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Student ID:	242526
Research Supervisor:	Dr. XyZ
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	t fulfilment of my MSc Software Engineering degree at the
University of Bolton, Deane Ro	oad, BL3 5AB, United Kingdom
I hereby declare that this repo	rt represents my own work at the University of Bolton. All
sources used have been appro	priately cited and referenced.
Signature:	
Date:	

Abstract

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List of Abbreviations

Abbreviation	Definition
Al	Artificial Intelligence
CBT	Cognitive-behavioural Therapy
DL	Deep Learning
DSR	Design Science Research
GPT	Generative Pre-trained Transformer
IDE	Integrated Development Environment
IPFS	InterPlanetary File System
LLMs	Large Language Models
ML	Machine Learning
NLP	Natural Language Processing
NN	Neural Network
SUS	System Usability Scale
WHO	World Health Organization

1. Introduction

Depression, anxiety, and stress-related illnesses are growing more widespread worldwide Halbreich (2021). In 2019, one in every eight people, or 970 million people worldwide, had a mental condition, with anxiety and depressive disorders being the most common Collaborators et al. (2022). Despite the growing need for emotional and psychological support, access to traditional mental health services remains limited. Many individuals, especially those living in rural or underserved areas, face significant barriers when seeking professional help Grant et al. (2018). These include high costs, long waiting times, geographic limitations, and the stigma associated with mental illness. As a result, people often go without the careHassan they need, further deepening the crisis Grant et al. (2018) Trautmann et al. (2016).

In response to these issues, digital mental health platforms have arisen as possible answers. Among these, Al-powered chatbots offer the promise of instant, empathetic conversations for individuals seeking support Koutsouleris et al. (2022). These systems use natural language processing and sentiment analysis to provide responses that mimic human interaction. However, most current platforms operate on centralized architectures, which raises serious concerns about data privacy, user trust, and ethical responsibility. Sensitive mental health data stored on central servers is vulnerable to misuse, surveillance, and unauthorized access Lustgarten et al. (2020).

To address these concerns, researchers are increasingly exploring decentralized technologies such as the InterPlanetary File System (IPFS) Bieri (2021). These systems allow secure, distributed storage and anonymous transactions, thereby empowering users to retain control over their data. However, despite the parallel growth of AI in healthcare and decentralized technology in financial systems, very few studies have combined both approaches within the mental health domain. This research aims to fill that gap by designing a privacy-first, decentralized platform that integrates conversational AI, IPFS-based storage, and blockchain-enabled transactions.

1.1 Problem Statement

Depression, anxiety, and mental problems are becoming increasingly widespread. Traditional therapy is usually expensive, time-consuming, and inaccessible in rural or underprivileged areas. Additionally, many people are deterred from seeking help due to fear. People often try to access online applications that support Artificial Intelligence (AI) based chatbots. Most of these platforms offer paid subscriptions and operate as centralized systems, which raises questions about people's privacy and security. So far, research has primarily used AI chatbots alone or paired with IPFS in healthcare, but few have used both together in mental health platforms. To solve this problem, it is important to propose an application that offers AI-powered conversation, IPFS storage for securing the data, and a free-of-cost usage facility for all users.

1.2 Aim of the Thesis

This study aims to design and prototype a decentralized, privacy-focused mental health support platform that integrates AI-powered conversational agents, encrypted decentralized data storage, and blockchain-enabled secure transactions. The platform will offer immediate and empathetic responses through a Python-based chatbot equipped with sentiment analysis. It will utilize Filecoin for storing sensitive data securely and employ Ethereum smart contracts to allow private and transparent payments or donations. This comprehensive approach intends to create a trusted and accessible environment for mental health support.

1.3 Research Questions

This research will address the following questions:

- 1. How can a web-based platform be effectively developed to provide accessible and user-friendly mental health support services?
- 2. To what extent can an AI-powered chatbot deliver empathetic and context-aware conversational support for individuals seeking mental health assistance?
- 3. What are the most suitable encryption techniques to ensure data privacy and security in

a web-based mental health support system?

1.4 Objectives of the Thesis

- To develop a web-based mental health support platform
- To design and integrate an AI chatbot for providing empathetic conversational support
- To implement encrypted data storage to ensure the privacy and security of the data.

