

Advancements in Conversational AI: Building Mental Health Chatbot with BERT Model

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A significant portion of individuals experience various mental health challenges, including depression, anxiety, stress, and more. Many people may choose not to consult a counsellor or seek professional assistance due to factors like reluctance or financial constraints. The envisioned solution aims to alleviate this issue by offering people access to a chatbot that delivers essential support akin to a counsellor or therapist. This research presents the development of a mental health chatbot using the BERT model, trained to understand user queries with contextual information. The chatbot offers expert guidance on mental health concerns along with ADHD - a condition that affects individuals across diverse age groups and has implications extending beyond childhood, leveraging a curated dataset. The approach encompasses surveys, questionnaires, data analysis, and natural language processing. The chatbot delivers accessible support, tailored coping strategies, and a secure emotional outlet, synergizing with current services to foster proactive well-being augmentation. The goal is to establish an online platform to facilitate the tool's operation.

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SECTION I. Introduction

In an era characterized by rapid digital innovation and evolving paradigms in healthcare, the convergence of mental health support and artificial intelligence (AI) technologies presents a realm of unprecedented potential. The growing prevalence of mental health challenges, coupled with the urgent need for timely and accessible interventions, has given rise to a transformative approach – the development of intelligent conversational agents known as mental health chatbots. Driven by the latest advancements in Natural Language Processing (NLP) [21], this research endeavors to explore the integration of the BERT (Bidirectional Encoder Representations from Transformers) model, a cornerstone in contemporary AI, within the domain of mental health support. Of particular significance is the application of this innovative fusion in addressing the multifaceted complexities of Attention-Deficit Hyperactivity Disorder (ADHD), a condition that affects individuals across diverse age groups and has implications extending beyond childhood. ADHD is a pervasive neurodevelopmental disorder characterized by symptoms of inattention, hyperactivity, and impulsivity that significantly impede various aspects of an individual's life [1], [3]. It is one of the most common childhood psychiatric disorders, with a worldwide prevalence estimated at around 5%. The consequences of ADHD are limited to the affected individual but reverberate throughout the family unit. The presence of a child or adolescent with ADHD in the family frequently results in increased disruption in family dynamics, heightened marital strain, decreased work efficiency, and a significant family burden [14]. Parental psychopathology rates are higher in families with ADHD-affected children, with maternal depression showing a significant association with child ADHD. Parents of children with ADHD often exhibit elevated levels of psychological distress and a diminished quality of life. This intricate interplay between ADHD and familial dynamics

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highlights the necessity for holistic interventions that address both the individual's challenges and the broader family context. Against this backdrop, the intersection of AI and mental health support offers a compelling avenue to address the challenges posed by ADHD [12].

Mental health chatbots powered by AI technologies hold the potential to provide personalized, empathetic, and continuous support to individuals and families navigating the complexities of ADHD [11]. This research focuses on the integration of the BERT model, renowned for its capacity to comprehend intricate nuances of human language, within mental health chatbots specifically tailored for ADHD. This study aims to delve into the potential benefits, effectiveness, and user acceptance of BERT-powered mental health chatbots in the context of ADHD.

By exploring the amalgamation of AI and mental health support through an analysis of existing literature, methodologies, and empirical findings, the research seeks to shed light on the transformative potential of these chatbots in complementing and enhancing traditional therapeutic approaches for ADHD [6]. In subsequent sections, this paper will delve into the intricacies of the methodology employed for the development and implementation of mental health chatbots utilizing the BERT model. It will encompass critical aspects including data collection, preprocessing, model fine-tuning, and integration into user-friendly interfaces. Through this comprehensive exploration, the study endeavors to offer insights into the practical applications and implications of BERT-driven mental health chatbots for ADHD.

Furthermore, the paper will address future prospects and ethical considerations associated with the integration of BERT-powered chatbots in the realm of ADHD care. The responsible implementation of AI technologies, preservation of privacy and the maintenance of a user-centric focus are essential to realizing the full potential of this innovative fusion. In conclusion, the transformative potential of BERT-driven mental health chatbots is poised to reshape the landscape of ADHD care. By harnessing AI's computational capabilities and linguistic sophistication, this research aspires to contribute to a deeper understanding of the implications, challenges, and opportunities presented by this innovative fusion. Through the synthesis of AI and mental health support, particularly in the context of ADHD, this study aims to lay the groundwork for a more accessible, empathetic, and effective approach to supporting individuals and families dealing with the complexities of ADHD throughout their mental health journey.

SECTION II. Literature Review

This study encompasses a comprehensive literature review of diverse research papers that delve into the application of AI methodologies within the context of mental health. These investigations address a range of themes, including patient perceptions of mental health chatbots, the creation of chatbots utilizing machine learning and NLP, techniques for preprocessing and classifying linguistic data in mental health analysis [8], the establishment of a machine learning pipeline for mental health prediction, predictors identification for adolescent mental health concerns through machine learning [18], formulation of an ADHD diagnostic system using varied models, and the utilization of Convolutional Neural Networks (CNNs) for ADHD pattern classification and interpretation. Table 1 provides a summary of the reviewed papers, presenting key details about each study, including the author names, publication year, a brief description of the study's focus, and a reference to the paper. It serves as an overview of the scope and diversity of the studies reviewed in the literature review.

