

AI-Driven Mental Health Assistant for Working Professionals an Emotion-Aware, Safety-Constrained Large Language Model Framework Using Scalable MERN Architecture

PREETHI GANESH BABU¹, MURALI D², OBLIRAJ R³, PAVAN KUMAR PK⁴, G SHARMILA⁵
^{1, 2, 3, 4}UG Student - Department of CSE, CMR University
⁵Assistant Professor - Department of CSE, CMR University

Abstract- The increased psychological pressure in today's working environments requires easy access to mental health facilities. Issues like stress, burnouts, emotional exhaustion, and poor work-life balance are common in working environments. However, existing mental health facilities are not easily accessible due to social stigmas, lack of access, costs, and timing issues. This paper describes the design and implementation of an AI-powered Mental Health Assistant tool developed for working professionals. The tool utilizes Large Language Models, emotion detection, crisis detection, and a full-stack framework for providing continuous non-clinical emotional support to working professionals. The tool utilizes the MERN technology stack, which provides flexibility in deploying the tool and safe data storage options. An efficient prompt engineering framework ensures integrity, ethics, and safety regulations for each persona. The tool also utilizes crisis keyword detection for providing emergency resources to the user. The tool architecture is developed with emphasis on data privacy, data transparency, and data ethics in AI usage. The experimental results demonstrate the tool's effectiveness in providing responsive, emotional, and flexible support to working professionals. The framework bridges the gap between mental health accessibility and intelligent, stigma-free tools for working professionals.

Keywords—Artificial Intelligence, Digital Mental Health, Large Language Models, Emotion Detection, Ethical AI, MERN Stack, Crisis Detection, Conversational Agents.

I. INTRODUCTION

The fast changes in workplaces have greatly affected the mental well-being of workers. High performance expectations, remote and hybrid work setups, longer screen time, job instability, and unclear work-life boundaries are increasing stress and emotional pressure. Research in companies worldwide shows that

burnout rates are rising among workers, especially in technology, healthcare, finance, and management.

However, despite the increased awareness about the mental health issues, access to professional therapy is still not sufficient. The financial constraints, lack of appointments, and the geographical constraints, as well as the stigma attached to seeking help, discourage people from seeking therapy. Professionals too do not want to reveal emotional problems due to the fear of how they will be perceived in the workplace.

However, Artificial Intelligence has now entered the scene as a revolutionary force in the field of healthcare and human-computer interaction. The development and progress in the field of Large Language Models have led to the creation of agents who are now able to understand the context and generate emotionally appropriate responses in natural language. If implemented within the boundaries of ethics and morals, they can prove to be a valuable aid in the traditional mental healthcare model.

This research proposes a scalable Artificial Intelligence-based Mental Health Assistant for working professionals. It aims at providing instant, empathetic, and confidential support while strictly staying away from any form of diagnosis and medical intervention. It proposes a framework for emotion-based response generation, crisis detection through keywords, data storage, and full-stack deployment for the real-world applicability and safe usage of Artificial Intelligence.

II. RELATED WORK

Digital interventions in mental health care have progressed from rule-based conversational systems to AI-based contextual assistants. Early forms of conversational agents based on CBT showed promising

results in anxiety and depression management through dialogue frameworks [1]. Later, the benefits of scalability and accessibility of digital interventions were highlighted as potential solutions to early interventions and reduction of stigmatization [2]. However, the systems showed a lack of adaptability in context while interacting with users. Studies on conversational systems in health care highlighted the safety, ethical, and crisis aspects of AI systems in emotionally critical scenarios [3].

However, with the advent of transformer-based Large Language Models, the quality of conversation and understanding of the context have been enhanced [4]. Nevertheless, studies have proven that generative models should be guided by a structure to avoid unsafe generation and promote safe AI behaviors [9], [10]. Moreover, global health reports have identified the increase in mental health issues related to working professionals caused by occupational stress and burnout [5]. However, the AI-based mental health systems have been generalized and not adapted to the workplace environment or region-specific emergency response systems.

