



Therapy Before and in the Era of Artificial Intelligence: A Comparative Perspective on Therapeutic Practices

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ABSTRACT

The emergence of Artificial Intelligence (AI) in mental health introduces new opportunities to enhance psychological and counselling therapy. This article will be examining the evolution of therapy from traditional face-to-face approaches to AI-assisted methods within the field of psychology and counselling. Traditional therapy provides individualized human-centred care but is limited by accessibility, cost and reactive intervention. AI-assisted therapy enhances early detection, accessibility, and personalization while preserving ethical oversight through human involvement. Through a comparative discussion of traditional and AI-assisted approaches, this article examines the opportunities and challenges associated with the integration of AI into counselling and psychological care. The discussion highlights the potential for hybrid models that combine human empathy with AI efficiency, offering scalable, proactive and ethically responsible mental health support. Lastly, the ethical boundaries where AI should augment, not replace, professional judgment. Therapists remain responsible for clinical decisions and intervention outcomes. Addressing these challenges is critical to ensure that AI integration supports ethical, safe, and effective psychological care.

Keywords: Artificial intelligence, AI-Assisted therapy, Counselling, Therapeutic practice, Ethical considerations

INTRODUCTION

Artificial Intelligence (AI) has grown quickly, bringing new ways to help in psychology and counselling. AI tools in many ways can enhance standard traditional therapy. They help to identify mental health issues at an early sign and then suggest personal ways to cope and keep an eye on how clients are doing. These AI-based counselling could make therapy easier to reach for people who live far away or in areas with few services available. Psychological and counselling therapy has long been a critical tool to help people with mental health challenges such as stress, anxiety, depression, and emotional issues (Emmelkamp et.al, 2014). Traditional therapy especially in counselling relies on direct face-to-face interactions between trained professionals psychologist or counsellors with their clients. Therapy provides personalized guidance, emotional support and structured interventions. Techniques such as cognitive behavioural therapy (CBT), person-centred therapy, psychodynamic approaches, and reflective journaling have been widely used to help clients understand and manage their emotions, behaviours and thinking patterns (Sanders & Hill, 2014).

Despite being useful, traditional therapy methods have several issues (Chiboola, 2019). Finding a qualified therapist is often difficult because of where you live, the price and whether they are available or not. Many people have to wait a long time for appointments or just cannot get to the services they need because of location issues. Many clients experience long waiting periods for appointments or are unable to reach services due to location is too far. Social stigma and personal discomfort with seeking help further reduce early intervention opportunities. Consequently, traditional therapy often addressing mental health issues after they have become severe rather than preventing them through early detection (Patel, 2018). As a result, standard therapy usually deals with mental health problems only after they have become serious, instead of catching them early on.

The rise of Artificial Intelligence (AI) in mental health introduces new opportunities to enhance psychological and counselling therapy (Talati, 2023). AI-based tools including chatbots, mood tracking applications, predictive analytics and AI-assisted CBT modules provide support to therapists by offering early detection, continuous monitoring and personalized intervention recommendations. Before the introduction of AI, therapy was entirely human-driven. Face-to-face counselling sessions were the primary medium for assessment and intervention. Therapists acted as the central decision-makers. Therapists main role is to evaluate clients' emotional and cognitive states. Then, they provide treatment plan that includes coping strategies, adjusting interventions and observed progress. Common approaches included Cognitive Behavioural Therapy (CBT), Person-centred Therapy and Psychodynamic Approaches (Roscoe & Davies, 2025).

Traditional therapy known its effectiveness in building a therapeutic relationship where it provides understanding and offering tailored interventions based on the therapist's expertise (Spytska, 2025). However, limitations are there such as restricted access due to location and cost, session timing constraints and the reactive nature of intervention. Additionally, social stigma surrounding mental health can stop individuals from seeking early therapeutic support. AI-assisted therapy represents a significant evolution in psychological and counselling practices. AI tools do not replace human therapists but act as a tools to help therapists in collecting client's insightful data, early warning systems and personalized recommendations. Examples of AI applications in mental health include:

- Chatbots (e.g., Woebot, Wysa): Offer guided conversations, psycho-education, and coping exercises for stress and anxiety (Palmer & Schwan, 2025).
- Mood Tracking Applications: Monitor clients' emotional states over time, detecting early signs of distress (Sherer et.al, 2025).
- AI-Assisted CBT Modules: Provide structured CBT exercises digitally, personalized according to user input and progress (Chatterjee, 2025).
- Predictive Analytics Dashboards: Highlight clients at risk and provide early alerts for therapist review (Bristy et.al, 2025).

As a comparison, traditional therapy provides strong human empathy, flexibility and reasonable judgment. AI-assisted therapy offers scalability, early intervention and personalized digital support (Wang, Siau & Zhang, 2025). The ideal approach is to combines both to benefit the use of AI to help increase the efficiency of therapy while maintaining human-centred care. AI tools support counselling and psychology in multiple ways. These methods include early screening and assessment where AI-assisted questionnaires efficiently identify stress, anxiety and depression levels. AI also facilitates AI-assisted CBT through digital modules that deliver structured exercises allowing clients to practice techniques outside of sessions while therapists monitor their progress. For immediate needs, chatbots offer crisis support and psycho-education by providing immediate guidance and coping strategies during stress. AI offers decision support for therapists through dashboards that provide predictive insights and highlight clients needing urgent attention. Thereby supporting ethical and informed decision-making (Auf et.al, 2025).

