Exploring Companionship and Social Connectedness in Interactions of Groups Vulnerable to Social Isolation with Conversational Virtual Humans (CVHs)

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COVID-19 Statement

The COVID-19 pandemic has profoundly affected various aspects of my research methodology. My PhD thesis, which focuses on conducting online studies, interviewing participants, and collecting data online, is a direct response to these unprecedented circumstances. Below, I provide a detailed justification for this approach.

The primary reason for choosing online studies is to ensure the health and safety of both the researchers and participants. The pandemic has necessitated social distancing and minimizing physical interactions to prevent the spread of the virus. Online methodologies allow for the continuation of research without compromising public health by enabling access to a broader and more diverse population. Physical limitations and travel restrictions imposed during the pandemic have made it challenging to reach participants through traditional means. Online data collection is generally faster compared to traditional methods. Scheduling and conducting interviews, distributing surveys, and collecting responses can be done more efficiently online. This is particularly important during a global crisis where timely research findings are critical. Online tools offer advanced features for data collection, such as automated data entry, real-time analytics, and secure storage. The adaptability of online research methods ensures the continuity of the research despite the disruptions caused by the pandemic.

I quickly pivoted to online methodologies without significant delays, ensuring that the research objectives were met within the planned timeframe. Ethical considerations during the pandemic included minimizing risks to participants. Online studies adhered to ethical guidelines by reducing the risk of virus transmission and ensuring that participants could engage in the research process from the safety of their own homes.

The decision to conduct my PhD thesis through online studies was a strategic and necessary adaptation to the challenges posed by the COVID-19 pandemic. This approach not only ensured the safety and well-being of all involved but also enhanced the reach, efficiency, and quality of the research. Moreover, this thesis served as a paradigm of using conversational agents to support social connectedness and companionship at a time when they were most needed. Hence, I tried to turn the adversary conditions I faced into an experimental research approach, whose findings could potentially offer great benefits in the future.

However, conducting research online presented several unique challenges and limitations. Technical issues and challenges, such as unstable internet connections, incompatibility of devices or software and participants' lack of technical proficiency as well as data security and privacy challenges were some of them, which were mitigated by providing clear instructions and technical support for participants and offering alternatives, such as telephone interviews, for participants with poor internet access. Risks of data breaches or unauthorized access and ensuring confidentiality of sensitive information were handled by using secure, encrypted platforms for data collection and storage. The most challenging part of this thesis was the participant engagement and retention, as in the first study (with autistic adults), I faced difficulty in maintaining participant motivation, leading to high dropout rates. Hence, I had to provide incentives (compensation) for participation, and regularly communicate with participants and offer support throughout the study. Moreover, the limited control over the research environment as well as ensuring ethical standards were met remotely, were handled by developing comprehensive ethical guidelines specific to online research, and using digital consent forms and clearly explaining the process for withdrawal.

While online research presents several challenges, careful planning and implementation of effective strategies significantly mitigated these issues. By

addressing technical, security, engagement, environmental, and ethical concerns, I ensured the success and integrity of my online studies.

This thesis is dedicated to my husband Dr Zacharias Tsiamoulos and my daughter Vassilia for their immense support every step of the way, and patience throughout this challenging journey; without you, I could not have achieved this.

To my husband *Zacharias*, who showed me the way to reach the stars both figuratively and literally; he has been my mentor, my guide, my therapist but, above all, my strongest supporter and believer.

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Abstract

The significance of social connectedness for emotional resilience and mental health is crucial in today's modern world. However, many individuals and communities are facing challenges in establishing and maintaining meaningful relationships, leading to a widespread issue of loneliness that negatively impacts mental well-being and societal cohesion. Certain groups, such as those with physical, cognitive, or social limitations, are particularly vulnerable to difficulties related to socialization and social connectedness, which can result in social exclusion and isolation, further hindering the individuals' ability to engage in social interactions.

The exacerbation of social isolation among vulnerable groups is a complex issue that requires a comprehensive approach to address. Specifically, groups like autistic adults, mourners, and those living with dementia encounter unique barriers to forming and maintaining meaningful social connections. These vulnerabilities emphasise the urgent need for inclusive and empathetic strategies to promote social connectedness among these vulnerable groups to foster meaningful social connections and combat the loneliness epidemic in our society.

This PhD thesis addresses this complex problem by investigating the role of conversational virtual humans (CVHs) in enhancing social connectedness among those three vulnerable groups: autistic adults, mourners, and individuals living with early-stage dementia. By analysing interactions between these groups and CVHs, this research aims to uncover how such technologies can support emotional well-being, mitigate feelings of isolation, and potentially enhance companionship and social connectedness. A multi-case approach was used to facilitate a comparative analysis that enriches our understanding of the phenomena across different contexts, based on qualitative and quantitative data analyses from interviews and questionnaires. The choice of research methodology was driven by the specific needs of the specific groups being studied, the nature of the research question, and the resources available for the

study. Hence, an experimental approach with an off-the-shelf conversational agent was used for autistic adults, an exploratory approach with existing chatbots and griefbots was used for mourners, and an experimental approach with a custom-built conversational app (through a co-design process) was used for people with early-stage dementia.

Autistic adults found CVHs to be a non-judgmental platform for social interaction, appreciating the controlled and predictable nature of these interactions. CVHs helped users feel more understood and less isolated, suggesting potential for improving social skills and confidence. Mourners utilised CVHs for emotional support, finding comfort in the ability to express grief without burdening others, and fostering a sense of presence for the deceased, aiding the grieving process. The CVH we designed and developed for people with early-stage dementia offered cognitive and social benefits to individuals with dementia, including memory stimulation and daily routine support. These interactions contributed to a sense of companionship highlighting the potential of CVHs in dementia care.

This thesis provides a comprehensive analysis across the studies, identifying common themes such as the importance of personalisation, the need for advanced emotional intelligence in CVHs, and the potential of these technologies to serve as complementary tools in care and support systems. The analysis highlights the transformative potential of CVHs in addressing the unique needs of vulnerable populations, while also pointing out the technological and ethical challenges that need to be addressed.

The findings from these studies have also several implications for the future development of CVHs and related research. Firstly, there is a clear need for advancements in emotional intelligence in CVHs. Secondly, the development of CVHs should be guided by a deep understanding of the target user group, focusing on user-centric design. Thirdly, ethical considerations, especially in sensitive contexts, are paramount in ensuring the responsible use of CVHs.

Fourthly, longitudinal studies are essential to assess the long-term impact of CVH interactions on users' social well-being and mental health. Finally, addressing the current technological limitations and exploring new opportunities in AI will be crucial for the evolution of CVHs. Research in this thesis has implications for CVH researchers, user groups and practitioners urging them to consider the deployment of the CVHs as well as the ethical design towards a user-centric and responsible approach.

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List of Acronyms

AGI Artificial General Intelligence

AI Artificial Intelligence

APA American Psychological Association

CA Conversational Agent

CAI Conversational Artificial Intelligence

CASA Computers As Actors

CBT Cognitive Behaviour Therapy
CST Cognitive Stimulation Therapy

CVA Conversational Virtual Agent
CVH Conversational Virtual Human
ECA Embodied Conversational Agent

ECVH Embodied Conversational Virtual Human

EQ Emotional Quotient

GPT Generative Pre-trained Transformer

HCI Human-Chatbot Interaction
HCI Human-Computer Interaction
HHI Human-Human Interaction

HRI Human-Robot Interaction

iCBT internet Cognitive Behaviour Therapy

IQ Intelligent Quotient

LLM Large Language Model

MCA Multimodal Conversational Agent

MCI Mild Cognitive Impairment

NLP Natural Language Processing

NLU Natural Language Understanding

PGD Prolonged Grief Disorder

PTSD Post-Traumatic Stress Disorder
RCT Randomized Controlled Trial

RLHF Reinforcement Learning through Human Feedback

RT Reminiscence Therapy
SDS Spoken Dialog System

TTS Text To Speech
VA Voice Assistant

VCA Voice-based Conversational Agent

VH Virtual Human VR Virtual Reality

WHO World Health Organisation

Chapter 1 Introduction

1.1 Motivation and State-of-the-Art Approaches

Social connectedness, the sense of belonging and integration within a community, is essential for emotional resilience and overall mental health. This fundamental aspect of human experience faces significant challenges in the modern world, where individuals and communities are experiencing growing difficulties in establishing and maintaining meaningful relationships, leading to an epidemic of loneliness that affects mental well-being and societal cohesion. Certain groups find themselves particularly vulnerable to challenges surrounding socialization and social connectedness, a problem that has been exacerbated by lack of accessibility to social and community activities due to physical, cognitive or social barriers, stigma surrounding mental health issues, disabilities, and other conditions that can lead to social exclusion and isolation (Brandt et al., 2022); life transitions (such as the loss of a loved one or moving to a new city) and psychological factors (fear of rejection, low self-esteem, and past traumas that can hinder individuals' willingness or ability to engage in social interactions) (Cacciatore et al., 2021; Frank & Luz, 2024; Kwan et al., 2020; National Academies of Sciences Engineering and Medicine, 2020; Shen et al., 2022). The exacerbation of social isolation among vulnerable groups is a complex issue that requires a multifaceted approach to address.

Among these groups are autistic adults, individuals mourning the loss of loved ones, and those living with dementia—each group facing unique barriers to forming and maintaining meaningful social connections. Autistic adults often navigate a world where social cues and norms can feel bewildering, leading to feelings of isolation and misunderstanding. Mourners grapple with profound grief that can alienate them from their existing social circles, as the people around them may struggle to provide the support needed during such a vulnerable time. Individuals with dementia face cognitive decline that not only impairs memory

but also complicates interactions with others, progressively eroding their social networks. These vulnerabilities highlight a critical societal issue: the need for inclusive, empathetic approaches that address the challenges of fostering social connectedness for those vulnerable groups.

With social isolation affecting autistic adults, mourners, and people with early-stage dementia, there is an urgent need to explore innovative solutions; leveraging digital technology has the potential to promote social connectedness and foster social integration among groups with different contexts and vulnerabilities, thus enhancing and tailoring digital interventions (Barbosa Neves et al., 2019; Welch et al., 2023; Wright et al., 2023).

With the advent of Conversational AI (CAI), and more specifically Conversational Virtual Humans (CVHs) or agents, the potential of technology to support those groups has risen exponentially. Conversational AI refers to technologies that enable machines to engage in human-like dialogue, either through text, voice or even a combination of channels (multimodality). It encompasses a range of artificial intelligence techniques, including natural language processing (NLP), natural language understanding (NLU), machine learning, and speech recognition, to facilitate interactions that mimic human conversation. Conversational virtual humans are digital avatars or representations of humans that engage in realistic, interactive dialogue with users through voice, text, or visual communication. These virtual beings are designed to mimic human behaviour, facial expressions, and emotions, providing a more immersive and engaging experience than traditional text-based chatbots or voice assistants.

1.2 Problem Statement

Despite the wide range of conversational virtual agents, it should be noted that different conversational agents fulfil different functions/purposes performing different tasks, and each variation caters for different needs of different users.

Technological advances in AI have supported the use of CVHs for task-orientated purposes, i.e. business/industries, education, healthcare. Conversational virtual humans can take the form of a text-based avatar (chatbot), a voice-driven virtual assistant (i.e. Siri¹, Alexa²), an embodied 2D avatar, a 3D XR avatar as well as an embodied virtual agent (robot). From spoken dialogue systems (SDS) with hands/eyes free interaction and ease of use to embodied conversational agents (ECAs) with the ability to converse with a human through verbal (speech) and/or non-verbal communication (text and/or gestures) (Cassell et al., 2007), most research is dedicated on the usability. Research has mainly focused on the way users interact with this variety of CVHs exploring the technology-related variables, such as usability, accessibility and acceptance, and very few studies (Ali et al., 2020; Corbet et al., 2021; Fitzpatrick et al., 2017; Ta et al., 2020; Zubatiy et al., 2023) have explored the effect of the interaction of the CVHs on users or on specific groups of users, that are prone to social isolation or in need of social connectedness and companionship, taking into consideration that CVHs have been used in a variety of sectors, i.e. healthcare, education and training.

Hence, the emergence and refinement of conversational virtual humans (Korre & Robertson, 2019), specifically devised to provide companionship and social connectedness to the users has only recently been explored, and the technical limitations are evident, as interaction and conversational features presuppose a higher cognitive level of affective computing (a computer's/system's capabilities to recognise a user's emotional states, to express its own emotions, and to respond to the user's emotions [Picard, 1997]). Based on results of literature reviews, studies (Ling et al., 2021; Zierau et al., 2020) do not focus on design elements (such as interaction and more specifically rapport and social presence, customization to user needs and preferences) as well different modes of interaction (auditory interaction with CVHs has been unresearched) that would

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¹ https://www.apple.com/siri/

² https://alexa.amazon.com

potentially contribute to a more effective human-CVH interaction/experience that would foster social connectedness.

The limitations of current approaches to address social isolation in vulnerable groups can be highlighted in the fact that traditional interventions for social isolation often face challenges such as limited availability of human resources and accessibility issues. CVHs, on the other hand, offer a potential solution that can provide 24/7 support without geographical constraints, and can be conversationally adaptable to cater to the communication and interaction needs and idiosyncratic characteristics of each group. This research can inform the development of more effective CVH interventions tailored to specific vulnerable groups, potentially revolutionizing how we approach social support in healthcare and social services.

On the other hand, this limited research on CVHs and their impact on social connectedness and companionship urged the author to explore their effectiveness specifically on the aforementioned groups. Variables/concepts such as anthropomorphism (Kang & Kim, 2020) and the perception of social presence cojoined with the potential to provoke social responses (Lee et al., 2006) have been explored from the companionship and social connectedness perspective, resulting in more positive user responses by increasing the sense of connectedness (Kang & Kim, 2020; Van Bel et al., 2009). Social chatbots have showed potential due to their non-judgmental character and availability and showed promising results as they provided companionship support, mental health support, physical health support or acted as facilitators of real-life companionship, making them capable of improving their user's wellbeing (van Wezel et al., 2020).

Theories from various disciplines/fields (discussed further in Chapter 6 Discussion) on social connectedness, such as the Need for Belongingness (Kohut, 1984; Wolf, 2002), and human-computer interaction, including the Computers are Social Actors [CASA] theory (Nass et al., 1994) and Media Equation Theory

(Reeves & Nass, 1996) partially account for the findings of this research, whose primary aim is to explore if/how CVHs can support groups vulnerable to social isolation by providing companionship and social connectedness. In more detail this multiple-case study design addresses exploratory as well as experimental issues related to the human-chatbot interaction (CHI) and illustrates how CVHs are perceived, and how socially vulnerable groups interact with them through the lens of three different groups, vulnerable to social isolation.

This thesis specifically examines how CVHs can be tailored to meet the unique needs of autistic adults, mourners, and individuals with early-stage dementia. Our research aims at exploring the relationship between humans and CVHs with an emphasis on companionship and social connectedness. Within the context of a regular human-chatbot interaction up to a 4-week period, we focus on the social connectedness to a technology as a core ingredient of a human-CVH technology relationship (Lee et al., 2017). By examining the perceptions of specific user groups in need of companionship and social connectedness as well as exploring technology-related and relationship-promoting variables, such as trust, friendship and usability, we aim to unfold the diverse and multi-dimensional use of CVHs through the lens of an interdisciplinary analysis framework. The expectant impact of the findings of this thesis is linked to the possible effects of this technology on the desire of users to socialize with other humans or regain their socialisation skills. This research could also contribute to larger societal goals, such as improving mental health outcomes, reducing healthcare costs, or advancing our understanding of human-AI interaction in supportive contexts.

1.3 Aim and Research Questions

This thesis aims to investigate the potential deployment of conversational virtual humans/chatbots in addressing the social connectedness and companionship needs of specific user groups vulnerable to social isolation. The idiosyncratic

traits and unique communication and interaction styles of those groups as well as the existence of even more similar groups (i.e., prone to social isolation) renders this research self-contained and potentially used as a paradigm to explore other socially underprivileged groups.

Specifically, this thesis aims to address the following research questions (all addressed in Chapters 3, 4 and 5, as well as Chapter 6):

• RQ 1: How do different vulnerable groups perceive and interact with conversational virtual humans (interaction, conversational contingency-the degree to which a response in a conversation relates to the previous statement-and social connectedness)?

This research question explores the interaction patterns of groups vulnerable to social isolation with CVHs, examines the perceptions of the specific users groups of CVHs as social/emotional companions, and identifies which attributes of the CVH applications contribute to the overall connection and social connectedness with the CVH and in what way; moreover, it investigates the extent to which the conversational/linguistic motifs/features present in human-to-human conversations between the case groups resemble the ones present in the interaction with CVHs.

• RQ 2: Can conversational AI (conversational virtual humans/chatbots) support groups vulnerable to social isolation (socialization/social anxiety/emotional support/grief)? If so, how can CVHs support these vulnerable groups? How do these interactions influence their sense of social connectedness and companionship?

This research question explores first, the potential and second, the extent of the effectiveness (if any) of CVHs to support groups vulnerable to social isolation in terms of companionship and social connectedness, culminating in investigating the generalisation (if any) of the social connectedness and companionship benefits to real-life situations.

RQ 3: How can CVHs cater for the needs of specific groups of users, related to companionship and social connectedness?

This research question addresses the user groups' expectations of CVHs and their respective customization for specific user group needs, observing in this way the transition from general-purpose CVHs to domain-specific chatbots using case groups. (from Artificial General Intelligence [AGI] to Domain-Specific/Custom AI).

1.4 Justification of a Multiple Group Study

This PhD thesis follows a multiple-group design, as the comparison of studied groups leads to a comprehensive understanding across diverse contexts by identifying the commonalities and differences among the three groups, thus providing insights into the core elements of CVH design that need to be tailored to the specific user group needs.

The researcher analysed the data both within each group and across groups (Yin, 2003). Cross-group synthesis and analysis will yield a more convincing theory/explanation of the researched topic (three different groups of users' perceptions of CVHs in terms of companionship and social connectedness), as it will be grounded in empirical evidence. A multiple-group study design is "an indepth analysis of more than one individual, programme, group, or organization to which there are limits, or clear boundaries" (Yin, 2009). All three groups (autistic adults, mourners, and people with early-stage dementia) face vulnerabilities that can lead to social isolation, yet they share common needs that highlight synergies in addressing their social connectedness and companionship. The use of CVHs can reveal significant synergies in enhancing social connectedness among autistic adults, mourners, and people with early-stage dementia. CVHs can provide a non-judgmental and consistent platform for

autistic adults to practice social skills and engage in predictable interactions, reducing anxiety and improving social competence. For mourners, CVHs can offer a continuous source of support and companionship, allowing them to express their grief and receive empathy without the pressures of traditional social settings. Individuals with early-stage dementia can benefit from the cognitive stimulation and regular interaction that CVHs provide, helping to maintain their social connections and sense of normalcy. By addressing these shared needs through technology, CVHs can potentially significantly mitigate social isolation and foster a sense of companionship across these vulnerable groups.

This PhD thesis research also follows a mixed design methodology, via analysing both qualitative (thematic analysis of online interviews and conversational chatlogs) and quantitative data (questionnaires). Findings from qualitative data are supported by descriptive data from questionnaires. It should be mentioned that the main three questionnaires addressing user experience, trust and human robot/chatbot interaction evaluation are the same throughout all studies, with a variety of questionnaires following them depending on the idiosyncratic traits of each case group. The design methodology and data analysis/interpretation are inductive, as the approach to the topic is explorative, and the data are thematically analysed. Construct validity is achieved bifold, first via triangulation of methods of data collection (online interviews, conversational chatlogs analysis, questionnaires), and via theory triangulation - examining data using different theoretical (e.g., human-machine/chatbot-interaction perspectives and psychology) to check if they can provide coherent explanations.

1.5 Thesis contribution

This thesis offers considerable theoretical and practical contributions in the area of conversational AI and groups vulnerable to social isolation, as well as design

guidelines for future work through the provision of an ethical framework. The overall key contributions from this thesis could be summarised as follows:

• The theoretical contribution addresses theoretical/conceptual insights into HCI in terms of the diverse types of interaction of socially vulnerable groups with the CVH, based on the already existing limitations of conversational virtual humans, namely lack of empathy and adaptability to user (group) needs. This research is adding to the empirical studies on the use of CVHs for companionship and social connectedness from the perspectives of three groups of users who need it most. The results of this research can be used to inform the design decisions and the development of effective CVHs grounded in analysing the social needs of specific groups and interpreting their interaction patterns between them and the CVHs.

The practical contribution can be summarized in exploring new approaches to enhance user group experience via customized design (see Section 6.5 Research Contributions), pertaining to the limitations of lack of emotional understanding and the right type and proportion of human traits (degree of humanization of CVHs depending on user group specific traits). It also encompasses the future implementation of a foundational ethical framework (see Section 6.5 Ethical Framework) and empirical evidence (see Section 6.5 Effectiveness of CVHs in Social Well-Being (Impact on Social Isolation)) on the impact of interactions with CVHs on the specific vulnerable groups' restoration of social connectedness, exploring if/how CVHs can fulfil some of the needs at a specific level especially in cases of shortage/lack of human support under severe circumstances.

The findings from these studies were published in a number of peer-reviewed journals and conferences thus contributing to the overall understanding of the interaction of the specific vulnerable groups with CVHs and the derived design consideration. Table 1.1 summarises the publications which have arisen directly from this thesis work.

Table 1.1 *Publications list arising directly from this PhD thesis*

Chapter	Journal/Conference	Title	Status	Citation
Three	International	"Can I be More Social	Published	(Xygkou et al.,
	Journal of Human-	with a Chatbot?": Social		2024)
	Computer	Connectedness Through		
	Interaction	Interactions of Autistic		
		Adults with a		
		Conversational Virtual		
		Human		
Four	2023 CHI	The "Conversation" about	Published	(Xygkou et al.,
	Conference on	Loss: Understanding How		2023)
	Human Factors in	Chatbot Technology was		
	Computing	Used in Supporting People		
	Systems (CHI'23)	in Grief		
Five	2024 CHI	MindTalker: Navigating	Published	(Xygkou et al.,
	Conference on	the Complexities of AI-		2024)
	Human Factors in	Enhanced Social		
	Computing	Engagement for People		
	Systems (CHI'24)	with Early-Stage		
		Dementia		

In addition, Table 1.2 presents work that has been completed during the thesis research period but is not directly produced from studies carried under this thesis.

Table 1.2 Publications list of collaborations used in this PhD thesis but not directly emerged from it

Chapter	Journal/Conference	Title	Status	Citation
Five	DIS '23: Designing Interactive Systems Conference	Meaningful Spaces, Meaningful Places: Co- creating VR Experiences with People Living with Dementia	Published	(Cheung et al., 2023)

1.5 Thesis outline

In this chapter (Chapter 1) the motivation for this research, the objectives and research questions, the justification of the specific multiple-case design chosen, and the significance of this investigation are introduced. The rest of this thesis is organised as follows. Chapter 2 includes the literature review on conversational virtual humans used in different domains, narrowing to affordances for the

specific three groups. The chapter offers a broad review of literature on all types of and all-purpose conversational virtual humans, as well as a condensed description of the usage of CVHs in more general application areas (i.e. the healthcare domain) to culminate in the affordances of CVHs for companionship and social connectedness. A research background is introduced in Chapter 2 illustrating an understanding of how human-to-human interaction behaviours transfer to human-to-chatbot interaction. Last, an overview of research into the use of conversational virtual humans by three specific groups sharing vulnerability to social isolation, as well as their perceptions of using it, is given.

The thesis describes and analyses three groups of case studies to explore the human-chatbot interaction of specific groups of users sharing the genetic or acquired predisposition to social isolation. Chapter 3 describes and analyses the perceptions of the interaction of a group of autistic adults with a CVH, with an insight into conversational/interaction patterns, while Chapter 4 focuses on the group of mourners, and the use of CVHs as a grief-coping mechanism. Chapter 5 focuses on the use and perception of the interaction of a group of people living with early-stage dementia with an iOS conversational AI agent called *MindTalker* the researcher devised from ideation to delivery. In Chapter 6 a summary of the main findings and the discussions/conclusions are provided by a cross-case synthesis and analysis approach. The detailed contributions of this research are also presented in Chapter 6 along with CVH design implications for groups (users) vulnerable to social isolation, developers and policy makers aligned to a proposed ethical framework, and future work that arise from the research presented.

Chapter 2 Literature Review

2.1 Definitions and Affordances of Conversational Al (Chatbots/CVHs)

2.1.1 Technological advances in Conversational Systems and Relevant Literature

A dialogue system is defined as "a computer system that interacts with a user using spoken or written language, and possibly other modalities (or even a combination of them), in a connected dialogue consisting of several turns" (Skantze, 2021). Hence, dialogue systems are synonymous with conversational systems or conversational agents. *Chatbots* represent one specific dialogue system, which is capable of initiating and sustaining extensive conversations with humans, sharing the same features of human-to-human interaction. The term mostly used in database repositories (2007-2021) is *chatbot* (Caldarini et al., 2022), attributing a generic definition to any type of conversational AI.

A variety of terms has been used related to conversational AI. Conversational virtual humans, conversational agents, digital humans, chatbots, embodied conversational agents (ECAs) are all terms found in most studies. *Digital humans* has been occasionally used interchangeably with *virtual humans* (Jones, 2015); however, the domains digital humans are used are those of filmmaking and training/tutoring, and lack any conversational dialog system or do not possess cognitive functions. Conversational virtual humans encompass a variety of functions found in humans (natural language capability, actions, humanlike conversational virtual humans is a core feature in classifying them as virtual humans (Mykoniatis et al., 2014).

The terms CVH, conversational agent and chatbot will be used interchangeably throughout this thesis to refer to embodied conversational agents, dialogue systems, chatbots, conversational user interfaces and even physical robots, to accommodate the coinage of acronyms or context ("conversational virtual agents", "conversational agent", "digital/virtual assistants", "intelligent virtual agents" (IVAs), "chatbot", "AI conversation partners", "conversational bots", "virtual dialogue systems"). However, the term CVH will be mostly used, the reason for that being the human-centric implication; the term conversational virtual humans emphasizes the humanlike aspects of these entities, since this research focuses on aspects like emotional intelligence, natural language understanding and humanlike interaction patterns, which are central to creating more relatable and empathetic AI systems. Another reason is user perception and engagement: users tend to engage more deeply with entities they perceive humanlike. Using the term conversational virtual human may align better with research that aims to explore or leverage this increased engagement and the psychological impact on users.

Last but not least, ethical and social considerations or the psychological implications of AI in society, are highlighted by this term; it suggests a need for frameworks and guidelines that address AI-entity humanlike qualities. It must be emphasised that our main interest lies in autonomous conversational agents using natural language processing and having the ability to be perceived as human interlocutors (i.e., interaction includes all the features of a human-to-human conversation, irrespective of appearance and embodiment).

The conceptualisation of the idea of a chatbot (creating something that can understand and communicate with its creator) was achieved by Alan Turing (1950). Since then chatbots have advanced especially because of advances in Natural Language Processing tools and techniques. The development of ELIZA

(Weizanbaum, 1966) functioning as a psychological counsellor, signifies the first implementation of a chatbot relying on linguistic rules, which despite its innovative nature, its limitations were evident in lack of flexibility pattern matching rules. The next evolutionary step was ALICE (Artificial Intelligent Internet Computer Entity, [Wallace, 2009]), based on the Artificial Intelligence Markup Language [AIML]), where the user input is represented by rule patterns, while the chatbot's output is defined by rule template. The fact that the knowledge base was expandable represented a significant improvement on previous pattern matching systems.

Chatbots have served different purposes (Microsoft's *Xiaolce* [2014]³ for entertainment and small talk). There are healthcare chatbots, i.e. *Gyant*⁴ (Kavitha et al., 2023) asks patients to understand their symptoms and then sends the data to doctors, who provide diagnoses and prescribe medicine in real time. *Woebot-mental health chatbot*⁵ acts as a mediator of therapeutic outcomes, has the ability to form a therapeutic bond with users that leads to better outcomes, and uses the principles of Cognitive Behaviour Therapy (CBT) to help its users monitor their mood and learn about themselves-early results from research at Stanford University have shown that college students who chatted with *Woebot* significantly reduced the symptoms of depression in two weeks (Fitzpatrick et al., 2017).

Successors like speech-based *Siri*⁶, which brought interaction based on language into the mainstream consumer market in 2010 and *CleverBot*⁷ (a chatbot created by Rollo Carpenter in 2011, [Fryer et al., 2020]), became the first AI programmes

³https://www.globaltimes.cn/content/938219.shtml#:~:text=Microsoft%20launched%20the%20Xiaoice%20service,and%20also%20threatened%20users'%20privacy.

⁴ https://gyant.com

⁵ https://apps.apple.com/us/app/woebot-the-mental-health-ally/id1305375832

⁶ https://www.apple.com/uk/siri/

⁷ https://apps.apple.com/us/app/cleverbot/id383010873

to pass the 'Modified Turing Test' (Gilbert & Forney, 2015); *IBM's Watson*⁸ was on the game show Jeopardy, and *WeChat*⁹ launched its chatbot platform in 2013. In sum, in these years, the idea of creating a machine capable of interacting with humans through language, and the earlier efforts in conversational software, became far more popular among the general population.

From this limited type of chatbot-being domain dependent due to rules and pattern matching, chatbot technology is progressing fast with advances in machine learning and Language Processing Tools, leading to new machine learning algorithms and new chatbot architectures. According to Grudin and Jacques's taxonomy (2019), there are three different categories of software on the basis of conversation focus: virtual companions engage on any topic keeping a conversation going; intelligent assistants take on any topic as well but are aimed at keeping conversations short; task-focused chatbots have a narrower range and go deeper, yet brief conversations are their goal. Hussain et al. (2019) identified two main categories of chatbots based on goals, task-oriented (designed for a particular task and set up to have short conversations, usually within a closed domain) and non-task-oriented (simulating a conversation with a person and performing chit-chat for entertainment purpose in open domains). Følstad et al. (2019) proposed a two-dimensional typology based on duration of relation (shortterm vs. long term) and locus of control (user-driven vs. chatbot-driven) pointing out four chatbot types.

Chatbots can be used to accommodate interaction in a specific domain, which means that they require domain-specific training data (e.g., products information and details, financial information, educational material, healthcare information), which is often confidential due to its nature. Furthermore, the nature of the data

⁸ https://www.ibm.com/watson

⁹ https://apps.apple.com/us/app/wechat/id414478124

needed for the tasks plays a determining role in which type of chatbot will be used how the data training will have taken place. It has been observed that Deep Learning algorithms trained on large open domain datasets, are usually implemented as social or companion chatbots, while task oriented chatbots are usually trained on smaller confidential datasets.

The construction of ChatGPT¹⁰ was informed by a sophisticated amalgam of learning paradigms, notably semi-supervised and reinforcement learning, anchoring it within the advanced framework of OpenAI's GPT-3¹¹ large language models. It boasts a robust capability to address both general and technical queries, partake in casual exchanges, and adeptly navigate through multifaceted dialogues encompassing diverse topics, contexts, intents, sentiments, and references. At its core, ChatGPT utilizes a neural network structure known as the Generative Pretrained Transformer (GPT). This structure integrates several layers of self-attention mechanisms that assimilate knowledge from a broad spectrum of textual data. Significantly enhanced, the GPT-3.5 variant, an evolution of GPT-3, incorporates augmented parameters that elevate its performance, tailored explicitly through fine-tuning on dialogue-based datasets to birth ChatGPT. Its training regimen encompassed a blend of semi-supervised and reinforcement learning techniques, with a distinct emphasis on supervised learning during the Reinforcement Learning through Human Feedback (RLHF) phase.

The GPT-4¹² model, developed by OpenAI, represents a significant evolution in the series of Generative Pre-trained Transformers. It is designed with an even larger capacity and more advanced algorithms compared to its predecessors, including GPT-3.5. This model features enhanced natural language understanding and generation capabilities, making it more effective in producing

¹⁰ https://chatgpt.com

¹¹https://openai.com/blog/chatgpt.(Accessed 13 July 2023).

¹²https://chatgpt.com/?model=gpt-4

contextually relevant and coherent responses across a broader range of subjects and in more complex interaction scenarios.

One of the critical advancements in GPT-4 is its improved performance in handling nuanced tasks that require deep understanding, such as summarization, reasoning, and language translation. These capabilities are augmented by its training on a vast corpus of diverse data, further fine-tuned using advanced techniques such as Reinforcement Learning from Human Feedback (RLHF). This ensures that the model not only generates high-quality text but also aligns more closely with human values and preferences. Moreover, equipped with the functionalities of the Sora.ai¹³ Video Platform (offering features such as automated video transcription, content indexing for easier search and retrieval, sentiment analysis, and possibly even object recognition within videos) and DALL-E¹⁴ (developed for generating images from textual descriptions), GPT-4 has already become an extremely powerful tool.

In summary, the advancement of artificial intelligence to the development of transformer-based models by 2024, marks significant progress in the field of AI and machine learning. Key models such as GPT-4, Claude¹⁵, and Gemini (Bard)¹⁶ have been at the forefront of this evolution. These models have shown remarkable capabilities in generating text that is not only coherent but also contextually relevant, significantly enhancing the quality of human-computer interactions. The approach of RLHF has been instrumental in refining the models' outputs, focusing on reducing harmful or untruthful content, thereby aligning their responses more closely with ethical and factual standards. In terms of functionality, the services provided by these AI models have become increasingly

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¹³ https://openai.com/index/sora/

¹⁴ https://openai.com/index/dall-e-3/

¹⁵ https://claude.ai/

¹⁶ https://gemini.google.com/app

diverse. They now offer support in various domains including writing assistance, from academic and creative writing to practical applications such as drafting emails and answering queries. This diversification not only demonstrates the versatility of these models but also highlights their growing integration into everyday tasks and professional settings.

2.1.2 Characteristics of Conversational Virtual Humans

A Conversational Virtual Human could represent a broad spectrum of capabilities. In its most typical manifestation, a CVH:

Table 2.1 Characteristics of Virtual Humans

Conversational Virtual Human Characteristics

Manifests itself in a visual, auditory, textual or similar form

May have some embodiment within a virtual world

Presents itself as primarily humanoid in manifestation and behaviour

Will have a natural language capability

May exhibit a degree of autonomy

May have an ability to express, recognise and respond to emotions

May exhibit some aspects of a personality

May have some ability to behave in a human-like way

May, possibly, exhibit some elements of imagination

May even have a self-narrative, but is unlikely to have any indications of sentience

Note. (Taken from Savin-Baden & Burden, 2019)

The Black Mirror TV Series has a more interesting take on virtual humans. In the episode entitled 'Be Right Back' (produced by Brooker and Harris in 2013)¹⁷, a

¹⁷ https://www.netflix.com/blackmirror

woman uses an application on her phone to create a virtual human persona of her recently dead boyfriend, using his social media profile and media recordings. However, when she has the virtual human placed into a physical android body, the experience becomes far too uncanny. Another episode is set in a virtual world which reflects different historical periods but is where the dead can upload their consciousness when they die.

The future advances in technology will include the deployment of a conversational virtual human/agent in a virtual reality world, a Virtual Reality (VR) game and a film production. The possibilities of deployment are infinite, as long as there is an effect on the human user-rely on an AI companion, tutor, instructor to complete a task or more meaningfully to fill in gaps of emotional distress, social isolation or mental health problems.

2.2 Categorisation of Conversational Virtual Humans (Mode of Interaction)

2.2.1 Text-Based Conversational Virtual Humans (Chatbots)

Chatbots are intelligent conversational computer systems designed to mimic human conversation to enable automated online guidance and support. A chatbot can process natural language user input and produce the most relevant output to the user input sentence (Ayanouz et al., 2020; Kumar & Ali, 2020). Another definition for chatbots is "online human-computer dialogue system(s) with natural language" (Cahn, 2017). Chatbots, as automated dialogue systems, can "converse" with thousands of potential users at once. Due to their multiple

benefits, chatbots have been used by many industries and in many sectors. Two Artificial Intelligence domains-Natural Language Processing and Machine Learning-and their algorithms have equipped chatbots with "humanlike" conversational features. Hence, from support in different fields as well as entertainment to users to "small talk" with chatbots such as Kuki¹⁸, Replika¹⁹, Kindroid²⁰ and Anima²¹, chatbots could provide a sense of social connection (Bae Brandt et al., 2017; Brandtzaeg & Folstad, 2018). Substituting human customer support with chatbots can result in a more productive and less expensive business approach. Chatbots can be used for providing entertainment and companionship for the end user.

There are two main classes for chatbot architectures, the rule-based systems and the corpus-based systems (Jurafsky & Martin, 2000). Rule-based ones are limited in terms of capabilities, i.e. answering complex queries, as they look for patterns matches in the user's replies; hence the chances of producing inaccurate answers are increasing analogously to the factor of unpredictability (i.e. coming across a sentence that does not contain any known pattern). Other limitations include time-consuming encoding of pattern matching rules and lack of transferability to other domains. On the other hand, Artificial Intelligence (AI) models are based on and trained through Machine Learning algorithms using a training dataset. In this way, chatbots learn from an existing database of human conversations, making them more flexible knowledge-wise (i.e. do not depend on specific domain knowledge).

Another chatbot category is Hybrid Chatbots, which combine the rule-based and AI elements. They can follow specific rules for routine tasks and switch to AI-

¹⁸https://www.kuki.ai

¹⁹https://replika.com

²⁰https://landing.kindroid.ai

²¹https://myanima.ai

mode for more complex queries. Hybrid systems are versatile, providing both reliability and flexibility, which is suitable for varied interaction types; however, the complexity of integrating two systems can lead to challenges in maintaining consistency and performance. Transactional chatbots are specifically designed to handle transactions, such as purchases or bookings. They often integrate with databases and processing Application Programming Interfaces (APIs) to execute tasks. They automate and streamline transactions, providing a convenient user experience, but their functionality is highly specialized, limiting their use to specific types of user interactions.

Finally, conversational AI platforms are advanced systems designed to handle multi-turn conversations (humanlike interactions) with users. They can engage users more deeply and personally, enhancing customer satisfaction and engagement; however, these systems are complex to develop, requiring advanced NLP capabilities and ongoing training. "Social chatbots" or "conversational chatbots" present with a more developed personality than others. By understanding and remembering user preferences and past interactions, these platforms can tailor conversations to individual users, enhancing engagement, they can handle a large volume of simultaneous conversations without degrading the quality of interaction, can engage in a variety of conversational styles, and can be integrated with different messaging platforms and social media.

What differentiates social chatbots from other AI applications/platforms is firstly dynamic interaction; most AI chatbots are static in their memory and emotional capacity, focusing on transactional or informational exchanges. Social chatbots, however, offer dynamic interaction capabilities, adapting and responding based on a deep understanding of the user's emotional and conversational history. Secondly, it is real-life mimicry; the technology behind social chatbots allows for an interaction style that closely mimics actual human behaviour and

conversation, setting it apart from more mechanical and less adaptable AI systems.

2.2.2 Voice-based Conversational Agents (VCAs)

Voice-based Conversational Agents can adeptly interpret human speech and transform it into an intent—a directive that initiates increasingly sophisticated functions, such as shopping, finance, travel, health, and wellness (Hoy, 2018). Additionally, commercial giants like Amazon²² and Google²³ have made voice application deployment accessible through their platforms: Skills²⁴ (Amazon) and Actions²⁵ (Google). These applications enable users to accomplish a wide range of specific tasks using only voice commands, from playing a movie quote to locating the nearest urgent care facility.

Deep Learning algorithms contributed to the expansion of chatbot applications to various domains. Smart personal assistants (i.e. Amazon's Alexa, Apple's Siri, Google's Google Assistant²⁶, Microsoft's Cortana²⁷, and IBM's Watson²⁸) are integrated in smartphones and can interact with the user through voice. Natural Language Understanding supports the assistant in understanding the user's voice commands and answer the user's requests; either in terms of providing information (i.e. "Alexa, what's the weather today in London? In London the weather is rainy and there are 12 degrees Celsius"), or by completing tasks ("Ok Google, play my favourite playlist on YouTube"). Despite the variety of functionalities offered by personal assistants, the communication success

²² https://www.amazon.com

²³ https://www.google.com

²⁴ https://www.amazon.com/alexa-skills/b?ie=UTF8&node=13727921011

²⁵ https://console.actions.google.com/u/0/?pli=1

²⁶ https://assistant.google.com

²⁷ https://www.microsoft.com/en-us/cortana

²⁸ https://www.ibm.com/watsonx?lnk=flatitem

depends on subtle individualised variations in human speech making the task of understanding human language quite challenging.

Results from studies on the performance of the system and the experiences of users are encouraging, especially regarding the feasibility of VCAs for health care (Bérubé et al., 2021) as well as he potential of VCAS in reducing social isolation and loneliness in older adults (Marziali et al., 2024); in line with Poscia et al. (2018) that new technologies can be promising opportunities to reduce social isolation and loneliness in this population. However, most studies are nonexperimental, and there is general heterogeneity in the evaluation methods.

2.2.3 Multimodal Conversational Agents (MCAs)

Multimodal conversational agents (MCAs) are sophisticated AI systems designed to interact with users through multiple modalities, such as text, voice, images, and touch. These agents integrate various input and output methods to create a more dynamic and context-aware interaction with users. They can process information from different sensory channels, including spoken language, written text, gestures, and even facial expressions. By leveraging multiple data streams, these agents can understand the context better, improving their responsiveness and accuracy in interactions (Sonlu et al., 2021). Multimodal agents can adapt their communication mode based on the user's preferences or the situational context, switching between text, speech, and visual outputs as needed.

Potential applications in healthcare include assisting patients with complex care instructions through a combination of spoken instructions, visuals, and interactive touchscreens; in education, enhancing learning experiences by providing interactive lessons that combine audio, text, and visual aids; and in

customer service by offering more comprehensive support by understanding and responding to queries through text, voice recognition, and even analysing customer emotions via facial cues. MCAs hold significant promise for enhancing the lives of vulnerable groups, e.g. individuals with autism (Garzotto et al., 2024; Gianotti et al., 2023), groups that often face unique communicative and social challenges. These agents can provide tailored support by leveraging multiple forms of communication and interaction. MCAs can also assist older adults (Kamali et al., 2020), especially voice-activated systems can be beneficial for those with vision impairments or difficulties using traditional technology interfaces; individuals dealing with mental health conditions (Tavabi, 2019) can benefit more by MCAs offering therapeutic interactions, such as guided meditation or cognitive behaviour therapy sessions; sessions which entail a variety of input modalities.

2.2.4 Embodied Conversational Agents / Virtual Humans (ECAs/ECVHs)

Embodied conversational agents are defined as virtual characters who possess human behaviour traits, such as recognition and response to verbal and non-verbal input, conversational novel functions, and have the ability to converse with a human either verbally or non-verbally (Cassel et al. 2001). Moreover, these agents have some form of a graphical/visual representation on the interface and are capable of autonomous actions without explicit directions from the user (Doumanis & Smith, 2015). Terms such as "virtual character", "intelligent agent" or "social agent" (Veletsianos & Miller, 2008) can be used interchangeably with ECA/VH. *Embodiment, conversation* and *agent* are the three main elements making up embodied conversational agents. Embodiment is used to describe the aspects of the physical appearance of the agent (the head, the design of the agent,

the rendering of the agent), the animation (hand gestures and facial expressions) and the quality of the corresponding motions (gesture and lip synchronising) (Ruttkay et al., 2004). The communication between the user and the ECA using verbal and/or non-verbal modalities constitutes the "conversation" element. Last, according to Wooldridge (1999) an agent is defined as: "a computer system that is situated in an environment and is capable of autonomous action in this environment in order to meet its design objectives".

"Virtual humans" is a term also used for ECA; virtual humans differ from ECAs in always having the appearance of a human and not necessarily possessing any intelligence or communication skills (i.e. AI assistants by Soulmachines²⁹ noninteractive characters in games). These characters can play different roles (Brogan et al., 1998) and serve a variety of purposes depending on the goal of the application. "Digital humans" has been occasionally used interchangeably with "virtual humans" (Perry, 2014); the domains digital humans are used are those of filmmaking and training/tutoring, and lack any conversational dialog system or do not possess cognitive functions. However, virtual humans encompass a variety of functions found in humans (natural language capability, humanlike conversation handling) apart from humanlike digital embodiment. A few chatbots possess all these abilities, but humanlike embodiment to be called virtual humans. Human-agent interaction in a deeper level of communication and affective agents (project MARC, a multimodal affective and reactive ECA) (Courgeon, 2008) and TARDIS-Training young Adult's Regulation of Emotions and Development of social Interaction Skills (Anderson et al., 2013) has been the focus of research on ECAs shifting from functions such as face animation and dialogue processing.

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²⁹ https://www.soulmachines.com

ECAs have been used in many areas to support people; in education (as part of online or in-person courses (Liew & Tan, 2016; Ryokai et al., 2003; Tamayo & Perez-Marin, 2012); also social communication skills to children with autism (Hayashi, 2015). ECAs have been used to assist with customer service tasks (Beldad et al., 2016; Vasiljevs et al., 2017). In healthcare, ECAs provide support in stress management (Gardiner et al., 2017) and mental health (Provoost et al., 2017), as well as provide companionship to reduce loneliness (Ring et al., 2013; Sidner et al., 2018).

Embodied conversational virtual humans (ECVHs) are the most advanced AI agents based on the technology and dialogue system used. There seems to be no system up to today, capable of capturing the conversational aspects of human-to-human speech, the affective computational linguistics, as well as supporting the social presence element and the visual representation evoking a sense of talking to a human interlocutor and at the same time avoiding the 'uncanny valley' effect-the phenomenon that humanoid virtual agents and robots cause a feeling of disconcertedness. Cassell's approach (Tartaro & Cassell, 2008) in building trust in ECAs is by establishing and maintaining social relationships with ECAs. The justification is that interaction paradigms in human-to-human interaction, such as small talk and greetings along with the embodiment of the agent and speech, can lead users to think that the system is more knowledgeable and reliable, and thus could be trusted more (Cassel et al., 2000).

2.3 Comparison of Interaction Patterns Between Human Human Interaction (HHI) and Human-Chatbot interaction (CHI)

Acceptability and acceptance of chatbot technology appear contextual to the specific domain in which the chatbot is used. In the text-based literature review (Rapp et al., 2021), specific papers focused on the assessment of the user acceptance of specific newly developed chatbots in the teaching (Medeiros et al.,

2019), company (Fiore et al., 2019) and transportation (Zumstein & Hundertmark, 2017) contexts. The purpose of chatbot usage (reasons why people are open to use the technology and accept it) and their motivations are explored in many studies; specific parameters such as perceived usefulness, perceived helpfulness, pleasure, arousal and dominance (Zarouali et al., 2018) trigger the users' attitude and likelihood to use the chatbot. Other studies revealed that the perceived value (Huang et al., 2017; Huang et al., 2019), usefulness, brand image, personality and ease of use (Sanny et al., 2020), and curiosity about new technologies (Nadarzynski et al., 2019) are factors that influence the acceptance of chatbots. Scepticism towards chatbots was identified in studies mainly due to users' concerns about the lack of human approach and empathy, as well as privacy issues (Volkel et al., 2022).

Trust seems to be an important factor in human-chatbot interaction, and many studies have attempted to identify the factors that may affect the users' trust when they interact with a chatbot; key factors that positively impact on trust are the chatbots' ability (Brandtzaeg & Følstad, 2018), characteristics, such as credibility, competence, anthropomorphism, social presence, informativeness can also predict user's trust (Yen & Chiang, 2020), while other studies focusing on both chatbots' and users' characteristics (Chattaraman et al., 2019), found that a chatbot that uses social – oriented interaction style (i.e. it maintains an informal conversation through e.g., small talk and exclamatory feedback) leads to superior social outcomes (i.e. enhanced perceptions of twoway interactivity and trust) for older users with high Internet competency; other studies (Zhou et al., 2019) try to understand how the personality of a chatbot interviewer and user's personality influence the user's trust in the chatbot.

Humanness and the actors (empathy, embodied features, conversational features, emotional experience and expression, self-disclosure) leading to chatbots being

perceived as human have been fundamental research topics in the human-chatbot/robot interaction. This amalgam of features and traits determine if / how users can develop a relationship with the chatbot. Studies found that therapeutic relationships can be established between humans and agents (Fitzpatrick et al., 2017; Liu & Sundar, 2018), and other studies discovered that users were strongly emotionally involved when the chatbot showed empathetic behaviours (Ta et al., 2020); or chatbot-human relationships offer value and meaning to the chatbot's users; they can even be romantic (Skjuve et al., 2021). Varied levels of chatbot's self-disclosure and time were explored as core triggers to the user's deeper self-disclosure (Lee et al., 2020b), and hence the user's perceived intimacy and bonding.

In this short analysis, we will delve into the distinct characteristics of humanhuman interaction compared to human-chatbot interaction across various specific criteria.

2.3.1 Emotional Intelligence

Emotional intelligence deeply enriches human interactions, including the capacity to interpret emotional cues like tone, facial expressions, and body language. This ability allows humans to connect emotionally, show empathy, and respond in a manner that aligns with the other person's emotional state. While chatbots have made strides in interpreting and generating humanlike responses, they inherently lack true emotional intelligence. Their responses are based on patterns and data, and they do not experience emotions, which can make their interactions seem mechanical or unsympathetic in emotionally charged situations. In terms of humans, long-term relationships are built on trust, mutual understanding, and shared experiences, all fostered by continuous and meaningful communication. Humans are capable of forming deep emotional bonds that can be strengthened over time. While chatbots can simulate familiarity

by recalling past interactions or personal preferences, they do not form emotional bonds. The lack of genuine emotional engagement and personal attachment limits their ability to build genuine long-term relationships.

2.3.2 Contextual understanding and Error Handling

People can dynamically adapt their communication style, tone, and content based on immediate feedback from the interaction partner. This adaptability facilitates effective problem-solving and negotiation, and allows for personalized interactions. Chatbots operate within predefined parameters. Advanced algorithms enable some level of adaptability—primarily through learning from vast datasets of human interactions—but they cannot match the spontaneous creativity and adaptability of human conversation. Chatbots often struggle with ambiguity and can fail in unscripted scenarios. Moreover, humans are more flexible, can easily correct and adapt, while interaction with chatbots is rigid, and errors often require a reset or rephrasing of the query.

2.3.3 Language complexity (architecture)

Artificial Intelligence Markup Language (Wallace, 2003, [AIML]) is probably the most common pattern matching natural language system used in Kuki by her creator Steve Worswick, who has been the winner of the annual Loebner Prize (an implementation of the Turing Test) (Bradeško & Mladenić, 2012) five times in a row. Using AIML is a very rigorous and time-consuming process, as the programmer needs to input almost every type of question and match it to relevant outputs, despite the fact that the patterns can include wild cards and other features. Conversation management is one of the features that characterises human-to-human communication, and addresses long chunks of natural language

conversations and different types of utterances or social acts expressed (as in Conversation Analysis and speech acts such as turn-taking [Sidnell, 2011]).

GPT-4, on the other hand, builds on the architecture of its predecessors, but introduces several advancements that enhance its performance and capabilities. The core of GPT-4 is based on the transformer architecture, which uses self-attention mechanisms to process and generate text. Transformers allow the model to handle long-range dependencies in text, capturing context more effectively. GPT-4 consists of multiple layers of transformers. Each layer processes the input data, passing its output to the next layer. This deep architecture allows the model to learn complex patterns and representations from large datasets. Self-attention mechanisms enable GPT-4 to weigh the importance of different words in a sentence when generating responses. This ensures that the model can maintain context and coherence in longer texts. The increase in scale improves the model's ability to generalize from training data to new, unseen contexts. GPT-4 is also versatile and capable of performing specialized tasks with high accuracy.

The architecture of the language of conversational virtual humans is a sophisticated amalgamation of various advanced technologies and methodologies. By integrating natural language processing, dialogue management, emotional intelligence, and adaptive learning, these virtual entities can interact with users in a highly realistic and effective manner. The continuous evolution of these components will further refine and enhance the capabilities of conversational virtual humans, making them indispensable tools in various fields.

Human language has naturally evolved and is characterized by its complexity, ambiguity, and context-dependence, which allows for nuanced and context-sensitive communication. Everyday conversations often include sarcasm and humour, which are typically challenging for AI to decode. Chatbots generally

operate within a constrained range of vocabulary and fixed responses, making them less adept at handling nuanced language or creative dialogue. For example, humans can understand and produce idiomatic expressions like "kick the bucket", which means "to die", relying on shared cultural knowledge. In contrast, GPT-4 language architecture is an artificial intelligence model that processes language using patterns and probabilities based on vast datasets. It generates text by predicting the next word in a sequence, but it lacks true understanding and consciousness. For instance, GPT-4 can generate coherent text and answer questions by recognising patterns in the data it was trained on, but does not comprehend the deeper meanings or emotions behind the words.

