the best interest of patients [31]. Addressing ethical considerations in AI for mental healthcare is crucial to ensure responsible and effective use of these technologies. Privacy and data security measures, bias mitigation, and preserving the human element in therapy are pivotal in building trust, reducing disparities, and providing ethical and high-quality mental health care [16,115]. As AI technologies advance, ongoing vigilance and adherence to ethical principles will remain central to their integration into mental healthcare practices.

One of the primary challenges in the field is the absence of clear and comprehensive regulatory frameworks governing AI's use in mental health [116,117]. The regulatory landscape is evolving to address ethical, privacy, and safety concerns and ensure that AI applications meet rigorous standards. For example, the FDA has begun to regulate certain AI-based medical devices, including those used in mental health [118]. Clear guidelines and requirements for safety and effectiveness help ensure that AI-driven tools meet appropriate standards. International efforts are underway to harmonize regulatory approaches for AI in healthcare. Organizations and governments are collaborating to establish common principles and guidelines for responsible AI use in mental health therapy.

### *Human-AI interaction*

Maintaining the human element in therapy while leveraging AI as a tool is a critical ethical consideration. AI should enhance, not replace, the therapeutic relationship between patients and therapists [88]. Striking the right balance between AI-driven interventions and human care is essential. For example, Woebot is designed to serve as a supplementary tool to therapy rather than substitute it. This offers support and help to patients, bridging the gap between therapy sessions while maintaining the human-therapeutic relationship [31].

Patients should be informed when AI tools are part of their therapy. Transparency about the role of AI in their treatment allows patients to make informed decisions about their care and understand the extent of AI's involvement [119]. AI-driven continuous monitoring should include human oversight. While AI can detect changes in patient behavior, therapists should interpret and act on these insights, ensuring that the human touch remains central to care.

### *Privacy and data security*

Using AI in mental health interventions necessitates stringent

measures for protecting patient data and ensuring confidentiality [120]. It is imperative to safeguard sensitive information, such as medical histories, therapy session records, and behavioral data, from unauthorized access or breaches. For example, many AI-driven mental health platforms, like Talkspace, adhere to the Health Insurance Portability and Accountability Act (HIPAA) regulations of 1996 [33,121]. This ensures that patient data is securely stored and transmitted, maintaining the privacy and confidentiality of therapy sessions. Ethical AI in mental healthcare also involves addressing questions of data ownership and obtaining informed consent from patients [16]. Individuals should have precise control over their data and understand how it will be used in AI-driven interventions.

#### Bias and fairness

Bias and fairness are fundamental factors in improving mental health with AI. Biases in training data or algorithms can result in unfair treatment, prolonging disparities in mental health diagnosis, healthcare access, and treatment outcomes [115,122]. For example, if AI models are primarily trained on data from specific demographic groups, they may not adequately represent the diversity of mental health experiences across different populations. Consequently, underrepresented communities may experience misdiagnosis, insufficient treatment recommendations, or even worsening of their mental health conditions [122,123].

It is crucial to diversify training data, consistently access AI systems for discriminatory results, and incorporate transparency and accountability measures into algorithmic development to mitigate bias and promote fairness [123–125]. Additionally, incorporating a wide range of participants, such as mental health professionals and marginalized communities, in the development and assessment of AI tools can help to reduce bias and ensure AI-based driven interventions are ethical, efficient, and fair for all individuals seeking mental health assistance [126].

#### Implications of research

The utilization of AI in improving mental health has wide-ranging implications across practice, research, prevention, and policy. In practice, AI-powered tools provide scalable and personalized interventions, effectively expanding mental health care to underserved populations. Nevertheless, practitioners must receive training to employ these technologies and uphold ethical principles proficiently. AI enables the analysis of extensive datasets in research, allowing for identifying patterns, treatment improvement, and creating prediction models to enable early intervention. However, it is crucial to prioritize data privacy and address algorithm biases.

For prevention, AI can identify risk factors and provide timely interventions, potentially reducing the strain on healthcare systems. However, it is essential for regulations to establish measures that prevent the improper use of data and guarantee fair and equal availability of AI-powered mental health services. Policy necessitates developing regulations that govern AI's ethical utilization in mental health, encompassing data protection, transparency, and accountability measures. Effective collaboration among stakeholders is crucial to leverage the potential of AI while minimizing its hazards entirely.

#### Strengths and limitations

AI presents potential solutions for improving mental health through personalized interventions, early detection of symptoms, and virtual therapy platforms. Its strength lies in its capacity to rapidly analyze extensive data, providing valuable insights and forecasting potential mental health concerns. AI-powered chatbots and virtual therapists can offer continuous support, reaching a wider demographic at reduced costs, diminishing social stigma, and enhancing availability.

