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## **“Two Waves of Algorithmic Accountability for Mental Health Apps”**

An algorithmic accountability movement in medicine is critiquing—and starting to address—the biases and other problems that afflict computationally inflected diagnosis and care. While the first wave of algorithmic accountability focuses on improving existing systems, a second wave of research has asked whether they should be used at all—and, if so, who is to govern them. These questions will become increasingly important as “chatbot therapists,” symptom checkers, and self-reporting tools become more common in mental health care.

First-wave algorithmic accountability concerns will focus on whether mental health apps are safe and effective, and whether they adequately represent and respond to diverse communities. Second-wave critics may question whether apps are prematurely disrupting markets for (and the profession of) mental health care in order to accelerate the substitution of cheap software for more expensive, expert, and empathetic professionals. These labor questions are already a staple of platform regulation. One structural safeguard is to assure that most apps are developed as intelligence augmentation for responsible professionals rather than as artificial intelligence replacing them. To achieve that end, health law (including licensure and reimbursement rules, among

other policies) should promote humanistic (rather than behavioristic) mental health apps.