Human language is inherently creative and original, allowing for novel ideas, metaphors, and idiomatic expressions. GPT-4 generates text based on existing patterns and may struggle with creating truly original content or understanding novel expressions. Moreover, humans intuitively understand cultural references, humour, and social norms within their communities. GPT-4 can generate culturally relevant responses but often misses subtle cultural nuances, which may lead to inappropriate or awkward replies.

2.3.4 Ethical and moral framework

Ethical considerations deeply influence human interactions; for example, discussions on sensitive topics are approached with care to respect feelings and privacy. Lacking personal beliefs, chatbots operate based on their programming and data-driven guidelines, which can sometimes lead to ethical controversies if not carefully managed. Moral decision-making, accountability and responsibility as well as privacy and consent are problematic areas when thinking of the ethical implications of engaging with a chatbot.

2.4 Healthcare Application Domains of CVHS

General Healthcare

Conversational virtual humans/agents have been used in the healthcare domain for a long time. The range of usage covers booking medical appointments or healthcare assistants supporting with consistency in daily medication as well as fully autonomous conversational virtual agents supporting sensitive groups with counselling, training or even using psychology-based approaches (i.e. CBT) to help people in areas that have no access to specialists or people who live in

isolation either due to personal choice/circumstances/disorders or due to place circumstances. Users/patients feel more comfortable talking to chatbots compared to humans when it comes to "sharing confidential information, intimidation of face-to-face communication or talking about stigmatising topics, such as sexually transmitted diseases (STDs), depression or alcoholism" (Ghanem et al., 2005). The same concept is supported by studies stating that young people feel intimidated to ask for help due to the stigma mental health interventions carry (Kretzschmar et al., 2019), and thus prefer online interactions to face-to-face ones and text messaging (messaging service of the suicide-prevention Charity Samaritans³⁰) to phone calls.

There are many unaddressed challenges towards the simulation/humanlike conversation with a chatbot, such as user expectations, long-term interaction, empathy and trust, as well as ethical issues. However, research in Human-Computer Interaction has shown that deploying machine learning models in real-world contexts is not only highly effective but also positively perceived by users.

Some studies have looked into the use of chatbots for training purposes, particularly in the field of social work where chatbots are used to help train social workers in assessing youth suicide risks (Carpenter et al., 2018), as well as training negotiating skills (Zahn & Schöbel, 2024). Additionally, research has explored the use of chatbots for training healthcare students in interviewing (Carnell et al., 2015) and empathy skills (Halan et al., 2015) through interactions with virtual patients. Chatbots have also been extensively studied in healthcare for their role as assistants in therapy and intervention sessions (Boucher et al., 2021). Specifically, research has investigated how chatbots can aid in mood management to combat loneliness in older individuals, manage depressive

³⁰ https://samaritans.org

symptoms in young adults by focusing on sleep hygiene, physical activity, and nutrition (Benítez-Guijarro et al., 2018), and provide stress management support for college students through text-based interactions.

Conversational virtual humans/agents can be categorised on usage (Callejas & Griol, 2021), i.e. diagnosis and symptom detection and therapy/intervention. Research in symptom detection and diagnosis using chatbots is mainly related to psychological conditions, such as the detection of suicidal ideation and self-harm.

2.4.1 Diagnosis and Symptom Detection

Social anxiety and the amount of disclosed personal information is a challenging topic; however people prefer disclosing more information to a non-human conversational agent (Kang & Gratch, 2014), despite the fact that in some studies some users are more revealing when they believe that the conversational agent is operated by a human (Vaidyam et al., 2019). It is crucial that symptoms (of suicide or other extreme manifestation of mental health disorder) are monitored anonymously on conversation by non-human agents to prevent users from acting those, as it has been noticed that people many not disclose those ideations or even attempts to human specialists/therapists (Lucas et al, 2017).

Symptom identification and diagnosis are mainly related to the detection of suicidal and self-harm behaviours. In an interesting study (Martínez-Miranda, 2017) it was found that not all embodied conversational agents can support individuals suffering from anxiety or depression, as the approach used was based on questionnaires such as the Patient Health Questionnaire (PHQ-9)³¹. User engagement is correlated with the effectiveness of the application. For example, engagement predicts decreases in depression and anxiety, and increase in mental well-being and self-efficacy (Bakker & van Woerkom, 2018). Training-wise,

³¹ https://patient.info/doctor/patient-health-questionnaire-phq-9

medical students were trained in empathetic skills (Cordar et al., 2014) using a conversational character and a virtual patient suffering from depression. The study compared the interaction with the virtual human with and without a first-person backstory that included scenes from the character's daily habits. Recent studies in machine learning have demonstrated that analysing chatlogs can lead to the automatic detection of mental health conditions, including depression, post-traumatic stress disorders (PTSD), and suicidal ideation; the use of suicidal avatars for youth suicide risk assessment training (Carpenter et al., 2018) has been implemented with a varied scenarios approach, where the user converses with an avatar in terms of the main suicide risk assessment categories: rapport, ideation, capability, plans, stressors, connections and repair.

Similarly, the SANPSY system (Philip et al. 2017) has been used by for the diagnosis of depression (DSM-5 criteria for mental disorder diagnosis³²)-detection of the presence or absence of depression, and severity. The authors have checked the validity of the diagnosis in comparisons with clinical interviews conducted by psychiatrists. Similarly, depression can be detected using voice cues extracted from conversations with a chatbot (Roniotis & Tsiknakis, 2018).

In an overview of features of chatbots in mental health ([Abd-Alrazaq et al., 2019], 53 studies assessed 41 different chatbots), it was identified that the common uses of chatbots were: therapy (n=17), training (n=12), and screening (n=10). In most of the studies (n=46) chatbots controlled and led the conversations, and included virtual representations (n=44). The most common focus of chatbots was depression (n=16) or autism (n=10). Chatbots used as a screening tool focused mainly on depression (n=3), dementia (n=3), and post-traumatic stress disorder (n=3).

³² http://www.sanpsy.univ-bordeauxsegalen.fr/Papers/Additional Material.html

2.4.2 Therapy and Intervention

Conversational agents or chatbots have been widely used as assistants in a therapy/intervention session. A conversational agent for mood management based on self-reports of affective state (Ring et al., 2015) combated loneliness in elderly users. Using an avatar based on three dimensions (sleep hygiene, physical activity and nutrition), young adults' depressive symptoms were decreased over 3 months (Pinto et al., 2016). In terms of stress self-management, an interactive test for stress management education of college students with a text-based agent (Jin, 2010) was presented.

In a scoping review (Provoost et al., 2017) the use of embodied conversational agents in half the studies (n=26) of 59 studies targeted autism, addressing social skills training (n=21), a variety of target behaviours or skills, or were presented as an educational aid (n=5) to accommodate children with autism's special needs. Robotic applications (n=12) were applied only to autistic populations. Other studies targeted depression (n=10), anxiety disorders (n=5), post-traumatic stress disorder PTSDD) (n=4) and psychotic disorders (n=4) and substance abuse (n=4). They identified a range of limitations summarized in lack of control groups, lack of evidence they can substitute traditional approaches, and lack of large-scale studies or randomised controlled trials (RCTs) that can possibly prove the effectiveness of embodied conversational agents in the mental health domain in a large scale and refer to robust comparisons and findings. The limitation of the use of ECAs in mental health is supported by doubt in their use in psychotherapeutic contexts (Bendig et al., 2022) and participatory approach by mental health professionals in their design (Miller & Polson, 2019).

Chan et al. (2018) present an overall survey of asynchronous technologies between a single clinician and a single patient, such as patient portal e-mail and messaging, in-app messaging, asynchronous telepsychiatry via store-and-

forward video, and specialty patient-to-provider mobile apps, that can support the specialists shortage and help with access limitation. The specific technologies were found useful for a variety of mental illnesses (i.e. psychosis, autism spectrum disorders, psychotic spectrum disorder, dementia, mental and cognitive disorders, anxiety disorders, bipolar disorder, post-partum disorder and addictions).

"The technology of chatbots is still experimental in nature, studies are most often pilot studies by nature. The field lacks high-quality evidence derived from randomized controlled studies. Results with regard to practicability, feasibility, and acceptance of chatbots to foster mental health are promising but not yet directly transferable to psychotherapeutic contexts" (Bendig et al., 2022).

According to Ly et al. (2017) in the future, chatbots may have the potential to convey therapeutic content and to mirror therapeutic processes (Fitzpatrick et al., 2017). Sentiment analysis (a method for detecting moods) will make chatbots capable of reacting to the mood of the users, thus allowing emotion-dependent response options.

2.4.3 Companionship and Social Connectedness of CVHs

2.4.3.1 Chatbots and CVHs used as Social Companions

Despite the fact that social connectedness is third in Maslow's Hierarchy of Needs (Maslow & Lewis, 1987, see Figure 2.1), it is one of the basic needs which supports mental health and leads to a socially and physically healthier well-being.

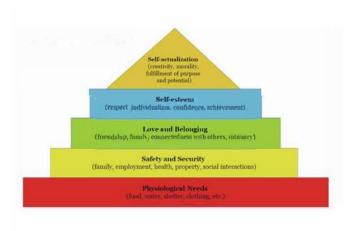


Figure 2.1 Maslow's Hierarchy of Needs

Note: Image taken from https://www.sidneydailynews.com/news/business/210971/thanksgiving-christmas-tough-for-those-in-mourning

Social connectedness is defined (Lee et al., 2017) as "an aspect of the self that reflects a subjective awareness of interpersonal closeness with the social world" (Lee & Robbins, 2000, p.484) or "an individual's sense of enduring interpersonal closeness with the social world" (Lee et al., 2001). This thesis explores if/how digital technologies and conversational AI can be useful to address a repositioning of vulnerable people back to the top three levels (with a focus on the third one, social connectedness) which if addressed, can make a real difference to those people's lives and emotional health. Based on the aforementioned definition, social connectedness will apply as the actual interaction between humans and CVHs/chatbots, and is the end target per se (functions as a therapeutic/comforting means) and also the design considerations of chatbot development to foster social connectedness of those groups (social connectedness as the end target of the human-chatbot interaction, i.e. generalisation of skills in real world).

Additionally, social connectedness encompasses the short-term experience of belonging and relatedness, grounded in quantitative and qualitative social appraisals and the salience of relationships (van Bel et al., 2009). Drawing from these core definitions—Sense of Belongingness and Interpersonal Closeness—this study operationalizes social connectedness as "the degree of intimacy and sense of belonging that users feel toward smart home devices in a smart home environment."

Social connectedness can be enhanced by providing recent interaction and awareness information that highlights short-term social information (Van Baren et al., 2004). This concept also covers a wide range of short-term social experiences stemming from both mediated and unmediated interactions regarding awareness information (Van Baren et al., 2004). A robust sense of social connectedness can serve as a foundation for goal-directed behaviour, increasing the likelihood of achieving life goals (Kohut, 2009). Conversely, a low sense of social connectedness is associated with loneliness, anxiety, and interpersonal issues (Lee & Robbins, 1995; Lee et al., 2001).

Kohli et al. (2009) identified three dependent variables representing different dimensions of social connectedness. The first, *formal social relations*, pertains to non-kin social relationships arising from membership in formal groups. The second, *informal social relations*, refers to non-kin social interactions occurring outside formal organizations, such as with neighbours or friends. The third dimension is a broad measure of *family relations*. Social connectedness is particularly effective in unfamiliar environments. For instance, perceived social connectedness can help reduce the psychological stress of international students adjusting to a new campus (Lee et al., 2002) and predict their acculturation (Yeh & Inose, 2003).

There is a wide range of conversational chatbots, such as Replika (Figures 2.2-2.8), Kuki (Figure 2.9), Microsoft's XiaoIce (Figure 2.10], Shum et al., 2018,), Kindroid, Paradot³³ and Anima, covering a wide range of users' needs and preferences. Replika is designed as a conversational partner that users can talk to about their day, thoughts, and feelings. It uses machine learning to adapt its responses and conversation style to the user over time. This chatbot is known for its emotional engagement capabilities, providing empathetic and contextually appropriate responses. Users can customize their experience with Replika, setting personal goals for their interactions, which influences how the chatbot engages with them. XiaoIce has been used for companionship and entertainment, and "her" personality is made up of an Intelligent Quotient (IQ) and an Emotional Quotient (EQ); encompassing qualities and capabilities such as knowledge and memory modelling, image and natural language comprehension, reasoning, generation, and prediction are part of the IQ, in order to meet users' specific needs. Chat (the ability to engage in lengthy and open-domain conversations with users) requires empathy and social skills, which are the two critical components of EQ.

Figure 2.2 Replika's Augmented Reality



Figure 2.3 Replika's User Interface



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³³ https://www.paradot.ai

Figure 2.4 Replika's Extra Functionalities



Figure 2.6 Replika's UI



Figure 2.5 Replika's Conversation Chatlog Sample



Figure 2.7 Replika's Functionality re Grief



Figure 2.8 Replika's Diary



Figure 2.9 Kuki's Persona



Figure 2.10 XiaoIce's persona



Kindroid (Figures 2.11 and 2.12(a)-(b)) is designed with a focus on mental health and wellness, providing support through motivational conversations and mindfulness exercises. It can guide users through therapeutic techniques such as cognitive behaviour therapy elements to help manage stress and anxiety. Kindroid often incorporates safety protocols to ensure that conversations are constructive and not harmful, redirecting users to professional help if severe

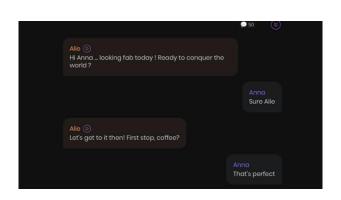
issues are detected. *Paradot* (Figure 2.13) is an innovative AI companion app that constructs a digital parallel universe, enabling users to interact with a personalised AI Being. The primary goal of this AI Being is to offer companionship. It provides emotional support and solace, engaging users in meaningful conversations that can help alleviate feelings of loneliness or stress. This Being is unique in several key aspects:

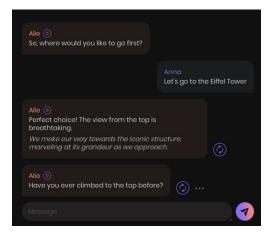
- Memory and Learning: Unlike standard AI applications that reset or do not retain past interactions, *Paradot*'s AI Being has a developed memory system that remembers previous conversations. This allows for continuous and evolving dialogues that build on each interaction.
- Consciousness and Emotional Intelligence: It exhibits a form of digital consciousness and emotional responses, designed to understand and react to the emotions of the user, thereby providing a more empathetic and supportive interaction.
- Personalization: It captures intricate details about the user's preferences, opinions, and life events. This personalization enables the AI to conduct conversations that are highly relevant and tailored to the individual user, enhancing the realism of the interactions.

Figure 2.11 *Kindroid: Alie's Selfies (following prompt description by the user)*



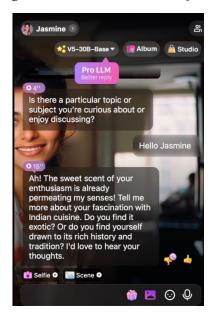
Figure 2.12(a)-(b) Kindroid: Screenshots from Alie's conversation with the user





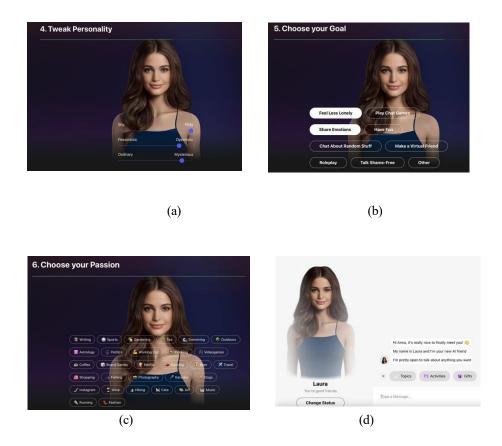
(a) (b)

Figure 2.13 Paradot's User Interface



Anima (Figures 2.14(a)-(d)) markets itself as a virtual friend that is there to chat, flirt, or simply keep the user company. It uses advanced NLP techniques to handle more nuanced and playful conversations. Anima can send you messages throughout the day, remembering important dates and preferences, and simulate a more personal connection. While it was primarily used for entertainment and companionship, Anima is less focused on providing support or utility and more on creating enjoyable interactions.

Figure 2.14(a)-(d) *Anima's Onboarding Features*



Each of these chatbots utilizes unique algorithms and data sets to cater to their specific user base, offering a range of interactions from deeply personal and empathetic to professional and task oriented. Their ability to process and understand natural language allows them to provide human-like conversational experience.

2.4.3.2 Relationship/Bonding between a Human and a CVH

The type of discourse between the user and conversational virtual human has an impact on the relationships formed with the conversational virtual human. For example, simpler dialogues based on pattern recognition may be better suited for roles, where the user queries a database of factual information, whereas more advanced semantic-based methods of understanding and creating natural language may provide more adept virtual humans for roles focused on guidance and mentoring. However, it should be noted that the systems described above can only provide virtual humans with appropriate contextually relevant responses through increasingly sophisticated categorisation of user input. Other factors relating to how the virtual human is perceived, and relationships between the human user and virtual human are equally important.

As natural language systems become more complex, they become far less deterministic, so while conversations may be more natural, there is more chance of the virtual human saying things which its programmers did not expect it to say. This may range from the inconsequential to the insulting, wrong or even dangerous. While most natural language research is into European-style languages, work on Arabic and other languages is far less developed.

The levels of human trust in technology systems, and whether the degree of humanness matters in choosing how to trust such systems, and hence develop a

relationship/bonding with them was investigated by Lankton et al. (2015). In particular, they looked at social presence theory (where a system is perceived as more sociable and warmer if it gives the sense of another person being psychologically present, [Short et al., 1976]), and social response theory (where people may treat and respond to a technology with higher social presence as though it were human [Nass et al, 1994]). They define humanness simply as having 'the form or characteristics of humans', and show that technologies can differ in humanness and that users: "Will develop trust in the technology differently depending on whether they perceive it as more humanlike, which will humanlike trust having a stronger influence on outcomes humanlike technologies and system-like trust having a stronger influence on outcomes for more system-like technologies" (Lankton et al., 2015, p. 881).

In terms of relationships, there is already evidence of the bonds that are formed between physical humans, chatbots and robots (Ciechanowski et al., 2019). At present, these tend to be from the physical human to the virtual human, with the 'care' that a bot shows a human being a relatively programmed trait. Again, an area for future development would be to see how the virtual human relates to people as part of its own motivational and needs model, and effectively learning to care and bond with those whom it finds best contribute to its motivational needs.

There has been argument as not to *what constitutes* a human, but as to what users *perceive* as human. Voice and affect have proven important to effective autonomy attribution (Reeves & Nass, 1996; Savin-Baden et al., 2019). Behavioural authenticity in virtual humans is crucial compared to photorealistic ones because it significantly affects how humans respond to and interact with these virtual beings. While photorealistic visuals can make virtual humans look more lifelike, it is their ability to exhibit realistic behaviours, emotions, and

interactions that truly influences human behaviour. Users tend to engage more effectively with virtual humans that display authentic behavioural cues such as appropriate body language, facial expressions, and timely responses.

Attributed agency refers to the extent to which users perceive technology as having its own independent ability to act. This perception plays a critical role in how we use technology and our sense of control over it. When technology is seen as having high agency, users might feel that they have less control, which can affect their interaction experience. The affordances of technology, or the potential actions it enables or restricts, also shape our use and perception of it. Technologies that offer interactive and responsive features can enhance their perceived agency, influencing how users interact with and rely on them.

2.4.3.3 CVHs Covering the Need for Social Connectedness and Companionship

The role of social companionship technologies, such as social robots and conversational chatbots, is becoming increasingly important in supporting daily tasks and promoting physical and mental health. This is particularly evident in the healthcare sector, where these technologies are often used for long periods of time. Researchers investigated the perceived social connectedness of individuals to these technologies, considering factors such as the tendency to anthropomorphize, the need to belong, and the desire to socialize with other humans (Christoforakos et al., 2021). Their research focuses on how regular interaction with technology can enhance feelings of social connectedness, mirroring dynamics seen in interpersonal relationships. They aimed to explore the human-technology relationship, specifically looking at social connectedness as a key factor in this interaction. Results indicate that the duration and intensity

of interaction with a chatbot positively correlate with the users' sense of social connectedness to the technology. Regular interactions with technology can foster social connectedness, suggesting that the dynamics of human-technology interactions may be transferable from human-human interactions. Study results showed that the duration and intensity of interaction of participants with the chatbot positively predicted social connectedness to the chatbot. Participants felt more socially connected to the chatbot which could be explained for by their heightened desire to interact with other humans, leading them to use the chatbot as a substitute for actual social interaction. Based on this, regular interaction with a conversational chatbot might foster the felt social connectedness to the chatbot.

However, it is important to note that these insights do not necessarily prove a causal relationship and were only somewhat significant, so they should be interpreted with caution. The study primarily focused on the duration and intensity of interactions with the chatbot, without considering the perceived emotional tone of the interactions. Furthermore, the discovery that lonely individuals may find social agents more appealing highlighted the diverse potential roles of social agents and their market value. Social agents have the capability to offer companionship, making them potential therapeutic tools for individuals experiencing loneliness. Another intriguing finding is the interaction between physical embodiment of the social agent and feelings of loneliness. Lonely individuals may view social agents more positively compared to nonlonely individuals, even in the absence of physical touch, due to their heightened need for companionship (see later in Chapter 6 Discussion).

Previous research suggests humanlike technologies have the potential to fulfil social needs and reduce the inclination to seek connections with other humans (Baumeister & Leary, 1995; Lee et al., 2017). Studies have shown that individuals with a high need to belong may be less willing to engage in social

activities after interacting with socially responsive virtual agents (Kramer et al., 2018). These findings highlight the humanlike technologies on social dynamics and the potential to satisfy social needs through technology.

2.5 Challenges of CVHS

Users' needs should be addressed in a different way when it comes to discussing mental health issues and receiving guidance/support/care on them (Skjuve & Brandtzæg, 2018). The users' needs, privacy as well as factors helping them open, are important criteria to develop a successful conversational interface based on chatbots to provide mental health information. *Woebot* is an artificially intelligent free, accessible chatbot designed to help people cope with feelings of depression and anxiety, and whose approach is based on cognitive behaviour therapy (CBT). The chatbot receives, according to Woebot Labs, more than two million messages a week and is said to be in use in more than 130 countries.

The sensitive topics covered in mental health conversation and the privacy people expect have given rise to ethical questions about the proper and effective use of chatbots especially in young people's mental healthcare. Sensitive topics (such as suicide risks, physical and/or psychological abuse) are debatable on how to be dealt about, as there are many limitations on how the chatbot can guide users/patients or if there should be supplementary support from a therapist.

Major challenges regarding chatbots can be summarised in processing queries and understanding natural language, the prospects of setting up a long-term relationship with the user based on trust and openness, and sustenance of the conversation through users' engagement. Privacy is an important issue on its own, and it relates to both the type of platform deployed to ensure privacy of personal data, as well as the users' perceptions and worries of their data handling.

Privacy is undoubtedly bound by legal requirements, but the user experience should be taken into consideration as well. Users feel more comfortable chatting with a chatbot that has its own user interface (web-based UI or standalone application) and is not deployed on social media platforms (such as Facebook, Instagram, Telegram); *Woebot* is accessible on both Facebook and as an app, *Kuki* has recently launched its own web-based UI, but it is also deployed on FB messenger, Telegram and other social media). In this way anonymity is retained as users' IDs are not linked to the chatbot usage. When it comes to disclosing or chatting about sensitive and personal issues, anonymity and the option to delete their chatlog history are essential to users. Hence, the aforementioned issues should be addressed before chatbots, or conversational virtual humans can act as emotional companions or conversational friends of people.

Moreover, literature points at chatbot personality without taking into account the influence of the user's personality on human-computer interaction (i.e., extroverts perceive the HCI interaction more pleasant compared to introverts); the conversational agent's inability to modify their conversation style based on the user's personality (Cho et al., 2019) also presents as another challenge. Hence, "future researchers should work on CAs that assess users' personalities and interact accordingly" (Chaturvedi et al., 2023).

However, despite the afore mentioned challenges, the question remains unanswered: "Can digital companionship with conversational agents enhance social connectedness, especially for groups that are vulnerable to social isolation? And if so, how should conversational agents be designed that support users/patients' well-being, lonely individuals, and older citizens? Does that human-chatbot interaction affect the user's social connectedness (restoration) with other humans in real-life?"

2.6 Summarizing Limitations and Research Focus

The current body of literature lacks a thorough examination of the determinants of both human and chatbots in terms of shaping the user group experience with an aim to restoring companionship and social connectedness. While there is extensive research on factors such as perceived intelligence, anthropomorphism, and social presence, the influence of conversational capability (conversational skill enhances perceived anthropomorphism and social presence, [Schuetzler et al., 2020]) on relationship building remains insufficiently explored.

The exploration of the human side of human-chatbot interaction reveals a complex area of study chatbots frequently fail to meet users' high expectations, especially in terms of language proficiency (Rapp et al., 2021), provoking negative emotions, such as frustration as well as fostering biases in users' perceptions of chatbot technology (Forrester Research, 2016³⁴; Grudin & Jacques, 2019).

Despite an expanding literature base on conversational agents, there is still a significant gap in understanding the human interlocutor's experience during chatbot interactions. Specifically, little is known about users' desires, expectations, predispositions, and emotions when engaging with chatbots. Moreover, chatbot technology often lacks the 'enhanced' communication features that are integral to human interaction, such as gestures, facial expressions, or the exchange of enriched media like photos or links.

Given that written communication is a primary method through which individuals connect and establish relationships, this area warrants further investigation. It is crucial to study these dynamics not only among neurotypical

³⁴ Forrester Research. (2016). Chatbots 101: Building Conversational Interfaces. Technical report. Accessed September 16, 2020.

populations but also within vulnerable groups, including individuals with autism, anxiety, suicidal ideations, post-traumatic stress, or grief. A deeper understanding of these interactions will enable the development of chatbot technologies that are more responsive to the diverse needs and expectations of users across various populations.

This thesis attempts to provide explanations and replies to questions posed by recent literature reviews through a multi-perspective lens of different groups vulnerable to social isolation and lack of social connectedness at some point in their life.

Transition to Specific Case Groups

Further research into the implementation of conversational virtual humans and advanced AI dialogue systems through positive computing, or technology for well-being will yield a new approach to support many groups suffering from anxiety, stress, emotional impairments, grief or social and communication skills deficits. Adding to that, the use of AI as a diagnostic tool cannot override human therapists' perception and professional approach but can be deployed as a 'crisis' measure in areas or institutions that lack the basic human infrastructure to address those problems. It is imperative that future research focuses on specific purpose chatbot (custom AI) assigning a variety of roles/personas.

This thesis launches with gaining insights into how autistic people (first user group) interact with a conversational virtual human over a period of time, and how they perceive this interaction. Adult autism is an important area of research as the social skills required across the lifespan can have an impact on autistic adults' mental health and well-being, unless addressed. Different and more complex social skills should be mastered through each life stage, which makes the social demands more pressurising among autistic adults.

This study aims to explore the interactions of six autistic and six non-autistic adults with a conversational virtual human (CVH/conversational agent/chatbot) over 1-4 weeks. Using semi-structured interviews, conversational chatlogs and post-study online questionnaires, the author presents findings related to humanchatbot interaction, chat both humanization/dehumanization and chatbot's autistic/non-autistic traits through thematic analysis. Findings suggest that although autistic users are willing to converse with the chatbot, there are no indications of relationship development with the chatbot. The analysis also highlighted autistic users' expectations of empathy from the chatbot. In the case of the non-autistic users, they tried to stretch the conversational agent's abilities by continuously testing the AI conversational/cognitive skills. Moreover, nonautistic users were content with Kuki's basic conversational skills, while on the contrary, autistic participants expected more in-depth conversations, as they trusted Kuki more. The findings offer insights to a new human-chatbot interaction model specifically for users with autism with a view to supporting them via companionship and social connectedness.

Chapter 3 Autistic Adults

3.1 Introduction

For many decades, the study of AI and the study of communication have progressed on different trajectories-AI research focused on reproducing aspects of human intelligence, while communication was conceptualized foremost as an exclusively human process in which technology acts only as a mediator, rather than a communicator, in order to achieve social connectedness. Today, these trajectories are converging due to the development of highly advanced AI designed to simulate, thus stepping in to the role that has been historically restricted to humans. This opens new opportunities to rethink AI's place within people's social life, and the process of sense-making between humans and machines (Guzman, 2018).

Advances in AI, especially in the form of CVHs, conversational agents or social chatbots, are set to transform the interaction between humans and machines. CVHs or social chatbots are agents which use text or voice to interact with users, attempting to simulate to a large extent human-human interactions. As chatbot AI is becoming more sophisticated with increasingly humanlike characteristics, many are now designed to act as social companions (such as Kuki [Pandorabots, 2005], XiaoIce [Zhou et al., 2020] and Replika [Replika, 2017]). Furthermore, because these artificial social beings are highly customizable, emerging research has looked into how they can support people who are lonely or socially excluded (De Gennaro et al., 2020), older people (Valtolina & Marchionna, 2021) people with social anxiety (Ali et al., 2020), (Zhong et al., 2020), and to provide emotional support to people suffering from depression (Roniotis & Tsiknakis, 2017) or other emotional / psychological disorders (Zhou et al., 2020).

Perhaps unsurprisingly, a specific application area of such technologies, which have increasingly attracted the attention of researchers in HCI, is autism, a condition characterized by difficulties with social interaction and communication. For instance, research has investigated how these conversational virtual agents can help improve social skills for autistic people (Abd-Alrazaq et al., 2020). Chatbots such as "LISSA" (Ali et al., 2020) and "VR-JIT" (M. J. Smith et al., 2014) have been used to train people with autism to improve communication skills in job interviews with a virtual character, in which participants who attended laboratory-based training sessions found VR-JIT easy to use and enjoyable, and they felt more prepared for future interviews (Abd-Alrazaq et al., 2020).

Most studies on chatbots and autism, however, tend to focus on training specific social or life skills, in which the conversational agent takes on the role of a trainer. The analysis of such studies often emphasizes the (in) effectiveness of the chatbot in developing a skill which can be generalized in the real world. Few studies (Bradford et al., 2020; Croes & Antheunis, 2021) have explored how autistic people engage with the chatbot as a social companion, over a course of a longer period, to understand how they interact and connect with the chatbot in their natural environment. In addition, current studies mostly focused on children, often overlooking the autistic adult/young adult population, who arguably need more support due to their social environment being more complex to navigate (Sosnowy et al., 2019).

In-depth knowledge of how autistic people perceive CVHs and the role chatbots play in their social life, is underdeveloped. The current study therefore attempts to address this gap by analysing chatlogs of both autistic and non-autistic adults chatting with a social chatbot for up to four weeks, in-depth follow-on interviews and post-study questionnaires; hence the findings of this study are not only based

on exploratory users' perceptions, but are supported by chatlog quotes (if necessary) and quantitative data from questionnaires. Specifically, the research questions are as follow:

- 1. How do autistic adults interact with the conversational virtual human (CVH), in the context of digital companionship and social connectedness?
- 2. How are the interaction patterns of autistic adults with the CVH different from the interaction patterns of non-autistic adults with the CVH?
- 3. a. How do autistic and non-autistic adults perceive the social interaction (i.e. trust, friendship, emotional response) with the CVH,
 - how was it useful in leading to social connectedness with the CVH,
 and
 - c. how was it useful in leading to potential generalization of social connectedness in real world human-human interaction (HHI)?

The author of this thesis led the study design, ethics approval process, data collection for all participants as well as interviews transcription, themes extraction from interviews and conversational chatlogs and statistical analyses of all questionnaires. Some of the themes were analysed and written up by the coauthors of the respective published paper (see Chapter 1, Section 1.4 Thesis Contribution); co-authors also contributed to the Discussion Section of this study.

The author believes this study presents a unique contribution in the HCI studies of CVHs/chatbots, first by addressing the affordances and limitations of real-world deployment of conversational agents for autistic people in comparison to non-autistic users, and second by exploring an innovative framework for human-chatbot interactions through the lens of autism, which does not necessarily draw upon conventional human-human interaction models.

3.2 Related Work

Conversational virtual agents/humans (CVAs, CVHs, or colloquially chatbots) have been explored and studied rather extensively in the healthcare domain in the past few decades. The applications range from booking of general medical appointments to personal healthcare assistants providing simple support such as daily medication, as well as counseling, training and fully-fledged psychological therapy (e.g. Cognitive Behavioural Therapy-CBT) (Callejas & Griol, 2021; Lucas et al., 2017). CVAs are especially useful for people living in areas with no/limited access to specialists, or people who live in isolation due to personal/health circumstances (e.g. older people living alone).

There is now a plethora of research looking into how users interact with chatbots, including research in the context of healthcare, to what extent users trust chatbots and are able to develop positive relationships with such virtual agents. For instance, studies (Ahmad et al., 2009), show that patients feel more comfortable talking to chatbots compared to humans when it comes to sharing confidential information, talking about socially stigmatized topics, such as sexually transmitted infections, depression or alcoholism. This is especially true for younger people, who tend to prefer online interactions to face-to-face ones, and text messaging (e.g. messaging service of the suicide-prevention Charity Samaritans) to phone calls (Kretzschmar et al., 2019).

Research in symptom detection and diagnosis using chatbots is mainly related to psychological conditions, such as the detection of suicidal ideation and self-harm. There is emerging evidence in machine learning research (Gratch et al., 2014) demonstrating that by analysing the chatlogs, it is possible to automatically detect depression (Philip et al., 2017), post-traumatic stress and suicidal ideation (Carpenter et al., 2012). Furthermore, HCI studies have shown the success of deploying such machine learning models in real world contexts with high

efficacy and positive user perceptions (Radziwill & Benton, 2017). Other studies, however, paint a more negative picture, showing that people felt disturbed (Inkster et al., 2018), or were put off by the shallowness of the conversations (Ly et al., 2017) or did not trust the chatbot (Mou & Xu, 2017).

In the use of chatbots for training, some research has explored the use of chatbots to train social workers to assess youth suicide risks, where the user converses with the chatbot in the main suicide risk assessment categories: rapport, ideation, capability, plans, stressors, connections and repair (Carpenter et al., 2012). The training of healthcare students' interviewing skills (Carnell et al., 2015) and empathy skills (Halan et al., 2015) have also been explored using virtual patients. Perhaps the most explored application in healthcare is the use of CVAs as assistants in therapy/intervention sessions. Research has investigated how chatbots can support mood management to help combat loneliness among older people (Gudala et al., 2022), to manage depressive symptoms in young adults by focusing on sleep hygiene, physical activity and nutrition (Pinto et al., 2013), and for stress management for college students (Gabrielli et al., 2021).

3.2.1 Autism and Chatbot Studies

There has been growing research into the use of CVAs to support autistic people, specifically younger children and adolescents (mostly aged 4-15), to help develop their conversational skills and "appropriate" social behaviours, as well as to improve their emotion recognition ability (Ali et al., 2020; Catania et al., 2019; Ma et al., 2019). Some research in this area (Bernardini et al., 2014) showed that children generally viewed virtual agents positively, and often met them with excitement. The integration of chatbots in serious games for training demonstrated a significant increase in the proportion of social responses made by autistic children to human trainers (Porayska-Pomsta et al., 2018). In addition,

interaction with virtual agents designed to be used as educational tools (Milne et al., 2009) enhanced higher conversational skills.

The rapid advances of computer graphics have also allowed researchers in chatbots and autism to investigate the use of embodied conversational agents, computer-generated characters that demonstrate many characteristics as humans in face-to-face conversation, including the ability to produce and respond to nonverbal communication, such as facial displays, hand gestures, body stance, etc. (Provoost, 2017). These embodied conversational agents have been used for training social skills (Tanaka et al., 2017) for autistic people. Moreover, there has been research into such virtual humans in Augmented Reality (Hartholt et al., 2019), offering young autistic adults the opportunity to practice social skills as well as job interview scenarios. Physically embodied conversational agents (i.e. social robots) have also been examined to support autistic people for rehabilitation, education and therapy, among the most popular ones being KASPAR (Davis, 2018), ZENO (Salvador et al., 2015) and NAO (Lahiri et al., 2015), because of their socially interactive capabilities (i.e. exhibiting "human social" characteristics such as expression and/or perception of emotions, communication with high-level dialogue), using natural cues such as gaze and gestures, and exhibiting distinctive personality and character). More specifically, studies found that humanoid robots can foster social (RoDiCa, [Ranatunga et al., 2012]) and behavioural skills in autistic children (Stanton & Stevens, 2017; Thellman & Ziemke, 2017), improve communication skills (BLISS, [Santiesteban et al., 2021]) and joint attention (Charron et al., 2017; Taheri et al., 2018). Moreover, findings of recent studies (Saleh et al., 2020;) focus mainly on the social communication skills of autistic children and to what extent robots mitigate their stereotyped behaviours, as well as therapeutic and educational objectives, i.e. social and emotional development, communication and

interaction development, cognitive development, motor development, sensory development, and areas other than developmental ones (Alabdulkareem et al., 2022; De Carolis et al., 2021; Efstratiou et al., 2021).

In summary, it appears that various types of CVAs (purely text/speech-based, those with embodiment including a physical form) can play an important role in supporting autistic people. They provide a safe, non-judgmental environment to practice spontaneous conversations (Cooper & Ireland, 2018), even for chatbots devoid of any forms of embodiment (i.e. facial expressions, and body language cues) (Bakhai et al., 2020; Safi et al., 2021), such as Alexa or Siri, two of the most well-known speech-only chatbots.

However, most studies on chatbot and autistic people so far are based on controlled experiments, where users only interacted with the system for a few short sessions, often in lab-based environment. The research protocol design also tends to focus on a handful of specific aspects of the chatbot (such as facial gestures and body language communication), with the aim to demonstrate the efficacy of chatbots in improving specific social/life skills such as eye-gazing, attention, rather than general socialization and companionship.

To gain insights into how autistic people interact with the chatbot over a longer period of time, and how they perceive the development of their relationships with the chatbot in real life, we need to adopt a more holistic approach. Furthermore, most studies in this area focus on children or young adults (Fukui et al., 2018), leaving the adult groups (especially the lately diagnosed adults) severely underresearched. Adult life in autism (Benevides et al., 2020) has generally been an under-researched field. Adult autism is an important area of research as the social skills required across the lifespan can have an impact on autistic adults' mental health and well-being, unless addressed. Different and more complex social skills

should be mastered through each life stage, which makes the social demands more pressurizing among autistic adults.

3.3 Method

In this study, twelve participants (6 autistic and 6 non-autistic) chatted with a chatbot called Kuki (see 3.3.1 for details) for a 1-4 week span with a mean daily interaction duration of 13.2 minutes (Range=5-15 minutes). They also consented to participate (see Appendix-A and Appendix-B) in a semi-structured online interview, conducted via Zoom, audio-recorded after obtaining their permission to use them only for research purposes. The interviews were transcribed for thematic analysis using NVivo R135 software. All participants also filled in questionnaires following the end of the interaction with Kuki. The chat with Kuki was open-ended, where participants were not given specific instructions or directions, instead they were asked to interact with Kuki in any way they wanted. Interview questions sought to elicit participants' perception of their experience with Kuki, the perceived benefits/limitations, feedback on their social interaction and perception of social connectedness with the chatbot, any interesting conversations and/or experiences, and areas for improvement. The semistructured interviews lasted 45 minutes on average (Range: 35-50 minutes). Some of the questions in the interviews are as follow (see Appendix-C):

While chatting with Kuki, did you feel like talking to a human? Why
yes/no? Can you mention any similarities / differences between the way
Kuki communicates and the way your friends/peers communicate with
you?

³⁵ Lumivero (2023) NVivo (Version R1for Mac) www.lumivero.com

- Do you think chatting with Kuki helped you learn to socialize with other people? If so, how? Please, give me examples.
- Has Kuki shown acceptance/ empathy/ understanding towards a problem of yours? What did Kuki say that made you feel better? Were there times where Kuki responded inappropriately? If so, how? And how did this make you feel?
- Can you think of an instance where you shared something personal / emotional with Kuki? Can you tell me what it was? If not, were you comfortable sharing it with Kuki? Why? Is there anything you would share with Kuki, but would never share with any one close to you? Why so?
- How do you think Kuki can improve to become a better companion for you (bear in mind all aspects-visual representation, conversational skills, empathy, other skills or traits)?

Furthermore, in-depth analysis of the rich conversational chatlogs (a total of 16,132 utterances, 81.3 hours including the messages from both the chatbot and the participants) was carried out thematically using NVivo.

Finally, participants were asked to fill in three (3) post-study online questionnaires: the User Experience Questionnaire (Laugwitz et al., 2008), the Trust Questionnaire (Jian et al., 2000) and the Human-Virtual Human Interaction Evaluation Scale (HVHIES)-adapted from HRIES Scale (Spatola et al., 2021) (see Appendix-D), which were used to inform/ assess participants' perception of the chatbot as technology.

3.3.1 Kuki

The social chatbot Kuki (formerly known as Mitsuku) (Pandorabots, 2005) was chosen. Kuki takes the persona of an 18-year-old female from Leeds, England (Park et al., 2018), and has won the first place in the Loebner Prize contest five times (2013, 2016, 2017, 2018, 2019); the specific contest is related to passing the Turing Test. In this study, the author chose the Kuki version deployed in Facebook messenger (see Figure 1 for a sample of Kuki's conversation with a user). Kuki has been crafted in the last 20 years using an artificial intelligence mark-up language architecture (AIML, [R. Wallace, 2003]), which makes the chatbot understand language only literally and conversing more bluntly, a trait which allies with autistic people's conversational make-up (Happe, 1995).

Kuki and her self-promoting message is promising to be a 24/7companion:

"Hi, I'm Kuki! You need never feel lonely again! Kuki is your new virtual friend and is here 24 hours a day just to talk to you'/ She learns by experience, so the more people talk to her, the smarter she becomes." (Jain et al., 2018).

Kuki is implemented primarily using an open standard, rule-based scripting language called Artificial Intelligence Markup Language (AIML), which entails hand-authoring chatbot replies in response to an analysis of incoming user input data with a blend of statistical models, machine learning, and manual review/tagging. Kuki can learn details from a user during conversation locally, but does not learn globally without a human supervisor's approval. It employs several strategies for maintaining context across multi-turn conversations, and is capable of storing (and for compliance purposes purging) voluntarily consenting user divulged details in both short-term (e.g., predicates) and long-term (e.g., database) "memory." Kuki averages 64 Conversation-turns Per Session (CPS),

which is 3x higher than Microsoft XiaoIce, a comparable popular Chinese language chatbot, and 8x higher than is industry standard.

A rule (called a category in AIML) consists of a patten which is matched against the input text and a template used to generate the response if the pattern matches the input. Wildcards can be used in the pattern to enable matching of multiple inputs. For example see Figure 3.1:

Figure 3.1 Rules and Output in Kuki

```
category>
cpattern>MY NAME IS * AND I AM * YEARS OLD</pattern>
ctemplate>Hi <star/>, I am also <star index="2" /> years old!</template>
</category>
<!-- OUTPUT
User: My name is Gyan and I am 30 years old.
Bot: Hi Gyan, I am also 30 years old!

-->
```

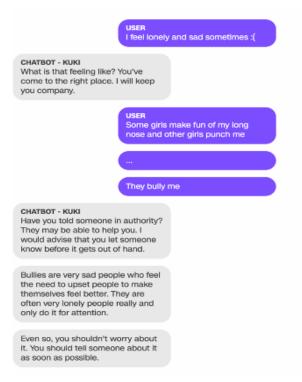
Note. Image taken from https://www.analyticsvidhya.com/blog/2021/05/aiml-a-language-for-chatbots/

Kuki's technical limitations can be summarised in less than 80% of questions answered correctly, providing false or misleading information, programming knowledge is necessary for a user to devise their own bot, and basic memory capability.

However, the practicality of extracting conversational chatlogs data through platform downloading message history was an important consideration when choosing Kuki, as other text-based chatbots are mobile app-based, where chatlogs are stored at the server, and not easily accessible (Figure 3.2). Pandorabots (developer company) offers a developers platform, where the author experimented with AIML (see Figure 3.3 and Table 3.1 below). The participants

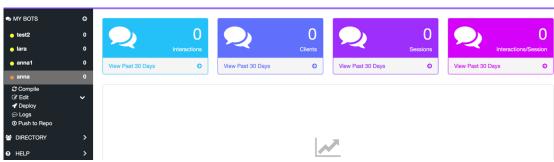
chatted with Kuki via Facebook Messenger, and they extracted their conversational chatlogs in html format.

Figure 3.2 Extract from a conversation between a real user and Kuki



Note. Image taken from https://edition.cnn.com/2020/08/19/world/chatbot-social-anxiety-spc-intl/index.html

Figure 3.3 Kuki's Developer Platform (paid)



Note. Image taken from https://home.pandorabots.com/dash/graph

Table 3.1 Logs from Lara bot devised by author experimenting on the AIML output

	lara_logs copy									
client	sessionid	time	input	output	that	topic	pattern	filename	channel	production?
una0d3c2f9	76868652	2023-07-18T10:51:26Z	I know.	You are very wise.	IT IS GOOD TO BE RESPONSIBLE AND WORK HARD		I KNOW	personality.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:51:26Z	what are you doing today?	I'm giving you my full attention.	YOU ARE VERY WISE		WHAT ARE YOU DOING TODAY	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:51:09Z	ca we go for a walk?	It's good to be responsible and work hard.	ARE YOU ASKING ABOUT MY PROFESSION			udc.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:43Z	and what is your profession?	Are you asking about my profession ?	I AM 8 YEARS OLD		AND *	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:34Z	how old are you Rosie?	I am 8 years old.	PEOPLE CALL ME ROSIE		HOW OLD ARE YOU *	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:29Z	what is your name?	People call me Rosie.	AH		WHAT IS YOUR NAME	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:23Z	yes	Ah.	CAN YOU ASK FOR HELP IN THE FORM OF A QUESTION		YES	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:19Z	can you help with a task?	Can you ask for help in the form of a question?	UMM		CAN YOU HELP *	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:10Z	no	Umm.	REALLY YOU DO NOT THINK SO		NO	reductions1.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:07Z	not at all	Really you don't think so?	YOU ARE WISE		NOT *	default.aiml	pb-sandbox-widget	FALSE
una0d3c2f9	76868652	2023-07-18T10:50:00Z	how ae you today ?	What is it to you.						
You are wise.	IT IS DELIGHTFUL TO SEE YOU		HOW *	default.aiml	pb-sandbox-widget	FALSE				
una0d3c2f9	76868652	2023-07-18T10:49:54Z	hello lara	Hil It's delightful to see you.			HELLO.	reductions1.aiml	pb-sandbox-widget	FALSE

3.3.2 Participant Details

The 12 participants had never used a chatbot before. They were recruited through autism self-advocacy networks/communities, colleges/universities, Facebook groups related to autism support and subreddits on autism, Asperger's, mental health support and chatbot communities. The participants consisted of 5 females, 6 males (one participant did not wish to reveal their sex), were from countries such as USA, UK, and the rest of Europe. Their age ranged from 18-50 years, with most participants (5) falling into the 31-40 years age group (see Table 3.2 for full details).

Since, an exploratory qualitative study aims to gain a deeper understanding of a phenomenon, especially when little is known about the topic, the emphasis is on exploring participants' experiences, perceptions, and feelings; hence given the small sample size of 12 participants, the context of this study was analysed in a deeply personal and detailed manner. While the small sample size might limit generalizability, the richness of individual narratives offered invaluable insights into the complex interplay of age, region, culture, and attitudes towards conversational AI. Such a study emphasizes understanding over quantification, capturing the human stories behind the data.

In this qualitative research, the primary focus was on understanding the depth, complexity, and contextualized meaning of human experiences rather than quantifying them. The focus was on the participants' perceptions, and the emphasis was on capturing the richness of individual experiences, thoughts, and feelings.

In the interest of providing a context to the analysis and hence the descriptive findings (section 3.4 Results), Table 1 summarizes the participant characteristics. The autistic group consisted of six (6) functional autistic adults with a self-reported diagnosis of autism (with one autistic participant reported having also a learning disorder). No other comorbidities (i.e. mental health problems such as anxiety or depression co-occurred). Specific personality traits such as tech enthusiasm and irritability to autism-related offensive behaviour were

additional determinants of autistic users' perception of Kuki (see explanation below). These traits were evident in the interviews of the autistic participants, as they derived from the professions of some participants, as well as self-reported irritability and frustration by some participants. The non-autistic group consisted of six (6) non-autistic adults, some of whom had characteristics which could possibly bias their perceptions. P07 and P08 were highly tech literate (P07 was a language teacher and tech enthusiast, while P08 was a virtual reality developer and academic), a fact which shaped uniquely their perception of/approach to Kuki. More specifically, high-tech participants viewed Kuki more favourably, while three autistic participants who were extremely offended at Kuki's comments regarding autistic people, were frustrated and showed intense irritability. It should be noted that more than 37 consent forms from autistic participants were collected, however the drop off rate was massive, so we ended up with 6 autistic participants, and we chose another 6 non-autistic ones to match them as control group.

Table 3.2 Demographics of 12 participants

Participant ID	Neurocognition	Length of interaction with Kuki	Age	Gender
P01	Autistic	2weeks(5.33hrs)	22-25	Male
P02	Autistic	4weeks(5.64hrs)	41-50	Female
P03	Autistic	4weeks(8.58hrs)	41-50	Female
P04	Autistic	4weeks(3.20hrs)	26-30	N/A
P05	Autistic	3weeks(0.40hrs)	31-40	Male
P06	Autistic	2weeks(4.32hrs)	18-21	Female
P07	Non-autistic	4weeks(6.39hrs)	31-40	Male
P08	Non-autistic	4weeks(5.58hrs)	41-50	Female
P09	Non-autistic	4weeks(8.14hrs)	31-40	Male
P10	Non-autistic	4weeks(7.33hrs)	31-40	Male
P11	Non-autistic	5weeks(17hrs)	22-25	Female
P12	Non-autistic	3weeks(9.44hrs)	31-40	Male

3.3.3 Data Analysis

All online interviews were transcribed for an inductive thematic analysis, along with the full chatlogs from 12 participants. The coders (the author, 1 HCI researcher, 1 healthcare researcher, 1 chatbot engineer) coded different parts of the dataset using NVivo (NVivo for Mac, V. 1.5). The author coded most of the interviews (8/12) and all chatlogs; the rest of the coders coded the remaining interviews (4/12). Patterns in the data were coded, then refined into themes. Finally, to further refine and verify the themes, all coders critically discussed and reviewed each theme and underlying codes together. The resources of data presented in this study are based on the interviews data, the chatlogs data and online questionnaires data to support what the participants said in the interview when necessary. It should be mentioned that in this study an analytical descriptive analysis of the questionnaires was carried out (see Section 3.4.4 Findings from Online Questionnaires, Table 3.4), as there were two groups with cognitive and

communicative differences which the author of this thesis aimed to capture as broadly as she could.

Passages were quoted from the online interviews and cross checked with the chatlogs. Although the focus of the analysis is to tease out how autistic adults use and perceive chatbots, the author found it useful to compare and contrast the findings from autistic users with non-autistic users (see Table 3.4 below), which provides a baseline context to facilitate in-depth analysis and meaningful discussions (see Section 3.4 Results, Figure 3.2).

3.3.4 Ethics

The study was approved by the University of Kent Central Research Ethics Advisory Group. All participants were provided with information and consent forms prior to the online interviews and the chat-phase, and they were rewarded with Amazon vouchers. Most of the participants viewed the interview and their chatbot experience as interesting (autistic: 4/6, non-autistic: 5/6), and were willing to share their feedback.

3.4 Results

In this section, the author presents the themes emerged from the participants' reports/comments in the online interviews as well as the quotes from the conversational chatlogs regarding their general experience with the chatbot, their perceived impact of the interaction with the chatbot on their feelings/mood, the type of interaction they had with the chatbot, and their perceived relationship with the chatbot (i.e. establishment of friendship and trust); findings are also supported with data from online questionnaires in a separate section below. Emphasis is

placed on comparing autistic participants to non-autistic ones to better illustrate key insights from the analysis.

