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Integration of Digital and Artificial Intelligence Solutions in Mental Healthcare

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***Abstract*— The current paper explores the transformative role of the digital tools and artificial intelligence in the field of mental healthcare. As global demand for psychological support outpaces the availability of human specialists, digital and AI-driven solutions offer a scalable bridge to fill this gap. The study examines the transition from traditional diagnostic methods to data-driven, predictive models. The research utilizes a comparative analysis of leading AI therapeutic platforms and evaluates the technical foundations of digital phenotyping and Natural Language Processing. Furthermore, the paper analyses the legal implications of the European Union's AI Act on high-risk medical algorithms.**

Keywords*— *AI, digitalization, digital phenotyping, mental health.

I. INTRODUCTION

The rapid development of new information and communication technologies, which we have witnessed over the past decade, is leading to a completely new dynamic and complex reality within which political, economic and social developments unfold. The digital revolution is changing the world at an unprecedented pace. The use of new technologies and digital devices has begun to enter people's personal and professional lives at an ever-faster pace, and institutions have had to change in a timely manner to respond to the new conditions [1].

In the modern world, technology is at the forefront of many sectors, shaping our daily lives and transforming traditional norms. One area that is undergoing significant evolution due to digital intervention is mental health care. The rise of digital solutions in this space is opening up new avenues for providing support, improving accessibility and potentially revolutionizing mental health outcomes.

The global health crisis of the past two years has confirmed the need to accelerate digital transformation in all economic and societal sectors, including healthcare.

According to the World Health Organization, nearly 1 billion people worldwide suffer from a mental health disorder, resulting in enormous personal suffering and socio-economic costs [2]. Mental health problems are increasing at an alarming rate worldwide, and unfortunately, the COVID-19 pandemic has contributed to exacerbating the problems.

The disruption caused by the pandemic is unprecedented, and the resulting economic and social measures have led to a huge change in lifestyles. The pandemic situation and the measures introduced have further exacerbated the crisis in the mental health of the population. Episodes of anxiety and depression have increased by up to four times during the pandemic.

Nowadays, digital technologies, platforms and applications become a reality within the delivery of mental health pathways. Number of these solutions are now part of a broader healthcare landscape focused on improving population mental health and the delivery of health services. Nevertheless, challenges remain in how digital is defined; how innovation, research and development are supported; and how transparency is provided about the role of digital mental health.

The global healthcare system is facing another unprecedented challenge posed by the escalating incidence of mental disorders and the chronic shortage of qualified personnel. In this context, artificial intelligence (AI) is emerging not just as an auxiliary tool, but as a fundamental technological and epistemological force capable of replicating and extending the cognitive functions of the human mind, including learning from experience, understanding linguistic nuances, and solving complex diagnostic tasks [3]. This paper analyses the broad impact of the digital and AI-driven solutions on mental health care, examining the technological mechanisms, the clinical efficacy of contemporary interventions, and the legal imperatives that shape the future of the mental health care.

II. MATERIAL AND METHOD

The material includes a review of the main features of the digital platforms used in mental healthcare, fields of application, limitations and legal regulation. The following scientific methods were used in the research process -

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analysis and synthesis, descriptive and comparative analysis.

III. Results and discussion

A. Main features and fields of application of digital tools and AI-driven solutions in mental health care

Digital health in general includes mobile health, health information technology, wearable devices, telemedicine and personalized medicine [4]. Specifically for the field of mental health, digital health is defined as a therapeutic intervention for mental health delivered via a website, smartphone or tablet application [5].

Digital mental health is defined as support for emotional needs delivered via computer technology (apps, video visits via smartphone or computer, videos on demand and text messages on a smartphone). These tools can be clinical (providing a diagnosis and/or treatment plan) or wellness-based (subclinical). The use of benefits that include a digital component via a smartphone or computer is becoming increasingly common.

Digital technologies like smartphones, wearables, and web platforms are the foundation for collecting data. Meanwhile, artificial intelligence analyses the data to provide care that's tailored to the individual needs. This combination of digital tools and AI works together in a way that enhances each other's strengths. Digital tools help gather all sorts of information, and then AI steps in to make sense of it all, leading to more precise and personalized care for patients.

Digital mental health tools vary considerably in their target audience, delivery method, psychological theory, and intensity. Tools can span the continuum of care, from prevention to crisis management. Some tools are aimed at patients with a clinical illness, while others offer only educational content. Some categories include: self-monitoring; cognitive enhancement; skill acquisition; social support; symptom tracking; and passive data collection.