Despite its advantages, AI assisted therapy presents ethical and practical challenges such as privacy and data security (Sulong & Azad, 2025). Sensitive client information must be stored and transmitted securely to prevent data breaches. In terms of algorithmic bias, AI systems must be trained on diverse populations to avoid biased recommendations. There will be issue on maintaining therapeutic relationship because over dependence on AI can risk weakening the human connection that is essential for effective therapy (Aghaziarati & Rahimi, 2025). Last concerns is the ethical boundaries where AI should act as supplement and not replace the professional judgment (Gillies & Smith, 2022). Therapists or counsellors remain responsible for clinical decisions and intervention outcomes. Addressing these challenges is critical to ensure that AI integration supports ethical, safe, and effective psychological care.

Traditional Therapy Approaches

Traditional counselling and psychotherapy developed through decades of clinical practice and face-to-face interaction between therapists and clients. One of the earliest and most influential approaches was psychodynamic therapy which originated from the work of Sigmund Freud and later theorists (Stricker, 2007).

This approach focused on unconscious processes, early life experiences and unresolved internal conflicts. Therapy sessions often involved exploring thoughts, memories and emotions that were not immediately visible to the client. While psychodynamic therapy could be time consuming often involved 20 or more face-to-face sessions (Gabbard, 2017). It played a crucial role in shaping the idea that understanding one's inner world was essential for long-term psychological change (Greenberg, 2012).

Later on, cognitive-behavioural therapy (CBT) emerged as a more structured and goal-oriented approach (Cooper, 2018). CBT emphasized the relationship between thoughts, emotions and behaviours. CBT main focus is to help clients identify negative thinking patterns and replace them with positive and healthier thinking patterns. This approach gained popularity because of its practical focus and measurable outcomes making it widely used in clinical and community settings.

Furthermore, humanistic therapy placed strong emphasis on personal growth, self-acceptance, and the client's subjective experience (Lambert, et. al, 2016). Then, comes the new approaches such as person-centred therapy which mainly focus on empathy, unconditional positive regard and therapist's authenticity (Rogers, 2000). Rather than positioning the therapist as an expert who fixes client's problems, humanistic therapy viewed clients as capable individuals who could find their own solutions. The role of therapists and counsellors to give supports and creating the safe and respectful environment for behaviour changes.

Then, comes the modern approach which is the Solution Focused Brief Therapy (SFBT). SFBT aims to shift attention away from problems toward the clients' strengths, resources and future goals (De Shazer, et. al, 2021). This approach was often brief and practical making it suitable for settings such as schools, community agencies and social services. Similarly, family and systemic therapy expanded the focus beyond the individual, recognizing that personal struggles are often shaped by family dynamics, cultural expectations and social relationships (Nichols, 2013).

Across these diverse approaches, the role of the therapist remained central. Therapists were not only providers of techniques but also active participants in the therapeutic relationship. Skills such as empathy, attentive listening, emotional sensitivity and careful observation were essential. Therapists relied on verbal expression as well as non-verbal cues such as tone of voice, body language and facial expressions.

Clinical intuition which has been developed through training and experience helped therapists respond according to each client's unique situation. Most importantly, traditional therapy emphasized human connection. The trust between therapist and client was seen as the foundation of effective therapy. Understanding a client's personal history, cultural background and social context allowed interventions to be tailored in meaningful ways. Therapy was not simply about applying methods but is about engaging with the person as a whole.

Benefits and Limitations of Traditional Therapy

Traditional therapy offered several important benefits that continue to be valued today (Feltham, 2002). One of its greatest strengths was personalized care. Therapy sessions were shaped by ongoing interaction allowing therapists to adjust their approach based on the client's emotional state, progress and feedback. This flexibility made it possible to address complex and sensitive issues that did not follow a clear pattern. Another key benefit was the ability to perceive and respond to non-verbal communication. Subtle changes in posture, eye contact and emotional expression often provides valuable insight into a client's inner experience.

Human therapists could notice discomfort, hesitation, emotional and behavioural changes that might not be expressed in words (Doherty, et. al, 2000). Upon noticing those changes, therapist could give immediate respond with empathy and gives therapeutic inquiry. Perhaps the most distinctive feature of traditional therapy was human empathy. Many clients found comfort in being heard and understood by another person especially during times of distress, loss and confusion. The therapeutic relationship itself often became a source of healing, offering validation and emotional support that extended beyond specific techniques.

Despite these strengths, traditional counselling and psychology therapy also faced clear limitations (Platt & Pelling, 2021). Accessibility was a major challenge. Therapy services were often concentrated in urban areas and making them difficult to access for individuals in rural or remote locations. Long waiting lists further limited timely support particularly in public health systems. Cost was another significant barrier. Regular therapy sessions could be expensive making them out of reach for individuals with limited financial resources. Even when subsidized services were available, the number of sessions was often restricted. Thus, reducing the continuity of care.

Geographic constraints and therapist availability also affected the service (Dew, et. al, 2013). The number of trained mental health professionals was frequently insufficient to meet growing demand. Cultural and language mismatches between therapists and clients sometimes reduced the effectiveness of therapy especially for marginalized or minority communities (Payi, et.al, 2025). Additionally, traditional therapy required clients to commit to scheduled and face-to-face sessions. This structure could be difficult for individuals with demanding work schedules, caregiving responsibilities, mobility issues and social anxiety (Hallett, 2012). As a result, many people who needed support were unable and reluctant to seek help.