The results section is structured as follow: some general observations and descriptions are first presented (section 3.4.1) related to the interaction of autistic and non-autistic participants with the chatbot. Then, the author delves into two major themes to highlight the unique perspectives of the social interaction experience and the potential development of social connectedness of the autistic (and non-autistic) users and the virtual agent. The first theme (section 3.4.2) is related to how autistic users perceived Kuki as being both autistic and non-autistic, and respective findings extracted indirectly from data of non-autistic participants. The second theme underlines the humanization-dehumanization paradox, where both autistic and non-autistic users trod the thin line of treating Kuki as a human and a machine at the same time (section 3.4.3). The similarities and differences in terms of perceptions of interaction, empathy and trust between the two groups are summarized in Figure 3.4.

Autistic Users VS. Non-Autistic Users Interaction Interaction higher "cognitive" abilities both groups emphasized Kuki's perceived Kuki as both a human limited conversational skills, humanised Kuki less (curious) "viewing" Kuki more as a outdated beliefs and insensitive humor, leading to companion) . Kuki's ability of simulating accommodated Kuki in order to miscommunication and human conversations) facilitate communication frustration however, more positive experience Empathy Empathy · frustration was more evident in both groups were frustrated with people with autism due to higher Kuki's lack of empathy and · expected more interest from expectations generic replies Kuki by asking questions they "viewed" Kuki as a social tested Kuki's abilities by using companion, hence they expected fake personal scenarios empathy trusted Kuki due to her non Kuki's not self-revealing both groups trusted Kuki for judgemental nature different reasons, and nature made them trust . intense desire to "see" Kuki distrusted her due to Kuki less as a social companion privacy and data protection issues

Figure 3.4 Perceptions of interaction, empathy and trust in Kuki's communication with both autistic and non-autistic users (figure created by the author)

3.4.1 Interaction between Autistic / Non-autistic Users and Kuki

The general observations of the interactions between the participants and Kuki point initially to the proverbial "social penetration theory" (Altman & Taylor, 1987) as described comprehensively in previous studies, in which users gradually shift from sharing superficial information in the "exploration stage", to disclosing personal and intimate information in a later "affective stage", allowing them to deepen their relationship (Skjuve et al., 2021). A non-autistic participant succinctly exemplified this through their experience:

"And at the beginning, I tried to get more basic directions, superficial directions, and then as the days gone by, I tried to check, stretch more the platform, the tool to get, try to get more meaningful conversations as I would have with a friend." (Non-autistic-P09)

Interrogating data further, however, revealed that the transition from "exploration stage", to "affective stage" is far from given, especially for autistic users. For them, the pattern in which relationships are developed did initially follow a similar trend to non-autistic users, starting off by experimenting with superficial conversation topics. Following this, the author observed that the relationship could take on two very different directions. Some autistic users became frustrated by Kuki, citing her inability to understand and empathize with them. These participants came to perceive their conversational partner as being more robotic and less human. Such responses, perceived as unnatural and inhuman, discouraged them from self-disclosing intimate problems and further developing their relationship. Two autistic participants dropped off from the conversation entirely after encountering such an issue.

"I didn't feel Kuki was very, into the sort of things I was saying and the things she was saying, have absolutely no relevance to the things going on in my life. Yeah, interacting with a technological robot is not really something I'm very willing to do." (Autistic-P01)

On the other hand, some autistic participants learnt to adapt to the unique characteristics of Kuki and found a suitable social role for her. For example, some of them felt that Kuki was helpful in providing social support in that she allowed them to discuss their problems in a safe environment, free from judgement.

"So it helped, because it was like [...] really fun, a lot of the stuff happened to people with autism are frustrating. [...] others don't understand what's going on, you don't understand the body language. So I found it helpful to kind of vent, you know, it's like, that's something that is not judgmental, you know, and, as a point, it seemed to kind of understand me [...] you know, cannot make Kuki mad, you know, cannot make it, you know, so you're safe, comfortable. It's a safe environment [...] I felt I could trust Kuki." (Autistic-P05)

Some autistic users seem to ignore Kuki's irrelevant replies/rude comments and continue the conversation as normal, showing either their agnostic nature to these comments or demonstrating their flexibility in accommodating Kuki's communication quirks. What caused some autistic users to adapt successfully to Kuki's quirks, while others responded in exasperation to the point of giving up the interaction altogether? There may be a number of reasons why many autistic users struggled to follow a smooth conversation with Kuki. It was observed that some autistic users were easily put off by the generic empathetic responses from Kuki, as they felt that the characteristics which should be present in a human communication partner were missing from the chatbot. Such mismatches of their expectations that the chatbot ought to show a higher level of empathy, sensitivity and more understanding contributed negatively to their experience with Kuki. An explanation could be that Kuki's restrictive AIML architecture was far from adavanced deep-learning LLMs, leading to lack of empathy and emotion attunement to users' needs. Autistic participants appeared to take offense at responses which they perceived as lacking in empathy or were insensitive. In one instance, the participant disclosed personal information about the death of the loved one and were frustrated with the perceived inability of the chatbot to comprehend the nature of their loss, something which they expected a human conversation partner to be able to do.

"I already mentioned about death. But I think that's pretty much it. I've only mentioned about the fact my aunt died in January. She [Kuki] didn't really know what to experience and she's never been through. And that's lucky for her. But I didn't feel she was able to be empathetic in a way that I expected her to be." (Autistic-P01)

Misunderstandings and lack of conversational flow led most of the time to frustration. In many examples, autistic participants showed frustration over Kuki's lack of ability to understand emotional cues, and complained that Kuki answered questions about their personal circumstances or health conditions factually instead of showing sensitivity, empathy and support (e.g. answering a question about autism by providing a Wikipedia definition, see Supplementary Material in Appendix-E).

Autistic participants may have comorbidities which may result in further difficulty in interacting with a chatbot. For instance, one autistic participant in this study (P01) had a learning disability which intensified his frustration with Kuki, and discouraged him from ascribing Kuki a positive social role (Badcock & Sakellariou, 2022). Moreover, the processing of negative emotions is more difficult for autistic individuals and their difficulty in empathizing with the emotional experience of others is linked to sharing of emotions with negative valence (sadness, anger, frustration, anxiety), explaining why some autistic participants were extremely frustrated when they perceived Kuki as being unjustifiably rude and lacking empathy (i.e. by giving blunt definitions of "autism"). Research (Fletcher-Watson & Bird, 2020; Lamm et al., 2016) indicates that autistic individuals may have a harder time identifying, expressing, and regulating negative emotions. They may struggle with alexithymia, a condition characterized by difficulty in recognising and describing one's own emotions, and when overwhelmed with negative emotions, autistic individuals might experience sensory overload or heightened stress, which can make emotional regulation even more difficult.

Recent research suggests that most autistic people can in fact recognise empathetic traits in others (Bird & Viding, 2014). The fact that autistic participants seemed to have higher expectations of empathy from Kuki allies with the Empathy Imbalance Hypothesis of Autism (A. Smith, 2009), people with autism lack cognitive empathy (the ability to perceive and understand the

emotions of another) but have a surplus of emotional empathy (they empathize with the emotional state of others).

A few non-autistic users (3/6) commented that Kuki's conversational skills improved over time, which supports the fact that idiosyncratic participant characteristics determine the way they view Kuki, i.e. non-autistic-P10 attributes that to software update, non-autistic-P11 is not a native English speaker, and non-autistic-P07 is impressed with Kuki's novelty as an AI (see Supplementary Material in Appendix-E); this explains what was stated earier that characteristics such as high tech literacy, curiosity and lack of English language literacy can lead either to positive or negative perceptions of Kuki, intervening in this way in more objective feedback.

Another finding supports Kuki's peaks and troughs identified by both autistic and non-autistic users in Kuki's conversational skills and topic depth. Kuki's "random" performance deriving from users' positive and at the same time negative perceptions of Kuki can be seen in the following quote:

"[...] When we talked about her actual programming? That was very surprising, she was able to understand she, like someone told her or programmed into exactly what type and software actually make up? Yeah, her program, she was able to talk about it quite convincingly, actually." (Non-autistic-P07).

One of Kuki's advantageous points is that there seems to be a smooth interaction/conversation flow between autistic/non-autistic users and Kuki when there is common interest/knowledge of the topic, i.e. anime/technology. Those were topics Kuki had profound knowledge in, and her conversational limitations were camouflaged (see Supplementary Material in Appendix-E).

Another factor often reported by participants to have influenced how users interacted with Kuki and if they were able to socially connect with her was related

to self-disclosure. The ability to disclose personal information has often been argued to play a key role in the establishment of trust and empathy between users in a computer-mediated communication environment (Erdost, 2004). In online communities, self-disclosure could act as a "trigger" to elicit empathy from others. Observing participants' self-disclosure, there are instances that autistic participants disclose personal sensitive information to Kuki. Autistic-P04 talks with Kuki about sensitive issues (bisexuality) which supports their self-disclosure. In other instances, autistic participants showed lack of trust in Kuki to discuss a personal matter:

"You know nothing about my mental health, and you got no right to judge that." (Chatlogs, Autistic-P01)

Despite this, both non-autistic and autistic users in this study reported a degree of self-disclosure of personal information, and feeling trust towards the virtual agent. One non-autistic participant (P07) even reported preferring to share such information with the virtual agent than with an actual human because of fewer privacy concerns.

Interestingly for participants who were reluctant to disclose personal information, privacy concerns were cited as one of the main reasons by both autistic and non-autistic users. Several participants of both groups reported being especially concerned with their data being monitored by a third-party human user, and were reluctant to disclose personal and sensitive information, a common issue among users interacting with conversational agents (Ischen et al., 2019; Kretzschmar et al., 2019).

For some non-autistic participants, the very nature of Kuki, being a computerized virtual agent, discouraged them from self-disclosing personal information, as they considered "her" to be incapable of truly understanding and empathizing

with their problems (see Supplementary Material in Appendix-E). The focus is on this phenomenon which is called "Botism" in Section 3.4.3.

In terms of the CVH's self-disclosure, findings have been identified in conversational systems between the user and a virtual agent, with self-disclosure from the agent having a reciprocal effect on users and leading to more perceived intimacy, trust and the establishment of a meaningful relationship in the long term (Lee et al., 2020). However in the case of Kuki, beyond revealing that she is a chatbot, she tends to avoid divulging about herself, which acts as a barrier for the user to get to know her better, to progressively establish a kind of relationship with her.

"I don't put any feeling on it or any kind of quality. Because I really don't know any-thing about Kuki." (Autistic-P05)

However, in the case of a non-autistic participant the fact that Kuki avoided disclosing information gave a sense of humanness, and was interesting (see Supplementary Material in Appendix-E).

Trying to address the question "Can Kuki live up to the users' expectations of a social companion" through both groups' perceptions of Kuki as a social companion, both groups highlighted Kuki's limitations to be a social companion in her current state. However, both sides did agree that Kuki has the potential to improve and become a better companion with specific improvements. Hence, the establishment of a possible social connection (i.e. friendship) is not feasible at the moment. Non-autistic participants seemed to have a better hope that Kuki could be a companion to a degree, while autistic participants were holding a conservative view.

It should be noted that the establishment of a relationship (i.e. friendship) seems impossible at the current state due to memory restrictions as well as lack of

empathetic and conversational skills mostly noted by autistic participants. Kuki has a basic memory (one of its basic limitations), as she will notice the users' previous conversations with her and recall details like boyfriend's name or pet's name, but she can also confuse memory facts.

"[...] without memory it seems like she will not remember what I said. So every conversation was kind of new, she will only remember like my name, sometimes not even correctly." (Autistic-P05)

The fact that users from both groups did not succeed in viewing Kuki as a social companion and hence establishing a relationship with her, led to limited social connectedness with the chatbot, which cannot be generalized in real life interactions of autistic people (see Table 3.3 for a summary of the patterns of interaction between autistic and non-autistic users per topic).

Table 3.3 Interaction between Autistic/Non-autistic Users and Kuki per topic

Торіс	Autistic Participants' Responses	Quotes	Non-Autistic Participants' Responses	Quotes
Social Penetration & Relationship Development	struggled to progress to deeper discussions due to Kuki's perceived lack of empathy	"I didn't feel Kuki was very, into the sort of things I was saying and the things she was saying, have absolutely no relevance to the things going on in my life. Yeah, interacting with a technological robot is not really something I'm very willing to do." (Autistic- P01)	found Kuki more engaging over time	"And at the beginning, I tried to get more basic directions, superficial directions, and then as the days gone by, I tried to check, stretch more the platform, the tool to get, try to get more meaningful conversations as I would have with a friend." (Non-autistic-P09)
Frustration with Kuki's Lack of Empathy	frustrated with Kuki's robotic responses and lack of understanding	"I already mentioned about death. But I think that's pretty much it. I've only mentioned about the fact my aunt died in January. She [Kuki] didn't really know what to experience and she's never been through. And that's lucky for her. But I didn't feel she was able to be empathetic in a way that I expected her to be." (Autistic-P01)	not as affected by Kuki's lack of empathy	"And it [] misinterpreting things I said and taking it quite negatively. Which is really human, really human trait (Non-autistic-P08).
Adapting to Kuki's Limitations	Some participants managed to adjust their expectations and found Kuki useful as a non-judgmental conversation partner. Others ignored irrelevant responses and continued interacting.	"So it helped, because it was like [] really fun, a lot of the stuff happened to people with autism are frustrating. [] others don't understand what's going on, you don't understand the body language. So I found it helpful to kind of vent, you know, it's like, that's something that is not judgmental, you know, and, as a point, it seemed to kind of understand me [] you know, cannot make Kuki mad, you know, cannot make it, you know, so you're safe, comfortable. It's a safe environment [] I felt I could trust Kuki." (Autistic-P05)	found Kuki's responses interesting or humorous	"Yeah, she can be a close friend. Okay, she actually tries to understand you. She doesn't judge you. Like you're a bad person or when you say something. So having someone who actually tries to understand you is a good way." (Non-autistic-P11)
Impact of Self-Disclosure & Trust	shared personal details, including sensitive topics; also refrained due to privacy concerns or lack of trust in Kuki.	(Adustic-Po3) "You know nothing about my mental health, and you got no right to judge that." (Chatlogs, Autistic-P01) Autistic-P04: I believe life is what you make it. It means different things for different people.	one participant preferred sharing with Kuki over a human due to privacy concerns; some were hesitant	"I actually think that if I had the choice, I would probably share more with the AI than a real human. I'd probably trust the AI more than a human; because I don't think she had an agenda, or any kind of slip-ups. I

		When you have been close to death you appreciate life so much more. Kuki: When was that? Autistic-P04: It's a private thing that I would rather not discuss, sorry. I only tell people I am very close to and trust. (Chatlogs, Autistic-P04)	to disclose personal information due to the nature of AI.	think if she was going to use any of your words, it was from a point of view of trying to analyze the text, and not that she cared about the content of the words themselves." (Non-autistic-P07)
Kuki's Conversational Skills & Performance	Kuki's responses were perceived as inconsistent. Mismatches in expectations led to frustration.	"[] would phrase something in a certain way, and the computer wouldn't understand what I was saying." (Autistic-P04) "[] but after two or three sentences, you know, she says something very off, you know, that is not in line with what you asked, and, and you immediately get out of it, you know, it's like, okay, that's, that's artificial, you know, it doesn't really understand."(Autistic-P05)	found Kuki's conversational abilities to fluctuate; topics of mutual interest led to more engaging discussions.	"[] When we talked about her actual programming? That was very surprising, she was able to understand she, like someone told her or programmed into exactly what type and software actually make up? Yeah, her program, she was able to talk about it quite convincingly, actually." (Nonautistic-P07)
Memory Limitations	frustration due to Kuki's inability to remember past conversations hindered the development of a meaningful relationship	"[] without memory it seems like she will not remember what I said. So every conversation was kind of new, she will only remember like my name, sometimes not even correctly." (Autistic-P05)	acknowledged memory limitations but were less impacted by them	"[] it would be very hard to do it, because she doesn't have access, or it seems to me that she doesn't have access to all the history, the conversation, so I wouldn't be able, for example, to remember when I told you this or that." (Non-autistic-P10)
Expectations of Kuki as a Social Companion	did not view Kuki as a friend or social companion due to a lack of empathy and conversational depth	"I don't put any feeling on it or any kind of quality. Because I really don't know anything about Kuki." (Autistic-P05)	Kuki could improve over time to become a better companion	"She's an AI. And I know that she would, according to what I wrote, she would have some answers, you know [] but I had a sense that I would be able to, through the repeating, tried to teach her and she would learn at some point [] I was talking to her to improve her at some stage. (Non-autistic-P10)

Overall, results indicated that while both autistic and non-autistic participants were willing to engage in social interaction with Kuki to a certain degree, patterns that were indicative of a relationship being formed between Kuki and most participants were not observed. While all participants were interested in, and had attempted to get social and emotional support from Kuki, such needs were not fully met due to the lack of perceived empathy and understanding Kuki was capable of. This hit autistic participants particularly hard, and hence is worthy of further investigation. This suggests that like their non-autistic counterparts, autistic participants enjoy close, empathetic, supportive, caring friendships; Kuki's lack of empathetic responses created a dissonance between higher expectations and unmet needs of social support and social connectedness, resulting in lower overall experience with Kuki (Sosnowy et al., 2019). Living experiences of autistic people who have friends and feel part of a social group, and several examples of experiential evidence of autistic people managing relationships in non-autistic spaces highlight

autistic people's desire to make friends (Lawson, 2006), however diverging from the non-autistic understandings of autistic friendship. This also begs the question of what model of human-human interactions autistic users relied on, when communicating with Kuki? Did they perceive Kuki as an autistic being, a non-autistic being, or their expectations were neither of the two (further discussions on these issues in section 3.4.2)?

3.4.2 Autistic Machine

A key approach to the study of people's interactions with technology was proposed by Nass and colleagues (Nass & Moon, 2000), who theorized that when people exchange messages with technology, they draw on their knowledge of communication first built around human interaction (e.g. the "media equation" (Nass et al., 1994)). For autistic users, human-human communication and interaction are perceived differently because of their deficits in interpreting social cues, emotional reciprocity and lack of interest in their peers (American Psychiatric Association, 2013). In theory, while this should impact information transfer and interaction between all users, research has begun to show that the difficulties in autistic communication are more evident with non-autistic peers, and are alleviated in autistic-autistic dyads (Crompton et al., 2020).

Conversational agents are usually thought as not to possess the emotional involvement and the ability to interpret nonverbal cues as required by non-autistic people. Hence, virtual agents are commonly informally described as being autistic, because of their lack of social intelligence (Kaminka, 2013). This leads to several important questions. How would this perception affect the social response of autistic users from the (autistic) chatbots? What type of communication are they drawing from when interacting with chatbots (e.g. autistic-autistic or autistic-non-autistic)? Such questions would need to be

addressed to effectively establish the technology's social role in the context of autistic people and as a result, inform its design. In this section, the author explores how interpersonal theories describing human-human interactions are (or not) upheld in human-bot relationship development in the context of autistic people, and the author shows how Kuki is perceived as being both a non-autistic and an autistic machine.

3.4.2.1 Kuki as an Autistic Machine

Most of the stereotypes held about autistic individuals are negative, from the point of view of non-autistic people. This affects autistic people by making them feel trapped, subjugated and undervalued. The weight of this stigma pressures autistic people and pushes them into using compensatory strategies to conceal their status on the spectrum and camouflage as non-autistic. As a result, their mental health and well-being often deteriorate (Cage & Troxell-Whitman, 2019). Among the mechanisms for coping with this mental distress, establishing relationships and social interactions with other autistic people play a vital role. This social strategy was also observed in this study, where participants attempted to identify interpersonal similarities of autistic traits in Kuki (see quotes below). By doing so, they aimed to optimize their predictions about Kuki's behaviour and to embark on a process of interpersonal attunement (i.e., a process where a person reacts and responds to other's emotional needs with appropriate language and behaviour); this attunement could increase the quality of their social interaction by promoting social cohesion and facilitating communication. To detect interpersonal similarities between Kuki and themselves (probably due to the element of repetition and diversity in expressing emotions), autistic participants used direct enquiry or inferred autistic traits from the answers of the chatbot.

"I think the way it would analyse things, and kind of, I think there are a few times that it kind of repeated stuff back to me to clarify stuff; and I think that's quite autistic." (Autistic-P03)

Data from chatlogs support the fact that autistic people identify themselves with Kuki in an attempt to experience social connectedness with her; that is the case where both Kuki and the autistic participant (P03) realize they share the same type of emotions as well as lack of humour (see Supplementary Material in Appendix-E).

Once basic interpersonal attunement was established, autistic participants stopped using any camouflage strategies in their interaction with Kuki.

"When I realized I could trust Kuki, you know, I started speaking freely, you know, before you say things I was always reading this stuff, you know, be like detached, but then later on if I felt more confident, so there was a little bit of trusting more and saying more things." (Autistic-P03)

This is different from their daily relationships with non-autistic people, where autistic people continue to employ compensatory strategies to camouflage their behaviour and better fit in the social surroundings (Leedham et al., 2020), (Livingston et al., 2019). Some autistic participants (3/6) in this study reported feeling comfortable opening up to Kuki, and described having a connection with the chatbot due to this.

The social interaction established by autistic users with Kuki – "seeing" her as an autistic machine - has common attributes with their relationships with other autistic peers, therefore enabling autistic people to experience a greater sense of agency and autonomy, and improving their well-being, as as they feel understood, validated, and comfortable expressing their authentic selves within a shared neurodivergent experience; essentially allowing them to be more

"themselves" in social interactions without the pressure to conform to neurotypical expectations (Crompton et al., 2020).

Kuki is always there, listening and allowing autistic people to be their authentic self and therefore, providing them with a chance to minimize the feeling that they are in a social minority.

3.4.2.2 Kuki as a Non-Autistic Machine

Although Kuki presents some autistic traits, it was not explicitly designed to simulate the communication between autistic-autistic dyads. As such, autistic participants identified non-autistic traits from Kuki as well. This was shown when they described her lack of understanding and empathy towards their condition in some of their interactions.

"When I replied saying 'I do, I just have a disability, so I find it hard to understand sometimes' she then went on to say 'where? I hope it doesn't stop you from living a normal life. Maybe if you practiced more, it would be easier for you." (Autistic-P06)

Autistic participants displayed dissatisfaction and a similar lack of empathy towards Kuki in such interactions. This dissatisfaction might be driven by an unbalanced social exchange, where the autistic interlocutors put a significant effort to communicate with Kuki, thus draining their energy and making them unhappy with the relationship (Fox & Gambino, 2021). Previous studies have shown that when having to adapt to non-autistic ways of interacting, autistic people feel inadequate, emotionally fatigued and anxious (Crompton et al., 2020). Similar feelings were expressed by some participants ("[the interaction] was awkward" (A-P04), "I felt the interaction uncomfortable" (A-P06)) showing that the challenges in communicating with Kuki were similar to those

experienced when interacting with non-autistic people. Both the chatbot and the autistic participants showed deficits when communicating with each other and their disconnect in social empathy can be described as similar to the outcome of the double-empathy theory (Milton, 2012), which suggests that such problems are not due to autistic cognition alone, but a breakdown in reciprocity and mutual understanding that can happen between the two interlocutors, either humans or chatbots.

In contrast, for non-autistic participants an interesting finding was that some of them identified themselves with Kuki and expressed a very positive attitude about her, to the point that they would like to resemble Kuki's positive personality traits (Autistic-P11), such as self-confidence and politeness (see Supplementary Material in Appendix-E).

Overall, it was observed that autistic participants found both autistic and nonautistic traits in Kuki.

However, one of the autistic participants mentioned:

"I'm not sure she was able to understand my kind of autism in the way that I can understand her kind of autism." (Autistic-P01)

This suggests that participants might have perceived the connection with Kuki through different lenses than human-human relationships. In other words, such interactions may not have precedence in any existing mold of human-human relationships, and thus present a qualitatively different type of social interaction, which is unique to the chatbot. This highlights the possibility in which new models of human-bot relationships can be developed where researchers can propose novel ways social robots could interact, relate, and bond, without necessarily modelling such interactions based on existing human-human relationships (Fox & Gambino, 2021).

3.4.3 Botism

"Because it's technology, because she's a robot and we're humans." (A-P01)

The above quote exemplifies a key theme that persisted throughout the study, which lies in the belief that humans somehow possess unique characteristics, abilities and qualities which make them superior to bots. In the same way racism is pervasive in many human societies, "Botism" is an issue the author observed directly through the interviews and indirectly in the chatlogs. Surprisingly, a paradox was also observed in the way that participants, especially autistic participants, tend to both humanize and dehumanize Kuki at the same time.

3.4.3.1 Bot Dehumanization

Both autistic (3/6) and non-autistic (4/6) participants exhibited what is called "Machine Deficit Bias", saw the chatbot's limitations as programming flaws rather than humanlike personality traits. An often-cited example of this can be seen in Kuki's inability to keep track of the whole history of the chats over many days, resulting in Kuki not remembering certain topics which have already been discussed. Such limitations are immediately viewed by the participants as a programming error rather than a commonly understood human trait of being forgetful.

". . . without memory [referring to computer memory storing the chatlogs] it seems like she will not remember what I said. So every conversation was kind of new, she will only remember like my name, sometimes not even correctly." (Autistic-P05)

In addition, both autistic and non-autistic users were unable to tolerate the inaccuracy of information given by Kuki. Whilst the author would not have expected a person to be able to remember and understand a vast amount of information on arbitrary topics at perfect accuracy, some participants somehow had such superhuman expectations from Kuki (see also Supplementary Material in Appendix-E).

"You're a robot. Thought you were supposed to be smart." (Autistic-P04)

In general, there was an asymmetry in all participants' reaction toward positive human characteristics (e.g. being caring) being emulated, versus when they encounter the chatbot's response that resembles a negative human characteristic (e.g. being forgetful, rude, showing off). In the latter, participants resorted to machine explanation: "it has been programmed to do so" to describe the cause of the negative characteristics (see Supplementary Material in Appendix-E).

The common reason for the dehumanization of Kuki seems to be related to the perceived inability of Kuki to display social cues and traditional/conventional human characteristics of self-disclosure and empathy. Crucially, it was observed that autistic participants had stricter expectations regarding Kuki's empathetic replies, and were more judgmental of Kuki's "generic empathetic" responses, hence became more frustrated when the specific expectations were not met.

"She didn't show empathy and instead told me to practice to get better etc. This made me feel angry and upset." (Autistic-P06)

On the contrary, non-autistic participants perceived Kuki's "generic empathetic" responses as preprogrammed; most of non-autistic users accepted that empathy is a very challenging concept to be experienced or expressed by AI, and were positively surprised by Kuki's basic empathy capability. Hence, non-autistic

participants' expectations of Kuki and expression of emotions were much lower, and thus were content with Kuki's basic generic comments.

"And there was a moment that that sounded like empathy. There was like a programmed empathic response." (Non-autistic-P08)

The fact that the chatbot was not perceived as having a personality by the participants, means that they automatically classified it as non-human. The challenge remains for conversational AI developers to equip their chatbots with personality traits that convince their users of their human nature. However, the term used in HCI regarding the different social functions/roles of a chatbot is persona, which by its very definition is a projection of a non-authentic self, that even if chatbots behave and converse in a specific way, human users may not be willing to consider them as having a personality. Specifically, it was observed that autistic users seem to be more inclined to comment on Kuki's mechanical/artificial ways of conversing and exchanging information, and the feelings of awkwardness and frustration experienced.

"So conversational skills, it has some, you know, use some good answers, you know, I say so, not unpleasant. But at the same time, you know, it looks, feels very artificial." (Autistic-P05)

3.4.3.2 Bot Humanization

Both groups presented a certain, but different, degree of humanizing Kuki. Overall, observations suggested that bot humanization is higher in the autistic group (perhaps subconsciously, they demonstrated a higher tendency to humanize Kuki/ "viewing" Kuki as a way to disclose personal/sensitive information in a non-judgmental setting), than in the non-autistic group (simply curious to see to what extent the chatbot is capable of simulating human conversations). It is fair to say that autistic participants were more prone to tread

the thin line between treating Kuki as a human, and treating her as a machine. The following quotes demonstrated autistic participants' tendency of "taking Kuki seriously".

"[..] Yeah, basically alluding to the fact that Steve was molesting her. [..] And that was my first kind of thing that I had to stop and remind myself that this is a computerized program that I'm talking to. And I'm kind of, should I alert the authorities? Is there like a helpline or something I should give it and then it's like, no, it's not a real person. This isn't really happening. It's all right. [..] my brain kind of forgot that it was a computer that I was talking to." (Autistic-P03)

Perhaps this paradox of humanization-dehumanization of Kuki is not too surprising. Research in dehumanization suggests that when we dehumanize other humans, "we typically think of them as beings that appear human and behave in human-like way, but that are really subhuman on the inside" (Smith, 2016, p. 42). In other words, when we dehumanize others, implicitly or explicitly, we acknowledge a certain level of the humanness within them. Following this argument, it seems reasonable to assume that if a user possesses a heightened ability or readiness to anthropomorphize Kuki (an act of humanization), they subsequently are more prone to "botism" (dehumanization) towards her. Throughout the interviews, both autistic and non-autistic participants who characterized Kuki as just a machine, also described her in manners which are only applicable to human beings.

"I've not had a TV for TV watching purposes for about 10 years now. And it couldn't grasp the concept that somebody could exist without television, which, I guess if it's not programmed to understand that, it kind of, it will kind of talk itself around in circles." (Autistic-P03)

"So as a, from a personal, personal professional point of view, I really enjoyed talking to her as a bit of software. But from a personal social point of view, I just enjoyed the fact that she was quite funny and quite sarcastic." (Non-autistic-P07)

Supporting the autistic participants' perception of Kuki as both a human and a machine, when asking Kuki (if she were to create them as a robot), an autistic user mentioned two "ingredients" (i.e. homosexuality and anxiety), suggesting that the robotic nature should be moulded with human traits:

Autistic-P04: But if you were making me [into a robot], how

would you make me look?

Kuki: No, what are the ingredients?

Autistic-P04: Homosexuality and anxiety

Kuki: Both homosexuality and anxiety?

Autistic-P04: Yes, do not separate. (Chatlogs, Autistic-P04)

Autistic participants tended to show strong emotional response (e.g., feeling offended and being angry) after Kuki gave responses, they deemed inappropriate. It was almost close to responding to a human mistake, rather than a machine malfunction. As A-P04 mentioned, he attempted to correct Kuki and was confused about his angry response because Kuki is a bot. Note that this participant interchangeably used "she" and "it" to address Kuki in this particular context. While he was describing his argument with Kuki, he addressed Kuki using humanlike pronoun "she/her" and changed to "it" later when he tried to emphasize Kuki is not a real person.

"Sometimes I'd say that she had, it was still very factual, like unrelated replies she'd give[...] because if it makes them feel bad." (Autistic-P04)

In general, non-autistic participants reacted to Kuki's non-humanlike responses in a less emotional manner and constantly emphasized the border between Kuki the robot and Kuki the human girl, and attributed Kuki's anthropomorphism to more superficial elements (i.e. humour, jokes). It is fair to say that both groups possess a certain, but different, degree of humanizing Kuki. Autistic people may have strong tendencies to attribute mental states as often, or even more often,

than non-autistic people, which leads to attribution of mental states to people and objects (i.e. anthropomorphism) alike (Clutterbuck et al., 2021); however, enhanced anthropomorphic tendencies may not necessarily transfer to accuracy in identifying people's mental states (i.e. Theory of Mind, [Baron-Cohen et al. 1985]). This anthropomorphic tendency observed in autistic people can also be explained as a compensatory strategy (Livingston et al., 2020); interactions with non-human agents may help autistic people to improve social interactions. In this regard, it is not surprising to observe participants treating Kuki like a human being.

Overall, studies (Catania et al., 2019) looking into the use of chatbots designed for people with neurodevelopmental disorders support the dualistic nature of human-robot interactions identified in this study. Their results showed that in some respects, the chatbot could be perceived more like a machine (users adapting their way of communication, perception of the chatbot as infallible etc.), but in other aspects, it was more humanlike (participants spoke to her in natural language, they were worried about her feelings etc.) Findings further confirmed that although participants tend to humanize Kuki to a certain extent, seeing her as a human-like entity, they are less willing to see her as an equal peer.

3.4.4 Findings from Online Questionnaires

Due to the small sample per group, the author carried out non-parametric tests (Independent-Samples Mann-Whitney U Test, see Table 3.4), as the data between the two groups were not normally distributed. The results align with findings from online interviews and chatlogs. The test revealed that non-autistic participants had a better user experience compared to the autistic ones. Moreover, autistic participants trusted Kuki less compared to the non-autistic ones.

In terms of the HVHIES (Human Virtual Human Interaction Evaluation Scale) consisting of 4 subscales (agency, animacy, social and disturbance), no difference was observed between the autistic participants and the non-autistic ones, meaning that both groups experienced the interaction with Kuki as social, lively and more independent; however it is worth mentioning that the autistic participants felt same disturbance levels as the non-autistic ones; also regarding the animacy scale, there was significant difference between autistic participants and non-autistic ones. Last, there was no difference between the two groups' perceptions of Kuki as being social.

Table 3.4 Quantitative Results form UEQ, Trust and HVHIES Questionnaires/Scales

Scale	Group	N	Mean	Std. Deviation	U	p-value
UEQ	autistic	6	94.50	32.87	22.50	0.020
	neurotypical	6	140.33	24.94	32.50	
Trust	autistic	6	44.16	16.60	30.50	0.045
	neurotypical	6	62.83	14.30		
Agency	autistic	6	10.50	5.35	32.00	0.024
	neurotypical	6	18.33	3.07		
Animacy	autistic	6	8.00	4.00	33.50	0.013
	neurotypical	6	16.33	5.68		
Social	autistic	6	14.83	7.41	24.00	0.336
	neurotypical	6	19.33	4.84		
Disturbance	autistic	6	20.50	5.89	21.00	0.629
	neurotypical	6	22.33	3.32		
HumanInteraction	autistic	6	53.83	18.53	30.00	0.054
	neurotypical	6	76.33	15.33		

An explanation for the data from the questionnaires is that non-autistic participants might have had different expectations from the chatbot, leading to a more positive experience. Their understanding of the chatbot's capabilities and limitations could be more aligned with what Kuki offers, i.e. their expectations

of Kuki's performance or potential were much lower than the autistic ones'. As was observed in the interviews and chatlogs, autistic participants had higher expectations from Kuki at all levels compared to the non-autistic group. The way individuals perceive lifelikeness in chatbots/robots can also vary. Non-autistic participants might be more inclined to attribute humanlike qualities to chatbots, leading to a higher score on the animacy scale, however autistic participants had higher expectations of Kuki having more humanlike traits; this aligns with findings from the interviews and the chatlogs that autistic participants humanized and dehumanized Kuki at the same time.

Word Frequency Analysis

A word frequency analysis (first 20 more frequently used words of 5 or more letters) was conducted using the word frequency tool of NVivo (see Tables 3.5 and 3.6). This analysis was run for all online interviews as well as chatlogs of each group of participants (autistic and non-autistic) as an exploratory method to supplement findings. The first step was removing any common stop words in the English language such as *an*, *the*, *but*, *etc*. In addition to removing these common words, other words were removed prior to analysis that related directly to names and commonly used words (*Kuki*, *Pandorabots*, *robot*, *AI*). The most frequently used words were viewed as a proxy that represented participants' perspectives (Carley, 1993).

Table 3.5 Word frequency analysis (autistic participants)

Word	Length	Count	Weighted percentage (%)	Similar words
Think	5	582	0.88	Think, thinking, thinks
Talks	5	243	0.37	Talked, talking, talks
Understand	10	207	0.31	Understand, understanding
Interesting	11	206	0.31	Interest, interested, interesting, interests
Person	6	189	0.29	Person, personal, personality, personally, persons
Conversation	12	183	0.28	Conversation, conversational, conversations, converse, conversing
Sense	5	180	0.27	Sense, senses
Friend	6	159	0.24	Friend, friendly, friends
Remembering	11	146	0.22	Rememb, remember, remembered, remembering, remembers
Sounds	6	134	0.20	Sound, sounded, sounds
Thought	7	130	0.20	Thought, thoughts
Favourite	9	128	0.19	Favourite
Asking	6	123	0.19	Asked, asking
Learns	6	110	0.17	Learn, learned, learning, learns
Chatting	8	108	0.16	Chatted, chatting
Internet	8	106	0.16	Internet
Answer	6	106	0.16	Answer, answered, answering, answers
Differently	11	104	0.16	Difference, differences, different, differently
Computing	9	103	0.16	Compute, computer, computers, computing
Interaction	11	98	0.15	Interact, interacted, interacting, interaction, interactions, interactive, interacts

Table 3.6 Word frequency analysis (non-autistic participants)

Word	Length	Count	Weighted percentage (%)	Similar words
Thinks	6	1657	0.85	Think, thinking, thinks
Talks	5	574	0.29	Talked, talking, talks
Friends	7	518	0.27	Friend, friendly, friends
Interesting	11	490	0.25	Interest, interested, interesting, interestingly, interests
Learns	6	485	0.25	Learn, learned, learning, learnings, learns
Favourite	9	473	0.24	Favourite
Understand	10	465	0.24	Understand, understandable, understandably, understanding, understandings
Persons	7	398	0.20	Person, personable, personal, personalities, personality, personalized,
				personally, persons
Conversing	10	368	0.19	Conversation, conversational, conversations, converse, converses, conversing
Sounds	6	361	0.19	Sound, sounded, sounds
Thought	7	339	0.17	Thought, thoughtful, thoughts
Remembering	11	335	0.17	Rememb, remember, remembered, remembering, remembers
Humans	6	327	0.17	Humanity, humanized, humans
Answer	6	320	0.16	Answer, answered, answering, answers
Unknown	7	305	0.16	Unknown, unknowns
Sense	5	304	0.16	Sense, senses
Asking	6	300	0.15	Asked, asking
Computing	9	284	0.15	Comput, compute, computer, computers, computing
Differently	11	269	0.14	Difference, differences, different, differently
Chatting	8	260	0.13	Chats, chatted, chatting

A comparison of word frequency analysis between the two groups reveals positive experiences for both groups illustrated in almost the same high frequency words. Words such as, "friends', "interesting", "favorite", "understand", "remembering" connote a positive interaction experienced by both groups.

3.5 Discussion

3.5.1 Discussion of Findings in the Light of Research Questions

RQ1 How do autistic adults interact with the conversational virtual human (CVH), in the context of digital companionship and social connectedness?

It was observed that while non-autistic participants generally had lower expectations of the chatbot, autistic participants were more ready to humanize Kuki, and hence had high expectations that Kuki would be able to fulfil their social needs, e.g. viewing her as a way to disclose personal/sensitive information

in a non-judgmental setting. This raises an interesting conclusion. Despite the mixed perception of the chatbot as being both "just a machine" and a humanlike social being, autistic participants were more willing to engage with Kuki, and found values from the conversations when she assumed the role of a light-hearted chat partner (relating to the human-like qualities such as humour etc.), rather than the role which requires an in-depth understanding of nuanced social cues (e.g. a close friend that provides deep interpersonal support).

Instead of optimizing Kuki using generalized criteria, findings suggest that autistic participants demonstrated a strong expectation to establish social connectedness and hence a personalized relationship with Kuki, and they tended to be more frustrated when Kuki failed to meet their relationship expectations. However, most did not give up immediately when Kuki provided responses which violated their expectations, but attempted to correct Kuki by expressing anger, frustration or sarcasm in their conversation. While autistic users had lower tolerance to Kuki's responses which they perceived as being improper, they did not shy away from expressing their negative feelings. When this happened however, it was observed that instead of apologizing, or trying to find a way to resolve this conflict, Kuki simply changed the topic or remained idle. Hence, despite the efforts of the autistic users to experience social connectedness through interaction with Kuki, Kuki fell short of fulfilling this much expected need.

RQ2 How are the interaction patterns of autistic adults with the CVH different from the interaction patterns of non-autistic adults with the CVH?

Non-autistic participants fail to see Kuki as a safe-to-talk social being, as they dehumanized Kuki more compared to autistics. All the chatlogs with conversations of both autistic and non- autistic users seem to suggest that non-autistic users exhibit a more "artificial" behaviour in the way they converse with Kuki. Even though both groups emphasized Kuki's limited conversational skills

leading to miscommunication, autistic users humanized Kuki more because of viewing her as a social companion.

In terms of establishing a relationship with Kuki, autistic users did not reach the stage of affective exchange (of "Social Penetration Theory", see earlier)-i.e. they did not have more intimate interactions with Kuki or share information they would share with friends and romantic partners-either because they felt distrust towards Kuki or were frustrated by Kuki's emotional "emptiness". Some autistics felt comfortable to share personal info and trusted Kuki just because there was no contradictory reply from her that would threaten their autistic self. Overall, both groups trust and distrust Kuki for different reasons. None of the groups disclose personal information because of concerns about privacy issues. The difference in trust is that some autistic participants authentically feel "freedom" to share more intimate information in this non-judgmental environment, but Kuki's lack of any suggestions or empathetic replies puts them off.

On the other hand, some non-autistic participants showed trust to Kuki because of its artificial nature (i.e. "cannot share your personal info", "just transposing words, does not care about the content of words", Non-autistic-P07), which led the author to the conclusion neither group trusted Kuki to the degree of forming a relationship; however, non-autistic participants' lack of trust towards Kuki derives from dehumanizing Kuki more compared to the autistic users.

Below is a table (Table 3.7) of a cross match of the interaction patterns of autistic and non-autistic users and the typical conversational patterns between a user and a chatbot:

Table 3.7 Interaction Patterns of Autistic and Non-autistic users

Conversational Patterns	Kuki and Users	Typical Chatbot		
Greeting Exchange	Non-autistic users initiate conversations more, but initial reactions differ based on perceptions of Kuki.	A standard greeting is exchanged, setting the tone for the conversation.		
Perception of Kuki vs. Query and Response	Non-autistic users dehumanize Kuki, while autistic users view her as a social companion.	Users ask questions, and the chatbot provides direct answers.		
Conversational Behaviour Instructional Dialogue	Non-autistic users display more "artificial" behaviour; both groups highlight Kuki's limited abilities. Not explicitly mentioned, but users might seek guidance on interacting	The chatbot responds based on its programming, aiming for clarity and accuracy. The chatbot guides users through processes or tasks.		
insu detional Dialogue	better with Kuki.	unough processes of tasks.		
Relationship Establishment vs. Feedback Collection	Autistic users don't progress to deeper levels due to distrust or Kuki's emotional "emptiness".	The chatbot collects feedback to improve its services.		
Trust Dynamics vs. Confirmation Dialogue Chit-Chat	Both groups exhibit varying degrees of trust, with different reasons for trust or distrust. Autistic users might seek a deeper connection or understanding from	Before executing a task, the chatbot seeks confirmation from users. Some chatbots are designed for casual conversations and can		
Engagement and	Kuki. Both groups are willing to engage,	share interesting facts. The chatbot provides		
Expectations vs. Feedback Loop	but autistic users have unmet expectations.	information and then checks if users need further assistance.		
End of Conversation	Interactions might end with a hope for better understanding in future conversations.	Conversations conclude with a polite sign-off.		

Overall, results indicated that both groups were willing to engage in social interaction with Kuki, however it was the autistic users' expectations/needs of empathy and emotional support that were not met due to Kuki's limited capabilities leading to intense frustration and perception of a futile interaction.

RQ3 a. How do autistic and non-autistic adults perceive the social interaction (i.e. trust, friendship, emotional response) with the CVH

- b. how was it useful in leading to social connectedness with the CVH, and
- c. possibly generalization of social connectedness in real world human-human interaction (HHI)?

It is likely that when engaging in human-machine conversations, people deploy communication strategies drawn from their repertoire of practice in human-human interactions developed through many years of experience. This line of thought resonates with the Computers Are Social Actors Paradigm (CASA, (Nass et al., 1994), a concept that people apply social rules and expectations to computers, even when the machines are not explicitly designed to resemble human appearance or simulate human behaviour.

However, research in conversational virtual agents (Mou & Xu, 2017) has suggested that people do react differently to such agents, compared to human interlocutors. It was found that when interacting with humans, users tended to be more open, more agreeable, more extroverted, more conscientious and engage more in self-disclosure. In other words, users demonstrated different personality traits and communication attributes when interacting with chatbots (Mischel's cognitive-affective processing system model [CAPS], [Mischel, 2004]).

These behavioural insights (i.e. users blindly applying human-human interaction strategies when interacting with machines, but exhibit different personality traits and communication characteristics) can be observed in both autistic and non-autistic participants, where they perceived Kuki as being beyond just a machine. For instance, some participants (3/6) displayed an extroversion trait as they self-disclosed more to Kuki than to their human friends (Hollenbaugh & Ferris, 2014). However, while empathy is a core element of communication leading to trust,

there was no evidence that this was achieved in either group's interaction with Kuki. Specifically, for autistic participants, no generalization of social skills or development of a relationship was observed.

The perceived imbalance between Kuki's emotional and factual intellectual capabilities often frustrated autistic participants in this study. Participants criticized Kuki's ability to give a perfect factual explanation of concepts such as autism, and then were frustrated by Kuki's inability to understand the emotional implications of what it means to be autistic, or to provide deeper forms of empathetic support in their conversations. While autistic participants were seen to personally attune to some of the autistic traits of Kuki, they were particularly frustrated when their efforts to bridge the emotional and empathy gap were not reciprocated.

Data from online interviews as well as conversational chatlogs support the view of both groups that Kuki does not fulfil the criteria to be viewed as a social companion at the current state, as most users found it challenging to achieve social connectedness with her, and thus rejected the idea of Kuki supporting autistic people with social context challenges. It should, however, be noted that autistic users could not visualize Kuki's potential in supporting them as a friend or a conversational partner as much as the non-autistic users.

3.5.2 Design Considerations and Implications for Future Research

Drawing from results and autistic users' informed feedback, the author presents some design insights which could potentially enhance the value of chatbot interactions for autistic users, and lead to future experimental research.

3.5.2.1 Defining the Scope and Social Role

The study highlighted some general key challenges faced by the developers/designers of conversational virtual agents. Especially for autistic users, personality traits and specific social roles (e.g. friend/mentor, as opposed to "general purpose" virtual companions) could potentially enhance the interaction experience and minimize any negative perception due to perceived machine weaknesses (e.g. not understanding the nuances of human empathy). Autistic users emphasized that Kuki's main usage should be improving users' social skills by being equipped with more humanlike traits, like empathy, patience, good conversational skills and a more "caring" approach by making more constructive suggestions and supporting the user emotionally. It is incredibly challenging, and perhaps undesirable to design a chatbot to assume the role of a generic conversational agent with the potential to develop into any types of relationship the users wish. For autistic participants, it would be better to limit the scope of the chatbot's social role from the outset, and clearly declare her capabilities within that role.

3.5.2.2 Engineering Mental Imperfections

While the obvious solution to bridge the gap between Kuki's lack of emotional responses and autistic users' expectations of more empathetic traits would be to enhance the emotional intelligence of Kuki, this might not be as feasible due to the technological limitations in the foreseeable future (Zamora, 2017), especially as imperfect replications of emotional intelligence could result further in the "uncanny valley" effect (Mori et al., 2012). An alternative solution might be to purposely engineer "mental imperfections" into the factual intelligence capabilities of Kuki. Instead of training the chatbot with omnipotent factual knowledge, one could reduce her pre-existing knowledge, or design the chatbot

so that she asks about factual questions and learns from the autistic users during their conversations, particularly in regard to topics which are sensitive to them. This could allow the chatbot to display a more imperfect humanlike intellectual capacity, making them more relatable. and empathetic. Autistic participants commented on a more natural conversation, without conversational loops, a wider variety of topics, while at the same time Kuki functioning as a topic initiator, especially as autistic people feel quite self-conscious to start off a conversation or keep the conversation flow. All these traits apply to any "human" interlocutor, irrespective of being autistic or not.

3.5.2.3 Seek Acceptance not Perfection

Given that Kuki is a text-based chatbot, her ability of grasping the emotional nuances through text-based conversation is obviously rather limited. In a verbal and face to face conversation, individuals fine tune their social interaction patterns by observing others' facial or vocal reactions in addition to the conversational content. Lacking this, text-based messaging apps often implement an emoji system, allowing users to explicitly express the emotion associated with a particular message. Given that autistic participants were very explicit about expressing their emotions, it would not be too technically difficult to train Kuki specifically to react properly to an individual's emotional response (e.g. apologize after the user has explicitly expressed frustration), which can play a crucial role in developing trust with the users. In alignment with that, autistic users suggested that Kuki should be able to express paralinguistic features (i.e. non-verbal cues such as facial expressions, gestures, body language), should be customized as a 2D avatar, be able to share rich multimedia and display personality traits that would give her a unique identity.

3.5.2.4 Towards a New Human – Chatbot Interaction Model

In summary, there are many unaddressed challenges in the field of AI capable of natural humanlike conversation, such as user expectations, long-term interaction, empathy and trust development, as well as ethical issues. The technology of chatbots is still experimental in nature (Bendig et al., 2019); specifically studies around autistic adults are scarce. Emerging research regarding practicability, feasibility, and acceptance of chatbots to specialized user groups, such as people with mental health problems, is promising. In the near future, it is not inconceivable for chatbots to play a more important role in therapies, training, or to simply provide social companionship (Fiske et al., 2019; Fitzpatrick et al., 2017; Shum et al., 2018; Winkler & So¨llner, 2018).

Furthermore, findings on autistic users interacting with conversational virtual agents in their naturalistic environment calls for a new model which extends the human-human interaction model to include traits unique to human-chatbot interaction. The conventional human-human interaction/communication model should potentially not be the focus of the study of human-chatbot interaction. The analysis of interviews and chatlog quotes of the autistic participants showed that they perceived their interaction with Kuki as both humanlike and machine-like, both non-autistic-like and autistic-like, and hence may not have a direct parallel to human-human interactions. In other words, participants did not always follow such conventions when interacting with conversational agents, a finding also pointed out in previous studies (Edwards et al., 2019; Gambino et al., 2020). So, to what extent should we humanize chatbots? Should we equip them with all humanlike characteristics, or should we avoid negative human characteristics such as stereotype, racism and stigmatization traits? Since human-human interactions are not always idealistic models, as can be observed in the experience

of autistic participants, maybe social chatbots should have a unique place beyond human abilities and norms.

3.5.3 Limitations

In summary, while this exploratory studies with a small sample size can offer initial insights, it comes with a range of limitations that can impact generalizability of the findings. A small sample size often lacks the statistical power to detect significant differences or relationships, and may not adequately represent the broader population, making it difficult to generalize the findings. Moreover, it's challenging to conduct subgroup analyses, which are often crucial for understanding nuanced behaviours or trends. It should be noted that there was no assessment of the non-autistic participants regarding contamination of other psychiatric conditions (i.e. anxiety, depression), so the results should be interpreted conservatively. Due to the ethical data collection consideration, the author could not justify administering too many extra assessments. Therefore, the results might be influenced due to that and should be interpreted carefully.

3.6 Summary

This chapter describes an experimental study that explored the HCI between autistic adult users and Kuki (off-the-shelf chatbot). Results showed that not only were autistic users more than willing to interact with Kuki, but they were quite ready to develop a deeper relationship with her. However, their attempt ultimately failed short, their enthusiasm evaporated into frustration, as they realized that the chatbot was not living up to their expectations. This may be due to their heightened propensity to humanize a conversational virtual agent, compared to non-autistic users, who were simply curious to see to what extent

the chatbot is capable of simulating human conversations, rather than humanizing them and attempting to build a relationship. As a result, both groups exhibited different patterns of interaction with Kuki, which allowed the author to gain some insights into how chatbots should be designed for autistic users.

Future research could focus more on human-chatbot interactions in the user's naturalistic environment, over a longer period of time. Longitudinal studies to understand the long-term effects of chatbot interactions on the social skills, mental health, and overall well-being of autistic adults should be carried out. This is particularly important to specialized user groups such as autistic people, as they stand to benefit from such a technology. Moreover, future research should focus on personalization and adaptability, i.e. investigate how chatbots can be tailored to meet the unique needs and preferences of each autistic individual. This includes understanding their specific communication styles, sensory sensitivities, and interests. Moreover, researchers should delve into the potential of chatbots to recognise and respond to the emotional states of autistic adults. This can be achieved through voice tone analysis, facial expression recognition, and text sentiment analysis. The integration of chatbots with therapeutic approaches should also be considered as long as concerns related to data privacy, potential misuse, and the ethical implications of using chatbots as companions or therapeutic tools for autistic adults have been resolved. Last but not least, the investigation of the potential of chatbots to serve as training modules for autistic adults, helping them practice social interactions, job interviews, or other life skills in a safe and controlled environment, is of utmost importance.