Types of digital mental health care can be categorized into several areas:

- Prevention;
- Assessment;
- Treatment;
- Crisis interventions;
- Post-treatment management;
- Ongoing monitoring.

Digital mental health tools are mobile applications designed to help users improve their emotional well-being, become more aware, and cope with some common problems. Some of the digital mental health solutions allow users to access online therapy or psychiatric help; others are aimed at starting a meditation practice, managing stress and anxiety, or improving sleep quality. The best digital mental health solutions are accessible, easy to use, and well-designed, with few technical issues. High-quality digital therapeutic tools remove some of the common barriers to mental health care, while applications to increase concentration and attention lead to high productivity.

Digital tools in mental health care are aimed at both prevention and the acquisition of new skills and self-help in relation to an existing problem. There are many tools on the market, with different ways of working and intensity. Some of the most common applications are used to:

- Practicing different types of meditation and mindfulness. Various digital tools are developed with the scope of practicing mindfulness techniques and guided meditation sessions.
- Learning coping skills. Some mental health applications use different activities and online worksheets helping users in developing key skills, such as functional ways to cope with stress and improve attention and concentration.
- Breathing practices. They allow users to learn and practice various breathing techniques on their own.
- Stress management. Many apps focus on preventing and managing stress, which affects a large portion of the world's population.
- Addiction recovery. They provide progress monitoring and support during the process of overcoming various types of addictions.
- Anxiety and depression. They offer the opportunity for remote meetings and therapy with a qualified therapist. Along with stress management apps, tools for overcoming anxiety and depression are the most sought-after and most commonly used.
- Sleep problems. There are applications that are suitable for insomnia and restless sleep. Features such as dream sequences, guided imagery, audio narration stories, soothing music, and nature sounds are used to aid in falling asleep and staying asleep.

While traditional mental health applications often offer static content, AI transforms these tools into adaptive systems like chatbots and Ecological momentary interventions. Digital platforms like Woebot and Wysa use natural language processing to conduct dialogue and apply cognitive behavioural therapy techniques in real time. AI analyses the user's context through sensors and sends therapeutic prompts at the exact moment they are needed (e.g., when high stress is detected through heart rate).

Traditional therapy is based on building strong relationships with patients. The therapist takes the time to listen, understand, and support their patients. However, traditional therapy models are expensive, difficult to plan, and cannot be scaled. Emerging digital mental health solutions offer on-demand therapy at any time. Text communication is the predominant mode of interaction; some companies use software to automate responses, while others promote self-help tools.

The global health crisis has fundamentally changed the patterns of demand and supply of health care. The challenge for health care professionals is to determine which digital solutions for mental health are effective and will benefit their patients. Modalities range widely and may include telephone, videoconferencing, computer-based interventions, mobile phone-based interventions, patient monitoring sensors, social media, virtual reality, and games. The offerings are typically divided into three main intensity categories: self-directed use of online content; hybrid forms of online content and contact with a therapist; and extended therapy using videoconferencing, telephone, text messaging, and/or email between in-person psychotherapy sessions. Therapies used may include: Cognitive behavioural therapy, Dialectical behaviour therapy, stress management, and attention and concentration enhancement. With the advent and widespread use of new technologies, the general interest in digital solutions for mental health has grown significantly [4].

Both providers and researchers note that digital tools can provide prevention as well as treatment. Prevention can be achieved through screening and early intervention "to reduce risk factors and build psychological resources" [6] and "passive monitoring of psychological states that can alert consumers and providers to acute and chronic stressors predisposing to subsequent clinical disorders" [7].

B. Technology architectures and multimodal approaches in digital mental healthcare

The transition to more precise mental healthcare relies on artificial intelligence's ability to analyse complex data and find patterns that remain invisible to traditional diagnosis methods. This process involves the integration of multimodal datasets spanning neuroimaging, electrophysiological signals, electronic health records. This combined data, often referred to as "digital phenotyping," helps to create a more detailed picture of a person's health [8]. In modern psychiatry, the concept of "digital phenotyping" is gaining ground. This is the concept of instantaneous and passive data collection from personal devices, using the typing kinetics and voice prosody. Changes in the speed of typing messages and the frequency of typos can signal cognitive decline or a manic episode.

