

Children ADHD Disease Detection using Pose Estimation Technique

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ABSTRACT:

This paper explores the current machine learning based methods used to identification Attention Deficit Hyper activity Disorder (ADHD) and Depression in humans. Prevalence of mental ADHD and depression is increasing worldwide, partly due to the devastating impact of the COVID-19 pandemic for the latter but also because of the increasing demand placed on the mental health services. It is known that depression is the most common mental health condition, affecting an estimated 19.7% of people aged over 16. ADHD is also a very prevalent mental health condition, affecting approximately 7.2% of all age groups with this being conceived as a conservative estimate. We explore the use of machine learning to identify ADHD and depression using different wearable and non-wearable sensors/modalities for training and testing. These modalities include functional Magnetic Resonance Imagery (fMRI) Electroencephalography (EEG) Medical Notes, Video and Speech. With mental health awareness on the rise, it is necessary to survey the existing literature on ADHD and depression for a machine learning based reliable Artificial Intelligence (AI). With access to in-person clinics limited and a paradigm shift to remote consultations, there is a need for AI-based technology to support the healthcare bodies, particularly in developed countries.

I. Literature Review

A Gesture Recognition System for Detecting Behavioral Patterns of ADHD: We present an application of gesture recognition using an extension of dynamic time warping (DTW) to recognize behavioral patterns of attention deficit hyperactivity disorder (ADHD). We propose an extension of DTW using one-class classifiers in order to be able to encode the variability of a gesture category, and thus, perform an alignment between a gesture sample and a gesture class. We model the set of gesture samples of a certain gesture category using either Gaussian mixture models or an approximation of convex hulls. Thus, we add a theoretical contribution to classical warping path in DTW by including local modeling of intraclass gesture variability. This methodology is applied in a clinical context, detecting a group of ADHD behavioral patterns defined by experts in psychology/psychiatry, to provide support to clinicians in the diagnose procedure. The proposed methodology is tested on a novel multimodal dataset (RGB plus depth) of ADHD children recordings with behavioral patterns. We obtain satisfying results when compared to standard state-of-the-art approaches in the DTW context.

Auxiliary diagnostic system for ADHD in children based on AI technology: Traditional diagnosis of attention deficit hyperactivity disorder (ADHD) in children is primarily through a questionnaire filled out by parents/teachers and clinical observations by doctors. It is inefficient

and heavily depends on the doctor's level of experience. In this paper, we integrate artificial intelligence (AI) technology into a software-hardware coordinated system to make ADHD diagnosis more efficient. Together with the intelligent analysis module, the camera group will collect the eye focus, facial expression, 3D body posture, and other children's information during the completion of the functional test. Then, a multi-modal deep learning model is proposed to classify abnormal behavior fragments of children from the captured videos. In combination with other system modules, standardized diagnostic reports can be automatically generated, including test results, abnormal behavior analysis, diagnostic aid conclusions, and treatment recommendations. This system has participated in clinical diagnosis in Department of Psychology, The Children's Hospital, Zhejiang University School of Medicine, and has been accepted and praised by doctors and patients.

This survey has gone into detail about machine learning applications in mental health detection. It can be observed that the most popular methods for automatic detection of depression and ADHD is by exploiting imaging data and EEG data. The non-intrusive nature of the EEG provides an argument that it is the preferred choice. This is due to the vast number of methods that can be applied to analysis, while causing no harm to the subject

The biggest drawback about research involving mental health conditions is the size of the dataset. Due to the nature of the conditions, for both ADHD and depression it is difficult to get enough subjects to participate in the research. Furthermore, there are possible implications with protecting the privacy of all subjects due to it being very sensitive data. When subjects have agreed to have their data used, there is also the issue of whether the data can be publicly shared or whether it remains private. Lastly, with regards to ADHD and depression, the spectrum of behaviour is vast, meaning some behaviour is very rigid or too excitatory. Therefore, training a classifier to detect these behaviours can be even harder as there is not enough data to cover such a vast spectrum.

