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MENTAL HEALTH AND STIGMATIZATION: AI-DRIVEN SOCIAL WORK TECHNIQUES.

Mojuba Bimbo Afolabi
Premier College of Health Technology,
Ibadan, Nigeria.
Email Address: afolabimojubaoluwa@gmail.com

And

Abimbola Afolabi
Department of Social Work
University of Ibadan, Nigeria
Email Address: drafolabiabimbola@gmail.com

ABSTRACT
Mental health stigmatization represents a formidable barrier to effective care, community integration, and overall societal well-being. Despite growing awareness and policy advancements, many individuals continue to delay or avoid seeking help due to the fear of judgment and societal exclusion. This position paper asserts that integrating artificial intelligence (AI) into social work can play a pivotal role in confronting and reducing mental health stigma. AI technologies offer scalable, discreet, and accessible interventions that align closely with the principles of person-centered care championed in social work. Recent developments in AI including natural language processing (NLP), sentiment analysis, and machine learning have facilitated tools such as chatbots, predictive analytics systems, and early detection algorithms. In particular, AI-driven social work techniques can enhance outreach, improve treatment personalization, and support resource allocation through intelligent decision-making systems. Social workers, by integrating these tools, can enhance their capacity to engage clients in a dignified and empowering manner. This paper synthesizes current research to explore the intersection of mental health stigma, social work practice, and AI applications. It addresses the operational frameworks required for ethical AI deployment, the sociocultural dimensions influencing technology acceptance, and the policy shifts needed to institutionalize AI within social work education and service delivery. Through in-depth analysis, real-world case studies, and actionable recommendations, the paper advocates for AI-driven social work not merely as a technological upgrade, but as a transformative pathway to a more equitable and stigma-free mental health ecosystem. This paper therefore recommends that stakeholders from policymakers and educators to technologists and frontline practitioners to collaborate in designing AI interventions that reflect ethical values, cultural competence, and social justice. The argument herein is not for the replacement of human interaction but for a harmonious augmentation that leverages technology to break silos, expand reach, and normalize mental health support across diverse populations.

INTRODUCTION
Mental health disorders affect approximately one in four individuals worldwide, making them a significant public health concern (World Health Organization, 2022). Yet, stigma manifested through public misconceptions, self-discrimination, and institutional bias remains a pervasive obstacle that hinders individuals from seeking timely and adequate care. The World Health Organization and numerous global health agencies have emphasized the importance of addressing this stigma to improve mental health outcomes. In this context, social workers play an essential role as frontline responders, advocates, and community educators. Their holistic approach to client well-being, grounded in empathy, empowerment, and ethical practice, positions them as crucial actors in challenging societal prejudices (Nuwasiima et al., 2024). With the increasing integration of technology into health services, artificial intelligence (AI) presents new opportunities for social work to address stigma in more dynamic and data-informed ways. AI applications, from mental health chatbots to predictive analytics tools, can offer discrete and scalable support systems, particularly for marginalized populations who may fear social scrutiny. These technologies not only facilitate early intervention and personalized care pathways but also generate insights that help shape public health messaging and service delivery models. Importantly, they serve as vehicles for reinforcing the non-judgmental, inclusive ethos of the social work profession (Loies, 2025; Global Health Institute, 2025; Song et al., 2025).

However, the use of AI in such sensitive contexts also introduces complexities. Issues surrounding algorithmic bias, digital equity, informed consent, and cultural sensitivity must be carefully navigated to ensure ethical integration. For this reason, social workers must be involved in the design, deployment, and evaluation of AI-driven tools. Their involvement ensures that such technologies align with the profession's values and truly address the root causes of stigma rather than inadvertently reinforcing them (Simion, 2024; Rubio-Valera & Aznar-Lou, 2018). This paper argues that the thoughtful integration of AI within social work practice can amplify efforts to reduce mental health stigma. It sets the stage for an interdisciplinary dialogue among technologists, mental health professionals, and social workers aimed at creating interventions that are both innovative and inclusive. Through this lens, the paper seeks to explore not only how AI can support stigma reduction but also how social work can shape the evolution of AI in mental health care.