1.5 Significance of the Study

This study is significant because it brings Al-based conversation and a secured mechanism to store data in a single mental health support system. It responds to the urgent need for digital platforms in healthcare that are developed considering privacy, ethics, and user empowerment. This thesis proposes a web-based application which provides empathetic support without compromising the privacy of the user. It also offers a practical framework that developers and researchers can use to create secure and sustainable digital health services. In addition, this research contributes to the broader fields of digital mental health, Al ethics, and decentralized system design.

1.6 Scope of the Thesis

This thesis aims at an Al-powered chatbot that provides a counselling service to humans.

- The proposed system only supports text conversations in the English language. Other languages are not supported.
- The proposed system focuses only on the content of the response, which is related to the mental health support service. The conversation, which involved another unrelated field, is not supported.
- The proposed system can recognize the meaning of the user's text input in English.
- The proposed system is only focused on providing counselling services to humans, and it
 will not give any diagnosis or medication to the user.

1.7 Structure of the Thesis

The thesis is structured into six chapters as shown in Figure 1. Firstly, Chapter One presents the introduction to the topic and lays the groundwork for the research. Chapter Two presents a literature review. It provides an overview of past research on AI chatbots, decentralized data storage, and ethical issues in digital mental health. Chapter Three explains the methodology. It describes the research design, tools, and technologies used to build and evaluate the platform. Then, Chapter Four focuses on implementation and results. It presents the development process, key features of the prototype, and results based on testing and user feedback. After that, Chapter Five offers a discussion. It analyses the findings in relation to the research questions, discusses limitations, and explores the potential impact of the system. Lastly, Chapter Six concludes the report. It summarizes the key findings, highlights the importance of the research, and suggests future directions for improvement.

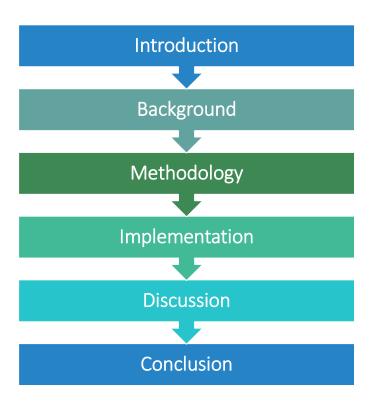


Figure 1: Structure of the thesis

2. Background

This chapter critically reviews the existing literature relevant to the design and development of a decentralized, AI-powered mental health support platform. It aims to provide a comprehensive understanding of the theoretical and technical foundations upon which this thesis is based. This chapter identifies existing trends, gaps, and limitations that justify the need for current research.

2.1 Theoretical and Contextual Background

This section presents the foundational concepts and developments necessary to understand the scope and motivation of the current research. The study draws from a multidisciplinary context, combining AI, decentralized technologies, and mental health care systems. Understanding these domains is essential for appreciating the rationale behind integrating AI-driven conversational support with decentralized infrastructure for mental health applications.

2.1.1 Mental Health in the Digital Age

Mental health disorders include depression, anxiety, and stress-related conditions. These are among the leading causes of disability worldwide. The World Health Organization (WHO) estimates that over 300 million people are affected by depression globally. An estimated 280 million people, or 5% of all adults, suffered from depression in 2019. Women are more likely than men to experience depression. More than 10% of pregnant and postpartum women worldwide suffer from depression *Depression --- who.int* (2025).

Access to timely and effective mental health care remains a significant challenge, especially in low-resource settings. Common barriers include financial costs, stigma, long waiting times, and geographical isolation Liu et al. (2020) Ogbuagu et al. (2024).

In response to these challenges, digital health interventions have gained prominence. These include mobile applications, telepsychiatry, and web-based platforms offering mental health education and self-help tools. However, while digital technologies improve accessibility, they often raise concerns about data privacy, user autonomy, and the quality of care provided.

2.1.2 Artificial Intelligence and Conversational Agents

Al-powered chatbots have emerged as a promising solution in digital mental health. These chatbots simulate human conversation using Natural Language Processing (NLP), sentiment analysis, and ML techniques Vaidyam et al. (2019). Al chatbots like Woebot, Wysa, and Replika have been deployed to assist users in managing anxiety, depression, and stress through cognitive behavioral strategies Fitzpatrick et al. (2017) Inkster et al. (2018) Pentina et al. (2023). Existing research indicates that these tools may help users develop emotional awareness and coping mechanisms. Nonetheless, many Al systems lack the emotional depth and contextual understanding, and they needed to fully replicate human therapeutic interactions. Concerns also remain about the safety, accuracy, and transparency of these apps when handling sensitive information Fiske et al. (2019).

