Season 3 **07**

Algorithms, Chatbots and Big Tech

Navigating the legal and ethical dilemmas around Al and Digital Mental Health

Tania McMahon

Welcome to Digital Mental Health Musings, a podcast series from the e-mental health in practice initiative, providing health practitioners with the latest news and developments in digital mental health services and resources.

eMHPrac acknowledges the Turrbul and Yuggera people, the traditional custodians of the land on which we bring you this conversation. We acknowledge elders past and present, and honour their continuing connection to land, culture and community and that it's these connections that are intertwined in indigenous mental health and social and emotional well-being. We acknowledge the strength and resilience of all First Nations people and communities since colonisation of their unceded lands.

Hello and welcome back to Digital Mental Health Musings. I'm your host, Dr Tania McMahon, and today we're delving a little deeper into, well, the topic of the hour, the world of AI, algorithms and chatbots. But, more specifically, we're talking about the legal and ethical principles and dilemmas that can help inform the use of this new technology within the mental health session.

So at eMHPrac and on this podcast, we profile evidence based digital mental health tools and services developed by publicly funded medical and educational institutions. Many of these are co-designed with people with lived experience. All are free and low cost national services that have undergone really rigorous evaluation within a a medical ethical framework. But increasingly, and and particularly since the pandemic, more people are being exposed to commercial digital therapy, whether that's through biometric data collection via smart watches and phones, or through targeted online advertising for paid digital mental therapy apps and subscriptions through social media, or simply by searching for self help online. People are now being offered digital mental health therapy products that have been created outside of the healthcare setting and without the promised duty of care that the healthcare system brings. Now, of course, while health professionals are governed by their own ethical obligations, how do they help clients navigate these products and services developed by companies and individuals that might operate through a different ethical lens?

We've all been hearing about the rise of big tech, AI, algorithms and chat bots, and as these technologies become more established, crucial questions have emerged among mental healthcare professionals. Is commercial commercial use of AI in the mental health settings safe? Is it ethical? What protections could help ensure privacy, transparency and equity as these tools are increasingly used across society?



One person who's been examining these issues is Dr Piers Gooding. Piers is a Senior Research Fellow at the University of Melbourne Law School. He's a socio legal researcher and his work focuses on the law and politics of disability and mental health with an interest in algorithmic and data-driven technology. He's also authored books, journal articles and has written for The Conversation about technology and mental health, and he's on the editorial editorial board of the International Journal for Mental Health Capacity Law.

So Piers is joining me today to unpack some of the ethical and legal issues around AI and the use of algorithmic data in mental health. Piers, thanks so much for being here. Welcome to the show.

Piers Gooding

You're welcome. Thank you so much for having me, Tania.

Tania McMahon

So, you've written extensively on the, the intersection between digital mental health law and ethics, and I, I wanted to ask you first. What drew you to this field in particular? Why did it become important for you to examine the social, legal and ethical implications of digital mental health?

Piers Gooding

Yeah, thanks for asking. It's a interesting question. I mean, my background as as you mentioned is as a socio legal researcher. So that means I've got an interest in looking at the law in its social and political context. And for the last 10 years plus, I've been looking at mental health related law and policy. That's really an area that I'm quite interested in and and and I suppose deeply passionate about it in a lot of ways. And I suppose, despite looking at that in the last few years, I I sort of saw the emergence of digital technologies that really hadn't received attention from legal scholars, but which I thought warranted attention.

I had been looking at the Convention on the Rights of Persons with Disabilities, which is a major UN Human rights convention and it has major implications for laws concerning mental health, whether in criminal law or in laws concerning civil commitment and involuntary treatment. But I also think that a lot of the lessons from human rights and a lot of the lessons from the broader field of law concerning mental health had a lot to offer to this emerging area of digital technology. That was, that was springing up in in the mental health context.

So around 2018/19, I sort of thought well, why don't I just start dipping my toes in the water? And I wrote a brief article trying to survey the field and map the legal issues concerning digital technologies in mental health and then applied for a little bit of funding to explore it further. And then in the midst of all that COVID happened, and as you're well aware, and I'm sure your listeners are too, it's served as a bit of a rocket fuel for accelerating digital mental health technologies around the world. And so with that, the issues proliferated, and in that time, I suppose the last five years, I've just seen almost monthly some kind of issue arises in, in media around something that's ethically or legally

DIGITAL MENTAL HEALTH MUSINGS



5

problematic in in the in the broad and expanding world of of digital mental health technologies.