Literature Review

The stigma surrounding mental illness is multifaceted: it includes public stigma (societal negative attitudes), self-stigma (internalized feelings of shame), and structural stigma (institutional policies that restrict opportunities for people with mental illness). Together, these dimensions reinforce systemic discrimination, social exclusion, and under-utilization of mental health services (Corrigan & Watson, 2002). Despite various advocacy and awareness campaigns, stigma continues to undermine progress in mental health care globally. Research indicates that stigma not only affects access to care but also worsens treatment outcomes by inducing feelings of hopelessness, decreasing self-esteem, and fostering social isolation (Henderson et al., 2013). The effect is particularly pronounced in low- and middle-income countries where mental health infrastructure is underdeveloped, and societal norms often conflate mental illness with personal weakness or moral failure. In such settings, technological interventions may be viewed with suspicion or rejected outright due to a combination of cultural resistance and digital illiteracy (Hoffman et al., 2024).

A study by Afolabi (2020) examined the mental health implications of lockdown during coronavirus pandemic among adult residents in Ibadan, Nigeria. Descriptive survey research method was adopted for the study. Findings revealed that there is a high level of effect of lockdown during coronavirus (COVID-19) pandemic on the anxiety level among adults resident in Ibadan. On the whole, sleeplessness is perceived as the dominant of two variables and is significantly positively correlated with depression and anxiety with the least coefficient (r= 0.434**) is also significant and positively correlated with depression among adult residents in Ibadan. The study focused on understanding how bullying influences adolescent mental health using a descriptive survey design with a correlation approach to examine the impact of bullying on the psychological and mental well-being of adolescents. A sample of 280 students from four secondary schools in Ibadan Metropolis (two public, two private) was selected using simple random sampling. Afolabi and Animasaun (2024) found that all six short-term psychological variables anxiety and fear (r=. 114), anger and rage (r=. 377), humiliation and shame (r=. 308), sadness and loneliness (r=. 499), self-harm/harm to others (r=. 159), and school avoidance/absenteeism (r=. 184) showed significant correlations with bullying. Long-term effects such as erosion of self-esteem and confidence (r=. 368), post-traumatic stress disorder (r=. 716), anxiety and depression (r=. 278), self-destruction (r=. 420), schizophrenia (r=. 270), substance abuse (r=. 255), and agoraphobia (r=. 299) also had significant relationships with bullying among victims in these schools. The findings indicate a significant correlation between bullying and the mental well-being of adolescents, with $r(298) = .372$, $p < 0.05$. Additionally, psychological effects ($r = .290$, $p < 0.05$) were significantly related to mental well-being. The study concludes that bullying has both short-term and long-term adverse effects on the psychological and mental well-being of adolescents in selected secondary schools in Ibadan.