By using AI to analyse all this data, clinicians are able to find patterns that they might not have seen otherwise, which can lead to more accurate diagnoses and better treatment plans. The goal is to use this information to provide more personalized care for patients, taking into account their unique characteristics and needs. Unlike traditional questionnaires that rely on subjective responses, AI uses convolutional neural networks to analyse facial expressions and micro-mimics during an interview and recurrent neural networks for time series analysis (e.g. changes in sleep quality over a month), allowing for prediction of relapse in bipolar disorder.

TABLE 1 TECHNOLOGICAL ANALYSIS OF THE MENGAL HEALTH STATUS

Technological domain	**Methods and purpose**	
	Specific methods	***Clinical purpose***
Electroencephalography	spectral density, functional connectivity	differential diagnosis of depression and psychosis
Electrocardiography	heart rate variability	assessment of psychophysiological stress and anxiety
Natural language processing	sentiment analysis, topical modeling	detecting cognitive markers in speech and text
Digital phenotyping	passive smartphone data analysis	tracking relapses and changes in activity
Genetic and blood biomarkers	multivariate integration	personalized choice of pharmacotherapy

Electroencephalographic (EEG) and electrocardiographic (ECG) data are emerging as critical sources for machine learning. EEG-based models use spectral analysis and functional connectivity studies to identify specific biomarkers for depression and schizophrenia. In parallel, heart rate variability analysis provides objective data on the state of the autonomic nervous system, reflecting the levels of stress and the individual's capacity for emotional regulation [9]. By combining this information, AI can act as an early warning system, spotting signs of decline that may not be noticeable to the patient or their therapist until later on. This can happen even before the symptoms become severe enough to be considered a clinical issue.

Among the most important AI techniques used are machine learning, deep learning, natural language processing (NLP), and multimodal AI and they "have shown promise in enhancing mental health services" [8]. There are different technological domains, using specific methods in order to provide data, analyse it and assess the user's condition in regard to mental health status (Table 1).

One of the most demanding areas for the application of machine learning is the prediction of suicidal behaviour and self-harm. Traditional clinical assessments in this area show limited accuracy that has not improved significantly in recent decades [10]. In contrast, predictive algorithms trained on real clinical data have demonstrated the ability to generate individual predictions with high precision [11].

Research has found that using a mix of structured data from electronic health records, like patient info, past diagnoses, medications, and unstructured text from clinical notes, gives the best outcomes. Using natural language processing allows the mining of terms and emotions from free text, which significantly improves the detection of suicidal thoughts, including specific groups such as pregnant women or patients discharged from hospital. For example, NLP can help find patterns in clinical notes that might suggest someone is at risk of suicide, even if they don't explicitly say so. By combining this with other data, like demographics and medical history, we can get a more

complete picture of a patient's risk factors and provide better care [12]. Despite their high accuracy, analysis of these models reveals critical challenges related to the "data noise" and the need for external validation [11]. For example, NLP models could generate false signals due to specific writing habits of clinicians or the use of negations, like "the patient is not suicidal", which requires precise filtering and contextual understanding [10].

The development of conversational agents (chatbots) marks a new era in the accessibility of psychosocial support. These tools offer anonymity, and scalability, that make them convenient to address stigma and overcome geographical barriers. The clinical effectiveness of AI chatbots is demonstrated by a number of meta-analyses confirming that AI-based interventions achieve small to moderate effects in reducing symptoms of depression, anxiety, and stress. A recent randomized controlled trial published in JIMR Mental Health, demonstrated that a digital program combining AI conversational agents with clinical supervision achieved outcomes that were almost equal to traditional cognitive behavioural therapy delivered face-to-face or via chat with a therapist [13]. The same significant result suggests that the technology could reduce clinician time by up to 8 times while maintaining therapeutic effectiveness. Some of the digital mental health solutions have clinical evidence and have been analysed along with their key functionalities, target group, level of autonomy and validation (Table 2).