And you mentioned it in your introduction, but I was quite interested in some of the commercial drivers of the field and the vast sums of capital, I suppose, that have been invested in digital mental health that have probably flowed from Silicon Valley and the kind of broader rise of the information economy. I mean, now that the biggest companies in the world are the likes of Apple and Microsoft, some of whom have bigger sort of profit margins then you know some countries have GDP. So these are massive entities that are changing our relationship with the internet and generating and trading in more data about us than ever before, and a lot of that data concerns behaviour which has a sort of natural alignment with questions about measuring mental health.

So I mean, just as one example of the amount of capital being invested, in 2021, digital startups focused on mental health reportedly secured more than \$5 billion in venture capital, which was more than double for any other medical issue. And I think it goes back to that question of of well, why? Why mental health? Why is it receiving double any other medical issue? And I and I think it's that question of behavior and the kind of markers that our whole information economy is designed to identify are matters relating to our behaviour, and I suppose that can be used in in the mental health context to to try to address people's distress or, or , or direct support to people as as they need it.

So given all of that, I just saw a real lack of legal scholarship in the field and I thought it would be an interesting place to explore and it has been thoroughly interesting and I've been able to connect with some some wonderful scholars all over the world as well as practitioners. And one thing I like about the space so much is that it's really interdisciplinary, you know? You can't really talk about it without speaking with people from psychology and psychiatry and computer science and law and media studies. And then there's lots of organizations representing mental health service users who are quite interested in this question as well. So the really rich discussions happen with all of those people around the table often.

Tania McMahon

Yeah. And, and you're right, it really is a an exciting area to be in because it really feels like it's changing month to month. And yeah, and it it really is a double edged sword.

You saying before you know we've had this really massive acceleration in this space from COVID. We've noticed that too as as clinicians and and health practitioners working in in mental health, there's been this huge proliferation of digital tools and services and products available, which is great in terms of providing equitable. You know, more equitable access to people. But at the same time the, the ethical implications of that, the the other side of the sword has also been just as overwhelming, and we're having, we're all having trouble keeping up with what this means for us and and what some of the pitfalls might be. And so we're so interested to be able to hear your insights, in particular in this emerging space.

You've been looking at the, at the social implication of a really broad range of technologies



in mental health. So obviously some of the longer standing categories that people might be familiar with, like online counselling services, to the more recent and and emerging technologies like biometric monitoring and then AI machine learning, which you know has claimed to be able to predict risk of self harm and predict certain diagnosis through social media use and and things like that. The field is moving at an incredibly rapid pace. And you've pointed out in your work that technical technological change makes it possible for people to act in new ways towards each other, where these actions need to be governed in ways for which there are no precedents. Can you tell us a little bit more about what you mean by that?

Piers Gooding

Yeah, it's a really interesting question and and that's the, I think one of the first lines from probably the 1st paper that I wrote on the whole topic. And I'd say my views have changed somewhat, but I think the, the, the truth of that statement stands and that is that you know technology changes in in ways that our regulatory and legal systems may not be able to catch up with, so there there may not be appropriate regulatory safeguards to identify when data concerning mental health is being misused.

But at the same time, since I've written that, I've rather come to a different conclusion or, or a way that I would frame it slightly differently. And that is to say that it is a bit of a myth that technology outpaces law. And I think it might be a myth that is often advanced by technologists who may be overlooking the law because you don't need a specific legislation concerning digital mental health, for example. And the reason I say that is because digital mental health is very broad and it is going to occur in a multitude of areas. So it might occur, for example in teletherapy and in, and and rules around teletherapy could simply be governed by Australian Health Practitioner regulation and ensuring that health practitioners have sufficient credentials and and consumer protection law where anyone presenting therapy as a service needs to be very clear about the credentials of the of the person who who is going to be providing it online. So there you have health regulation and consumer protection law. Two different areas of law that needn't change to to be enforceable, or to still apply. But which may need to be applied in different context. And you can see regulators starting to look at how they can apply existing laws to to new practices.

