

Commentary

AI and Mental Health – A Policy Perspective

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The clinical potential of AI to assist mental health, in particular to help diagnose and treat mental disorders, is increasingly well-researched. However, the wider long-term implications of AI for mental health raise important policy questions – from how best to address the potentially harmful effects of social media algorithms to how to ensure the impact of AI on employment is positive rather than negative.

The impact of social media algorithms encouraging eating disorders, self-harm and suicide has already been well publicised. There's also good evidence that job loss is harmful for mental health and evidence that fear of job loss may be harmful. Even where this isn't an issue the pace and nature of change generated by AI can be an issue.

There's currently a policy deficit in this area in the UK, only partially addressed by the Online Safety Act, and with recent government policy decisions affecting employers potentially having the unintended consequence of incentivizing some to use AI to replace staff, with knock-on mental health implications.

There's currently also no powerful national public health voice (following the disbanding of Public Health England) to lead policy thinking here on the implications of AI for the nation's health – suggesting a policy mechanism gap that needs to be filled. This will be important to identify those most at risk and to develop strategies and policies to prepare for and cope with the changes ahead and prevent or mitigate risk for the most vulnerable – so that the positive effects of AI can be achieved, while minimising risk.

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AI – A potential threat to mental health?

The clinical potential of AI to assist mental health, in particular to help diagnose and treat mental disorders, is increasingly well-researched. For example, the efficacy of AI-based chatbots in alleviating depressive and anxiety symptoms was reported in a 2024 analysis of 18 randomised controlled trials.

^[1] However, the wider long-term implications of AI for mental health raise important policy questions.

Harmful Direct Effects

An example is social media algorithms which have led users to content encouraging eating disorders, self-harm and suicide. The suicide of Molly Russell is a well-publicised example, with the Coroner’s report making specific reference to the role played by social media algorithms.^[2] Meanwhile research by the Center for Countering Digital Hate in the US reported that popular AI tools such as ChatGPT generated harmful eating disorder content in response to 41% of a total of 180 prompts, including advice on achieving a “heroin chic” aesthetic and images for “thinspiration”.^[3] The potential to create disinformation, fake news or fake images is another risk factor, contributing to global instability and mental health risks, as seen in the Southport riots in the UK in 2024.

There has been a partial policy response, through the Online Safety Act (2023).^[4] This places new duties on social media companies and search services, to make them more responsible for the safety of users on their platforms, in particular children. For example, encouraging or assisting serious self-harm is now a criminal offence, and the Act also requires providers to specifically consider how algorithms could impact users’ exposure to illegal content as part of their risk assessments. To seek to ensure implementation Ofcom has been designated the independent regulator of online safety.

However, campaigners say the legislation doesn’t go far enough. For example, The Molly Rose Foundation, which focuses on suicide prevention for young people, says, “We are astonished and disappointed there is not one single targeted measure for social media platforms to tackle suicide and self-harm material that meets the criminal threshold in today’s codes despite this being a priority harm.”^[5]

Knock-on effects

One of the most important knock-on effects of AI is on employment. This is important because being in employment (as opposed to being unemployed) generally has a protective effect in relation to depression, psychological distress and general mental health.^[6] In principle AI can help automate repetitive tasks, freeing workers to undertake more interesting work, with potential benefits for mental health and wellbeing, and there is some evidence for this. For example, research in manufacturing in China suggested positive mental health effects where AI is used to improve processes and the working environment rather than displacing workers.^[7]

However, where AI replaces staff, this increases mental health risks. A 2017 study in four European countries, including the UK, looked at the effects on mental health of downsizing. Where employees were internally redeployed and supported through their career change process this appeared to result in no increased risk of psychological ill health. However, unemployment as a result of downsizing increased the risk of anxiety and depression.^[8] Where those affected are the lowest skilled (who may struggle to find alternative employment) this may also widen health inequalities, with further mental health implications.