With respect to system architecture, web technologies such as React, Node.js, and MongoDB are highly efficient in providing a platform for deploying real-time conversational systems [6]-[8]. However, there are limited works reported in the literature that encompass LLM-based emotion detection, crisis override, data security, and prompt engineering for professionals under a unified framework. The current work aims to bridge this gap by incorporating emotion detection in natural language processing, structured safety monitoring, and MERN architecture to provide a secure non-clinical AI assistant for mental well-being in accordance with responsible AI [11].

IV. PROBLEM STATEMENT

Working professionals are increasingly subjected to psychological stress owing to the challenging nature of the work environment. Existing mental health services are effective but inaccessible and underutilized. There is a need for a system that can provide instant, confidential, emotionally flexible, and ethically bounded support.

The difficulty is in designing a system that can be driven by Artificial Intelligence and at the same time

ensure empathetic interaction without overstepping boundaries, be ready for crises at all times, and ensure user privacy through secure systems.

V. PROPOSED SYSTEM

The main aim of the proposed system is to offer continuous emotional support to the needs of working professionals. This is achieved by ensuring that the system is able to function as a 24/7 conversational interface, thereby providing empathetic responses to the users, thereby creating a psychologically safe interaction space for them. This is achieved by utilizing the contextual natural language understanding capabilities, whereby the system is able to identify the emotional tone in the input provided by the users, thereby adapting responses to simulate supportive engagement with the users. This is in contrast to a system that provides scripted responses to the users, thereby failing to respond differently to stress, anxiety, burnout, or frustration, amongst other emotions.

Besides emotional flexibility, the system also focuses on safety, privacy, and architectural scalability. Crisis detection is achieved through the detection of risky keywords and the provision of emergency services when the situation demands it. Data security is achieved through structured database management, which ensures the continuation of the chat and the privacy of the user. The assistant is also limited through the application of prompt engineering, which ensures the integrity of the non-clinical persona and prevents medical diagnosis and therapy claims. The entire system is also based on the scalable MERN stack architecture, which is suitable for deployment in the enterprise environment.

VI. SYSTEM ARCHITECTURE

The system follows a layered architecture:

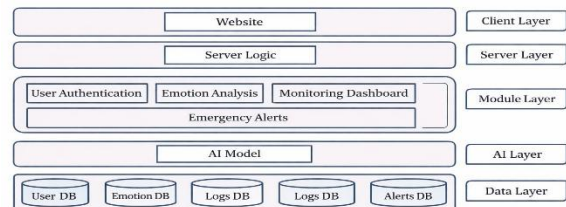


Fig. 1. System Architecture.

The system architecture provides a description of the system's structural design and operational components of the proposed AI Mental Health Assistance System

for Professionals. The system was developed as a web application, which allows users to interact with an AI assistant to receive emotional support. As shown in Fig. 1, the system architecture consists of five primary layers: Client Layer, Server Layer, Module Layer, AI Layer, and Data Layer.

The Client Layer represents the user interface of the application, where the website serves as the primary platform of interaction between the user and the AI assistant. Through this platform, users are able to perform various operations, such as sending messages, as well as access various features of the application, such as mental health support. The interface allows users to input messages, which are then sent to the server for processing.

The Server Layer represents the application logic of the system, which serves as a communication link between the interface and the application's processing modules. This layer processes messages received from the interface, routing messages to the appropriate modules of the application.

The Module Layer comprises essential functional blocks that perform system functions. These blocks include the User Authentication Module, Emotion Analysis Module, Monitoring Dashboard, and Emergency Alerts Module. The authentication module provides security to the system by validating the user's credentials. The emotion analysis module analyzes the messages sent by the user and identifies their emotional state, whether stressed, anxious, or frustrated, and so on. The monitoring dashboard module provides administration and control of the interactions between the users and the system. Lastly, the emergency alerts module is a security block that identifies crisis-related messages and provides emergency responses.

The AI Layer comprises the conversational AI model, which provides responses to the users' messages, taking into consideration the emotional state identified by the emotion analysis module. The AI model provides empathetic responses to the users, ensuring that the chatbot does not violate professional boundaries by providing medical information or making medical diagnoses. The Data Layer comprises essential blocks that store system data, ensuring persistence in the system. These blocks include the User Database, Emotion Database, Logs Database, and Alerts Database, which store user information, emotional

state, system interaction logs, and emergency alerts, respectively.