Following on, there is more research being conducted into depression. This could be due to the awareness of the mental health condition being bigger or because of the available datasets. We suggest that for both ADHD and Depression respectively, there is a collective movement for a joint database containing multimodal data for the respective mental health conditions. Within these databases, there would be an established method for protecting the participants privacy such as converting their identity to a number/letter and processing the video/image data using techniques such as the Histogram of Gradients. The file types would be made consistent so that all users would know what to expect and baseline scores would be achieved to provide state-of-the-art comparisons. Lastly, for use in research, an End User Licence (EULA) would have to be signed to protect the organisers and subjects' data that is involved within the dataset. Machine learning is transforming the landscape of ADHD and depression detection and classification through innovative data collection and analysis methods. These encompass imaging techniques, processing of medical notes, and wearable technology, reflecting ADHD's complex nature and showcasing machine learning's potential in diagnosis and treatment.

II. INTRODUCTION:

The examination of EEG characteristics associated with ADHD has attracted considerable attention, resulting in a substantial body of research [25,26,27,28,29,30,31,32,33,34,35,36,37]. The bulk of studies in this field primarily investigate frequency-domain indicators, which often include absolute and relative power estimates across different frequency bands or power ratios across various frequency bands [38,39,40,41,42,43,44]. Although these approaches are computationally efficient and visually interpretable, they lack the ability to evaluate the nonlinear characteristics of EEG brain dynamics. Researchers have used techniques derived from nonlinear dynamics and chaos theory to investigate the nonlinear characteristics of brain dynamics. The measurement of EEG coherence provides significant insights into the functional

connectivity between different regions of the brain. These nonlinear measures capture unique facets of localized brain dynamics and the synchronization interplay between different brain regions. With applications spanning no-task resting states, perceptual processing, cognitive task execution, and various sleep stages, nonlinear time series evaluations of EEG and MEG have provided insights into the brain's fluctuating dynamics [45]. Nevertheless, coherence is insufficient for defining nonlinear interdependencies, especially when it comes to nonstationary time series. Nonlinear synchronization techniques are used in lieu of conventional methods to facilitate the investigation of functional brain connectivity [25].

According to Stam et al. [39], distinct patterns of brain activity exhibit distinct chaotic dynamics. The dynamics under consideration may be described by nonlinear measures, such as entropy and Lyapunov exponents. Research has shown that the use of the approximation entropy metric is particularly advantageous in the characterization of short time series that are affected by noise. The aforementioned capability allows for the provision of a dependable evaluation of dynamical complexity that is not reliant on specific models and is grounded in information theory [36]. References [40,41] are provided. Numerous studies have shown that brain activity, as a highly intricate dynamic system, has a multifractal organization. Previous research has shown the efficacy of using fractal analysis of EEG time series as a viable approach for elucidating the neural dynamics associated with sleep [36]. A study conducted by Fetterhoff et al. [43] revealed that the multifractal firing patterns seen in hippocampal spike trains exhibited increased complexity during the performance of a working memory task by rats. However, these patterns undergo a significant decrease when rats suffer from memory impairment. Zorick et al. [41] showed that multifractal detrended fluctuation analysis has the potential to impede an individual's ability to perceive changes in their state of consciousness. Feature extraction is a fundamental technique in digital signal processing. It involves selecting an appropriate analysis domain, such as time, frequency, or space, then using mathematical functions to derive synthetic and highly informative values from the input signals. The feature extraction methodologies used in electroencephalographic (EEG) investigations focused on the diagnosis and treatment of ADHD in pediatric populations. The researchers were conducted at the executive function level in order to examine the effort involved in identifying neurocorrelates of a diverse range of illnesses, such as ADHD. In some cases, the characteristics that are retrieved in this manner may undergo further transformation and/or calibration in order to enhance the process of detection or classification [46,47,48].