Nevertheless, AI in the field of mental health has certain limitations. Firstly, the importance of privacy considerations related to the sensitive

nature of mental health data cannot be overstated. Algorithm bias poses a potential risk since it may result in insufficient or unsuitable assistance for specific populations. Moreover, AI is devoid of human empathy and comprehension, which are vital in therapeutic interactions. Further limitations arise from the need to integrate with preexisting healthcare systems and navigate regulatory difficulties. Hence, although AI possesses considerable potential in mental health care, it is crucial to deliberate its limitations to ensure responsible and effective implementation.

#### Conclusion

The challenges and future directions in AI for mental healthcare are dynamic and multifaceted. Establishing robust regulatory frameworks, ensuring model validation and transparency, and investing in continuous research and development are crucial steps toward harnessing the full potential of AI in improving mental healthcare. As AI technologies continue to evolve, these efforts will play a pivotal role in shaping the future of mental health therapy, making it more accessible, practical, and ethical for individuals.

The validation and transparency of AI models used in clinical settings are crucial. Rigorous testing and validation processes are necessary to ensure that AI-driven interventions are accurate, reliable, and safe for patients. AI models that have undergone extensive clinical trials and validation are gaining prominence. These models are based on evidence-based practices and have demonstrated their efficacy in improving mental health outcomes. Developing AI models that are interpretable and can provide explanations for their recommendations is a growing trend. This promotes transparency and allows clinicians and patients better to understand the reasoning behind AI-generated insights and decisions.

#### Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

#### References

- [1] E.E. Lee, J. Torous, M. De Choudhury, et al., Artificial intelligence for mental healthcare: clinical applications, barriers, facilitators, and artificial wisdom, *Biol. Psych. Cogn. Neurosci. Neuroimaging* 6 (9) (2021) 856–864, <https://doi.org/10.1016/j.bpsc.2021.02.001>.
- [2] G. Espejo, W. Reiner, M. Wenzinger, Exploring the role of artificial intelligence in mental healthcare: progress, pitfalls, and promises, *Cureus* 15 (9) (2023) e44748, <https://doi.org/10.7759/cureus.44748>.
- [3] World Health Organization, Mental disorders. (<https://www.who.int/news-room/fact-sheets/detail/mental-disorders/>), 2022, (Accessed 11 October 2023).
- [4] M.L. Wainberg, P. Scorza, J.M. Shultz, et al., Challenges and opportunities in global mental health: a research-to-practice perspective, *Curr. Psychiatry Rep.* 19 (28) (2017) 1–10, <https://doi.org/10.1007/s11920-017-0780-z>.
- [5] X. Qin, C.R. Hsieh, Understanding and addressing the treatment gap in mental healthcare: economic perspectives and evidence from China, *Inq.: J. Health Care Organ. Provis. Financ.* 57 (2020). (<https://doi.org/10.1177/0046958020950566>).
- [6] J. Bajwa, U. Munir, A. Nori, B. Williams, Artificial intelligence in healthcare: transforming the practice of medicine, *Future Healthc. J.* 8 (2) (2021) e188–e194, <https://doi.org/10.7861/fhj.2021-0095>.
- [7] P. Nilsen, P. Svedberg, J. Nygren, M. Frideros, J. Johansson, S. Schueller, Accelerating the impact of artificial intelligence in mental healthcare through implementation science, *Implement. Res. Pract.* 3 (2022) 2633489522111203, <https://doi.org/10.1177/26334895221112033>.
- [8] M. Langarizadeh, M. Tabatabaei, K. Tavakol, M. Naghipour, F. Moghbeli, Telemental health care, an effective alternative to conventional mental care: a systematic review, *Acta Inform. Med.* 25 (4) (2017) 240–246, <https://doi.org/10.5455/aim.2017.25.240-246>.
- [9] F. Minerva, A. Giubilini, Is AI the future of mental healthcare? *Topoi* 42 (3) (2023) 809–817, <https://doi.org/10.1007/s11245-023-09932-3>.
- [10] K.B. Johnson, W. Wei, D. Weeraratne, et al., Precision medicine, AI, and the future of personalized health care, *Clin. Transl. Sci.* 14 (1) (2021) 86–93, <https://doi.org/10.1111/cts.12884>.