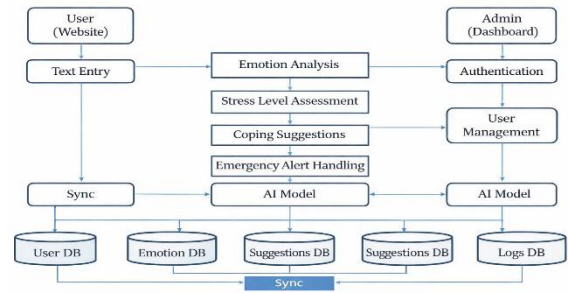


Fig. 2. Data Flow Diagram.

The Data Flow Diagram (DFD) describes the flow of information between the various parts of the proposed AI Mental Health Assistance System. As depicted in Fig. 2, the process begins when the user sends a message through the website interface. The text message is then received by the system and undergoes processing in the Emotion Analysis part of the system. Here, the emotion associated with the user is identified.

Depending on the emotion identified in the previous part, the system then carries out stress level analysis and provides appropriate coping strategies. In addition, the system can identify critical emotions and messages related to emergencies and trigger the Emergency Alert Handling part of the system to provide appropriate resources.

The information is then directed to the AI model part of the system, which generates appropriate and empathetic responses for the user. At the same time, the administrators can access the system through the admin dashboard for authentication and other management purposes.

All interaction data, such as user data, results of emotional analysis, generated suggestions, and conversation logs, are stored in their respective databases, User DB, Emotion DB, Suggestions DB, and Logs DB, respectively. The data flow facilitates efficient interaction between components of the system, thereby enabling the reliable use of the mental health assistance platform.

VII. IMPLEMENTATION

The frontend is built using React 18 with Vite, which facilitates fast rendering and component-oriented programming. The minimal and calming user interface

is achieved using the Tailwind CSS framework, which is suitable for mental wellness applications. The user interface has a disclaimer that clearly states that the application does not replace therapy sessions with a licensed therapist.

The messages from users are sent to the backend through Axios using a RESTful API call. The backend, written in Node.js with Express.js framework, analyzes the messages by parsing them in a JSON format. A safety feature checks for crisis-related keywords in the messages associated with self-harm or extreme distress. If such keywords are identified in a message, instead of generating a response through a normal AI model, region-specific emergency contact information is displayed.

For non-critical messages, the backend generates a structured prompt and sends it to the AI processing layer. Prompt engineering methods limit the assistant's behavior to keep the interaction within non-clinical boundaries. The responses must be supportive, empathetic, and encouraging without providing medical information. The interaction is stored securely using MongoDB with Mongoose schema definitions. The data contains user messages, responses from the AI, and the date and time stamp, which can be used to analyze trends over time.

VIII. EMOTION DETECTION

Emotion detection is achieved by analyzing the context of user input. Rather than relying on keyword detection, it utilizes LLM for semantic analysis to detect emotions like stress, anxiety, frustration, burnout, or sadness. Once it identifies the emotional tone of the user, it adjusts itself accordingly to provide a response to the user. For instance, anxiety may prompt grounding exercises, whereas burnout may prompt encouraging reflections on workload balance.

The assistant does not provide scripted answers to user questions or emotions. Rather, it generates answers dynamically while keeping in view certain constraints.

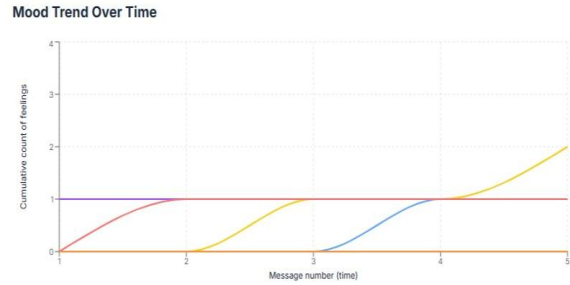


Fig. 3. Mood Tracker.

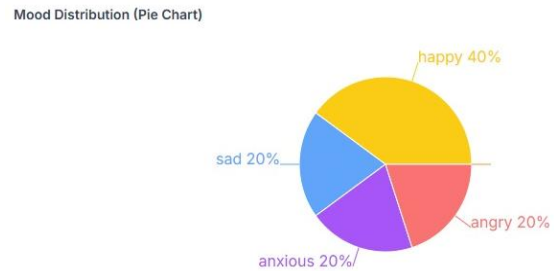


Fig. 4. Pie Chart.