So in the US, for example, We, we were discussing large commercial providers of teletherapy, there's a company called Better Help, which you have probably heard of, and many of your listeners, if they are podcast listeners, will probably have heard of because they're often advertised at the beginning of of podcasts. Or at least there was a huge range of advertisement in in that domain of late. But that company was fined \$7.8 million by the Federal Trade Commission of the US for allegedly and, and the company has since acknowledged and have agreed to pay, for sharing personal data of its users with third parties, and particularly big social media companies like Facebook, TikTok and others, when they had explicitly promised service users that they would not share that information. So there you have again, an old law around misleading conduct, and and deceptive conduct simply being applied in the in the new context of digital technologies. And certainly it required some creativity on the part of the regulators to have a look at what they were



were promising and then use some technical techniques to identify that third parties like Facebook, were receiving sensitive personal data, but at least it it reveals to us that we don't necessarily need new laws but we do need robust application of existing laws to the new contexts of service provision, of product sale that is facilitated by the digital economy, I suppose you could call it.

OK, so let me make another caveat. And that is that in some instances, perhaps you, you, you, you will need new laws and and that's where you really need a rich discussion between, I suppose people who are knowledgeable about the field, legal scholars and and and lawmakers, service users and others where, where, where it might be important to put in extra protections. And I suppose we're seeing that in the revision of things like privacy law and data protection law, both of which are subject to A round of reform in Australia. And, and those are areas which are uniformly agreed to require law reform in order to address the contemporary possibilities of of new technologies, but let my overarching message be that we need to apply the current law, and there are many current laws that are apply and and arguably are are being breached. And then in some limited circumstances, it's likely that there will need to be new forms of of governance and and legal oversight.

Tania McMahon

I must say that's very reassuring to hear because as a a health practitioner and most of us don't have very detailed legal knowledge, it can be easy to think that these new technologies, which which we're just trying to to kind of grasp, just escape, you know, all the other laws and and regulations that that we're used to in, in, in our work. So it's very reassuring to hear that for the most part with some creativity and like you said, robust application of of existing laws that, that digital tools and services don't just automatically escape the current laws because, by virtue of being digital. That, that there might be some, certainly some new cases where we might need new laws, but there will be many cases where existing laws will do the job.

Piers Gooding

Absolutely. I I I I really. If there's one message that I could convey, and, and, and that's that's the one. That a lot of these traditional mechanisms of governance, ethical guidelines, professional guidelines, laws that apply regarding health law, consumer protection law, and indeed criminal law when it comes to, you know, negligent sort of divulging of data and so on, really still do apply. And it it would be, I think, to uncritically accept that myth that I think again is is sometimes put forward by people who have a vested interest in in rushing ahead with some of the technology without necessarily hiring an a lawyer to to inquire as to whether it's appropriate or, or being subjected to the kind of critical oversight of existing regulation.

You know, it'll be very interesting to see how Better Help respond to this latest complaint and and subsequent fine and and and whether they will improve their data protection practices. Certainly in other areas of technology, companies that there are examples where people accept those kind of fines as sort of the price of doing business and I certainly hope that's not going to be the case here and hopefully the actions of the FTC will embolden



other regulators to inquire about this area given the sensitivity of the personal data that's at stake.

Tania McMahon

Absolutely. And so I want to chat specifically about a particular digital tool, chat bots in particular because they raise a specific range of of ethical issues like privacy, transparency, accuracy, safety, accountability. Obviously the importance of these ethical issues is only going to grow as the chat bots become more sophisticated. Obviously we could probably spend an episode, you know, unpacking each of those separately. But just focusing, say, on privacy and data collection, what do people need to be aware of in terms of that when it comes to chat bots?

Piers Gooding

Gosh, I suppose with chat bots I've been quite struck of late by some of the developments in 2023, particularly with the rise of these large language models like ChatGPT.

So in June, for example, it was reported that a major US charity that was providing teletherapy to people with eating disorders fired its staff and then replaced them, or introduce the chat bot that used generative AI. So that generative AI is not just the kind of script, you know you put in a prompt and then there's a predetermined script that comes up. That's, you know, using AI as many of of your listeners will well know to come up with text that is seemingly, reasonably , a good response to what has been written. But in that instance the chat bot was deactivated almost immediately because it gave people dieting advice. It was giving dieting advice to users of a of an eating disorder service.