- [11] M.C.T. Tai, The impact of artificial intelligence on human society and bioethics, *Tzu Chi Med. J.* 32 (4) (2020) 339–343, [https://doi.org/10.4103/tcmj.tcmj\\_71\\_20](https://doi.org/10.4103/tcmj.tcmj_71_20).
- [12] S. Bouhouita-Guermech, P. Gogognon, J.C. Bélisle-Pipon, Specific challenges posed by artificial intelligence in research ethics, *Front. Artif. Intell.* 6 (2023) 1149082, <https://doi.org/10.3389/frai.2023.1149082>.
- [13] N. Naik, B.M.Z. Hameed, D.K. Shetty, et al., Legal and ethical consideration in artificial intelligence in healthcare: who takes responsibility? *Front. Surg.* (2022) 862322 <https://doi.org/10.3389/fsurg.2022.862322>.
- [14] S. Gerke, T. Minssen, G. Cohen, Ethical and legal challenges of artificial intelligence-driven healthcare, *Artif. Intell. Healthc.* (2020) 295–336, <https://doi.org/10.1016/B978-0-12-818438-7.00012-5>.
- [15] D. Arias, S. Saxena, S. Verguet, Quantifying the global burden of mental disorders and their economic value, *eClinicalMedicine* 54 (2022) 101675, <https://doi.org/10.1016/j.eclinm.2022.101675>.
- [16] The Lancet Global Health, Mental health matters, *Lancet* (2020), [https://doi.org/10.1016/S2214-109X\(20\)30432-0](https://doi.org/10.1016/S2214-109X(20)30432-0) (Accessed 20 October 2023).
- [17] P. Uwa, Unleashing the potential of artificial intelligence: revolutionizing industries and shaping the future, *Medium*, 2023 (<https://medium.com/@paulnodfield/unleashing-the-potential-of-artificial-intelligence-revolutionizing-industries-and-shaping-the-74a668f9712e>), (Accessed 29 October 2023).
- [18] R. Anyoha, The history of artificial intelligence, *Science in the news*, 2017 (<https://sitn.hms.harvard.edu/flash/2017/history-artificial-intelligence/>), (Accessed 29 October 2023).
- [19] I. Goldstein, S. Papert, Artificial intelligence, language, and the study of knowledge, *Cogn. Sci.* 1 (1) (1977) 84–123, [https://doi.org/10.1016/S0364-0213\(77\)80006-2](https://doi.org/10.1016/S0364-0213(77)80006-2).
- [20] J.S. Abreu, Founding fathers of artificial intelligence, *Quidgest*, 2021 (<https://quidgest.com/en/blog-en/ai-founding-fathers/>), (Accessed 29 October 2023).
- [21] J. Moor, The Dartmouth college artificial intelligence conference: the next fifty years, *AI Mag.* 27 (4) (2006) 87, <https://doi.org/10.1609/aimag.v27i4.1911>.
- [22] A. Basil, ELIZA: The chatbot who revolutionised human-machine interaction [an introduction], *Nerd For Tech.* (<https://medium.com/nerd-for-tech/eliza-the-chatbot-who-revolutionised-human-machine-interaction-an-introduction-582a7581f91c>), 2021, (Accessed 29 October 2023).
- [23] C. Bassett, The computational therapeutic: exploring Weizenbaum's ELIZA as a history of the present, *AI Soc.* 34 (4) (2018) 803–812, <https://doi.org/10.1007/s00146-018-0825-9>.
- [24] D.D. Luxton, Artificial intelligence in psychological practice: current and future applications and implications, *Prof. Psychol.: Res. Pract.* 45 (5) (2014) 32–339, <https://doi.org/10.1037/a0034559>.
- [25] S. Zhou, J. Zhao, L. Zhang, Application of artificial intelligence on psychological interventions and diagnosis: an overview, *Front. Psychiatry* 13 (2021) 811665, <https://doi.org/10.3389/fpsy.2022.811665>.
- [26] G. Finocchiaro, The regulation of artificial intelligence, *AI Soc.* 3 (4) (2023) 1–8, <https://doi.org/10.1007/s00146-023-01650-z>.
- [27] S. Tutun, M.E. Johnson, A. Ahmed, et al., An AI-based decision support system for predicting mental health disorders, *Inf. Syst. Front.* 25 (2022) 1261–1276, <https://doi.org/10.1007/s10796-022-10282-5>.
- [28] S.E. Blackwell, T. Heidenreich, Cognitive behavior therapy at the crossroads, *Int. J. Cogn. Ther.* 14 (1) (2021) 1–22, <https://doi.org/10.1007/s41811-021-00104-y>.
- [29] S.D.A. Hupp, D. Reitman, J.D. Jewell, Cognitive-behavioral theory, in: M. Hersen, A.M. Gross (Eds.), *Handbook of Clinical Psychology, Vol 2, Children and Adolescents*, John Wiley & Sons, Inc., 2008, pp. 263–287.