2.1.3 Privacy and Ethical Challenges in Mental Health Technologies

Mental health data is among the most sensitive types of personal information. Centralized digital platforms often collect and store this data in proprietary databases, sometimes without adequate encryption or informed consent mechanisms. Reports have shown that many mental health applications share data with third parties, including advertisers and analytics firms, often without clear user knowledge Parker et al. (2019). This has raised concerns over surveillance, data commodification, and user autonomy. Ethical frameworks stress the need for informed consent, data minimization, and transparency when deploying AI in healthcare. However, many platforms fail to meet these standards due to commercial pressures, limited regulatory oversight, or technical constraints Mennella et al. (2024).

2.1.4 Decentralized Technologies: Filecoin

Decentralized storage technologies such as the InterPlanetary File System (IPFS) and Filecoin have been introduced to address privacy and data sovereignty concerns. IPFS is a peer-to-peer network that uses content-addressed storage, allowing users to store and retrieve data using unique cryptographic hashes Doan et al. (2022). Filecoin builds upon IPFS by providing a blockchain-based incentive layer. These technologies remove the need for a central server.

They also empower users to control access to their own data, making them suitable for applications involving sensitive information such as mental health records.

2.2 Technologies for the Development of Healthcare Apps

2.2.1 Interplanetary file system

A distributed data storage mechanism for a completely decentralised system is called IPFS. Off-storage data management is supported by the blockchain's hard drive. Files are kept within IPFS objects in IPFS. There are two components to IPFS objects: the connection component and the data component. A single IPFS object will hold tiny data, such as a text file up to 256 KB in size. Files that are larger than picture or video files are divided into smaller pieces and stored in several IPFS objects. The basic architecture of IPFS is shown in 2. The architecture of IPFS is very simple and powerful, with the following features:

- A directory structure having some files
- Content-addressable
- Immutable
- Fully distributed

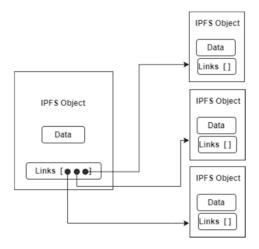


Figure 2: Basic IPFS Architecture

2.3 Review of Related Literature

2.3.1 Al-Powered Chatbots for Mental Health

Woebot was a cognitive-behavioural therapy (CBT)-based chatbot developed using NLP and decision-tree logic. It was free for individual users and easy to use. It do not supports deep personalization and emotioanl depth. Woebot app was retired June 30, 2025, and is no longer available for usage *FAQ --- woebothealth.com* (2025).

Tess is used to treat depression and anxiety as well as to identify emotional disorders. It uses NLP and sentiment analysis algorithms combined with AI decision trees to deliver context-aware responses. It is paid service and it is available for organizations *For individuals --- x2ai.com* (2025).

Wysa is an Al-powered mental health app that uses rule-based NLP and some proprietary DL algorithms to simulate empathy and guide self-help conversations. Wysa is available in both free and paid versions. Although Wysa provides effective mood management tools, its Al still struggles with nuanced emotional understanding and complex mental health scenarios *Wysa for Individuals | Your Al Companion for Everyday Wellbeing | Al Based Mental Health Platform --- wysa.com* (2025).

Replika is a chatbot designed to create emotionally intelligent conversations and simulate friendship. It is based on GPT-style neural networks. It is available as a free app. It is not specifically designed for therapeutic outcomes and may lack scientific grounding in psychological methods. Its data privacy practices have been questioned, especially concerning how user data is stored and used for NLP to assess user input and provide contextually suitable replies *Replika --- replika.ai* (2025).

Youper is an emotional health assistant that combines psychology with LLMs to guide users through mood tracking and therapeutic journaling. It uses NLP and reinforcement learning to personalize mental health interventions over time. The app is available in freemium mode with in-app purchases and subscriptions *Youper: Artificial Intelligence for Mental Health --- youper.ai* (2025).

