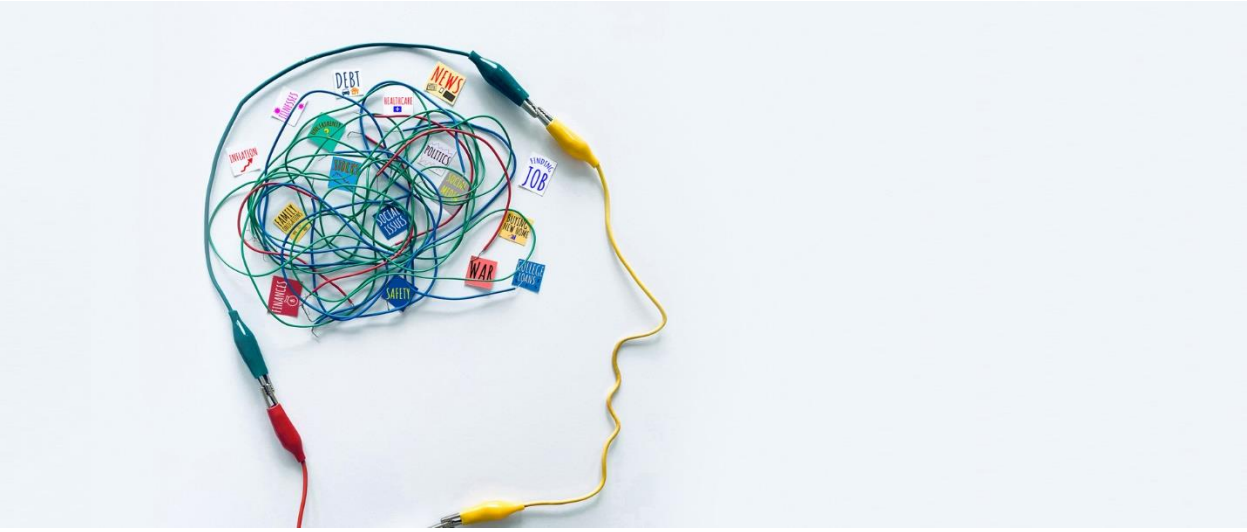
A Meeting of the Minds:
AI and Employee Mental Health



Written by Kathleen Greer, Michael Napoleone and Stephen Romano

Over the last few years, the shortage of mental health professionals has been elevated to the level of a national crisis. As of March 2023, 160 million Americans live in areas where the supply of mental health practitioners is less than half of what is needed to be considered an adequate amount.[1] This has led to overburdened therapists, patient delays and frustration, and a loss of confidence in a failing mental health system. Everyone deserves mental health care when they need it, not three months later, as is often the current case.

Employee Assistance Programs (EAPs), the first stop for many workforce members grappling with emotional and work-life challenges, are actively seeking new resources to address this critical shortage. More recently, their quest has led to Artificial Intelligence. AI has proven beneficial in multiple sectors, transforming search engines, content creation, customer service, and many other processes. Surely, it has a role in employee assistance.

Yet a key question remains – When deployed in mental health, is AI invaluable or incapable?

The question was explored at the May 2023 Boulder, CO conference of the National Behavioral Consortium (NBC), a trade association of thought leaders from top-tier EAPs, behavioral health firms, and partner companies. Together, these organizations provide mental health services to more than thirty million individuals. After discussing the strengths, questions, and concerns surrounding AI, did NBC members choose “invaluable” or “incapable”? The answer, it seems, is both.

The Promise and Pitfalls of AI

On the positive side, AI is already enabling EAPs to streamline day-to-day operations. Embedded in many administrative systems, AI is making it easier to find and recruit counselors, schedule appointments, research work-life issues, manage billing, and greet new website visitors. Some NBC members are also using AI tools like ChatGPT to help with writing, editing, and creating proposals. In short, AI is allowing EAPs to preserve resources and work smarter, not harder.