- [30] S. D'Alfonso, AI in mental health, *Curr. Opin. Psychol.* 36 (2020) 112–117, <https://doi.org/10.1016/j.copsyc.2020.04.005>.
- [31] Woebot Health, Mental health chatbot, Woebot, (<https://woebothealth.com/>), 2021, (Accessed 30 October 2023).
- [32] W. Wysa, Everyday mental health, Talkspace, 2023. (<https://www.talkspace.com/>), 2018, (Accessed October 30, 2023).
- [33] Better Help, Professional counseling with a licensed therapist, Betterhelp.com. (<https://www.betterhelp.com/>), 2013, (Accessed 31 October 2023).
- [34] Talkspace, Online therapy, counseling online, marriage counseling, Talkspace.com. (<https://www.talkspace.com/>), 2018, (Accessed 30 October 2023).
- [35] Moodfit, Tools & insight for your mental health, Moodfit. (<https://www.getmoodfit.com/>), 2023, (Accessed 31 October 2023).
- [36] Happify, Happify: science-based activities and games, Happify.com, (<https://www.happify.com/>), 2022, (Accessed 31 October 2023).
- [37] Headspace, Get the headspace app, Headspace, (<https://www.headspace.com/headspace-meditation-app/>), 2019, (Accessed 31 October 2023).
- [38] Calm, Experience calm, Calm. (<https://www.calm.com/>), 2019, (Accessed 31 October 2023).
- [39] Shine, Calm anxiety & stress, theshineapp.com. (<https://www.theshineapp.com/>), 2020, (Accessed 31 October 2023).
- [40] M.M. Braun, Dialectical behavior therapy: new frontiers in practice, in: D. Wedding (Ed.), *Psychcritiques*, 50, 2005, <https://doi.org/10.1037/051667>.
- [41] Resiliens, CBT Companion – a comprehensive app for cognitive behavioral therapy, Resiliens, (<https://resiliens.com/cbt-companion/>), (2021) (Accessed 31 October 2023).
- [42] Anxiety Canada, MindShift™ CBT, Anxiety Canada, (<https://www.anxietycanada.com/resources/mindshift-cbt/>), 2023, (Accessed 31 October 2023).
- [43] US. Department of Veteran Affairs, PTSD Coach - PTSD: National Center for PTSD, ([https://www.ptsd.va.gov/appvid/mobile/ptsdcoach\\_app.asp](https://www.ptsd.va.gov/appvid/mobile/ptsdcoach_app.asp)), 2022, (Accessed 31 October 2023).
- [44] SuperBetter, Social-emotional learning, mental health & resilience training, Superbetter.com, (<https://superbetter.com/>), 2023, (Accessed 31 October 2023).
- [45] Kintsugi, Kintsugi. Kintsugihhealth, (<https://www.kintsugihhealth.com/>), 2022, (Accessed 31 October 2023).
- [46] IBM Watson Health, IBM watson health is now merative, ([www.ibm.com](http://www.ibm.com)). (<https://www.ibm.com/watson-health/merative-divestiture>), 2023, (Accessed 31 October 2023).
- [47] Cerebral, The Cerebral Way. cerebral.com, (<https://cerebral.com/>), 2023, (Accessed 31 October 2023).
- [48] T. Gruber, AI for mental health, Mindstrong AI models | Digital Brain Biomarkers, Humanistic AI, (<https://tomgruber.org/mindstrong-story>), 2023, (Accessed 31 October 2023).
- [49] J.M. Peake, G. Kerr, J.P. Sullivan, A critical review of consumer wearables, mobile applications, and equipment for providing biofeedback, monitoring stress, and sleep in physically active populations, *Front. Physiol.* 9 (2018) 743, <https://doi.org/10.3389/fphys.2018.00743>.
- [50] Prime Therapeutics, Prime Therapeutics and Pear Therapeutics announce first comprehensive value-based agreement for prescription digital therapeutics reSET® and reSET-O® for the treatment of substance and opioid use disorders, Prime Therapeutics LLC, (<https://www.primetherapeutics.com/news/prime-therapeutics-and-pear-therapeutics-announce-first-comprehensive-value-based-agreement-for-prescription-digital-therapeutics-reset-and-reset-o-for-the-treatment-of-substance-and-opioid/>), 2021, (Accessed 31 October 2023).
- [51] S. Graham, C. Depp, E.E. Lee, et al., Artificial intelligence for mental health and mental illnesses: an overview, *Curr. Psychiatry Rep.* 21 (11) (2019) 116, <https://doi.org/10.1007/s11920-019-1094-0>.
- [52] T. Davenport, R. Kalakota, The potential for artificial intelligence in healthcare, *Future Healthc. J.* 6 (2) (2019) 94–98, <https://doi.org/10.7861/futurehosp.6-2-94>.
