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An Interpretive Description Study of Clients' Experiences of Integrating Artificial Intelligence-Based Mental Health Support With Face-to-Face Counseling

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the Introduction paragraph beginning with "The appeal of AI-based mental health support is closely related to several characteristics that differ from conventional counseling," the authors appropriately identify immediacy, repeatability, and reduced interpersonal exposure. However, the theoretical explanation for why these characteristics may influence psychological disclosure should be developed more explicitly. The subsequent findings identify "greater control and reduced interpersonal exposure" as a major theme, but the Introduction does not sufficiently establish a conceptual framework for interpreting this phenomenon. The authors could strengthen the rationale by discussing perceived anonymity, social-evaluative threat, self-disclosure, psychological safety, and control over conversational pacing as possible mechanisms. This would create stronger continuity between the literature review and the empirical findings and would also prevent the discussion of anonymity from appearing retrospectively constructed after the themes were identified.

The Introduction states that "The relationship between AI and therapeutic processes therefore cannot be adequately understood solely by asking whether AI responses are accurate or whether users are satisfied with them." This is one of the most important conceptual statements in the manuscript and should be expanded. The authors should explicitly identify which therapeutic processes are considered relevant to the present study, such as therapeutic alliance, rupture and repair, emotional attunement, corrective interpersonal experience, collaborative formulation, accountability, and therapist responsiveness. At present, several of these concepts appear later in the Findings and Discussion, but they are not adequately operationalized in the conceptual background. A clearer articulation of the human therapeutic functions against which participants evaluate AI would make the study's contribution more precise and provide a stronger conceptual foundation for the later conclusion that AI occupies an "intermediary psychological space."

In the final portion of the Introduction, the authors state that "Interpretive Description offers a particularly appropriate methodological framework for this purpose because it is oriented toward generating clinically meaningful understandings of complex experiential phenomena rather than producing purely abstract theory or descriptive summaries." This methodological justification is appropriate but too brief for a study explicitly positioned as Interpretive Description. The authors should explain the disciplinary and epistemological assumptions of Interpretive Description, including its applied clinical orientation, inductive reasoning, attention to patterned variation, and emphasis on producing knowledge useful to practice. The manuscript should also explain why Interpretive Description was selected instead of phenomenology, reflexive thematic analysis, grounded theory, or qualitative description. This is particularly important because several analytic procedures described later—coding, constant comparison, theme development, and saturation-like language—could otherwise be interpreted as generic thematic analysis rather than a clearly executed Interpretive Description study.

In the Study Design and Participants section, the manuscript states that the study "included 24 adult clients who had experience of receiving face-to-face psychological counseling while concurrently using at least one AI-based mental health support application or conversational system." The recruitment procedure requires considerably greater methodological detail. The authors should specify the geographical regions or counseling settings in England from which participants were recruited, whether recruitment occurred through NHS services, private practices, university counseling services, community organizations, online advertisements, or multiple channels, and who initially approached potential participants. The manuscript should also describe the number of individuals screened, the number excluded or declining participation, and the reasons for exclusion where appropriate. Without this information, readers cannot adequately assess possible self-selection bias or determine whether the sample disproportionately represents technologically confident clients who already held favorable attitudes toward AI.

The eligibility criterion stating that participants must have "independently used an AI-based mental health support tool for at least four weeks during the same period" requires further justification. The manuscript should explain why four weeks was selected as the minimum exposure and whether a minimum frequency or intensity of AI interaction was required. Someone who used AI twice during four weeks may have a substantially different experiential basis from someone who interacted with it daily. The authors should therefore provide a more explicit operational definition of meaningful AI use. It would also be helpful to clarify whether participants were required to have used AI specifically for their primary counseling concern or whether any mental health-related use qualified. This methodological clarification is important because the study interprets AI as integrated with counseling, yet concurrent use alone does not necessarily establish substantive integration.

In the Findings section, Table 1 presents participant counts for each theme, for example, "Recognizing the emotional and contextual limits of AI … 22" and "AI as an in-between-session holding space … 21." The use of numerical frequencies within a 24-participant Interpretive Description study requires careful justification. Frequencies can help communicate distribution, but they can also imply quantitative prevalence or hierarchical importance, which is not necessarily consistent with interpretive qualitative analysis. The authors should explicitly state that these counts indicate the number of participants whose narratives contributed substantively to a theme and do not represent prevalence estimates or statistical weighting. More importantly, themes should be supported with illustrative participant quotations. At present, the Findings rely almost entirely on researcher summaries and tables; the absence of verbatim participant excerpts substantially weakens qualitative credibility and makes it difficult for readers to evaluate whether interpretations are grounded in participants' accounts.

