

Exploring The Two Faces of A Coin: Ai-Assisted Therapy

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Abstract:

With the adoption of AI hitting its stride, its influence can be heavily felt in every possible field, be it economy, politics, healthcare, education, and even culinary arts! Concurrently, the mental health arena cannot be overlooked or left untouched by this drastic technological shift. This is facilitated by various chat bots, virtual therapists etc for the mental health wellbeing of people. However, researchers see this particular matter becoming a topic of debate when it comes to the intersection of clinical efficacy and human ethics. This paper is an attempt to explore the advantages and drawbacks of Ai-assisted therapy, highlighting its support through unmatched elasticity and convenience, along with providing inclusivity in the underserved spaces like the rural areas of India where mental healthcare reachability is scarce. Various AI- enabled coach Woebot and Wysa, allow 24/7 therapy support that cater to the needs of people by letting them vent and talk about their feelings and thoughts, anytime, anywhere. However the paper also states the absence of nonverbal cues and empathy, fundamental to therapeutic counseling. Furthermore, this paper also brings in privacy concerns for data breaches revealing sensitive information from vulnerable users, who may be unaware of the extent to which their information is being stored and processed. In conclusion, the paper would attempt to explore the usefulness of AI towards people with accessible and judgment free therapy, but also place the arguments regarding the lack of human empathy.

Keywords: artificial intelligence (AI), AI-assisted therapy, mental health, psychological wellbeing.

INTRODUCTION

Artificial Intelligence is a branch of computer science that tries to make machines perform tasks that usually need human intelligence including learning from experience, understanding what people say, recognizing patterns, solving problems and making decisions. Artificial Intelligence is drastically altering the world and how it works. It is affecting many fields, including taking care of people's minds. The combination of Artificial Intelligence and mental healthcare is a challenge in the healthcare sector. For a long period of time people did not want to talk about mental health because they were ashamed; but now there is a general awareness to understand how important it is to take care of their minds. Driven by increasing society, openness towards mental wellness and rapid tech, technological evolution, Artificial Intelligence (AI) described out a significant role in mental healthcare. Traditional therapy operates as a structure. Dialogue driven treatment protocol, intended to elevate psychological health and general well-being of the individual commentary referred to as psychotherapy or talk therapy. This practice traditional requires direct collaboration with a certified professional to explore behavioural patterns, thoughts, behaviour and complex, emotional state within a supportive and objective environment of the person.

AI integration refers to deploying advanced computer algorithm, automated chatbot and targeted digital tools to support or scale psychological interventions. Today this innovations are utilised to streamline administrative operation, analyse and clinical risk such as potential relapse of self harm, tendency and deliver immediate digital therapeutic support to a growing user base.(APA,2025)

Mental health is a global problem. It affects over one billion people worldwide. In India, almost 150 million people seek help regarding mental health issues but can't get it easily (APA,2025). There are not enough therapists, especially in rural areas like Assam and Northeast India. Artificial Intelligence (AI) can change this by offering affordable, round-the-clock mental health support through apps and chatbots. Recent 2026 reports analyzing the Central Rehabilitation Register (CRR) of the Rehabilitation Council of India (RCI), shows there is a significant discrepancy between registered and actively practicing clinical psychologists, highlighting an acute shortage of mental health professionals. Worldwide research data confirms that for every 100,000 people in India, there are approximately 0.07 psychologists and 0.29 psychiatrists, far below global average.

In this age of artificial intelligence, AI tools like Wysa and Woebot act like friendly helpers. They use simple chats based on Cognitive Behavioral Therapy (CBT) to ease anxiety and depression. In India, where stigma stops many from seeking help, these apps provide private, judgment-free support anytime. For example, during the COVID-19 pandemic, AI apps helped millions in India manage stress when clinics were closed (Mithra& Bhavana 2025). Studies show these tools work as well as talking to a therapist for mild issues, with quick results. (Firth et al., 2017).