TABLE 2 ANALYSIS OF THE MAIN DIGITAL MENTAL HEALTH APPLICATIONS

Characteristic	**Platform**		
	Woebot	***Wysa***	***Youper***
Basic methodology	Cognitive behavioral therapy	Cognitive behavioural therapy, Dialectical behaviour therapy, Yoga, Meditation	Cognitive behavioural therapy, Acceptance and commitment therapy
Technological approach	Structured dialogue - rule-based and NLP	Hybrid model – AI and access to human therapist	Personalized emotional monitoring - sentiment analysis
Target group	Depression, anxiety, postpartum depression	A wide spectrum from stress to chronic pain	Users with mood swings and social anxiety
Clinical evidence	Strong Multiple randomized controlled trials, 22% reduction in depression scores (PHQ-9)	High Partnerships with NHS, UK, improved engagement through empathetic interface	Moderate The focus is on user experience, reduction in anxiety symptoms
Level of autonomy	Fully autonomous	Escalation to a person at risk	Referral to professional help

It is evident that the most popular digital applications in the mental healthcare differ in their functionalities, technological approach, target group and clinical evidence. Other platforms, like Noah AI and Replika, are used for voice therapy, crisis intervention and emotional companionship.

C. Digital therapeutic alliance and humanistically oriented artificial intelligence

A central question in contemporary psychotherapy is whether and how the traditional concept of the therapeutic alliance—the relationship between therapist and patient—can be transferred to the digital realm [14]. The emerging framework of the digital therapeutic alliance explores the mechanisms of empathy, trust, and collaboration in the context of the interaction between an individual and a machine [15].

Research using adapted versions of the Working Alliance Inventory (WAI-SR) identifies five main dimensions of the digital therapeutic alliance:

- Flexibility – represents the ability of the user to choose the style of the dialogue — whether to be led by a chatbot or to initiate topics themselves.
- Goal and task alignment – consists of mutual understanding between the user and the algorithm about the steps needed to achieve therapeutic progress.
- Emotional experience – perceiving the feeling of warmth, empathy, and non-judgmental presence from the AI agent.
- Openness and self-disclosure – represent the extent to which the anonymity of the digital environment encourages the sharing of deeply personal issues.
- Responsibility – encompass the sense of commitment to the process that the application induces.

Critics highlight the existence of a "genuineness gap"—since artificial agents lack consciousness or moral responsibility, their empathic expressions remain ontologically "hollow," which can undermine the deep socio-emotional functions of therapy for certain patients [16].

The integration of AI into mental healthcare should not be considered in isolation from psychological theory. The "common factors model" or contextual model argues that the success of any therapy is determined by universal mechanisms: the real connection, the creation of expectations through an explanation of the disorder, and the implementation of specific functional actions. By understanding these common factors, we can make AI-powered therapy more effective and personal, which is a key part of making sure people get the help they need [17].

In response to the risks of dehumanization, the concept of Humanistically oriented artificial intelligence places human psychological needs, cognitive processes, and

ethical considerations at the core of algorithm development [18]. This includes:

• Theory of mind requires the designing AI systems that can predict human intentions and emotional states with high accuracy.

• Emotional intelligence is related to the ability of a machine to respond in a validating manner, which increases the trust of users in emotionally sensitive situations.

• Existential support requires the use of AI to facilitate meaning-centred dialogue and assist the individual in constructing personal values [19].

As these models continue to develop, it's clear that AI has the potential to enhance treatment results by taking into account the unique cultural and personal expectations of each patient, ultimately leading to more effective and personalized care [17].

D. Ethical and legal imperatives of the introduction of digital and AI-driven solutions in mental healthcare

The rapid penetration of AI in sensitive areas such as mental health requires strict regulation. The European Union Artificial Intelligence Act (EU AI Act), finally adopted in 2024, establishes the world's first comprehensive risk-based legal framework [20].

According to Article 5 of the Act, certain applications of AI in healthcare are explicitly prohibited due to unacceptable risks to fundamental rights:

- cognitive manipulation - systems that use subliminal techniques to change the behaviour of vulnerable groups;
- social scoring - classification of citizens based on behaviour or personal characteristics, which could limit access to healthcare;
- exploitation of vulnerabilities - algorithms that take advantage of the age, disability or economic situation of patients.

Most AI systems used for diagnosis and treatment in therapy are classified as "high-risk" and must meet strict requirements for transparency, traceability and mandatory human oversight. Human oversight is critical to prevent the tendency for clinicians to blindly trust the output of an algorithm, referred to as “automation bias”.

Ethical challenges in AI also involve dealing with biased data. If AI is trained on unrepresentative samples, it can lead to systematic errors in diagnosing women or minority groups [21]. Privacy and data security is another important aspect, because medical information is extremely sensitive, so it needs to be strongly protected with good encryption and by following the HIPAA and GDPR standards [22].

