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A Structural Model of Trust in Artificial Intelligence and Intention to Use Digital Psychotherapy with the Mediating Role of Perceived Usefulness

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the third paragraph of the Introduction, the authors define trust in artificial intelligence as “an individual's willingness to rely on an intelligent technological system under conditions in which its functioning cannot be completely monitored, understood, or controlled.” This definition requires further theoretical elaboration. The authors should distinguish between dispositional trust, situational trust, institution-based trust, and technology-specific trust, subsequently clarifying which conceptualization corresponds to the operationalization adopted in the present study. Additionally, the relationship between trust, perceived technological competence, reliability, predictability, and perceived benevolence should be discussed. Such clarification is particularly important because the selected measurement instrument was originally developed for automated systems rather than specifically for AI-supported psychological interventions.

In the fifth paragraph of the Introduction, the authors emphasize the importance of appropriately calibrated trust and state that “promoting trust should not involve encouraging unquestioning reliance on AI-generated psychological recommendations.” This is an important conceptual observation; however, the distinction between generalized trust and

calibrated trust is not sufficiently reflected in the proposed measurement and structural models. The authors should explain whether the trust instrument employed in this investigation can differentiate appropriate reliance from excessive or insufficient reliance. If calibrated trust was not directly measured, the manuscript should explicitly acknowledge this distinction and avoid interpreting higher trust scores as necessarily indicative of more appropriate or clinically desirable technology acceptance.

In the Data Collection Tools subsection, the authors state that trust in artificial intelligence was measured using an adapted version of the Trust in Automated Systems Scale developed by Jian et al. (2000). The adaptation of an instrument originally developed for general automated systems to the specific context of psychological interventions represents a substantive modification that requires comprehensive psychometric justification. The authors should provide the original and adapted item wording, describe the modifications introduced, and explain how the revised indicators capture trust in AI-supported psychotherapy. Furthermore, considering the inclusion of positively and negatively worded items, the authors should evaluate whether reverse-worded indicators introduce a wording-related method factor and compare the hypothesized unidimensional measurement structure with theoretically plausible alternative factorial structures.

In the paragraph describing the Perceived Usefulness Scale, the authors indicate that the adapted items assess psychological support, emotional difficulties, service accessibility, and psychological well-being. These domains may reflect conceptually distinct dimensions of perceived clinical effectiveness, accessibility, convenience, and general technological utility. The authors should demonstrate that the adapted indicators represent a coherent unidimensional construct rather than several related but distinguishable evaluations. In particular, the complete item wording and expert assessments should be provided, and the rationale for retaining the original six-item measurement structure should be explained. The manuscript should also clearly distinguish perceived therapeutic usefulness from demonstrated therapeutic effectiveness, as participants' expectations cannot establish the clinical efficacy of the investigated technologies.

In the paragraph describing the Behavioral Intention to Use Digital Psychotherapy Scale, the authors specify that respondents evaluated their intentions to use AI-supported digital psychotherapy during the subsequent six months. The justification for selecting this particular temporal interval should be provided, especially because individuals without current psychological difficulties may not anticipate requiring psychotherapy within that period. The authors should clarify whether behavioral intention was assessed under a hypothetical condition of needing psychological assistance or as an unconditional intention to use the technology. This distinction is methodologically important because low behavioral intention may reflect the absence of perceived treatment needs rather than unfavorable attitudes toward artificial intelligence or digital psychotherapy.

In the final paragraph of the Data Collection Tools subsection, the authors describe a forward–backward translation procedure and a preliminary pilot assessment involving 30 participants. However, the manuscript does not report the empirical outcomes of these procedures. The authors should specify the number and professional qualifications of the experts involved in evaluating the translated questionnaires, report quantitative content validity indices where applicable, and describe the criteria used to retain, revise, or eliminate problematic items. Additionally, the results of the pilot assessment, including preliminary internal consistency coefficients, participant feedback, item comprehension difficulties, and modifications introduced following pilot testing, should be reported. Simply describing the planned adaptation procedures does not establish the linguistic or cultural validity of the instruments.