Moreover, AI is furnished to detect symptoms like sadness in voice or text and predicts risks such as suicide with high accuracy (Thieme et al., 2020). In places like Guwahati, with therapist shortages, AI can support students and families right on their phones. But challenges to this gush of AI use are prevalent. Protecting user data is key under India's Digital Personal Data Protection Act, 2023. AI will also have biases if it holds no command on non-Indian data, ignoring cultural factors like family pressures, local dialect or regional languages. Above all, AI lacks true empathy that human therapists' provide. This paper is an attempt to reviews AI's benefits, real-world use, problems, and future steps.

If artificial intelligence can be combined with human care, they can make mental healthcare more equitable and accessible for all Indians.

OPERATIONAL DEFINITION

In today's world, almost every field of work has integrated the use of artificial intelligence. Artificial Intelligence which is also known as AI is a commonly used term that works in almost every sphere of a person's life. Artificial Intelligence is a field of computer science which is concerned with inventing and creating intelligent machines that have the ability to mimic human thought processes. These machines are trained by making them learn from experience, understand what people say, recognize patterns, solving problems and making decisions. While AI has captured every nook and cranny of the human skill set, healthcare or mental healthcare sectors are not an exception. Artificial Intelligence (AI) when used in therapy uses computer algorithms, chatbots, and digital tools to deliver, support the mental healthcare sector.

It uses computers or chatbots to talk to people about emotions and feelings and help them with their problems. At the same time when we talk about mental healthcare or psychological wellbeing we tend to focus on the fundamental need of human connection and emotional support, which are typically offered through professional, person to person conversation.

NEED FOR STUDY

The current global mental health world is on the edge of a severe crisis which is currently affecting nearly one billion individuals worldwide. Additionally in the Indian context the situation is immeasurable, with affecting factors like socio economic blockage, embarrassment of peoples' judgment, stigma surrounding therapy, and acute shortage of mental health professionals (around 2,900 to 3,400 actively practicing RCI (Rehabilitation Council of India) licensed clinical psychologists). Therefore, people hesitate to take help from professionals', and instead go to other ways to seek help such as AI assisted therapy. The sole reason for conducting this research is that it aims at figuring out why a person turns up for AI therapy, also understanding whether AI assisted therapy is different from human interference, or it is supposed to be a part of a much larger and collaborative hybrid model that combines efficiency and empathy.

LITERATURE REVIEW

Literature review refers to investigating the existing papers which are related to the particular topic. This review involves the summarizing, clarification, and data analysis of the facts that are present in those papers. Also strengths and weaknesses of the various existing papers are highlighted here. This helps in identifying research duplication and shows what has already been discovered and studied in the area under study.

There are numerous research articles and studies present in the field of AI assisted therapy and on mental health.

The most recent study on this topic was published in 2025 by David D Luxton, he did the research on the ethical consideration of AI in mental health treatment and care. The study consisted of various concerns such as confidentiality issues, security problems and the issue of informed consent. These unethical concerns have

pointed out the necessity to develop proper guidelines because of the possibility of unethically using patient's sensitive information.

In 2024, JMIR published a formative research paper (Public Perception on Artificial Intelligence–Driven Mental Health Interventions: Survey Research) where it investigates the attitude people have towards AI based interventions in mental health and its disorders in India. The study however concluded that people have a poor awareness level of the AI tools and technology, but showed a higher level of trust towards these tools and even more towards human intervention in these tools. Nevertheless, AI intervention demonstrated a lower level of stigma than traditional approaches.

Rahman et.al (2024) evaluated the risk of using AI in mental healthcare. The study mainly highlights that the use of AI in the mental healthcare sector might result in inappropriate reactions, and responses which can trigger more stress or mental health disorder to the person. H.A. Kautz (2022) explored the use of artificial intelligence in conversational settings and its implications in mental health communication. However, the study did not consider the inability of AI to provide the essential complex contextual framework needed for effective therapy.