Before the emergence of AI-based tools, therapy outcomes largely depended on the availability of skilled professionals and supportive systems. For example, individuals experiencing mild to moderate depression often benefited from CBT or SFBT interventions and showing improvements in mood as well as daily functioning after several sessions (Chen, et. al, 2006; Gupta & Fakhr, 2022). Clients dealing with grief or trauma frequently reported that the therapeutic relationship itself helped them feel less isolated and more understood. However, these positive outcomes were not equally distributed.

In marginalized populations such as low-income communities or rural areas, access to therapy remained limited (Cummings, et. al, 2017). Many individuals relied on informal support networks or delayed seeking help until their difficulties became severe. In some cases, mental health concerns went untreated due to stigma, lack of awareness and absence of nearby services (Kessler, et. al, 2001). These challenges highlighted a growing gap between mental health needs and available resources. Traditional therapy offered depth, empathy and contextual understanding but it struggled to reach wider populations. This gap later became a key motivation for exploring technological and AI-based solutions in mental health care.

Transition from Traditional Therapy to the Emergence of AI-Based Therapy

The history of traditional therapy reveals a field deeply rooted in human connection, professional skill, and relational understanding. For decades, counselling and psychotherapy relied on the presence of a trained human therapist who could listen, observe, and respond to clients within a shared physical and emotional space. This model has proved effective for many individuals and remains a cornerstone of mental health care today. However, as societies changed, so did the demands placed on mental health systems. Modern life has brought increased work pressures, social isolation, and exposure to global crises. Economic uncertainty and public health emergencies have further contributed to psychological distress. At the same time, the availability of mental health professionals has not kept pace with growing demand. This imbalance has highlighted the limitations of traditional therapy, particularly in accessibility, affordability, and continuity of care.

These limitations do not indicate a failure of traditional therapy; rather, they reflect constraints on its capacity to meet growing demand. Human-centred therapy works best when sufficient time, resources, and trained professionals are available. When these conditions are absent, even the most effective therapeutic models struggle to reach those in need. Students experiencing academic stress, working adults managing burnout, and individuals in rural or underserved communities often find themselves without adequate support despite clear psychological needs. Advances in digital technology have begun to reshape this landscape (Barak & Grohol, 2011). Online counselling platforms, tele-therapy, and mental health apps emerged as early efforts to extend therapeutic support beyond traditional settings. These developments laid the groundwork for further changes, including the introduction of artificial intelligence into mental health services (Robledo Yamamoto et al., 2021). AI-based tools have emerged as one approach to addressing gaps in existing services and complementing the work of human therapists.

The transition from traditional therapy to AI-supported interventions reflects a broader evolution in how mental health care is understood and delivered. Traditional therapeutic approaches emphasize depth, relational trust, and contextual understanding, while AI-based systems offer opportunities to expand reach, consistency, and availability. Understanding therapy before the introduction of AI is therefore essential for evaluating what AI can contribute, what it cannot replace, and how the two approaches can be integrated within ethical and effective mental health care frameworks. The following section explores the next phase of this development by examining how artificial intelligence has been integrated into counselling and mental health support and how it is reshaping the roles of therapists, clients, and mental health systems.

Therapy in the Age of Artificial Intelligence (AI)

The integration of artificial intelligence into mental health care represents a significant shift in how therapeutic support is delivered and experienced. Traditional therapy relies almost entirely on human interaction. But, AI-based therapy introduces digital systems that can assist, guide or partially automate aspects of mental health support (Isa, 2024). This shift did not occur suddenly and it was not driven by technology alone. Rather, it emerged as a response to limitations such as gaps in access to service, growing demand for psychological services and changes in how people seek help in a digital world.

AI-based therapy broadly refers to the use of computer systems that are designed to simulate aspects of human thinking, language and decision-making in mental health contexts (Algumaei, et. al, 2025). These systems range from simple chat based programs to more advanced tools that analyse user input, track emotional patterns and provide structured responses. In practice, AI in therapy is most often encountered through mental health chatbots, mobile applications, online screening tools and digital platforms that support therapists in assessment or intervention planning.

One of the earliest and most well-known forms of AI based therapy is the mental health chatbot (Fullam, 2025). These tools are designed to engage users in text conversations based on the principles of cognitive-behavioural or solution-focused therapy (Kramer, et. al, 2014). Users may be guided to reflect on their thoughts, identify stressors or practice coping strategies through short and structured interactions. For many individuals especially those unfamiliar or uncomfortable with traditional therapy, chatbots provide an assistance for mental health support.

Another important development is the use of AI in self-guided mental health applications (Kamita, et. al, 2020). These applications allow users to monitor mood, track behaviour and engage in therapeutic exercises at their own pace (Purohit, 2026). AI systems may personalize content based on user responses, usage patterns or reported symptoms. For example, a user who consistently reports sleep difficulties may receive targeted suggestions related to sleep pattern or relaxation techniques. These interventions do not replace therapy but they offer continuous support that extends beyond scheduled sessions.

In professional settings, AI has also been introduced as a support tool for therapists rather than as a direct replacement (Sali, et. al, 2025). AI-assisted systems can help organize client data, identify patterns across sessions and identify potential risks such as worsening symptoms. In this role, AI functions as an assistance to clinical judgment, supporting therapists in managing large case workloads and then making informed decisions. Importantly, responsibility for interpretation and intervention remains with therapist and counsellors.