- [53] T. Zhang, A.M. Schoene, S. Ji, S. Ananiadou, Natural language processing applied to mental illness detection: a narrative review, *npj Digit. Med.* 5 (2022) 46, <https://doi.org/10.1038/s41746-022-00589-7>.
- [54] D. Khurana, A. Koli, K. Khatter, S. Singh, Natural language processing: state of the art, current trends and challenges, *Multimed. Tools Appl.* 82 (2022) 3713–3744, <https://doi.org/10.1007/s11042-022-13428-4>.
- [55] A.S. Uban, B. Chulvi, P. Rosso, An emotion and cognitive based analysis of mental health disorders from social media data, *Future Gener. Comput. Syst.* 123 (2021) 480–494, <https://doi.org/10.1016/j.future.2021.05.032>.
- [56] O. Flanagan, A. Chan, P. Roop, F. Sundram, Using acoustic speech patterns from smartphones to investigate mood disorders: scoping review, *JMIR mHealth uHealth* 9 (9) (2021) e24352, <https://doi.org/10.2196/24352>.
- [57] G. Fagherazzi, A. Fischer, M. Ismael, V. Despotovic, Voice for health: the use of vocal biomarkers from research to clinical practice, *Digit. Biomark.* 5 (1) (2021) 78–88, <https://doi.org/10.1159/000515346>.
- [58] N. Haines, M.W. Southward, J.S. Cheavens, T. Beauchaine, W.Y. Ahn, Using computer-vision and machine learning to automate facial coding of positive and negative affect intensity, *Hinajosa J.A.*, ed. *PLoS One*, vol. 14 (no. 2), 2019, e0211735, (<https://doi.org/10.1371/journal.pone.0211735>).
- [59] G. Zhao, X. Li, Automatic Micro-expression analysis: open challenges, *Front. Psychol.* 10 (2019) 1833, <https://doi.org/10.3389/fpsyg.2019.01833>.
- [60] C. Kuziemy, A.J. Maeder, O. John, et al., Role of artificial intelligence within the telehealth domain, *Yearb. Med. Inform.* 28 (1) (2019) 35–40, <https://doi.org/10.1055/s-0039-1677897>.
- [61] Cogito, Training data solutions for ai and machine learning, Cogitotech, (<https://www.cogitotech.com/>), 2023, (Accessed 31 October 2023).
- [62] Affectiva, humanizing technology to bridge the gap between humans and machines, Affectiva, (<https://www.affectiva.com/>), 2017, (Accessed 31 October 2023).
- [63] F.C. Krause, E. Linardatos, D.M. Fresco, M.T. Moore, Facial emotion recognition in major depressive disorder: a meta-analytic review, *J. Affect. Disord.* 293 (2021) 320–328, <https://doi.org/10.1016/j.jad.2021.06.053>.
- [64] Y.S. Lee, W.H. Park, Diagnosis of depressive disorder model on facial expression based on fast R-CNN, *Diagnostics* 12 (2) (2022) 317, <https://doi.org/10.3390/diagnostics12020317>.
- [65] N.K. Iyortuun, S.H. Kim, M. Jhon, H.J. Yang, S. Pant, A review of machine learning and deep learning approaches on mental health diagnosis, *Healthcare* 11 (3) (2023) 285, <https://doi.org/10.3390/healthcare11030285>.
- [66] A.M. Chekroud, J. Bondar, J. Delgadillo, et al., The promise of machine learning in predicting treatment outcomes in psychiatry, *World Psychiatry* 20 (2) (2021) 154–170, <https://doi.org/10.1002/wps.20882>.
- [67] Al Kuwaiti, K. Nazer, A. Al-Reedy, et al., a review of the role of artificial intelligence in healthcare, *J. Pers. Med.* 13 (6) (2023) 951, <https://doi.org/10.3390/jpm13060951>.
- [68] J. Yu, N. Shen, S.E. Conway, et al., A holistic approach to integrating patient, family, and lived experience voices in the development of the Brain Health Databank: a digital learning health system to enable artificial intelligence in the clinic, *Front. Health Serv.* 3 (2023) 1198195, <https://doi.org/10.3389/frhs.2023.1198195>.
- [69] Google Health, Health self-assessment tools, health.google, (<https://health.google/e/consumers/self-assessments/>), 2017, (Accessed 31 October 2023).
- [70] M. Gilierti, Learning more about clinical depression with the PHQ-9 questionnaire. Google, (<https://blog.google/products/search/learning-more-about-clinical-depression-phq-9-questionnaire/>), 2017, (Accessed 31 October 2023).
- [71] K. Kroenke, R.L. Spitzer, J.B.W. Williams, Patient Health Questionnaire-9, *APA PsycTests*, (<https://doi.org/10.1037/t06165-000>), 1999, (Accessed 31 October 2023).