The researchers have used several techniques for feature extraction in the analysis of EEG data. These techniques include statistical features and deep-learning-based features, which have been extensively utilized [49,50,51,52]. The ADHD may also be diagnosed using EEG data, hence necessitating the extraction of characteristics from these signals [53,54]. The linear and non-linear characteristics are extensively used for the purpose of diagnosing youngsters afflicted with ADHD [55], whereas a range of morphological, time domain, frequency, and non-linear properties were extracted from EEG signals in order to facilitate the diagnosis of ADHD in children. AltInkaynak et al. [56] used the utilization of morphological, non-linear, and wavelet characteristics as diagnostic tools for the identification of ADHD in children. In the present investigation, we have further derived temporal domain, morphological, and non-linear characteristics based on prior research [57]. Some researchers used alterations in power that measure by persuing the theta/beta ratio (TBR). This characteristic has been proposed in a number of studies [58,59,60,61,62]. However, TBR has limitations as a universal ADHD diagnostic marker. Elevated TBR is not evident in all ADHD patients, while non-ADHD individuals may also demonstrate heightened ratios [58,62]. Moreover, factors like fatigue or medication can confound TBR, underscoring the need to consider influencing variables. Nonetheless, within a holistic assessment, TBR remains a widely studied potential EEG biomarker warranting ongoing scientific attention.

Some researchers have used the feature selection approaches for the identification of putative characteristics associated with ADHD. The process of feature selection is important as it eliminates redundant features and improves the performance of machine learning (ML) and deep learning (DL) models. The feature selection methods are used to mitigate overfitting issues in the training/testing process. Within the existing body of literature, numerous feature selection techniques have been employed, like PCA [63,64] minimum redundancy maximum relevance (mRMR) [65], mutual information (MI) [66,67], t-test [56,57], support vector machine recursive elimination (SVM-RFE) [65], least absolute shrinkage and selection operator (LASSO) [57], and logistic regression (LR) [57]. Khoshnoud et al. [64] used PCA as a technique for reducing the dimensionality of the data. Through this process, they were able to select characteristics that had a high degree of correlation with one another.

The DL and ML methodologies have gained significant traction in several real applications, such as medical imaging [62] and time series analysis [49,68,69]. The ML techniques have been extensively used to differentiate ADHD from a control group of healthy individuals [56,57,63,65,70,71,72,73]. In a study by Muller et al. [44], a set of five classification models was used. These models consisted of logistic regression, support vector machine (SVM) with a linear kernel, SVM with a radial basis function kernel, random forest (RF), and XGBoost. The models demonstrated sensitivities ranging from 75–83% and specificities ranging from 71–77%. The variables used in this research included the conditions of closed eyes, open eyes, and visual continuous performance test signal power throughout various frequency ranges. Additionally, the study examined the amplitudes and latencies of event-related potentials (ERPs). One possible explanation for the suboptimal efficacy of identifying ADHD lies in the inadequate selection of features for the models. One of the prevailing EEG features often seen in individuals with ADHD is an elevation in power at low frequencies, namely in the delta and theta bands, as well as a reduction in power at high frequencies, particularly in the beta band. In the majority of ADHD detection studies, nonlinear characteristics were retrieved by the authors and then identified using common classifiers, such as SVM, multilayer perceptron, and KNN [74]. In this study, researchers conducted experiments using deep convolutional neural networks and DL networks to assess the diagnosis of ADHD in both adult and pediatric populations [75]. Table 1 summarizes systems-based ML and DL models for detecting ADHD. There are a multitude of mental health conditions that can affect individuals, with various explanations accounting for their occurrence. There is no single definitive answer that has been identified. Conditions like depression and schizophrenia have been associated with hereditary factors and chemical imbalances in the human body. [1]. However, this research mainly focuses on ADHD and depression, the two most prevalent mental disorders in humans. Both conditions often co-occur, with people diagnosed with one being more likely to be diagnosed with the other. In fact, adults with ADHD are three times more likely to have depression, and individuals with depression have a 30% to 40% prevalence of ADHD. [2]. There are also links between ADHD and increased suicidal ideation. Distinguishing between the two can be challenging due to overlapping symptoms and the potential side effects of ADHD medications. Saying this, differences exist in mood motivation and sleep patterns between the two conditions [3]. Both ADHD and depression are very broad topics so to specialize our paper we focus only on wearable/non wearable sensing and machine learning. Due to the link in symptoms, if one machine learning model can accurately detect one of the disorders, there is a chance that the model can be generalised in identifying the other. These connections and the high prevalence rate is what motivated this paper. ADHD is a global concern affecting both children and adults. A 2015 meta-study found the worldwide prevalence of ADHD among children aged 18 and under to be 7.2% with a 95% confidence level. [4]. Notably, cases of persistent ADHD where symptoms that begin in childhood continue into adulthood have a lower prevalence of 2.58%. [5]. This discrepancy is believed to stem from limited access to diagnosis during youth,