Even if people are currently employed, fear of potential job losses due to AI is a further risk factor. A recent US study reported that greater job security was significantly associated with reduced odds of experiencing serious psychological distress and experiencing anxiety.^[9] The converse presumably also applies i.e. fear of job insecurity due to AI increases the risk of serious psychological distress and anxiety. A further risk factor is where the pace and nature of AI-facilitated changes at work increase pressure on staff. For example, research reported in 2024 described 'cognitive dissonance in banking employees amid the Artificial Intelligence Revolution.'^[10]

Some occupations are currently less at risk than others. For instance, AI doesn't yet have the ability to cut hair, although it can take on ancillary roles in hairdressing, such as appointment management. However, creative occupations more generally are not immune from risk. The 2023 strike by US screenwriters and actors, was partly due to concerns that unregulated use of AI could replace them. Problems can also arise for new staff joining an organisation increasingly reliant on AI. For instance, it is estimated that AI could automate up to 95% of accountants' tasks, particularly repetitive bookkeeping and data analysis. This means junior accountants may struggle to gain experience if lower-level tasks are automated.^[11] To minimise the negative mental health impact, alternative progression opportunities will be needed.

AI also increases the risk of graduate unemployment, with potential mental health implications for a generation already reporting a higher prevalence of mental ill health. For example, in June 2025 *City AM* reported that the four biggest accountancy firms in the UK were not only cutting the jobs of existing staff but cutting back on graduate recruitment, with Generative AI tools like ChatGPT increasingly being used to automate administrative tasks usually performed by entry-level employees.^[12]

From a policy perspective, one potential concern here is that of the unintended consequences of measures in other fields that may unwittingly increase the risk of AI displacing staff. As an example, the UK government's Employment Rights Bill is currently going through Parliament. Once it becomes law it will remove the qualifying period for claiming unfair dismissal, for taking parental leave and for taking paternity leave as well as other measures to increase employment rights.^[13] This is well-intentioned. However, it coincides with an increase in the National Living Wage three times higher than inflation and with the well-publicised increases in employer National Insurance (NI) payments. As the Oxford University Centre for Business Taxation has observed, the increases in NI payments mean that, 'over time, workers are likely to face wage cuts or job losses'.^[14] The government's three measures are collectively driving up employer costs while increasing employee rights. One unintended effect may therefore be to incentivize employers to increase their use of AI to replace staff, to avoid the increasing costs and legal implications of employing staff.

Public Health Policy Implications

In 2013 (when the government transferred local public health staff from the NHS to local authorities) public health's focus was still very much on physical health, through services such as smoking cessation and obesity prevention – rather than on the impact of AI and its mental health implications. Eleven years later, with a changing world and rising health inequalities, the policy focus needs to be on both physical and mental health, while the rise of AI (including through social media) requires action at a national and international rather than purely local level. For example, implementation of the Online Harms Act needs to be closely monitored and further regulation considered to keep pace with AI's development.

Public Health England previously had a national role and voice and would have been potentially well placed to respond to the health policy issues arising from AI. However, it was disbanded by the government in 2021 and by early 2024 the *Health Services Journal* was reporting 'huge concerns' about the effective dismantling of its partial successor, the Office for Health Improvements and Disparities.^[15] At a time when the need for a national focus and response to AI and mental health is becoming ever

clearer, the national public health voice has been drastically reduced. The new Labour government may offer some hope but its mental health policy focus is currently primarily clinical – to appoint more mental health professionals for early diagnosis and treatment, rather than considering the underlying causes of mental health problems and considering emerging risks, such as AI, in order to develop relevant preventative policies.^[16]

This suggests it is time to reinvigorate public health's national role to complement its current local authority-based work – with the implications of AI for the mental health of employees at the forefront. A starting point would be a review, in partnership with occupational health experts, of which sectors and which jobs are already affected by AI, which are most likely to be affected over the next ten years, and the mental health implications – including any demographic groups or communities at particular risk. Interestingly there may be potential to use AI to accelerate this review. Given evidence of AI assisting secondary prevention of mental disorders, a complementary approach would be to explore the potential of AI to support primary prevention. From these reviews, strategies and policies can be developed to prepare for and cope with the changes ahead and prevent or mitigate risk for the mental health of those most vulnerable – so that the positive effects of AI can be achieved, while minimising risk.

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