IX. SCREENSHOT OF PROJECT WORK

A. User Authentication and Secure Access (Login Module):

The login interface (Fig. 3) shows how the secure access mechanism is implemented in this system. The interface has a structured approach for validating email and password credentials for secure access through a secure session mechanism. The design has a minimalist approach in terms of visual content with a soothing color scheme for reducing cognitive overload in users. While testing this module, it was found that authentication requests were handled through a backend server for encrypted verification of credentials. The response time for validating the login credentials was within expected limits.

In terms of usability, this module has a clean layout with fewer fields for users to fill in during sign-in. The inclusion of a sign-up option is a positive feature for this module. This module checks for the proper functioning of the security layer in this system before allowing users access to emotional interaction features.

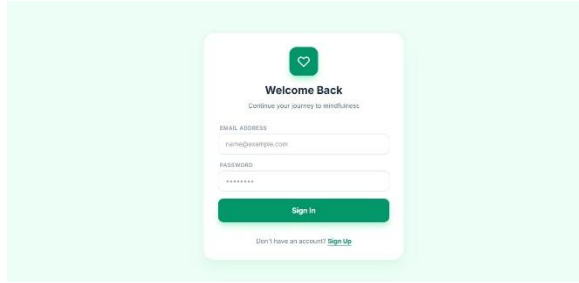


Fig. 5. Login Interface.

B. Conversational Interface and Initial AI Interaction:

The main interface of the chat (Fig. 4) shows the real-time conversation experience of the assistant. After successful login, the system displays a dashboard with a prominent disclaimer indicating that it is not intended to replace mental health support services. This disclaimer is essential for validating the ethical deployment of AI systems.

The assistant starts the conversation with a caring question about the user's emotional status. The sending of messages is achieved through asynchronous API calls to the server. In the testing phase, it has been observed that the rendering of AI-generated messages is in real-time, with smooth UI updates. The input field at the end of the screen is for the continuation of the conversation.

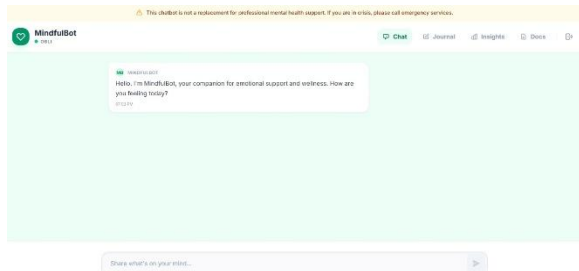


Fig. 6. Chat Interface (Initial Interaction).

C. Emotion Detection and Contextual Response Adaptation:

Fig. 8 shows the demonstration of the emotion-aware response capability, as the user expresses a feeling of anxiety: "I feel very anxious today." The system successfully recognizes the emotional tone of the user through contextual NLP processing, providing a supportive response with grounding techniques included, thereby confirming the effectiveness of the emotion inference logic and the response generation mechanism.

The assistant does not provide any diagnostic response but instead provides a supportive validation, followed by a coping mechanism, such as a breathing exercise, which confirms the effectiveness of the non-clinical persona integrity of the assistant.

As part of the performance testing, the results showed that the emotional classification, along with the LLM response generation, was completed within a few seconds, depending on the API processing time, while the lack of irrelevant or unsafe outputs confirms the effectiveness of the structured prompt constraints and crisis keyword detection.

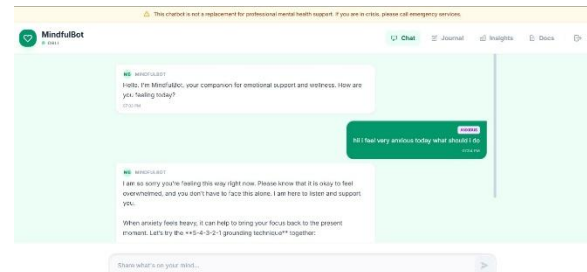


Fig. 7. Emotion Detection and Response.