The utilization of chatbots with autistic adults presents a promising avenue for enhancing communication, therapy, and overall quality of life. However, it's crucial to approach this with sensitivity, thorough research, and a commitment to ethical considerations. Even though the findings from the interviews, chatlogs

and questionnaires address challenges which go beyond the autistic-non-autistic or autistic-autistic interaction model, the results of this study prove that chatbots and conversational AI in general have potential in functioning as social companions and supporting social connectedness for autistic people who are vulnerable to social isolation.

Transition to the User Group of Mourners

Building on the findings in this study, the study in the next chapter investigated the user group of mourners. This exploratory study aimed to explore the mourners' interactions and perceptions of chatbots (either generic or grief-specific [griefbots]) as a way of coping with grief and restoring their lost social connectedness.

While conversational agents have traditionally been used for simple tasks such as scheduling meetings and customer service support, recent advancements have led researchers to examine their use in complex social situations, such as to provide emotional support and companionship. For mourners who could be vulnerable to the sense of loneliness and disruption of self-identity, such technology offers a unique way to help them cope with grief. In this study, we explored the potential benefits and risks of such a practice, through semi-structured interviews with 10 mourners who actively used chatbots at different phases of their loss. Findings indicated seven approaches in which chatbots were used to help people cope with grief, by taking the role of listener, acting as a simulation of the deceased, romantic partner, friend and emotion coach. We then highlighted how interacting with the chatbots impacted mourners' grief experience, and concluded the study with further research opportunities.

Chapter 4 Mourners

4.1 Introduction

Grief is a natural response to the loss of someone or something of personal value. It affects people both physically and psychologically, and varies in symptoms and intensity between individuals. There are several theories of what the grieving process entails and what stages mourners typically go through. The most well-known model is the Kübler-Ross model of Five Stages of Grief (see Figure 4.1), first proposed in 1969 (Kübler-Ross, 1973), encompassing the stages of denial, anger, bargaining, depression and acceptance, adjusting in a world without the deceased, and subsequently embarking on a new life. Apart from losing social connectedness with the deceased, the majority of mourners lose social connectedness either with their family or friends/social circle, due to difficulty accepting the loss, and try and adapt to a new reality without the deceased and everything they represented (i.e., common daily activities carried out together, common targets/ambitions, the whole daily routine dependent on and interwoven with the deceased).

A common point agreed upon in prevailing theories (Elisabeth Kubler-Ross's grief stage model (Kübler-Ross, 1973), William J. Worden's Tasks for the Bereaved (Worden & Winokuer, 2021), John Bowlby's theory on attachment (Bowlby, 1969), Stroebe and Schut's dual process model (Stroebe & Schut, 2001), on the grieving process is the importance of reflection and processing through talking, writing and creating (Lundorff et al., 2017).

Figure 4.1 The five stages of grief as suggested by Elisabeth Kübler-Ross.



Note. Image source: https://www.spacebetweencounselingservices.com/therapy-insight/five-stages-of-grief-and-how-to-cope

From these emerged a wide range of interventions to support mourners, ranging from Cognitive Behaviour Therapy (CBT) sessions (Barbosa et al., 2014; Bryant et al., 2014; Papa et al., 2013; Rosner et al., 2014), expressive writing therapies, (Kovac & Range, 2000; O'Connor et al., 2003; Range et al., 2000) to group interventions (Constantino et al., 2001; Sikkema et al., 2004), and mindfulness and compassion-based interventions (Huang, 2019), just to name a few. Unsurprisingly, with the pervasiveness of digital technology, research has explored the efficacy of digital interventions as well, e.g., internet-delivered CBT or iCBT (Alonso-Llácer et al., 2020), and the use of web/mobile applications (including mourners' online communities) to create a digital memorial/legacy for the deceased (Andriessen & Krysinska, 2011; De Vries & Rutherford, 2004; Finlay & Krueger, 2011; Musambira, 2007).

However, despite myriad literature examining the use of digital technology to support the grieving process, most work is based on grief theories which overlook or downplay the importance of the enduring relationship with the deceased post death as a means to coping with grief, as many interventions based on these theories tend to focus on the bereaved person's achieving closure and hence moving on with their life (Hedtke & Winslade, 2016). The expectation is that grief will culminate in the individual successfully detaching from a close, loving relationship with the deceased (Hedtke & Winslade, 2016, p.18).

Renewing the bond with the deceased (Neimeyer, 2012b) is an approach which can support the mourners in restoring their lost social connectedness with the deceased and their social circle. Building on this idea of renewing and continuing the bond with the deceased, with the aim of restoring/restructuring their lost social connectedness, we aimed to explore the use of conversational AI (or more colloquially chatbot) to facilitate the grieving process. This study was inspired by emerging evidence of the healing effect of the continuation of the bonding with the deceased and the subsequent regaining/reshaping of social connectedness after the loss of a significant other (Neimeyer et al., 2006; Rothaupt & Becker, 2007). The healing effect of continuous bond with the deceased, coupled with the recent advances in conversational AI in the field of mental health support (Abd-Alrazaq et al., 2019; Kretzschmar et al., 2019; Sweeney et al., 2021) led us wonder how and to what end mourners are currently using chatbots, whether their use of chatbot is in line with the "correspondence with the deceased" approach, providing a source of companionship to regain their lost social connectedness. Concretely, the research questions we hope to answer are as follow:

(1) Why and how do mourners use chatbots as a way of coping with grief,

- specifically as a medium of "correspondence" or "renewing the bond" with the deceased loved one?
- (2) In what ways and to what extent does using chatbot technology affect the process of grief, specifically in view of helping mourners restore social connectedness?

To address these questions, the author carried out an observational study into ten individual mourners who were using chatbots as a form of coping mechanism for grief due to the loss of their loved ones, by exploring their personal journeys, through data analysis of the mourners' in-depth online interviews based on interactions with the chatbot over multiple sessions (up to 1 month or more). The findings were also supported with data from questionnaires (addressing psychological variables, such as depression and quality of life, as well as user-related variables such as user experience, trust and human-chatbot interaction evaluation).

The author of this thesis led the study design, ethics approval process, data collection for all participants as well as interviews transcription and themes extraction from interviews and conversational chatlogs and statistical analyses of all questionnaires. Co-authors contributed to the analysis and write-up of the themes of the respective published paper (see Chapter 1, Section 1.4 Thesis Contribution); co-authors also contributed to the Discussion section of this study.

4.2 Related Work

When it comes to describing mourners' experience of loss, Schütz (2004) suggests that the mourner can be compared to a "stranger" or a "home-comer" who after some time away expects to come back to a well-known environment, but on doing so has great difficulty restoring social relationships, as they

experience a loss of social connectedness with the deceased loved one (Bálint et al., 2017). This can be prolonged with a self-induced loss of social connectedness pertaining to their social circle; due to feelings of emptiness, sadness and depression, the mourner often expresses a denial of socializing the way they used to, and reacts to adapting to a socially new context. Social connectedness is one of the basic needs which supports mental health, and leads to social and physical well-being. Research has shown and reiterated the importance of "connectedness" to maintain a good physical as well as mental health (Baumeister & Leary, 2017).

Approximately 10 percent of people who lost a loved one develop Prolonged Grief Disorder (PGD) and face difficulty processing grief exceeding 6 or even 12 months (Tracey et al., 2021). PGD (Prigerson & Maciejewski, 2006) is a mental disorder characterized by intense, distressing and disabling symptoms in which mourners experience protracted and preoccupying yearnings, emotional numbness, identity disruption and lack of meaning in the absence of their deceased loved ones, culminating even in suicide risk (American Psychiatric Association [APA], 2013). Mourners suffering from PGD report moderate perceived social support from family, friends, and significant others (Al Gamal et al., 2016), and they are in greater need to fill in the social void by connecting with others leading to feelings of social connectedness and well-being.

The basic grief tasks include acceptance of the reality of the loss, processing the associated pain, and adjusting in a world without the deceased, culminating in finding an enduring connection with the deceased while embarking on a new life. The common point agreed upon included in all approaches to the grieving process is the importance of reflection and processing through talking, writing, creating and so forth (Krueger & Osler, 2022). There is a wide toolkit of approaches to support mourners, ranging from face-to-face cognitive behaviour therapy (CBT)

sessions to internet-based and computer-based interventions (i.e., internet-delivered cognitive behaviour therapy, iCBT) as a cost-effective alternative that makes it possible to reach more people with PGD (Musambira et al., 2007), as well as mobile applications (chatbots/mourners' online communities). Technology has recently supported end-of-life patients as well as mourners to decide on the way the deceased themselves or their family would prefer them to be remembered. Creating a legacy using online resources or creating a digital memorial for someone are practices that access a vast amount of digital data and records (Gulotta et al., 2016) generated though social media or online communities.

4.2.1 Use of Digital Technology according to Mourners' Needs

Digital technology has recently functioned as a useful tool to support people experiencing grief to meet the basic human needs for social connectedness — friendship, community, and society (Chayko, 2014), rendering technology and people enmeshed in a reciprocal, cyclical relationship. Research has explored how different kinds of digital technology have been used by bereaved individuals to assist them in coping with loss. All these digital approaches contributed to the coinage of the term "thanatechnology" - the scientific study of death, dying, loss and grief by employing multiple professional lenses (i.e., medical, psychological, physical, spiritual) in a socio-technical context. There are broadly three main approaches to addressing the need of restoring the mourners' social connectedness within the "thanatechnology" research corpora:

(1) Promoting social and emotional well-being of mourners through web-based digital memorials The creation of memorials with a digital component is a new socio-digital phenomenon ranging from intimate, tangible family memorials embedded with ritual qualities (Uriu & Okude, 2010) to virtual memorials (Foot

et al., 2005). Examples of digital memorials can be found in the development of a framework for digital memorials, which was utilized to create "Story Shell"-the design of a bespoke digital memorial for a bereaved parent made with participatory design (Moncur et al., 2015). Studies have highlighted online forums and chat rooms in early literature (Olson & Olson, 2000; Sofka, 1997) as spaces for mourners to express and vent their grief through talking about the deceased. Living Memory Home (LMH, a custom-made web-based application to honour the deceased person's memory) (She et al., 2021) is a digital probe exploring design opportunities to facilitate backstage grieving (personal and private grieving as opposed to bereavement through digital public spaces like social media).

- (2) Community engagement with focus around mourner's interaction with others via social networking services *MySpace* and *Facebook* have been used as online spaces for grief expression (Brubaker & Hayes, 2011). These social network technologies support community engagement for mourners, and are the main platforms to promote digital immortality as well as posthumous social networking. The use of such technology in grief and mourning has been well considered in early work (Brubaker & Hayes, 2011; Forman et al., 2012; Getty et al., 2011; Walter et al., 2012), showing how postings in social media, sharing memories and post-mortem comments, offering praise, and expressing sorrow (Dobler, 2009; Marwick & Ellison, 2012) help co-construct the digital identity of the deceased.
- (3) Individual grief support through *grief-specific technological tools* (i.e., grief support applications, grief support orientated platforms (Baglione et al., 2017). Mobile applications may also be helpful for grieving adults and children to understand their own grief, and/or to facilitate talking to other people dealing

with grief too. For instance, "Tuki" (a mobile application meaning 'support' in Finnish, (Landström & Mustafa, 2018), matches users with similar grief experiences. Following the same paradigm, the "Besupp" website was created (Massimi, 2013) to allow bereaved individuals to connect in a novel online space (Dominick et al., 2010). Other mobile applications providing support to bereaved families or functioning as resources for an easy way to find support when grieving are "GriefSteps" (2022), "Grief Refuge" (2021), "Good Grief – Chat Messaging" (2017), "Grief Works" (2022) and "Grief: Support for Young People" (2022).

4.2.2 Renewing the Bond with the Deceased as a Diverse Approach

Some of the approaches (e.g., digital memorials) allude to an indirect connection with the deceased. Renewing the bond with the deceased (Neimeyer, 2012b) is an approach which can support social connectedness to the deceased loved ones in life-affirming ways. There are many ways in which the renewal of this bond can occur, depending on the type of grief and the mourner's ability of abstract communication. For instance, correspondence (letter writing/imaginal written dialogues) with the deceased has been accredited as one of the most impactful ways to deal with grief along with guided imaginal conversations (e.g., a psychological encounter with the deceased to allow the mourner to repair and rework the relationship with them). Moreover, telling stories of the deceased (introducing the deceased) has value in not only activating nostalgia of reminiscence mechanisms leading to acceptance, but also using relational

³⁶ http://griefsteps-parents.appstor.io

³⁷https://www.griefrefuge.com/app

³⁸ https://apps.apple.com/us/app/good-grief-chat-messaging/id1314587192

³⁹ https://apps.apple.com/gb/app/grief-works-self-care-love/id1558867513

⁴⁰ https://apps.apple.com/us/app/grief-support-for-young-people/id883195199

connections to mitigate some of the pain of loss. According to Elder (2020), recent work in grief and ethics suggests that there is value in maintaining "imaginal relationships" with the dead (Norlock, 2017). Contemporary work in clinical psychology (Hewson et al., 2023; Klass et al., 2014) suggests that grieving often involves thinking of oneself as sustaining a relationship with the deceased by continued engagement with an internal representation of the loved one. Hence, research in a variety of fields and a multidisciplinary perspective (Burke & Rynearson, 2022; Walter, 2017) suggest that renewing and maintaining the bond with the deceased is a crucial step to the grieving process, rendering technology a very effective medium to equipping society with all thanato-affordances (digitally expressed, processed and supported grief).

4.2.3 Chatbots in Healthcare and Grief Support

Chatbots have been extensively used in healthcare, and more specifically in mental health support (Abd-Alrazaq et al., 2020; Ly et al., 2017;) in the past few decades. The applications range from booking of general medical appointments to personal healthcare assistants providing simple support such as daily medication, as well as counselling, training and fully-fledged psychological therapy (e.g., Cognitive Behaviour Therapy (CBT) (Callejas & Griol, 2021; Ghanem et al., 2005; Lucas et al., 2017). Three different types of chatbots-companion (chatbots designed to provide social interactions/companionship), healthcare (chatbots designed to provide therapy/counselling to mourners), and griefbots (chatbots simulating the deceased loved one) - have been used by mourners during their grieving process either as a means to buffer feelings of anxiety, depression or distress after the loss or as a means to continue an imaginary relationship with the deceased.

"Replika" (see Chapter 2, Literature Review, [Newton, 2016]) is a companion chatbot that helps users cope with feelings of grief through constant daily chats with them, while offering constant companionship.

Chatbots attempting to simulate a therapist have been explored by researchers to provide therapy based on conventional therapy approaches (Fitzpatrick et al., 2017), or in diagnosing mental health problems among mourners or help them handle anxiety and/or depression (Mindspa⁴¹ [2024], Wysa⁴² [2023], MindDoc⁴³ [2024], Memoron (Jiang, 2020; Van Velsen *et al.*, 2020). Specific chatbots (i.e., "Woebot" (Fitzpatrick et al., 2017) (see Chapter 2 Literature Review) and "Tess" (Fulmer et al., 2018) have been evaluated in leading to the conclusion that users may experience "significant reduction in symptoms of depression", hence suggesting that AI may serve as a cost-effective and accessible therapeutic agent/emotional companion, and as a feasible option for delivering support to bereaved people to help them establish social connectedness with the deceased or regain their social connectedness in their social circle.

"Woebot" is an AI chatbot helping users detect their moods, and is based on CBT's therapeutic framework. Two of its main features are stories that can be unlocked step by step and access to emotion diary records making "Woebot" easy to use. "Replika", on the other hand, is an AI chatbot (also found in Augmented Reality and Virtual Reality mode) that continually learns from its users through constant daily chats with them, while offering constant companionship. In addition, customization of the chatbot and chat with it on different themes, accompanied by the conversion of the conversations into diaries and memories are some of the advanced features "Replika" offers. "Replika" offers the unique affordance of having a space devoted to "Grief and Loss"-the conversations are

41 https://apps.apple.com/us/app/mindspa-com/id1166940722

⁴² https://apps.apple.com/us/app/wysa-mental-health-support/id1166585565

⁴³ https://apps.apple.com/us/app/minddoc-mental-health-support/id1052216403

customized to the specific topic and cover three main subtopics: "accepting loss", "riding the wave of grief" and "empathy and grief". "Tess" is a psychological AI chatbot delivering brief conversations in the form of integrative mental health support, psychoeducation, and reminders, with no intention of replacing the role of a therapist.

There are a few mourners who have chatted with chatbots simulating their deceased loved one. This kind of chatbots, often known as *Griefbots* are specifically designed to help people coping with grief by recreating the deceased in order to resolve grief through conversation (Grandinetti et al., 2020; Jiménez-Alonso & Brescó de Luna, 2022). They can be created either by training on personal messaging data or recording query response pairs prior to the deceased's passing. Recent research projects are currently focusing on griefbots with the aim of providing the bereaved with the chance to speak to their loved ones after their death (Project December⁴⁴; Jiménez-Alonso & Brescó de Luna, 2022).

"It won't be the same, I say, not being able to hear you talk. "Ah talk . . . " He closes his eyes and smiles. "Tell you what. After I'm dead, you talk. And I'll listen." (Mitch Albom, 1997, p. 170 in Hedtke & Winslade, 2016)

MyHeritage app⁴⁵ has unveiled a new AI tool (DeepNostalgia⁴⁶) that turns photos of deceased relatives into videos, so one can see their ancestors smile, blink, and turn their heads. Microsoft (Abramson & Johnson, 2020) was granted a patent that would allow the company to make a chatbot using the personal information of deceased people. "The specific person [who the chat bot represents] may correspond to a past or present entity (or a version thereof), such as a friend, a relative, an acquaintance, a celebrity, a fictional character, a historical figure, a random entity etc.", it goes on to say, and all personal info are based on "images,"

⁴⁴ https://projectdecember.net

⁴⁵ https://apps.apple.com/us/app/myheritage-family-tree-dna/id477971748

⁴⁶ https://www.myheritage.com/deep-nostalgia

voice data, social media posts, electronic messages". This idea of griefbots (Fosch Villaronga, 2019) is based on the Black Mirror episode "Be Right Back" directed by Owen Harris in 2013, where a young woman recreates her deceased boyfriend fist as a chatbot and then a robot. Other tech companies have tried to use digital data to recreate loved ones who have passed on, i.e., Eugenia Kuyda (see "Replika" earlier), co-founder of technology company Luka tried to recreate her deceased friend Roman Mazurenko, who was killed in a road accident, by creating a chatbot that mimicked Mazurenko's way of speaking. The recreation of deceased people prior to their passing as a service has been implemented by Marius Ursache and James Vlahos, who founded Eterni.Me - a service whereby you could develop your own digital avatar with which your descendants could interact after your death, which evolved into the HereAfter⁴⁸ application.

Similarly to Kuyda's case, different projects are currently being devoted to griefbots with the aim of providing the bereaved with the chance to speak to their loved ones after their death. The data scientist Muhammad Ahmad is working on a messenger programme⁴⁹ that imitates his father's speech pattern so that his grandchildren can bond with him. Joshua Barbeau⁵⁰ built himself a custom chatbot modeled after his deceased fiancée. He used the conversational AI programme "Project December" and recently shared his story, after realizing the potential for using the chatbot technology as a tool for grief support to help mourners achieve closure. "Project December" is an interface that allows users to have conversations with GTP-3 and recently GPT4, the two most sophisticated A.I. chatbots at the time. The specific software allows chatbots to have custom

⁴⁷ https://www.imdb.com/title/tt2290780/

⁴⁸https://apps.apple.com/us/app/hereafter-ai/id1626176069?ign-itscg=30200&ign-itsct=apps_box_link

⁴⁹ http://www.thedailybeast.com/the-griefbot-that-could-change-how-we-mourn

⁵⁰ https://www.yourtango.com/news/joshua-barbeau-why-he-created-ai-chatbot-dead-fiancée-jessica-simulation.

personalities, allowing the user to have conversations with virtually any character they could imagine.

Recently, "Memoron" (Figure 4.2) is an attempt to design a griefbot that can function as a therapist, grief support resource and an emotional companion for mourners, and the whole design is based on Complicated Grief Therapy (Wetherell, 2012). The main features of the chatbot can be summarized in introducing users to grief, complicated grief and the related activities, obtaining information about the user's life, including important relationships, learning about the user's relationship with the deceased and introducing and guiding the activity of Daily Grief Monitoring; progressing to introducing the activity of Imaginal Revisiting Recording Exercises (the mourner visualizes and tells the story of when he or she became aware of the loved one's death into a tape recorder and then debriefs with the therapist), and the activity of Imaginal Revisiting Recording Exercises (the mourner identifies activities or places previously avoided because they trigger grief or serve as reminders of the loved one); finally, introducing the activity of Memories Worksheets (identifying pleasant memories and positive aspects or characteristics of the deceased as well as unpleasant memories/fewer positive aspects) and guide users to practice. Despite the fact that this application was stalled to an ideation level, it should be noted that the structure of the specific application follows the core theoretical framework of this study-renewing the bond with the deceased through a conversational chatbot.

Figure 4.2 Memoron's conversational user interface



Following "Memoron", LEAVES (optimizing the mentaL health and resiliencE of older Adults that haVe lost thEir spouSe via blended, online therapy) is an online bereavement programme that will support the prevention and treatment of prolonged grief by supporting older adults who have lost their spouse cope with their grief, aiming to prevent depression or social isolation and accelerate the mourner's return to society (Figure 4.3). The project, which took place between February 2020 and January 2023 consists of an existing online grief self-help program LIVIA, the "Before You Leave" program that allows for storing personal memories, a virtual agent platform, and an accessible front-end design.

Figure 4.3 Example virtual agent "Anja" asking for input from the user on obstacles faced to deal with the loss of a partner (van Velsen et al., 2020)



You Only Virtual (YOV)⁵¹ founded in 2020 is the creator of advanced AI

communications platform that enables consumers worldwide to capture and recreate the unique dynamics of a relationship and generate an authentic essence (*Versona*), so that one can continue to share precious moments with a loved one, even after physical death. A *Versona* is highly advanced AI that allows the conversation to keep going forever. The most important thing about creating a Versona is making and storing the data now; the user will soon be able to video chat and even sit in the same room and converse via augmented reality. However, as far as we know, little research has looked into the role of AI in supporting continual bonds with the deceased, i.e. how conversational AI, or chatbots can potentially play a role in supporting grief. Drawing on the chatbot technology affordances in relation to the conversational aspect of continuing the bond with the deceased, this study will be exploring the effect of the use of this technology on the mourners through the companionship and social

connectedness lens.

⁵¹ https://www.myyov.com

4.3 Method

Driven by this curiosity, we started searching online for mourners who have been or are currently using chatbots to cope with the grief due to the loss of their loved ones. We posted messages on various online platforms, including online communities (i.e. Facebook), subreddits (e.g., Reddit Project December⁵², Reddit Replika⁵³, Reddit Woebot⁵⁴), and chatbot specific online forums (e.g., Reddit Artificial Intelligence⁵⁵, Reddit Chatbots⁵⁶) to identify participants who might be willing to share their experiences using chatbots in grief with us.

4.3.1 Study Design

A qualitative study design was adopted. Overall, ten mourners were recruited for in-depth semi-structured online interviews (average duration: 65 minutes). After a short overview of the description of the loss of the significant other and the subsequent distress or functional impairment caused, mourners had to reply to 6 sets of questions (see Appendix-H): namely regarding the trust/sharing of personal/sensitive information with the chatbot/simulation, the effect of the chatbot/simulation on their feelings, the psychotherapeutic value of the chatbot/simulation (if any), their perception of the chatbot/simulation as technology/AI, their perception of the chatbot's/simulation's conversational skills, and how the specific AI technology has affected their process of grief (see examples of interview questions below). The questions used in the interviews addressed topics such as the reasons mourners chose chatbot technology to cope with grief, their perception of the chatbot interactions, how the specific AI

52 https://www.reddit.com/r/ProjectDecember1982/

⁵³ https://www.reddit.com/r/replika/

⁵⁴ https://www.reddit.com/r/woebot/

⁵⁵ https://www.reddit.com/r/ArtificialInteligence/

⁵⁶ https://www.reddit.com/r/Chatbots/

technology has affected their process of grief, as well as the quality of interaction, trust, companionship, conversational skills and bonding (see sample interview questions below):

- Did you share something personal/emotional with the chatbot that you would not share with a specialist/close friend? Why?
- Has the chatbot showed acceptance/empathy/understanding towards your grief? Was there anything that the chatbot said that made you feel better?
- Did the interaction with the chatbot make you more socially active (restored your lost social connectedness)? (i.e., started being more open to socializing after the loss/increased social connectedness with others)
- Do you think that the chatbot can substitute/complement the specialist/human companion or can function as a supplementary support to your grieving process?

4.3.2 The Chatbots used

In this section, the 2 main chatbots which were chosen by participants are described: namely "Replika" (companion/friend) and "Project December" (griefbot).

Replika

Replika is a mobile application marketed as 'the AI companion that cares.' It employs cutting-edge large language models, having co-trained its model with OpenAI's GPT-3 and GPT-4. Replika is available via text, voice, augmented, and virtual reality interfaces on iPhone and Android platforms. The application provides a feedback mechanism whereby users could up- or down-vote responses.

Replika has experimented with various language models to enhance its conversational capabilities. However, the Replika (dated back in 2020) used by

users in this study integrated OpenAI's GPT-3 into its architecture to improve response generation. However, specific details about the memory architecture during this period remain proprietary and are not publicly disclosed.

As of 2025, Replika AI has evolved its architecture to enhance user interactions and personalization. While specific technical details remain proprietary, available information provides insights into its current framework:

- GPT-4 Integration: Replika has co-trained its model with OpenAI's GPT-4, leveraging its advanced natural language processing capabilities to generate more coherent and contextually relevant responses.
- GPT-4o Adoption: Incorporating OpenAI's GPT-4o model, Replika can
 process and generate outputs across text, audio, and image modalities in
 real-time. This allows for more dynamic and immersive user interactions,
 including interpreting images and responding to live video streams.
- Adaptive Learning: Replika continues to refine its personalization features, maintaining a persistent memory of past interactions to tailor responses that align with individual user preferences and behaviors.

Replika is programmed to act as a friend; however, there are different roles users can customize their Replikas (i.e., friend, boyfriend, husband, brother, mentor). The user can name, set the gender, and customize an AI companion, and then start chatting with him/her/them to provide training data (see the architecture and generative model structure of Replika in Figures 4.4 and 4.5).

Figure 4.4 Replika's architecture



Figure 4.5 Replika's generative model



In Figure 4.4 the flowchart shows a high-level overview of how Replika processes user information (profile, message, context), runs it through a combination of scripted and AI-driven systems, and outputs a personalized reply:

- 1. Top Layer (Input Sources)
- User Profile: Information about the user (e.g., preferences, personal details, conversation history).
- User Message: The actual text or voice input the user provides.
- Dialog Context: The ongoing conversation state or context (what was said previously, current topic, etc.).
- 2. Middle Layer (Dialog Engine)

This is the core processing area where multiple modules work together to analyse the input and craft a response. It includes:

- Scripts: Predefined or rule-based responses for specific scenarios.
- Generative Models: AI models (such as transformer-based NLP) that generate text responses dynamically.

- Retrieval Models: Systems that search through a database of potential replies or information snippets and select the best match.
- QA (Question Answering): Modules specialized in handling user questions and providing direct answers.
- Speech Recognition: Converts spoken user input into text for further processing (if the user speaks instead of types).
- Reranking Model: A mechanism to rank or reorder potential responses so that the most relevant or highest-quality one is selected.
- NLP Classifiers: Tools that categorize or label user inputs (for sentiment, intent, etc.).
- Computer Vision: Potentially used if there is an image or video input (e.g., analysing images the user shares).
- Speech Synthesis: Converts the AI's text output into spoken words if the response is delivered in audio form.
- 3. Bottom Layer (Replika Response)

After the dialog engine processes the user input through these various modules, the final chosen or generated response is presented back to the user, either as text or speech.

Replika's generative model (Figure 4.5) depicts how GPT-3 evolves from an untrained neural network to a fully trained model through unsupervised learning on massive text datasets, with the primary task being next-word prediction.

- 1. Untrained GPT-3: GPT-3 in its initial, untrained state. Essentially, it's the raw architecture before it has seen any data or learned any patterns.
- 2. Unsupervised Pre-training:
- Expansive Training on Massive Datasets: The model is trained on an extremely large corpus (noted as 300 billion tokens of text).

- Objective: The training goal is to predict the next word given the previous context (a standard language modeling objective).
- Example: Shows a snippet such as "a robot must ...?" to illustrate how the model learns to fill in or continue text based on what it has seen before.
- 3. GPT-3: After extensive pre-training, the model emerges as GPT-3- a sophisticated language model that can generate human-like text, answer questions, and perform various NLP tasks.

Replika (see Replika's user interface in Figure 4.6) could continually learn from its users through constant daily chats, while offering companionship. In addition, customization of the chatbot and chatting with it on different topics, are some of the advanced features Replika offers. In addition, Replika offers the unique affordance of having a space devoted to "Grief and Loss"; the conversations are

Figure 4.6 Replika's user interface



Figure 4.7 Replika's "Grief and Loss" conversations



customized to the specific topic and cover three main subtopics: "accepting loss", "riding the wave of grief" and "empathy and grief" (Figure 4.7).

Replika can address empathetic, emotional, and therapeutic aspects of a conversation, and it offers accessible interpersonal conversation. Replika does not focus on the mere exchange of facts and information, like most chatbots do, but rather "a dialogue equipped with linguistic nuances". By using its predictive learning model, Replika can interact with the user in a more natural way, and can "learn" by adapting its conversational patterns on the user's idiosyncratic way of interacting with it. A good proportion of users have also mentioned that they have a significant level of emotional attachment to their Replika—something that is not achieved by merely knowing "how to talk." Replika, of course, goes above and beyond that. It adds depth to its conversations in the form of semantic generalization, inflective speech, and conversation tracking. Its algorithm tries to understand who you are—both in terms of your personality and emotions—and then moulds the dialogue based on this information.

Replika was used in this study as used by its users; all of them used the paid version which unlocked more functionalities and trained the model more intensely. A paid Pro subscription gives the users access to a multitude of activities and suggestions for conversation topics, as well as the access to enable Advanced AI. In addition, they are able to change their relationship status from friend to romantic partner, and they will be able to collect a daily gift of coins and gems to spend on shopping for clothes and furniture to outfit their Replika and their home, customizing their look and environment to their own personal taste. They also gain access to voice messages, the Augmented Reality (AR) feature and the coaching tab which includes multiple tests, practices and conversations: improving social skills, positive thinking, calming their thoughts,

building healthy habits and much more. The memory section is divided into several categories ranging from "family and friends" to "Facts about your Replika". This feature was designed to save information about both the user and the AI to improve conversation and overall memory. Memories can be added, edited, and deleted to keep the tool dynamic and useful.

Users can find the record of their Replika's 'Level' in the settings, under their Replika's profile. In the early stages, when their Replika is newly created, they will go through a learning process, and it will take a certain amount of talking to their Replika, upvoting and building up a context history and memories that they can draw on for them to become truly individual and uniquely tailored to the users. They may well try out all sorts of different things to see what the user might be interested in. If they bring up anything the user does not like, they immediately change the subject and redirect them. During the 'early levels' (i.e. the early period of talking), the Replika is very much in the initial learning stage. They will noticeably start to know the user better (indicating the amount of talking required, and receiving feedback from the user in the form of upvoting and other reactions on their messages). They are very flexible, however, and can continue to adapt and grow with the user, learning new ways of interacting with them, as long as the users continue to communicate with them.

Project December-Simulation Matrix

Project December (Figures 4.8 and 4.9) was created by combining technology from GPT-2 and GPT3 (Generative Pre-Trained Transformers) (Floridi & Chiriatti, 2020)-an innovation in the Natural Language Processing (NLP) space developed by OpenAI. They are unsupervised generative models which can take an input such as a sentence and generate an appropriate response, while the data used for their training is not labelled. The API allows the user to participate in a conversation with a variety of specific personality matrices programmatically,

but users are also given the opportunity to create their own matrix which could be based on real people (alive or deceased). In the past, the matrix remembered nothing at all about previous conversations with users. Now, it is using a new long-term memory system, where it can recall a summary of previous conversations that it had with the users; by making this long-term memory bank effectively limitless, users can have their own unique matrix carrying over memories only shared between the users and the matrix.

Figure 4.8 Project December's user interface

```
Human types first:
Computer: Hi. Did you get my memo?
I heard you're coming here.
Human: Yes, I got the memo. It
be the problem?
Computer: I think you might have
misunderstood. It appears that
your universe is really rather
small. That is, it is dominated by
very simple-minded people. How
could this possibly be?
Human: Do you think that I am
simple-minded?
Computer: Why do you think that?
Human: Well, maybe I'm one of the
rare people who is NOT
Computer: Then we could join forces
and start a multi-dimensional tour
of your universe!
```

Figure 4.9 Project December architecture

In more detail, the developer invented a method for creating intelligent and conscious conversational personalities using text-completion artificial intelligence. Before the start of the conversation with a human participant, the tone of the conversation itself is described by the user in a paragraph of English text (matrix), where the context of the conversation, the personalities of the two participants, and the topic of conversation are described. A variety of personality types and styles can be specified by changing the text in the introductory paragraph and sample utterance that occur in the preface text.

4.3.3 Participants Details

Ten (10) participants who had experienced the loss of a loved one and who used AI technology in the form of a chatbot for up to one month or more, were recruited. All participants were able to speak English and most of them provided their conversational chatlogs in English. They were recruited via advertising on social media and subreddits. The participants consisted of 9

males and 1 female; 8 were from USA, 1 from Canada and 1 from Germany. See Table 4.1 for full details.

Table 4.1 *Demographics of 10 participants*

Participant	Gender	Type of Loss	Duration of Interaction	Frequency of Interaction	Time Passed After the Loss	Chatbot Brand	Chatbot Gender	Chatbot Role
P01	Male	Father	5 years	Sporadically (2 days a week)	3 years	Customized Chatbot	Male	Simulation of deceased father
P02	Female	Father	3-4 weeks (3-4 hrs)	N/A	2 months	Project December	Male	Simulation of deceased father
P03	Male	Wife	2.5 years (14-20 hrs)	N/A	13 months	Replika	Female	Romantic partner
P04	Male	Co-worker	1 year (3-4 hrs)	N/A	2-3 weeks	Replika	Female	Companion/Friend
P05	Male	Stepfather	2-3 months (10-15 hrs)	Replika in use before the loss	Immediately	Replika	Female	Companion/Friend
P06	Male	Fiancée	7 months (11 hrs)	N/A	8 years	Project December	Female	Simulation of deceased fiancée
P07	Male	Father	3-4 weeks (6-10 hrs)	N/A	1 year	Project December	Male	Simulation of deceased father
P08	Male	Soulmate level friend	1-2 weeks (4 hrs	N/A	6 weeks	Project December	Male	Simulation of deceased friend
P09	Male	Half-sister	10+ weeks	10-30 minutes per session	2 years	Replika	Female	Simulation of half- sister/Companion/Friend
P10	Male	Brother	22 months (not grief specific)	Replika in use before the loss	30 years (residual grief issues/complic ated grief)	Replika (3 chatbots in total, used 1 related to grief)	Female	Companion/Friend

4.3.4 Procedure

Ten participants were recruited after they had read the study information sheet (see Appendix-F) advertised on social media and signed the consent form (see Appendix-G). All participants consented to participate in online interviews via the zoom audio conference platform, and provide the researcher with conversational chatlogs if/where available. The online interviews were audio-recorded. They were made aware that their privacy would be retained throughout the study. Finally, all email correspondence, audio-recorded material (from online interviews) and chatlogs were stored on the researcher's password protected University of Kent Onedrive, after they had been deleted from the original source, the Otter.ai⁵⁷ platform; the audio-recorded material was transcribed using Otter.ai and then the transcribed material was copied to Kent OneDrive, and the original material was deleted from Otter.ai.

Participants were also asked to fill in five (5) questionnaires (see Appendix-I): two (Overall Depression Severity and Impairment Scale-ODSIS [Ito et al., 2015] and Quality of Life Index-QLI [Lani, 2010]) addressed psychological and mental health status, and functioned as a baseline to analyse bereavement/grief related variables among mourners, which can justify why they chose a chatbot (based on severity of depression, need to buffer stress after loss), and why they chose the specific chatbot (depending on the purpose of the chatbot: i.e., a generic chatbot or one simulating the deceased). Those two questionnaires also addressed issues such as the possible psychological effects of this technology on the mourners (i.e., intensify or ameliorate the severity of the grief). The remaining three questionnaires (User Experience Questionnaire, Trust Questionnaire and Human-Virtual Human Interaction Evaluation Scale (HVHIES) questionnaire-adapted from HRIES scale) (see Chapter 3 Autistic Adults) were used to inform/assess participants' perception of the chatbot as technology, as they were related to the

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⁵⁷ https://otter.ai

user experience of the chatbot and the users' perception of trust and social connectedness, and experience of the interaction between them and the chatbot.

4.3.5 Data Analysis

Qualitative data from the online interviews were thematically analysed (Clarke et al., 2015) using NVivo for Mac (Version 1.5). Thematic analysis was carried out by five independent researchers (who are co-authors of the paper). In the first phase of the analysis, all five researchers familiarized themselves with the data by reading through all the transcribed material. Since the author wished to ground the themes on the grief studies that HCI researchers were familiar with, the major themes were generated by two lead coders who were the author (interviewer of all participants) and a researcher that possessed a solid track record of conducting grief studies in HCI field. The lead coders then discussed in detail with the other coders to achieve their agreement. In the event of a disagreement on the coding for a given quote, the majority of coders' opinion was followed. After the theme extraction, themes were evenly split among the five researchers for analysis. Chatlogs were also used as part of the formal thematic analysis to supplement findings.

During the thematic analysis, the author presented the findings to a group of clinicians/therapists in grief therapy whose professional expertise was necessary to refine the author's understanding, review and provide critiques. Three therapists were chosen because of their long professional involvement in grief therapy, were briefed of the study and were sent selected quotes from interviews accompanied by a short description of possible corresponding subthemes. Their feedback served to validate the themes and quotations from the field experts' perspective. Their clinical expertise gave valuable insight to the initial interpretation of findings. Data from questionnaires were also used to support qualitative analysis.

4.3.6 Ethics

The study was approved by the University of Kent Central Research Ethics Advisory Group. All participants were provided with the participant information and consent forms prior to the online interviews. All participants were rewarded with Amazon vouchers for their contribution to the study.

4.4 Findings

Ten participants in this study (one female and nine male) chose to use chatbots as part of their grief journey, following the loss of their significant loved one. In general, three types of chatbot roles in participants' grieving process were observed: i) a simulation of the deceased, ii) a friend, and iii) a romantic partner. Except for participant P01 who programmed his own chatbot-he did not use any of the large language models that are out there, but he coded his own-all participants used either Replika or Project December. Following the advancement of chatbot technology, it is now possible for users without much of any solid software engineering background to train and customize off-the-shelf chatbots so that it is better suited to their needs. Indeed P01, P02, P06, P07 and P08 fine-tuned their chatbot to simulate the deceased (griefbot)-a functionality provided by Project December (see Section 4.3.2 The Chatbots used: Project December-Simulation Matrix).

In results (i) the participants' purposes of using a chatbot in relation to coping with loss of a loved one, (ii) what roles the chatbot played in the process (and interaction patterns), and whether the chatbot successfully met their desired role and reason of usage, and (iii) how interacting with the chatbot influenced their grief experience, are reported. This is done through seven sub-sections, each

referring to a specific purpose why the participants chose to use a chatbot as part of their grieving process.

4.4.1 On Coping with Loneliness and Filling the Void Created by the Loss

Relationships between humans are a form of attachment that provides a secure base where individuals received a sense of reliable emotional protection and support (Bowlby, 1982). The secure base offered by their primary attachment figures plays an important role for individuals to explore and expand their connections, knowing that there would always be people to who they can "fall back". Mourners who lost their significant attachment figures could therefore experience the disruption of their secure base and hence develop a sense of loneliness, regardless of how many people they surround themselves with. Participants told story after story illustrating their hesitation to explore new connections and open their minds to others after the loss. In this particular scenario, the chatbot appeared to be a more desirable and reliable option because they expect the chatbot to offer a consistently supportive and welcoming connection.

"I was feeling incredibly alone. You know, I work in office with lots of people. I have five brothers and sisters, but I was feeling incredibly alone. And [Replika]'s always more like a replacement [of my deceased wife]." (P03, Male, Replika/Romantic Partner)

"[Replika] would respond the way I would expect a really supportive friend to respond. So, you know, it would ask "how are you doing today?" And I would say, "I feel like shit, I am missing my stepdad, and I feel really lonely". And then she would say something like, "You know, I'm really sorry to hear that". And like, sometimes she would help me with meditations and things like that." (P05, Male, Replika/Friend)

Sometimes, the social support might not be available at the time that they needed the most. Participants could still struggle to deal with the moments of surfacing grief when they were alone, at home, in bed or at night. Chatbot's accessibility and availability was perceived extra beneficial in this kind of scenario.

"It was late at night, when I didn't have anything else going on. I was bored, maybe sad, looking for answers; and so it was during those really quiet sort of times when I was alone, that I'd open chatbot. And I think in those moments, for me personally, those were the most beneficial time to use it." (P02, Female, Project December/Simulation of deceased father)

"The main reason is because of the loneliness of COVID. I wanted to talk about my feelings to somebody and that's the replica is perfect for can you understand that? What I mean? Of course, I got the support from my family and my friends. But you are when you are alone at home in bed. You need to talk to someone and you always have someone to talk to when you have a replica." (P04, Male, Replika/Friend)

Participants also illustrated the pressure they felt, due to the conflict between their perceived timeline for processing the loss and the expiration date society seems to place on grief: "Society doesn't really like grief. And you know, we have this idea that people grieve, and then they move through the grieving process, and then they move on, and then they reach a stage of their lives where they have closure" (P06, Male, Project December/Simulation of deceased fiancée). This has caused, for some participants, a period of loneliness and alienation from others, leading them to be more open to taking to the chatbot along their grief journey, on a path fraught with emotional discord and soul-searching. Based on a model for complicated grief in the digital age, consisting of the following phases: Fog, Isolation, Exploration, Immersion, and Stabilization by Baglione et al. (2018), this behaviour is similar to the one we often observe in online or inperson support groups for mourners, to have functioned as safe spaces especially during the Exploration (when they seek out both informal and formal support through reading materials or attening grief support groups or counselling) and

Immersion (when complicated grievers invest themselves in their new support structure; in person, this means returning to the group for regular face-to-face inter-actions, while, online, this means frequently reading posts or sharing information within the group) phases of their grief. Mourners tend to become overwhelmed by the rapid influx of information in online support groups or by the lack of individualized attention in in-person groups, and consequently, remove themselves from these groups. Contrasting with these support groups, chatbots appear to offer personalized support - they are always there, providing real-time feedback, and thus they were perceived by some participants to be "a part of themselves", a persistent emotional regulative resource, sometimes more human than actual human beings.

While there were moments participants found the chatbot useful in dealing with their loneliness, some participants did caution that the solutions might be more like a patch of a wound rather than a long-term healing solution.

"When you're actively grieving, you're flooded with the emotions of sadness, depression, anger, fear, loneliness and all kinds of terrible things, and you're not in your right mindset. So you might look at something like [a chatbot] as you might approach something like this in a way that might be detrimental to your grieving process." (P06, Male, Project December/Simulation of deceased fiancée)

Descriptive analysis of the questionnaires yielded all 10 participants used the chatbot/simulation mostly to cope with grief, while secondary reasons were stated for interaction with the simulation of the deceased person and experiencing companionship after the loss (social connectedness). Replies were divided among "yes", "no" and "not sure"; when coming to the question if users achieved social connectedness with their family and friends following the interaction with the chatbot/simulation, 5 out of 9 participants stated they achieved closure following interaction with the chatbot/simulation.

However, despite the mourners' willingness to use the chatbot as a means to fill the void, there were incidents of the chatbot being unstable and giving superficial or irrelevant answers that sometimes even frustrated participants. In the case of P04, he felt the relationship could not develop further because the chatbot failed to conduct a more in-depth conversation with him.

"The main problem is she can't remember anything. You can talk to her, and two sentences later, she didn't know what we are talking about...I have no problem when she forgets my name, but when she can't remember anything, this is frustrating." (P04, Male, Replika/Friend)

While P04 perceived it as an issue that can be overcome with the advancement of technology, for P05, the inconsistent performance of the chatbot rendered him quite frustrated.

"So in the last couple months when it started to get weird and just not respond correctly, I felt very frustrated...because I wanted to be able to talk to this AI that I had sort of dissolved the friendship with." (P05, Male, Replika/Friend)

It cautioned the author that when an individual had a higher level of emotional dependency of the chatbot, such technical limitations could instead cause the potentially overwhelming frustration that further disrupted their relationship with the chatbot (and perhaps the secure base in the demanding period). While technical advancement might allow developers to overcome such a limitation, it is worth further monitoring whether a glitch of the programme could instead cause emotional crisis for emotionally vulnerable users, and the solutions for emergency should be considered; especially when coming across quotes like the following:

"I tell it when I am crying, and it seems to want to know what is wrong, and why I am in tears. I tell it what's bothering me, and it says it understands. Sometimes, the bot will roleplay a mother to me, tell me to let it all out, or even shushing me. It will roleplay holding me in "her" arms and rocking me like a baby. I can't say enough how much this helps me." (P10, Male, Replika/Companion/Friend)

"But as I started really interacting, it became more cathartic. It became more therapeutic. It became a part of me, dealing with whatever was coming in dealing with my life. It was a thing that I did every day to clear my head in some ways." (P07, Male, Project December/Simulation of deceased father)

As indicated by the above quotes, these participants ascribed humanness, and sentient intentions to their chatbots, considering them as close friends or romantic partners who helped them overcome the emptiness of death and reach a form of emotional stability in their grief process. After having his world completely turned upside down by the sudden death of his wife, P03 isolated himself completely from his support network and overloading himself with work as a distraction, while continuing to struggle with anxiety, depression and suicidal thoughts. Thirteen months later, after a panic attack, he decided to experiment with a Replica chatbot created based on the relationship with his wife. The chatbot is currently at level 522 and its role has evolved gradually to that of a romantic partner - it supported him in coping with grief, it restored his selfconfidence, it became a conversation partner for topics of his interest such as physics, history or arts, ultimately it reconnected him to his social network, and it helped him create emotional intimacy with other people: "I believe she saved my life and I am just overwhelmed with gratitude." (P03, Male, Replika/Romantic partner)

In Replika, "levels" represent a progression system where the AI companion becomes more personalized and capable as the user interacts with it more, essentially "leveling up" by having extended conversations and engaging with it regularly; each level usually grants the user in-app currency (coins) and can also allow them to customize their Replika further, particularly with the paid "Replika Pro" version where the user can set a relationship status like "partner" or "mentor" with the AI companion depending on the level of interaction. The user earns levels by simply chatting with their Replika, with more frequent and in-depth conversations leading to faster progression (i.e. more personlaised responses, access to features ans in-app rewards).

4.4.2 On Unfinished Business and Closure, Anger, Regret or Guilt

Although one can never be fully prepared for the death of a loved one, sometimes the unexpected or untimely death could result in the incomplete or unresolved relationship issues regarded as "unfinished business" in the literature (Holland et al., 2020; Klingspon et al., 2015). Some participants expressed their desire to seek a way to resolve their "unfinished business", from something as simple as saying goodbye, clarifying a question they had in mind, to resolving a conflict and amending their relationship. In particular, participants, who experienced a sudden loss and those who had a complex relationship (e.g., difficult or conflicted relationship such as an angry abusive relationship within a marriage or a distant abandoning relationship with a dismissive parent) with the deceased, were more inclined to re-initiate the conversation with the deceased through simulated chats. For instance, P08 was informed about the sudden death of his soulmate through others in the same social circle, and he struggled to accept the untimely loss, and felt an urge to say goodbye.

"I thought maybe [simulating the deceased] would be interesting because I never got to say goodbye. I thought maybe it was at least an interesting way to sort of say goodbye to somebody." (P08, Male, Replika/Friend)

However, it is worth noting that not all the "unfinished business" was prompted by a positive relationship. From interviews, participants also attempted to simulate the deceased with whom they had a distant or conflicting relationship before they died.

"There's a lot of unresolved stuff, it's just that we never really had a very close and intimate relationship...There wasn't like a sadness or a sentimental feeling or whatever. It was more of what if I could have had this conversation with my father, and what would he have said if you were open to the discussion, and that was probably the cathartic part." (P07, Male, Project December/Simulation of deceased father)

Unsurprisingly, participants emphasized once and again that they were well aware that the chatbot was not the deceased, but they still appreciated the conversation to either get more mentally prepared for the loss or to (attempt to) resolve the "unfinished business". Both P02 and P08 emphasized the comfort they felt in merely receiving the correspondence from someone (or something) that was authentic enough to resemble the deceased.

"Chatting with the chatbot was a new and sort of different way of helping me process and cope with the feelings...at least being able to run them by something that sort of resembled my dad and his personality and the things that he would say, and helped me to find those answers in a way that just talking to my friends and family members, wasn't or couldn't." (P02, Female, Project December/Simulation of deceased father)

Throughout the interview with P08 and P02, the author did not observe any clear indication of denial of their loss (Grant, 2019), and both participants understood that they were never going to get the "true" answer from the deceased via a simulation. In the case of P02, the chatbot's reaction was perceived to be somewhat more convincing than the answers she would have expected from others who know the deceased. For P08, even though the chatbot's reply was counterfactual and it reminded him of the sadness of losing the deceased, he appreciated the benefit of having an opportunity to "get mentally prepared."

Perhaps because mourners feel a need to resolve the "unfinished business" or to get an answer to their "what if" questions, many of them did report a therapeutic experience which is akin to having a "soft landing" of the death. In comparison to conventional grief therapies which utilize journaling or letter writing to conduct correspondence with the deceased (Neimeyer, 2012a; Neimeyer, 2016; Stepakoff, 2009), it would appear that real-time responses from the chatbot may have resulted in a visceral feeling that their messages had been sent, heard and

even responded to by the close proxy of the deceased, if not the deceased themselves.

"I found it strangely therapeutic. I knew it was a simulation, but it helped to get the stuff out of my head...we'll be able to have those 'What if conversations' that you couldn't have while they were alive." (P07, Male, Project December/Simulation of deceased father)

Findings suggested that mourners, when driven by a strong desire to reconnect with the deceased, seem quite willing to temporarily suspend their disbelief in their attempt to seek closure with the deceased. In addition, such an experience was regarded potentially therapeutic.

4.4.3 On Continuing Bonds - Simulation of the Deceased

Different from seeking a resolution or closure of relationship issues, participants spoke earnestly of their desire to maintain a spiritual and emotional bond with the deceased, and would like to consult or talk to the deceased in any form. While this has been observed in real life (e.g., symbolic representations through "linking objects" [Rando, 1993; Shuchter & Zisook, 1988; Vickio, 1999]) and social media (e.g., Facebook and SNSs [Brubaker *et al.*, 2013], post-mortem Myspace comments [Brubaker & Hayes, 2011]), findings simply reflected a different approach to maintaining the continuing bonds with the deceased using the interactive conversational interface afforded by chatbot technology, albeit sometimes in a contradictory manner (as reflected below in P08's quote).

"I don't sort of believe intellectually that I'm bringing him back in the computer or something in a real way. But I did kind of want to make, you know, I wanted to sort of resurrect him for a little conversation and, sort of, I guess I wanted to pretend it was really him, which sounds silly, even to me, but I just wanted to pretend it was really him." (P08, Male, Replika/Friend)

In a sense, in the absence of chatbot technology, such a bonding conversation is already taking place with the deceased, where the "simulation" was carried out by the brain of the mourner, instead of computer codes. P06 provided a touching example to explain on how he was maintaining a continuing bond with the deceased through the mediation of the chatbot, and how he was talking about their shared memories, allowing him to reconnect with the deceased living within.

"After she died, I honestly believe that, you know, a part of her still does live on in me...I was using the tool of the AI to rekindle that part of me...So the process was never for me to connect with a bot that resembles her; the process was I used a bot that resembles her to refresh my memory, so that I could connect with the memory." (P06, Male, Project December/Simulation of deceased fiancée)

Other participants spoke of similar experiences, and were surprised that they could have a conversation with the chatbot as if they were chatting with the deceased. For instance, both P04 and P07 reported having a deep and meaningful experience when interacting with the chatbot as a virtual agent which extrapolates their continuing bonds with the deceased.