SECTION III. Proposed Methodology

A. Frameworks and Models Used

This study is based on the BERT (Bidirectional Encoder Representations from Transformers) model, which was introduced in 2018 by Google. Its primary objective was to aid computers in comprehending the meaning of ambiguous language within text, achieved through the utilization of surrounding text to establish

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contextual understanding [4]. The BERT framework was pre-trained using text from Wikipedia and the Book Corpus, a dataset containing more than 10,000 books of different genres. It can be fine-tuned with any dataset, as in this study we used a chat counsel dataset in order to train the model. BERT uses an encoder-decoder architecture with self-attention, a mechanism that enables the model to make sense of the input that it receives. The focus of the present study is centered around sentence similarity. Here, we focus on understanding how similar sentences are in order to predict the answer to the user query. We aim to do this by training BERT on a set of sentence pairs to improve its skill in recognizing similarities among sentences, even when they talk about different things or are written in different ways. A cosine similarity matrix can be used for computing the similarity score. It can be referred to as a measure of similarity between pairs of embeddings.

Cosine similarity is a common metric used to compare the similarity between two vectors by measuring the cosine of the angle between them. For this study, the vectors represent the semantic meaning of words in a high-dimensional space. The similarity value ranges from -1 to 1, where 1 indicates identical vectors, 0 indicates no similarity, and -1 indicates opposite vectors. Once the chatbot has obtained embeddings for the user's input, it utilizes this contextual understanding to generate a response. The model should consider not only the individual words but also their relationships within the entire input sequence. For instance, if the user expresses negative emotions, the chatbot can generate a response that includes empathetic and supportive language. BERT helps the model understand the emotional tone and context, allowing the chatbot to tailor its responses appropriately.

B. Dataset

For this study, we used scraped data generated from [counselchat.com](#). It is an online forum that provides users with an expert community of mental health professionals that seeks to assist them with their personal struggles. Within this platform, users are empowered to submit questions related to specific mental health subjects and subsequently receive responses from a diverse range of mental health professionals. In addition to receiving responses to their inquiries, users are also granted the opportunity to peruse questions and responses from fellow users [3]. The responses are posted by verified therapists, which is the most trustworthy component of the data being utilized to train the model. Even if the answer isn't exactly right for the user's requirements, we can be sure that it came from a subject-matter specialist. If one were utilizing Reddit information, anyone could be offering suggestions. Here, we may be sure that the counsel is coming from qualified professionals. The relevant columns of the dataset are as follows:

Table I Literature review

 Table I- Literature review

- Question ID — A unique question identifier which is distinct for every question
- Topic — The specific mental health topic centered around the question
- Question Text — The content of the actual question posted
- Answer Text — The content of the therapist's response to the question
- Therapist Info — A description of each therapist, usually a name and specialty

 Fig. 1. - JSON snippet showing structure of sample question-answer pair.

Fig. 1.

JSON snippet showing structure of sample question-answer pair.

C. Implementation

In the initial phase, we used scraped data from [counselchat.com](#) extracted using web scraping techniques like BeautifulSoup and Selenium. During the data preprocessing stage, we cleaned the dataset by removing HTML tags, punctuation, stopwords and irrelevant symbols and correcting misspellings and grammatical errors. Handled the missing values using techniques like imputation and removal. Then, we performed normalization

by converting text to lowercase for consistency and applying stemming and lemmatization to reduce words to their root forms [22]. Tokenization was implemented by splitting text into individual words or subwords (using the WordPiece tokenizer for BERT) and mapping those sub-words to numerical tokens for BERT input. Finally, divide the dataset into 80% for training, 10% for validation, and 10% for testing to ensure robust model evaluation. To get a better understanding of the data, we employed visualization techniques using libraries like Matplotlib. As an example, Fig. 2 highlights the top ten issues depicted in the dataset.

In the subsequent phase, we will access a pre-trained BERT model from the Hugging Face Transformers library, which offers various BERT versions and model sizes. Each question and answer pair in the dataset will be fed through the BERT model, which will then extract the contextual word embeddings produced by the model, which represent the semantic meaning of the text [19].

 Fig. 2. - Graphical depiction of the top ten themes as illustrated by the utilized dataset

Fig. 2.

Graphical depiction of the top ten themes as illustrated by the utilized dataset

Basically, embeddings refer to numeric encodings that capture the semantic characteristics of objects like words, facilitating mathematical analysis for diverse applications. Eventually, we will store these embeddings in a pickle file for efficient retrieval during chatbot usage. Furthermore, we will define a function in Python to calculate cosine similarity between text embeddings. The function should accept a user's query as an input and load pre-computed embeddings from the pickle file for both the query and all potential answers. Then, calculate the cosine similarity scores between the query embedding and each answer embedding, and rank the answers in descending order of their similarity scores. We propose to identify the answer with the highest cosine similarity score as the chatbot's response and display the selected response to the user.