The Indian Journal of Psychiatry in 2021 examined the application of AI in psychiatric settings, it stated that even though there is a potential for AI based interventions to work in the mental healthcare sector in India, these interventions need to be controlled and regulated by humans. Stefano Triberti and his colleagues in 2021 claimed that the use of AI in the context of therapeutic processes, make the patients more comfortable sharing their feelings and personal problems as AI is an unbiased system. However, the study also emphasized the danger of excessive reliance on AI and forming emotional connections with it.

The National Institute of Mental Health and Neuroscience (NIMHANS) in 2020 stated that there is a severe shortage of mental health professionals/specialists in India, which has led to the rapid proliferation of artificial intelligence based systems and tele mental health solutions. However, the report has also highlighted the ethical and regulatory challenges regarding patient care.

Timothy Bickmore (2018) in this work, focussed on the relational agents that could be integrated into healthcare practice or psychotherapy. The author concluded that AI is capable enough to mimic human conversation, but it fails in conveying empathy and cannot interpret the context of communication since it fails in recognizing non verbal signs and language. Albert Rizzo (2018) studied the combination of artificial intelligence and virtual reality in the field of therapy and treatment of certain psychological problems, specifically, The Post-Traumatic Syndrome Disorder, also known as PTSD , The findings demonstrated positive result of such treatment but also noted the issue of accessibility and excessive cost.

Gatch Jonathan (2014) conducted a study on the effectiveness of using AI agents in therapeutic settings and concluded that the subjects/people are more prone and are more comfortable to share their emotions and feelings with the virtual humans rather than with actual human beings. However, the study does not have any practical significance in clinical practice. Pattabiraman Ramachandra (2010) did research on the use of digital and artificial intelligence solutions for mental health treatment that are available in the country. Conversely, the research has some limitations, particularly about low digital literacy and insufficient infrastructure in rural areas.

RESEARCH GAP

There is a growing body of literature on artificial intelligence in the mental healthcare sector. The existing studies are largely focused either on the technological advancements and effectiveness of AI based interventions or on the ethical and psychological concerns linked to their use. While many studies have discussed the use of AI in general mental healthcare there is limited amount of research done that provides a balanced view of both the positive and negatives aspects of AI assisted therapy. Additionally not much literature exists that focuses specifically on the Indian context, particularly about the issues such as shortage of mental health professionals, stigma surrounding therapy, digital literacy, cultural relevance, and accessibility challenges that are present in rural and underserved regions. Therefore, the present study's aim is to address this gap by critically examining AI assisted therapy, both an opportunity and the challenge in the mental healthcare sector, thus providing the line "Two Faces of a Coin " and exploring the role of AI's as a supportive tool rather than replacing therapeutic tools.

RESEARCH QUESTION

1. What are the major benefits of AI assisted therapy in mental healthcare?
2. What are the limitations and risk associated with a assistive therapy?
3. How does a assisted therapy influence accessibility, affordability, and stigma related to the mental healthcare in India?
4. Can a assistive therapy function as a substitute of human therapist, or it should be viewed as a complementary tool?

METHODOLOGY

Methodology refers to the systematic and theoretical analysis of the methods employed in the research or activity. It provides the framework of principles, processes, and information that are being used in the research paper

Nature of the study:

Secondary data refers to information that is already available and was originally collected by someone else in the past. The data has already been collected through primary sources for different purpose or for general use with no specific research topic, such as in National census. Similarly, secondary research is a research method that involves using previously collected data for one's own research work. There are different forms of secondary research such as statistical analysis, literature reviews, case studies and content analysis. Information are usually collected from online sources such as the government reports, NGOs', newspapers, academic journals, educational institutions etc.