Outside of operational efficiencies, top-tier EAPs are using AI-driven telehealth platforms such as BetterHelp and TalkSpace to supplement their mental health offerings. These easily accessible consumer-friendly apps have provided emotional and behavioral support to millions who might otherwise have gone untreated. By significantly expanding access to help, telehealth solutions deliver immeasurable value. In addition, they incorporate AI throughout the customer journey to evaluate progress, analyze results, and re-book appointments. Yet these apps are not without their drawbacks.

While some apps use AI algorithms to match individuals with therapists before beginning care, the system is not foolproof. For one, AI is not yet a master of nuance, which is critical when screening employees for a match. What's more, algorithm matches are based, in part, on how well someone with a mental health challenge – or worse, a crisis – can define what they are facing or feeling. Experienced therapists skillfully navigate the sensitivities of both tasks.

"AI engines cannot duplicate the human soul," says Susan Skinner, NBC member and CEO of Personal Assistance Services (PAS) in St. Louis. "Nor can they accurately read emotions, express empathy, or rule out mitigating circumstances, like co-existing medical conditions. People who are distressed need a higher level of handholding. A trained, live person must be involved in assessment."

This is particularly key when studies show that 20% to 57% of individuals stop therapy after their initial treatment.[2] Just a single up-front mismatch can send a vulnerable employee quickly running from help. Should the employee request a replacement therapist, algorithms can implement a search, but experienced EA professionals are better able to understand the many reasons why a "great" match may have unraveled – and find a greater one.

To avoid these problems, top-tier EAPs conduct an initial assessment and subsequently follow up via email, text, or phone. This personal touch sends the message that someone cares and is standing by and prepared to help. In fact, good follow-up is a core value of top-tier EAPs, as it enables them to confirm whether a match was successful and helps ensure employee satisfaction.

While AI telehealth platforms have a similar function for "checking in," can an algorithm get it right without human involvement? Not likely – at least not today.

“How Can (A)I Help?” - Enter the Chatbot

Although AI may falter in the matchmaking department, the technology is demonstrating exceptional merit in chatbot form. New AI-based personal chatbot solutions such as Woebot, Wysa , and Pyx Health are supporting those with mental health struggles in many ways, including building coping skills, providing resources, and serving as a “friend” to talk to. Available 24/7, these popular chatbots are being employed effectively around the world.

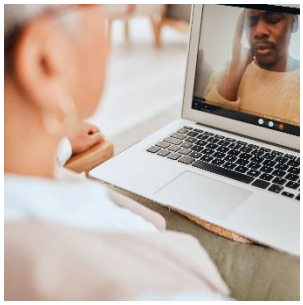
One aspect of AI’s growing appeal was shared by a therapist who compared it to “a loving and forgiving dog that doesn’t judge you, even when you are in the wrong.” Another added, “at least a chatbot won’t tell my client that they’re crazy, useless, or fat like a human might.”

Some chatbots are involved in peer-reviewed research[3] and are admittedly works-in-progress regarding crisis intervention and management. In fact, they warn users of their limitations in these areas and promote other channels of help. Chatbot developers are also testing the effectiveness of AI in conditions like post-partum depression, and training AI to adjust for cultural differences in language and personality. Clearly, these new tools are showing us how they adapt and learn while exhibiting great promise as they move forward.

Wysa offers one such example. A leading chatbot company, Wysa uses the PHQ9 and GAD7 assessment tools to help people meet challenges that include anxiety, motivation, work stress, sleep, and depression. In addition, the chatbot’s SOS feature employs three triggers to identify employees in crisis – detection during conversation, clinical screenings, and daily mood scores – with an alert that can be sounded to summon a clinical expert.

What are the chatbot pros and cons? In the plus column, chatbots are immediately available around the clock and can offer short-term emotional support when waiting for a therapist match. They are also low- or no-cost and may be used indefinitely. Most important of all, as a stopgap measure or adjunct to therapy, a chatbot can be a life saver.