suggesting that the real prevalence of ADHD in adults could be higher ADHD diagnosis is influenced by gender, with a male-to female ratio of 2.28:1 observed in a sample of 858 ADHD diagnosed participants. [6]. It's worth noting, however, that this ratio varies across different studies and regions, with a consistent trend of higher prevalence in males. An investigation into under diagnosis in London found an undiagnosed ADHD rate of approximately 12% among 226 participants [7]. This under diagnosis is often due to symptoms being misinterpreted as simple misbehavior by parents and teachers. The British Broadcasting Company (BBC) suggests that the issue of undiagnosed ADHD is widespread. It estimates that around 1.5 million adults in the UK have ADHD, but only 120,000 are officially diagnosed. [8]. In addition, those seeking a diagnosis may face substantial wait times of up to seven years. The ramifications of ADHD extend beyond the individuals directly affected. It impacts families, with studies suggesting that an ADHD diagnosis can lead to higher divorce rates. [9]. A longitudinal study by the University of Pittsburgh recorded a 22.7% divorce rate among families with ADHD, compared to 12.6% in non-ADHD families.

[10]. Moreover, ADHD carries significant economic implications. In the US, the annual cost of ADHD was estimated to range from 143–266 billion, with productivity-related adult income losses being the primary cost factor, accounting for 87–138 billion. [11]. Additionally, a meta-analysis revealed a strong link between ADHD and criminal behavior, with individuals diagnosed with ADHD in childhood being two to three times more likely to be arrested, convicted, or incarcerated as adults. [12]. The process of diagnosing ADHD can be intricate and lengthy, involving comprehensive history collection of an individual's behavior across home and school environments. [13]. However, several challenges can limit the effectiveness of this process, including variability in the subjective judgments made by assessors, inaccuracy or incompleteness of assessment questionnaires, and cultural considerations in the standardization of ADHD tests such as Conners-3. [14]. With these limitations, researchers are exploring alternative methods for diagnosis, including machine learning. Current techniques in ADHD diagnosis research often involve analyzing an individual's brain activity during specific tasks using fMRI and EEG. Such objective measurements, compared between ADHD patients and healthy controls, could offer significant insights. Moreover, further exploration of longitudinal studies could provide valuable knowledge about the cause and progression of ADHD. Mental illnesses, with depression being the most prevalent significantly impact the lives of those affected. As of 2014, it was estimated that nearly 19.7% of individuals aged 16 and above experienced symptoms of depression. [15]. However, the World Health Organization reported that the diagnosed depression rates in the UK were a mere 4.5% as of 2015. [16]. This discrepancy suggests potential issues with the diagnostic process, a concern that further fuels the motivation for this work. Further complicating matters is the fact that 70-75% of people with diagnosable mental illnesses do not receive any treatment [17]. [18]. The consequences of this treatment gap are significant, as evident in workplace-related mental health issues. From 2018 to 2019, stress and depression accounted for 44% of all work-related illness cases. Furthermore, it is estimated that up to 55% of all lost working days were due to mental health conditions. [19]. These lost work days bear a substantial economic cost, estimated between £74-99 billion.