In this paper we have used secondary research method to find out information on both quantitative and qualitative data. We have used various online websites, research papers, journals, and data from educational institutions etc. The paper focused on extensive exploration of secondary data which formed the foundation for understanding the research topic and supporting the objectives of the study

Research design:

The present study adopts an exploratory secondary research that involves compiling existing data source from a variety of channels. The secondary research data was chosen as the key source of data collection as substantial amount of research paper and empirical studies on artificial intelligence in mental healthcare and AI assisted therapy is already available allowing for a broader understanding of the topic. Both qualitative and quantitative findings, where used for data collection from existing studies

Data Sources:

The data were collected from various reliable secondary sources such as Google Scholar, ResearchGate, PubMed, ScienceDirect, and official organizational reports such as NIMHANS(the National Institute of Mental Health and Neuroscience). Some sources also include journals, articles , research , papers , credible , online database and academic books. All these reliable sources were verified and was used to collect relevant information on AI assisted therapy to check its potential benefits and drawbacks for the mental healthcare field.

Search Strategy:

A systematic search strategy was used to find out relevant information for the paper. To search those relevant articles, journals, research paper works specific keywords have been used such as: AI-assisted therapy, psychological wellbeing, Artificial intelligence, artificial intelligence in mental health, developments in AI in the mental healthcare sector, advantages of AI therapy, drawbacks of AI therapy, and usages of AI therapy by people.

The articles, journals and research papers were selected based on their direct relevance to research objectives to ensure the inclusion of updated contemporary literature. All studies were published within the last 15 years.

Inclusion and Exclusion :

Establishing clear inclusion in exclusion parameters enables a streamlined and systematic workflow. The scope of this paper encompasses topics centred on AI application in mental healthcare advancement in AI therapy. It's effectiveness, drawbacks, AI, assistant in psychotherapy and overall psychological outcomes. Published sources such as journal and articles, academic papers directly related to these themes were included and where the literature did not focus on mental health artificial intelligence was excluded. Additionally, sources that lack credibility and presented opinion based arguments without supporting empirical evidence, were omitted.

Analysis Method

Secondary data was gathered using a thematic analysis approach. The process involved a detailed examination and interpretation of information extracted from scholar articles, reports and academic literature surrounded by artificial intelligence and individual mental health. The selected publications were systematically evaluated to identify recurring ideas, underlying patterns and core concepts related to the AI assisted therapy. Following the literature review related findings were synthesised and categorised into broader core themes , Keith identified included mental health accessibility, the effectiveness of AIS therapy, cost efficiency, stigma, reduction, ethical and privacy concerns, lack of empathy and social intelligence dependency on AI system and the digital divide in India. Special emphasis was placed on the Indian context, specifically addressing the shortage of mental health, professional cultural nuances and technological constraints that has been found in rural and underserved areas in the parts of India. These themes were subsequently compared and interpreted to evaluate similarities and difference across the literature. The thematic analysis offered a balanced perspective on both the opportunities and obstacles associated with AI driven intervention and mental healthcare directly with the core objectives of this study.

RESULTS AND FINDINGS

The findings are structured into two broad categories:

a. Positive findings:

The literature review highlights several distinct strength of AI assisted psychotherapy regarding mental health and individual care. A primary advantage identified in the enhance accessibility of therapeutic support. For instance, a publication by NIMHANS notes that due to the scarcity of mental health specialist, particularly in India, patients can leverage AI tools to access care without such as axis untreated issues could exaggerate individual stress and contribute to further psychological conditions .

Another key benefit is the reduction of social stigma associated with the mental health treatment as noted in 2024 study published in the Journal of Medical Internet Research Formative Research, individual feel less self-conscious. When engaging with AI driven therapy largely become automated system offered a non-judgment environment for self-expression.

Cost effectiveness is another benefit. AI assisted therapeutic solutions are typically more affordable and in some cases entirely free, which encourages broad adoption among individual seeking cost-effective care. Consequently, population in developing nations tend to gain significantly from this services given that traditional therapy often present a step financial barrier. Further more because automated system operate independently of human schedules, AI therapy can Offer continuous round the clock availability. Research by Stefano Triberti (2021) suggest that users often feel more at ease, discussing personal matters with AI platforms due to their nonjudgmental and objective nature, which foster greater transparency and willingness to self disclose.

b. Negative findings:

Despite disadvantageous existing literature several challenges and potential hazards associated with AI driven mental health interventions. A primary concern in the inherent lack of emotional intelligence in AI as highlighted by Timothy Bickmore (2018). While artificial intelligence can stimulate empathy language, it remains incapable of genuinely identifying, human emotions are reading, subtle, non-verbal cues, and body languages of the human beings.