And earlier in the year, there was a a company Coco, an online mental health chat service, which which also attracted controversy by experimenting with large language model chat bots on about 4,000 young people. And service users were notified that some use of a chatbot may occur, but it was clearly poorly understood by users who raised serious concerns after that experiment had happened. And it couldn't be, have been said to satisfy the standards of informed consent.

So these are just some of the issues unfolding and to go back to your question or in in those cases I'm not sure privacy is the key concerns so much as the the provision of kind of advice that couldn't really be seen to satisfy the demands of a of a sort of duty of care or. And and potentially questions around undermining individuals autonomy and dignity by failing to sort of satisfy those high standards of informed consent that we'd like to think really characterize this area concerning very sensitive discussions.

But nevertheless, I suppose those chatbot companies could very easily be, you know, gathering data about individuals who use the service in the same way that, for example, Better Help would. If, if you signed up to something and your e-mail is in their database, well, you'd like to think that that e-mail was being protected and and not sold to third parties, as was the case with Better Help. But Better Help is a company that I've, I've got a figure here. They they generated in in 2022 reportedly over 1 billion U.S. dollars in revenue. Now I think we should take some of those statswith a with a grain of salt



because although they may have generated revenue, there's also that doesn't necessarily tell us what they spent in in outlay, and sometimes these big tech companies like Uber or something, are famously not very profitable because they're spending so much in order to try and get a large market share.

So I think we can take it with a bit of a grain of salt. But at the very least we can identify that that is a huge company that is just, has a huge market share. And, and the fact that they were saying that they wouldn't share your data with third parties and that that they were breaching that promise flagrantly should ring alarm bells for for all of us I think. And and to to be extremely cautious in the way information is shared, if that's really sensitive to you as an individual. So the pessimistic view would be, you know, anything that you type into one of these things you probably should imagine that it could potentially released. Yeah. But maybe that's a, a glass half empty view. But I mean the consequences could be could be quite dramatic if if something did get out.

So I would just yeah recommend caution and and maybe yeah, turn turn the attention to ensuring that our regulators have robust oversight of these kind of operations.

Tania McMahon

And it sounds like what you're saying too is that's just one of several ethical issues that people should be concerned about here that obviously we're putting sensitive data. You know, if you're interacting with the chatbot on a mental health, digital mental health tool, service, that sensitive data might be going somewhere. So there's that privacy issue. But like you said before, with the the example of the the the eating disorder chat bot, there's also many other ethical issues at play here about doing no harm and and providing benefit that are equally as as concerning.

And that doesn't obviously just apply to chat bots too. That's also applicable to all sorts of apps that we're seeing, and apps and products that we're seeing developed in these commercial spaces outside the oversight of the the healthcare system. You know, tracking apps and apps for coping strategies and things like that that people can just access freely. Are there any other sort of major legal and ethical challenges that you're seeing play out in this space?

Piers Gooding

I suppose there are several and I I don't know that I'll be able to describe all of them, but I've looked at, I've written a sort of 90 page report with some colleagues that tries to go through some of them, but maybe another one is is security?

There was an example of a company in Finland who was the largest private provider of psychoanalysis or therapy that it, talk therapy, that it was, it was providing online and it was a company called Vastaamo. And in 2019, Vastaamo was subject to a hacking event in which the the records of 30,000 plus people in Finland were stolen and each one of those individuals received, or at least according to reports by over 20,000 people, received extortion threats where they were asked to pay some kind of Bitcoin into a into an anonymous account under the threat that their their records would be released and the



records included highly sensitive information, including sexuality that hadn't been revealed to family and friends, you know, experiences or thoughts of self harm and suicide. About as sensitive as you could possibly get, and ultimately that data was released and how widely disseminated in the public that was or whether it stayed in some dark corner of the the Internet, I'm not sure. But according to Finland's attorney general at the time, it was potentially the largest criminal case in Finnish history. Just because of the sheer number of victims.