[20]. The situation took a turn for the worse with the advent of the COVID-19 pandemic in 2020. A UK government report using the General Health Questionnaire 12 (GHQ-12) measure showed that average mental distress in April 2020 rose by 8.1% compared to the 2017 to 2019 average. [21]. A study involving 1,300 healthcare providers and 6,200 non-healthcare providers showed that caregivers exhibited higher rates of depression, likely due to the harsh impact of the virus on UK care homes. [22]. The pandemic's toll was also felt in mental health services. Data from South London services revealed that between March and June 2020, there were 1,109 additional deaths among their patients compared to previous years, with 64% of these

fatalities attributed to COVID-19. [23]. Moreover, studies suggest that adults with mental health conditions were more likely to be hospitalized and even succumb to COVID-19. [24]. Given the gravity of these findings, the development and deployment of viable AI solutions for mental health detection are more urgent than ever. There's a recognized strong interrelation between ADHD and depression, although the underlying causes remain elusive some theories propose that adults with ADHD are at an increased risk of experiencing adverse life events, which may contribute to the relationship between these two conditions. This hypothesis was tested in a study of 230 adults diagnosed with ADHD. [25]. The data was processed using linear and logistic regression models, which revealed that individuals who had experienced adverse life events had a higher tendency towards depression. Further research supports the suggestion that an ADHD diagnosis may predispose individuals to develop depression in later life. This notion is backed by a longitudinal study that examined the data of 8310 children with ADHD and found an increased risk of recurrent depression in young adulthood. Furthermore, mendelian randomization (MR) analyses have indicated a possible causal effect of ADHD genetic liability on major depression later in life. [26]. The findings from these studies underscore the complex interplay between ADHD and depression, suggesting an urgent need for more focused research in this area existing work in ADHD and depression analysis using machine learning methods has so far exploited either non-wearable data or wearable data. The most popular data sources to analyse for recognition of both ADHD and Depression are EEG signal data and MRI imaging data. A vast range of machine learning methods have also been employed. Saying this, the most popular classification techniques are Support Vector Machines (SVM) and Neural Networks. SVMs are a powerful supervised machine learning model primarily used for classification or regression tasks. SVMs work by identifying an optimal hyper plane that maximally separates different classes of data in a multi-dimensional space effectively finding the decision boundary that has the largest margin between classes. Advantages of SVMs include their robustness in high-dimensional spaces, effectiveness when the number of dimensions exceeds the number of samples, and flexibility through the use of different kernel functions to capture complex decision boundaries. However, SVMs can be computationally intensive, especially for larged at a sets they're less effective with noisy data where classes overlap, and they require proper tuning and selection of the kernel function and regularization parameter to perform optimally. The lack of a probabilistic interpretation of the results could also be seen as a disadvantage. Neural networks are a class of machine learning models inspired by the biological structure of the brain.

III. Existing System

In the existing system for diagnosing ADHD in children, clinical assessments primarily rely on subjective observations, parent and teacher reports, and standardized behavioral rating scales. These methods often lack objectivity and may result in variability in diagnostic accuracy across different clinicians and settings. Additionally, traditional diagnostic protocols typically involve lengthy evaluations and multiple appointments, leading to delays in diagnosis and intervention. Moreover, the reliance on subjective measures may overlook subtle behavioral cues and variations, particularly in cases where symptoms manifest differently or are masked by other comorbid conditions. As a result, there is a pressing need for more objective and efficient diagnostic tools that can accurately identify ADHD in children and facilitate timely interventions to improve outcomes.

Algorithm-Random Forest (RF)Classifier

Input-Input Dataset of ADHD and Control Patients

Output- Classification of the patient (1-ADHD and 0- Control)

Step 1-Select Randomly, sub-datasets from the training input dataset.

Step 2-Create a decision tree for sub-datasets.

Step 3-Get the prediction result from every decision tree.

Step 4-Perform majority voting or compute average on outcome of Step 3.

Step 5-Select the most voted result as the final prediction.