E. Integration of Bulgaria into the European digital space and legal imperatives of the remote medical care

Bulgaria is actively integrating into the European digital space through programs such as “Digital Bulgaria 2025”, National strategy for digital transformation 2020-2030, National health strategy 2030 and the National Strategy for e-Health and Digitalization of the Health System 2030 [23] – [26]. The priorities of the Bulgarian strategy are accompanied by specific measures and directed to different target groups (Table 3). The Ministry of Health has developed a vision for AI implementation that emphasizes supporting clinicians and improving the efficiency of hospital processes. Mental healthcare is part of the broader digital health and remote medical care framework.

According to Art. 6b of the Law on Medical Institutions medical institutions and medical specialists may provide remote medical care, which includes diagnostic, treatment, rehabilitation and preventive activities and is provided in compliance with the medical standards, by applying methods approved by medical science and practice and through medical, information and communication technologies that guarantee the security of personal data and health information [27]. Remote medical assistance is provided after informed consent has been expressed by the patient in accordance with Article 87 of the Health Act.

The Ministry of Health has finalized the first comprehensive Regulation on remote medical care. It is aimed at introducing innovative and secure digital solutions in healthcare in Bulgaria, creating a modern regulatory framework [28].

The regulatory act was developed in connection with the amendments to the Law on Medical Institutions and aims to introduce clear rules for diagnostics, treatment, prevention and monitoring of patients through telemedicine services.

Remote medical care will be provided by medical institutions and medical specialists in compliance with all established standards and rules for good medical practice. Telemedicine will be applied only in cases where the same level of quality and safety of medical care can be guaranteed as is provided in face-to-face healthcare.

TABLE 3 BULGARIAN INTEGRATION OF THE EUROPEAN DIGITAL SPACE

Priority of the Bulgarian strategy	**Measures and target groups**	
	Specific measures	***Target group***
Digital skills	Training programs for rebalancing competences	Young people (16-24 years) and adults
E-health	Expanding access to services through digital channels	Population in remote regions
Prevention and diagnostics	Implementing AI in medical imaging and screening	Patients with chronic and brain diseases
Ethical standards	Creating a framework for protecting patients' rights	All users of AI services
Integrated care	Digitalization of the psychiatry-social services link	People with severe mental disorders

Particular emphasis is placed on the protection of personal data, the security of health information and the traceability of medical activities. All telemedicine services performed will be documented in the patient's electronic health record through the National Health Information System. This guarantees transparency, continuity of care and better coordination between medical specialists. The regulation creates conditions for more accessible, timely and modern healthcare, enabling more patients to receive quality medical care regardless of their location.

Nevertheless, the Regulation on remote medical care should be more detailed in regard to object, stakeholders and exceptions. The texts should be refined to ensure both a high level of patient protection and the real applicability of telemedicine in everyday medical practice. The sensitive medical data storage is another problematic issue that should be regulated more clearly in order to guarantee privacy and security.

Concerning the AI-driven solutions in medical care, surveys among Bulgarian specialists (e.g. ophthalmologists and neurologists) show "cautious optimism." [29]. While younger clinicians are more informed and open to new technologies, the overall level of trust in AI for making definitive diagnoses remains moderate.

Despite ambitious plans, Bulgaria faces challenges such as staff shortages, regional disparities and the need to further develop scientific infrastructure. Overcoming stigma and investing in outpatient care are emerging as long-term priorities.

F. Future perspectives

There is a demand-supply gap in mental health care, evident from the long waiting lists, health inequalities and access to care, treatment and support. The reason is the growing number of people seeking mental health and the shortage of mental health specialists, hindering expansion and reform, leaving services in a state of constant crisis.

There is also a growing necessity for measures and investment in the field of prevention and early intervention in order to preserve and enhance the society wellbeing.

The pandemic has demonstrated the role that digital technologies can play in supporting institutions, services, systems and individuals to meet the challenges they face. The knowledge and experience gained can be built upon, including the opportunity to expand the research and evidence base, develop key protocols, evaluation processes and regulation.

The mental health care landscape is changing rapidly, with digital solutions playing an increasingly important role. Multiple factors are driving this change, including the increased demand for accessible and convenient mental health support.