AI-based therapy is appealing because it helps with the problems found in older traditional therapy styles. Its biggest strength is accessibility (Nosrati, et. al, 2020). Anyone can use AI tools any time almost anywhere, as long as they have the internet access. All the time access is great for people like students, busy adults or those in remote places who might find it hard to go to normal face-to-face therapy sessions. At any time when someone is experiencing emotional stress after office hours and need helps to release, AI tools can give immediate response and support.

Cost is another factor that has contributed to the growth of AI-based mental health services (Nosrati, et. al, 2020). Many AI-driven applications are offered at a lower cost than traditional therapy and some are freely

available to user. Even though affordability does not guarantee effectiveness but it reduces a major barrier that prevented individuals from seeking help. In this sense, AI-based therapy has expanded the mental health support landscape by reaching people who might otherwise remain unsupported. Many individuals who are reluctant to seek professional counselling turn to AI-based online applications for therapeutic support.

While AI brings many benefits to the field of therapy, it requires careful consideration when using it. These issues raise debate among mental health professionals and potential users. Perhaps the most significant limitation is the complete absence of genuine human empathy (Rubin, et. al, 2024). Although AI systems can be programmed to generate text that sounds supportive and emotionally appropriate but this is simply a programmed response. It is not a true emotional understanding of genuine empathy (Sedlakova, et. al, 2025). These systems fundamentally lack the personal life experiences, emotional depth and inherent moral responsibility that shape human interaction. They cannot truly understand what a person is going through based on merely text (Zhang & Wang, 2024).

Consequently, users might feel a superficial level of validation from AI. Thus, it is not compliant to the real objectives of psychotherapy where it demands more exploration and in-depth understanding. Therapy requires deeper emotional needs especially when dealing with deeply personal issues like trauma, grief, loss or understanding complex relationship dynamics. The unique sensitivity and irreplaceable connection that only a human therapist can provide are needed. This is the major hole that AI-based therapy can never fill.

Another challenge lies in understanding context (Khawaja & Bélisle-Pipon, 2023). Human therapists and counsellors are trained to interpret behaviour and emotions while considering a person's cultural, social and personal background. While AI depends on data and pre-set models which can miss the subtle details of an individual's life experiences. This gap is particularly important in multicultural communities where stress and well-being are deeply influenced by social norms, family dynamics and institutional expectations.

Ethical concerns are also a key issue when it comes to AI in therapy (Alfano, et. al, 2024). Questions around data privacy, confidentiality and informed consent are especially critical in mental health care. People may share sensitive information with AI tools without fully knowing how it will be stored, processed or used. It remains an ongoing challenge for educators, practitioners and policymakers in making sure AI is applied responsibly and transparently by the users.

From a therapeutic perspective, the rise of AI has sparked important reflection on the evolving role of the therapist. Rather than reducing the value of human professionals, AI has underscored what makes human therapists irreplaceable. Qualities like empathy, ethical judgment, cultural awareness and the ability to navigate emotional complexity are deeply human and cannot be fully replicated by machines (Yonatan-Leus & Brukner, 2025). Moreover, human therapists have the ability to understand and respond to any hint from clients that even the most sophisticated AI systems may not notice. Therapists can also provide validation, reassurance and relational warmth in ways that are critical to the healing process. One more thing, AI can never have the intuition and feelings that give insight for therapists and counsellors in building the therapeutic relationship with their clients.

As a result, many experts now suggest that the future of therapy will not depend on choosing between humans or AI. Now they are finding ways to complement each other. AI can support therapists by handling routine tasks, offering data-driven insights or expanding access to mental health resources. Meanwhile, human professionals can focus on the relational, ethical and contextual sensitivity aspects of care. Creating a collaborative model that strengthens both to make the therapy more efficient, personalized and accessible without losing the human connection.

In educational and workplace contexts, AI-based mental health tools have shown particular promise (Zhai, et. al, 2025). Students facing academic stress or adjustment problems may benefit from anonymous self-guided support. Meanwhile, lecturers and staff may use digital tools to manage stress related to workload or burnout. In these settings, AI-based interventions can function as early support mechanisms to help individuals recognize distress and seek further help when needed.



Overall, therapy in the age of artificial intelligence reflects an evolving understanding of mental health care. AI-based tools have expanded access, reduced barriers and introduced new ways of engaging with psychological support. At the same time, they have reinforced the value of human connection, ethical practice and contextual understanding. Recognizing both the strengths and limitations of AI-based therapy is essential for developing balanced, effective, and humane mental health systems.

AI as a Supports System for Traditional Therapy

Artificial intelligence is increasingly positioned as a supportive layer within mental health care rather than functioning as a standalone alternative to traditional therapy. It's role is best understood as supplementary and addressing practical limitations of human-centred therapy. While leaving core relational and ethical responsibilities to trained professionals. Several main functions explain how AI supports therapeutic processes in meaningful ways.

One of the most major contributions of AI is personalization through data analysis (Vallabhaneni, et. al, 2024). AI systems are capable of processing large volumes of user-generated data such as mood ratings, written reflections, usage patterns and symptom reports. By identifying patterns over time it enable the systems to tailor prompts, exercises or recommendations to the individual user. For example, a person who consistently reports heightened stress during weekdays may receive targeted coping strategies related to work or academic demands. This form of personalization differs from the intuitive understanding of a human therapist because it offers a structured and consistent way to adapt support to individual needs.