Another notable limitation involves that the generation of inaccurate or misleading guidance by automated systems because this tool are not infallible. There is a considerable risk of delivering incorrect advice to the individuals seeking AI assisted therapy. Adam Miller (2023) highlights that providing inappropriate or harmful response as present as significant vulnerability particularly particular, particularly in complex or high risk clinical cases.

Data privacy present another critical challenge, David D. Luxton (2025) stresses that digital platforms, delivering mental healthcare, handle, highly sensitive personal information, demanding robust security protocols, and strict adherence to ethical guidelines of psychotherapy.

In additional overreliance on artificial intelligence represents a potential drawback within psychotherapy, Triberti (2021) notes that individual who interact frequently with AI programs may develop emotional dependency on this tools, making them increasingly reluctant or hesitant to seek help from human mental health professional. According to P. Ramachandra (2010) the restricted use of AI based interventions in backward rural towns and villages, stems from the stunted reach of digital literacy and lack of infrastructure development, which is in turn is due to the lack of internet supply or backwaters.

DISCUSSION

The finding of the study unveils a fair-minded stance on the use of AI assisted therapy in mental healthcare, highlighting both its benefits and drawbacks. AI has emerged as influential tools that improves accessibility, destigmatize and provides an economical instant support. Conversely, it raises major concerns surrounding emotional depth, ethical issues and dependency. The positive findings clearly show how AI assisted therapy can help bridge the gap in mental health treatment, especially in countries like India, where there is a shortage of trained professionals. AI has the ability to provide 24X7 support and maintain anonymity to let individual to seek help without fear or judgment, particularly important in societies where mental health is still highly stigmatized. Furthermore, the affordability factor adds to its benefits, with AI providing very low cost healthcare to individuals. However, when compared with negative findings, it is evident that AI cannot function as a complete replacement of a human therapist. One of the major limitations includes the lack of a very essential aspect of psychotherapy, i.e. emotional intelligence. AI is not able in replicating the natural human empathy. It cannot truly comprehend human emotions or interpret non-verbal cues such as tone, facial expressions or the body language of the person. Therefore, this limits its effectiveness in handling complex psychological issues. In addition, there is a possibility of incorrect and inappropriate responses that poses a serious risk, especially in critical situations where professional intervention is needed. Uncertainty of ethical security such as data privacy and confidentiality further complicate the use of AI in mental healthcare. Therefore, a balanced approach is extremely essential. AI should not be seen as a complete replacement of human therapists, but instead as a supportive tool that compliments traditional therapy. It can be effectively used for earlier intervention, monitoring, and providing basic emotional support, while trained professionals handle more complex mental health issues. The consolidation of AI in mental healthcare should be focused on alliance rather than switching altogether. This hybrid model, that combines AI competency with human empathy, is likely to provide the most effective and ethical solution for improving mental health outcomes.

CONCLUSION

The paper aimed to explore and examine the potential benefits and drawbacks of AI-assisted therapy in mental healthcare fields. The team used secondary data, collected from various authentic and relevant sources such as journals, research papers, academic websites, and institutional or organization reports. The findings indicate that influence of artificial intelligence had a significant change in mental healthcare fields especially in psychotherapy. With the emergence of AI, people have relatively grown high level of trust towards AI therapist. Its intervention has demonstrated a lower level of stigma than traditional approaches. The ability of AI systems to provide power, immediate response and connection and affordable therapy encouraged individuals to seek help without the fear of judgments. Also because of the shortage of trained mental health professionals in countries like India, AI has seen to be beneficial for many people. In the same time the paper also highlights the drawbacks or limitations of AI-assisted therapy which restricts the effectiveness of AI as a complete substitute for traditional psychotherapy. According to the data collected concerns inappropriate reactions and responses,