Fig.1 Random Forest Classifier

IV. Proposed System

They consist of interconnected layers of nodes or “neurons” that can learn to represent and manipulate data. Neural networks are particularly advantageous for their capacity to learn complex, non-linear relationships directly from raw data, making them useful for tasks like image recognition, natural language processing and more. They can handle high-dimensional data and are highly scalable However, neural networks also have some not abled is advantages. They require large amounts of labelled data for training, and they are often computationally expensive both in terms of memory and processing power.

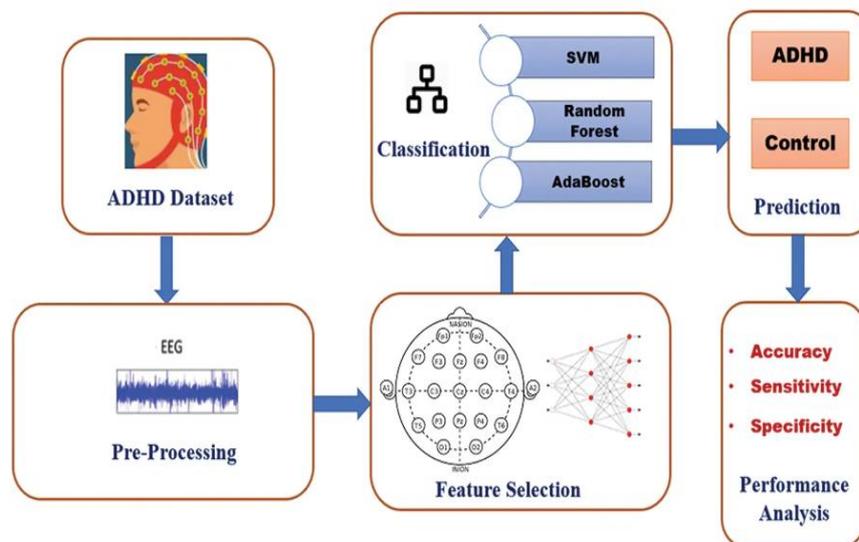
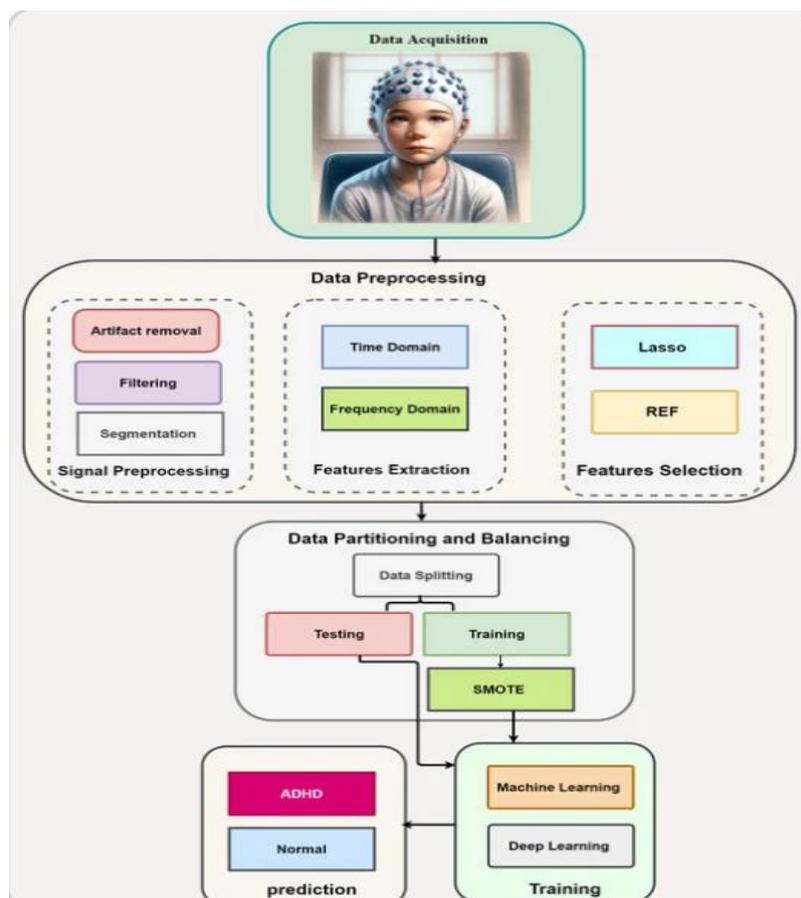