Traditional therapy is limited by the availability of trained professionals, session duration and institutional resources. There are not enough trained professionals to serve all who need help and furthermore geographic, financial and cultural barriers limit accessibility. Expanding services often requires significant funding and infrastructure. While maintaining effectiveness, personalized care becomes harder as more patients are added. In short, providing mental health support to larger populations efficiently and sustainably remains a persistent challenge. By contrast AI-based tools can engage with large numbers of users simultaneously without a decline in basic functionality (Maedche, et. al, 2019). This quality is particularly valuable in larger settings such as universities, workplaces and public health systems where demand often exceeds available support.

Another important feature is the continuous support offer by the AI-based tools. AI-based tools are typically available at any time offering users access to coping strategies, reflective exercises or emotional check at any time (Karimzadeh & Saeedi, 2024). This all-time availability is especially relevant during moments of distress that occur outside regular office hours. AI tools can provide immediate guidance and a sense of being supported even if that support is limited in scope. Individuals who experience anxiety at night, stress during deadlines or emotional overwhelm in private moments will benefit the most.

AI-based tools are also increasingly used for monitoring and feedback systems (Geetha, 2025). Techniques such as mood tracking, journaling analysis and basic detection allow users and therapists to observe changes over time. When integrated into clinical or educational settings, this information can support early identification of worsening symptoms or emerging risks. Rather than replacing professional judgment such monitoring functions act as signals that prompt further assessment or human intervention.

Integration of Artificial Intelligence (AI) and Human Therapists

The growing presence of AI in mental health care signifies a new era for therapy often referred to as the AI generation. This phase is characterized not by the replacement of human therapists but by changing relationships between technology, professionals and clients. Understanding this shift requires careful attention to how AI and human expertise are integrated. To truly grasp this transition, one must carefully consider how AI and human expertise are brought together along with the various challenges that come with this significant shift.

Within most ethical and professional guidelines, AI is fundamentally considered a support tool not a substitute for human therapists (Khawaja & Bélisle-Pipon, 2023). Its main job is to help with tasks that consume a lot

of time that are repetitive and involve heavy data processing. This assistance allows therapists to dedicate their energy to the relational and interpretive sides of care. This viewpoint aligns with a common understanding that successful therapy relies heavily on qualities that are distinctly human.

One emerging approach is the use of hybrid models in which AI supports assessment and monitoring, while human therapists lead intervention and decision-making (Karimzadeh & Saeedi, 2024). For example, AI tools may be used to collect early information, track symptoms between sessions or identify potential concerns. Therapists then interpret this information within the broader context of the client's life, relationships and cultural background. In this model, AI enhances efficiency without diminishing professional responsibility.

The benefits of such integration are meaningful. Efficiency improves when therapists have access to organized, longitudinal data rather than relying solely on session notes. Data based informed treatment becomes more feasible as patterns across time can be reviewed and discussed collaboratively with clients. Additionally, early detection of distress or relapse may be improved when subtle changes are identified through continuous monitoring. These advantages are particularly relevant in educational and workplace settings where early intervention can prevent more serious difficulties.

Comparing Traditional Therapy and Therapy in the AI Generation

Understanding the transformation of therapy practice requires a clear comparison between traditional, human-centred therapy and therapy shaped by artificial intelligence. This comparison does not suggest a shift from old to new. But, rather highlights how therapeutic care has expanded, adapted and changed in response to technological and social developments. Each AI-based therapy model carries distinct strengths and limitations and their differences reveal how AI has altered not only in service delivery but also expectations around access, personalization and professional roles.

The shift toward AI-supported therapy is not merely technological but structural and systematic (Nazir, 2026). It reflects broader changes in how mental health support is accessed, delivered and evaluated. One of the most visible differences lies in accessibility. Before AI generation, therapy was largely confined to physical spaces such as clinics, hospitals, schools and private practices. Access to therapy depended heavily on geographic location, appointment availability and institutional capacity. For many individuals, especially those in rural areas or underserved communities therapy was difficult to access or unavailable.

In contrast, therapy in the AI generation offers significantly wider reach (Isa, 2024). AI-based tools can be accessed at any time often without the need for appointments or referrals. This does not mean that all users receive the same level of care but it does mean that initial support is no longer limited to those who can physically reach to a therapist location. From a public mental health perspective, this represents a meaningful shift toward broader inclusion.

Traditional therapy relies heavily on human intuition which has been developed through training, experience and relational engagement. Therapists personalize care by listening closely, observing behaviour and adjusting their approach based on emotional and contextual cues. This form of personalization is deeply relational and responsive. But it also limited by memory, time and subjective judgment. AI-based therapy approaches personalization differently. Through data-driven processes, AI systems analyse patterns across user inputs, mood tracking and interaction history (Kasaudhan, 2025). This allows for consistency and long-term pattern recognition that may be difficult to maintain in session-based therapy alone. As a result, AI-driven personalization complements but does not replace human understanding.

Empathy remains a defining distinction between therapy before AI and therapy in the AI generation. Human therapists bring emotional presence, moral awareness and shared humanity into the therapeutic relationship. Empathy is expressed not only through words but through silence, tone, facial expression and responsiveness to emotional shifts (Riess & Kraft-Todd, 2014). AI systems increasingly sophisticated in language use but do not possess emotional awareness. Their responses are based on patterns rather than feelings. For some users, especially those seeking anonymity or emotional distance may accept this limitation as acceptable or even

preferable. The absence of genuine empathy highlights the continued importance of human therapists particularly those facing trauma or complex relational issues.