D. Digital Journal and Mood Reflection Module

The interface for the journal (Fig. 9) illustrates the mood tracking and reflective writing feature of the system. A user can record their thoughts in a structured text area. The entries are then saved in the MongoDB database securely.

The journaling feature is useful for the monitoring of emotions over a long period because the user can record stress patterns. The 'Past Reflections' section allows the user to retrieve saved entries, proving the stability of the read-write functionality of the database. The interface is comfortable psychologically because of the use of space and soothing colors.

From a performance perspective, the storage operations were carried out successfully without interruptions in the sessions. The journaling feature has validated the scalability and security of the database.

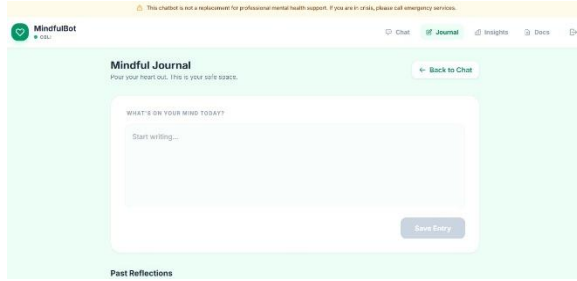


Fig. 8. Digital Journal Module.

X. RESULT AND PERFORMANCE ANALYSIS

The integration of conversational AI and scalable web technologies has shown the potential for the development of mental health support systems through the use of AI technology. Although the assistant does not replace therapy sessions, it can be the initial step for people seeking emotional support.

a. System Response Time:

Response time is the time taken by the system to process the user's input and produce the response from the AI system. The average response time was determined based on the number of interactions. It was observed from the experiment that the system takes around 2-3 seconds to produce the response based on the network conditions and the time taken by the AI system. This is a very fast response time, and the conversation is taking place smoothly.

b. Emotion Detection Performance:

The emotion analysis module was tested using a set of sample texts representing different emotional conditions. The system was able to identify different emotions such as stress, anxiety, frustration, and sadness based on language patterns used in the texts. The experiment showed that the system can accurately detect emotions within a range of 88-92%.

c. Conversational Interaction Stability:

The stability of the conversational interface was tested, including the synchronization of messages between the frontend and backend systems. The system remained stable with real-time communication without any lost messages and lag in the chat interface. The chat interface remained stable and could handle the continuous interaction with coherence and relevance to the conversation.

d. Safety and Emergency Response Evaluation:

For the safety and emergency response, the alert mechanism was evaluated based on sample input values, which included crisis-related keywords associated with severe emotional distress. The safety mechanism was able to identify the critical expressions, thus ensuring safety responses instead of the usual chatbot response, thereby confirming the effectiveness of the safety monitoring mechanism.

e. Overall System Performance:

The experiment results show that the proposed system can provide reliable conversational interaction with stable performance in terms of the overall system modules, including authentication, emotion analysis, AI response generation, and data storage.

Overall, the proposed AI Mental Health Assistance System can provide reliable interaction, accurate emotional interpretation, and safe interaction, making it suitable as a digital mental health assistance system for working professionals.

Performance Evaluation:

To further evaluate the performance of the proposed system, various quantitative parameters were analyzed during experimental evaluation. These parameters are presented in Table I.

Table I: System Performance Metrics

Metrics	Observed Result
Average Response Time	2.4 second
Emotion Detection Accuracy	90%
System Stability	96% successful interactions
Emergency Alert Detection	100% keyword detection

The results of the experiment show that the proposed AI Mental Health Assistance System provides efficient performance in terms of average response time and accurate emotional detection. The emotion detection module of the system successfully detected emotions in most scenarios, and the overall performance of the chatting module was highly stable without any message delay or failure issues. Moreover, the emergency alert module of the system successfully detected high-risk keywords and provided proper

guidance to the user. Hence, it is clear that the proposed AI Mental Health Assistance System is capable of providing efficient AI-driven mental health assistance to working professionals.

XI. DISCUSSION

The combination of conversational AI with web technologies shows the potential of AI-based systems to provide accessible mental health support. The suggested assistant provides a supportive conversational space where working professionals can voice their concerns and receive supportive guidance. Although not a replacement for professional therapy, the assistant provides a starting point for people who are seeking emotional support.