Digital solutions are evolving to meet this demand. A growing body of research shows that digital solutions for mental health can be as effective as traditional face-to-face therapies, often providing additional benefits such as increased accessibility and convenience. The flexibility and anonymity offered by digital platforms often allow people to seek help that they would not otherwise have done.

One of the most significant benefits of digital solutions is their ability to make mental health support more accessible. For many people, traditional therapy may be out of reach due to various barriers, such as geographic location, cost, and existing societal stigma. Digital solutions can help overcome these obstacles by providing support to those who need it most.

There is an increasing uptake of digital tools in mental health care. Various companies are planning to focus on communication, resilience, and emotional intelligence.

When choosing a digital mental health solution, users should be guided by the features it provides, such as easy and consistent access, connection to a therapist, clinical proven effectiveness, personalized content, real-time user information, good design, etc.

Paradoxically, while helping with treatment, AI can also be a source of mental health problems. The concept of AI-induced technostress describes the negative psychological effects of automation on employees, including anxiety about job insecurity, cognitive overload, and a sense of lack of control. Long-term exposure to a work environment dominated by algorithms is associated with emotional exhaustion and depressive symptoms. This highlights the need for a balanced approach in which technological integration is accompanied by measures to support the well-being of users and professionals themselves.

In order to overcome the challenges of the introduction and use of digital solutions in mental health care, it is necessary to create the appropriate regulatory framework, conduct clinical studies and provide validation evidence. Issues related to security and privacy should be addressed by regulatory and technological means. Sensitive data protection is crucial, especially in cross border interactions, in terms of national security defence.

Clinical validation to demonstrate efficacy is a well-established and standardized process and is considered vital in the healthcare sector. Clinical studies are time-consuming, expensive and the proposed solution undergoes a rigorous validation process.

The purpose of clinical validation is to ensure that the digital solution is safe, works for all demographic segments and the results are compared to established standards. The conclusions are usually published and available for peer review. Clinically validated digital mental health solutions are based on the principle of "first, do no harm".

An analysis published in JMIR Mental Health found that only 3.4% of apps offering therapeutic treatment for anxiety and depression have published any evidence of efficacy [30]. The ability to identify applications and services that truly offer effective solutions is a key challenge facing consumers today.

The transformation of mental health care can be successfully managed by offering quality, effective and personalized digital mental health solutions that are

supported by clinical research and evidence and build trust with consumers. Such solutions should be easy to use and allow for integration with other systems. All of this should be accompanied by the creation of an ecosystem that engages stakeholders and offers a complete solution for mental health care.

IV. Conclusion

In conclusion, we could say that digital solutions will continue to play a key role in mental health care. As technology continues to evolve, we can expect these solutions to become even more sophisticated, offering improved support and better outcomes for people.

Artificial intelligence is in the process of fundamentally redefining mental health care, moving from the phase of theoretical potential to large-scale clinical implementation. The analysis of current trends and research allows the formulation of certain conclusions. AI provides tools for objectifying psychiatric diagnoses through multimodal biomarkers, which lays the foundations for personalized medicine and represents a diagnostic revolution.

In regard to the therapeutic efficacy, digital conversational agents have been proven effective in mild to moderate anxiety and depression, offering non-inferior results to traditional methods with significantly lower resources.

Successful integration requires strict compliance with regulations such as the EU AI Act, ensuring that AI remains a tool in the hands of a human, not an autonomous decision-making entity. As far as Bulgaria is concerned, the country has a strategic framework, but needs to accelerate the development of digital literacy and ensure a fair distribution of technological benefits between regions. The model of human-machine collaboration is the most promising way forward, providing both scalability and a deeply humane approach.

AI should not be perceived as competition for human therapy, but as its most powerful ally. By combining the algorithmic power of big data with the unique human capacities for empathy and ethical judgment, society can build a more equitable, accessible, and effective mental health support system. Professional communities must embrace this shift proactively, investing in “AI literacy” and participating in the design of tools that protect the dignity and rights of patients.

Digitalisation has the potential to play a crucial role in addressing needs in a way that traditional service models cannot. Interventions and services have the potential to become more efficient, for example through electronic patient records; there is the opportunity to provide services in ways that widen access and allow for earlier interventions, and people who need care and treatment can find the support they need. To realise this potential, collaboration between policymakers, professionals and non-governmental organisations is crucial. Successful implementation will also rely on involvement and interaction with individuals who use mental health services, as well as society as a whole.

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