

Research Paper

## Augmenting Therapy: The Role of Artificial Intelligence as an Assistant to Freelance Mental Health Professionals

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### ABSTRACT

While much attention has been given to AI-based tools directly interacting with clients through chatbots and virtual counselors, this paper shifts the focus to a less-discussed yet highly impactful application: the use of AI as a backend assistant to freelance therapists. By analyzing current gaps in the Indian mental health freelancing ecosystem, qualitative interviews with 12 freelance therapists from Bangalore, Delhi, and Mumbai, and reviewing findings from credible journals such as the *Indian Journal of Psychiatry* (2023), *Indian Journal of Psychological Medicine* (2022), and *Journal of Psychosocial Research* (2021), this paper identifies critical functions AI can perform to support therapists—without replacing the human connection essential to therapeutic work.

**Keywords:** *Artificial Intelligence, Mental Health, Therapist Assistant, Freelancing, India, AI Ethics, Backend Automation*

Artificial Intelligence (AI) is becoming increasingly prominent in healthcare, including mental health, where its applications range from diagnostic tools to chatbots offering therapy-like conversations (Torous et al., 2021). However, the focus has largely been on client-facing technologies, while relatively less attention has been paid to how AI can support therapists, particularly freelance practitioners, in non-clinical domains. This paper explores how AI can be used as a backend assistant to therapists rather than a replacement for therapeutic relationships.

Freelance therapists often face structural gaps: high administrative burden, lack of tech infrastructure, limited support staff, and emotional burnout due to solitary practice (Gupta & Dutt, 2020; Sharma & Arora, 2022). The intent of this research is to explore how AI can serve as a co-pilot that automates and streamlines operations like documentation, scheduling, progress tracking, and preliminary assessments—thus allowing therapists to focus more deeply on client care. Importantly, this paper does not advocate for AI to replace therapists but rather highlights the need for ethically sound and human-centered AI applications.

Artificial Intelligence (AI) has been increasingly explored in the mental health field for its potential to bridge gaps in access, improve diagnostic precision, and enhance service

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delivery (Torous et al., 2021). Chatbots, sentiment analysis, and AI-driven diagnostics are among the most studied applications, with many tools designed for direct interaction with clients (Fitzpatrick et al., 2017). However, there remains a limited body of work exploring AI's role behind the scenes—particularly in supporting therapists in non-clinical functions.

A study by Vaidyam et al. (2019) highlighted the increasing demand for digital mental health tools but also pointed out a significant lack of backend support systems tailored for therapists. Similarly, Sharma and Arora (2022), in their review of Indian digital health interventions, noted that most AI efforts are patient-facing and often overlook the infrastructural and administrative needs of practitioners. The Indian Journal of Psychiatry (2023) emphasized the high burnout rate among independent mental health professionals, partially due to overwhelming documentation, scheduling, and case management responsibilities.

In the Indian context, Gupta and Dutt (2020) noted that freelancers often work in isolation without the benefit of an organizational framework that offers data analytics, client progress tracking, or automated follow-ups. Furthermore, tools like AI-based progress monitoring, secure cloud-based documentation, and client-matching algorithms remain underdeveloped and underutilized in freelance practices.

Recent literature has also raised ethical and legal concerns about AI in therapy. The World Health Organization (WHO, 2021) recommends that AI be deployed with caution, particularly in roles involving direct emotional processing, to avoid harm, misinterpretation, or algorithmic bias.

This literature review identifies the unique position AI holds—not as a substitute for the human therapist—but as a valuable assistant for managing backend operations. While AI's potential in client-facing roles remains controversial and ethically complex, its application in supporting therapists offers a promising, underexplored domain that aligns with professional ethics and practical utility.

### **METHODOLOGY**

This study adopts a qualitative research design using semi-structured interviews with twelve freelance therapists from three metropolitan cities in India: Bangalore, Delhi, and Mumbai. These participants were selected through purposive sampling to ensure diversity of experience and context. Each participant had between 2 to 10 years of private practice experience. The interview protocol was designed to explore their workflows, administrative burdens, expectations from technology, and perceived limitations of existing digital tools.

Interviews were conducted virtually and lasted between 45 to 75 minutes. All interviews were audio-recorded with consent and transcribed verbatim. Thematic analysis was employed using Braun and Clarke's (2006) methodology. NVivo software was utilized to code the transcripts, identify recurring patterns, and extract themes relevant to backend support gaps and the potential roles of AI.