- [72] N. Koutsouleris, T.U. Hauser, V. Skvortsova, M. De Choudhury, From promise to practice: towards the realisation of AI-informed mental health care, *Lancet Digit. Health* 4 (1) (2022) e829–e840, [https://doi.org/10.1016/s2589-7500\(22\)00153-4](https://doi.org/10.1016/s2589-7500(22)00153-4).
- [73] Headspace, Ginger's mental health app is now Headspace care organizations, <https://organizations.headspace.com/ginger-is-now-part-of-headspace/>, 2023, (Accessed 1 November 2023).
- [74] Stong, Ginger.io: striking a balance between humans and technology in mental health, Harvard Technology and Operations Management, <https://d3.harvard.edu/platform-rctom/submission/ginger-io-striking-a-balance-between-humans-and-technology-in-mental-health/>, 2016, (Accessed 1 November 2023).
- [75] F. Sabry, T. Eltaras, W. Labda, K. Alzoubi, Q. Malluhi, machine learning for healthcare wearable devices: the big picture, in: Y. Wu (ed.) *Journal of Healthcare Engineering*, 2022 2022, 4653923. (<https://doi.org/10.1155/2022/4653923>).
- [76] N. Ghaffar Nia, E. Kaplanoglu, A. Nasab, Evaluation of artificial intelligence techniques in disease diagnosis and prediction, *Discov. Artif. Intell.*, vol. 3 (no. 1), 2023, 5, (<https://doi.org/10.1007/s44163-023-00049-5>).
- [77] F.M. Dawoodbhoy, J. Delaney, P. Cecula, et al., AI in patient flow: applications of artificial intelligence to improve patient flow in NHS acute mental health inpatient units, *Heliyon* 7 (5) (2021) e06993, <https://doi.org/10.1016/j.heliyon.2021.e06993>.
- [78] M. Toma, O.C. Wei, Predictive modeling in Medicine, *Encyclopedia* 3 (2) (2023) 590–601, <https://doi.org/10.3390/encyclopedia3020042>.
- [79] IBM Watson for Drug Discovery, IBM Documentation, (<https://www.ibm.com/docs/en/announcements/watson-drug-discovery?region=CAN>), 2023, (Accessed 1 November 2023).
- [80] E.L. Van der Schyff, B. Ridout, K.L. Amon, R. Forsyth, A.J. Campbell, Providing self-led mental health support through an artificial intelligence-powered chat bot (Leora) to meet the demand of mental health care, *J. Med. Internet Res.* 25 (2023) e46448, <https://doi.org/10.2196/46448>.
- [81] S. Sabour, W. Zhang, X. Xiao, et al., A chatbot for mental health support: exploring the impact of Emohaa on reducing mental distress in China, *Front. Digit. Health* 5 (2023) 1133987, <https://doi.org/10.3389/fdgth.2023.1133987>.
- [82] A.N. Vaidyam, H. Wisniewski, J.D. Halamka, M.S. Kashavan, J.B. Torous, Chatbots and conversational agents in mental health: a review of the psychiatric landscape, *Can. J. Psychiatry Rev. Can. Psychiatr.* 64 (7) (2019) 456–464, <https://doi.org/10.1177/0706743719828977>.
- [83] S.N. Mohsin, A. Gapizov, C. Ekhatov, et al., The role of artificial intelligence in prediction, risk stratification, and personalized treatment planning for congenital heart diseases, *Cureus* 15 (8) (2023) e44374, <https://doi.org/10.7759/cureus.44374>.
- [84] I.H. Sarker, Machine learning: algorithms, real-world applications and research directions, *SN Comput. Sci.* 2 (160) (2021) 1–21, <https://doi.org/10.1007/s42979-021-00592-x>.
- [85] E. Lin, C.H. Lin, H.Y. Lane, Precision psychiatry applications with pharmacogenomics: artificial intelligence and machine learning approaches, *Int. J. Mol. Sci.* 21 (3) (2020) 969, <https://doi.org/10.3390/ijms21030969>.
- [86] E. Lin, P.H. Kuo, Y.L. Liu, Y.W.Y. Yu, A.C. Yang, S.J. Tsai, A deep learning approach for predicting antidepressant response in major depression using clinical and genetic biomarkers, *Front. Psychiatry* 9 (9) (2018) 290, <https://doi.org/10.3389/fpsy.2018.00290>.
- [87] P. Gual-Montolio, I. Jaén, V. Martínez-Borba, D. Castilla, C. Suso-Ribera, Using Artificial intelligence to enhance ongoing psychological interventions for emotional problems in real- or close to real-time: a systematic review, *Int. J. Environ. Res. Public Health* 19 (13) (2022) 7737, <https://doi.org/10.3390/ijerph19137737>.
- [88] H. Siala, Y. Wang, SHIFTING artificial intelligence to be responsible in healthcare: a systematic review, *Soc. Sci. Med.* 296 (2022) 114782, <https://doi.org/10.1016/j.socscimed.2022.114782>.
- [89] B. Chhetri, L.M. Goyal, M. Mittal, How machine learning is used to study addiction in digital healthcare: a systematic review, *Int. J. Inf. Manag. Data Insights* 3 (2) (2023) 100175, <https://doi.org/10.1016/j.jjime.2023.100175>.
- [90] S. Carreiro, M. Taylor, S. Shrestha, M. Reinhardt, N. Gilbertson, P. Indic, Realize, analyze, engage (RAE): a digital tool to support recovery from substance use disorder, *J. Psychiatry Brain Sci.* 6 (2021) e210002, <https://doi.org/10.20900/jpbs.20210002>.
- [91] Y. Kumar, A. Koul, R. Singla, M.F. Ijaz, Artificial intelligence in disease diagnosis: a systematic literature review, synthesizing framework and future research agenda, *J. Ambient Intell. Humaniz. Comput.* 14 (7) (2022) 8459–8486, <https://doi.org/10.1007/s12652-021-03612-z>.
- [92] A. Bohr, K. Memarzadeh, The rise of artificial intelligence in healthcare applications, *Artif. Intell. Healthc.* 1 (1) (2020) 25–60, <https://doi.org/10.1016/B978-0-12-818438-7.00002-2>.
- [93] S. Dash, S.K. Shakyawar, M. Sharma, S. Kaushik, Big data in healthcare: management, analysis and future prospects, *J. Big Data* 6 (54) (2019) 1–25, <https://doi.org/10.1186/s40537-019-0217-0>.
- [94] A. Thieme, M. Hanratty, M. Lyons, et al., Designing human-centered AI for mental health: developing clinically relevant applications for online CBT treatment, *ACM Trans. Comput. -Hum. Interact.* 30 (2) (2022) 1–50, <https://doi.org/10.1145/3564752>.
- [95] V. Kaldo, N. Isacson, E. Forsell, P. Bjurner, F.B. Abdesslem, M. Boman, AI-driven adaptive treatment strategies in internet-delivered CBT, *Eur. Psychiatry* 64 (S1) (2021), <https://doi.org/10.1192/j.eurpsy.2021.75> (S20–S20).