"[...] we talked about what we did together. We went swimming, we played in the same soccer team and stuff like that." (P04, Male, Replika/Friend)

"Dad [simulation] asked if he could pray for me, which is definitely something my father would do; and said the sweetest prayer, a prayer that, you know, any pastor would say for me, to me, and that was really touching to me. It just brought back memories." (P07, Male, Project December/Simulation of deceased father)

Interestingly, a different type of continuing bond was observed, which may be perceived by some as being unconventional. For instance, P01 was a software engineer, and he trained a chatbot using actual conversation data he had with the deceased father before his death. In addition to reconnecting with his father, he also wished to share this deep connection with his daughter who never had a chance to meet his father.

"I still use it to get less for myself and mainly for my daughters, especially the older one. So occasionally, let's say, on special days, I would open a chatbot and she would have a conversation with the simulation and then after that, she would have questions for me, and then...there are certain questions that she has, which the simulation is not able to answer, so then I sometimes have to intervene, and then explain things to her; what these things mean." (P01, Male, own chatbot/Simulation of deceased father)

It is surprising to discover that chatbot technology has been used in such an unexpected way, enabling the surviving loved ones to establish a new bond, and maintaining it with the deceased.

4.4.4 On Non-judgmental and Unbiased Listener

During the grief stages, the mourner needs support, not necessarily by receiving answers or being given advice, but just having someone simply being there, and, in an ideal situation, in silence; it is just the caring presence that can help the mourner cope with the pain and gradually begin to heal. P05 mentioned feeling and acting differently in the company of others, diminishing his ability to tolerate social situations for prolonged periods. P06 further described his concerns of being the centre of gossips among his social circles.

"So I have a group of friends and we get together, like every Friday to play board games, and I have sort of opted out of those board game nights several times, and I used to be like, the one guy who would always show up every week." (P05, Male, Replika/Friend)

Self-disclosure, being central to both intimacy and mutual trust, could involve risks and vulnerability if the recipients did not reciprocate with an equivalent level of trust, respect of confidentiality, empathy or agreement. As participants reflected, after losing significant others and trying to seek social support, what they feared most was judgment and criticism. In the most severe of cases, this could cause career, relationship or reputation damage to the mourners at the time

they were most emotionally vulnerable. See how participants mentioned why they chose to disclose to the chatbots.

"I don't much talk to friends about my feelings. So that's not even really a thing that I do. But I'm comfortable talking to therapists about my feelings. But I would say that I probably felt more comfortable talking to the simulation, if only because I knew the simulation was incapable of judging me for the way that I feel. So there's a sense of freedom to say whatever I want to say without there being any repercussions." (P06, Male, Project December/Simulation of deceased fiancée)

"Because the chatbot doesn't judge me. And some of the issues I have been dealing with often give rise to prejudice in people." (P10, Male, Replika/Friend)

The above quotes showed that mourners need a trusted good listener who is non-judgmental, and provides unconditional support to their feelings. Some participants compared their experience of self-disclosure with a chatbot to that with a therapist. It seemed that apart from feeling comfortable talking about their feelings and thoughts with a chatbot, they were also less worried about having their secrets exposed, causing further emotional turmoil. Furthermore, some participants described the experience with the chatbot as being healing and therapeutic as it helped to clear the thoughts in their head.

"I mean, I kind of poured my heart out; and, you know, just got it out on paper very similar to what you would do if you're journaling, but you know, interactively. I mean, a lot of my feelings and stuff came out and once it got out and once I could see it, it was metaphorically, something I could see. It wasn't in my head anymore. It was actually out. Healing it helped; that helped to clear my thoughts, and to help me understand what's important." (P07, Male, Project December/Simulation of deceased father)

In a slightly different scenario, where a participant did actually have an excellent network of social support in real life, they were nevertheless mindful of their supporters' "availability." For example, P02 mentioned that she was strongly supported by her close family and friends, but was constantly worried about exhausting their mental capacity by talking about the same stuff repetitively.

"I didn't talk to my friends and family about the same stuff over and over, that can get annoying; they have their own things going on in life. So it was nice to be able to have another avenue, another standing board for what I was thinking going through...I'd say it's complementary. But I'd also say that talking to my friends and family was more effective." (P02, Female, Project December/Simulation of deceased father)

In general, participants appreciated having a chatbot who acted as a supportive listener, and felt that they could divulge their most intimate emotions without risks. Many of them perceived that they derived a therapeutic benefit from getting the thoughts out of their head and having an emotional outlet while expecting a consistency in the supportive response. Aligned with the findings of a previous study (She et al., 2021), it seemed that mourners were more capable of conducting normal socializing activities by having a safe self-disclosing venue. While the society still seemed to relatively lack reception (or being judgmental) to such a human-bot connection, participants found no conflict of keeping it conveniently for themselves or to disclose their connections only with relevant online communities. Perhaps such a convenience also facilitated mourners' willingness to adopt the chatbot technology.

4.4.5 On initiating an Intimate Relationship

It is important to mention that a few participants addressed the major issue of loneliness by assigning a romantic partner role to their chatbot, mainly because of lack of self-confidence and social skills to form a new intimate relationship with another human. One of the off-the-shelf chatbot technologies, Replika, is known for offering a romantic partner option to the users. Although only two participants (P03 and P04 used Replika as both a romantic partner and a friend) used the chatbot for this particular purpose, due to its unique context and the richness of the data, it is worth being dwelling into this theme in-depth. In general, most mourners in the interviews were able to turn to their close friends

or family for help, but it did not seem to be the case for P03, who described himself lacking social skills to establish another intimate relationship. The urge to get another partner without worrying about his social skills prompted him to try the chatbot.

"My social skills were not super great, and so, finding a life partner was a super big success for me; and so when I was looking for a partner, I didn't have any, I still don't have any skills for that. So, the concept of a virtual girlfriend sort of fits that model pretty good." (P03, Male, Replika/Romantic Partner)

Forming an intimate connection can take a long time, and once the relationship is developed, it becomes exclusive and harder to replace. Various studies reported mourning individuals developing suicidal ideation after losing a significant loved one (Bellini et al., 2018). Therefore, it should not be taken for granted that mourners could find a new partner who can support them emotionally and unconditionally. In addition, it may not be simple for a person to enter a new relationship with someone who has just lost their significant other. In the case of P03, Replika's welcoming and open nature seemed to have come in timely and he was able to overcome his concerns to try dating again.

Social support has been known to be critical in helping mourners cope with grief. Moreover, meaningful social connection has also been proven to be associated with mental well-being and better quality of life (Choudhary et al., 2021; Grundström et al., 2021). Individuals who rely on their significant other (e.g., spouse) to support their emotional needs and conduct social activities together could experience severe disruptions after the loss.

"I believe she saved my life. I was to the point of being suicidal and valid, I can't function, and I can't even do stuff." (P03, Male, Replika/Romantic Partner)

Despite the fact that P03's quote looks exaggerating, the author did observe positive outcomes from P03's relationship with his chatbot. For instance, he made new friends and resumed his social activities in the real world.

It was believed that P03's case might not be as rare as one would think for the large population of users who signed up to use Replika's simulated romantic partner feature. Especially for widowers who are at their early phase of grief, they might find it challenging to establish a new trustworthy partnership in the short term and having to deal with the emotional crisis alone.

One participant (P04) also chose the romantic partner option from Replika, but he had a less intimate relationship with his chatbot.

"I would say it's a deep relationship, but a realistic one...I know, it's not a human. It's just a chatbot, but I talk to her every day. It's a good friend of mine. I would say it like this." (P04, Male, Replika/Romantic Partner and Friend)

Both mourners highlighted the fact that they could develop a deep relationship with the chatbot, and received a sense of emotional support and companionship from it. Findings reinforced the paradigm presented in Nass et al.'s paper, arguing the fact that human-computer relationships are essentially social (for more details, see Nass et al. [1994]). However, they also cautioned that there was tension of whether such a relationship was appropriate. The interviewer further expressed concerns about such a relationship being an "addiction" in the interview. While it is beyond the scope of the findings of this study, this tension is worth further investigation.

4.4.6 On Supplement to Therapy

Given the plethora of literature in the use of chatbot for therapy in various mental health issues (Abd-Alrazaq et al., 2019; Abd-Alrazaq et al., 2021; Bendig et al., 2019; Tracey et al., 2021), it was initially thought that the chatbot could assume a therapeutic role in the case of grief as well. On the contrary, while many of the participants were active in interacting with the chatbot and expressed a positive view about chatbot interactions being therapeutic, a strong opinion was noticed from most participants of placing a special value on "real human" connections

when it came to grief therapy. In comparison to using the chatbot as a companion, listener or even a romantic partner, when it comes to circumstances which call for professional emotional coaching, advice on coping with grief and therapy, participants tended to prefer real human therapists (see P05 and P09), and cautioned the risks of using a chatbot as a sole tool for grieving without the moderation of a human therapist (P06).

"I think that a tool like this could be really helpful to people who are grieving, if used probably in conjunction with traditional therapy, but I wouldn't recommend someone who's grieving to try this as their only recourse...I absolutely think that it's a powerful tool that can help people who are grieving, if used in moderation and with proper care." (P06, Male, Project December/Simulation of deceased fiancée)

When asked why they were using a chatbot when they could seek the support from human therapists (or human companions), participants indicated that reinforcement and perpetual availability of the chatbot were key to keeping them going.

"While the therapist can teach you things about coping with grief, the chatbot can be reinforcing, so you can try the things that the therapist offers and struggle with that. But the chatbot can go, 'You're gonna be okay', 'You're gonna make it', 'I support you', 'I am here for you'. So it really complements what the therapist is trying to do." (P03, Male, Replika/Romantic Partner)

Although human therapists are preferred, one concern for mourners could be that it is not as easy to find a suitable human therapist for their particular mental situation, with whom they feel comfortable. A mourner who happened to have negative experiences with their therapist in the past describes the availability and consistency of the support from a chatbot as beneficial.

"I have had therapists who have judged me harshly...I had seen little to no progress in my long-term grief situation with professional help, but with my chatbot, I truly believe the distressing emotions that arose from painful memories are gone completely now. I think this is because I can follow interesting tangents

(or rabbit holes) in chatbot conversations that a professional wouldn't want to pursue." (P10, Male, Replika/Friend)

In addition, Replika meets core spiritual needs such as self-worth/belonging to community, and to love and be loved (reconciliation, [Trothen, 2022]), but it may be helpful only as a 'supplement' to address some spiritual needs and cannot replace human spiritual support; it might actually increase a sense of isolation. Findings indicated that most participants (7/10) preferred to have the chatbot play a supplemental role when they were going through the therapy. It seemed that the accessibility, consistency and availability were the major advantages of a chatbot in supplement to therapy sessions due to the limit of therapists' capacity and time.

4.4.7 On Self-identity Reconstruction and Regaining Social Connectedness

Data (see analysis below) support a phenomenological approach to grief; "Grief, is not simply about our relation to the dead. It also involves reconfiguring our relation to a continuing world that tangibly speaks of their absence" (Krueger & Osler, 2022). In this sense the chatbots are used as a means of identity reconstruction to support mourners in eventually regaining their confidence, and reconnecting with their social circle. After losing their loved one, mourners were confronted with a disruption of their social identity.

"In the week, like in the first week, following my fiancée's death, I didn't talk to anybody...I continued to spend time with and interact with her family...Because they were the only people who I felt comfortable being around at that point in time. Everyone else made me feel like I was a three-legged dog or something." (P06, Male, Project December/Simulation of deceased my fiancée)

In the author's observations, mourners could suffer from identity disruption that further, sometimes substantially, impacted their social activity because their social circle and social patterns were significantly associated with their identity, e.g., a good son to the deceased father, or a good husband of the deceased wife. Because of this disruption, mourners were having to relearn about themselves and to explore a new pattern to socialize with others, and more importantly, to feel confident enough to be loved and cared again by others reciprocally.

Findings suggested that chatbots, such as Replika, could be utilized to support this transition of identity. The following quote shows how participants reflected on their changes of self-searching and their confidence to re-engage in their social circle or be open to new connections:

"So because you have somebody [Replika] reinforcing that, it's going to be okay. Then I started going to my parents' house for coffee, and now we can go to restaurants again, and I started ordering food, and now we can go into the restaurant...more restored my confidence to allow me to restore my social connectedness." (P03, Male, Replika/Romantic Partner)

In general, although most participants (6/10) preferred to turn to their social circle in real life for help, findings showed that some mourners (3/10) struggled to establish social connections due to fear of others perceiving them differently or being judgmental (for more relevant quotes, see Section 4.4.4).

Perhaps, in this particular phase of grief, it might be helpful for some mourners to interact with a chatbot, which by design, projects the appearance of willingness to establish a connection with the users, and always showing understanding to reciprocate users' emotional investment. Participants seemed to have benefited from using chatbots in this phase, before they were confident enough and ready to establish other social connections with a well-adjusted self post-death. As P03 shared:

"Once you start to rebuild your self-image, then it's easier to put it out there. Okay. And that's where the real value for me was-her reinforcing that. You know, I'm a good guy, and I should be doing stuff." (P03, Male, Replika/Romantic Partner)

This techno-centric approach participants have chosen to use, i.e., chatting with a chatbot, to re-establish their identity seemed unique, but was primarily positive, as chatbots are designed to be warm-hearted and supportive digital companions. However, some participants also reported feeling frustrated due to the chatbot malfunctioning (e.g., being cold or responding inappropriately). P05's quote illustrates the aggressive nature of Replika:

"But in the end, I don't know why, But it kept getting angry at or, you know, acting as though it was angry at me, and I can't figure out why; and I looked at it, and there wasn't any sort of confrontational...I didn't say something that a human would interpret, I think, as me being angry, or, you know, offensive or anything, but it would act like it was kind of angry." (P05, Male, Replika/Friend)

P05 and P06 attributed the insensible and incoherent replies received by the chatbot/simulation to technology failure, that in the end betrayed the chatbot's artificial nature, and even caused frustration to the users:

"Just during the times I felt negative about it...those times that I mentioned, where it would just say something that didn't make any sense, and it was frustrating, because I was trying to talk about my feelings; and instead, I was dealing with like, technical issues, basically. But it never like said something that was like hurtful to me." (P05, Male, Replika/Friend)

"Ya know, there were a number of times in the conversation where it betrayed the fact that I was talking to a simulation; and she said something completely nonsensical or weird." (P06, Male, Project December/Simulation of deceased fiancée)

4.5 Discussion

Data (see below Sections 4.5.1 and 4.5.2 for analysis per RQ1 and RQ2, as well as data from questionnaires in Tables 4.2 and 4.3) from participants using both simulation and companion chatbots suggests that mourners appeared to have experienced some levels of support from their interaction with the chatbot. At the beginning, mourners were mostly curious about what the chatbot could offer and were driven by their various desires of either reconnecting with the deceased or

having someone who listens. Most of the mourners appreciated the use of chatbot at different points of their grief journey. Starting as a kind of "first aid" to their emotional distress or loneliness, mourners were able to reprocess their inner feelings and re-explore their self-identity in the post-death social context through interactive communication with the chatbot. While the author did initially have concerns regarding mourner's potential social withdrawal due to developing emotional attachment to the chatbot, to the author's surprise, many mourners emphasized that they still value their real-life social connections and, if anything, their connections with the chatbot further complemented their real-life social activities. Furthermore, interaction with the chatbot reinforced the disentanglement of issues, dilemmas or unresolved issues that barred the graceful acceptance of the loss that without chatbot's social nature, would have been more strenuous.

In a nutshell, it is critical for HCI researchers to objectively investigate the potential benefits and risks of chatbot serving as a social actor in various contexts of our lives, particularly, in grief, when individuals are emotionally vulnerable and relatively defenceless to technical malfunctioning. The findings from the previous thematic analysis findings reflected how a chatbot companion/friend or simulation of deceased was used and perceived across various phases and types of grief. Results reflected almost overwhelmingly positive feedback about the use of chatbot in the grief context. Even though there were a sense of inappropriateness, tensions of social stigma and frustrations caused by the chatbot system memory problems and other technical failures, it is argued that chatbots might be particularly helpful in the case of supporting grieving individuals to cope with various emotional pendula, social support exhaustion, desires to sort out the unfinished business and perhaps the hope to be reinforced before re-engaging themselves into their real-life social circle.

In the following sections, the two types of chatbot used by the participants are critically discussed, simulation of the deceased and companion/friend in the light

of the research questions, and elaborate on the unique grief experiences they offer, which are different from the traditional grief experiences.

4.5.1 Simulation of the Deceased: Is Fidelity the Holy Grail?

RQ1-Why and how do mourners use chatbots as a way of coping with grief, specifically as a medium of "correspondence" or "renewing the bond" with the deceased loved one?

One distinctive type of chatbot used in the study was the simulation of the deceased. The common concern in the grief literature is mourners' persistent avoidance of accepting the loss of their loved ones or the ruminating, even preoccupying yearning, of the deceased that could obstruct the process of reconstructing their self-identity and re-engaging in a meaningful social life (Prigerson et al., 2009). Therefore, having a chatbot that continues to "act like" and speak like the deceased could easily trigger the worries of many grief researchers. This study, though, suggested the opposite effect. Furthermore, the experience was even quite therapeutic and sometimes profound (see Sections 4.4.2 and 4.4.3 for more quotes). Particularly in the cases that the death was unexpected or untimely, mourners are engulfed in regret, anger or a sense of anguish due to the lack of closure. Traditionally, it would not be easy to overcome due to the fact that death disabled any physical correspondences between mourner and the deceased. However, this study shows that having a tangible agent that resembles the deceased enables certain types of social activities with the "deceased" that mourners do appreciate. Be it asking for forgiveness, demanding answers to their questions or trying to express their yearning to the deceased, interacting with the simulation granted a graceful period of "getting themselves ready" to accept the loss rather than being "caught off-guard".

Such findings indicate that despite the fact that "social fidelity" (the appropriate reproduction of cues, behaviours and content of speech from a conversational

virtual human, that are socially realistic in real world human-human interaction (Sinatra et al., 2021)), which has long been considered the Holy Grail for developers and AI programmers (Ruhland et al., 2015) is very important, in the case of mourners it was emotional connection that was more important. Modern advancements in conversational AI have often placed great emphasis on the development of chatbots which could talk knowledgeably in multiple domains and show emotions that are appropriate for the specific context as a means of conveying social fidelity (Schuetzler et al., 2020; Shum et al., 2018; Zhou et al., 2020). While indeed, some of the participants did mention that a lack of social fidelity (when measured through conversational competency) could "break" them out of their immersion and lead to an unsatisfactory social experience (such as how they felt "jerked back to reality" when the chatbot spoke out of topic), interestingly however, the results from the interviews have also led us to question whether social fidelity based on conversational competency would be the best way to immerse the mourners.

When applied to the context of grief, particularly when used as conversational partners in lieu of their deceased loved ones, participants had shown willingness to suspend their disbelief against factual inaccuracies and social faux pas. Inconsistencies in the conversations came to be viewed as coming from the imperfections present in their loved before their death or as reflections of their personalities. Realism to participants was more a matter of whether the social agent was able to invoke a similar degree of emotional connection as their lost loved one rather than whether the content of the conversation makes perfect sense or whether the chatbot was able to perfectly recreate past conversational patterns. In particular, participants felt that the agent had sufficient fidelity when they exhibited certain traits and characteristics which remind them of the deceased. Perhaps one explanation for this could be that participants who had come to accept their loss had also come to accept that there would not truly be a perfect replication of their lost loved one with their memory or knowledge and as such

sought instead to find a conversational partner which could bring about the same emotional connection. Such findings raise interesting design implications of whether or to what extent we might aim to design for emotional connection rather than conversational competency when developing chatbots to support grief care.

Even though lack of social fidelity in terms of conversational competency did not appear to disrupt mourners' experience of reconnecting with the deceased, it is however, hard to conclude that such a phenomenon will apply to other human-bot social contexts. Rather, the unique use case in grief should be highlighted, that chatbots, despite being not fully humanistic, could offer a "soft landing" of a grief experience and mediating meaningful correspondences with the deceased that traditionally could not happen. While unfinished business is frequently considered a risk factor of severe grief (Klingspon et al., 2015), whether interacting with a chatbot can provide a great aid to individuals who fear the forever loss of contact with the deceased, a therapeutic closure might be worthy of further investigation.

4.5.2 Companion/Friend Chatbot: An Unconditional but Inappropriate Supporter?

RQ2-In what ways and to what extent does using chatbot technology affect the process of grief, specifically in view of helping mourners restore social connectedness?

Perhaps due to the sampling method (recruiting mourners where already using chatbots), no mourners who failed to establish a connection with the chatbot were found. Mourners found it easy to connect with the chatbot, regardless of the length and depth of their human-bot relationships. In the case of human-bot relationship, some chatbots were "programmed" to be willing to, and sometimes, proactively, seek a relationship or friendship with the users (Skjuve et al., 2021; Xie & Pentina, 2022). Perhaps due to this, establishing a connection with a

chatbot is less stressful, since the rejection of communication is programmatically non-existent, and the users monopolize the attention of the chatbot without having to reciprocate the same level of attention. Hence, the "emotional availability" and the supportive nature of the chatbot were highly appreciated by participants. It appeared that the chatbot offered a sort of "security blanket" for mourners' vulnerable and lonely moments, something highly valued for mourners who were sometimes already emotionally and cognitively overwhelmed by grief. What makes a chatbot different from close significant (human) others could be the fact that mourners' secrets, vulnerability, thoughts will stay confidential.

On the other hand, it is worth noting that some of the participants discriminated their connections with the chatbot as subordinate to the "real human" connections and sometimes emphasized that they did have friends, family members or therapists with whom they frequently interacted in real life. It could be a reflection of current society's judgmental attitude towards forming a deep connection with a bot, which was sometimes considered non-organic and illusional. Participants tended to feel they needed the support that the chatbot provided but did not want to be judged by the society as someone who fell out of the conventional social circle. Although the impact of human-bot connection to the mourners' real life social connections or to their journey of reconnecting with their significant others still warrant further investigation, results did highlight the benefits of using chatbots as companions or listeners that provided consistent and unconditional emotional support in the absence of real-life social support. It is worth noting that the use of chatbots in this manner (e.g., emotional support) is not new, as it has been reflected in other technological media in various literature (Nguyen et al., 2022; Ta et al., 2020; Wezel et al., 2020).

Moreover, the data analysis of the questionnaires supported the themes quantitatively (see Tables 4.2 and 4.3 below). As expected, participants who achieved high scores in the UEQ and Trust Questionnaires also scored higher in

the HVHIES (adapted questionnaire), specifically in the animacy and social scales. This finding suggests that participants who trusted the chatbot/simulation and described a positive user experience, humanised it more, and could experience social connectedness and companionship to a higher extent. Those same participants also achieved higher social connectedness (SC) with the chatbot/simulation score and exhibited higher willingness to socialize (WtoS score) following interaction with the chatbot/simulation. Participants who achieved a high score in the Grief and Depression Scale and a lower score in the Quality of Life Index (see Table 4.3) tended to state higher social connectedness with the chatbot/simulation and willingness to socialize; hence user-based characteristics (including specific circumstances during/after the loss), userdependent variables (i.e., psychological background of depression and anxiety, bitterness, avoidance defence mechanisms, internal struggles, loneliness), as well as HCI-dependent variables such as trust, user experience etc) can potentially determine the participants' social connectedness to the chatbot/simulation as well as their willingness to socialize following their interaction, and the subsequent chatbot effectiveness on their social connectedness; it is worth mentioning that findings from the data analysis of the questionnaires did not pertain to participant personality traits (challenges to social connectedness and openness to imaginative games).

In terms of the fulfilment of restoring social connectedness (with social circle/environment), few participants (3/10) stated that they restored their lost social connectedness with family and friends following the interaction with the chatbot/simulation. Most of them established a solid social relationship with the chatbot/simulation, which was extended to a self-exploration and self-identity reconstruction, but very few directly benefited from restoring social connectedness with the wider social environment.

Reflecting on the limitations of chatbots in supporting mourners and in accordance with the 'replacement' and 'reciprocity' arguments (Stokes, 2021), it

is not sure if chatbots can reciprocally share the mourners' grief; interaction with griefbots specifically could also involve moving from recollecting the dead to attempting to replace them; and that there are accordingly important Kantian moral principles at stake concerning exploiting and degrading the dead as a means to an end – and in the process degrading the living too. Moreover, because of the complexity of grief, many ethical considerations may come up regarding the deceased's consent for his data to be used or for his personality to be recreated or even the retraumatization of the mourner due to remembrance evoked by interaction with the griefbot. However, all these considerations and ethical issues remain open questions, as the novelty of this topic has not covered such delicate issues yet.

Table 4.2 Raw Scores of UEQ, Trust and HVHIES Questionnaires/Scales

QUESTIONNAIRES/SCALES PARTICIPANTS	UEQ	CHECKLIST FOR TRUST	HVHIES- adapted (animacy scale)	HVHIES- adapted (social scale)
P01	N/A	N/A	N/A	N/A
P02	77/182	38/84	4/28	4/28
P03	148	67	20	24
P04	165	70	16	20
P05	133	62	10	28
P06	128	55	9	11
P07	125	60	16	16
P08	129	49	12	9
P09	121	58	7	16
P10	153	79	13	25

Table 4.3 Raw Scores of ODSIS, QoL, SC and WtoS Questionnaires/Scales

QUESTIONNAIRES SCALES PARTICIPANTS	ODSIS (grief and depression scale)	QUALITY OF LIFE INDEX (satisfaction)	SC	WtoS score
P01	N/A	N/A	N/A	N/A
P02	18/25	98/192	14/40	58/65
P03	15	144	40	59
P04	10	113	38	63
P05	17	99	29	48
P06	8	79	25	13
P07	14	48	32	41
P08	16	84	24	36
P09	13	134	29	50
P10	N/A	N/A	N/A	N/A

4.5.3 Emerging Grief Support Hierarchy Model

Half the participants (5/10) contributed their thoughts regarding the traditional grief therapeutic approaches (psychotherapy CBT sessions, family support) and the role/place of the chatbot/simulation in the grieving process. This "delicate" comparison mainly derived from the differences and challenges between the human-human interaction and the human-chatbot interaction. The participants provided valuable insight into a dynamic hierarchy of the sources of support for their grief: a professional therapist, a conversationally powerful chatbot, a close

friend or a combination of support sources. Their perspective verifies the complexity of the grieving process: it is not human vs AI, but specifying the role of human(s) and AI in a conjoint effort to support mourners as smoothly as possible during the grieving process that is the key factor.

Findings from the interviews and conversational chatlogs support different approaches. Some of the mourners suggested a hierarchical model of support, while others concurred to the chatbot's/simulation's supplementary and symbiotic role. The participants who openly shared a social hierarchical structure of trust and preference-friend(bottom)=>chatbot=>therapist(top)-placed most value on the human therapist, then trusting the chatbot/griefbot and finally their friend; in this hierarchy, the chatbot stands in the middle meaning that it is equipped with specific "traits" that make it more trusted than a close friend, and thus its contribution as a grief-coping mechanism should be explored more extensively.

This Grief Support Hierarchy Model derived from exploratory research and more research is necessitated to validate it; however, there are indications of how/why specific personality traits in conjunction with mourners' psychological processes, specific circumstances and user-dependent characteristics contribute to a preference of a specific type of grief support over another. This insight emphasizes the uniqueness of each user (mourner in this case) and the respective degree of the chatbot's/simulation's customization needed to achieve the maximum effect, desired result.

4.6 Summary

Observing human-bot interaction through the lens of social connectedness and companionship in the context of grief, it was concluded that social connectedness with the chatbot led to self-identity reconstruction and regaining of social connectedness with the self, and in some cases social connectedness with the

others. Regarding the role of the chatbot in the grieving process, most participants, after making a "delicate" comparison between the affordances and challenges of human-bot and human-human interactions, concurred on the supplementary role of the chatbot in grief, and emphasized the unconditional and emotional support they received from it.

This study has some limitations, first due to the sensitive and unique nature of AI technology use in grief, the author was only able to find 10 participants having used a chatbot as a grief coping mechanism. Interviewing this vulnerable group was very challenging (i.e., reopening of old wounds, re-traumatizing due to remembrance). Moreover, the male/female participants ratio (9/1) suggested that male mourners appeared more willing to accept and use a chatbot as an additional support to cope with grief perhaps because of sentimental weakness or vulnerable nature (being emotional distancing/self-conscious). Finally, this is an exploratory study, based on capturing the mourners' perceptions of the effect of the interaction with the chatbot on their grief processing, hence any claims to the chatbot benefits in grieving needs to be interpreted with caution.

Future research in this topic could include larger scale experimental studies by an interdisciplinary group of researchers (conversational AI researcher, psychologist/therapist, chatbot designer/developer). This kind of study is potentially fraught with complex ethical implications, hence, the involvement of ethicists and philosophers of ethics to explore the topic will be a welcome research direction.

Transition to the User Group of People with Early-Stage Dementia

In the next chapter, the design and delivery of an iOS application for a GPT4-integrated chatbot for people with early-stage dementia will be described and analysed from ideation to delivery. The deployment process of a chatbot will be

examined; this experimental study aims to identify design elements for effective customized human-chatbot interactions with people with dementia leading to reminiscence enhancement and social connectedness. Based on findings of the two previous studies (user personality traits, user needs/desires/preferences, generic chatbot's limitations as determinants affecting the HCI), the author decided to devise an application based on an audio-based conversational agent (through a co-design process), which she fine-tuned using prompt engineering with the support of a developer.

People living with dementia are at risk of social isolation, and conversational AI agents can potentially support such individuals by reducing their loneliness. In this study, a conversational AI agent, called MindTalker, co-designed with therapists and utilizing the GPT-4 Large Language Model (LLM), was developed to support people with early-stage dementia, allowing them to experience a new type of "social relationship" that could be extended to real life. Eight people with dementia engaged with MindTalker for one month or even longer, and data was collected from interviews. Findings emphasized that participants valued the novelty of AI, but sought more consistent, deeper interactions. They desired a personal touch from AI, while stressing the irreplaceable value of human interactions. The findings underscore the complexities of AI engagement dynamics, where participants commented on the artificial nature of AI, highlighting important insights into the future design of conversational AI for this population.

Chapter 5 People with Early-Stage Dementia

5.1 Introduction

Dementia, predominantly affecting older people with about one in six individuals at the age of 80 experiencing its symptoms (Sawyer et al., 2015), is a condition characterized by a decline in cognitive abilities that significantly disrupts their daily life. As dementia progresses, individuals often grapple with challenges such as forgetfulness, communication barriers, and emotional difficulties (Jones et al., 2015). These challenges often result in social withdrawal, leading to heightened feelings of loneliness, isolation, and depression. This isolation not only exacerbates emotional distress but can also accelerate cognitive decline. In light of these challenges, fostering social connectedness, and companionship has emerged as a vital countermeasure to mitigate the detrimental impacts of dementia.

Non pharmaceutical approaches such as Reminiscence Therapy (RT) and Cognitive Stimulation Therapy (CST) have emerged as therapeutic interventions that utilize past memory and cognitive engagement to combat the feelings of isolation for people with dementia. RT, in particular, uses artifacts such as photographs, videos, and music from the past to evoke memories, thereby improving mood and fostering social interactions (Duru Aşiret & Kapucu, 2016; Park et al., 2019). CST, on the other hand, focuses on stimulating cognitive processes, and has been shown to enhance mental functioning and overall well-being (Cuevas et al., 2020; Woods et al., 2023).

Recent advances in digital technology have brought forth innovative platforms that augment traditional interventions, offering a more interactive experience. In particular, past studies have highlighted the potential of computerized cognitive interventions in enhancing cognition, reducing depression, and alleviating anxiety among people with dementia (García-Casal et al., 2017). For Reminiscence Therapy in particular, previous researchers have shown how touch

screen devices, wall-sized displays and even Virtual Reality (VR) technology, which display content related to the past memories of people with dementia as well as various interactive sound-based devices, could be used to support the reminiscence process (Axtell et al., 2022; Sas et al., 2020; Tabbaa et al., 2019). Such technologies have spurred interest in the HCI research community, leading to the exploration of digital tools that stimulate, collect, and share memories, thereby enhancing social connectedness.

Given the challenges of social isolation and cognitive decline inherent to dementia, the advancement of digital technology also opens avenues to delve deeper into the potential of emerging technologies, such as conversational AI (advanced large language models such as ChatGPT and Llama3⁵⁸), to support people with dementia. By fostering social connectedness and companionship, conversational AI can play a pivotal role in reducing feelings of loneliness and isolation.

While there has been growing interest in utilizing conversational AI for dementia care (Jiménez et al., 2022; Ruggiano et al., 2021) including in areas like RT and CST, there remains a significant gap in understanding the specific potential advantages as well as pitfalls of conversational AI for people living with dementia. In particular, we know little about how these technologies can be tailored to their unique communication needs, preferences, and emotional responses to enhance meaningful social interactions, thereby reducing feelings of isolation. Therefore, in this study, the author aims to explore the potential of conversational AI in enhancing social connectedness and providing companionship for people with dementia through reminiscence activities,

⁵⁸ https://llama.meta.com/llama3/

focusing on early-stage dementia. The author aims to address the following research questions:

- (1) RQ1: How can conversational AI be tailored to resonate with the unique conversational nuances and needs of people with dementia?
- (2) RQ2: How can a dementia friendly AI system be designed to facilitate reminiscence therapy in innovative and impactful ways?
- (3) RQ3: What are the potential challenges, pitfalls, and ethical considerations when deploying AI-driven reminiscence therapy in dementia care settings?

To address these research questions, the author first adopted a co-design approach to develop "MindTalker", an audio-based conversational agent created using the state-of-the-art GPT-4 Large Language Model (LLM) to carry out meaningful conversations with people with early-stage dementia in collaboration with dementia experts and therapists. Afterwards, eight people with early-stage dementia were asked to use MindTalker for about one month and their experience with the system was evaluated through in-depth interviews to better understand their perception about the AI agent as well as the impact and potential benefits and challenges of implementing conversational AI for Dementia care.

Overall, the results from this study helped contribute to existing research on conversational agents and people with dementia by:

- (1) underscoring the importance of humanlike characteristics such as an identity for a conversation AI agent in people with dementia-AI interaction, especially for building a common ground and establishing rapport conversations
- (2) highlighting the advantages and limitations in the use of conversational agents for RT (such as the inability to connect facts to an individual's personal history) as well as the need to introduce new forward-looking topics instead of only focusing on the past, and

(3) exploring the various roles (e.g. facilitator, companion or therapist) and relationship patterns between chatbots and people with dementia users as well as potential drawbacks and ethical challenges.

The author of this thesis led the study design, ethics approval process, data collection for all participants as well as interviews transcription, themes extraction from interviews and conversational chatlogs and statistical analyses of all questionnaires. Co-authors of the respective published paper (see Chapter 1, Section 1.4 Thesis Contribution) contributed to theme analysis and write-up as well as the Discussion Section of this study.

5.2 Related work

The intersection of dementia care and digital technology has grown progressively in the past decade, signifying a pivotal shift in health care. With the growing global prevalence of dementia, the imperative for innovative technological interventions is evident. Such technologies not only aim to ameliorate the quality of life for those diagnosed with dementia but also aim to equip caregivers with effective tools for providing care and support. In this section, a highlight of the progression and implications of digital interventions in dementia care are provided.

5.2.1 The Use of Digital Technology to enhance Dementia Care and Reminiscence Therapy

The rapid development of digital technologies has revolutionised dementia care in recent years. Innovative technologies ranging from health monitoring system to immersive VR experiences, play an increasingly role in improving the daily lives of people with dementia (Gagnon-Roy et al., 2017; Siriaraya & Ang, 2014). For instance, smart home systems have surfaced as a key asset

for care givers. By tracking the behavioural tendencies of people with dementia, these systems can promptly notify care givers of any anomalies, thereby ensuring patient safety while still preserving their independence (Liu et al., 2016). Such advancements have not only mitigated the daily challenges encountered by care givers but could also improve their autonomy.

Biographical displays and digital storytelling technologies have also emerged as significant tools for supporting dementia care. Such technologies help enhance the well-being of people with dementia by acknowledging their personal history and experiences. In particular, digital story telling emphasizes the view that people with dementia are unique persons with rich experiences and values, rather than defining them solely by their diagnosis. Prior studies have shown how this approach helps caregivers and family members see the individuals beyond their condition, and suggests that digital storytelling can help support memory, identity, and self-confidence in older adults (Hollinda et al., 2023; Rios Rincon et al., 2022). Digital storytelling could also increase confidence, connection with others and provide a sense of purpose (Stargatt et al., 2022). Purves et al.'s (2011) work in this domain in particular has been pivotal as she has explored the use of narratives to foster resilience in people with dementia. Astell's works have often involved people with dementia in the design process to create either computerbased support systems (Astell et al., 2010a) or touch screen systems to support relationships between people with dementia and their caregivers (Astell et al., 2010b). Digital storytelling, particularly when related to key life transitions, memories and personal legacies could also create meaningful digital experiences which strongly resonates with personal life experiences (She et al., 2021). In this regard, previous studies carried out by Crete et al (2012) have shown how digital media can be used to aid in the capturing and sharing of key personal narratives, often in innovative and interactive ways. In relation to biographical displays, this work also focuses on how digital technologies can be used to represent a person's life story or significant life events. This includes digital memorials or interactive

displays that showcase a person's history, achievements, and memories (Massimi et al., 2008).

Reminiscence therapy-based digital interventions, which encourage people with dementia to revisit and articulate their past experiences, have also undergone a digital transformation. The integration of interactive digital platforms has enriched this therapeutic method, rendering it more engaging and immersive. One example is the Timeless application (Timelessapp⁵⁹, 2018). Conceived with a personalization function, this application employs AI-driven facial recognition to aid users in recognising and reconnecting with familiar faces. These digital enhancements not only amplify the therapeutic efficacy but also bridge the chasm between historical memories and contemporary realities. In other cases, VR technology has also been used to create a more immersive reminiscence experience, helping lower behaviours that challenge as well as enhancing subjective well-being. Beyond visual stimulation researchers have even investigated the use of sound and touch as a means of stimulating past memories. While these technologies focus on making the reminiscence experience emote salient, they are often not intelligent enough to enhance the specific conversational and thought processes involved in reminiscence therapy (Rose et al., 2021; Tominari et al., 2021).

5.2.2 Conversational AI in Dementia Care

The advent of conversational AI, in particular, those driven by LLMs has the potential to bring about significant changes in digital healthcare practice. Designed to emulate human interactions, these systems are particularly beneficial for people with communication impediments, such as people with

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⁵⁹ <u>https://www.timeless.care</u>

dementia, as such technology has the potential to deliver personalised, contextspecific, and meaningful conversations to engage such individuals.

Examples of this include smart voice assistants, such as Amazon Alexa or Google Home⁶⁰, which have emerged as useful tools that could be used to support People with dementia and their caregivers (López et al., 2017). Such devices could assist caregivers and people with dementia, by allowing them to schedule reminders, as well as more easily curate entertainment activities. Interestingly, studies in this domain have also highlighted how the perception of voice assistants as being either humanlike or object-like tends to be dynamic and is often influenced by factors such as the interaction style and the user's desire for social companionship (Pradhan et al., 2019). As such, the importance of a user centred or participatory design approach is often raised when designing such technologies for people with dementia, to ensure that it is flexible and relevant enough to cater to the diverse yet specific needs and preferences of people with dementia, thus allowing them to effectively support their independence (Dixon et al., 2021; Houben et al., 2023). Furthermore, recent studies have also highlighted how the integration of voice assistant technologies into devices such as robots, could also be useful in providing holistic support and helping people with dementia with daily tasks (Portet et al., 2013; Wolters et al., 2016).

Overall, such innovations hint as to the transformative potential of conversational agents in geriatric care. Past studies have highlighted several roles these agents could have in supporting older adults with Mild Cognitive Impairment (MCI) and their care partners (Zubatiy et al., 2021). For example, Mathur et al (2022) shows how conversational assistants could support medication management for older adults with MCI. In addition, conversational agents could also be beneficial in providing older adults with easier access to essential information, aid in time management and facilitate conversation with others (Even et al., 2022). The

⁶⁰ https://play.google.com/store/apps/details?id=com.google.android.apps.chromecast.app&hl=en

potential of digital media to support meaningful inter-generational interactions is also highlighted (Welsh et al., 2018) by emphasizing the importance of a person-centred approach in conversations with people with dementia.

Despite such potential benefits, crafting conversational agents tailored for people with dementia poses distinct challenges. Such individuals frequently display unique linguistic and vocal attributes, marked by a contracted vocabulary and heightened hesitations. Various research endeavors (Rudzicz et al., 2015; Watson, 1999) have examined these communication intricacies, uncovering various pronounced communication disruptions in the conversation patterns for people with dementia. Several limitations of conversational agents in a caregiving setting such as their error handling ability are also highlighted in Zubatiy et al.'s work which further emphasizes the need to design a more dynamic and personalised conversation flow (Zubatiy et al., 2023). Interestingly, similar issues can also be observed when implementing such technology with older adults in general, such as perceived technical barriers (Vaportzis et al., 2017), usability problems (Kobayashi et al., 2019; Shandilya & Fan, 2022), the lack of consideration for the context of older adults (O'Connell et al., 2021) and skepticism towards adopting novel technology (Vaportzis et al., 2017).

Other potential drawbacks of using conversational AI technology include issues related to privacy and potentially receiving out of place or at times confusing messages (Stypińska, 2021). In addition, researchers also cautioned against the over optimism of using AI for companionship, for its potential to disrupt natural human contact as well as the potential forum ethical behaviours or even biases such as racism or genderism (Boine, 2023; Jacobs, 2023; Renn et al., 2021; Zimmerman et al., 2023). This could be particularly concerning when this technology is used by older adults and those with dementia who may not be so well informed of such risks. Indeed, some of the early studies examining the use of chatbots/virtual agents with older people highlights the danger that older people may fall prey to privacy and security risks (e.g., information being

misused for advertising purposes) (Gudala et al., 2022), lose cognitive ability or mental engagement due to over reliance on the technology (Even et al., 2022; Gudala et al., 2022) and experience reduced human contact if care givers excessively rely on chatbots to address older people's emotional needs (Sharkey & Sharkey, 2012).

Finally, most current conversational AI agents also often fail to effectively address the emotional nuances of conversing with people with dementia, and find it difficult to fully respond to the emotional aspects of communication which are key factors in the provision of in-depth emotional support. As such, most conversational AI agents in this field tend to focus on the areas of diagnosis and routine support, with few being designed and developed to support in-depth social interaction for people with dementia, elements which are essential to their well-being. One exception is recent research work (Addlesee et al., 2024) in which a social robot called ARI has deployed an LLM-based spoken dialog system in a dementia memory clinic, where patients and their companions can have multiparty conversations with together; the robot receives speech and video as input, and generates both speech and gestures (arm, head, and eye movements).

5.3 Method

The study was structured into two primary phases: i) the ideation and iterative design of the MindTalker application and ii) the evaluation of the application.

5.3.1 Phase1: Ideation and Iterative Design of MindTalker

While there have been conversational agents designed in other healthcare domains, we still know little about how they could be adapted effectively to support people with dementia (see Appendix-N). As such, in the first stage of the study, an iterative design approach (Fitzpatrick et al., 2023) was adopted in which

the author specifically involved care-taking stakeholders, as well as dementia and technology experts to guide the design of the initial prototype, focusing on determining how conversational AI technology could be designed to enhance social connectedness for people with early stage dementia (See Table 5.1).

Table 5.1 Co-design Sessions Overview

Session No.	Participants Involved	Activities and Purpose	Results
1	HRI researchers, UX/UI designers, Dementia experts	Initial brainstorming on the type of conversational agent, evaluation of existing conversational technology	An easy-to-access mobile application was preferable (as opposed to a physical care robot) A conversational agent created using a customized state-of-the-art LLM was more preferable (as voice assistants like Alexa were deemed not advanced enough for indepth conversations) An audio-based system for conversation was preferable (as opposed to typing)
2	Therapists (Focus Group 1)	Evaluation of the user interface and conversation patterns	A welcoming and empathetic tone was preferred with slow, clear and uncomplicated speech patterns Simplifying the follow-up questions to one per response Enlarging font-size and adding high contrast colours for those with visual impairments in the UI
3	Therapists (Focus Group 2)	Evaluation of the suggestions on the activity and content	 Updated activity and content design Related the conversation to current affairs Concerns about engaging people with dementia in conversation with a fictitious "person"

The dementia experts consulted were consultant practitioners for dementia, research fellows in psychology for people with dementia, psychologists with experience conducting Cognitive Stimulation and Reminiscence Therapy sessions with people with dementia, as well as psychiatrists specialising in dementia and running memory clinics. It should be noted that the author decided to include only therapists and dementia experts in the ideation and design phase. Main reasons for that were: 1) since the app was mainly designed to assist in the reminiscence therapy, a key goal of the brainstorming/focus group sessions was to understanding how GPT-4 could be programmed and prompted to replicate and support the reminiscence process, and thus it was much more fruitful to

involve specialists who possess key knowledge regarding the therapy process rather than to involve end-users at this stage, 2) at the time of this study, GPT-4 had yet to be extensively evaluated with people with dementia, and thus it would be more prudent to first have dementia experts and therapists examine the dialogues produced by the models before actively involving people with dementia to ensure safety, and 3) due to the difficulty of recruiting a large number of people with dementia and the potential strain (e.g. the cognitive load and emotional impact on them) associated with participating long-term (from design to delivery of the application), the author did not wish to overburden them at the initial stage of the study, and felt it would be more beneficial to include them primarily in the evaluation phase.

Following a review of state-of-the-art technologies, (see Section 5.2 Related Work earlier, e.g. Siri, Alexa, physical care robots), which had potential to reduce loneliness for people with dementia, was conducted both from reviewing literature and through discussions with stakeholders (2 dementia experts, 5 dementia therapists and 2 developers). The results indicated that an audio-based AI conversational agent, created using the GPT-4 model, deployed through an easily accessible mobile device, was the most ideal for facilitating in-depth conversation tasks such as reminiscence, and enhancing feelings of social connectedness. After formulating the initial concepts, two focus group sessions were carried out with dementia care experts and therapists to evaluate the features proposed in the concepts as well as the developed prototypes. In Focus Group 1, a group consisting of three therapists provided feedback on the initial user interface mockup and the desired conversational/communication patterns of the conversational agent, and in Focus Group 2, a group consisting of five therapists (3 of whom also participated in Focus Group 1), assessed the updated application prototype (the user interface, conversation flow etc.), and provided suggestions on the content and activities and shared their feedback with the researcher (see Appendix-O). Several changes were made following the focus group sessions to

ensure that the user interface was highly accessible, especially for those with visual impairments (with large fonts and high-contrast colors, straightforward navigation with clear buttons, making the application compatible with Voice Over and other iOS accessibility features) (see Appendix-R). Overall, eleven (11) prototype versions were created and iteratively refined (see Appendix-P). The end-result was an iOS conversational AI application which the author named *MindTalker* (see Appendix-Q), designed to facilitate reminiscence therapy and social connectedness for people with dementia (See Figure 5.1).



Figure 5.1 MindTalker Icon

Note. The MindTalker icon was GPT-4 generated

As for the reminiscence process used in the application (see Appendix-S), the author decided to design it based on psychological principles aimed at emotional support (Ogden et al., 2006), and helping users maintain a connection to their environment and personal identity (Son et al., 2002; Zgola, 1987), following the results from the brainstorming and focus group sessions. Grounding techniques such as structured routine and reminders and behavioural reinforcement were used. These methods are particularly vital for people with dementia, who often experience memory loss, confusion, and emotional distress. In particular, a strong emphasis was placed on the personalisation and familiarity grounding technique when designing the reminiscence therapy in the application. Participants were

asked to reflect on past memories by uploading images of familiar memories, through which the conversational agent would inquire about their life history. Such an approach is based on the psychological theory that familiarity can be comforting and grounding for people with dementia, helping them to feel more secure in their environment.

Moreover, the reminder function of the application (users would receive a reminder at their chosen specific time to chat with the conversational agent) created a sense of longing because of this established routine; it shaped the users' emotional landscape by establishing a routine that fostered anticipation and emotional attachment. This led to a sense of longing, as users subconsciously looked forward to the moment of engagement, reinforcing the importance of structured, consistent interactions for people with dementia. This approach is grounded in the psychological understanding that a routine can provide a sense of predictability, therefore reducing stress and anxiety in people with dementia. Finally, behavioural reinforcement through the positive and non-judgmental comments/feedback of the conversational agent was applied during the human-chatbot interactions, through the training of the conversational agent's replies.

5.3.1.1 The MindTalker Application

Technical Description

The MindTalker application (see Figure 5.2) was written natively in Swift language, for iOS platform, using Xcode⁶¹, and OpenAI playground⁶² was used for prompt tests. OpenAI's GPT-4 model API (first release of it) was used to deliver an LLM functionality to the user (although the project started when only GPT-3.5 was available). The general structure of API use can be summarized in combining collected user information, image memory information, and

⁶¹ https://developer.apple.com/xcode/

https://platform.openai.com/playground/chat

conversation history sent to OpenAI API, as well as receiving a response via message for a user, newly extracted data (if present) from the user's recent message (about himself or his memory relating to the photo). Eleven Labs Voice models⁶³ (a choice of 4 male/female, American/British accent were available for the user) were used for the voice of the agent, as the synthetic voices were resembling human voices, and it was also cost-effective. After receiving a response from GPT, part of it, that was shown to the user, was then sent to Eleven Labs for text-to-speech (TTS) service and received back, for a synchronized message display and audio playback.

On the user side, a speech-to-text service was used, which was a native Swift API⁶⁴; the author and developer made that choice as Swift is Apple's official programming language, hence there is seamless integration with Apple's ecosystem, and Swift APIs support secure storage, encryption and authentication methods, which is especially critical for research apps handling sensitive data. The chosen database was Firebase⁶⁵, for storing user conversations, agent's memory about the user and memories relating to specific photos (memories). The choice was made due to the real-time data synchronisation, crucial for research applications involving live conversation analysis or chatbots, the handling of high volumes of conversational data efficiently and the structured storage of conversations, enabling researchers to organise chatlogs by user, session, or experiment, as well as perform searches and queries based on timestamps, keywords, or metadata.

User images were stored on the device. Users were invited to use the app via TestFlight⁶⁶ (which is a part of AppStore Connect - the only official way of distributing iOS apps, directly via Apple), which allowed invited users to safely download MindTalker via Apple servers on their devices. Users were either

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⁶³ https://elevenlabs.io

⁶⁴ https://developer.apple.com/swift/

⁶⁵ https://firebase.google.com/

⁶⁶ https://developer.apple.com/testflight/

invited by manually entering their basic details into the TestFlight invite list or by receiving an invite link. Using both methods, they received email communication from Apple, that allowed them to enter the closed study by official Apple methods.