lack of empathy and skill to read human faces, danger of excessive reliance. Also, it stated ethical and regulatory challenges or concerns such as confidentiality issues, informed consent, use of sensitive patient information. People with less digital literacy and insufficient infrastructure in rural area will face these issues. Therefore, the finding suggests that AI-assisted therapy should not be considered as a complete replacement of human therapists rather considered as a supportive tool that can complement traditional mental health care practices. Collaborative approach of AI's competency and accessibility with stigma free approach and with professionally trained human therapists with empathy will create a balance outlook. Also it is more likely to provide effective solutions and guidance for improving mental health of people. AI assistant therapy represents both the benefits and drawbacks, mirroring the two faces of a coin. It requires careful implementations and rigorous testing to ensure ethical and responsible use in mental healthcare sectors.

REFERENCES:

1. American Psychological Association. (n.d.). American Psychological Association. <https://www.apa.org/practice/artificial-intelligence-mental-health-care>
2. Benda, N., Desai, P., Reza, Z., Zheng, A., Kumar, S., Harkins, S., Hermann, A., Zhang, Y., Joly, R., Kim, J., Pathak, J., & Reading Turchioe, M. (2024). Patient perspectives on AI for Mental Health Care: Cross-sectional survey study. *JMIR Mental Health*, 11. <https://doi.org/10.2196/58462>
3. Bickmore, T. W., Trinh, H., Olafsson, S., O'Leary, T. K., Asadi, R., Rickles, N. M., & Cruz, R. (2018). Patient and consumer safety risks when using conversational assistants for medical information: An observational study of Siri, Alexa, and Google assistant. *Journal of Medical Internet Research*, 20(9). <https://doi.org/10.2196/11510>
4. Callahan, C., Tanner, L., Coe, C., Davis, M., Glover, J., Bernstein, E., Scranton, K., Urruty, K., Chester, M., & Kunkle, S. (2026). Real-world use of a mental health AI Companion: Multiple Methods Study. *JMIR Formative Research*, 10. <https://doi.org/10.2196/86904>
5. Firth, J., & Torous, J. (2015). Smartphone apps for schizophrenia: A systematic review. *JMIR mHealth and uHealth*, 3(4). <https://doi.org/10.2196/mhealth.4930>
6. Garg, K., Kumar, C. N., & Chandra, P. S. (2019). Number of psychiatrists in India: Baby steps forward, but a long way to go. *Indian journal of psychiatry*, 61(1), 104–105. https://doi.org/10.4103/psychiatry.IndianJPsychiatry_7_18
7. Gnana Sanga Mithra, S., & Bhavana, S. (2025). Revolutionizing healthcare with an in-depth analysis of AI's transformative IMPACT IN INDIA. *Social Sciences & Humanities Open*, 11, 101467. <https://doi.org/10.1016/j.ssaho.2025.101467>
8. *India faces psychologist shortage in Mental Health Care: Study*. Best psychologist in India. (n.d.). <https://lyfsmile.com/news/india-faces-psychologist-shortage-in-mental-health-care-study>
9. *India's premier institute for Mental Health and Neurosciences*. Specialized Patient Care Services | NIMHANS Bangalore. (n.d.). <https://nimhans.ac.in/>
10. Jonathan Gratch, Gale M. Lucas, Aisha Aisha King, and Louis-Philippe Morency. (2014). It's only a computer: the impact of human-agent interaction in clinical interviews. In Proceedings of the 2014 international conference on Autonomous agents and multi-agent systems (AAMAS '14). International Foundation for Autonomous Agents and Multiagent Systems, Richland, SC, 85–92.
11. Kautz, H. A.(2022). "The third AI summer: AAAI Robert S. Englemore Memorial Lecture." *AI Magazine*43: 105–125. <https://doi.org/10.1002/aaai.12036>
12. Luxton, D. D. (2025). AI-Powered Virtual Therapy: Toward a Responsible and Client-Centered Future. *Journal of Health Service Psychology*. <https://doi.org/10.1007/s42843-025-00136-4>
13. Ni, Y., & Jia, F. (2025). A Scoping Review of AI-Driven Digital Interventions in Mental Health Care: Mapping Applications Across Screening, Support, Monitoring, Prevention, and Clinical Education. *Healthcare (Basel, Switzerland)*, 13(10), 1205. <https://doi.org/10.3390/healthcare13101205>
14. Olawade, D. B., Wada, O. Z., Odetayo, A., David-Olawade, A. C., Asaolu, F., & Eberhardt, J. (2024). Enhancing mental health with artificial intelligence: Current trends and future prospects. *Journal of Medicine, Surgery, and Public Health*, 3, 100099. <https://doi.org/10.1016/j.glmedi.2024.100099>
15. Rahman, M. A., Victoros, E., Davis, R., Duaa, T., Shanjana, Y., & Islam, M. R. (2025). Use of Artificial Intelligence in Mental Healthcare, Health Psychology, and Related Research: A Narrative Review to Address Challenges and Opportunities. *Health science reports*, 8(12), e71595. <https://doi.org/10.1002/hsr2.71595>
16. Rizzo, A. S., Koenig, S. T., & Talbot, T. B. (2018). Clinical Virtual Reality: Emerging Opportunities for Psychiatry. *Focus (American Psychiatric Publishing)*, 16(3), 266–278. <https://doi.org/10.1176/appi.focus.20180011>