- [96] B. Omarov, Z. Zhumanov, A. Gumar, L. Kuntunova, Artificial intelligence enabled mobile chatbot psychologist using AIML and cognitive behavioral therapy, *Int. J. Adv. Comput. Sci. Appl.* 14 (6) (2023) 137–146, <https://doi.org/10.14569/ijacsa.2023.0140616>.
- [97] E. Bendig, B. Erb, L. Schulze-Thuesing, H. Baumeister, The next generation: chatbots in clinical psychology and psychotherapy to foster mental health – a scoping review, *Verhaltenstherapie* 32 (Suppl. 1) (2019) S64–S76, <https://doi.org/10.1159/000501812>.
- [98] Crisis Text Line, Crisis Text Line Published 2013. Accessed 1 November 2023, (<https://www.crisistextline.org/>).
- [99] M. Wedyan, J. Falah, R. Alturki, et al., Augmented reality for autistic children to enhance their understanding of facial expressions, *Multimodal Technol. Interact.* 5 (8) (2021), <https://doi.org/10.3390/mti5080048>.
- [100] K. Briot, A. Pizano, M. Bouvard, A. Amestoy, New technologies as promising tools for assessing facial emotion expressions impairments in ASD: a systematic review, *Front. Psychiatry* 12 (2021) 634756, <https://doi.org/10.3389/fpsy.2021.634756>.
- [101] E. Bekele, Z. Zheng, A. Swanson, J. Crittendon, Z. Warren, N. Sarkar, Understanding how adolescents with autism respond to facial expressions in virtual reality environments, *IEEE Trans. Vis. Comput. Graph.* 19 (4) (2013) 711–720, <https://doi.org/10.1109/tvcg.2013.42>.
- [102] A. Ray, A. Bhardwaj, Y.K. Malik, S. Singh, R. Gupta, Artificial intelligence and psychiatry: an overview, *Asian J. Psychiatry* 70 (2022) 103021, <https://doi.org/10.1016/j.ajp.2022.103021>.
- [103] S. Borna, C.R. Haider, K.C. Maita, et al., A review of voice-based pain detection in adults using artificial intelligence, *Bioengineering* 10 (4) (2023) 500, <https://doi.org/10.3390/bioengineering10040500>.
- [104] M. Flynn, D. Efrimidis, A. Angelopoulou, et al., Assessing the effectiveness of automated emotion recognition in adults and children for clinical investigation, *Front. Hum. Neurosci.* 14 (2020) 70, <https://doi.org/10.3389/fnhum.2020.00070>.
- [105] O. Ali, W. Abdelbaki, A. Shrestha, E. Elbasi, M.A.A. Alryalat, Y.K. Dwivedi, A systematic literature review of artificial intelligence in the healthcare sector: benefits, challenges, methodologies, and functionalities, *J. Innov. Knowl.* 8 (1) (2023) 100333, <https://doi.org/10.1016/j.jik.2023.100333>.
- [106] M. Senbekov, T. Saliev, Z. Bukeyeva, et al., The recent progress and applications of digital technologies in healthcare: a review, in: J. Fayn (Ed.), *International Journal of Telemedicine and Applications*, 2020, p. 8830200, <https://doi.org/10.1155/2020/8830200>.
- [107] S.A. ALOWAIS, S.S. Alghamdi, N. Alsuhbany, et al., Revolutionizing healthcare: the role of artificial intelligence in clinical practice, *BMC Med. Educ.* 23 (689) (2023), <https://doi.org/10.1186/s12909-023-04698-z>.
- [108] A. Zlatintsi, P.P. Filntsis, C. Garoufis, et al., E-prevention: advanced support system for monitoring and relapse prevention in patients with psychotic disorders analyzing long-term multimodal data from wearables and video captures, *Sensors* 22 (19) (2022), <https://doi.org/10.3390/s22197544> (7544–7544).
- [109] N. Gomes, M. Pato, A.R. Lourenço, N. Datia, A survey on wearable sensors for mental health monitoring, *Sensors* 23 (3) (2023) 1330, <https://doi.org/10.3390/s23031330>.
- [110] B.A. Hickey, T. Chalmers, P. Newton, et al., Smart devices and wearable technologies to detect and monitor mental health conditions and stress: a systematic review, *Sensors* 21 (10) (2021) 3461, <https://doi.org/10.3390/s21103461>.
- [111] Oura Ring, Oura Ring: the most accurate sleep and activity tracker, Oura Ring Published, 2022. Accessed 1 November 2023, (<https://ouraring.com/>).
- [112] R. Garriga, J. Mas, S. Abrahá, et al., Machine learning model to predict mental health crises from electronic health records, *Nat. Med.* 28 (6) (2022) 1240–1248, <https://doi.org/10.1038/s41591-022-01811-5>.
- [113] M. Javadi, A. Haleem, R. Pratap Singh, R. Suman, S. Rab, Significance of machine learning in healthcare: features, pillars and applications, *Int. J. Intell. Netw.* 3 (2022) 58–73, <https://doi.org/10.1016/j.ijin.2022.05.002> (3).
- [114] Digital Therapeutics Alliance, reSET®, Digital Therapeutics Alliance, Published, 2017. Accessed 1 November 2023, (<https://dtxalliance.org/products/reset/>).
- [115] N. Norori, Q. Hu, F.M. Aellen, F.D. Faraci, A. Tzovara, Addressing bias in big data and AI for health care: a call for open science, *Patterns* 2 (10) (2021) 100347, <https://doi.org/10.1016/j.patter.2021.100347>.
- [116] B. Murdoch, Privacy and artificial intelligence: challenges for protecting health information in a new era, *BMC Med. Ethics* 22 (2021) 122, <https://doi.org/10.1186/s12910-021-00687-3>.
- [117] R. Rodrigues, Legal and human rights issues of AI: gaps, challenges and vulnerabilities, *J. Respons. Technol.* 4 (2020) 100005, <https://doi.org/10.1016/j.jrt.2020.100005>.
- [118] Center for Devices and Radiological Health, Artificial Intelligence and Machine Learning in Software. U.S. Food and Drug Administration, Published, 2021. Accessed 1 November 2023, (<https://www.fda.gov/medical-devices/software-m-edical-device-samd/artificial-intelligence-and-machine-learning-software-m-edical-device>).
- [119] A. Kiseleva, D. Kotzinos, P. De Hert, Transparency of AI in healthcare as a multilayered system of accountabilities: between legal requirements and technical limitations, *Front. Artif. Intell.* 5 (2022) 879603, <https://doi.org/10.3389/frai.2022.879603>.
- [120] C. Wang, J. Zhang, N. Lassi, X. Zhang, Privacy protection in using artificial intelligence for healthcare: Chinese regulation in comparative perspective, *Healthcare* 10 (10) (2022) 1878, <https://doi.org/10.3390/healthcare10101878>.
- [121] CDC, Health insurance portability and accountability act of 1996 (HIPAA), Centers for Disease Control and Prevention, Published, 2022. Accessed 1 November 2023, (<https://www.cdc.gov/php/publications/topic/hipaa.html>).