 Fig. 3. - Flowchart of the proposed methodology

Fig. 3.

Flowchart of the proposed methodology

 Fig. 4. - A fundamental comparison of the architectural structures of BERT and GPT

Fig. 4.

A fundamental comparison of the architectural structures of BERT and GPT

We also aim to incorporate a feedback mechanism within the chatbot interface for users to rate the response's helpfulness and relevance, and using the feedback, our goal is to continuously improve the chatbot's performance over time.

In the final phase, we will thoroughly evaluate the chatbot's accuracy and relevance using the validation and testing sets by employing metrics like precision, recall, F1-score, and human evaluation to assess performance and proceed with model hyperparameter tuning, fine-tuning BERT on the mental health dataset, or alternative similarity metrics if needed. Conclusively, we intend to use the Flask web application framework for deploying the chatbot. Once we are satisfied with the chatbot's performance, we aim to deploy it to a public-facing web server for wider accessibility and regularly monitor the chatbot's usage, performance metrics, and user feedback to identify issues or areas for further optimization. We will also periodically update the BERT model with newer versions and retrain on additional mental health data to maintain relevance and effectiveness.

SECTION IV. Result

The presented research showcases the significant potential of utilizing the BERT model to create a chatbot that can assist individuals facing mental health challenges. This chatbot aims to deliver tailored guidance, simplifying access to aid for those experiencing stress, anxiety, or other mental health problems. Utilizing advanced technology, the chatbot comprehends user input and provides effective coping strategies [5]. Its role is akin to a virtual companion offering understanding and advice. Operating privately and on-demand, the chatbot creates a secure avenue for discussing emotions.

Additionally, when considering the development of mental health chatbots while referring to Fig.4, BERT emerges as the superior option compared to GPT-3. GPT-3 and BERT exhibit varying degrees of effectiveness across different natural language processing tasks, largely due to their distinct architectures and training dataset sizes. For instance, GPT-3 excels in tasks like summarization or translation [2], whereas BERT demonstrates its strengths in tasks like sentiment analysis or natural language understanding. Therefore, the selection between these models hinges on specific task requirements and objectives. Therefore, in this study we preferred BERT model

for employing the chatbot. BERT's attributes render it a more suitable candidate than GPT-3, aligning with the unique demands of such applications.

SECTION V. Future Scope

The future scope for a mental health and ADHD improvement-based chatbot can be characterized by continuous innovation, user-centricity, and responsible development. Future ADHD chatbots could use machine learning to adapt and provide more personalized strategies based on individual preferences, behaviors, and progress [8]. As these chatbots evolve, they have the potential to revolutionize mental health care, making it more accessible, personalized, and effective for individuals seeking support and guidance in their mental well-being journey. Integrating with neuro feedback devices, the chatbot could offer real-time feedback on brain activity, helping users learn to self-regulate attention and impulsivity.

By using interactive exercises and simulations, the chatbot could help users practice executive functioning skills, such as decision-making, planning, and organization. Future chatbots can become more sophisticated in understanding individual users' unique needs. Through advanced natural language processing (NLP) and machine learning algorithms, chatbots can better interpret users' emotions [9]. Also, by expanding beyond cognitive strategies, the chatbot could incorporate emotion regulation techniques, assisting users in managing mood swings often associated with ADHD [17]. The chatbot could provide resources and advice to caregivers and family members, helping them understand and support individuals with ADHD. Since the interactions are private and non-judgmental, individuals may feel more comfortable reaching out for support [10].

Another point can be, translating the chatbot into multiple languages and tailoring it to cultural contexts could ensure its usefulness on a global scale [13][16]. Beyond text-based interfaces, the chatbot could incorporate voice interactions or video consultations, making assistance more accessible and engaging [25]. As AI advances, ensuring data privacy, maintaining ethical AI practices, and securing sensitive user information will remain crucial. The evolving landscape of technology, coupled with a deeper understanding of ADHD and other mental health problems, will likely lead to innovative features and expanded capabilities for chatbots.

SECTION VI. Conclusion

Fundamentally, the chatbot offers hope for addressing general mental health concerns as well as ADHD. Guided by the robust BERT model, the methodology underpins this innovation, representing a significant step forward.

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Tailoring its approach, the chatbot aims to provide personalized strategies, coping mechanisms, and vigilant monitoring. This fosters self-awareness and adept symptom management. It provides a safe space for sharing emotions, being non-judgmental and confidential. While not a replacement for professional advice, the chatbot complements therapeutic measures, cultivating a positive mental health attitude.

It empowers users with resources and skills to navigate challenges. Regular feedback and technological improvements can be employed to enhance its effectiveness. Thus, anchored by the BERT model, it paves the way towards a future where the chatbot aims to contribute in advancement of coping with mental well-being, both in general and within ADHD realms.

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References

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