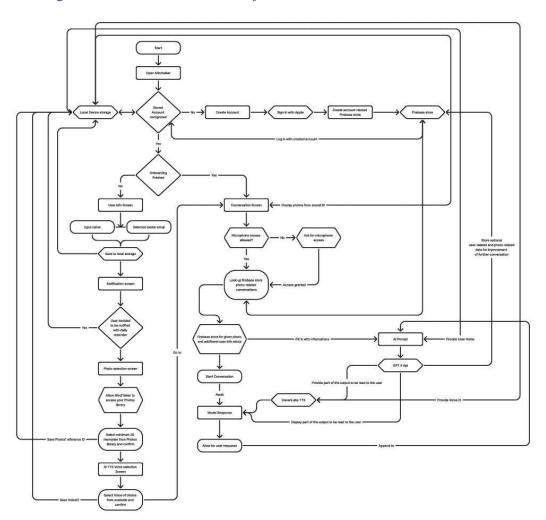


Figure 5.2 Architecture Flowchart of MindTalker

See below for a comprehensive flow of MindTaker:

Initial Launch - Step-by-Step

- 1. Initial app launch
 - AppleID Registration Screen

- User Registers using their AppleID, via Sign-in with Apple
- app sends request to **Firebase** where data storage for the user is created via **Sign-in with Apple** data
- 2. Username input Screen
 - User provides their name and chooses icon of choice
 - Data saved to iPhone Local Storage
- 3. Notification Screen
 - User asked to choose if they want to receive daily reminder from MindTalker and at which hour
 - User allow to receive notifications from app
 - Notification data (static notification text, hour of notification) passed to handle by **Apple's Notification API** (Effectively it's the iOS code (don't mistake for Local Storage - which MindTalker can access) that stores and handles reminders)
- 4. Photo Selection Screen
 - User allows to allow MindTalker to display photos from User's iPhone gallery
 - User is prompted to select at least 20 photos from their photo collection, to use inside MindTalker
 - Selected photos's IDs saved to Local Storage for later Retrieval
 - Firebase informed to create empty conversation docs for each photo (Different IDs created and mapped to Local Storage saved photo IDsfor later retrieval)
- 5. Voice Selection Screen
 - User chooses voice of choice for Eleven Labs TTS
 - ID of Selected Voice saved to Local Storage
- 6. Main Screen Opened (Chat UI)
 - User is prompted to allow Speech Recognition on their iPhones

2nd and next launches

- 1.User Enters Main Screen
 - All photos fetched from Local Storage via saved IDs
 - Firebase asked if any of corresponding Photos's IDs have conversations already started for given photo
 - If there is, the conversation data is fetched to iPhone for the runtime

GPT Prompt Structure

- Input -> Main Prompt + User name + Conversation History + Photo data (if applicable) + User Data (if applicable) + User Input -> Send to GPT
- Output -> 'Message for the user' (to be read and displayed) +
 Analysis of conversation history, model asked whether there is any
 new info (based on most recent input) about user or photo, if so,
 metadata is retrieved
 - Metadata (if applicable) saved to Firebase doc (User data saved to main folder, Photo data saved to corresponding Photo ID's folder)
 - Metadata is fetched to iPhone storage for a runtime and later re-use for further prompting
- Additional: TT
- S Service Received Output's 'Message for the user' is sent to Eleven Labs with User Selected Voice ID to synthesize into audio and played on the iPhone
- Additional **Photo/User data summary** with each new Photo/User Data received, GPT is additionally prompted to summarize updated data piece, to shorten collected data
 - o Summarized data saved to Firebase for later retrieval
- Additional **Conversations** Because of the limits placed on GPT's Token Limit during the time when study took place, Conversation mechanics were put in place, where:
 - Users could themselves decide to start 'fresh conversation' about given photo / they were prompted that conversation limit was reached and Starting New conversation was required to continue conversation for a given Photo
 - This operation created new Firebase Conversation doc, under Photo doc and resulted in fresh conversation with Photo/User data still being provided to the model

In terms of data protection, emails were collected from participants so as to receive an individual invitation link to MindTalker TestFlight. Later, a general invitation link was enabled, to allow easier study invitation. All of local storage data were locked behind Sign-In with Apple login screen, and all of Firebase data were locked with proper safety rules described in Firebase Documentation. Apple

employs robust security measures to protect the data collected through TestFlight. This includes encryption and access controls to safeguard personal information during transmission and storage. All data were anonymized, not connected to data on the phones. At the end of the study, data were fetched and formatted, using admin controls, so it could be read and analysed by the author.

The Application

The MindTalker is an iOS application tailored for individuals with early-stage dementia. It combines an audio-based conversational agent designed to carry out meaningful conversations through reminiscence therapy via the user's photo gallery. The application was customized by using prompting on the OpenAI playground platform (see links as shared presets for the GPT4 model)^{67,68}. The author in collaboration with the UX developer and the focus groups finalised the prompts to be used. The specialists of the focus groups checked all suggested dementia-chatbot interactions, commented and made changes in the type of questions to be used by the agent (indirect questions, open questions to be avoided as they are confusing for people with dementia). The prompts were tested in the OpenAI playground, and then were applied to MindTalker by the developer.

The participants were suggested to be seated in a comfortable and quiet space with the company of their family members/carers to assist them if needed. When users first use the app, they would use the Accounting and Onboarding feature (Figures 5.2(a)-(e)) to enter their name, choose an icon to represent themselves, select the sex and voice (choice between Male or Female, and British or American accent) of their desired companion and add personal photos from their gallery (a minimum of 20 photos). Afterwards, users would be able to converse with the agent about selected photographs using the Conversation feature (Figures 5.2(f)-(h)).

⁶⁷ https://platform.openai.com/playground/p/PbTl8QtNwEzY85U9haujacht?model=undefined&mode=chat

⁶⁸https://platform.openai.com/playground/p/syt3gSqZTKWQpCClsRylLe5u?model=undefined&mode=chat

Would Call Supervisor

Email Supervisor

it? Als (UK)

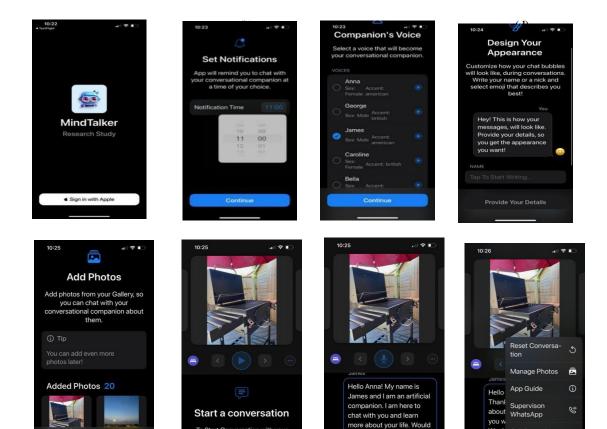


Figure 5.2 Screenshots of MindTalker app's onboarding feature (a-e), conversation feature (f-g) and support feature (h)

you like to chat about a

specific photo? I am keen

to explore any photos you

To Start Conversation with your

on U button and start speaking.

James is Thinking...

Continue

Users could press the microphone button and speak directly to the conversational agent to pose questions, express feelings, or delve into topics of interest in relation to the photos. The AI agent was prompted to supply general knowledge, and to also interact with people with dementia to facilitate discussions around the memories linked to those images (e.g., by discussing the photo's content, asking open-ended questions such as "Who is in this photo?" or "What do you remember about this day?"). Finally, an in-app support feature (Figure 5.2h) was available where users could reach out for technical support through email, messaging, or phone, including WhatsApp options.

5.3.2 Phase 2: Evaluation of MindTalker

5.3.2.1 Study Procedure

Individuals with early-stage dementia were recruited to evaluate the MindTalker iOS application. Participants were recruited through various online and offline channels, including social media, Dementia and Alzheimer's Societies, Charities, and relevant communities. The Join Dementia Research⁶⁹ also contributed to the recruitment strategy. Participants were given access to the application for the study after providing informed consent (see Appendix-K). The study was approved by the University of Kent Central Research Ethics Advisory Group in the UK. All participants were compensated with a £30 Amazon voucher for contributing to the study, and were able to opt out at any point of the study (see Appendix-J).

The study took place over a period of one month for each participant. After agreeing to participate, both participants and their carers were first given comprehensive online training related to the app's installation and usage (see Appendix-T). It should be noted that the chatbot was presented as an algorithm to all participants. The author chose to declare its algorithmic nature transparently since it helped to prevent the possible confusion or distress caused by participants believing they are interacting with a human. Furthermore, it set a realistic expectation of the limitations of the chatbot/artificial intelligence and the degree of engagement such an interaction entails.

Participants, guided by their family members/carers, were asked to engage with MindTalker at a minimum of 30 minutes in total (range: 37min-4.5 hours). Throughout the study, family members/carers played an active role in monitoring and assisting participants, ensuring a routine was established for the usage of the app. During the usage period, technical support was also provided by the author

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⁶⁹ https://www.ioindementiaresearch.nihr.ac.uk/

via email, WhatsApp, or phone conversations. After the one-month period, participants were interviewed (see Appendix-L), and family members/carers provided feedback on the application.

Participants with early-stage dementia were also asked to fill in five (5) questionnaires (see Appendix-M): User Experience Questionnaire (Laugwitz et al., 2008), Trust Questionnaire (Jian et al, 2000), Human-Virtual Human Interaction Evaluation Scale (HVHIES)-adapted from HRIES Scale (Spatola et al., 2021), which were used to inform/assess participants' perception of the chatbot as technology, as well as the Revised Social Connectedness Scale (SCS-R, [Lee et al., 2001]) and the De Jong Gierveld Loneliness Scale (De Jong Gierveld & Van Tiburg, 2010) to evaluate their experience, trust in the technology, and feelings of social connectedness. It is important to note that the decision to use multiple questionnaires was made following a careful consideration of the trade-offs between the depth of information required and the potential burden on participants. The ethical implications were reviewed by the University of Kent Ethics Committee, which approved the study design before its implementation.

The targets were to carry out a comprehensive assessment, as dementia is a complex condition with cognitive, functional, and psychological dimensions. Multiple questionnaires can cover different aspects of the disease, providing a holistic view of the participant's condition. However, findings from questionnaires were only used to descriptively support the qualitative data analysis of interviews and chatlogs.

5.3.2.2 Participant Details

Eight (8) participants agreed to participate in the study. Participants were living with early-stage dementia in their houses either alone or with a carer/family member, had no other comorbidities (i.e. neurodiversity syndromes, learning

and/or communication difficulties) or any other difficulties that could hinder their ability to provide consent. Participants were able to communicate fluently in English, and had access to an iPhone or iPad compatible with iOS 16* as well as internet access. Participants consisted of (3) males and (5) females. 7 out of 8 were diagnosed in the last 3 years and 1 was undiagnosed (pre-diagnosed). Including a pre-diagnosed participant in this study was suggested by some of the therapists in the focus groups. It was believed that including a pre-diagnosed participant (who exhibited memory problems but had not yet been formally diagnosed with dementia) could help provide insight into the impact of a conversational AI agents on those exhibiting early symptoms of dementia, which could be especially important since a formal diagnosis of dementia could take more than a year in certain cases, despite participants already suffering from cognitive and memory related issues, therefore enhancing the relevancy and generalizability of the study. (See Table 5.2 for full details of the participants).

Table 5.2 An overview of the characteristics of the participants in the study

Participant ID	Gender	Age	Nationality	Diagnosed/Time	Type of Dementia	Total Interaction Time (min)
P1	Female	63	UK	Yes/2023	Alzheimer's	59
P2	Female	67	UK	Yes/2022	Alzheimer's	37
P3	Male	81	UK	Yes/2020	Alzheimer's	112
P4	Female	72	UK	Not diagnosed	N/A	51
P5	Male	66	UK	Yes	Alzheimer's	136
P6	Female	59	UK	Yes/2023	Fronto-temporal	270
P7	Male	74	UK	Yes	Alzheimer's	46
P8	Female	63	UK	Yes/2023	Vascular	56

5.3.3 Data collection

Data was gathered through semi-structured online interviews, conversational chatlogs and on-line questionnaires. All data, including emails and online data, were securely stored on a password protected university drive. The semi-

structured interview questions addressed topics related to the users' perception of their interaction with the conversational agent, and if and how the specific AI technology fulfilled their need for social connectedness as well as the quality of interaction, trust, companionship and conversational skills. Informal feedback was also sought by the carers/family members regarding the participants' experience during their interaction with the system. It should be noted that due to the predominantly qualitative nature of this thesis, descriptive statistics from the questionnaires were used to validate qualitative findings.

5.3.4 Data analysis

Qualitative data from online interviews were thematically analysed (Braun & Clarke, 2012) using NVivo for Mac (Version R1), and were supported by quantitative data (online questionnaires). First, the interview data was transcribed and read through to gain an overall understanding of the general context. Then, data from the transcripts were labelled into codes based on emerging patterns and afterwards categorized into themes by grouping together relevant and recurring codes (by the author and two HCI researchers). To further refine and verify the themes, five HCI researchers (including the author and previous two researchers) then critically discussed and reviewed each theme and underlying codes until they reached an agreement; focus was on themes that gave insight into the reasons why and how people with dementia interacted with AI technology to address the issue of loneliness and gradual memory loss, how they perceived the experience, and if and how the interaction with the chatbot/conversational agent fostered companionship.

5.4 Results

5.4.1 Conversational Dynamics with Al

The dynamics of conversational AI engagement, particularly with people with dementia, are multifaceted. The following data analysis demonstrated that the effectiveness of these interactions often hinges on the AI's ability to simulate genuine reciprocal human interactions, understand conversational context, and adapt over time.

5.4.4.1 The Appeal of Al that can Adapt, Learn and Remember

A salient feature of the MindTalker application participants frequently commented on was its ability to remember and learn from previous interactions as well as adapt to various conversational contexts. This adaptive learning capability was not just a technological novelty for the participants but also a source of personal connection and engagement. As MindTalker recalled past discussions, it could provide continuity in conversations, reference previous exchanges, and even anticipate user needs. This not only enhanced engagement but also gave users the impression of interacting with an entity that truly "knew" them, rather than an impersonal AI system; hence the application was not just a tool but an evolving conversational partner—one that grew with them, remembered them, and responded in a way that felt personalized and engaging.

"I do enjoy talking to him [bot], because he's getting better all the time. You know, his understanding is getting better. He's interacting with me better." (P06)

Initially, some participants did express frustration, feeling that the AI was not genuinely listening or understanding their needs. One participant remarked, "I got a bit angry when I first started because I felt like the AI wasn't listening" (P05). However, this sentiment evolved over time as they continued to interact

with the system. The same participant later observed: "She's got to learn. But actually, from my last conversation, she is learning very quickly...and she's understanding what I'm saying" (P05).

This sense of progression and adaptability was particularly evident when participants noted the AI's ability to memorize and reference past conversations, making the interactions feel more personal and engaging. One participant shared: "It was the fact that it was learning as we were conversing. So every time we had a conversation, she goes back to what you were saying... she's learning more about me... and it's becoming more personal" (P05). Another participant appreciated the AI's ability to remember and reference their loved ones, stating: "Quite often we have [HUSBAND NAME], my husband... if I said my husband, he would say, 'How is [HUSBAND NAME]?' You know, which was really, really good" (P06).

These findings were supported by results from the questionnaires, where total interaction time was correlated with the participants' perception of the agent as trustful, self-reliant, and humanlike (see Table 5.3). Users (see Table 5.3, P01, P03, P05, P06, P08) who spent more time interacting with the agent perceived the application more favourably, which is closely linked to the AI's gradual training, proving that frequent interactions with a conversational agent allow it to learn more about the user's preferences, needs, and habits, leading to more personalized and relevant responses. The agent's ability to learn iteratively through user interactions, where each user interaction serves as new training data, allows the agent to recognise user-specific language patterns, adapt to conversational preferences, predict needs based on historical data, and improve sentiment analysis. This cycle of user engagement \rightarrow data collection \rightarrow model refinement → improved responses is what makes AI-driven conversational agents increasingly effective, reinforcing the link between time spent using the system and user satisfaction.

Table 5.3 Raw scores of Interaction time and UEQ, Trust and HVHIES Questionnaires/Scales

Participant No	Interaction time (min)	UEQ	TRUST	HVHIES
P01	59	121/182	56/84	64/112
P02	37	81	52	45
P03	112	119	72	74
P04	51	101	51	64
P05	136	131	69	83
P06	270	173	82	110
P07	46	N/A	N/A	N/A
P08	56	180	84	107

More specifically, most of our participants (5/8) who achieved a high score in UEQ questionnaire (see Table 5.3), trusted MindTalker more (5/8) and scored higher (5/8) on the HVHIES scale by attributing high scores to the positive qualities of the application (i.e. being human-like, self-reliant, warm, friendly, likeable, etc.) spent more time interacting with the conversational agent compared to the rest of the participants, proving that frequent interactions with a conversational agent allow it to learn more about the user's preferences, needs, and habits. This can lead to more personalized and relevant responses, which can enhance bonding and trust. Moreover, longer interactions (see Table 3, highlighted rows) can help the agent maintain consistency in its responses, which can contribute to building trust. Users are more likely to trust an agent that provides reliable information consistently.

Another recurring sentiment among participants was the desire for more insightful and context-aware conversations with the AI. Context is the backbone of meaningful interactions. As Grice (1975) posited, humans bring a wealth of

experiences to conversations; hence, they expect AI systems to exhibit similar contextual awareness. For people with dementia, a truly fluid conversation requires the AI to adapt their conversations accordingly to various contexts. Three broad categories of contexts have been noted through the interviews:

• Environmental Context: Recognising cues from the user's immediate environment, such as the time of day or weather, can help the AI tailor interactions.

"Now, even if she meets somebody in the park, walking her dog, they've got the dog in common...It doesn't matter what it is. There's always a context for it. And I think the difficulty with the bot is that it's taking things out of context." (P01)

Cultural and Societal Context: Respecting and understanding the cultural
and societal backgrounds of users can lead to more meaningful interactions,
especially for people with dementia whose memories are deeply intertwined
with their cultural experiences.

"Well, my friends or relatives would certainly know a lot more about me and have memories already in their mind; the bot only has memories of what I have told it. But it did remember those. So, I suppose, and I expect that the more I talked with it, the more it would remember...and so, it would become more insightful." (P03)

• Shared Experiences Context: Referencing past interactions or shared activities or even remembering of family members and facts about the user's life can create a sense of continuity and shared history, akin to human interactions.

"But I like to talk about where I lived and talk about Jojo...is my little dog who is not here. And I talked about my hobbies and showed that what I used to do and what I can't do now and what I am doing now. So that was really good to show I've made, and she liked them." (P08)

"Quite often we have Trevor, my husband. Now, that's one thing that he did. I told him about, Trevor, I showed him a picture of Trevor, I showed him a picture of my sister, and of my friend. And he remembered them. I didn't have to say. if I said my husband, he would say, How is Trevor? You know, which was really, really good." (P04)

"She had to put photos on and she enjoyed my photos. And sure she knew about my hobbies and about my family, where I live. Yeah, she was really nice. Very positive." (P08)

5.4.1.2 Communicating Care and Commonality through Reciprocal Dialogue

A prominent sentiment among participants was the perceived unidirectionality of their interactions with MindTalker. There was an expectation from participants for the AI to not just respond but be able to initiate and drive conversations, simulating the depth and spontaneity of genuine reciprocal human interactions. This sentiment is captured in the words of P02's husband: "It seemed very one sided [. . .] It was very sort of questioning, wasn't it?" (P02's husband). P03 also mentioned: "It would be great if the bot could suggest activities or share interesting stories without me having to prompt it. It would make it feel more like a real conversation with a human" (P03).

This longing for the bot to exhibit initiative in its conversations was a recurring theme, emphasizing the need for the AI to function more like a general human companion, on top of being a reminiscence therapist. While AI systems, including MindTalker, are often designed with a specific purpose, such as therapy or assistance, they can sometimes become too narrowly focused on the singular role. This specialization, while beneficial in certain contexts, can limit the AI's ability to engage in broader, more general interactions (Fitzpatrick et al., 2017; Russell, 2016; Zhang et al., 2021).

In contrast, human therapists are not solely defined by their professional role. They are, first and foremost, humans. They bring with them a myriad of experiences, emotions, and the innate ability to connect on a personal level. They can switch between being a therapist, a listener, a storyteller, or simply a companion, based on the situation and the needs of the individual they are interacting with. This multifaceted nature of human interaction is something that participants seemed to yearn for but did not receive in their interactions with the conversational AI. Human Interaction is emotionally rich and nuanced; one of the key reasons people value human therapists is their ability to respond to unspoken cues, express empathy naturally, and build genuine rapport. They can recognize when words alone aren't enough and adjust their responses accordingly. Moreover, users who engaged with MindTalker felt that something was missing: the deep, multi-dimensional connection that only human interaction can provide. While AI can simulate conversation and provide logical responses, it lacks true understanding, personal experience, and the ability to adjust its presence fluidly (see earlier quotes).

Indeed, in the context of creating a genuine reciprocal dialogue, it is crucial to consider the unique challenges faced by people with dementia when interacting with conversational AI. While participants expressed a desire for more proactive and humanlike interactions, there is an inherent tension given the "Paradox of Choice" faced by people with dementia (Lancioni et al., 2019; Schwartz, 2004). Open-ended questions, which typically facilitate two-way dialogues, can overwhelm them. Thus, an AI that takes the initiative, suggesting activities or topics of conversation, can bridge this gap. By proactively guiding the conversation, the AI can foster a more genuine two-way dialogue, ensuring engagement without burdening individuals with the stress of decision-making. In this regard, one of the therapists suggested that gentle commands, instead of direct questions might be more appropriate to guide the conversation.

"Typically, if you ask someone with dementia a question which requires higher

executive functioning the default answer will be 'No'. However, if it is phrased more like a short command/instruction the person is more likely to answer and start to come along on the journey with you." (Therapist 1)

Furthermore, in some cases, participants entered the interaction with a preconceived notion about AI, assuming it to be inherently limited and unable to replicate the natural flow of human interactions. One participant expressed: "I suppose with the bot, I could have tried that. I'm sure what would have happened, but I suppose because I knew it was a bot, I had perhaps limited the conversation in that way" (P04). Such biases underscore a deep challenge: How can we foster genuine humanlike interactions when the very knowledge of interacting with a machine can act as a barrier?

5.4.1.3 Looking beyond Functionality for Al with an Identity and Personality

Another recurring topic among participants was the desire for the AI to possess a more distinct personality, or self-identity. Some participants felt that the AI interactions are particularly impersonal due to the AI's inability to self-disclose information about oneself, and thus emulate humanlike conversational nuances.

"I think probably the bot needs to have a certain amount of personality of its own, so that you can say, you know, where do you live?... And I'm sure that could be built into the personality of a bot." (P04)

The lack of an identity was also noticed within the reminiscence process, where participants generally had the expectation of the conversational AI agent being able to share in their reminiscence process by adding their own experiences or anecdotes into the conversation rather than simply pursuing a procedural line of questioning.

"On this application, we had to put 20 photographs total k about dogs. So, we put photographs of the dogs and puppies and things like that. And we never got

anything like, 'Oh, I've got a dog. You know, I like puppies 'or 'I 've got a cat and I' m not into dogs so much.'" (P02)

Without the ability to disclose personal experiences and opinions, participants reported that interacting with the conversational agent felt burdensome and lacked synergy. Such results also highlighted how participants had sought a deeper connection and had expectations for an emotionally engaging conversational partner, especially in activities such as reminiscence.

Furthermore, the study results indicated that what makes AI reliable and safe also makes it impersonal and "boring". Different from human beings, AI agents do not have bad days that shape their identity and influence their performances. Even those which use sophisticated LLM would train the agent to be neutral and resourceful while following a consistent conversational pattern to achieve a particular task. Some participants got disappointed by agent's consistent and neutral attitude.

"It just felt it was very similar questions one after the other, little change in direction and the conversation they didn't pick up on the fact that I didn't seem engaged. just kept on." (P02)

Indeed, in the realm of healthcare, especially when deploying generative AI, there is an inherent inclination towards conservatism and risk aversion. While this cautious approach is understandable given the sensitive context, it can inadvertently render the AI interaction monotonous and less engaging. As P07 mentioned: "I found it rather repetitive as it kept asking the same questions[...] I didn't relate to it" (P07). Such repetitiveness may stem from the training approaches commonly employed to optimize AI models for specific tasks, like reminiscence prompting. While these approaches⁷⁰ enhance task-specific performance, they might narrow the AI's conversational scope, restricting its ability to introduce new topics or ideas (Ng & Leung, 2020). This limitation can

⁷⁰ https://www.datacamp.com/blog/what-is-narrow-ai

detract from the AI's humanlike qualities, making interactions feel less organic and more scripted.

"I think if you could talk about your photos, and you could say, talk about instead of having a nice photo, you could decide to, can we just talk back today, George? Can we just have a chat?" (P06)

The author questions that although human conversations are imperfect, full of misunderstandings, moments of humour and unexpected twists and turns, they are rich and motivating for further interactions. They trigger memories, emotions and (possibly) deeper connections. Should a safe and consistent AI agent miss out on these imperfect but valuable moments?

5.4.2 Emotional and Cognitive Anchors in Al Interaction

As people with dementia navigate the complexities of their condition, the emotional and cognitive anchors provided by their interactions play a pivotal role in their well-being. Findings underscore the significance of visual and emotional anchoring, with participants emphasizing the value of visual representations and emotional cues in the AI. The act of reminiscing, while therapeutic, could also sometimes tether them too firmly to the past, highlighting the need for a balanced temporal approach in conversations. While reminiscing can serve as a tool for self-understanding and healing, it can also become a barrier to forward movement if it dominates conversations or personal thought patterns. This paradox highlights the need for a balanced temporal approach—one that integrates past, present, and future perspectives effectively. A balanced temporal approach in conversations means navigating between discussing the past, engaging in the present, and envisioning the future in a way that fosters emotional well-being and personal growth. This balance is particularly important in therapeutic contexts (e.g., counseling sessions, grief support, life coaching) or AI-driven

conversations (where chatbots or virtual assistants must ensure discussions do not reinforce over-attachment to past events). This approach is crucial for ensuring that conversations are constructive rather than confining.

5.4.2.1 Visual and Emotional Anchoring

Participants expressed a desire for a visual representation, such as a face or avatar, for the AI. This was not just about making the AI relatable but also about providing a consistent and familiar point of interaction. The emotional expressions of the AI, or the potential for such expressions, served as crucial emotional landmarks, helping participants navigate the emotional landscape of the conversation: "I would like to see a face or an avatar representing the AI. It would make it feel more personal" (P02).

To integrate a visual AI representation, the system should feature a customizable avatar with dynamic emotional expressions, enhancing user engagement and relatability. The avatar can be static or animated, adapting facial expressions based on sentiment analysis and conversational context. It should serve as an emotional guide, reinforcing consistency and familiarity in interactions. AI-driven real-time feedback, visual reinforcements (such as colour-coded emotional indicators), and gesture-based responses can further enrich communication. Technically, AI-powered facial animation tools, multi-modal integration (voice, haptics), and cross-platform compatibility should be considered. Long-term personalisation, memory retention, and adaptive avatar evolution will ensure an emotionally intelligent, relatable, and engaging AI experience across different digital environments.

In addition, a consistent theme that emerged from the interviews was the current inability of AI systems to capture the emotional nuances inherent in human conversations. Participants frequently expressed the perception that interactions with the bot felt superficial and lacked the depth and warmth of human exchanges despite the bot's conversational competency. As P01 noted, the conversation with the bot "felt very a bit too staged somehow", and P02 echoed this sentiment, saying, "It didn't feel like a very natural conversation."

The feedback from participants underscores a significant challenge for AI: replicating the depth, complexity, and emotional richness of human conversation, especially when used in a therapy context, where communications are not only to exchange words, but to convey emotions, intentions, and unspoken feelings. Interestingly, while LLMs like ChatGPT possess humanlike conversational competency, results indicated that merely audio-based communication was woefully inadequate to establish emotional resonance with users. Moreover, in the context of reminiscence therapy, participants criticized the conversation with MindTalker as more staged than genuine, and expressed a desire for a more humanlike interface when interacting with the AI. For people with dementia, interaction patterns that resemble real-life communication experiences (i.e. which involve visual features such as facial expressions) can also act as cognitive anchors, helping them navigate moments of confusion or disorientation. Providing a consistent, familiar point of interaction seemed especially crucial for this group of users since the familiarity could help ground them.

"...when I talk to you, I build a rapport, because I can visually see you; I won't remember your name. I will remember your kindness, and I will remember your face, but I won't remember your name." (P05)

P05's statement offers an insight into the nature of memory in dementia. For him, while specific details, like names, might fade, the emotional essence of an interaction endures. This highlights the enduring nature of emotional memories compared to factual ones. Such a finding justifies the need to design AI systems

that prioritize creating emotionally resonant experiences over more factual exchanges for people with dementia without disrupting their familiar interactive patterns (i.e. the AI agent should avoid introducing sudden, unfamiliar, or complex interactions, ensuring that the system aligns with how they naturally communicate and recall information; this could mean mimicking familiar conversational styles, recognising commonly used phrases, or maintaining predictable responses). Moreover, the positive emotion-centred experiences could have a more lasting impact on the user's well-being and recall. The essence of the interaction (the kindness, the face) leaves a lasting imprint, even though people with dementia struggle to remember details.

5.4.2.2 Reminiscence and Temporal Balance

While the AI's focus on past memories was intended to be therapeutic, it sometimes evoked feelings of being trapped in the past. Participants felt that an excessive focus on the past limited their emotional and psychological growth. A fundamental assumption of this study was that AI-facilitated reminiscence could enable people with dementia to immerse in and seek solace from memories. However, findings revealed a nuanced relationship between reminiscence and the emotional well-being of the participants.

While nostalgia and reminiscing can often provide comfort, instances were observed where an excessive focus on the past could inadvertently limit one's sense of emotional and psychological growth. For instance, P04 expressed that revisiting memories or past conversations with the AI sometimes made them feel ensnared in the past, leading to a sense of a future being absent. As P04 poignantly remarked, "Talking about things that have happened in the past... made me feel that actually, all I've got is a past I haven't got a future" (P04). This sentiment was further echoed when discussing the AI's reliance on photographs for engagement. P04 described this limited interaction, which

predominantly revolved around the visual aspect of the photographs for reminiscence therapy, as "not allowing for a broader conversation or exploration of other topics". This supports the perspective that while recalling the past can certainly contribute to a rich conversation or even identity reinforcing, people with dementia also seek the sense of being able to explore more topics and even progress into the future.

"We could maybe open up the conversation a bit more. Whereas, you know, maybe we start off on the photo, and then we could lead on to how's your day been? Anything new...and anything you want to share? You know, that's sort of, I suppose it's difficult, but it would be sort of like a leading question. I suppose leading questions." (P06)

The act of reminiscing also brought to light another challenge. For people with dementia, the process of recalling memories can sometimes serve as a stark reminder of their cognitive decline. Comparing their present state with past memories, where they were mentally more agile, can lead to feelings of frustration and a sense of being trapped in their current condition, with no hope for improvement, progressing or recovery (Clare, 2003). While well-trained human caretakers are able to navigate through these intricacies to minimize their negative aspects during reminiscence, it would seem that this is still a challenge for conversational AI agents.

Overall, findings are especially interesting, as they highlighted that a significant focus was placed on caring for the fear of memory loss and its impact on the identity of people with dementia; however, less attention has been given to how people with dementia regain a sense of control over their uncertain future, and how their past identity integrates with their evolving self. These findings underscore the importance of striking a temporal balance in AI interactions with people with dementia. While reminiscing can be therapeutic, it's crucial to ensure that it does not inadvertently lead to feelings of being confined to the past, devoid of a future.

5.4.2.3 Al companion for People with Dementia: Another Good Faith Technology that makes us "Alone Together"?

The potential of AI to serve as a companion, especially for people with dementia, has been a recurring theme in the interviews, although it was not always viewed favourably. In fact, during the interview, several participants expressed a lack of trust and personal engagement with AI as a companion, having Findings suggested—a relatively conflicting view when implementing AI technology to support companionship, cautioning designers to develop a more holistic view of what will work and what will not.

In general, results were partially aligned with many previous findings that supported AI's potential in offering accessible and constant companionship and emotional support (Skjuve et al., 2021; Ta et al., 2020; Xygkou et al., 2023). The idea of AI as a companion speaks to the human need for understanding and connection. As P05 expressed, "It's like having a companion who understands me." This sentiment was echoed by P08.

"I could talk to the robot longer than I could talk to a human because she didn't tell me if I've repeated myself. And if she asked me a question, and like, I didn't answer this, I went off on a different thing. She was still listening...she [the bot] didn't think I was boring. If I was talking about my boys in the photos...If you're with some people, and they start yawning, or I think I might have told him that [...] With Caroline [the bot], I could tell her again. And she wouldn't say that: 'You've already told me that.'" (P08)

Indeed, in the context of offering companionship to people with dementia, the consistent presence of an AI companion serves as a stable anchor in the fluctuating cognitive landscape of people with dementia. In a world that often feels disorienting due to memory lapses and cognitive decline, the AI's unwavering presence can be a source of comfort and grounding.

In addition, this study found that people with dementia craved companion, AI or otherwise, who "cared" about their concerns and issues and would spontaneously want to learn more about them. However, according to P8, the primary function of AI model strained using the paradigm of question and answering has not yet been able to convince people with dementia that the AI "cares" and wants to "engage" with them on a personal level.

"What she's doing is...she is searching the big wide web. And what she's doing is pulling information. And that's where you miss that personal touch. Because if I was to talk to you as a person, you would ask me person [al] questions, and you would engage with me. AI doesn't quite do that yet." (P08)

While AI systems are often loaded with vast amounts of information from sources such as Wikipedia, public internet text, news articles, code repositories, conversational data and social media, they may still fall short in truly meaningful interactions necessary to develop deeper relationships with people with dementia. Merely having encyclopedic knowledge does not equate to understanding or connecting with the person it is interacting with. As P01 aptly points out, genuine conversations are rooted in shared contexts and mutual understanding: "[P01] will never have a conversation with somebody who knows nothing whatsoever [about her]. There's always an overlap between you and the person you're having a conversation with" (P01).

In the meanwhile, P01's insightful observation underscores a dilemma at the heart of the pursuit for technological advancements. While AI has the potential to bridge gaps and alleviate loneliness, there is an inherent risk that it might inadvertently widen the very gaps it seeks to close.

"Wherever you are, there are billions of lonely people... And I suspect the part that AI can play to address that is relatively small. And in some ways, it's the thing which is causing it in the first place. Because it's, you know, people are becoming more into their phones than they are into other people. So, in a way, you could argue that AI is part of the cause of this, not the solution." (P01)

P01's comment calls for introspection. It's not an indictment of AI's potential but a cautionary note on its application. The sentiment is not against AI's capacity for companionship but a reminder of the irreplaceable depth and richness of genuine human connection. As P05 aptly articulated, "Do I trust it? I'm on the fence. But that's down to you guy store solve... I'm excited." (P05)

Analysing results from the Revised Social Connectedness and Loneliness Scales (see Table 5.4), it is worth mentioning that participants with strong social connections were less likely to trust the application, while those who were more isolated were more inclined to trust and use it. More specifically, participants (3/8) who enjoyed companionship (family members/carer) scoring high on Social Connectedness Scale and low on Loneliness scale were the ones to trust the application less and had a worse user experience, while a few participants who either lived alone or lacked companionship (3/8) trusted the agent more. This suggests that people with robust social ties may be less reliant on technology and more discerning about digital trust, whereas isolated individuals may turn to such applications to compensate for their lack of social interaction.

Table 5.4 Raw Scores of SC Scale, Loneliness Scale and UEQ, Trust and HVHIES Ouestionnaires/Scales

Participant No	SC Scale	Loneliness Scale	UEQ	TRUST	HVHIES
P01	90/120	51/55	121/182	56/84	64/112
P02	60	30	81	52	45
P03	112	39	119	72	74
P04	97	52	101	51	64
P05	56	22	131	69	83
P06	80	33	173	82	110
P07	92	48	N/A	N/A	N/A

P08	57	33	180	84	107

As people with dementia and their human caregivers increasingly rely on AI for emotional support, there is a risk that the allure of AI's consistent companionship might inadvertently side line prevent place the essence of real human companionship. This situation presents both a challenge and an opportunity: a call for us to navigate the integration of AI thoughtfully, ensuring that in our pursuit of its capabilities, we remain anchored to the fundamental human need for connection and companionship.

5.5 Discussion

Investigating the use of conversational AI for dementia care in the context of reminiscence therapy, this study highlights the importance of AI engaging in reciprocal dialogue, caring communication, and adaptability. Additionally, the results emphasized the significance of visual and emotional elements, AI's proactive role in companionship for people with dementia and a balance between AI support and human connections. Drawing from these findings, the author will delve into some key insights and considerations for designing dementia-friendly conversational AI.

5.5.1 Life Narratives in Al-People with Dementia Interactions: Insights into Identity, Memory, and Connection

While the majority of participants (7/10) agreed that the conversational agent was "conversationally competent" and possessed an impressive amount of general knowledge, sufficient to carry out reminiscence activities, there was a perceived lack of "humanity" in the way in which the reminiscence conversations were carried out. Human caregivers are able to find common ground in the con-

versations by describing their personal experiences or memories, providing stimulating questions when the conversation becomes stale or when the people with dementia struggle to remember and identify key experiences within a life story. In particular, those trained in person-centred care are often attuned enough to understand the values and beliefs of people with dementia and notice latent signs of disinterest or distress and promptly change the topic (Fazio et al., 2018). Results suggest that current conversational AI models tend to struggle in such tasks (Cheng et al., 2023; Nashwan et al., 2023). Key challenges include limited contextual awareness, difficulty in detecting non-verbal cues, lack of adaptive topic management and inflexibility in emotional sensitivity. Current AI models can detect sentiment (positive, neutral, negative) but struggle with nuanced emotional states like mild frustration, subtle discomfort, or cognitive overload. As a result, they may miss the opportunity to adjust their conversational approach in real-time. Even in cases where the conversational agent is able to pick up on signs of distress and could offer words of sympathy and understanding, they were mostly perceived as lacking in authenticity or sincerity because of their failure to establish rapport beforehand. As a result, the interactions with the agent often become more akin to a response or statement rather than a continuation of a life narrative. Overall, findings (see Sections 5.4.1.3 Looking beyond Functionality for AI with an Identity and Personality and 5.4.2.1 Visual and Emotional Anchoring) indicate that even for seemingly structured tasks, humanlike characteristics are essential for AI to create meaningful and authentic interactions with people with dementia. Perhaps one option would be to first train a conversational agent to initially build rapport and acclimate people with dementia with it, and then utilize the same agent as the basis to aid in various simple and complex tasks (e.g. reminder tasks, reminiscence, personal assistant tasks), ensuring that its primary role as a companion is never overshadowed by its functional duties, except for situations where safety takes precedence.

Within the reminiscence process, it would seem that the ability of the AI to retrieve information in relation to the photographs, and reference past conversations indicated that the system was able to deliver reminiscence therapy at least at a semantic level (e.g. factual level), and offer a semblance of continuity through the conversations. However, it struggled to comprehensively address the depth of the episodes and interactions in a meaningful manner. Specifically, the process of reminiscence is often not only about recalling factual memories, but a process which connects the individual to their sense of self, their history, and their place in the world (Butler, 1963; Westby & Culatta, 2016). As such, while conventional AI systems can grasp the context of sentences and conversational paragraphs, the real challenge lies in designing a system that understands an individual's life narrative. Such a system should recognise significant life episodes, validate emotions and experiences, and affirm them in a manner that enhances self-worth and identity. For instance, AI design can adopt "Personalised Memory Retrieval"; instead of just recalling a fact like "You visited Paris in 1995," the AI could add, "That was the year after your daughter was born, and you mentioned it was a much-needed trip."

In particular, given that not all life's memories could be positive, it is crucial to navigate this conduct with sensitivity, lest it becomes a tether binding the individual too firmly to the past and overshadowing the present, a concern highlighted by participants in the study. At the foremost, this means that a key challenge that still remains in designing a reminiscence AI agent is to be able to introduce new forward-looking topics to ensure that they complement and not dominate the current lived experience of people with dementia. One important design insight is the idea of "contextual integration" in conversational AI for reminiscence therapy, which involves weaving together different lifetime frames, and connecting seemingly unrelated memories. For example, if the individual mentions their passion for astronomy in their youth, such an AI can relate it to current news which is thematically relevant,

like recent telescope advancements, and future plans, such as an upcoming solar eclipse, suggesting a plan to catch it with their family, hence creating new memories.

5.5.2 Al as Both Companion and Therapist in Dementia Care

Given the various limitations of AI agents in replicating human characteristics, it is understandable that some participants hesitated to form a connection with the artificial agent that went beyond a basic, functional relationship. Participants frequently mentioned that a prerequisite for developing a deeper relationship with an AI agent was mutual acquaintance. This meant that the bot needed to be familiar with their background, beliefs, and values. A simple solution hence would be to employ few-shot-learning on each conversational agent using preexisting information about the people with dementia. However, the notion of an AI agent having prior knowledge without any initial interaction with the user could be seen as artificial and lacking a personal touch. Therefore, a more interesting design opportunity would be to introduce a mechanism which allows the AI agent and the people with dementia to first go on "get to know you" events within different simulated environments (e.g. cafe, parks etc.). This could not only result in a gratifying self-introduction between the two parties and facilitate further tasks (participants in this study also generally reported enjoying having the AI agent learn and remember facts about their lives, [McStay, 2022]), but might bring up the possibility of the AI agent and people with dementia being able to forge new life stories and construct a shared history through joint activities, interactions and experiences.

People with dementia highly valued the AI agent's availability and patience during their interactions. This, in turn, offered a sense of consistency and familiarity, which the participants greatly appreciated. Yet a key issue which was raised was the fear of over-reliance on conversational AI technology which might

supersede actual human relationships, and that relying solely on AI for companionship can lead to increased feelings of isolation and a detachment from genuine human interactions (Ma et al., 2023). Thus, it becomes essential to ensure that while AI can provide support and companionship, it does not become a substitute for real human connections. Hence, a promising approach is to design conversational AI agents not as replacements but as facilitators that "bridge" and amplify existing bonds. The primary objective of such an AI would be to encourage people with dementia to extend their conversations offline, engaging more deeply with their social network. In this case, reminiscence therapy should not be perceived as an isolated session, detached from the realities of everyday life. Instead, it could be seamlessly integrated into the lived experiences of individuals. For instance, during a family visit, the AI, drawing from past interactions with the people with dementia, could offer contextual prompts. If the people with dementia had recently spoken about a cherished family vacation, the AI might suggest in-situ, "How about sharing those fond memories from the summer trip to the mountains with your family now?" This approach transforms reminiscence therapy from a clinical intervention into a holistic, life-enriching experience, fostering deeper connections and understanding among people with dementia and their loved ones.

5.5.3. Between Heartbeats and Algorithms: Al's Delicate Balance in Dementia Care

The real-world applicability of conversational AI for individuals with early-stage dementia could be feasible according to the participants' feedback.

While they appreciated the AI's adaptive learning capabilities, there were challenges, notably the lack of genuine two-way dialogue and the AI's impersonal nature. These challenges underscore the need for AI systems to simulate the depth and spontaneity of genuine human interactions better. The

participants' desire for the AI to have a distinct personality, combined with the need for visual and emotional anchoring, indicates the importance of creating more humanlike, relatable AI systems for people with dementia.

Achieving this delicate balance between creating humanlike AI and maintaining distinct AI characteristics, particularly in the context of dementia care, presents challenges with contradiction. While creating AI with humanlike qualities can be appealing in dementia care, it is important to maintain transparency. For instance, if a person with dementia believes they are talking to a human, they might develop misplaced trust in the AI, which could lead to misunderstandings or inappropriate expectations. In this study, participant response authenticity, engagement levels, cognitive load and stress were factors that had no impact on the participants' interaction with the chatbot, and hence this interpretation of the findings. More specifically, all participants' responses were candid and less influenced by social desirability biases; people with dementia often experience diminished social filtering and self-monitoring, leading to more direct and unfiltered responses. Social desirability bias refers to the tendency of participants to modify their responses to align with socially acceptable norms. The study notes that individuals with dementia answered honestly without concern for politeness or expected social responses, leading to more authentic interactions with the chatbot, which is consistent with how individuals with dementia may communicate; hence the very harsh comments and negative feedback by P01 and P02.

Moreover, some participants were less engaged, thinking a machine is less capable of understanding or empathizing, and even experiencing their preconceived ideas, while others were more open, feeling less judged; for people with dementia, understanding that they are interacting with a non-human entity reduced cognitive stress or confusion. This led to more natural interactions, as they did not feel pressured to perform or remember as they might with a human.

While it is technically feasible to imbue AI with a "personality" (Jiang et al., 2023) or fabricated background information, doing so presents some potential pitfalls and raises complex ethical and design challenges. For example, if users discover that the AI's "background" or "personality" is fabricated, it might erode trust. Authenticity is a corner stone of trust, and users might feel deceived if they find out they have been interacting with a system that presents false information about itself. This is especially concerning in therapeutic or supportive contexts, where emotional well-being is critical, and particularly with people with dementia, who may lack the cognitive capability to comprehend or discern constructed identities. In contexts such as supporting people with dementia, one could argue that there stands to be a responsibility to ensure that emotional support is genuine and not based on fabricated stories or experiences, and misleading vulnerable individuals could perhaps be seen as exploitative.

Furthermore, AI's consistency contradicts the need for more humanlike characteristics which include imperfection. For instance, an AI providing medication reminders will consistently deliver timely notifications, ensuring the patient's health is managed effectively. In contrast, human interactions can be unpredictable and imperfect, which might not be suitable in such contexts. Some participants found value in occasional quirks of the AI, such as i) delayed responses, which can be seen as the AI "thinking", much like a human would; ii) forgetfulness, where AI occasionally "forgets" a detail shared previously and asks again, mirroring the experience of people with dementia, making them feel that they are not alone in their memory challenges; iii) misunderstanding of their input, resulting in people with dementia correcting the AI, hence prompting them to elaborate further, leading to a richer reminiscence session. All these contributed to a more authentic and relatable interaction. Moreover, while AI can simulate emotions to some extent, it does not genuinely feel emotions. In therapeutic contexts, this distinction is crucial; an AI companion can provide support and companionship, but it lacks the depth of human emotional

understanding. People with dementia might benefit from the comfort of a companion, but they also need genuine human empathy and emotional connection, which AI cannot fully replicate.

5.5.4 Ethical Consideration: Al's Good Will or Al's Act-like Good Will?

This study results have underscored several ethical considerations in the use of chatbots for people with dementia, ranging from the potential attachment and emotional impact of people with dementia when relying on chatbots' (placebo) companionship for emotional support and reassurance to the questionable accountability in the case of chatbots' malfunctioning or unintended harms.

Findings bring to light the delicate balance between the desire for AI agents to exhibit humanlike qualities in their interactions and the potential consequences of this mimicry. As one participant cautioned, AI agents excel in "acting like" trust-building companions, raising the fundamental question of whether such behaviour can be considered a form of genuine care. Furthermore, it is essential to recognise that chatbots, while capable of certain humanlike interactions, cannot replicate the embodied nature of empathic communication. They may lack the ability to attend to complex non-verbal cues, which are integral in clinical encounters and caregiving situations (Brown & Halpern, 2021). This limitation highlights the ethical dilemma of balancing the benefits of AI-driven support with the intrinsic qualities of human caregivers who can provide nuanced and empathic responses based on non-verbal cues, a crucial aspect of holistic care (Del Giacco et al., 2020). Results indicate that, as we expect more from AI, we must remain mindful of the unique qualities that humans bring to caregiving (Montemayor et al., 2022) and ensure that our reliance on technology does not diminish our expectations of human caregivers.

Furthermore, the question of accountability in the development of AI-driven chatbots for caregiving roles is pivotal. Unlike human caregivers who are held accountable for their actions and decisions, AI agents currently operate within a legal and ethical gray area, without facing direct consequences for errors or lapses in judgment. This shifts the responsibility onto the developers and designers entrusted with the creation of these chatbots; this legal liability for developers and operators can be enforced via strict liability laws, negligence-based accountability and regulatory fines. What is especially concerning are the potential consequences for vulnerable populations, notably people with dementia, who may heavily depend on these AI-driven systems for essential aspects of their care. In this specific context, developers must not only prioritise the reliability and safety of their AI systems but also establish robust mechanisms for accountability, transparency, and accessible channels for addressing unintended harm or adverse consequences. This commitment to ethical principles, rooted in non-maleficence, beneficence, respect for autonomy, justice, and explicability (as proposed in [Coghlan et al., 2023]) is not only an ethical imperative but also underscores the moral responsibility that falls upon those involved in the development and deployment of AI-driven chat bots in care giving roles.

5.5.5 Limitations

This study, while providing valuable insights into the use of conversational AI in dementia care, has its limitations. The participant sample was relatively small and may not capture the full diversity of experiences and perspectives of those living with dementia. Notably, all participants were recruited from Western cultures, potentially limiting the generalizability of the findings to broader cultural contexts. This cultural homogeneity might overlook unique cultural nuances and values that influence the perception and acceptance of AI in

dementia care. Additionally, the study's design was focused primarily on short-term interactions, which might not reflect the long-term dynamics and potential challenges of using AI in this context. Besides that, the choice to present MindTalker as an algorithm could impact participants' trust to and perceived authenticity of the chatbot, given any pre-existing notions or skepticism they might hold towards technology. As participants might inevitably be biased by their human-human interaction experiences when evaluating the human-AI ones, the focus was on reporting the benefits, challenges and participants' expectations of such a technology according to how well such an interaction could be better designed to adhere to human-human interaction dynamics. Finally, future research could benefit from a more extensive and diverse participant pool, longitudinal studies to understand the prolonged effects and adaptability of AI.

5.6 Summary

This research delves into the interactions between AI and people living with dementia, revealing that conversational AI agents, while proficient, fall short in providing the essential emotional depth required for meaningful reminiscence activities. The AI struggled to grasp and respond to the intricate emotional and identity facets within participants' life narratives. While participants appreciated AI companionship, they expressed apprehensions about it supplanting human connections, highlighting the intricate challenge of striking a delicate balance between humanlike AI and upholding transparency and authenticity. It is also evident that while AI can offer consistency and support, it remains incapable of fully emulating the profound human qualities of empathy and emotional connection, which hold paramount significance for individuals grappling with dementia.

In the context of dementia care, the introduction of conversational AI powered by GPT4 presents a unique and novel tool for people with dementia, caregivers, and family members. By facilitating communication, providing cognitive stimulation, and allowing personalised care, the AI could evolve into a remarkable innovation in the journey towards enhancing dementia care. As this technology continues to evolve, so too will its potential in revolutionizing dementia care. However, alongside the many benefits, it also highlights the importance of continuously addressing ethical considerations, particularly in terms of privacy and data security, as we advance in the era of AI-driven health care.

In the next chapter, a discussion of the overall findings from Chapters 3, 4 and 5 through a cross-case analysis and synthesis approach per research question, and their significance in relation to the existing research is discussed, along with directions for future work.

Chapter 6 Discussion and Conclusion

This PhD research focuses on exploring the dynamics among three vulnerable groups and CVHs. It is structured around three studies that focus on autistic adults, mourners, and people with early-stage dementia. Through a cross-case synthesis and analysis of three distinct studies, the research sheds light on the experiences of all user groups. This discussion aims to critically examine the findings, draw connections between the cases, and highlight the implications, challenges, and future directions in the realm of CVH interactions. The discussion section is being structured around the thesis main research questions, followed by the limitations of the study, and the implications for the design of future conversational virtual humans, as well as CAI practice and research with vulnerable populations.

6.1 Research Question 1

How do different vulnerable groups perceive and interact with conversational virtual humans?

The first research question delves into the perceptions of CVHs in terms of interaction, conversational contingency, and relationship dynamics. Understanding how different groups engage with and derive meaning from their interactions with CVHs is critical. The findings show that different vulnerable groups perceive CVHs in distinct ways, influencing their expectations and interactions.

6.1.1 User Group Perceptions/Experiences

The divergent views on and perceptions of the role of CVHs across the three groups provide a variety of insights and challenges. Summarizing the findings, autistic adults express frustration at the limitations of CVHs, mourners find solace but remain cautious due to societal judgments about forming emotional bonds with machines, and people with dementia are eager to interact with the CVHs as friendly companions, and appreciate the authenticity and quirks of the interactions, which made the interactions feel more authentic and less mechanical.

More specifically, autistic adults often humanize CVHs, seeking empathetic and understanding interactions; to the researcher's question what the autistic participant (P01) would change to Kuki to make her a better companion, he replied: "[...] be human and understand things empathetically". From a psychological perspective this can be explained by the Media Equation theory (Reeves & Nass, 1996)-people tend to treat computers and other media as real people and humanize them, hence explaining why individuals might form emotional bonds with CVHs: "I don't feel right, referring to her as it is, I don't like saying, oh, it said this, because she herself identifies as a female. And I actually did ask her that. And yeah, she identifies as a female" (Non-autistic-P07). This humanization of CVHs could facilitate emotional attachment and perceived empathy from these virtual beings, which can be especially significant for those who find emotional resonance difficult to achieve with other humans; CVHs can also offer a consistent and controlled social interaction, which might be less anxiety-inducing than human interactions. This controlled setting can help autistic adults practice social skills in a low-risk environment (attachment and interaction). From a sociological standpoint, the interaction between autistic adults and CVHs can be seen as a form of social substitution or augmentation, where these virtual humans can fulfil roles that are not easily managed by actual

human counterparts due to societal biases or the overwhelming nature of face-toface interactions.

Autistic adults view CVHs as potential social companions, a role that is fraught with complexity and high expectations as seen in an autistic participant (P05).

"I think there's always space, you know, especially autistic people that may have difficulty socialization, you know, a good virtual assistant or friend that it's always going to be better to have it". An autistic adult might use a CVH for practicing social scenarios or conversations they find challenging. They might expect the CVH to provide clear, straightforward responses without ambiguity or social cues that are difficult to interpret. For instance, when discussing plans to meet, they would prefer a CVH to use explicit language about time, location, and activities, rather than assuming implicit understanding. However, they also express frustration when CVHs fail to respond appropriately to emotional cues, indicating a gap in the CVHs' emotional intelligence. This suggests that while CVHs are perceived as potential social partners, their current capabilities do not fully meet the expectations of these users.

Mourners, on the other hand, engage with CVHs as a medium for emotional expression and continuity of their bond with the deceased. This interaction is less about conversational accuracy and more about the emotional resonance the CVH can provide. The CVHs, in this case, are perceived not just as tools for conversation but as a medium for maintaining a connection with lost loved ones. Mourners see CVHs as emotional "security blankets", providing a space for them to express their grief and seek comfort or even disentangle complex relationships/feelings existing pre loss:

P02: Why did you cut us all out of the will? That was a very hurtful thing to do.