Nevertheless, in serious mental health cases, chatbots alone aren’t enough. They require some human oversight. It is not uncommon for people to be reserved when discussing serious mental health struggles, often minimizing their situation. Chatbots are less apt than a trained EAP counselor to detect these subtleties (and the associated dangers).



As stand-alone solutions, neither chatbots nor therapists work for everyone. Therefore, a combination of the two is recommended.

“Research shows that a therapeutic alliance or provider relationship is essential to healing,” says Dr. John Quick, Executive Director of NBC. “Top-tier EAPs understand that and bring real people together with those needing help, while also integrating new technologies and digital tools like AI.”

Teaching AI to Learn

While today's AI chatbots are not sufficiently trained to identify highly complicated or serious issues, they still play a significant role, particularly in light of the ongoing provider shortage. However, until "Artificial" gains more "Intelligence," incorporating the human touch into AI usage is a must.

To expand its knowledge base, AI must continually draw on enormous amounts of data and take time to learn. This is particularly relevant when AI is identifying and addressing subtle, intricate mental health problems.

Currently, there are numerous attempts to train AI to do a better job at identifying the language of suicide, violence, hate, discrimination, and prejudice. One NBC member, ProtoCall Services of Portland, Oregon, is working with Lyssn AI to analyze recordings of behavioral health encounters to explore the potential for using AI in future crisis calls.

Furthermore, there is research confirming that social determinants of health (economic status, employment, housing, etc.) play a pivotal role in mental health and suicide risk. This significantly expands the type of data AI must be trained to access and update as a "counselor."

Ethically speaking, these data sets should be gathered from public sources, not from unaware or non-consenting users. In *any* therapy, creating a safe space for patients is crucial. Users of mental health services must feel as though their information is protected and secure, and that its sharing is under their control. This is one reason people may still be reluctant to have AI replace human intervention.

This reticence is apt to weaken, however, as security measures tighten and people become more comfortable with AI as part of daily life. Consequently, the use of AI "therapists" that are sensitive, secure, and well trained may be met with less resistance in the future.

Smarter Together

In uniting the benefits of AI with the knowledge and experience of mental health professionals, the EAP industry is making great strides toward freeing up therapists, minimizing patient frustration, addressing non-critical mental health issues, and decreasing the impact of the provider shortage. Yet, as AI becomes increasingly commonplace and grows ever smarter, many questions remain about what lies ahead. It is important for employers, employees, therapists, and EAPs to stay vigilant about the potential perils of AI while optimizing the promise inherent in its ability to help.

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References

1. https://www.commonwealthfund.org/publications/explainer/2023/may/understanding-us-behavioral-health-workforce-shortage
2. https://www.familyaddictionspecialist.com/blog/ghosting-your-therapist-why-do-individuals-prematurely-dropout-of-therapy
3. https://www.npr.org/sections/health-shots/2023/01/19/1147081115/therapy-by-chatbot-the-promise-and-challenges-in-using-ai-for-mental-health

General research articles:

1. https://www.npr.org/sections/health-shots/2023/06/08/1180838096/an-eating-disorders-chatbot-offered-dieting-advice-raising-fears-about-ai-in-hea
2. https://www.fingerprintforsuccess.com/blog/mental-health-chatbot#toc-section-2
3. https://www.mercer.com/insights/people-strategy/future-of-work/chief-people-officers-quick-guide-to-generative-artificial-intelligence/
4. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7274446/
5. https://www.politico.com/news/2023/03/02/ftc-data-misuse-betterhelp-00085182
6. https://www.psychologytoday.com/us/blog/psyche-meets-soul/202303/how-artificial-intelligence-could-change-psychotherapy#:~:text=AI%20technologies%20are%20being%20examined,models%20and%20consistency%20in%20therapy.

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