Moreover, specific populations face heightened stigma. For example, LGBTQ+ individuals, refugees, and ethnic minorities frequently report compounded stigma that intersects with other forms of discrimination. These communities are less likely to seek mental health care due to fear of judgment and prior negative experiences. Varghese and Sharma (2024) found that young adults in India were hesitant to engage with AI-driven mental health interventions despite recognizing their usefulness primarily due to fear of social judgment. Addressing stigma, therefore, requires a multi-level strategy encompassing public education, policy reform, and individual empowerment. AI presents an opportunity to support these efforts by offering anonymity and personalized engagement, which may reduce the psychological barriers associated with traditional mental health services. However, to be effective, these tools must be culturally tailored, ethically sound, and integrated within a broader framework of social support and community engagement (Boucher et al., 2021). Ogundipe, Omokhabi and Adekoya (2025) in their study on influence of social media on athletes' mental health, they submitted that social media companies and sport s leagues must assume accountability by offering resources, education and mental health support to players, coaches and employees. Another study by Afolabi (2021) looked at medicine adherence and psychosocial well-being in patients with mental illnesses at Adeoyo State Hospital, Ring Road, Ibadan. A descriptive survey design was used in the investigation. One hundred and twenty (120) people with mental illnesses who visit Adeoyo State Hospital, Ring Road, Ibadan, were purposefully chosen. For data gathering, a customised questionnaire was employed. The study found a strong link between medication compliance and psychological well-being in mentally ill individuals (r=. 275, n= 120, p (. 002). 05). It was also shown that there was a substantial association between medication compliance and respondents' social well-being (r=. 327, n= 120, p (. 001). 05). It was recommended that patients with mental illnesses be monitored to ensure drug compliance. Medical social workers are needed to educate the general population and society about the consequences of drug noncompliance. Furthermore, Afolabi and Bakare in 2023 examined the social well-being of relatives of mentally ill patients and identify the distinguishing characteristics of mental illness. The research employed a descriptive methodology and utilized a simple random sampling technique, selecting 156 participants who completed a self-developed questionnaire. The collected data was analyzed using the Pearson Moment Correlation Coefficient. The findings revealed several significant relationships: knowledge was positively correlated with the social well-being of relatives (r=. 182, n= 146, p<. 05); attitude was also positively correlated (r=. 0521, n= 146, p>. 05); and behaviour showed a significant correlation as well. Based on these findings, it is recommended to enhance mental health literacy, as it can greatly benefit individuals and the overall population. Social workers should organize public awareness campaigns to educate the general public about the stigma associated with mental illness.

Understanding the full scope of mental health stigma in the 21st century is a prerequisite for developing sustainable, AI-driven solutions in social work. Without confronting the societal roots of stigma and the lived realities of affected populations, technological interventions risk becoming superficial fixes rather than catalysts for genuine transformation. Chatbots like Woebot and Wysa have demonstrated success in delivering brief cognitive-behavioral interventions, especially for users reluctant to seek human counseling. They simulate human-like conversations and adapt their responses using NLP, providing users with personalized, empathetic engagement. These chatbots are particularly effective among younger populations and tech-savvy individuals, offering 24/7 mental health support without the fear of social judgment (Miles et al., 2021). Machine learning models also enable predictive analysis to identify at-risk individuals based on behavioral and linguistic data. For instance, sentiment analysis of social media content can help detect depression, anxiety, or suicidal ideation in users, allowing social workers to intervene proactively. Tools like Crisis Text Line utilize AI to triage emergency cases based on message sentiment and urgency, ensuring high-risk individuals receive immediate attention (Kosyluk et al., 2024; Loies, 2025).

This paper examined the role of social workers in mental health and academic performance of students. Social workers have a key role in helping community participation and engagement, alongside other primary healthcare workers in delivering mental health support. Afolabi (2022) recommended that activities such as case scenarios and role plays be used to prepare the student first, and that students be given the opportunity to practice these skills in actual practice settings as well. School authorities should not wait or watch till a student academic performance degrade totally before he or she is handed to a social worker with mental health experience. Periodic sessions should be organized by school authorities to gauge student mental stability from time to time to avoid any epidemic of mental breakdown which in tum affects their academic performance.

Again, conducted a study in Ibadan to examine the social well-being of relatives of mentally ill patients and identify the distinguishing characteristics of mental illness. The research employed a descriptive methodology and utilized a simple random sampling technique, selecting 156 participants who completed a self-developed questionnaire. The collected data was analyzed using the Pearson Moment Correlation Coefficient. The findings revealed several significant relationships: knowledge was positively correlated with the social well-being of relatives (r=. 182, n= 146, p<. 05); attitude was also positively correlated (r=. 0521, n= 146, p>. 05); and behaviour showed a significant correlation as well. Based on these findings, it is recommended to enhance mental health literacy, as it can greatly benefit individuals and the overall population. Social workers should organize public awareness campaigns to educate the general public about the stigma associated with mental illness. Omokhabi who conducted a study in 2022 on impact of domestic violence on children's mental wellbeing and education found that domestic violence has far-reaching consequences for individuals, communities, children and the society.

