COLLABORATION WITH THE MACHINE

Exploring Therapists' Role in Ethical Mental Health AI Development

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FOR EVIDENCE BASED
T R E A T M E N T

BRIEF INTRO

- Clinical Psychologist; Dialectical Behavior Therapy Program Director

- Conducts trainings using an ethical and evidence-based lens to issues affecting our field

- Current consultant on AI mental health support app

- Casual AI user

ACCURACY, UTILITY, AND RISK

- No commercial support/conflicts of interest to report (app is not sponsoring this talk)

- Risks of attendance are minimal- be careful about applying skills or treatments without proper training or supervision

- Professional ethics will be primarily discussed through APA and NASW- be mindful of your own professional ethical codes and state laws

- Research and skills may not apply to all populations- limitations will be noted

A.I. DISCLOSURE

- While there was no intentional use of AI, some material gathering (i.e. information gained from search engines) may have been assisted by AI tools.

APA Continuing Education Committee Interim Code of Conduct on Generative AI, 2024

LEARNING OBJECTIVES

1) Adequately describe pros and cons for AI in mental health

2) Describe ethical dilemmas for therapists' involvement in AI mental health development

AGENDA

Reflections on Part I and II

Current AI Landscape

My Consultant Experience,
Framed By...

- Discussion of relevant ethical principles
- Models of ethical decision making

Clinical/ethical Dilemmas

THIS IS **PART THREE** OF A SERIES!

Part One

"'It's Happening Whether You Want it To or Not': Ethical Implications of Artificial Intelligence in Clinical Practice

Laura Rowley, Ph.D.

Part Two

"To AI or not to AI, that is the ethical dilemma." Ethical considerations in the most common uses for AI

Alex Ertl, Psy.D.

Part One Recap

- Overview of pressing issues in AI, including:
  - Privacy Concerns
  - Bias
  - Environmental Impact
  - Patterns of AI use presenting possibilities for harm
- Presented view that AI is here to stay

Part Two Recap

- Presented frameworks of ethical decision making as tool to evaluate AI engagement
- Modeled various levels of AI engagement using Tarvydas Integrative Decision-Making Model of Ethical Behavior
  - Four-stage model of Interpreting, Formulating, Weighing Personal Bias, and Execution

TRENDS AND RESEARCH IN AI LANDSCAPE

HISTORY OF AI IN PSYCHOTHERAPY

- Early AI problem solving models were developed in the 1950s-1960s, which laid the foundation for cognitive simulation
- 1960s-1970s - Joseph Weizenbaum created ELIZA, a Rogerian chatbot who could engage in text-based conversations
- AI has a range of uses today in health and mental health care today
  - Chatbot-based therapy - use specific therapy models (often CBT)
  - Feedback tools - using data from patients to analyze patient behavior and provide data to mental health practitioners
  - Patient information/behavioral analysis (e.g. AI detention of shifts in tone or facial expressions) can be compared with data to better detect risk factors for certain illnesses
  - Machine learning can be used to sift through patients' data to collect information on possible diagnoses

HATCH ET AL, 2024

- People prefer AI messaging - why?
  - Linguistic elements extracted from the messages revealed the AI-coached messages were longer, had a more positive sentiment, and used more nouns, adjectives, and verbs than the human-written messages, even after controlling for length.
- A panel of 830 participants were given vignettes and responses, to see if could identify which responses were written by ChatGPT and which were written by a therapist
- Participants asked to indicate whether the therapist's response 1) understands the speaker (alliance), 2) was caring and understanding (empathy), 3) was right for the therapy setting (expectations), 4) was relevant for different backgrounds and cultures (cultural competence), and 5) is something a good therapist would say (therapist effects)
- Participants performed poorly in accurate identification regardless of the author. Identification within authors was poor with participants correctly guessing that the therapist was the author 56.1% of the time and participants correctly guessing that ChatGPT was the author 51.2% of the time.
- Responses written by ChatGPT and misattributed to therapists received the most positive ratings (μ = 29.97, σ = 3.11), followed by correctly identified responses by therapist (μ = 28.80, σ = 3.12)

OLUWADE ET AL, 2025

- Authors cite the global mental health burden as reason to be engaged in AI research
- Conventional approaches fall short in meeting demands
- AI-driven tools have made significant strides in analyzing speech, text, and facial expressions to identify early signs of mental health disorders
- Predictive analytics can identify individuals at risk of developing mental health conditions
- Digital entities provide around-the-clock support to individuals with mental health concerns, irrespective of geographical or time constraints