17. Sebri, Valeria & Pizzoli, Silvia & Savioni, Lucrezia & Triberti, Stefano. (2021). Artificial Intelligence in mental health: professionals' attitudes towards AI as a psychotherapist. *Annual Review of CyberTherapy and Telemedicine*. 18.
18. Shaji KS, Jotheeswaran AT, Girish N, Bharath S, Dias A, Pattabiraman M, et al., editors. *Alzheimer's & Related Disorders Society of India*. New Delhi: ARDSI; 2010. *Dementia India Report 2010: Prevalence, Impact, Costs and Services for Dementia*.
19. Sussex Publishers. (n.d.). *Therapy*. Psychology Today. <https://www.psychologytoday.com/us/basics/therapy>
20. Thakkar, A., Gupta, A., & De Sousa, A., (2024) Artificial intelligence in positive mental health: a narrative review. *Front. Digit. Health* 6:1280235. doi: 10.3389/fdgth.2024.1280235
21. The Digital Personal Data Protection Act, 2023 (no. 22 of 2023). (n.d.-c). <https://www.meity.gov.in/static/uploads/2024/06/2b1f0e9f04e6fb4f8fef35e82c42aa5.pdf>
22. Varghese, M. A., Sharma, P., & Patwardhan, M. (2024). Public perception on artificial intelligence–driven mental health interventions: Survey research. *JMIR Formative Research*, 8. <https://doi.org/10.2196/64380>
23. *What is Ai Therapy?*. Built In. (n.d.). <https://builtin.com/articles/ai-therapy>
24. Wikimedia Foundation. (2026, March 29). *Artificial Intelligence in mental health*. Wikipedia. https://en.wikipedia.org/wiki/Artificial_intelligence_in_mental_health
25. Wikimedia Foundation. (2026a, March 23). *Therapy*. Wikipedia. <https://en.wikipedia.org/wiki/Therapy>
26. Zhang, M., Scandiffio, J., Younus, S., Jeyakumar, T., Karsan, I., Charow, R., Salhia, M., & Wiljer, D. (2023). The adoption of AI in mental health care–perspectives from mental health professionals: Qualitative descriptive study. *JMIR Formative Research*, <https://doi.org/10.2196/47847>