Authors revised and uploaded the document.

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1.2. Reviewer 2

Reviewer:

In the Study Design and Participants section, the authors write that "Recruitment continued alongside data analysis until sufficient information power and conceptual depth had been achieved and additional interviews were no longer making a meaningful contribution to the developing interpretive account." This wording appropriately invokes information power, but the manuscript should explain how the research team actually judged that point. Please specify what indicators were used to determine adequate information power, such as sample specificity, quality of dialogue, conceptual density, recurrence of patterns, variation among cases, and adequacy in relation to the study aim. The phrase "additional interviews were no longer making a meaningful contribution" resembles saturation terminology and should be used cautiously in Interpretive Description. The authors should clarify whether they are claiming code saturation, meaning saturation, conceptual sufficiency, or simply adequate interpretive depth, because these concepts are methodologically distinct.

The Methods section provides participant consent information but does not currently present a clearly identifiable research ethics approval statement. Given that the interviews involved mental health experiences, counseling histories, potentially sensitive disclosures, and use of AI for emotional support, the manuscript should report the name of the approving research ethics committee, institution, approval/reference number, and approval date where required by the journal. The procedures for managing participant distress should also be described. In particular, the manuscript should explain what happened if a participant disclosed acute suicidality, self-harm risk, serious deterioration, or unsafe reliance on AI during an interview. The statement that participants were informed about confidentiality and withdrawal is insufficient for a study involving potentially vulnerable individuals. A clear distress and risk-management protocol would substantially strengthen the ethical reporting.

In the Data Collection Tools section, the manuscript states that "The principal data collection instrument was a semi-structured interview guide developed specifically for the study." The authors should provide substantially more information about the development and refinement of this guide. Please report who developed the questions, whether the guide was reviewed by qualitative researchers, practicing counselors, digital mental health specialists, or individuals with lived experience, and whether pilot interviews were conducted. If pilot interviews were performed, specify whether they were included in the final dataset. Because the study relies heavily on nuanced distinctions among augmentation, avoidance, disclosure, trust, and relational depth, readers need reassurance that these concepts emerged from participants rather than being strongly embedded in leading interview questions. Including representative core interview questions in the Methods or supplementary material would improve methodological transparency.

The Data Collection section notes that interviews were conducted "in a private setting or through a secure online videoconferencing platform, according to participant preference." The authors should report how many interviews occurred face-to-face and how many online, because interview modality may influence disclosure, rapport, perceived anonymity, and willingness to discuss technology-mediated mental health experiences. This is especially relevant to a study whose findings emphasize control over interpersonal exposure. The manuscript should also identify who conducted the interviews, the interviewer's professional background and qualitative research experience, whether the interviewer had any prior relationship with participants, and what participants knew about the researcher's interests in AI and counseling. These details are central to reflexivity and should be reported in accordance with established qualitative reporting standards.

In the Data Analysis section, the manuscript states that "segments of text relevant to the research question were identified and assigned preliminary codes" and that "codes sharing conceptual similarities were progressively grouped into broader patterns and categories." Although this provides a general account of analysis, it remains insufficiently specific to permit assessment of analytic rigor. The authors should provide an example of the analytic progression from raw interview material to initial code, interpretive category, subtheme, and final theme. It should also be clarified whether coding was performed manually or with qualitative data analysis software, which researchers coded the data, and how analytic responsibility was distributed. Since Interpretive Description does not require coder consensus in the positivistic sense, the purpose of collaborative analysis should be explained as interpretive challenge and refinement rather than reliability testing.

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The analysis section reports that "emerging codes, categories, and themes were reviewed and discussed among members of the research team, with disagreements resolved through return to the original transcripts and discussion of alternative interpretations." This is useful, but the manuscript would benefit from a more explicit account of reflexivity. Please describe the researchers' disciplinary backgrounds, professional relationships to counseling and AI technologies, and prior assumptions that could have shaped interpretation. For example, researchers who view AI as primarily beneficial, threatening, innovative, or ethically problematic may interpret participants' accounts differently. The manuscript mentions reflexive notes but does not explain how these notes influenced analytic decisions. A reflexivity statement should therefore be incorporated, including examples of how the team identified and challenged its assumptions during theme development.

Authors revised and uploaded the document.

2. Revised

Editor's decision after revisions: Accepted.
Editor in Chief's decision: Accepted.

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