Fig.2 SVM Classifier

V. System Architecture:

The training process can also be challenging due to issues like over fitting vanishing or exploding gradients. Lastly, the ‘black box’ nature of neural networks can make the interpretation of their internal workings and decision processes difficult, posing challenges for transparency and trust. Part of this work has been published at the International Conference on Information Fusion 2022. [27]. This is the complete version of the survey extensively covering the vast majority of work completed in the area with broad explanation of engineering and medical techniques. Not all literature can be included due to page limitations. The authors would like to acknowledge the existence of surveys into detecting Mental Health using Machine Learning [28], [29], [30], [31],[32]. Saying this, they are different to this survey paper in several ways, with the absolute focus of our paper being ADHD and depression.



The rest of this paper is organised as follows. In Section II, the selection of literature is provided, with the parameters for acceptance being discussed. In Section III, testing for mental health conditions is presented for both ADHD and depression. Section IV provides insight into the publicly available datasets that are used in some of the studies analysed throughout this survey. Sections V and VI discuss the existing literature when machine learning has been exploited to diag diagnose ADHD and depression, respectively. Lastly, conclusions representing fields such as epidemiology, neurology paediatrics primary care psychiatry, psychology, and research methodology. The DSM-V includes descriptions, symptoms, and other relevant criteria for specific mental health disorders to aid in diagnosis. Moreover, it provides diagnostic criteria for both children and adults. As a result, the majority of studies referenced in this paper employ the DSM-V to accurately identify individuals with ADHD or depression. The International Classification of Diseases (ICD-11) was created by the World Health organisation at a similar time to the DSM-V [33]. Similarly, it provides a broad range of knowledge on the extent, causes and consequences of human diseases (both medical and mental). The ICD-11 allows for systematic recording, interpretation and therefore analysis of mortality and morbidity data that is collected globally. As both the DSM-V and ICD-11 are very similar in nature there is a push to harmonise both together. To make this happen, in new iterations, the main focus will be to have

VI. Methodology:

- Upload ADHD Pose Dataset: using this module we will upload dataset and to application and then read all dataset values Pre-process Dataset: using this module we will clean, normalized and shuffle dataset values
- Split Dataset Train & Test: using this module dataset will be split into train and test where application using 80% dataset records for training and 20% for testing

- Train SVM Algorithm: 80% dataset will be input to SVM algorithm to train a model and this model will be applied on 20% test data to calculate prediction accuracy
- Disease Detection from Test Image: using this module we will upload test image and then calculate or estimate poses and then applied SVM algorithm to predict whether image is normal or abnormal
- Disease Detection from Video: using this module we can predict ADHD from videos also

VII. Implementation

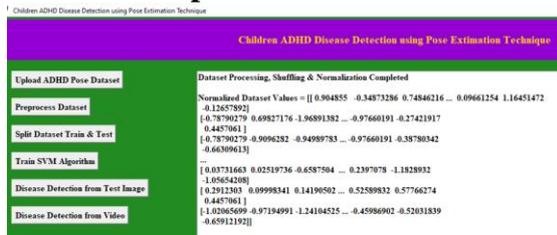


Fig1. Data upload

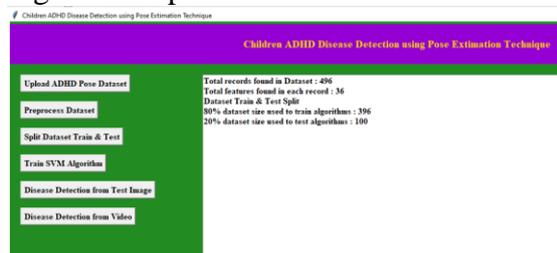


Fig2. Data Preprocessing



Fig3. SVM accuracy & Confusion Matrix

SVM training completed and it got 96% accuracy and can see other metrics like precision, recall and FCSORE. In above confusion matrix graph x-axis represents Predicted Labels and y-axis represents True Labels and green and yellow boxes contains correct prediction count and all blue boxes represents incorrect prediction which are very few. Now close above graph and then click on 'Disease Detection from Test Image' button to upload test image and get below output