Elomia uses CBT, and AI to provide personalised care. AI optimises therapies, and the app pro-

vides visualisation and meditation aids. It works with OpenAI by using GPT-3 to deliver effective and accessible therapeutic help Elomia (2025).

Faino is an anonymous chatbot for stress management that can be found on Telegram. It offers healing routines and gauges stress levels. It provides a range of voice chats and mental health exercises without asking users for any personal information. These technologies effectively meet urgent demands and support conventional therapy approaches, despite their limitations in thorough diagnosis and human emotional connection *Faino --- faino.help* (2025).

2.3.2 Decentralized Storage in Healthcare

Mohanta et al. (2025) proposed a scheme that uses the IPFS model. A technique based on the 128-bit Advanced Encryption Standard was proposed to encrypt patient information and store it in an IPFS-based decentralized network. Edge-computing techniques were used to perform computations at the edge level within a decentralized architecture, thereby addressing the computational challenges associated with cloud computing. Lastly, the encryption keys were stored using blockchain technology to address the issue of restricted computational power on low-end devices through off-chain and on-chain business processes.

3. Methodology

This chapter describes the methodological framework used for the design, development, and evaluation of a MindMesh. It outlines the development approach, model selection, dataset sources, data preparation, training process, integration methods, and evaluation techniques. Since this research is development-oriented, the methodology primarily focuses on system design and testing using secondary data and pre-trained language models. replication and reproducibility.

3.1 Research Design

This study employs a design science research (DSR) approach, which is appropriate for projects involving the creation of innovative artefacts, such as software tools or platforms. The research comprises three main phases:

- 1. Requirement Analysis and System Design: Understanding system objectives based on existing literature and user needs.
- Model Training and Implementation: Fine-tuning a pre-trained LLM (LLaMA 2 and GPT-2) using a publicly available Mental Health Reddit Dataset (CMU) Rani et al. (2024) and DAIC-WOZ dataset DeVault et al. (2014).
- 3. Evaluation and Testing: Assessing usability, performance, and ethical compliance.

3.2 Dataset and Sampling

This thesis uses a publicly available dataset for training of proposed chatbot. There are two datasets, the first is the Mental Health Reddit Dataset (CMU) Rani et al. (2024), it is curated for NLP research involving depression and anxiety discussions, and the second is DAIC-WOZ dataset DeVault et al. (2014), which is a multimodal corpus for detecting psychological distress. These datasets contain anonymised text data, which is suitable for fine-tuning conversational AI models in the mental health domain.

The study employs purposive sampling to extract subsets from the datasets. Conversations that

meet specific quality and relevance criteria (e.g., expression of emotional states, structured replies, mental health tags) are selected for training and validation. This sampling ensures the dataset reflects the real-world diversity of mental health discussions.

3.3 Limitations

The study faced limitations in terms of sample size, potential self-selection bias, and the constrained testing period. Real-world deployment challenges such as scalability and system accessibility in low-resource settings are beyond the scope of this research.

3.4 Validity and Reliability

To ensure validity, the dataset from authentic sources is used. Reliability was ensured by pilottesting the chatbot with multiple users and conducting repeated trials of system performance under varied network conditions. Expert feedback further strengthened the credibility of the results.

3.5 Justification of Approach

The mixed-methods approach is justified given the interdisciplinary nature of the study. The usability testing allowed for a holistic understanding of the technical and human factors involved. The selected methods align with the research objectives of assessing empathy, privacy, and trust in Al-driven mental health support systems.

3.6 Procedure

The study followed these sequential steps:

- 1. Literature review and requirement specification
- 2. Design of system architecture
- 3. Development of chatbot (using Hugging Face), IPFS, and Filecoin.
- 4. Pilot testing and participant recruitment

- 5. Data collection through interactions and feedback
- 6. Data analysis using statistical and thematic techniques
- 7. Expert validation and system refinement

3.7 Materials

The following materials and tools are used:

- Frontend: React.js
- Backend: Node.js
- Database/Storage: IPFS + Filecoin
- Al Libraries: Python, Hugging Face Transformers, PyTorch, TensorFlow, LangChain
- System Usability Scale (SUS) Questionnaire
- NVivo (for qualitative data analysis)
- API Testing: Postman
- IDE: Visual Studio Code

4. Implementation

5. Discussion

6. Conclusion

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7. Appendix

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