Financial cost has long been a barrier in traditional therapy models. Professional fees, limited insurance coverage and the need for repeated sessions contribute to higher financial demands. While this cost reflects the value of skilled human care, it also restricts who can benefit from therapy. In the AI generation, costs can be significantly reduced especially for early support, psycho-education and self-guided interventions (Yadav, 2021). AI-based tools should not be seen as replacements for professional care but they offer a more sustainable entry point into mental health support systems. This has important implications for institutions such as universities, workplaces and community organizations.

Traditional therapy focuses primarily on individual or family level intervention. Insights are generated within the therapeutic relationship and remain largely confined to that context. Even though this depth is valuable, it limits the ability to observe broader trends across populations. AI supported therapy expands the scope of insight by aggregating anonymized data across users (Rosenfeld, et. al, 2019). This allows for understanding the stress patterns, common challenges and help-seeking behaviour. When used ethically, such insights can inform preventive strategies and institutional mental health planning without replacing individual care.

The comparison between therapy before AI and therapy in the AI generation makes one point clear which is AI is not replacing human therapists. Instead, it is reshaping how therapy is practiced, accessed and supported. Human-centred therapy remains essential for depth, empathy, ethical judgment and complex emotional work. AI contributes scale, continuity and data information support. Rather than viewing these models as competing, they are best understood as complementary. The future of therapy lies in thoughtful integration where AI extends the reach of mental health services while human professionals preserve the relational heart of therapeutic care. This balanced approach ensures that technological advancement enhances rather than diminishes the human experience of healing and support. Table I summarizes the key differences between traditional human-centred therapy and AI-supported therapy in accessibility, personalization, empathy, cost, and professional roles.

Table I Comparison of Traditional Human-Centred Therapy and AI-Supported Therapy

No	Dimension	Traditional human-centred therapy	AI-supported therapy
1	Accessibility	Access often depends on location, appointment availability, and service capacity.	Digital tools can extend access and provide initial support beyond scheduled appointments.
2	Service delivery	Care is delivered through professional sessions and therapeutic relationships.	AI tools supplement care through automated interactions, self-guided activities, and ongoing support.
3	Personalization	Therapists adapt care through clinical training, experience, and attention to emotional and contextual cues.	Systems identify patterns in user inputs, mood records, and interaction histories to tailor responses.
4	Empathy and therapeutic relationship	Empathy is communicated through emotional presence, tone, facial expressions, silence, and responsiveness.	Systems generate responses that resemble empathic communication but lack human emotional experience and relational understanding.
5	Cost	Professional fees and repeated sessions can create financial barriers.	Tools may offer lower-cost access to psychoeducation, early support, and self-guided interventions.



6	Continuity and monitoring	Progress is reviewed through sessions, clinical observations, and information shared by clients.	Mood tracking and interaction records can support ongoing monitoring and recognition of patterns over time.
7	Scope of insights	Insights primarily concern individuals and families within the therapeutic relationship.	Aggregated data may reveal broader patterns relevant to prevention and service planning, subject to ethical safeguards.
8	Professional roles	Human therapists provide clinical judgment, ethical responsibility, and support for complex emotional needs.	AI complements professional care by extending reach and providing data-informed support, human oversight remains essential.

Challenges and Risks of the Integration of AI into Therapy

Despite its potential benefits, the integration of AI into therapy raises significant challenges and risks that must be addressed carefully. One of the most prominent concerns involves ethical considerations particularly related to privacy and informed consent. Mental health data is deeply personal and users may not fully understand how their information is collected, stored, or analysed by AI systems. Another ethical concern involves bias in AI algorithms, which may influence the accuracy of AI-based therapeutic responses (Kharitonova, et. al, 2021). AI systems are trained on existing data which may reflect social, cultural and institutional biases. AI tools may produce response or recommendations that are less accurate or even harmful for certain populations if these biases are not identified and addressed. This risk is especially concerning in multicultural and global contexts where lived experiences of stress and well-being vary widely.

One major concern is that the over use of artificial intelligence in therapy might make the therapy session feel less human (Prescott & Hanley, 2023). When support is given mainly through automated systems like computers, people can feel like they are just data system rather than understood as unique individuals. While some individuals appreciate the anonymity and emotional distance of AI tools, others may feel a lack of genuine empathy. Relying too much on AI could accidentally weaken the most important part of therapy which is the human relationship if it is not carefully balanced with real human involvement. Additionally, AI systems struggle with complex human emotions. Experiences like grief, trauma, moral dilemmas and identity crises are deep and change depending on the situation. Even the best AI answers are just based on text patterns, not real life understanding. Relying on AI without careful human judgment might make these complex emotional experiences seem too simple when they really need careful care and attention.

Another important limitation is the risk of AI hallucinations. This occurs when AI generates information that sounds convincing but is inaccurate, misleading or entirely fabricated. In a counselling context, hallucinations may lead to incorrect interpretations of a client's concerns, inappropriate therapeutic suggestions or information that does not actually exist. Because AI often presents these responses with confidence, users may assume the information is accurate which could affect the quality and safety of counselling. A systematic review of 44 studies found that combining AI systems with human significantly reduced hallucination-related errors with using human-in-the-loop approaches lowering such errors by up to 95% (Rezaei, Beheshti & Rabhi, 2026). These findings suggest that AI should be used as a support tool rather than a replacement for professional counsellors. Human therapist remains essential to ensure that AI-generated responses are accurate, appropriate and aligned with clients' therapeutic needs particularly in complex or high-risk cases.