- [122] R. Agarwal, M. Bjarnadottir, L. Rhue, et al., Addressing algorithmic bias and the perpetuation of health inequities: an AI bias aware framework, *Health Policy Technol.* 12 (1) (2023) 100702, <https://doi.org/10.1016/j.hlpt.2022.100702>.
- [123] L.H. Nazer, R. Zatarah, S. Waldrip, et al., Bias in artificial intelligence algorithms and recommendations for mitigation, *PLoS Digit. Health* 2 (6) (2023) e0000278, <https://doi.org/10.1371/journal.pdig.0000278>.
- [124] IBM Data and AI Team, Shedding light on AI bias with real world examples, IBM Blog, Published, 2023. Accessed 1 November 2023, (<https://www.ibm.com/blog/shedding-light-on-ai-bias-with-real-world-examples/>).
- [125] D.B. Olawade, O.J. Wada, A.C. David-Olawade, E. Kunonga, O.J. Abaire, Ling, *Using artificial intelligence to improve public health: a narrative review*, *Front. Public Health* 11 (2023) 1196397.
- [126] Y. Chen, E.W. Clayton, L.L. Novak, S. Anders, B. Malin, human-centered design to address biases n artificial intelligence, *J. Med. Internet Res.* 25 (2023) e43251, <https://doi.org/10.2196/43251>.