To enhance validity, triangulation was ensured by cross-verifying findings across cities and correlating themes with existing literature. Member checking was also employed, where a summary of findings was sent back to participants for feedback and accuracy. Ethical clearance was obtained, and confidentiality was maintained throughout the research process.

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This methodological framework allowed for in-depth insight into the lived experiences of freelance therapists and informed the design of AI use-cases proposed in this study.

### RESULTS AND DISCUSSION

#### *Gaps Recognised*

Despite the growing number of freelance therapists in India, there are critical infrastructure and support gaps that limit the effectiveness and sustainability of their practice. These gaps were identified through both literature review and qualitative interviews conducted with 12 freelance therapists from Bangalore, Delhi, and Mumbai:

Gap	Description
<b>Administrative Overload</b>	Therapists are burdened with time-consuming manual tasks such as scheduling, billing, documentation, and follow-up (Ghosh et al., 2021; Rajgopal et al., 2020). These administrative loads eat into valuable clinical hours.
<b>Limited Follow-ups</b>	Without automated systems to track client progress or send reminders, many clients drop out due to missed appointments or lack of motivation (Fulmer et al., 2018). Freelancers rarely have staff support for follow-through.
<b>Inconsistent Progress Tracking</b>	Session insights and behavioral patterns are often stored informally in therapists' memory or handwritten notes, making longitudinal tracking difficult (Luxton, 2016). This reduces continuity and reduces the ability to adapt interventions over time.
<b>Lack of Scalable Infrastructure</b>	Freelancers typically cannot afford enterprise solutions or platforms that offer integrated record keeping, analytics, and engagement tools (Indian Journal of Psychiatry, 2023). Most digital tools are designed for clinics or large hospitals.
<b>Burnout</b>	Balancing the dual role of therapist and business owner leads to emotional and cognitive exhaustion (Indian Journal of Psychological Medicine, 2022). This is exacerbated by the irregularity of client flow, payment cycles, and lack of peer collaboration.
<b>Data Management Risks</b>	With no standardized systems, many therapists manage client data manually, leading to compliance and privacy concerns, especially in the absence of Indian equivalents of HIPAA (Journal of Psychosocial Research, 2021).

#### *Key Functions AI Can Perform for Therapists (Not Clients)*

Based on findings from interviews and literature review, AI integration can serve freelance therapists in the following ways:

- 1. Automated Scheduling and Reminders:** AI systems can sync calendars, send automated reminders, and reschedule with client input (Luxton, 2016).
- 2. Note Structuring and Voice-to-Text Summaries:** Transcription tools can help convert voice notes to structured session summaries (Fulmer et al., 2018).

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- 3. Progress Monitoring Dashboards:** AI can analyze qualitative session data to suggest themes and behavioral shifts over time (Ghosh et al., 2021).
- 4. Invoicing and Billing Automation:** Tools can track session counts, generate invoices, and send payment reminders (Rajgopal et al., 2020).
- 5. Data Storage with Consent Frameworks:** AI can sort, store, and anonymize sensitive session data securely (Journal of Psychosocial Research, 2021).
- 6. Mood Journaling and Engagement Tools:** Through therapist-initiated prompts, clients can interact with self-monitoring tools in between sessions (ArXiv, 2023).

### *AI is Not a Replacement for Therapy*

This paper strongly advocates that AI tools should be used to support, not replace therapy. Empirical evidence suggests that therapeutic alliance, empathy, and nuanced communication remain irreplaceable (Bedi et al., 2023; Fulmer et al., 2018). AI lacks the ability to respond to human emotion with adaptive warmth or comprehend cultural, relational, and psychological context in real time (Ghosh et al., 2021). Replacing therapists with AI can create ethical, diagnostic, and relational complications (Journal of Psychosocial Research, 2021). Therefore, any AI integration must be adjunctive, and therapist supervised.

## CONCLUSION

The integration of AI as a backend assistant—handling administrative, organizational, and data-related tasks—presents a promising pathway for freelance therapists. By reducing non-clinical workload, AI allows therapists to focus on what they do best: healing, empathizing, and guiding. With thoughtful, ethically sound implementation, AI can become a quiet but powerful partner in India's growing mental health landscape.

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### ***Conflict of Interest***

The author carefully declares this paper to bear no conflict of interests.

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