In the opening paragraph of the Findings section, the authors provide an extensive demographic description of the participants, including age, gender, educational attainment, occupational status, and previous experience with artificial intelligence. Nevertheless, several potentially important participant characteristics remain unreported, particularly previous experience with conventional psychotherapy, current perceived mental health needs, attitudes toward professional psychological help-seeking, and digital health literacy. These variables may substantially influence both perceived usefulness and behavioral intention. The authors should clarify whether such characteristics were assessed and, if available, examine their potential confounding effects through supplementary analyses. Furthermore, the occupational categories of employed and self-employed participants should be operationally distinguished to establish their mutual exclusivity.

Authors revised and uploaded the document.

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1.2. Reviewer 2

Reviewer:

In the sixth paragraph of the Introduction, the authors introduce perceived usefulness as a complementary cognitive mechanism through which favorable evaluations of intelligent systems may translate into behavioral intentions. Although this argument is compatible with the Technology Acceptance Model, the theoretical justification for positioning perceived usefulness as a mediator rather than an independent antecedent or predictor of trust remains insufficiently developed. The authors should provide a more systematic explanation of the hypothesized directional relationship between trust and perceived usefulness, including the possibility that favorable usefulness evaluations may themselves contribute to trust formation. The proposed causal ordering should be theoretically justified, while plausible alternative relationships should be acknowledged given the cross-sectional nature of the research.

In the final paragraph of the Introduction, the authors state that "existing research encompasses diverse technological applications, professional populations, educational environments, and mental health contexts." However, the specific empirical research gap addressed by the present investigation remains comparatively broad. The authors should identify more explicitly what previous studies have established regarding trust, perceived usefulness, and AI-supported psychotherapy acceptance and what relationships remain inadequately investigated. In particular, the manuscript should clarify whether its originality lies in the proposed mediation mechanism, the application of technology acceptance theory to psychological services, the investigation of community-dwelling adults in Tehran, or the simultaneous examination of these contributions. Explicitly articulated research hypotheses should also be presented immediately before the study objective.

In the Study Design and Participants subsection, the authors state that "a sample size of 400 participants was specified." However, the manuscript does not provide a sufficiently rigorous statistical justification for selecting this sample size. General references to structural equation modeling requirements and the number of latent constructs are inadequate for establishing sample adequacy. The authors should report an a priori statistical power analysis or Monte Carlo simulation incorporating the number of observed indicators, anticipated standardized path coefficients, expected factor loadings, significance level, desired statistical power, and magnitude of the anticipated indirect effect. The distinction between the planned sample size, recruited sample, eligible respondents, and final analytical sample should also be clearly documented.

In the Study Design and Participants subsection, the authors indicate that participants were recruited through convenience sampling from social networking platforms, psychological counseling centers, and online mental health communities. This recruitment strategy introduces potential selection bias because individuals recruited through psychological service environments and technology-oriented platforms may exhibit systematically different levels of technological familiarity, psychological help-seeking behavior, and trust in artificial intelligence compared with the general adult population of Tehran. The authors should report the number of participants recruited through each recruitment channel, the geographical distribution of respondents, the recruitment period, and the procedures used to minimize sampling bias. The manuscript should also avoid implying that the sample is representative of Tehran's adult population unless representativeness can be empirically demonstrated.

In the Study Design and Participants subsection, the authors state that eligibility required "basic familiarity with artificial intelligence applications." This inclusion criterion is insufficiently operationalized and may introduce subjective eligibility judgments. The authors should explain how familiarity with artificial intelligence was assessed, whether participants were required to demonstrate previous interaction with specific AI applications, and whether a standardized screening question or predefined threshold was employed. Furthermore, the exclusion of individuals without basic AI familiarity may restrict the variability of trust and behavioral intention scores and potentially affect the estimated structural relationships. The methodological and generalizability implications of this eligibility criterion should therefore be explicitly discussed.

In the final sentences of the Study Design and Participants subsection, the authors describe informed consent, confidentiality, voluntary participation, and secure data storage. However, the manuscript does not report formal ethical approval from an institutional research ethics committee. Given that the study concerns psychological services and potentially sensitive attitudes toward mental health technologies, the authors should identify the approving institution, provide the official ethics approval number and approval date, and describe the procedures used to obtain informed consent. The manuscript should additionally

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clarify whether participants received information about the distinction between research participation and access to psychological treatment and whether procedures were established for addressing potential psychological distress arising during questionnaire completion.

Authors revised and uploaded the document.

2. Revised

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

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