So, again, this should send alarm bells to us. I mean I I, I I I'm. I'm a legal academic and and I suppose we tend towards identifying when things go dreadfully wrong, which which mercifully is very uncommon. So I I don't want what I'm saying to suggest that you know it's it's it's completely. It's so fraught that it's, you know, worth not not entering into because clearly there are extreme, extremely beneficial things that come from online therapy, and there's nothing about the kind of remote connection to a therapist or to someone offering or seeking support that would undermine the kind of power of that therapeutic encounter. But at the very least, these stories should give us pause for for caution.

And and just this year in in Finland, there have been criminal prosecutions of the CEO of that company for negligence or reckless use of of people's personal data. And indeed there there's charges being levelled against the person who they allege undertook the hacking. So what's troubling about that case is that Finland was widely regarded as having some of the most robust health data protection arrangements in the EU. So, so again I think a pause for caution about how our data is stored about individuals, what is recorded, how how accessible it is and and ensuring the safety and security of of individuals who are accessing some kind of support online. That, that's a really big one for me. And I haven't even spoken about discrimination and other things like that, but that's another big one.

Tania McMahon

So many issues to unpack. But and I I think you you make a really good point there that that we should be hearing the alarm bells when we hear stories like this. There should be cause for concern and and caution. But but at the same time realising that this isn't demonising the whole field and going it's all bad, stay away from it because there is such benefit to it.

And that's, you know, part of our role here is is educating people in in just how helpful it it can be for people in in getting the right care to the right people at the right time. But, we at the same time have to exercise caution going forward. Not just barging in with our blinkers on because it is such a new space and right now we're all navigating our way through it and and figuring out ways to to regulate and create safety. So we just have to walk into it cautiously and and encouraging people to ask those questions and think critically about the tools that they're coming across I think is really is really key.

And the the examples you've, you've given are are really fascinating and and a a point I wanted to kind of make about it was that obviously a lot of those are are occurring in the context of other health systems, especially the US health system. We know their system is quite heavily privatised and hasn't has that, like you said really flourishing competitive



market for digital mental health products and you know, they call them digital therapeutics over there. Compared to here in Australia where we've we've had a bit of a different approach. We've invested a great deal of public funding into developing a lot of free nationally available digital mental health services. So, if you if you're looking at the two sort of legal systems with how they're faring with those, I guess different , yeah, healthcare s ystems, how how is the system in Australia faring with those kinds of challenges.

Piers Gooding

Look, I I think in a lot of ways Australia is leading the world, not just in the proliferation of really good practices in the digital mental health space and the investment from government that has driven a lot of that, but also in the kind of governance and oversight. And I, and I'm thinking specifically about the work of the Australian Commission on Quality and Safety and Healthcare and and their standards. Sorry I I must I've gotten the name wrong. Forgive me. And their and their work on the digital mental health standards. Which are really an extraordinary kind of document by global standards to try to create best practice in kind of overseeing and and governing and and having responsible kinds of digital mental health practices.

And I think you're absolutely right that difference between somewhere like Australia and and the US is is pronounced and does create different issues. In, in the US that highly commercial market of healthcare providers means that that data concerning individuals mental health can be far more lucrative, I suppose, and the trade in that data can be far more lucrative where it could be used to target people with advertising for, you know, commercial pharmaceutical products, which is is not allowed here in Australia. So, so the issues are very different. And and thankfully, we haven't seen any kind of major problem concerning the use of digital mental health technologies, where where a company has done something irresponsible or or been found to have violated some kind of law.

So that's really positive and I think it probably comes back to that , one of the points you made during the introduction and and one of the things that I think is so commendable about eMHPrac, is that it's concerned with amplifying the the voices and perspectives of those in publicly funded arrangements that are that are using digital technologies. And I think by virtue of that public governance and the kind of oversight that comes with that sector, there is less likely to be this mentality of moving fast and breaking things, which you know is a is a famous mantra for Facebook or some Silicon Valley company. But which I think everyone could agree, would be wildly inappropriate in in the mental health context.

So I think we very much benefit from the way things have developed in Australia and I'm not suggesting it's it's perfect. I think there have been some some missteps, but I I I do think we have a lot to be grateful for in Australia and and I think there's some really commendable practices that people around the world are looking to.