Fig4. Prediction of Children Pose

The children pose is estimated and that estimated pose drawn in black window also and image predicted as Normal and similarly you can upload and test other images

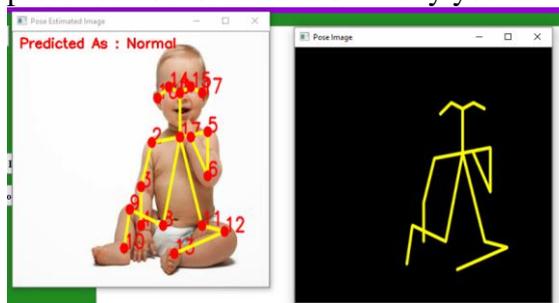


Fig5. Normal Pose

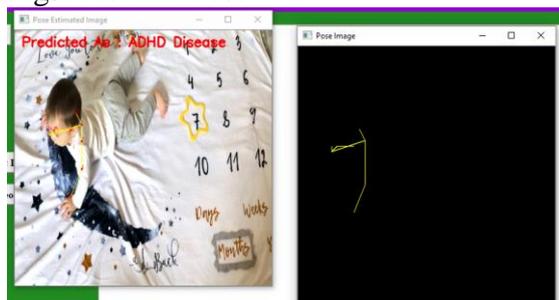


Fig6. ADHD Disease Detected

ADHD diagnosis has seen successful employment of imaging techniques, leveraging SVM and deep learning models. Despite needing large data sets and often dealing with unbalanced ADHD-200 datasets, these challenges are overcome using data augmentation and hypothesis testing frameworks. High classification accuracies from multiple studies reinforce the value of imaging data in ADHD detection. ML has also proven successful in extracting rich clinical information from medical notes, with Decision Trees, SVMs, and hybrid AI models delivering impressive classification accuracy. While there are issues like overfitting and data heterogeneity, these applications highlight the role of AI in clinical decision-making. Incorporating wearable technology provides a non-invasive means of collecting EEG signals for ADHD classification. Techniques such as CNNs and SVMs have been effective in analyzing this data. However, ensuring the models' applicability to new patients and real-world conditions remains a challenge.

For depression detection, machine learning has similarly demonstrated remarkable adaptability and effectiveness. Brain imaging data, clinical notes, sociodemographic data, laboratory data, wearable sensor data, and electronic health records have all been effectively utilized. Algorithms such as SVMs, Random Forest, ElasticNet, Extreme Gradient Boosting, and Artificial Neural Networks have yielded high accuracy rates across diverse data sources. Moreover, machine learning's success in discerning between different depressive disorders could revolutionize personalized treatment

However, the quality of machine learning models is contingent on the quality of data they're trained on. Continued efforts are essential to ensure the robustness and applicability of these models across various populations and settings. The Intelligent Sensing Group at Newcastle University is conducting their own Intelligent Sensing ADHD trial (ISAT) that involves audio-visual data of controls and ADHD subjects. The aim is for this data to be publicly available once correctly processed

VIII. Conclusion

In conclusion, machine learning offers substantial potential for improving ADHD and depression diagnostics. Despite challenges related to data quality, overfitting, and algorithm interpretability, machine learning's ability to identify patterns in complex datasets makes it a

valuable tool in mental health research. Future efforts should focus on creating reliable models, protecting patient data, and ensuring models can be generalized to different populations. Effective collaboration between clinicians, data scientists, and patients will be key to maximizing machine learning's potential in mental health diagnosis and treatment.

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