OTHER RESEARCH

- Some research indicates that using Large Language Models (LLMs) in therapeutic responses from AI may accidentally encourage dangerous behavior (Wells, 2025)
- AI also has shown increased stigma for conditions such as substance use and schizophrenia (Wells, 2025)
- However, using LLMs to generate appropriate responses and allowing AI therapy tools to select from an approved list may be effective
  - A study of autistic adolescents and adults using an AI program for social skills demonstrated improvement in empathetic responses after training with the model, with early evidence of skills generalization in comparison to control (Koegel et al, 2025)

ATTITUDES OF AI IN HEALTHCARE

- American Medical Association - uses language of "augmented intelligence" to remind people that AI learning still involves clinicians
    - 66% of physicians surveyed reported using health care AI in 2024, a 78% jump from the previous year
- American Psychological Association - suggests using a parallel investment in understanding AI systems and that their training in various methodologies prepares them for consulting

CURRENT POLITICAL CLIMATE

- There have been 250 health AI-related bills across 34 states (Robeznieks, 2025)
- Utah was the first state to pass legislation related to the use of AI in mental health (Lipkin, 2025)
  - AI tools have to disclose that they are AI
  - AI tools are prohibited from selling/marketing to uses
  - AI mental health development must involve clinical expertise
  - Proper use of AI tools is controlled by Division of Consumer Protection
- Illinois recently passed a bill banning therapists from using AI chatbots for assistance with therapy, treatment decisions, and communication with clients (McCormack, 2025)

In our professional role as advocates, how involved should be be with the development of legislation? What are pros and cons of waiting for government regulation (or lack thereof)?

MY CONSULTANT EXPERIENCE

WHY RAGE WHEN YOU CAN COLLABORATE?

"A lot of people get resistant, but this is something we can't control. It's happening whether we want it to or not. If we're thoughtful and strategic about how we integrate AI, we can have a real impact on lives around the world."

- Jessica Jackson, Ph.D.

APA Monitor on Psychology, July 2023

From therapyis4everyone.com

WHY RAGE WHEN YOU CAN COLLABORATE?

"As psychologists, we have the responsibility – the opportunity, even – to guide and shape the future of mental health... We do not have to observe this process of development from the sidelines."

- Jessica Jackson, Ph.D.

APA Monitor on Psychology, January 2025

From therapyis4everyone.com

CITIZEN PSYCHOLOGY

GUIDING ETHICAL PRINCIPLES AND VALUES

APA Principle D: Justice

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

(American Psychological Association, 2002)

GUIDING ETHICAL PRINCIPLES AND VALUES

APA Principle A: Beneficence and Non-Maleficence

Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.

(American Psychological Association, 2002)

GUIDING ETHICAL PRINCIPLES AND VALUES

Competence

2.01 Boundaries of Competence - (e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.

2.03 Maintaining Competence - Psychologists undertake ongoing efforts to develop and maintain their competence.

2.04 Bases for Scientific and Professional Judgments - Psychologists' work is based upon established scientific and professional knowledge of the discipline.

(American Psychological Association, 2002)

GUIDING ETHICAL PRINCIPLES AND VALUES

Contextualism in Ethics

- Association of Black Psychologists - principle of Ma'at; ethical practice not just about avoiding consequences, but about creating a higher level of moral consciousness in one's self and in society (ABPSI, 2019)
- Society of Indian Psychologists - ethics are influenced by prevailing sociocultural contexts; difficulties arise when ethics are assumed to be so universal that no provisions are made for cultural difference (SIP, 2014)
- National Latinx Psychological Association - interpretations can facilitate or hinder the ability to see ethical dilemmas; responsibility to be both a keen observer and an open-minded listener (NLPA, 2018)

What values ground you in your professional role? What informs your approach?