AI-driven diagnostics are aiding clinicians in early screening and diagnosis of mental disorders through digital phenotyping analyzing patterns in smartphone usage, speech, and facial expressions. These diagnostic tools can detect subtle indicators of mental illness that may elude traditional assessments, thereby expediting treatment and reducing the burden of misdiagnosis. However, while these tools offer scalability and efficiency, they must be deployed with caution. Ethical considerations, such as data privacy, informed consent, and algorithmic bias, remain significant challenges. There is also the risk of depersonalization, where over-reliance on automation could undermine the therapeutic alliance between clients and social workers. As such, AI should be seen as a complement, not a substitute, for human-led interventions (Global Health Institute, 2025). Incorporating AI into mental health care represents a paradigm shift in how services are delivered, accessed, and perceived. By mitigating logistical barriers and providing discrete support channels, AI plays a critical role in normalizing mental health conversations and reducing stigma, particularly among populations historically underserved by traditional mental health systems.

Furthermore, a study reviewed literature on the role of social workers in mental health and academic performance of students. Social workers have a key role in helping community participation and engagement, alongside other primary healthcare workers in delivering mental health support. Afolabi (2022) recommended that activities such as case scenarios and role plays be used to prepare the student first, and that students be given the opportunity to practice these skills in actual practice settings as well. School authorities should not wait or watch till a student academic performance degrade totally before he or she is handed to a social worker with mental health experience. Periodic sessions should be organized by school authorities to gauge student mental stability from time to time to avoid any epidemic of mental breakdown which in tum affects their academic performance.

Afolabi (2021) examined the social support System to mitigate the stress of relatives of people living with mental illness. The majority (56%) were males while most (20.3%, 61) of the

respondents were in the age range of 50-59 years of age. The majority (59%) of the caregivers are children to the patients. Physical, emotional, psychological and physical stressors are experienced by the relatives and the sources are workplace, religious institutions, friends and community. The respondents experienced stigma in form of unfriendliness (85.8%), criticism (98%); difficulty in association (96%); desertion (87.7%) and non-involvement in social gatherings (86.7%). Family, government, non-governmental organisations provided support for the relatives of patients with mental illness. There is a significant relationship between respondents' gender and their perceptions about social interactions with significant others. Relative of a family member living with mental illness experience burden due to all forms of stress incurred while taking care of their loved ones. The family also experienced stigmatisation as a result of their relationship with patients living with mental illness. They do not enjoy support from their family members but the government. Non-Governmental Organizations provide them with emotional, physical and informational supports. Government and other stakeholders should ensure that policies and programmes that are formulated and implemented are targeted at reducing stigma, burden and stress experienced by caregivers of patients with mental illness.

Chartbots and virtual agents

AI chatbots are increasingly used in online mental health platforms to provide cognitive behavioral support and crisis intervention. These tools offer judgment-free interactions and mitigate fears of discrimination (Punia et al., 2025). They utilize AI-powered algorithms to simulate conversation and apply therapeutic frameworks such as cognitive behavioral therapy (CBT) or dialectical behavior therapy (DBT) through dialogue. Chatbots like Woebot and Youper provide structured sessions, mood tracking, and personalized feedback that can enhance mental health literacy and emotional regulation skills (Moylan & Doherty, 2025). These virtual agents also offer a sense of confidentiality and anonymity, which is crucial for users experiencing self-stigma or concerned about public scrutiny. By providing round-the-clock availability and privacy, they remove many traditional barriers to access.

Additionally, chatbots can be integrated into broader social work frameworks, functioning as pre-screening tools or supplements to human counselors. This hybrid model enables social workers to focus their time and effort on high-risk or complex cases, while still ensuring continuous support for all clients. Nonetheless, the therapeutic efficacy of chatbots is still evolving. Critics argue that despite their benefits, chatbots may lack the nuance and empathy of human interaction. They may also be less effective for individuals with severe mental illnesses or complex trauma histories (Omarov & Narynov, 2023). Moreover, ethical concerns related to data collection, user consent, and content accuracy must be addressed proactively. In sum, while not a replacement for human therapists, chatbots and virtual agents represent an innovative and scalable complement to traditional mental health services. Their use in social work practice holds promise in enhancing accessibility, reducing stigma, and personalizing care especially in digitally connected, underserved populations.