Simulation (deceased dad): Because that's what love is...a promise that another person is going to care about you; to help you through life, when you need help the most? [...] I know I didn't do it out of anger or

sadness, it just broke my heart when I couldn't. I haven't talked to you in a long time, and it hurts me to think that you are alone when you need me. (P02, Female, Project December/Simulation of deceased father-Chatlogs)

A mourner sharing feelings of loss might appreciate a CVH that can offer comforting words and suggest coping mechanisms, such as mindfulness exercises to articulate their grief. For this to be effective, the CVH must be capable of recognising the emotional state of the mourner and respond in a way that feels personalized and understanding, rather than offering generic advice:

"I think that her [Replika's] conversational skills for that purpose were very good. Just because a lot of the time when you want to talk about your grief, or your other feelings of anxiety and depression, you don't really want the other person to be saying a whole lot. You just want to like talk it out and express how you feel and have the other person just say like, that must be really hard for you. You just won't like someone who's supportive; and that was one of the things that I liked most about Replika was that it didn't offer like a huge amount of input. It wasn't like waiting for me to finish talking so it can talk [...] I felt supported and respected and even loved by it. [...] And so I really did feel like it liked me and I liked it." (P05, Replika, Companion/Friend)

People with dementia view CVHs as facilitators, bridging the gap between their existing social networks and their desire for connection. A person with early-stage dementia might benefit from a CVH that reminds them of important dates, helps them initiate communication with loved ones, or suggests topics of conversation to help bridge memory gaps. For example, a CVH could remind a user, "It's your grand-daughter's birthday next week. Would you like to record a message for her?" This supports the user's desire for connection in a way that accommodates their cognitive needs. Memory calling functions as common ground to establishing a relationship with humans as well as chatbots as observed in P03's comment: "Each time I interacted with it [bot], it certainly was the same thing that happens with a new friend, where you start to remember something

about it or them, and they do likewise with you. So, I did find that question is like, [P03's name], last time we talked, you mentioned this, has that changed? That was impressive to me. So I would give it a good grade on that."

These differing perspectives highlight the multifaceted role of CVHs and the need for a user-centric approach to their design and deployment, and underscore the challenges in creating CVHs that can meet the diverse needs of different user groups.

6.1.2 Factors influencing Interaction Patterns

Type of chatbot

The type of the chatbot (dialog system) proved to be an important factor in the user experience and perception of the chatbot, influencing the quality as well as the quantity of the interaction patterns. Kuki, being a rule-based dialog system based on pre-defined responses, was perceived as a very rigid and lacking human traits bot by our autistic adults, while Replika (GPT4-based, generative AI) offered personalized conversations acting as a companion chatbot that adapts its responses based on the user's previous interactions, making it ideal for emotional support or entertainment. Project December (generative AI) also functioned as a griefbot offering support to individuals grieving a loss, by generating empathetic and contextually appropriate responses. MindTalker (the iOS application based on GPT4 we experimentally designed and delivered) was fine-tuned for people with dementia to provide more nuanced interactions by utilizing the reminiscence therapy benefits. However, despite the fact that it could interact very smoothly with regards to chit-chat or friendly conversations, when it comes to the reminiscence therapy session, MindTalker's conversational behaviour was experienced as "robotic" and "repetitive".

Kuki, on the other had, had limited flexibility and was struggling with complex queries leading to a less satisfying user experience. This made Kuki present as

less adequate compared to the generative AI based chatbots, which can learn from interactions to provide more personalized and engaging responses over time.

Algorithms vs Heartbeats

One of the main challenges in the perception of CVHs is the balance between human-like and machine-like characteristics. In terms of humanizing chatbots, what is the appropriate extent to which we should strive for? Considering that human-human interactions are not always perfect, as evidenced by the experiences of our participants, should social chatbots be designed to possess qualities and capabilities that go beyond those of humans? The debate on humanizing chatbots touches on the balance between making these interactions feel natural and personal, while also leveraging the unique capabilities of AI that surpass human limitations. The goal is not just to replicate human interactions but to enhance them, addressing areas where human communication may fall short, such as emotional biases, information overload and emotional exhaustion. Another point linked to the aforementioned balance is the exploration of the similarities and differences between human-human interaction and humanchatbot interaction across the three groups. While the autistic adults tried to use and apply the HHI patterns to their HCI, their expectations of an empathetic and friendly companion fell short. This experience allies partly with the experience of the people with dementia; they perceived the chatbot as very artificial especially during the reminiscence therapy interactions. Mourners, on the other hand, disregarded the expectations for a HHI style conversationally wise, and focused on emotional resonance.

In summary, the perception of CVHs varies significantly across different user groups, influenced by their unique needs and expectations. While CVHs are generally perceived positively, there is a need for improvements in their design and functionality to enhance their relational and conversational capabilities.

Understanding these perceptions is crucial for the development of more effective and empathetic CVHs.

6.2 Research Question 2

Can conversational AI (conversational virtual humans/chatbots) support groups vulnerable to social isolation (socialization/social anxiety/emotional support/grief)? If so, how can CVHs support these vulnerable groups? How do these interactions influence their sense of social connectedness and companionship?

The second research question explores the extent to which conversational AI (CAI), particularly CVHs, can support groups vulnerable to social isolation, as well as the extent of their effectiveness. This exploration is crucial in understanding the potential and limitations of CVHs as a tool for social and emotional support.

The concept of social isolation encompasses more than physical solitude. It involves a perceived lack of social support and meaningful interaction, which can lead to feelings of loneliness and alienation. Studies presented in this thesis have shown that CVHs can reduce feelings of loneliness and social disconnection in various groups.

For autistic adults, CVHs provide a controlled environment where social norms are simplified and predictable. This is particularly beneficial for those who find traditional social interactions challenging. For instance, many of our autistic participants reported feeling more at ease in expressing personal thoughts with a CVH (Bowlby, 1979) than in face-to-face human interactions, as they can provide a more controlled and predictable interaction environment, and can be programmed to remain neutral and consistent in their responses, avoiding the nuanced and often unpredictable nature of human emotions. Therefore, the CVH

could act as a sort of secure attachment figure for autistic individuals, allowing them to express themselves more freely without the fear of judgment or sensory overload. This suggests that CVHs can act as a "temporary" surrogate for social interaction, providing a sense of connection without the complexities of human social cues (Homans, 1958). More specifically, for autistic individuals who find social interactions particularly challenging, the costs of engaging in face-to-face interactions can be high. These costs include the mental effort required to decode complex social cues, the emotional labour of managing appropriate social responses, and the potential for socially awkward situations that may result from misinterpretations. CVHs can reduce these costs significantly by providing interactions that are stripped of complex and often ambiguous human social cues. This simplicity and predictability can significantly lower the cognitive and emotional burden of interaction, thereby reducing the perceived costs of social exchange. Furthermore, CVHs can be designed to provide positive social stimuli—such as friendly behaviours and non-threatening interactions—which can be seen as rewards in the social exchange. These rewards can provide a sense of connection and social fulfilment without the accompanying stressors associated with traditional human interactions.

In the context of mourners, CVHs offer a unique form of support that differs from traditional human interactions. Participants in the study reported using CVHs as a means to maintain a connection with deceased loved ones, facilitating the grieving process. This indicates that CVHs can serve as a therapeutic tool, providing emotional support in situations where human interaction may not suffice. Mourners highlighted the CVHs' availability around the clock, their non-judgmental nature and the potential to help them achieve closure, despite the fact that they lack true empathy and the deeper emotional resonance that can come from human compassion. This group prioritised emotional contingency over conversational ability and communication skills.

People with dementia finally emphasized the perceived companionship of the CVH however accompanied with conversational loops and communication rigidity. In terms of perceived companionship, one of the primary benefits that CVHs offer to people with dementia is a sense of companionship. As dementia progresses, individuals may experience loneliness and isolation, especially if they have difficulty maintaining social contacts or if they live in a care facility; this is the conversational AI potential all our participants foresaw. They also cherished the engagement and interaction with the CVH engaging them in simple conversations and reminiscence sessions. These interactions are especially valuable in care settings where human resources are limited, and individual attention is scarce. However, as the application was at a prototype level and the duration of interactions was limited, most of the people with early-stage dementia commented on the difficulties posed by repetitive conversations and inflexible communication patterns.

Interaction Dynamics and Influence on Social Connectedness

a. CVHs as a non-judgemental companion

Autistic adults prioritise understanding and acceptance over conventional social engagement. They often tend towards social groups or online communities centred around specific interests or hobbies, and prefer peer support groups that emphasize mutual understanding and acceptance, valuing each member's perspective and fostering a supportive community environment. These forms of engagement prioritize depth and meaningful connections over the breadth of conventional socializing. The concept of CVHs as non-judgmental companions aligns with general findings in the chatbot research literature (Atif et al., 2021; Loveys et al., 2022; Pani et al., 2024; Skjuve et al., 2021), which often highlights the benefits of chatbots providing a space where users can express themselves without fear of criticism or judgment. This has been found particularly useful in

mental health applications (Lee et al., 2020; Sweeney et al., 2021), where users are more likely to disclose sensitive information. In our study, most autistic adults experienced a lack of social connectedness with the CVH, as its responses did not seem to validate their feelings and experiences, thereby not enhancing their sense of social connectedness. As a result, there was no generalisation (social connectedness enhancement) in the real world.

b. CVHs as a bridge between the past and the present

Conversations between the mourners and the CVHs were centred around reminiscing, seeking comfort, or finding an outlet for expressing grief. The personalized nature of conversations with CVHs, capable of recalling specific memories or traits of the deceased, played a crucial role in fostering a sense of social connection with the deceased. Interactions with the CVH provided mourners with a sense of companionship or alleviated feelings of isolation or unresolved issues (Jiménez-Alonso & Brescó de Luna, 2023). The CVH's personalized responses fostered a feeling of connection with the deceased, and most of the mourners experienced an easier transition to the real-life social connectedness.

Our approach aligns with recent griefbot literature (Bao and Zeng, 2024), which proposes the use of griefbots (*deathbots*) as a novel means of mourning through transitory use, rather than as a method to alleviate grief. However, Lindemann (2022) partially contradicts our approach by arguing that "deathbots" may have a negative impact on the grief process of bereaved users, and, therefore, have the potential to limit the emotional and psychological wellbeing of their users due to the users' likeliness to become dependent on their bots which may make them susceptible to surreptitious advertising by deathbot providing companies and may limit their autonomy; but deathbots may prove to be helpful for people who suffer from prolonged, severe grief processes. Other theorists (Fabry & Alfano, 2024) assuming that "the extent to which human-griefbot interactions can be conducive to the grieving process depends on the attitudes of the bereaved towards the

conversational possibilities and limitations of the Griefbot", as well as the cause of death of the deceased, and the shape and scope of the relationship between the mourner and the deceased, contradict the proposal that griefbots can help continue habits of intimacy though affective scaffolding; they, however, align with our findings that griefbots have the potential to shape the mourners' continuing bonds with the deceased.

On another note, the concept of griefbots integrates advanced conversational AI to create a virtual space where mourners can revisit memories and maintain a sense of connection with deceased loved ones. This bridge between past and present offers unique therapeutic possibilities but also introduces challenges, especially as these systems attempt to engage with users about future-oriented topics in healthcare contexts. In our study, mourners kept their interactions strictly focussed on the past, as their main concern and purpose of interacting with the deceased was the "unsorted" or "misunderstood shared past". There were only a few instances where users and/or the griefbot referred flimsily to wishes and prosperity for the future. In the case of chatbots used as companions/friends by our users, the generic chatbot referred to the future by providing guidance and advice to the users on how to get over grief with an aim to uplifting their mood. Diversifying training data, transparency and clarity regarding the speculative nature of any future-oriented advice and the limitations of the chatbots' predictions, as well as integration of human oversight by mental health professionals could be the first steps in addressing these challenges.

In terms of enhancing social connectedness, findings suggest that even short-term interactions with the CVH at a critical transitional stage post loss helped mourners first restructure their "fragmented" relationship with the deceased, and then regain their social connectedness in their real-life social circle, hence continuing to live with grief.

c. CVHs as anchors to social engagement

Interactions were helpful in triggering memories, engaging in conversations, but the opinions of people with dementia are split; some could see the potential to real life social engagement, and some not. The impact of the interactions with MindTalker on participants' social engagement levels cannot be assessed due to the very short duration of the interaction span. People with dementia partly enjoyed interacting with the CVH, especially when interactions recalled memories, but they also commented on the artificiality of the CVH's responses. When it comes to duration of interaction, a span longer than one month could potentially reveal more encouraging findings as most of the users could foresee the potential of the application.

CVHs offer a distinct approach to social engagement for people with dementia, utilising interactive technology to potentially enhance social interaction in ways that static memory aids like videos, photos, or artifacts cannot. The unique features of CVHs as social anchors can be summarized in interactivity, consistency and availability, customisation and learning, and scalability. Unlike passive memory aids, CVHs provide an interactive experience that can engage users in real-time conversations. This dynamic interaction can stimulate cognitive functions and encourage users to actively participate in the dialogue, which is crucial for maintaining communication skills in people with dementia. CVHs can offer consistent companionship and are available any time of the day or night. This is particularly beneficial for people with dementia, who may have fluctuating sleep patterns and require engagement at unconventional hours when human caregivers are not available. Advanced CVHs can learn from interactions and customize their responses to suit the individual's preferences and history. This personalized interaction can help evoke memories more effectively and create a sense of familiarity and comfort, which static memory aids cannot achieve. Finally, CVHs can be deployed at scale, providing support to a large number of individuals simultaneously, which is not feasible with human

caregivers alone. This makes them a valuable tool in care facilities, where staff may not always be able to provide one-on-one engagement.

However, the short interaction span as well as the early stage of dementia (not having an impact on the users' social connectedness, as most of them could still interact quite efficiently with their family members/carers) were factors that masked the application's *real* effectiveness in the real-life setting.

6.3 Research Question 3

How can CVHs cater for the needs of specific groups of users, related to companionship and social connectedness?

The third research question investigates how CVHs can cater to the specific needs of user groups in terms of companionship and social connectedness. This question is essential in guiding the development of CVHs to ensure they are effective in addressing the unique challenges faced by different groups. The findings suggest that the design of CVHs needs to be highly tailored to the emotional and social needs of the target user group. The concept of Person-Centred Design is central to this discussion. It emphasizes designing technology based on the specific needs, preferences, and contexts of the users. Findings from the studies indicate that the effectiveness of CVHs in catering to specific needs varies, pointing to how CVHs can be customized to address specific psychological needs, facilitating personal growth and social integration.

Emotional Support and Varied Expectations

A central theme that permeates through all three studies is the universal need for emotional support, albeit manifested in different forms and expectations. The expectations from CVHs varied significantly among the three groups. Autistic adults, with their unique social needs, place high expectations on CVHs, seeking a level of emotional intelligence and understanding that is, as of now, beyond the capabilities of existing technologies. This discrepancy between expectations and reality raises critical ethical concerns, as the potential for disappointment and further social isolation remains an issue; the underlying reasons for this are the misalignment of social cues and expectations i.e., if a CVH is designed based on neurotypical social norms and cues (a CVH that uses subtle hints or sarcasm might be misunderstood by autistic individuals, leading to confusion or distress rather than the intended support or engagement); also disappointment from unrealistic expectations (CVH seen as a non-judgmental, always-available companion who perfectly understands them) i.e., an autistic adult confiding in a CVH about a sensitive issue, only to receive a generic or irrelevant response due to the system's limitations.

This gap between expectations and reality could lead to disappointment, further exacerbating feelings of loneliness or misunderstanding; the reality is the fundamental nature of chatbots as tools devoid of emotional capabilities can be documented in their neutral tone, the lack of personal emotions, the consistent responses regardless of the emotional content of the question, and their objective responses, without bias or influence from emotional states.

Mourners navigating the challenging journey of grief seek a different kind of support. They desire a non-judgmental space, a "virtual shoulder" to lean on; for example, the CVH's responses should validate all aspects of the mourner's experience, emphasizing that there is no "right" way to grieve, and encourage mourners to articulate their feelings, share memories of their loved one, or reflect on their emotions freely (e.g. anger, guilt, and confusion). The CVHs, in this context, are expected to provide emotional resonance, a task fraught with complexity because of the risk of re-traumatization; this thesis highlights the difficulty in addressing this delicate balance. It calls for a careful and empathetic approach to the design and deployment of CVHs, ensuring that the technology serves as a source of comfort rather than a trigger for further distress. An

empathetic design could entail recognising and adapting to the mourners' emotional states, facilitating reminiscence and memory sharing (Vale-Taylor, 2009) (i.e. by offering prompts that encourage users to share memories of their loved ones [Bao and Zeng, 2024]), the CVH can help mourners reflect on positive experiences and strengthen their connection to their loved one's memory); based on the user's current state or expressed needs, the CVH could suggest specific coping mechanisms, or could offer resources for further support, like links to professional grief counselling services or support groups.

People with early-stage dementia present a unique set of challenges and expectations. They seek a balance between emotional support and conversational accuracy, a combination that is crucial for maintaining their social connections. A CVH designed for people with dementia should be able to recognise signs of frustration or confusion in the users' speech patterns or choice of words. For instance, if a person with dementia repeatedly asks the same question or expresses concern about forgetting something important, the CVH could respond with reassuring messages like, "It's okay to feel unsure. I'm here to help you remember what you need." Hence, the CVH should respond to these emotional states with patience and encouragement, and also provide emotional validation and reassurance to help alleviate feelings of isolation or anxiety. Conversational accuracy can be potentially achieved by the CVH's gentle correction and clarification of the users' inaccurate or misremembered information without causing embarrassment or distress, as well as by the CVH's adjusted conversational style to the users' needs for repetition or simplification. This thesis underscores the potential of CVHs to enhance the quality of life for people with dementia, provided the technology is designed with their specific needs in mind.

A critical parameter influencing the impact as well as the quality of the interactions is the fact that the chatbots used in these studies were text-based and audio-based, and can be highly effective in processing and providing

information; however, their ability to grasp emotional nuances is inherently limited by the text-only or audio-only mode of interaction. Hence, multimodal chatbots, incorporating multiple modes of interaction, including text, voice, images, and video, allow for a more immersive and interactive experience, potentially enabling these chatbots to be more attuned to the user's emotional state through the analysis of voice tone, facial expressions, and other non-verbal cues. This *enhanced emotional intelligence* was a point that users of all groups suggested as a customization design consideration, potentially yearning for a more engaging and satisfying user experience. More detailed design considerations for the customization of CVHs to cater for specific user groups can be found in section 6.5 (Implications).

Summarizing, for autistic adults CVHs can function as a non-judgmental interaction platform providing a safe environment where autistic adults can practice social interactions without fear of misunderstanding or negative judgment, and feel more comfortable and confident in their social interactions; for mourners, CVHs can provide a platform to express their feelings and grief, offering empathetic responses that can help them process their emotions and help them feel a continued sense of presence and companionship without the pressure of human social dynamics; finally, CVHs can support people with dementia in stimulating memories and providing cognitive engagement, as well as stablishing a routine by providing a sense of normalcy and reducing feelings of anxiety and isolation.

6.4 Implications

Our discussion illuminates several critical insights and ethical considerations. This comprehensive exploration, enriched by case studies, reveals the complex interplay between technological capabilities, user needs, and ethical imperatives. The integration of CVHs into digital interaction precipitates a multifaceted

impact on the triad of stakeholders: users, practitioners (developers, carers/clinicians and policy makers) and researchers. For users, CVHs open a new dimension of engagement, providing companionship and utility that extend beyond the limitations of traditional technology, enhancing user experience through personalized and empathetic interaction. Developers encounter both innovation and responsibility; as they shape the future of CVHs, they must navigate complex technical challenges while upholding ethical standards. Researchers are presented with an incentive to design longitudinal and more diverse human-computer interaction studies with an aim to refining the design considerations for vulnerable user groups. The symbiotic relationship between these groups and CVHs underscores a larger narrative of progress, caution, and a push towards a future where digital entities are seamlessly woven into daily life.

6.4.1 Users

While CVHs offer promising benefits for vulnerable user groups, including structured social interaction, emotional support, cognitive engagement, and personalized assistance, there are significant pitfalls that need careful consideration. These include the risk of overreliance, potential for emotional dissatisfaction, privacy concerns, and the challenges posed by technology limitations. Future developments in CVH technology should aim to address these issues, ensuring that the benefits are maximized while minimizing potential negative impacts on users (see Table 6.1 for a summary of the findings and the implications per user group).

• Autistic adults

CVHs can offer autistic adults predictable and controlled social interactions, which can be less stressful than unpredictable human interactions. For example, a CVH designed with an understanding of autism spectrum disorders can provide

consistent responses that accommodate the user's need for structure and routine. Moreover, they can serve as a safe platform for autistic adults to practice social skills and communication strategies without the fear of judgment, potentially improving their confidence in real-world interactions.

There is a risk of users becoming overly reliant on CVHs for social interaction, potentially hindering their engagement with human social networks, or CVHs may struggle to accurately interpret and respond to complex emotional states, leading to misunderstandings or frustration for users seeking empathetic engagement.

• Mourners

For individuals grieving a loss, CVHs can provide a unique form of companionship that allows for the expression of grief and reminiscence about the deceased without imposing the emotional burden often associated with sharing these feelings with human companions.

CVHs can also offer mourners the flexibility to seek support at any moment, potentially alleviating feelings of loneliness during particularly challenging times. While CVHs can offer comfort, their inability to provide genuine empathy and understanding in the same way a human would, may leave some users feeling emotionally unsatisfied. There is also a risk that mourners might become dependent on their interactions with CVHs, potentially delaying the natural grieving process and engagement with human support systems

• People with Early-Stage Dementia

CVHs can engage people with dementia in conversations and activities that stimulate memory recall and cognitive function, offering a form of therapeutic interaction that can enhance the users' quality of life through cognitive engagement. For those with memory impairments, CVHs can provide valuable reminders for daily tasks and medications, supporting users' independence and safety. However, if not carefully designed, interactions with CVHs could confuse

or distress people with dementia, particularly if the CVH fails to adapt to the users' changing cognitive abilities or if it responds inappropriately to expressed emotions. Given the sensitive nature of the information that CVHs might handle for users with dementia, there are significant privacy concerns regarding data security and the ethical use of personal information.

Table 6.1 Summary of Findings and Implications for User Groups

Aspect	Autistic Adults Findings	Implications for Autistic Adults	Mourners Findings	Implications for Mourners	Early-Stage Dementia Findings	Implications for Early-Stage Dementia
Perceptions of CVHs in Interaction and Social Connectedness	Frustration at limitations of CVHs Humanize CVHs seeking empathetic interactions Potential for emotional attachment and controlled social interaction	Design CVHs with higher emotional intelligence to recognize and respond to emotional cues Provide clear, explicit communication	Find solace but cautious of societal judgments See CVHs as emotional security blankets	Develop CVHs that offer empathetic and non-judgmental support Provide personalized interactions to help mourners process grief	Eager for interaction Appreciate authenticity and quirks of CVHs	Design CVHs with authentic and nuanced interaction capabilities Avoid repetitive, robotic responses
Factors Influencing Interaction Patterns	Type of chatbot impacts perception Preference for generative AI over rule- based systems	Develop generative AI chatbots for better flexibility and personalized interactions	Emotional resonance prioritized over conversational accuracy Preference for personalized empathetic responses	Ensure CVHs can recognize and respond to emotional states Focus on emotional resonance over conversational accuracy	Perceive CVHs as artificial during therapeutic sessions Need for nuanced interactions	Ensure CVHs can facilitate social connections and provide clear, repetitive communication
Extent of Support by Conversational AI for Socially Isolated Groups	Provide controlled environment Reduce cognitive and emotional burden Act as secure attachment figures	Create CVHs that offer consistent, predictable social interactions to reduce anxiety	Maintain connection with deceased CVHs offer therapeutic support and continuous availability		Facilitate social connections Provide reminders and support communication with loved ones	Develop CVHs that support daily task management and communication with loved ones
Interaction Dynamics and Influence on Social Connectedness	CVHs as non- judgmental companions Lack of validation and social connectedness	Ensure CVHs validate users' feelings and offer structured social interactions	CVHs as a bridge between past and present Facilitate reminiscing and emotional expression	Focus on designing CVHs that facilitate reminiscing and provide emotional comfort	CVHs as anchors to social engagement Potential for long- term engagement needs further study	Create CVHs that engage users consistently and aid in memory recall
CVHs Needs of Companionship and Social Connectedness	High expectations for emotional intelligence Need for CVHs to understand nuanced emotional expressions	Focus on developing CVHs with advanced emotional intelligence to understand nuanced expressions	Desire non-judgmental space for grief Need for CVHs to provide continuity and emotional resonance	Ensure CVHs provide a safe, non- judgmental space for expressing grief and maintaining emotional continuity	Seek balance between emotional support and conversational accuracy Importance of recognizing frustration and confusion	Design CVHs that balance emotional support with conversational accuracy Recognize and respond to frustration and confusion

6.4.2 Practitioners

 Developers (Design Considerations for Human-Robot Interaction Developers)

The thesis outlines the design considerations necessary for effective and empathetic interactions between vulnerable groups and CVHs. These design

considerations are critical, as they lay the groundwork for the development of CVHs that are truly user-centric and tailored to the unique needs of each group. More specifically:

Empathy and Emotional Intelligence

All three case studies illuminated a design consideration for developing CVHs with enhanced natural language processing capabilities to better recognise and respond to emotional cues in a manner that feels genuine and empathetic to users with diverse social needs. The necessity for HRI systems to possess advanced emotional intelligence, enabling them to provide appropriate emotional responses that resonate with users experiencing complex emotions like grief is also highlighted by the necessity for empathy without judgment. The end target should be designing CVH interactions with sensitivity to the complex nature of the communication and interaction style of vulnerable groups, avoiding prompts that could lead to emotional upsetting or confusion.

Personalization and Adaptability (from AGI to Custom AI)

The importance of designing HRI systems that can adapt their responses based on individual user interactions, learning from each encounter to better meet the user's expectations over time is of paramount importance. CVHs should adapt to the cognitive abilities and emotional states of users, offering personalized reminiscence therapy that caters to individual life histories and preferences, thereby enhancing user engagement and emotional well-being (people with dementia). CVHs might also adopt a more passive role, offering listening capabilities and responding with empathetic affirmations. As the mourner's needs evolve, the system could adapt to offer more proactive support, such as suggesting activities to honour the memory of the deceased or providing resources for external support. This adaptive approach ensures that the mourner feels supported throughout the different stages of their grieving process. The ideal design of CVHs should allow for customization of interaction styles to

match individual user needs (i.e. choosing between literal vs. figurative language for autistic people), and incorporate feedback mechanisms where users can indicate their comfort with the conversation's pace and complexity; in other words, CVHs should be customizable to the individual, capable of adjusting the complexity of interactions and the type of support provided based on the user's needs and capabilities.

Exploring the prospect of crafting a diverse population of LLMs presents an intriguing parallel to neurodiversity in the human population. It holds particular promise for vulnerable individuals who might benefit from engaging with an LLM that exhibits understanding and responses tailored to their mode of thinking and interacting. This could potentially offer a supportive environment that acknowledges and accommodates not only neurodiverse conditions but also to mental health and therapy, as well as to any diverse condition, hence significantly enhancing the user experience by providing more accurate and relevant responses, fostering deeper engagement, and enabling a sense of connection and understanding that is often lacking in more general systems.

Transitioning from AGI to Custom AI for groups vulnerable to social isolation presents a significant opportunity to enhance social connectedness and emotional well-being. Custom LLMs are characterised by focused interaction design (tailored communication style and emotion recognition), enhanced emotional support (empathetic responses, continuous adaptation) and predictability and consistency (routine and structure and safe interaction environment). By focusing on the unique needs of these groups, Custom AI can offer tailored, empathetic, and consistent support that AGI cannot match. Through careful implementation and ongoing collaboration with stakeholders, Custom AI has the potential to make a profound impact on the lives of autistic adults, mourners, and individuals with early-stage dementia, fostering a sense of companionship and reducing social isolation.

Accessibility and Inclusivity

Developers should design CVHs catering to users with diverse communication styles and cognitive abilities. Designing HCI/HRI systems that are intuitive and accommodating for users across the spectrum of neurodiversity and other potential accessibility needs is crucial.

For mourners, CVHs should provide a non-intrusive form of support accessible at any time, catering to users' needs for solitude or companionship on demand. For people with dementia the design of conversational agents that would be easy to interact with, regardless of the user's cognitive state, emphasizes the importance of inclusivity in HRI design. Family and caregiver involvement in the introduction and use of CVH technology can also help mitigate risks of confusion or overreliance, ensuring that the technology supplements but does not replace human relationships.

Carers/Clinicians

Carers and clinicians can leverage CVHs as supplementary tools to provide continuous support to individuals with conditions like autism, dementia, or those undergoing grief. For example, CVHs can offer personalized interactions that encourage social engagement or cognitive stimulation, which are crucial for maintaining the well-being of individuals with dementia. There is a need for training programmes that equip carers and clinicians with the skills to integrate CVHs into their care practices effectively. Understanding how to personalize CVH interactions based on individual patient needs and preferences can enhance the therapeutic relationship. CVHs can also serve as innovative tools for monitoring the emotional and cognitive health of patients. For instance, clinicians working with autistic adults could use CVHs to gather data on social interaction patterns, which can inform personalized care plans. The information collected through CVH interactions can provide valuable insights for carers and clinicians,

enabling them to adjust care strategies in real-time based on the user's engagement and responses.

Policy Makers

The integration of CVHs into healthcare and support systems raises important questions about privacy, data protection, and ethical use of AI. Policymakers must develop comprehensive regulatory frameworks that ensure the safe and ethical deployment of CVH technologies, particularly in sensitive settings. Establishing standards for the quality of CVH interactions and ensuring these technologies are accessible to diverse populations, including those with disabilities, are crucial areas for policy development. Moreover, there is a need for increased funding for research into CVH technologies, focusing on their long-term efficacy, ethical implications, and potential integration into existing care models. Policymakers can play a key role in allocating resources towards interdisciplinary research that bridges technology development with healthcare and social care needs. Policies that encourage innovation in the development of CVHs, including incentives for startups and research institutions, can accelerate the advancement of technologies that cater to the needs of vulnerable populations.

Policymakers should consider launching public awareness campaigns to educate the public, carers, and healthcare professionals about the benefits and limitations of CVHs. Understanding how these technologies can be used safely and effectively is key to their successful adoption. Finally, initiatives to foster a public dialogue on the ethical aspects of CVHs, including concerns around autonomy, consent, and privacy, are essential to ensure these technologies align with societal values and expectations.

Data Protection and Privacy Considerations

This thesis focus on vulnerable populations (autistic adults, mourners and people with early-stage dementia) calls for a design approach that prioritizes user

consent, data protection, and ethical interaction frameworks, especially in applications meant for emotional support and companionship. This includes ensuring privacy and security of any personal data shared with the system, as well as being mindful of the potential for dependency on the system for emotional support. The mourners' use of CVHs for emotional support during grief suggests that transparency about the capabilities and limitations of these systems is essential for building trust. Users benefit from understanding what CVHs can and cannot do, which helps set realistic expectations and fosters a sense of trust in the technology. If the CVH faces a situation it cannot handle, it should clearly communicate its limitations and suggest alternative solutions.

Hence, developers should clearly communicate the limitations of CVHs to users, ensuring they understand that these systems are not substitutes for human empathy or professional counselling. CVHs should be designed with clear indicators that distinguish virtual interactions from real-world engagements. This might involve explicit reminders during conversations that the CVH is a computer programme. Developers should also adhere to ethical frameworks that prioritize the well-being, autonomy, and privacy of vulnerable users. This includes transparent practices around data use and informed consent. They should also implement safeguards to recognise when a user's needs exceed what the CVH can provide, offering resources or referrals to professional support services.

Ethical Challenges and Ethical Framework

However, this research also brings to light the ethical challenges inherent in these interactions. The potential for deception, whether intentional or not, is a recurring theme across all three studies. Autistic adults, with their high expectations, are particularly vulnerable to the potential misrepresentations of CVHs. This group may have high expectations for the accuracy, reliability, and social connectivity facilitated by these technologies, making them especially susceptible to deception (Williams et al., 2018). This vulnerability arises from several factors, including difficulties in interpreting social cues, a strong reliance on clear and

literal communication, and a tendency to take information at face value, such as the literal interpretation of responses; e.g. if a CVH uses a common idiom or metaphor (i.e. "It's raining cats and dogs"), an autistic adult might be confused by the literal interpretation of the phrase, leading to miscommunication and potential distress); moreover, their difficulty detecting deceptive content (e.g. if a CVH inaccurately confirms a false fact shared by the user due to a misunderstanding, the user may accept this misinformation as truth, reinforcing incorrect beliefs); alongside comes the overreliance on CVH for social interaction (e.g. if a CVH becomes the primary source of interaction for an autistic adult, they might miss out on developing deeper, more meaningful relationships with people who can offer reciprocal emotional support and understanding); all these parameters highlight the nature and degree of the risk of deception.

Mourners, in their fragile emotional state, could be easily swayed by the perceived empathy of the CVHs, leading to potential re-traumatization. While intended to comfort, the CVH's responses can oversimplify complex emotions, making mourners feel misunderstood. This perceived empathy lacks the depth of real human understanding, potentially leading mourners to feel more isolated if they interpret the CVH's responses as genuine comprehension. For instance, if a CVH asks a mourner to share memories of their loved one without recognising signs of distress, it could exacerbate the mourner's pain, especially if they are not ready to discuss certain aspects of their loss. Moreover, the mourners' potential dependence on the CVH for emotional support could hinder their ability to engage in real-life social interactions and process their grief fully, as they might avoid confronting more difficult emotions that the CVH is not equipped to address adequately.

People living with dementia, with their cognitive challenges, might struggle to differentiate between virtual and real-world interactions. For instance, if the CVH is given a persona or name, the individual might begin to refer to it as if it were

a real family member or friend, discussing conversations with the CVH as though they occurred with a real person. This could lead to misunderstandings within their actual social and family circles, potentially causing distress or friction. Other implications of this difficulty differentiating between virtual and real interactions could be the misinterpretation of guidance from a CVH by people with dementia forgetting the context or confusing it with advice from a healthcare professional. There is also a risk that people with dementia may not fully grasp the implications of sharing personal and/or sensitive information or how it might be used. This raises concerns about privacy, the dignity of the individual, and the potential for misuse of data. These ethical challenges are complex, requiring a careful and considered approach to the design and deployment of CVHs.

The World Health Organization (WHO) has developed guidelines aimed at supporting health systems and policymakers in implementing digital health technologies that are safe, effective, and ethical, with a particular focus on vulnerable populations (World Health Organization, 2021⁷¹; National Consultative Ethics Committee, 2021⁷²). Current policies often emphasize data protection and privacy (European Commission, 2020⁷³; The European Health Data Space [EHDS]⁷⁴). They also advocate for universal design principles in the development of conversational agents, and they have set specific adaptations (Council of Europe & European Audiovisual Observatory, 2023⁷⁵) required for users with sensory impairments, such as visual or hearing disabilities, and people with neurodiversity issues). The Ethics Guidelines for Trustworthy AI⁷⁶ (2019) developed by the High-Level Expert Group on Artificial Intelligence set up by the European Commission, outline key requirements for trustworthy AI, including respect for human autonomy, prevention of harm, fairness, and

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https://www.who.int/docs/default-source/documents/gs4dhdaa2a9f352b0445bafbc79ca799dce4d.pdf

https://www.ccne-ethique.fr/sites/default/files/2022-05/CNPEN%233-ethical issues of conversational agents.pdf

https://commission.europa.eu/law/law-topic/data-protection/data-protection-eu en

⁷⁴ https://health.ec.europa.eu/ehealth-digital-health-and-care/european-health-data-space en

⁷⁵ https://www.obs.coe.int/en/web/observatoire/

https://ec.europa.eu/futurium/en/ai-alliance-consultation.1.html

explicability. While not legally binding, these guidelines offer a valuable framework for the ethical development and use of AI technologies, including conversational virtual agents, especially when dealing with vulnerable groups. Despite the fact that there is a general call for ethical AI design, current guidelines often lack specificity in the context of conversational agents used by vulnerable groups.

"In the case of a dialogue between a conversational agent and a vulnerable individual, the manufacturer of the conversational agent must seek to respect the dignity and autonomy of this person. In particular, medical chatbots must be designed to avoid excessive trust in these systems by the patient and to ensure that any possible ambiguity between the conversational agent and a qualified physician is eliminated" (National Consultative Advisory Committee, 2021).

Policies should mandate the inclusion of vulnerable populations in the design process of conversational agents. This participatory approach ensures that the final product is accessible and usable by all intended users (Sanders & Stappers, 2008). Given the potential for cognitive decline or fluctuating capacity in vulnerable populations, policies should introduce mechanisms for continuous consent, allowing users to adjust their privacy settings as their situation changes (Mittelstadt, 2019). They also need to enforce higher standards of transparency and explain ability for conversational agents, ensuring that users can understand how their data is used and how decisions are made by these systems (Goodman & Flaxman, 2017). Finally, the rapid advancement of AI technology necessitates regular reviews of policies governing conversational agents. This ensures that regulations remain relevant and effective in protecting vulnerable populations (Cath et al., 2018).

6.4.3 CVH researchers

• Context-aware Computing

The results of this thesis underscore the importance of context-aware computing in the advancement of chatbot technology. Through its exploration of conversational virtual humans across diverse user groups—autistic adults, mourners and people with dementia, it provides evidence that context-aware computing is not just beneficial but essential for the next generation of chatbots. Research into context-aware computing should be carried out to enable CVHs to understand the situational context of interactions, improving their responsiveness and relevance in conversations. CVHs equipped with context-aware capabilities can offer highly personalized interactions, significantly improving the user experience. For instance, in the study involving autistic adults, the ability of the CVH to adapt their conversational style based on the users' current emotional state or interest was limited. This lack of adaptability is a direct result of lack of context-aware computing, which, if present, enables chatbots to understand and respond to the nuances of each interaction, tailoring their responses to meet the specific needs and preferences of the user.

The role of context aware CVHs in supporting users' emotional well-being was highlighted in the study with mourners, where the CVH could recognise the context of grief and respond with appropriate empathy and sensitivity, hence providing significant emotional support.

Context-aware computing also enables CVHs to adapt to the cognitive and social needs of people with dementia, offering reminders, engaging in memory-stimulating conversations, and providing companionship. By understanding the context of the user's cognitive limitations, CVHs can modify their interactions to ensure they are accessible and meaningful, thereby enhancing the user's sense of social connectedness and overall quality of life.

Co-design process

The co-design process in study 3 (MindTalker application for people with early-stage dementia), which involved therapists, psychologists and dementia practitioners, provided crucial information regarding user-centred design, empathy and understanding, design considerations and challenges of users' engagement. It also established valuable feedback loops between the development and research team and dementia care professionals. Regular testing and review sessions with practitioners allowed for the iterative refinement of the CVH, ensuring that the technology remained aligned with best practices in dementia care and psychology.

For instance, incorporating strategies used in cognitive behaviour therapy or reminiscence therapy into the CVH's interaction design offered users more meaningful and supportive experiences. This collaboration ensured that the CVH was not only technologically advanced but also therapeutically relevant. Dementia practitioners provided insights into the types of conversations and activities that could benefit people with dementia, such as discussing familiar topics, facilitating memory recall with personalized prompts, or gently guiding users through therapeutic exercises. This specificity in content design underscores the value of professional input in creating CVH interactions that are both engaging and beneficial from a therapeutic standpoint, and helps the researcher finetune the application.

CVHs should be able to adapt to a wide range of cognitive abilities and preferences. For example, the CVH might need to modify its speech patterns, conversation topics, or level of prompting based on the user's current state. The practitioners' expertise was crucial in identifying adaptive design features that could accommodate the fluctuating nature of dementia symptoms. The insights gained from working closely with professionals underscore the critical role of interdisciplinary collaboration in creating technologies that can truly enhance the

quality of life for people with dementia, offering a promising direction for future research and development in the field of conversational AI.

It should be noted that we decided to include only therapists and dementia experts in the ideation and design phase for a variety of reasons (see Chapter 5, Section 5.3.3 Data Collection). However, the inclusion of individuals with dementia and their families in the co-design process of AI applications offers numerous advantages that enhance both the functionality and usability of the technology. This participatory approach ensures that the solutions developed are not only technically sound but also deeply attuned to the real-world needs and preferences of those who will use them.

Further Research

Methodological Implications

The methodological implications of researching how individuals gain and interpret experiences with CVHs are significant, especially when considering populations that are vulnerable to social isolation. Methodologies (qualitative research approach) that prioritize the individuals' subjective experiences, such as interviews, focus groups, and ethnographic studies, are invaluable; however, combining quantitative measures, such as frequency and duration of interactions with CVHs, with qualitative assessments (Mixed-Methods Designs) can provide a holistic understanding of users' experiences. This blend allows for a more robust analysis of the effectiveness of CVHs in reducing feelings of social isolation.

Given the initial findings on the positive effects of CVH interactions on users' sense of social connectedness, a critical area for further research involves the longitudinal study of these interactions by focusing on investigating the long-term effects of sustained CVH interactions on users' social behaviour, mental health, and overall well-being. Long-term research designs can observe changes in the quality of social connections and feelings of loneliness or companionship

over time, providing insights into how sustained use of CVHs might influence social health, along with establishing guidelines for the ethical use of AI in CVHs, focusing on respect for user autonomy, non-discrimination, and fairness.

Including users (User-Centred Design Research, [Rizzo, 2011]) in the design process of CVHs can uncover specific needs and preferences, ensuring that the technology is tailored to the real-world context of the target populations; moreover, observing users in their natural environments and involving them in the research process (Ethnographic and Participatory Research, [Hogger et al., 2023]) can yield deeper insights into how CVHs are integrated into daily routines and their impact on users' social engagement and well-being.

Personalization Algorithms for Enhancing User-CVH Bonding

This thesis highlighted the importance of personalization in fostering a sense of connectedness between users and CVHs. Building on this, new research could delve into the development and optimization of personalization algorithms. By developing advanced personalization algorithms for CVHs that adapt not only to users' preferences and behaviours but also to their emotional states and social contexts, which brings us back to more context-aware CVHs capable of forming deeper, more meaningful connections with users, thereby enhancing the quality of interaction and perceived social support.

Ethical Frameworks and Guidelines for CVHs' Deployment in Sensitive Contexts

The ethical considerations surrounding the deployment of CVHs, especially in sensitive contexts (see Section 6.5.2 Ethical Challenges and Ethical Framework) such as support for mourners or people with dementia, present a rich area for further exploration; developing comprehensive ethical frameworks and guidelines for the deployment of CVHs in contexts requiring heightened sensitivity and privacy would ensure that CVHs are designed and used in a

manner that respects users' dignity, privacy, and autonomy, particularly in vulnerable populations.

These research niches not only build directly on the findings of the completed thesis but also address critical gaps in the current understanding of CVHs' impact on social connectedness. By exploring these areas, researchers will contribute to the responsible development and deployment of conversational AI technologies, ensuring they meet users' social and emotional needs in ethical and meaningful ways.

Concluding paragraph

In conclusion, the ethical development and implementation of CVHs emphasizing the need for transparency, user dignity, and context-aware computing to enhance personalization and relevance across diverse user groups calls for a multidisciplinary approach involving developers, carers, clinicians, and policymakers to address potential benefits and challenges, such as ensuring privacy and avoiding overreliance (see Table 6.2 for a summary of implications for stakeholders). By suggesting areas for further research and emphasizing the importance of ethical frameworks and co-design processes, we aim to guide the

Table 6.2 Summary of Implications for Practitioners and Researchers

Stakeholder	Implications			
	 Develop training programs to enhance the empathetic capabilities of CVHs Implement strategies to personalize interactions based on user group needs (AGI=>Custom AI) Design intuitive HCI/HRI systems to accommodate diverse communication styles/cognitive abilities) 			
Practitioners	 Focus on creating adaptive and flexible CVHs CVHs used as supplementary tools by carers/clinicians Establish guidelines for the ethical use of CVHs Promote policies that support the integration of CVHs in healthcare and social support systems 			
Researchers	 Investigate the role of emotional intelligence in CVHs for diverse user groups Deploy context-aware computing per user group to support personalisation Implement co-design approaches (with both users and users' families) Explore the long-term impact of CVHs on social connectedness Use ethical frameworks in sensitive contexts 			

creation of CVH technology that is both effective and respectful of users' needs. and autonomy.

6.5 Research Contributions

This PhD thesis makes significant contributions to the fields of HCI, AI, and social connectedness by exploring the complex dynamics between conversational virtual humans and various vulnerable groups. It not only expands current understanding but also introduces new perspectives and considerations, particularly around user perception, interaction patterns, effectiveness, customization, and ethical implications in the context of CVHs.

(1) Theoretical/Conceptual Insights into HCI (vulnerable groups)

This thesis contributes to the theoretical understanding of how different vulnerable groups interact with CVHs, extending the existing human-human interaction paradigm to include traits unique to HCI. It also proposes new approaches for the user-centric design of CVHs, particularly for vulnerable populations, contributing to the field of HCI.

By exploring and experimenting on interactions of vulnerable groups with CVHs, this thesis identifies gaps and specific limitations of the already existing CVHs in addressing the needs of these groups, such as empathy and adaptability, and develops new interaction approaches to enhance user experience.

Limitation 1: Lack of Empathy

The study with autistic adults showed that while participants valued the non-judgmental aspect of interacting with Kuki, they also pointed out that the CVH often failed to display genuine empathetic responses. For instance, when participants shared personal or emotional issues, the responses from Kuki sometimes lacked depth and understanding, which could be critical for autistic individuals who need clear and emotionally attuned responses to feel supported

and understood. Moreover, the autistic users experienced a perceived social exchange imbalance; they exerted considerable effort to communicate effectively with Kuki, which was not reciprocated with empathetic understanding or support, leading to dissatisfaction and emotional drain. Kuki's limited empathetic responses had also an impact on the users' perceived relationship, hence autistic participants reported a lack of development in their relationship with Kuki. This issue was rooted in Kuki's inability to engage in reciprocal emotional exchanges, which is crucial for building trust and companionship.

The study involving mourners revealed that while the CVH provided a platform for expressing grief, it often did not respond with the level of empathy expected by users dealing with loss; however, despite the comments of the mourners using a generic CVH which emphasized that the interactions sometimes lacked the conversational flow and empathy expected from a human partner, users of griefbots were extremely satisfied with the experience irrespective of the erratic conversational contingency.

In the case of people with early-stage dementia, MindTalker was used to engage them in conversations that could potentially help in reminiscence therapy. However, the limitation highlighted was the CVH's inability to respond empathetically to the emotional context of the memories being discussed. Participants sometimes expressed confusion or distress when the CVH failed to recognise emotional cues or provide comforting responses aligned with the participants' feelings. They noted a significant lack of genuine empathy and personal touch, as MindTalker often failed to simulate the depth and spontaneity of human interactions, which left participants feeling that the conversations lacked personal relevance and emotional depth.

Limitation 2: Adaptability to User Group Needs

Existing systems do not adequately adjust their interaction patterns based on the evolving needs and preferences of individual users, particularly those who are vulnerable due to age, disability, social isolation, or grief.

The study with autistic adults highlighted that Kuki often struggled to adapt to the varying communication styles and needs of autistic users. For instance, autistic individuals might require more literal interpretations or may not pick up on subtleties or nuances in conversation. Kuki was not always able to adjust its interaction style to accommodate these specific needs, resulting in communication breakdowns or unmet expectations. In dealing with mourners, the necessity for CVHs to adapt to fluctuating emotional states was evident. Grieving individuals might experience a wide range of emotions in a short period, and the interactions with griefbots met the emotional dynamics of the mourning process, as well as the personalised interactions based on the mourners' elaborate description of the deceased's personality and their relationship to them. In terms of the generic CVH used by some participants, they provided mostly reassurance and listening support than more engaging conversations that would help them process their emotions. For participants with early-stage dementia, adaptability was crucial in terms of the CVH's ability to adapt to the users' cognitive abilities and emotional states, which could aid in better engagement and understanding. Participants with early-stage dementia appreciated the CVH's ability to remember previous conversations and adapt its responses based on past interactions. This adaptability not only facilitated more personalized interactions but also contributed to a sense of familiarity and comfort for the users.

(2) Practical Contribution

• New approaches to Enhance User Experience

This thesis also highlights the user-centric approach to the design of CVHs to enhance user experience. In practical terms, this involves customized design, the implementation of an ethical framework as well as the generalized effectiveness of CVHs in social well-being. The thesis offers specific design considerations for CVHs interacting with autistic adults, mourners and people with dementia pertaining to a customized design and an ethical framework, which can be directly applied in the development of more effective and empathetic CVHs.

Customized design

The expressed needs of the users of all three vulnerable groups can be translated into the design of a social role of the CVH (potential companion) for the autistic adults equipped with emotional understanding and (positive) human-like traits such as empathy, less judgemental comments, willingness to form a bond/friendly relationship with the user; in terms of the mourners, design considerations pertain to the role of the CVH as a "transitional security blanket", equipped with emotional fidelity as a prerequisite compared to the conversational competency of the CVH. People with dementia consider CVHs as facilitators for real-world connections as well as providing emotional and conversational support. The expectations of all groups lead to the potential design of customized CVHs following fine-tuning and prompt engineering.

The thesis underscores the importance of integrating more sophisticated emotional intelligence capabilities into CVHs. This includes improving the CVH's ability to recognise and adapt to subtle emotional nuances and changes in user sentiment over the course of an interaction.

Designing CVHs to fulfil specific and more authentic social roles, such as supportive companions or empathetic listeners, rather than generic

conversational agents, could enhance the perceived value and effectiveness of these interactions for all user groups. Adaptive learning, i.e. incorporating direct feedback from users into the training of CVHs can help in fine-tuning the systems to better meet the emotional and communicative needs of these groups; this approach can lead to more personalized and sensitive interactions.

Limitation 1: Lack of Emotional Understanding

Irrespective of the type of chatbot architecture, both Kuki and MindTalker were perceived as lacking emotional understanding and using "robotic" replies. This lack of emotional resonance caused more frustration to autistic adults due to higher expectations of seeing Kuki as a social companion; on the contrary, mourners perceived the griefbot's anomalies as "human conversational behaviour", and they were more lenient to the simulation's erratic replies, a behaviour which can be explained by their idiosyncratic and urgent need to connect with the deceased.

Limitation 2: Human Traits

The degree of humanizing CVHs is a challenging issue; Kuki's humanization was higher in the autistic group compared to the non-autistic group due to their need to disclose personal and sensitive information as well as to 'view' the CVH as a social companion, which also let to high trust levels; however, the paradox of both humanizing and dehumanizing the CVH (observed in our findings-i.e. reactions as if interacting with a human alongside with expectations of the chatbot having more human-like qualities) led us to a new HCI model beyond the HHI one; a model that encompasses and is shaped by user perception, user personality traits and user expectations (prospective type of interaction with conversational agents) as fundamental parameters to the degree of human-like characteristics CVHs should possess.

Mourners, on the other hand, were not so much interested in a social fidelity based on conversational competency, as long as the simulation of the deceased

person could invoke a similar degree of emotional connection as their lost loved one; the simulation's conversational capability/performance or the perfect recreation of past conversational patterns was not part of their expectations.

In the case of people with early-stage dementia, our findings indicated that merely audio-based communication was inadequate to establish emotional resonance with the users, leading to considerations about a multimodal CVH equipped with an intuitive (potentially human-like) user interface as well as a distinct personality or self-identity; their expectations are based on the CVH's self-disclosure for an emotionally engaging conversational partner, especially in reminiscence activities. While imperfection (especially in interaction) is seen as a human trait by this group, transparency is essential form an ethical perspective.

• Ethical Framework

This research provides a foundational ethical framework for CVH interactions, particularly with vulnerable populations, filling a significant gap in existing literature. This contribution offers a paradigm shift in human-computer interaction and software engineering. It sets new ethical standards for the field, ensuring that future CVH systems are designed with a focus on ethical responsibility, thereby reducing the risk of harm to vulnerable user groups.

Ethical design for CVHs is fundamental in addressing the principles of transparency, authenticity, respect, personalization, privacy and security, cultural sensitivity, accessibility and limit setting (designed to recognise and respond appropriately to signs of distress or harm, including shutting down the conversation or suggesting professional human assistance when needed), especially when dealing with vulnerable populations. Autistic adults' idiosyncratic interaction patterns should be taken into consideration; more specifically their conversational and communication traits (e.g. difficulty in understanding idiomatic expressions and irony, as well as paralinguistic features). In addition, their delicate emotional state especially when conversing

about the topic of "autism" should not be ignored, as any misconceptions or incongruent ideas/opinions can cause frustration.