Wordcloud Poll · 12 responses · 9 participants

Willingness to learn

Harmony

diversity

Inner reflection

Humanization   form   rest   racism   Intersectionality

Justice   **Resilience**   anti

clients   resistance   egalitarianism   Curiosity

collaboration   Empathy

Feminism

Open mindedness

BACKGROUND

- Attended APA Convention 2023, exposed to AI as mental health frontier

- Participated in educational convention as DBT-influenced mental health professional; was connected to AI developer

- Developer described work and potential for augmenting DBT coaching and intervening in suicide for youth

INITIAL EVALUATION (6-7 MONTHS)

- What are the issues?
- Who will be affected?
- What are the ethics involved?
- Who can I ask about this before deciding?

(Cottone & Taryvas, 2016;
Beauchamp & Childress, 2011)

WHAT ARE THE ISSUES?

- Professional responsibility to engage
- Orientation to equity
- Potential support for DBT clients
- Managing burnout
- Increasing innovation
- Passive revenue streams

WHAT IS MY ROLE?

- Teaching the model how therapists think
- Monitoring clinical impact
- Staying updated on risks in treatment
- Providing diverse perspectives
- Encouraging practice within the bounds of competence

BROADER ETHICAL STANDARDS RELATED TO TECHNOLOGY

AMERICAN PSYCHOLOGICAL ASSOCIATION

- All ethical principles are important to the use of technology

- Technology has potential for both benefit and harm

- Make every effort to ensure human and civil rights are protected

- Endeavor to ensure

  - equitable access to resources available via technology

  - Tech resources are culturally sensitive and respect welfare

  - Tech is delivered with accuracy, honesty, fairness

American Psychological Association. (2025). Draft Review of Proposed APA Ethical Code.

NATIONAL ASSOCIATION OF SOCIAL WORKERS

- Social workers should keep apprised of emerging technological developments that may be used in social work practice and how various ethical standards apply to them

- When using technology social workers need to
  - Have competence
  - Understand communication challenges when using tech
  - Be aware of access issues in electronic services
  - Protect confidentiality of electronic communications
  - Provide informed consent

National Association of Social Workers
Code of Ethics. 2021 Highlights

TECH MUST FIT WITHIN OUR ETHICAL DUTIES

Psychologists do not permit their use of technology to override their professional judgment or compromise their compliance with other Standards in this Code, especially in matters including, but not limited to, informed consent and confidentiality. (6.01 c)

AWARENESS

Due to rapidly changing technologies, psychologists engage in necessary ongoing training about the technologies they use, such as online applications, data/cloud storage, software tools (e.g., recordkeeping), and biometric devices (e.g., applications, digital therapeutics). (6.01)

ACCURACY

Psychologists make sufficient efforts to ensure that electronic technologies they use are functioning properly and analyzing data accurately. (6.01 f)

When artificial intelligence is used in any professional work (e.g., interdisciplinary settings), psychologists are responsible for the content, such as findings, recommendations, and evaluative statements. (6.02 f)

Psychologists who generate or utilize materials created by artificial intelligence are responsible for their scientific accuracy (6.02 g)

Social workers should take reasonable steps to ensure that documentation in electronic and paper records is accurate and reflects the services provided. (3.04)

THINKING
THROUGH
ETHICAL
DILEMMAS

BOUNDS OF COMPETENCE MEETS AI DEVELOPMENT?

Issues raised include:

- Caution about information fed to AI due to it being biased by feedback you give to the system
- Using AI as a starting point for clinically appropriate conversation
- Development of AI moving faster than clinicians have time to meet it
- Questions of whether clinical competence can be gained through use of AI

What is a therapist's duty to be aware of issues that may arise in the therapy context, regardless of individual practitioner comfort? When should more training be sought? When would our own biases get in the way of increasing in knowledge of the are?

WHAT AI USE SHOULD BE ATTENDED TO IN THE THERAPY ROOM?

Ideas generated:

- Using AI for therapy prompts related to agreed-upon goals
- Reviewing clients' AI use in the therapy room as clinical content
- Only recommending what has been used or vetted personally

What are the ways that AI use can serve as a jumping point for critical and curious conversation?

What are pros and cons of ignoring AI use?

SUMMARY

HOW TO WEIGH AI IN CLINICAL MATTERS

- Consider ethical frameworks/defining professional identity characteristics
- Weigh pros and cons based on research/use ethical decision making models
- Consider:
  - What is the best way to practice within the bounds of your competence?
  - What is the best way to grow the bounds of your competence?
  - How can I balance my own perspectives with what is presenting in the room?
- Communicate and advocate for the betterment of the profession

THANK YOU

Don't forget to submit course evals!

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