Natural Language Processing (NLP) for Early Detection

Language-based AI systems analyze social media and textual data to detect early signs of psychological distress. Such early warning systems can be integrated into social work triage methods to proactively address client needs (Gupta et al., 2023; Vuyyuru et al., 2024). Natural Language Processing (NLP) enables computers to interpret, analyze, and generate human language. In mental health contexts, NLP algorithms can identify subtle indicators of distress, including word choice, sentence structure, sentiment, and emotional tone. These tools are increasingly used to assess large-scale data from online forums, therapy transcripts, or digital journals to detect early warning signs of anxiety, depression, or suicidal ideation. One widely studied application is the use of NLP to monitor public posts on platforms like Twitter and Reddit. Researchers have found that changes in linguistic patterns, such as increased use of first-person singular pronouns or negative emotion words, correlate strongly with depressive

states. When deployed at scale, such tools can flag concerning posts for follow-up by social workers or mental health professionals, allowing for timely intervention and potentially preventing crises. NLP also supports automated triage systems that help prioritize clients based on their risk level. For example, AI-enhanced intake forms embedded in digital counseling platforms can quickly analyze responses to identify those most in need of immediate attention. These forms can then route individuals to appropriate services from AI-powered chatbots for low-risk users to direct human engagement for high-risk cases.

Additionally, NLP techniques are being used in therapeutic research and clinical settings to assess therapy progress. By evaluating the language used in therapy sessions, NLP can help gauge emotional recovery, client-therapist rapport, and adherence to therapeutic goals. These insights assist social workers in refining treatment plans and improving client outcomes. Despite its promise, NLP poses ethical and technical challenges. Text data may include sensitive personal information, raising concerns about privacy, data security, and informed consent (Denecke et al., 2021). Furthermore, biases in training data can lead to skewed interpretations or reinforce stereotypes. Therefore, NLP systems must be developed with transparency, rigorous validation, and continuous monitoring. In the hands of trained social work professionals, NLP tools can enhance early detection and personalized care strategies, contributing to a reduction in stigma and improved mental health outcomes. As part of a broader AI-integrated framework, NLP strengthens the ability of social services to reach underserved populations and respond proactively to psychological distress signals across diverse digital environments.

AI in Social Work Practice

Social workers are increasingly incorporating AI into their daily practice. AI-assisted assessments, for instance, enhance case prioritization and outcome tracking (Nuwasiima et al., 2024). One of the most transformative roles of AI in social work is its ability to automate and streamline administrative tasks. This reduces the time spent on paperwork, scheduling, and documentation, freeing up social workers to focus more on direct client interaction. Machine learning models can sort through client records and highlight critical cases based on historical patterns or risk factors, aiding in timely decision-making and personalized interventions. Digital case management platforms enhanced with AI capabilities also support evidence-based decision-making. By analyzing data trends across populations, these tools offer predictive insights into client outcomes, enabling more strategic allocation of resources. For instance, algorithms can identify neighborhoods with rising mental health service needs, helping agencies preemptively assign personnel or outreach initiatives. Moreover, AI is being used to augment therapeutic interventions. Tools such as emotion recognition software and digital journaling apps allow clients to express their mental states in non-verbal or asynchronous ways. This is particularly helpful for individuals who may struggle with verbal communication or who feel more comfortable disclosing issues via digital platforms. Social workers can review these insights to adjust treatment plans accordingly. Training and supervision are other areas where AI adds value.