Impact on Therapist Roles

The increasing use of AI in therapy has also reshaped the role of the therapist (Hanley, 2025). AI has created a need for new skills without decreasing professional relevance. Therapists are now expected to understand how AI tools function, how to interpret AI generated data and how to integrate digital insights into clinical decision-making. This requires ongoing professional development and technological literacy. As AI handles

routine tasks such as tracking and basic guidance, human therapists increasingly act as guides, coaches and validators. Their role centres on helping clients make sense of their experiences, navigate emotional complexity and apply insights in meaningful ways. This shift reinforces the importance of relational depth, ethical judgment and reflective practice.

These changes also have implications for professional identity and training. Counsellor education and psychology programs must now prepare future practitioners to work alongside technology while maintaining core therapeutic values. Training must address not only technical competence but also critical thinking about the appropriate use of AI, boundaries of automation and the preservation of human-centred care. In this sense, therapy in the AI generation is not defined by technology alone but by how professionals choose to integrate it. The challenge lies in using AI to extend support without compromising empathy, dignity and ethical responsibility. AI has the potential to strengthen mental health systems while reaffirming the irreplaceable role of human connection in therapy.

Implications for Counselling, Education, and Policy

The increasing integration of artificial intelligence into therapy does not only reshape clinical practice but it also carries important implications for counsellors, clients, educational institutions and policy frameworks. AI becomes more visible in mental health support systems and therefore stakeholders must adapt in ways that preserve ethical standards, professional integrity and human well-being. Understanding these implications is essential for ensuring that AI-enhanced therapy develops in a responsible and sustainable manner. The rise of AI in mental health care requires both adaptation and professional growth for counsellors and therapists (Zhang & Wang, 2024). Core therapeutic skills such as empathy and ethical judgment remain central. Practitioners are increasingly expected to understand how AI-based tools function and how they can be integrated into practice appropriately. This does not mean that therapists must become technology experts but they do need a basic knowledge of AI systems used in assessment, monitoring and intervention support.

One key area of adaptation involves interpreting AI generated data. Mood tracking summaries, sentiment indicators and usage patterns can offer useful insights but they require careful interpretation within a broader clinical context. Therapists must be able to distinguish between meaningful trends and superficial patterns and to communicate these insights to clients in ways that are supportive rather than overwhelming (Martin & Johnson, 2024). This reinforces the therapist's role as a sense-maker, rather than a passive consumer of technology. Ethical awareness is also increasingly important. Therapists must remain mindful about issues such as confidentiality, informed consent and professional boundaries when using AI supported tools. Clients should understand the role of AI in their care including its limitations. Counsellors who integrate AI without clear explanation risk undermining trust which remains the foundation of effective therapy. As such, ethical reflection should be ongoing rather than treated as a onetime consideration.

Professional identity may also evolve as routine tasks become automated or supported by AI. Therapists may find their work shifting toward deeper relational engagement, guidance and validation (Bloch-Atefi, 2025). This shift challenges practitioners to reflect on what defines their professional value in an AI supported environment and to embrace roles that emphasize human presence rather than technical efficiency alone. For clients, the growing availability of AI-based mental health tools offers both opportunity and responsibility. AI expands access to support particularly for individuals who may be hesitant to seek traditional therapy or who face barriers related to cost, time or stigma. On the other hand, clients must be equipped to make informed choices about the tools they use and the type of support they receive.

Clients need to understand that AI-based tools vary widely in quality, purpose and limitations (Susilawati, et al, 2025). Not all tools are designed to address serious mental health conditions and not all forms of distress are suitable for self-guided or automated support. Encouraging clients to view AI as a supplement rather than a substitute for professional care is essential for preventing misunderstanding and harm. Clients also need clarity regarding data privacy and consent. Many users may not fully read or understand terms of use especially when seeking immediate emotional support. Clear communication about how data is collected and used helps empower clients and supports ethical engagement with AI based services. Informed clients are better positioned to use these tools responsibly and to seek human support when needed.



Educational institutions, healthcare organizations and workplaces are increasingly exploring the integration of AI into their mental health services. For universities, AI-based tools may serve as early support systems for students experiencing academic stress, anxiety and adjustment difficulties (De la Puente, et. al, 2024). In workplaces, similar tools may be used to address burnout or work related stress. These initiatives reflect a growing recognition of mental health as a shared institutional responsibility.

However, effective integration requires more than simply adopting new technology. Institutions must invest in training programs that prepare staff to use AI tools ethically and effectively. Counsellors, educators and administrators need guidance on when and how AI should be used, how to interpret its outputs and how to respond when concerns are identified. AI tools risk being underutilized or misapplied when there is lack of training.

AI-based tools should be embedded within broader mental health frameworks that include referral pathways, crisis support and human oversight. When AI identifies elevated risk, there must be clear procedures for escalation and professional intervention (Johnston, et. al, 2015). This ensures that AI supports rather than fragments mental health care systems. At the policy level, the integration of AI into therapy raises questions related to regulation, accountability and ethical standards. Mental health data is among the most sensitive forms of personal information and policies must prioritize privacy protection and data security. Regulatory frameworks should ensure that AI-based mental health tools meet minimum standards of safety, transparency and effectiveness.