Tania McMahon

And we're definitely really happy, proud to have the the National Safety and Quality Standards, we spoke to that, that team not long ago. Do you think those standards you know as they stand go far enough to protect consumer safety?



Piers Gooding

Well, I don't think it's possible at this point to you know, definitively say yes or no, and I'm certainly not going to to do so. Because, I think you know it, it remains to be seen. They have been developed in a way that is probably the most consultative of of any that I've seen internationally. And I believe that they are the first main sort of health regulator to come up with a really comprehensive set of standards to try to guide the sector and and on those two points alone, they should be congratulated, heartily and and serve as a bit of a beacon for the rest of the world.

There's an open question, I suppose, as to as to whether they will achieve what what they set out to do and and the proof will be in the pudding as as time goes on and as we see the standards taken up. They have been designed in a really intelligent way where not only can be providers who can afford to go through the accreditation process will be able to do so, but also some of those smaller operations will have a different avenue for gaining accreditation. So it's not going to fall into that problem of only the big providers being able to gain accreditation. So it really leaves room for smaller operators to to try to get gain accreditation under the standards.

There's probably an open question about the voluntary nature of the scheme and whether that will remain effective. You know the government has stayed quite cautious in not wanting to over regulate, so this is arguably a reasonably light touch approach given that, you know, one volunteers to become accredited under the standards and hopefully that will really guide the the the, practices of, of healthcare practitioners in directing patients and and clients to those services that have been accredited.

I suppose in the future, if we have some instances like with the Better Health incident incident in in the US or Vastaamo in Finland, maybe questions will be asked as to whether the standards need to become compulsory in certain respects or maybe compulsory for publicly funded programs. But I think at this point that that that isn't is not a question we can really answer and it also remains to be seen whether the other parts of our laws are going to be able to regulate some of those kind of activities that we've seen overseas that really warrant some kind of intervention. So that would include the Australian Consumer Commission and you know the new data protection and privacy laws that come in and the and the regulators in that space. If they are able to enforce some of the things that would keep companies that aren't looking for accreditation under the digital mental health standards in in line then maybe we've got the balance right in how the regulation happens.

Tania McMahon

So what I'm hearing is that we've got, we've made a really good start here in Australia with what we've got with the standards and and existing laws. And so it, you know, at the moment things are looking pretty good and where we're, you know, we'll wait and see just you know, see how they play out and see how they manage , manage things as they as they develop essentially.

Piers Gooding

That's all right. That's it. I agree with that.



Tania McMahon

Yeah, yeah, yeah. And at the end of the day, it's going to make the job easier for health, health practitioners and clinicians who are in the position of having to make decisions about you know, who to who to refer where and and and that kind of thing.

Along that line, you know coming down to you know what us as health practitioners need to be aware of and and on the lookout for. Considering that a lot of these technologies are already embedded into the fabric of our online interactions, they're already here. They're there. How do we start to build ethical frameworks in into these structures? You know as as health professionals, how do we work with these technologies in the mental health setting in ways that keep people safe? Like what, what kind of stuff do, what kind of ethical principles do we need to consider?

Piers Gooding

Sure. Well, I mean, as a legal researcher who spends a lot of my time in a law school surrounded by books and computers and students, I'm probably not actually the person to answer that insofar as, you know, it's going to be a lot of frontline practitioners as well as service users who are receiving support to to, to try to, I don't, identify what those principles should be.

I suppose one of the privileges of my role is that I've been able to do research on this topic, including collaborating with healthcare practitioners with service user representatives, with policymakers, and even with industry representatives, and in particular, I've had the privilege of working with an organization called the e-Mental Health International Collaborative. It's based in New Zealand, but it's really an international network of for which Australia plays a prominent role that looks at the use of digital mental health technologies. And I suppose it provides a sort of non government organization place for all of these different groups to come together and to try to identify how good practice can can lead the way and and and serve as a standard for other countries and how countries can work together to promote the use of digital mental health technologies where it's helpful.