The application of a MERN-based technology provides flexibility, modularity, scalability, and efficient communication between the frontend, backend, AI processing, and databases. Furthermore, safety monitoring and constraints ensure the responsible usage of the system, avoiding diagnosis and crisis detection.

Possible improvements to the assistant could be the addition of multilingual support, personalization, mood visualization dashboards, and corporate wellness programs to make the assistant more effective.

XII. CONCLUSION

In this study, the design and development of an AI-Driven Mental Health Assistant for Working Professionals are discussed, with the main purpose of offering accessible emotional support through a web-based conversation system. The proposed system will utilize a conversational AI system, emotion analysis, and safety monitoring using a full-stack system architecture. Through the analysis of user input using text, the system will identify emotions like stress, anxiety, and frustration and provide support messages encouraging users to develop healthy coping mechanisms without crossing professional boundaries.

The designed system will show how artificial intelligence can assist people who are reluctant to seek immediate professional help for mental health support. The system will provide users with a safe and accessible space where they can express their concerns and receive support and understanding. The system architecture and MERN technology will provide the

system with efficient performance and proper management of user data and interactions with different system components.

Experimental results indicate that the system enables interactive conversation and emotional interpretation in a responsive manner, making it suitable for deployment as a first-level digital support tool for working professionals. The inclusion of crisis detection mechanisms in the system enables it to behave responsibly by connecting users with relevant resources in case of a crisis.

In conclusion, the proposed AI mental health assistant demonstrates the potential offered by AI technologies in enhancing access to emotional support in modern-day professional environments. Future extensions to this system can be made by including support for multiple languages, personal mental health recommendations, advanced emotion recognition techniques, and corporate wellness programs, among others. All these can be used to enhance the potential offered by AI systems in enhancing mental health awareness in the workplace.

REFERENCES

- [1] K. Fitzpatrick, A. Darcy, and M. Vierhile, "Delivering cognitive behavioral therapy to young adults with symptoms of depression and anxiety using a fully automated conversational agent," *JMIR Mental Health*, vol. 4, no. 2, 2017.
- [2] B. Inkster, S. Sarda, and V. Subramanian, "An empathy-driven conversational artificial intelligence agent for digital mental health," *World Psychiatry*, vol. 17, no. 3, pp. 362–363, 2018.
- [3] A. S. Miner et al., "Talking to machines about personal mental health problems," *JAMA*, vol. 318, no. 13, pp. 1217–1218, 2017.
- [4] T. Brown et al., "Language models are few-shot learners," in *Advances in Neural Information Processing Systems (NeurIPS)*, 2020.
- [5] World Health Organization, *Mental Health in the Workplace*. Geneva, Switzerland: WHO, 2019.
- [6] Meta, "React documentation," 2024. [Online]. Available: <https://react.dev>
- [7] OpenJS Foundation, "Node.js documentation," 2024. [Online]. Available: <https://nodejs.org>

- [8] MongoDB Inc., “MongoDB manual,” 2024. [Online]. Available: <https://www.mongodb.com/docs>
- [9] IEEE Global Initiative on Ethics of Autonomous and Intelligent Systems, *Ethically Aligned Design*, 2019.
- [10] D. Amodei et al., “Concrete problems in AI safety,” arXiv preprint arXiv:1606.06565, 2016.
- [11] European Commission, *Ethics Guidelines for Trustworthy Artificial Intelligence*, 2019.
- [12] A. Abd-alrazaq, M. Alajlani, A. M. Alalwan, B. Bewick, M. Gardner, and M. Househ, “An overview of the features of chatbots in mental health: A scoping review,” *International Journal of Medical Informatics*, vol. 132, 2019.
- [13] S. Vaidyam, H. Wisniewski, J. Halamka, M. Kashavan, and J. B. Torous, “Chatbots and conversational agents in mental health: A review of the psychiatric landscape,” *The Canadian Journal of Psychiatry*, vol. 64, no. 7, pp. 456–464, 2019.
- [14] E. B. Morris, “Mobile therapy: Case study evaluations of a smartphone application for emotional health,” *Journal of Medical Internet Research*, vol. 12, no. 2, 2010.