Another important policy issue involves ethical AI development. Policymakers must consider how bias, cultural assumptions and unequal access may be embedded within AI systems. Without careful oversight, AI tools may unintentionally reinforce existing inequalities in mental health care. Policies that promote inclusivity, cultural sensitivity and equitable access are therefore essential (Ohu, et. al, 2025). In addition, there is a need for clarity around professional responsibility and liability. When AI tools are used in therapeutic contexts it must be clear who is accountable for decisions and outcomes. Maintaining human oversight and professional judgment is critical for ensuring that responsibility remains aligned with ethical and legal expectations.

Technological advancement must be guided by human values. AI offers new possibilities for expanding access and enhancing support but its benefits depend on thoughtful integration, ethical awareness and professional responsibility. Counsellors, clients, institutions and policymakers all play a role in shaping how therapy evolves in the AI generation. When these stakeholders work together, AI can become a meaningful addition to mental health care without compromising the human connection at its core.

Emerging Trends and the Future of AI-Supported Therapy

As artificial intelligence continues to develop and become integrated into mental health care, the future of therapy will be shaped not only by technological capabilities but also by deliberate choices made by professionals, institutions, and policymakers. Future directions in AI-supported therapy point towards expansion, refinement, and deeper ethical reflection rather than the wholesale replacement of existing practices. Understanding these directions can help guide the development of AI as a complementary tool that strengthens mental health care.

One emerging trend is the development of AI-supported group therapy models (Gazit, 2025). Traditionally, group therapy requires careful facilitation to ensure balanced participation, emotional safety, and constructive interaction. AI tools may support these processes by assisting with participant matching, identifying shared themes, and offering reflective prompts between sessions. For example, AI systems could help identify common stressors among students or employees and inform structured group discussions facilitated by trained professionals. Although AI cannot replace the human relationships central to group therapy, it may enhance coordination and continuity of support.

Another promising direction is the use of predictive analysis to support prevention. By analysing patterns in behaviour, self-reported mood, and engagement over time, AI systems may help identify early signs of

psychological distress before they escalate (Rehmat & Ejaz, 2025). In educational and workplace settings, these insights could inform preventive interventions, such as targeted workshops, counselling referrals, and stress management programmes. Predictive approaches may help shift mental health care towards a more proactive and preventive model. However, careful safeguards are necessary to ensure that these practices do not lead to labelling, stigma, or inappropriate surveillance.

A third important trend involves the development of culturally adaptive AI systems. AI-based mental health tools have often been designed within specific cultural contexts, which may limit their relevance to diverse populations. Future development efforts may increasingly focus on adapting language, metaphors, and therapeutic approaches to reflect different cultural norms, values, and communication styles. In multicultural societies and international educational settings, culturally responsive AI has the potential to reduce barriers to engagement and strengthen user trust (Naidoo & Chadha, 2025). Achieving this goal requires inclusive data practices and collaboration with diverse communities, cultural experts, and mental health professionals.

Potential Areas for Future Research

The expansion of AI in therapy highlights several important areas for future research. One key area involves evaluating the effectiveness of AI supported interventions across different populations and contexts. Early findings suggest potential benefits for mild to moderate distress. More rigorous research is needed to understand long-term outcomes, limitations and unintended effects. Comparative studies that examine AI supported, humanize and hybrid models can provide valuable insights into what works best for whom (Fenwick & Molnar, 2022).

Another important research direction focuses on human and AI collaboration. Future studies should examine how therapists and AI systems interact in practice together not as different units. Questions such as how therapists use AI generated insights, how clients respond to blended care models and how trust is negotiated within these systems are central to understanding the real world impact. Research in this area can help identify best practices for integration while preserving ethical and relational standards.

Cross cultural adaptation represents a further critical research area. Mental health experiences are shaped by cultural beliefs, family structures and social expectations. AI systems trained on narrow or homogeneous data sets may struggle to interpret distress accurately in diverse contexts. Research that explores how AI tools can be adapted, localized and validated across cultures is essential for ensuring equitable mental health support. This is particularly relevant in international education, global workplaces and multicultural communities.

There is also a psychological dimension to how clients relate to AI-based tools (De Freitas, et. al, 2023). For some individuals, AI may feel safer and less judgmental. For others, it may feel impersonal or insufficient. Understanding these differences requires sensitivity to individual preferences, emotional needs and stages of help seeking. AI has the potential to strengthen mental health systems by extending reach, supporting professionals and enhancing preventive care. However, its value depends on ongoing reflection, ethical vigilance and a clear commitment to human-centred practice. As therapy continues to evolve, the challenge lies not in choosing between human or artificial intelligence but in designing systems where both contribute meaningfully to psychological well-being (Pandey, 2024).

CONCLUSION

Looking forward, the future of therapy lies in balance rather than substitution. AI offers valuable tools for expanding access, supporting prevention and informing practice. But, it cannot replace the human capacity for empathy, ethical reasoning and cultural understanding. Mental health care remains fundamentally relational grounded in the recognition of human vulnerability and resilience. As therapy continues to evolve in the AI generation, preserving this human foundation will be essential for ensuring that technological progress serves rather than reshapes the core purpose of therapeutic care. In conclusion, AI-supported therapy should be understood not as a departure from traditional practice but as an extension of it. Guided by ethical awareness, professional judgment and cultural sensitivity, AI can strengthen mental health systems while reaffirming the irreplaceable role of human connection in healing and support.



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