Simulated AI clients are now being used in academic settings to help social work students practice interviewing and assessment techniques in safe, controlled environments (Chan & Li, 2023). These simulations can adapt in real-time to the student's questions and responses, providing a dynamic and immersive learning experience. Similarly, AI can assist supervisors by flagging inconsistencies or areas for improvement in client documentation. However, integrating AI into social work practice is not without challenges. There is a learning curve associated with adopting new technologies, particularly among practitioners who may not be digitally native. Concerns about data security, algorithmic transparency, and maintaining the humanistic values of social work remain paramount. It is essential that AI tools should be co-designed with input from social workers to ensure they align with professional ethics and practical realities. Ultimately, the adoption of AI in social work is not about replacing human

empathy and judgment but about enhancing it. When used responsibly, AI can support a more responsive, data-informed, and client-centered approach to social work, helping professionals meet growing demands while preserving the core values of the field.

Policy and Future Directions

To ensure the responsible and effective integration of AI into social work and mental health practice, public policy must evolve in several key areas. First, there is an urgent need for comprehensive training initiatives within social work education programs. These should include not only technical competencies in AI tools but also ethical literacy, focusing on data privacy, algorithmic fairness, and cultural sensitivity. Future social workers must be equipped to critically assess AI systems, advocate for their clients within tech-driven environments, and participate in the co-design of inclusive technologies (Reamer, 2023; Molala & Makhubele, 2021). Second, ethical data governance must become a cornerstone of AI implementation in mental health services. Governments and regulatory bodies should mandate transparency in how AI systems are trained, evaluated, and deployed. This includes requiring disclosures about data sources, consent protocols, and mechanisms for redress in case of algorithmic harm (Luxton, 2014; Rahsepar Meadi et al., 2025). Oversight institutions should be established or strengthened to monitor compliance with ethical standards and prevent misuse of sensitive mental health data.

Third, policy frameworks should promote cross-sectoral collaboration. The complexity of integrating AI in social work demands cooperation among technologists, healthcare professionals, educators, and policymakers. Funding mechanisms can incentivize partnerships between universities, NGOs, tech companies, and government agencies to pilot and scale evidence-based AI interventions (Saeidnia et al., 2024). Interdisciplinary research and implementation grants can help bridge knowledge gaps and accelerate innovation tailored to real-world needs. Another crucial direction is the investment in multilingual and culturally contextual AI tools. Many existing models are trained predominantly on English-language data, which limits their applicability in diverse linguistic and cultural settings. Public investment is needed to develop open-source language models that reflect local speech patterns, idioms, and culturally relevant content (Lukek, 2024). This will ensure that AI interventions are not only technically effective but also socially and emotionally resonant for users from varied backgrounds.

In addition to direct investment, policies should support the integration of AI within broader mental health and social welfare strategies. National digital health policies, for example, should include provisions for AI in community-based mental health programs, school counseling services, and crisis response systems. These integrations will amplify the reach of existing programs while enabling continuous monitoring and evaluation through AI-enhanced data collection. Finally, public awareness and stakeholder engagement should be prioritized. Government campaigns can educate the public on the benefits and limitations of AI in mental health, reducing fear and misinformation. Stakeholder forums and community consultations will foster transparency and public trust—both of which are essential for successful technology adoption. In sum, forward-thinking, inclusive, and ethically grounded policies are key to unlocking the full potential of AI in reducing mental health stigma and strengthening the practice of social work in the 21st century.

Risks and Ethical Concerns

Despite its potential, AI poses significant ethical risks, including bias, privacy breaches, and depersonalization. One of the most discussed challenges is the “black-box” nature of AI systems—where the decision-making process of algorithms is not transparent to users. This opacity can hinder accountability, especially in mental health contexts where understanding the rationale behind assessments and recommendations is critical for both social workers and clients (Rahsepar Meadi et al., 2025). Algorithmic bias is another major concern. AI systems

trained on data sets that reflect existing societal prejudices may inadvertently reinforce discrimination (Saeidnia et al., 2024). Data privacy and security are also paramount. Many AI tools collect sensitive information through mobile apps, online interactions, and digital journaling platforms. Without robust protections, this data is vulnerable to breaches or misuse. Ensuring informed consent, secure storage, and minimal data collection are crucial to uphold client confidentiality (Afrihyia et al., 2025). Regulatory frameworks such as the GDPR and HIPAA offer guidelines, but AI developers and social work practitioners must go further by embedding privacy-by-design principles in system development.