And and I was the inaugural chair, or co-chair rather, of the Special interest group concerning law and medicine with my my colleague in New Zealand, Mr. Richman Wee, who is a lawyer and an ethicist, and together we drafted a set of themes in in a position statement for EMHIC, and we approached members of the network, the International network, including psychiatrists, psychologists, again service user representatives, ethicists and policymakers and industry representatives, and proposed several themes which were sort of fine-tuned. And, and we reduced them to, well, seven really. The overarching one was close consultation with service users to ensure that kind of oversight and accountability to the very people who this technology is designed to assist. And then there were more broad principles like privacy, accountability, transparency and explain ability, safety and security for the reasons I've discussed earlier. Fairness and non discrimination, which we haven't really touched upon but you know relates to issues of ensuring that people are aren't stuck in in the digital divide where they don't have access to key services because, you know, services have been designed around the use of digital technologies, which may not be getting to the people who need it most, or data being used



against people in ways that may be discriminatory. And then a final principle we we characterised as professional responsibility and evidence based practice.

So these are more themes I suppose than principles, but we hope that they offer some kinds of ways of explaining the use of digital technologies in mental health context, that would be helpful for clinicians. But I suspect, you know, practitioners will be doing their own work in their professional bodies to, to identify ways to really operationalise these principles in, in their own practice and and other principles that we haven't looked at. And you, you mentioned beneficence before and non maleficence and justice and promoting the autonomy of users. All of these are are likely to be relevant.

Tania McMahon

Absolutely. And when it comes to educating our our clients about these kinds of of of issues and helping them navigate digital services if that that's some and if we're, if we're integrating them into into practice. What would you say are some key messages for clinicians and helping clients navigate this space?

Piers Gooding

Gosh, again, I I don't particularly feel equipped as a socio legal scholar, but at least from my perspective, it would be, you know, I think clarity about the kind of evidence base for the practices. Clarity about any concerns around privacy and data protection. And clarity about whether there has been some kind of accreditation or approval by maybe an external body that is ideally publicly funded and and governed, which can identify where there has been good practice or or otherwise.

I know in the US of all places, the Department of Veterans has one of the best in the US for sort of pointing out the evidence base for particular practices identifying privacy protections that exist in particular practices and products. So I think we need those kind of things. And, and here in Australia we have, we have Head to Health and other resources and eMHPrac would be probably where I'd direct people if I was perfectly honest. But that those would be my kind of broad suggestions.

Tania McMahon

Yeah, no, the those are great. And and I think really critical too because there there is a lot out there and and an increasing amount too that looks very shiny and looks like it does, you know, like they'll do a good job and, and, and so forth. But when you, when you dig a little deeper, the evidence isn't there, or the privacy is not there, or you know, some of those really critical critical things that we would absolutely expect in in any other in any other kind of treatment, face to face treatment. They're they're not there for a lot of these digital digital tools.

Piers Gooding

Exactly. You know, I think that's really well put and and and in some ways what you're alluding to is, is maybe that there's a kind of hype that surrounds technological or digital technological approaches, which can sometimes turn off people's critical faculties for reflecting on those matters. Yes, if this was something that was being arranged face to face



would you recommend it to your clients? And what would you need to know to recommend it to your clients? That might be a good place to start, because I think you might might bring a more critical eye to something you know being put on if promises the world.

And my colleagues in at Melbourne University in the psychological sciences and in and in law Professor Nicholas Van Dam and Professor Jeannie Paterson have been doing some really good work on wellbeing apps and mindfulness apps, and have similarly sort of alluded to problems with evidence base, and and problems with the kind of claims that would be being put forward by the apps which aren't being received, perhaps as as critically as they ought to be so. Yeah, keeping that critical eye out and treading cautiously.

Tania McMahon

Yes, as a good note to to finish up on.

Well Piers you've shared some fascinating insights and cases that I think will, will help guide us as help professionals through this, this new wave of digital mental health that many, many big corporations and tech companies seem to be riding. And obviously, AI and and technology in general holds a lot of promise, but ultimately it's going to present certain challenges as well for health professionals. But in in meeting those challenges, you know we as clinicians carry the potential to transform the field. It will require us to obviously increase our awareness and educate ourselves and our clients about how to leverage these technologies safely. And if we can do that, then technology and AI can really change the game for mental health in so many ways.

So yeah, Piers, thanks so much for joining us.

Piers Gooding

You're so welcome. It's been a wonderful discussion and I really appreciate your time. Thanks.