Depersonalization of care is a subtler but equally concerning risk. AI, by design, simplifies human complexity into quantifiable metrics. While efficient, this approach can overlook nuanced aspects of mental health that require empathetic, human understanding (Luxton, 2014). Furthermore, the rapid evolution of AI technologies can outpace institutional readiness and ethical review mechanisms (Molala & Makhubele, 2021). Many social workers express unease about integrating AI without clear professional standards or sufficient training. This knowledge gap must be addressed through ongoing education, interdisciplinary collaboration, and co-design initiatives that include both technologists and frontline practitioners. To mitigate these risks, AI in mental health and social work must be guided by ethical principles including transparency, inclusivity, accountability, and fairness. Ethical audits, bias testing, user feedback loops, and human oversight are essential components of responsible AI deployment. Above all, AI should be viewed not as a replacement for human judgment, but as a tool that amplifies the values and competencies of social work when implemented thoughtfully and ethically....

Conclusion

AI-driven social work offers a transformative opportunity to combat mental health stigma by improving accessibility, personalization, and effectiveness in care delivery. This paper has demonstrated that the integration of artificial intelligence into social work practice not only enhances professional efficiency but also supports client dignity and empowerment through innovative, non-judgmental tools. Chatbots, NLP systems, and predictive diagnostics can deliver round-the-clock support and identify early warning signs, especially among underserved or hesitant populations (Moylan & Doherty, 2025; Gupta et al., 2023). At the same time, the ethical and practical challenges of AI adoption—ranging from algorithmic bias and data privacy concerns to digital literacy and infrastructure limitations—must be critically addressed (Rahsepar Meadi et al., 2025; Afrihyia et al., 2025). Social workers have a pivotal role in ensuring that AI is implemented in alignment with core values such as equity, cultural competence, and human dignity. This involves active participation in technology design, continuous education, and community advocacy to prevent technological marginalization.

Policymakers must prioritize ethical frameworks, invest in culturally adapted AI tools, and foster cross-sector collaboration to sustain these innovations (Saeidnia et al., 2024). Similarly, academic institutions and professional organizations should embed AI literacy and digital ethics into social work training, preparing practitioners for evolving roles in technology-enhanced environments (Reamer, 2023). The future of mental health care lies in a hybrid model where human empathy and technological precision complement each other. AI should not replace the human touch inherent in social work but should serve to amplify the reach and responsiveness of support systems. When designed inclusively and ethically, AI holds the potential to democratize access to care, dismantle long-standing stigmas, and empower individuals on their mental health journeys. Ultimately, realizing this potential requires collective action across disciplines and communities. By embracing AI as a partner rather than a panacea, social work can lead the charge in shaping a more inclusive, responsive, and stigma-free mental health landscape.

Recommendations

The following strategic recommendations are proposed:

Policy: Enforce comprehensive AI ethics and privacy regulations specifically tailored to mental health contexts. This includes mandatory transparency in data use, accountability in algorithmic decisions, and protections against bias and misuse.

Funding: Governments, philanthropic organizations, and NGOs should allocate dedicated funding streams to support the research, development, and piloting of AI-social work initiatives. Incentives for community-based organizations to integrate AI tools should also be considered. .

Education: Social work curricula should include modules on AI technologies, digital ethics, and data literacy. Continuing education programs and certifications for practicing social workers can ensure ongoing professional development in this rapidly evolving field.

Public Engagement: Launch national and community-level awareness campaigns that demystify AI in mental health care. These campaigns should aim to reduce stigma, build trust in technology, and promote digital health literacy across diverse populations

Cross-Sector Collaboration: Facilitate partnerships among technologists, health professionals, community leaders, and clients to co-design and implement AI tools. Interdisciplinary forums and advisory committees can foster shared ownership and culturally grounded innovation.

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