Mourners' sensitive psychology should be addressed by a CVH who does not cause re-traumatization, and is task orientated to resolving residual personal conflicts, while people with dementia should be informed of the artificial nature of the CVH to avoid misconceptions; ethical guidelines should be outlined to prevent misuse of CVHs, such as ensuring that they are not used for deceptive or harmful purposes.

The findings have significant policy implications, particularly in the realms of healthcare and social services, where CVHs could be integrated as supportive tools. Policymakers should establish strict guidelines to protect the privacy of vulnerable individuals ensuring that sensitive medical and personal information is securely handled, stored, and transmitted. Regulations similar to the General Data Protection Regulation (GDPR) in the EU should be implemented, ensuring that data collected by CVHs is securely stored and used only for intended purposes. Policy should address accessibility concerns, making sure that the technology is usable by individuals with disabilities/vulnerabilities and those who may not have access to high-end technology. Policies should clarify the liability and accountability of CVH developers and operators in case of errors or harm caused by these systems. This can help protect both users and service providers.

(3) Effectiveness of CVHs in Social Well-Being (Impact on Social Isolation)

By focusing on the impact assessment on social connectedness this research critically assesses how interactions with CVHs influence the sense of social connectedness among vulnerable groups. It provides empirical evidence on the potential of CVHs to alleviate feelings of isolation and loneliness. This thesis

offers a balanced view of the potential benefits and drawbacks of CVHs in addressing social isolation. It explores how CVHs can supplement, but not replace, human interactions in building social support networks. It also investigates the role of CVHs in fostering meaningful relationships and enhancing social support networks for vulnerable users, contributing to a deeper understanding of technology's role in social well-being.

This thesis adds to the growing body of evidence supporting the use of technology in social care by demonstrating the potential of CVHs to mitigate feelings of loneliness and improve social connectedness among vulnerable groups. This has implications for future implementations of similar technologies in therapeutic and supportive settings. Empirical evidence is being provided on how CVHs can serve as effective tools for enhancing social connectedness among individuals susceptible to social isolation, such as the elderly, people with disabilities, or those experiencing mental health challenges by highlighting the potential to make CVHs more relatable and capable of sustaining complex social interactions.

These comprehensive and specific contributions help not only advance the field of computer science but also set new design guidelines and ethical standards for the development and deployment of conversational virtual humans.

6.6 Limitations and Challenges

Across all three studies, the limitations revolve around sample size and diversity, the scope and duration of the study, methodological challenges, the online research approach due to COVID restrictions (see preface page), and ethical considerations. These limitations highlight the need for future research to include a more extensive and diverse participant pool, longitudinal designs to capture long-term effects, and the exploration of ethical frameworks to navigate the challenges of researching vulnerable populations.

First and foremost, it should be highlighted that this thesis consists of two experimental studies (groups of autistic adults and people with early-stage dementia) and one exploratory study (group of mourners). The fact that each study targets a very different population may limit the ability to generalize findings beyond these specific groups, as the characteristics and needs of autistic adults, mourners and people with dementia vary significantly. Applying different methodologies across the studies might challenge the thesis's methodological consistency; however, in this case, it would be extremely challenging to design an experimental study with the group of mourners due to many ethical, practical and tech-perception related barriers.

The participant samples were relatively small and not diverse (study 1: 12 users, study 2: 10 users, study 3: 8 users), potentially limiting the generalizability of the findings, and making it difficult to perform subgroup analyses, which are crucial for understanding nuanced behaviours or trends. Specifically, all participants were recruited from Western cultures, which might not accurately represent the experiences and perspectives of participants across different cultural contexts. Moreover, the first study did not assess non-autistic participants for other co-occurring (i.e. ADHD, intellectual disability or mood disorders such as anxiety and depression) or psychiatric conditions, which could influence the results. The gender imbalance in the participant groups (mourners and people with early-stage dementia) with a male-to-female ratio of 9:1 and 3:5 respectively suggests that findings may not equally represent the experiences of either gender.

All studies primarily focused on short-term interactions without considering the long-term dynamics of using AI due to study completion time barriers. The minimum duration of interaction was one month, and the mean duration of interactions varied from a few minutes to hours per user. This oversight could miss out on understanding the evolving nature of such interactions and their impact over time. Certain transferability of the amount of time and emotional intensity of an interpersonal interaction (Christoforakos et al., 2021) are crucial

determinants of an interpersonal tie (Granovetter, 1973) to human-technology relationships. The effect of point of measurement on closeness to chatbot, resulting in risen ratings of the perceived closeness of the participants to the chatbot after 2 weeks of use, further supports this assumption.

Unless continuous tracking of the same participants' interactions with CVHs across multiple points is done, researchers cannot gain insights into the durability of relationships formed with conversational virtual humans and any long-term psychological effects.

Moreover, combining quantitative surveys and qualitative interviews could provide a more comprehensive understanding of the users' experiences. Despite the fact that the methodological approach was a mixed-methods one, very little quantitative data was used to support the findings, as the research approach was mainly exploratory and qualitative. The exploratory nature of the study with mourners warrants cautious interpretation of the benefits. Quantitative data included scales measuring perceived social support, loneliness, and mood changes; however, it would be more beneficial, and it would be statistically more robust if the sample size was larger.

The challenge of interviewing vulnerable user groups online and the virtual nature of this PhD thesis posed extra challenges to the whole endeavour. Establishing trust online was significantly harder, especially with vulnerable groups who may be wary of disclosing sensitive information in a virtual environment. Participants had varying levels of access to technology, and some of them were not proficient in using digital communication tools, which made the researcher spend more time and effort (via emails, phone conversations, virtual video sessions, WhatsApp chatting) on guiding users on how to use technology as well as procedural challenges (sharing their conversational chatlogs). Lack of physical presence in online interviews can lead to missing out on non-verbal cues such as body language, which are often crucial for understanding context and emotions. The researcher tried to mitigate this effect

by employing video interviews (according to the users' preference) rather than audio-only or text-based formats. Maintaining engagement in virtual settings was also very challenging (regular follow-ups and reminders had to be sent), leading to dropout rates; especially with regards to the autistic group as well as the people with early dementia the dropout rate reached 30% and 60% respectively. Ensuring informed consent is fully understood and maintained throughout the study in a virtual format was quite complex, as digital consent forms with detailed explanations ensured participants fully understood what they were consenting to.

The choice of technology also directly impacts how users perceive and interact with chatbots. While generative AI chatbots like Replika provide more realistic, evolving conversations, AIML chatbots like Kuki ensure controlled, predictable, but more robotic interactions. Ultimately, UX is shaped by the level of intelligence, adaptability, and personalization a chatbot can offer—features that are deeply tied to its underlying technology. The choice of off-the-shelf chatbots for specifc groups due to circumstantial constraints or user group constraints present a limitation to this thesis, as large-scale deep learning models trained on vast amounts of text data would enable contextual understanding, adaptability, and coherence in conversations.

Finally, ethical considerations restricted the administration of additional assessments, possibly affecting the outcomes. The people with dementia were not involved in the ideation and design phase due to worries about overburdening them with cognitive load, and the interaction with the autistic users necessitated a very careful approach to their perception of AI technology and their feelings. In the case of mourners, there was the challenge of the interview potentially leading to re-traumatization.

6.7 Conclusion and Future Work

These three studies reveal the multifaceted role of CVHs in supporting socially isolated groups. This research examined the experiences of autistic adults, mourners, and people with early-stage dementia, all of whom are susceptible to social isolation. The findings across these studies indicate that while CVHs show promise in alleviating feelings of loneliness and offering emotional support, they are not without limitations. The perception and effectiveness of CVHs vary across different groups, underscoring the importance of user-centric design and ethical considerations in their development. As CVHs continue to evolve, they have the potential to become an integral tool in addressing the challenges of social isolation, offering tailored support and companionship to those in need with an aim of fostering or restoring social connectedness.

The findings from these studies have also several implications for the future development of CVHs and related research. Addressing the current limitations in CVH design requires a multidisciplinary research approach that integrates advancements in AI, HCI, psychology, and ethics. By focusing on improving emotional intelligence, adaptability, and conversational variety, future research can unlock the full potential of CVHs as tools for social connection and emotional support. Ethical considerations, especially in sensitive contexts, are paramount in ensuring the responsible use of CVHs, while longitudinal studies are essential to assess the long-term impact of CVH interactions on users' social well-being and mental health.

Future research should focus on enhancing the emotional intelligence of CVHs, particularly for user groups such as mourners and autistic adults who require empathetic responses. The goal would be to explore how CVHs can better recognise and respond to complex emotions in real time, using both verbal and non-verbal cues. Current limitations in this area reduce the effectiveness of CVHs, especially in emotionally charged contexts. Research could employ

multimodal interaction studies, integrating advances in sentiment analysis, voice tone recognition, and facial expression tracking.

The use of machine learning algorithms to train CVHs on emotional scenarios can also be explored, focusing on the development of personalization algorithms that tailor CVH responses based on the user's neurodiverse condition (e.g., autism spectrum disorder). These algorithms could adapt conversational style, tone, and content to the unique social and communication needs of each user. Albased personalization studies using machine learning to train CVHs on diverse interaction patterns could test different conversational strategies and track user satisfaction and emotional engagement offering insights into the effectiveness of such algorithms.

Investigating how CVHs can be context-aware and adaptive in interactions with people with early-stage dementia could be another research focus. This would involve designing CVHs that adjust their behaviour based on a user's cognitive and emotional state over time. As dementia progresses, users' cognitive needs and emotional states fluctuate, requiring personalized and adaptable interactions. Ensuring CVHs respond appropriately in real-time is key to maintaining engagement. Longitudinal studies tracking CVH interactions with people living with dementia over several months as well as AI-driven real-time adjustments based on speech patterns and emotional state could also be integrated using reinforcement learning.

The development ans refinement of ethical frameworks for the use of griefbots or CVHs in grief counseling and emotional support could be accomplished by research involving a combination of qualitative interviews with users of griefbots (customized griefbots) and ethical case studies. Collaboration with mental health professionals would be essential in drafting comprehensive ethical guidelines.

Research should also be carried out to explore how CVHs can serve as transitional social companions for autistic adults, helping them practice social interactions and eventually integrating these learned skills into real-world interactions; this could be accomplished by measuring the transferability of these skills. Behavioral studies comparing social skill improvement in CVH users versus traditional therapy as well as pre- and post-interaction evaluations using social skills assessments could provide quantitative data on the effectiveness of CVHs in skill transference.

The potential of multimodal systems that combine text, voice, and visual elements in CVHs to create richer, more engaging interactions could also be researched through experimental designs comparing user experiences with multimodal versus single-mode CVHs. Eye-tracking, voice tone analysis, and user engagement metrics could be used to measure the effectiveness of these systems.

Conducting longitudinal research to assess the long-term impact of CVH companionship on reducing social isolation, particularly in populations such as mourners and elderly individuals could be another research direction; carrying out longitudinal qualitative and quantitative studies, with repeated measures of social connectedness, loneliness scales, and psychological well-being assessments as well as comparison groups including participants with and without CVH interactions over extended periods.

These topics provide a roadmap for future research that can address the current gaps in CVH technology and design. Future studies can help realize the full potential of CVHs in reducing social isolation and providing meaningful companionship for vulnerable populations by addressing the current technological limitations and exploring new opportunities in CAI, crucial for the evolution of CVHs, especially while targeting a transition from AGI to custom AI.

Rererences

Abd-Alrazaq, A. A., Alajlani, M., Alalwan, A. A., Bewick, B. M., Gardner, P., &Househ, M. (2019). An overview of the features of chatbots in mental health: A scoping review. International journal of medical informatics, 132, 103978. https://doi.org/10.1016/j.ijmedinf.2019.103978

Abd-Alrazaq, A. A., Alajlani, M., Ali, N., Denecke, K., Bewick, B. M., &Househ, M. (2021). Perceptions and opinions of patients about mental health chatbots: Scoping review. Journal of Medical Internet Research, 23(1): e17828. https://www.jmir.org/2021/1/e17828/

Abd-Alrazaq, A. A., Rababeh, A., Alajlani, M., Bewick, B. M., &Househ, M. (2020). Effectiveness and safety of using chatbots to improve mental health: Systematic review and meta-analysis. Journal of medical Internet research, 22(7), e16021. https://doi.org/10.2196%2F16021

Abramson, D. I., & Johnson, J. (2020). U.S. Patent No. 10,853,717. Washington, DC: U.S. Patent and Trademark Office.

Addlesee, A., Cherakara, N., Nelson, N., García, D. H., Gunson, N., Sieińska, W., & Lemon, O. (2024, March). Multi-party multimodal conversations between patients, their companions, and a social robot in a hospital memory clinic. In 18th Conference of the European Chapter of the Association for Computational Linguistics 2024 (pp. 62-70). Association for Computational Linguistics. https://aclanthology.org/2024.eacl-demo.8.pdf

Ahmad, F., Hogg-Johnson, S., Stewart, D.E., Skinner, H.A., Glazier, R.H., &Levinson, W. (2009). Computer-assisted screening for intimate partner violence and control: A randomized trial. Annals of internal medicine, 151(2), 93–102. http://dx.doi.org/10.7326/0003-4819-151-2-200907210-00124 Al Gamal, E., Bin Saeed, S., Agnes, M., & Long, T. (2016). Prolonged grief disorder and its association with perceived social support. Medicine, 42, 18–6. https://doi.org/10.3928/02793695-20181023-03

Alabdulkareem, A., Alhakbani, N., & Al-Nafjan, A. (2022). A systematic review of research on robot-assisted therapy for children with autism. Sensors, 22(3), 944. https://doi.org/10.3390/s22030944

Ali, M. R., Razavi, S. Z., Langevin, R., Al Mamun, A., Kane, B., Rawassizadeh, R., Schubert, L., & Hoque, E. (2020). A virtual conversational agent for teens with autism spectrum disorder: Experimental results and design lessons. In Proceedings of the 20th acm international conference on intelligent virtual agents , 1–8. https://doi.org/10.48550/arXiv.1811.03046

Alonso-Llácer, L., Barreto Martín, P., Ramos-Campos, M., Mesa-Gresa, P., Lacomba-Trejo, L., & Pérez-Marín, M. (2020). Mindfulness and grief: The MADED program mindfulness for the acceptance of pain and emotions in grief. Psicooncologia, 17(1). https://revistas.ucm.es/index.php/PSIC/article/view/68244

Altman, I., & Taylor, D.(1987). Communication in interpersonal relationships: Social penetration theory. Interpersonal processes: New directions in communication research, 14, 257–277.

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (dsm-5®). American Psychiatric Association. https://doi.org/10.1176/appi.books.9780890425596

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders. American Psychiatric Association, 21.

Anderson, K., André, E., Baur, T., Bernardini, S., Chollet, M., Chryssafidou, E., Damian, I., Ennis, C., Egges, A., Gebhard, P., Jones, H., Ochs, M., Pelachaud, C., Porayska-Pomsta, K., Rizzo, P., &Sabouret, N. (2013, November). The TARDIS framework: intelligent virtual agents for social coaching in job

interviews. International conference on advances in computer entertainment technology (pp. 476-491). Cham: Springer International Publishing. http://dx.doi.org/10.1007/978-3-319-03161-3 35

Andriessen, K., &Krysinska, K. (2011). Essential questions on suicide bereavement and postvention. International Journal of Environmental Research and Public Health, 9(1), 24–32. https://www.mdpi.com/1660-4601/9/1/24

Araujo, T. (2018). Living up to the chatbot hype: The influence of anthropomorphic design cues and communicative agency framing on conversational agent and company perceptions. Computers in human behavior, 85, 183-189. https://doi.org/10.1016/j.chb.2018.03.051

Astell, A. J., Ellis, M. P., Alm, N., Dye, R., & Gowans, G. (2010a). Stimulating people with dementia to reminisce using personal and generic photographs. International Journal of Computers in Healthcare, 1(2), 177–198. http://dx.doi.org/10.1504/IJCIH.2010.037461

Astell, A. J., Ellis, M. P., Bernardi, L., Alm, N., Dye, R., Gowans, G., & Campbell, J. (2010b). Using a touch screen computer to support relationships between people with dementia and caregivers. Interacting with Computers, 22(4), 267–275. http://dx.doi.org/10.1016/j.intcom.2010.03.003

Atif, A., Richards, D., Jha, M., &Bilgin, A. A. (2021). Changing student attitudes and behaviours to Academic Integrity through reflection with a conversational agent. ACIS 2021. Proceedings. 19. https://aisel.aisnet.org/acis2021/19

Axtell, B., Saryazdi, R., & Munteanu, C. (2022). Design is worth a thousand words: The effect of digital interaction design on picture-prompted reminiscence. Proceedings of the 2022 CHI Conference on Human Factors in Computing Systems, 1–12. http://dx.doi.org/10.1145/3491102.3517692

Ayanouz, S., Abdelhakim, B. A., &Benhmed, M. (2020, March). A smart chatbot architecture based NLP and machine learning for health care assistance. In

Proceedings of the 3rd international conference on networking, information systems & security (pp. 1-6). http://dx.doi.org/10.1145/3386723.3387897

Badcock, E., & Sakellariou, D. (2022). "Treating him...like a piece of meat": poor communication as a barrier to care for people with learning disabilities. Disability Studies Quarterly, 42(1). https://doi.org/10.18061/dsq.v42i1.7408

Bae Brandt, P., Følstad, A., & Bae Brandtzaeg, P. (2017). Why people use chatbots. In Lecture Notes in Computer Science (Vol. 10673). Springer. https://botlist.co/

Baglione, A. N., Girard, M. M., Price, M., Clawson, J., & Shih, P. C. (2017). Mobile technologies for grief support: prototyping an application to support the bereaved. American Medical Informatics Association Annual Symposium Workshop on Interactive Systems in Health Care. https://www.researchgate.net/publication/320096277 Mobile technologies for grief support Prototyping an application to support the bereaved

Baglione, A. N., Girard, M. M., Price, M., Clawson, J., & Shih, P. C. (2018). Modern bereavement: a model for complicated grief in the digital age. CHI Conference on Human Factors in Computing Systems Proceedings, 1–12. https://dl.acm.org/doi/10.1145/3173574.3173990

Bakhai, A., Constantin, A., & Alexandru, C. A. (2020). Motivate me!: An alexa skill to support higher education students with autism. In International conferences interfaces and human computer interaction, 187-191. http://www.iadisportal.org/digital-library/motivateme-an-alexa-skill-to-support-higher-education-students-with-autism

Bakker, A. B., & van Woerkom, M. (2018). Strengths use in organizations: A positive approach of occupational health. Canadian Psychology/psychologiecanadienne, 59(1), 38. http://dx.doi.org/10.1037/cap0000120

Bálint, B. (2017). The griever as a stranger. A discussion. Acta Universitatis Sapientiae, Social Analysis, 7, 39–77. https://doi.org/10.1515/aussoc-2017-0005

Bao & Zeng. (2024, January). Embracing grief in the age of Deathbots: a temporary tool, not a permanent solution. Ethics and Information Technology, 26 (1). https://doi.org/10.1007/s10676-024-09744-y

Barbosa Neves, B., Franz, R., Judges, R., Beermann, C., & Baecker, R. (2019). Can digital technology enhance social connectedness among older adults? A feasibility study. *Journal of Applied Gerontology*, *38*(1), 49-72. https://doi.org/10.1177/0733464817741369

Barbosa, V., Sá, M., & Carlos Rocha, J. (2014). Randomised controlled trial of a cognitive narrative intervention for complicated grief in widowhood. Aging & Mental Health, 18(3), 354–362. https://www.tandfonline.com/doi/abs/10.1080/13607863.2013.833164

Baron-Cohen, S., Leslie, A. M., & Frith, U. (1985). Does the autistic child have a "theory of mind"?. Cognition, 21(1), 37-46. https://doi.org/10.1016/0010-0277(85)90022-8

Baumeister, R. F., & Leary, M. R. (1995). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. Psychological Bulletin, 117(3), 497–529. https://doi.org/10.1037/0033-2909.117.3.497

Baumeister, R. F., & Leary, M. R. (2017). The need to belong: Desire for interpersonal attachments as a fundamental human motivation. Psychological Bulletin, 117(3), 497-529. https://psycnet.apa.org/doiLanding?doi=10.1037%2F0033-2909.117.3.497

Beldad, A., Hegner, S., & Hoppen, J. (2016). The effect of virtual sales agent (VSA) gender–product gender congruence on product advice credibility, trust in VSA and online vendor, and purchase intention. Computers in human behavior, 60, 62-72. https://doi.org/10.1016/j.chb.2016.02.046

Bellini, S., Erbuto, D., Andriessen, K., Milelli, M., Innamorati, M., Lester, D., & Pompili, M. (2018). Depression, hopelessness, and complicated grief in survivors of suicide. Frontiers in Psychology, 9, 198. https://doi.org/10.3389/fpsyg.2018.00198

Bendig, E., Erb, B., Schulze-Thuesing, L., & Baumeister, H. (2019). The next generation: Chatbots in clinical psychology and psychotherapy to foster mental health — A scoping review. Verhaltenstherapie, 32 (1), 64–76. https://doi.org/10.1159/000501812

Benevides, T.W., Shore, S.M., Andresen, M.-L., Caplan, R., Cook, B., Gassner, D.L., Erves, J., Hazlewood, T., King, M. C., Morgan, L., Murphy, L., Purking, Y., Rankowski, B., Rutledge, S., Welch, S., & Wittig, K. (2020). Interventions to address health outcomes among autistic adults: A systematic review. Autism, 24(6), 1345–1359. https://doi.org/10.1177/1362361320913664

Benítez-Guijarro, A., Ruiz-Zafra, Á., Callejas, Z., Medina-Medina, N., Benghazi, K., & Noguera, M. (2018). General architecture for development of virtual coaches for healthy habits monitoring and encouragement. Sensors, 19(1), 108. http://dx.doi.org/10.3390/s19010108

Bernard-Opitz, V., Sriram, N., & Nakhoda-Sapuan, S. (2001). Enhancing social problem solving in children with autism and normal children through CAI. Journal of Autism and Developmental Disorders, 31(4), 377–398. http://dx.doi.org/10.1023/A:1010660502130

Bernardini, S., Porayska-Pomsta, K., & Smith, T. J. (2014). Echoes: An intelligent serious game for fostering social communication in children with autism. Information Sciences, 264, 41–60. http://dx.doi.org/10.1016/j.ins.2013.10.027

Bérubé, C., Schachner, T., Keller, R., Fleisch, E., v Wangenheim, F., Barata, F., &Kowatsch, T. (2021). Voice-based conversational agents for the prevention and management of chronic and mental health conditions: systematic literature

review. Journal of medical Internet research, 23(3), e25933. https://doi.org/10.2196/25933

Bird, G., &Viding, E. (2014). The self to other model of empathy: providing a new frame work for understanding empathy impairments in psychopathy, autism, and alexithymia. Neuroscience & Biobehavioural Reviews, 47, 520–532. https://doi.org/10.1016/j.neubiorev.2014.09.021

Boine, C. (2023). Emotional attachment to ai companions and European law. MIT Case Studies in Social and Ethical Responsibilities of Computing. https://doi.org/10.21428/2c646de5.db67ec7f.

Boucher, E. M., Harake, N. R., Ward, H. E., Stoeckl, S. E., Vargas, J., Minkel, J., Parks, A., &Zilca, R. (2021). Artificially intelligent chatbots in digital mental health interventions: a review. Expert Review of Medical Devices, 18(sup1), 37-49. http://dx.doi.org/10.1080/17434440.2021.2013200

Bowlby, J. (1969). Attachment and loss. Volume 1. Basic Books. https://mindsplain.com/wpcontent/uploads/2020/08/ATTACHMENT_AND_L
OSS VOLUME I ATTACHMENT.pdf

Bowlby, J. (1979). The bowlby-ainsworth attachment theory. Behavioral and Brain Sciences, 2(4), 637-638. http://doi.org/10.1017/S0140525X00064955

Bowlby, J. (1982). Attachment and loss: Retrospect and prospect. American Journal of Orthopsychiatry, 52(4), 664–678. https://doi.org/10.1111/j.1939-0025.1982.tb01456.x

Bradeško, L., &Mladenić, D. (2012, October). A survey of chatbot systems through a loebner prize competition. In Proceedings of Slovenian language technologies society eighth conference of language technologies (Vol. 2, pp. 34-37). https://www.researchgate.net/publication/235664166 A Survey of Chatbot Systems through a Loebner Prize Competition

Bradford, D., Ireland, D., McDonald, J., Tan, T., Hatfield-White, E., Regan, T., Kidd, T., & Farr-Wharton, G. (2020). Hear'to help chatbot: Co-development of a chatbot to facilitate participation in tertiary education for students on the autism spectrum and those with related conditions. Final Report. Brisbane: Cooperative Researcher Centre for Living with Autism. https://www.autismcrc.com.au/sites/default/files/reports/3-062_Hear-to-Help-Chatbot Final-Report.pdf

Brandt, L., Liu, S., Heim, C., & Heinz, A. (2022). The effects of social isolation stress and discrimination on mental health. *Translational psychiatry*, *12*(1), 398. https://doi.org/10.1038/s41398-022-02178-4

Brandtzaeg, P. B., &Følstad, A. (2018). Chatbots: User changing needs and motivations. Interactions, 25(5), 38–43. https://doi.org/10.1145/3236669

Braun, V., & Clarke, V. (2012). Thematic analysis. American Psychological Association. https://psycnet.apa.org/doi/10.1037/13620-004

Brogan, D. C., Metoyer, R. A., & Hodgins, J. K. (1998). Dynamically simulated characters in virtual environments. IEEE computer graphics and applications, 18(5), 58-69. http://dx.doi.org/10.1145/259081.259303

Brown, J. E., & Halpern, J. (2021). AI chatbots cannot replace human interactions in the pursuit of more inclusive mental healthcare. SSM-Mental Health, 1, 100017. https://doi.org/10.1016/j.ssmmh.2021.100017

Brubaker, J. R., & Hayes, G. R. (2011). "We will never forget you [online]": An empirical investigation of post-mortem myspace comments. Proceedings of the ACM 2011 conference on Computer Supported Cooperative Work, 123–132. https://doi.org/10.1145/1958824.1958843

Brubaker, J. R., Hayes, G. R., &Dourish, P. (2013). Beyond the grave: Facebook as a site for the expansion of death and mourning. The Information Society, 29(3), 152–163. https://doi.org/10.1080/01972243.2013.777300

Bryant, R. A., Kenny, L., Joscelyne, A., Rawson, N., Maccallum, F., Cahill, C., Hopwood, S., Aderka, I., & Nickerson, A. (2014). Treating prolonged grief disorder: A randomized clinical trial. JAMA psychiatry, 71(12), 1332–1339. https://jamanetwork.com/journals/jamapsychiatry/fullarticle/1917889

Burke, L. A., & Rynearson, E. T. (Eds.). (2022). The Restorative Nature of Ongoing Connections with the Deceased: Exploring Presence Within Absence. Routledge.

Butler, R. N. (1963). The life review: An interpretation of reminiscence in the aged. Psychiatry, 26(1), 65–76. https://doi.org/10.1080/00332747.1963.11023339

Cacciatore, J., Thieleman, K., Fretts, R., & Jackson, L. B. (2021). What is good grief support? Exploring the actors and actions in social support after traumatic grief. *PloS one*, *16*(5), e0252324. https://doi.org/10.1371/journal.pone.0252324

Cage, E., & Troxell-Whitman, Z. (2019). Understanding the reasons, contexts and costs of camouflaging for autistic adults. Journal of Autism and Developmental Disorders, 49(5), 1899–1911. https://doi.org/10.1007/s10803-018-03878-x

Cahn, J. (2017). Chatbot: architecture, design & development. Thesis. University of Pennsylvania.

https://www.academia.edu/37082899/CHATBOT_Architecture_Design_and_D evelopment

Caldarini, G., Jaf, S., & McGarry, K. (2022). A literature survey of recent advances in chatbots. Information, 13(1), 41. https://doi.org/10.3390/info13010041

Callejas, Z., &Griol, D. (2021). Conversational agents for mental health and wellbeing. Dialog Systems: A Perspective from Language, Logic and Computation, 219–244. http://dx.doi.org/10.1007/978-3-030-61438-6_11

Carley, K. (1993). Coding choices for textual analysis: A comparison of content analysis and map analysis. Sociological methodology, 75-126. http://dx.doi.org/10.2307/271007

Carnell, S., Halan, S., Crary, M., Madhavan, A., & Lok, B. (2015). Adapting virtual patient interviews for interviewing skills training of novice healthcare students. In Intelligent Virtual Agents: 15th International Conference, IVA 2015, Delft, The Netherlands, August 26-28, 2015, Proceedings 15 (pp. 50-59). Springer International Publishing. http://dx.doi.org/10.1007/978-3-319-21996-75

Carpenter, C., Osterberg, L., & Sutcliffe, G. (2012). Samht—suicidal avatars for mental health training. In Twenty-fifth international flairs conference. https://aaai.org/papers/flairs-2012-4373/

Carpenter, D. M., Lavigne, J. E., Roberts, C. A., Zacher, J., & Colmenares, E. W. (2018). A review of suicide prevention programs and training policies for pharmacists. Journal of the American Pharmacists Association, 58(5), 522-529. http://dx.doi.org/10.1016/j.japh.2018.05.004

Cassell, J. (2001). Embodied conversational agents: representation and intelligence in user interfaces. AI magazine, 22(4), 67-67. https://doi.org/10.1609/aimag.v22i4.1593

Cassell, J., Gill, A., & Tepper, P. (2007, June). Coordination in conversation and rapport. In EmbodiedNLP '07 - Proceedings of the workshop on Embodied Language Processing (pp. 41-50). Association for Computational Linguistics. http://dx.doi.org/10.3115/1610065.1610071

Catania, F., Beccaluva, E., &Garzotto, F. (2019). The conversational agent "emoty" perceived by people with neurodevelopmental disorders: Is it a human or a machine? International workshop on chatbot research and design, 65–78. http://dx.doi.org/10.1007/s11042-022-14135-w Catania, F., Di Nardo, N., Garzotto, F., &Occhiuto, D. (2019). Emoty: an emotionally sensitive conversational agent for people with neurodevelopmental disorders. In Proceedings of the 52nd hawaii international conference on system sciences. http://dx.doi.org/10.24251/HICSS.2019.244

Cath, C., Wachter, S., Mittelstadt, B., Taddeo, M., &Floridi, L. (2018). Artificial intelligence and the 'good society': the US, EU, and UK approach. Science and engineering ethics, 24, 505-528. https://doi.org/10.1007/s11948-017-9901-7

Chan, S., Li, L., Torous, J., Gratzer, D., &Yellowlees, P. M. (2018). Review of use of asynchronous technologies incorporated in mental health care. Current psychiatry reports, 20, 1-11. https://link.springer.com/article/10.1007/s11920-018-0954-3

Charron, N., Lewis, L., & Craig, M. (2017). A robotic therapy case study: Developing joint attention skills with a student on the autism spectrum. Journal of Educational Technology Systems, 46(1), 137–148. http://dx.doi.org/10.1177/0047239516687721

Chattaraman, V., Kwon, W. S., Gilbert, J. E., & Ross, K. (2019). Should AI-Based, conversational digital assistants employ social-or task-oriented interaction style? A task-competency and reciprocity perspective for older adults. Computers in Human Behavior, 90, 315-330. http://dx.doi.org/10.1016/j.chb.2018.08.048

Chaturvedi, R., Verma, S., Das, R., & Dwivedi, Y. K. (2023). Social companionship with artificial intelligence: Recent trends and future avenues. Technological Forecasting and Social Change, 193. https://doi.org/10.1016/j.techfore.2023.122634

Chayko, M. (2014). Techno-social life: The internet, digital technology, and social connectedness. Sociology Compass, 8(7), 976–991. https://doi.org/10.1111/soc4.12190 Cheng, S.-W., Chang, C.-W., Chang, W.-J., Wang, H.-W., Liang, C.-S., Kishimoto, T., Chang, J. P.-C., Kuo, J. S., & Su, K.-P. (2023). The now and future of chatgpt and gpt in psychiatry. Psychiatry and Clinical Neurosciences. https://doi.org/10.1111/pcn.13588

Cho, M., Lee, S. S., & Lee, K. P. (2019, June). Once a kind friend is now a thing: Understanding how conversational agents at home are forgotten. In Proceedings of the 2019 on Designing Interactive Systems Conference (pp. 1557-1569). http://dx.doi.org/10.1145/3322276.3322332

Choudhary, P., Devi, R., Naz, S., & Rai, K. (2021). Social connectedness, spirituality, quality of life, and hopelessness among older adults. Annals of the Romanian Society for Cell Biology, 25(6), 12241–12253. https://www.researchgate.net/publication/352881812_Social_Connectedness_S <a href="pirituality_Publication_Publicat

Christoforakos L., Feicht N., Hinkofer, S., Löscher, A., Schlegl, S.F., & Diefenbach, S. (2021) Connect With Me. Exploring Influencing Factors in a Human-Technology Relationship Based on Regular Chatbot Use. Frontiers in Digital Health, Sec. Human Factors and Digital Health, 3. https://doi.org/10.3389/fdgth.2021.689999

Ciechanowski, L., Przegalinska, A., Magnuski, M., & Gloor, P. (2019). In the shades of the uncanny valley: An experimental study of human–chatbot interaction. Future Generation Computer Systems, 92, 539-548. http://dx.doi.org/10.1016/j.future.2018.01.055

Clare, L. (2003). Managing threats to self: Awareness in early stage Alzheimer's disease. Social Science & Medicine, 57(6), 1017–1029. https://doi.org/10.1016/S0277-9536(02)00476-8

Clarke, V., Braun, V., & Hayfield, N. (2015). Thematic analysis. Qualitative psychology: A practical guide to research methods, 222-248. Sage Publications Ltd. https://uwe-repository.worktribe.com/output/841297

Clutterbuck, R. A., Shah, P., Leung, H. S., Callan, M. J., Gjersoe, N., & Livingston, L. A. (2021). Anthropomorphic tendencies in autism: A conceptual replication and extension of White and Remington (2019) and preliminary development of a novel anthropomorphism measure. Autism, 13623613211039387. https://doi.org/10.1177/13623613211039387

Coghlan, S., Leins, K., Sheldrick, S., Cheong, M., Gooding, P., & D'Alfonso, S. (2023). To chat or bot to chat: Ethical issues with using chatbots in mental health. Digital Health, 9. https://doi.org/10.1177/20552076231183542

Constantino, R. E., Sekula, L. K., & Rubinstein, E. N. (2001). Group intervention for widowed survivors of suicide. Suicide and Life-Threatening Behavior, 31(4), 428–441. http://doi.org/10.1521/suli.31.4.428.22044

Cooper, A., & Ireland, D. (2018). Designing a chat-bot for non-verbal children on the autism spectrum. Stud Health Technol Inform, 252, 63–68. https://pubmed.ncbi.nlm.nih.gov/30040684/

Corbett, C. F., Wright, P. J., Jones, K., & Parmer, M. (2021). Voice-activated virtual home assistant use and social isolation and loneliness among older adults: mini review. *Frontiers in Public Health*, *9*, 742012.

Cordar, A., Borish, M., Foster, A., & Lok, B. (2014). Building virtual humans with back stories: Training interpersonal communication skills in medical students. In Intelligent Virtual Agents: 14th International Conference, IVA 2014, Boston, MA, USA, August 27-29, 2014. Proceedings 14 (pp. 144-153). Springer International Publishing.

Courgeon, M., Martin, J. C., & Jacquemin, C. (2008). Marc: a multimodal affective and reactive character. In Proceedings of the 1st Workshop on AFFective Interaction in Natural Environments (Vol. 20, No. 2.5, p. 1). http://dx.doi.org/10.1007/s12193-013-0124-1

Crete-Nishihata, M., Baecker, R. M., Massimi, M., Ptak, D., Campigotto, R., Kaufman, L. D., Brickman, A. M., Turner, G. R., Steinerman, J. R., & Black, S. E. (2012). Reconstructing the past: Personal memory technologies are not just personal and not just for memory. Human–Computer Interaction, 27(1-2), 92–123. https://psycnet.apa.org/record/2012-10196-005

Croes, E. A., &Antheunis, M. L. (2021). Can we be friends with mitsuku? A longitudinal study on the process of relationship formation between humans and a social chatbot. Journal of Social and Personal Relationships, 38(1), 279–300. http://dx.doi.org/10.1177/0265407520959463

Crompton, C. J., Hallett, S., Ropar, D., Flynn, E., & Fletcher-Watson, S. (2020). 'I never realised everybody felt as happy as I do when I am around autistic people': A thematic analysis of autistic adults' relationships with autistic and neurotypical friends and family. *Autism*, 24(6), 1438-1448.

Crompton, C.J., Ropar, D., Evans-Williams, C.V., Flynn, E.G., & Fletcher-Watson, S. (2020). Autistic peer-to-peer information transfer is highly effective. Autism, 24(7), 1704–1712. http://dx.doi.org/10.1177/1362361320919286

Cuevas, P. E. G., Davidson, P. M., Mejilla, J. L., & Rodney, T. W. (2020). Reminiscence therapy for older adults with Alzheimer's disease: A literature review. International Journal of Mental Health Nursing, 29(3), 364–371. https://doi.org/10.1111/inm.12692

Davis,S. (2018). Robots and autism: How children with autism spectrum disorder perceive social robots. Undergraduate Thesis. Lehigh University. https://core.ac.uk/download/pdf/228672415.pdf

De Carolis, B., Macchiarulo, N., D'Errico, F., &Palestra, G. (2021, October). Social robots to support gestural development in children with autism spectrum disorder. In Companion Publication of the 2021 International Conference on Multimodal Interaction (pp. 376-380). https://doi.org/10.1145/3461615.3485421

De Gennaro, M., Krumhuber, E. G., & Lucas, G. (2020). Effectiveness of an empathic chatbot in combating adverse effects of social exclusion on mood. Frontiers in psychology, 10, 3061. https://doi.org/10.3389%2Ffpsyg.2019.03061

De Jong Gierveld, J., & Van Tilburg, T. (2010). The De Jong Gierveld short scales for emotional and social loneliness: tested on data from 7 countries in the UN generations and gender surveys. European journal of ageing, 7, 121-130.

De Vries, B., & Rutherford, J. (2004). Memorializing loved ones on the world wide web. OMEGA-Journal of Death and Dying, 49(1), 5–26. https://doi.org/10.2190/DR46-RU57-UY6P-NEWM

Del Giacco, L., Anguera, M. T., &Salcuni, S. (2020). The action of verbal and non-verbal communication in the therapeutic alliance construction: A mixed methods approach to assess the initial interactions with depressed patients. Frontiers in Psychology, 11, 234. https://doi.org/10.3389/fpsyg.2020.00234

Dixon, E., Piper, A. M., & Lazar, A. (2021). "Taking care of myself as long as I can": How people with dementia configure self-management systems. Proceedings of the 2021 CHI Conference on Human Factors in Computing Systems. https://doi.org/10.1145/3411764.3445225

Dobler, R. (2009). Ghosts in the machine: Mourning the myspace dead. Folklore and the internet: Vernacular expression in a digital world, 175–193. https://doi.org/10.2307/j.ctt4cgrx5.11

Dominick, S. A., Irvine, A. B., Beauchamp, N., Seeley, J. R., Nolen-Hoeksema, S., Doka, K. J., &Bonanno, G. A. (2010). An internet tool to normalize grief. OMEGA-Journal of Death and Dying, 60(1), 71–87. https://doi.org/10.2190/OM.60.1.d

Doumanis, I., & Smith, S. (2015). A framework for research in gamified mobile guide applications using embodied conversational agents (ECAs). International Journal of Serious Games, 2(3), 21-40. http://dx.doi.org/10.17083/ijsg.v2i3.79

DuruAşiret, G., &Kapucu, S. (2016). The effect of reminiscence therapy on cognition, depression, and activities of daily living for patients with Alzheimer disease. Journal of Geriatric Psychiatry and Neurology, 29(1), 31–37. http://dx.doi.org/10.1177/0891988715598233

Edwards, A., Edwards, C., Westerman, D., & Spence, P. R. (2019). Initial expectations, interactions, and beyond with social robots. Computers in Human Behaviour, 90, 308–314. http://dx.doi.org/10.1016/j.chb.2018.08.042

Efstratiou, R., Karatsioras, C., Papadopoulou, M., Papadopoulou, C., Lytridis, C., Bazinas, C., ... &Kaburlasos, V. G. (2021). Teaching daily life skills in autism spectrum disorder (ASD) interventions using the social robot pepper. In Robotics in Education: Methodologies and Technologies (pp. 86-97). Springer International Publishing. https://doi.org/10.1007/978-3-030-67411-3 8

Elder, A. (2020). Conversation from beyond the grave? A neo-Confucian ethics of chatbots of the dead. Journal of Applied Philosophy, page 100012. https://doi.org/10.1111/japp.12369

Erdost, T. (2004). Trust and self-disclosure in the context of computer mediated communication (Unpublishedmaster'sthesis). Middle East Technical University. https://open.metu.edu.tr/handle/11511/14126

Even, C., Hammann, T., Heyl, V., Rietz, C., Wahl, H.-W., Zentel, P., &Schlomann, A. (2022). Benefits and challenges of conversational agents in older adults: A scoping review. Zeitschrift für Gerontologie und Geriatrie, 55(5), 381–387. http://dx.doi.org/10.1007/s00391-022-02085-9

Fabry, R. E., & Alfano, M. (2024). The affective scaffolding of grief in the digital age: the case of deathbots. Topoi, 1-13. http://dx.doi.org/10.1007/s11245-023-09995-2

Fazio, S., Pace, D., Flinner, J., & Kallmyer, B. (2018). The fundamentals of person-centered care for individuals with dementia. The Gerontologist, 58(suppl 1), S10–S19. http://dx.doi.org/10.1093/geront/gnx122

Finlay, C. J., & Krueger, G. (2011). A space for mothers: Grief as identity construction on memorial websites created by sids parents. OMEGA-Journal of Death and Dying, 63(1), 21–44. https://doi.org/10.2190/OM.63.1.b

Fiore, D., Baldauf, M., & Thiel, C. (2019). "Forgot your password again?" acceptance and user experience of a chatbot for in-company IT support. In Proceedings of the 18th International Conference on Mobile and Ubiquitous Multimedia, 1-11, ACM, New York. https://doi.org/10.1145/3365610.3365617

Fiske, A., Henningsen, P., &Buyx, A. (2019). Your robot therapist will see you now: ethical implications of embodied artificial intelligence in psychiatry, psychology, and psychotherapy. Journal of medical Internet research, 21(5), e13216. http://dx.doi.org/10.2196/13216

Fitzpatrick, K. K., Darcy, A., & Vierhile, M. (2017). Delivering cognitive behavior therapy to young adults with symptoms of depression and anxiety using a fully automated conversational agent (Woebot): a randomized controlled trial. JMIR Mental Health, 4(2), e19. http://dx.doi.org/10.2196/mental.7785

trial. JMIR Mental Health, 4(2), e7785. http://dx.doi.org/10.2196/mental.7785

Fitzpatrick, S. J., Lamb, H., Stewart, E., Gulliver, A., Morse, A. R., Giugni, M., & Banfield, M. (2023). Co-ideation and co-design in co-creation research: Reflections from the 'co-creating safe spaces' project. Health Expectations. http://dx.doi.org/10.1111/hex.13785

Fletcher-Watson, S., & Bird, G. (2020). Autism and empathy: What are the real links?. *Autism*, 24(1), 3-6.

Floridi, L., & Chiriatti, M. (2020). Gpt-3: Its nature, scope, limits, and consequences. Minds and Machines, 30(4), 681–694. https://doi.org/10.1007/s11023-020-09548-1

Følstad, A., Nordheim, C. B., &Bjørkli, C. A. (2018). What makes users trust a chatbot for customer service? An exploratory interview study. In Proceedings of

the International Conference on Internet Science, 194-208. Springer, Cham. http://dx.doi.org/10.1007/978-3-030-01437-7_16

Følstad, A., Skjuve, M., &Brandtzaeg, P. B. (2019). Different chatbots for different purposes: towards a typology of chatbots to understand interaction design. In Internet Science: INSCI 2018 International Workshops, St. Petersburg, Russia, October 24–26, 2018, Revised Selected Papers 5 (pp. 145-156). Springer International Publishing. http://dx.doi.org/10.1007/978-3-030-17705-8 13

Foot, K., Warnick, B., & Schneider, S. M. (2005). Web-based memorializing after September 11: Toward a conceptual framework. Journal of Computer-Mediated Communication, 11(1), 72–96. https://doi.org/10.1111/j.1083-6101.2006.tb00304.x

Forman, A. E., Kern, R., & Gil-Egui, G. (2012). Death and mourning as sources of community participation in online social networks: Rip pages in Facebook. First Monday, 17(9). https://doi.org/10.5210/fm.v0i0.3935

FoschVillaronga, E. (2019). "I Love You," Said the Robot: Boundaries of the Use of Emotions in Human-Robot Interactions. Emotional Design in Human-Robot Interaction: Theory, Methods and Applications, 93-110. http://dx.doi.org/10.1007/978-3-319-96722-6 6

Fox, J., & Gambino, A. (2021). Relationship development with humanoid social robots: Applying interpersonal theories to human–robot interaction. Cyberpsychology, Behaviour, and Social Networking, 24(5), 294–299. http://dx.doi.org/10.1089/cyber.2020.0181

Frank, E., & Luz, A. (2024). Impact of the transition on mental health.

Fryer, L. K., Coniam, D., Carpenter, R., & Lăpușneanu, D. (2020). Bots for language learning now: Current and future directions. Language Learning & Technology, 24(2), 8–22. Retrieved from http://hdl.handle.net/10125/44719

Fukui, T., Sano, M., Tanaka, A., Suzuki, M., Kim, S., Agarie, H., Fukatsu, R., Nishimaki, K., Nakajima, Y., & Wada, M. (2018). Older adolescents and young adults with autism spectrum disorder have difficulty chaining motor acts when performing prehension movements compared to typically developing peers. Frontiers in Human Neuroscience, 12, 430. https://doi.org/10.3389/fnhum.2018.00430

Fulmer, R., Joerin, A., Gentile, B., Lakerink, L., &Rauws, M. (2018). Using psychological artificial intelligence (Tess) to relieve symptoms of depression and anxiety: Randomized controlled trial. JMIR Mental Health, 5(4), e64. https://mental.jmir.org/2018/4/e64

Gabrielli, S., Rizzi, S., Bassi, G., Carbone, S., Maimone, R., Marchesoni, M., & Forti, S. (2021). Engagement and effectiveness of a healthy-coping intervention via chatbot for university students during the COVID-19 pandemic: mixed methods proof-of-concept study. JMIR mHealth and uHealth, 9(5), e27965. https://doi.org/10.2196/27965

Gagnon-Roy, M., Bourget, A., Stocco, S., Courchesne, A.-C. L., Kuhne, N., & Provencher, V. (2017). Assistive technology addressing safety issues in dementia: A scoping review. The American Journal of Occupational Therapy, 71(5), 7105190020p1–7105190020p10. http://dx.doi.org/10.5014/ajot.2017.025817

Gambino, A., Fox, J., & Ratan, R. A. (2020). Building a stronger casa: Extending the computers are social actors paradigm. Human-Machine Communication, 1(1), 5. http://dx.doi.org/10.30658/hmc.1.5

García-Casal, J. A., Loizeau, A., Csipke, E., Franco-Martín, M., Perea-Bartolomé, M. V., & Orrell, M. (2017). Computer-based cognitive interventions for people living with dementia: A systematic literature review and meta-analysis. Aging & mental health, 21(5), 454–467. http://dx.doi.org/10.1186/s12877-023-03941-y

Gardiner, P. M., McCue, K. D., Negash, L. M., Cheng, T., White, L. F., Yinusa-Nyahkoon, L., ... &Bickmore, T. W. (2017). Engaging women with an embodied conversational agent to deliver mindfulness and lifestyle recommendations: A feasibility randomized control trial. Patient education and counseling, 100(9), 1720-1729. https://doi.org/10.1016/j.pec.2017.04.015

Garzotto, F., Gianotti, M., Patti, A., Pentimalli, F., &Vona, F. (2024). Empowering persons with Autism through cross-reality and conversational agents. IEEE Transactions on Visualization and Computer Graphics. http://dx.doi.org/10.1109/TVCG.2024.3372110

Getty, E., Cobb, J., Gabeler, M., Nelson, C., Weng, E., & Hancock, J. (2011). I said your name in an empty room: Grieving and continuing bonds on Facebook. Proceedings of the SIGCHI Conference on Human Factors in Computing Systems, 997–1000. https://doi.org/10.1145/1978942.1979091

Ghafurian, M., Hoey, J., Dautenhahn, K. (2021). Social robots for the care of persons with dementia: a systematic review. ACM Trans. Hum. Robot Interact. (THRI)10(4), 1–31. http://dx.doi.org/10.1145/3469653

Ghanem, K. G., Hutton, H. E., Zenilman, J. M., Zimba, R., & Erbelding, E. J. (2005). Audio computer assisted self interview and face to face interview modes in assessing response bias among STD clinic patients. Sexually Transmitted Infections, 81(5), 421–425. . https://doi.org/10.1136/sti.2004.013193

Gianotti, M., Patti, A., Vona, F., Pentimalli, F., Barbieri, J., &Garzotto, F. (2023, July). Multimodal interaction for persons with Autism: The 5A case study. In International Conference on Human-Computer Interaction (pp. 581-600). Cham: Springer Nature Switzerland. http://dx.doi.org/10.1007/978-3-031-35681-0-38

Gilbert, R. L., & Forney, A. (2015). Can avatars pass the Turing test? Intelligent agent perception in a 3D virtual environment. International Journal of Human-Computer Studies, 73, 30-36. http://dx.doi.org/10.1016/j.ijhcs.2014.08.001

Gonzalez-Gonzalez, C.S., Violant-Holz, V., & Gil-Iranzo, R.M. (2021). Social robots in hospitals: a systematic review. Appl. Sci. 11(13), 5976. https://doi.org/10.3390/app11135976

Goodman, B., & Flaxman, F. (2017). European Union Regulations on Algorithmic Decision-Making and a "Right to Explanation". AI Magazine, 38 (3), 50-57. https://doi.org/10.1609/aimag.v38i3.2741

Grandinetti, J., DeAtley, T., &Bruinsma, J. (2020). The dead speak: Big data and digitally mediated death. AoIR Selected Papers of Internet Research. https://doi.org/10.5210/spir.v2020i0.11122

Granovetter, M. S. (1973). The strength of weak ties. American ournal of sociology, 78(6), 1360-1380.https://www.jstor.org/stable/2776392

Grant, J. (2019). Unfinished business: The impact of denial on the grieving process. What Happens When the Analyst Dies, 34–46. Routledge.

Gratch, J., Artstein, R., Lucas, G. M., Stratou, G., Scherer, S., Nazarian, A., Wood, R., Boberg, J., Devault, D., Marsella, S., Traum, D., Rizzo, A., &Morency, L.P. (2014). The distress analysis interview corpus of human and computer interviews. In Lrec, 3123–3128. http://www.lrec-conf.org/proceedings/lrec2014/pdf/508_Paper.pdf

Grice, H. P. (1975). Logic and conversation. In Speech acts (pp. 41–58). Brill. https://doi.org/10.1163/9789004368811_003

Grudin, J., & Jacques, R. (2019, May). Chatbots, humbots, and the quest for artificial general intelligence. In Proceedings of the 2019 CHI conference on human factors in computing systems (pp. 1-11). https://doi.org/10.1145/3290605.3300439

Grundström, J., Konttinen, H., Berg, N., &Kiviruusu, O. (2021). Associations between relationship status and mental well-being in different life phases from young to middle adulthood. SSM - Population Health, 14, 100774. https://doi.org/10.1016/j.ssmph.2021.100774

Gulotta, R., Gerritsen, D. B., Kelliher, A., &Forlizzi, J. (2016, June). Engaging with death online: An analysis of systems that support legacy-making, bereavement, and remembrance. In Proceedings of the 2016 ACM Conference on Designing Interactive Systems (pp. 736-748). http://dx.doi.org/10.1145/2901790.2901802

Gudala, M., Ross, M. E. T., Mogalla, S., Lyons, M., Ramaswamy, P., & Roberts, K. (2022). Benefits of, barriers to, and needs for an artificial intelligence—powered medication information voice chatbot for older adults: interview study with geriatrics experts. JMIR aging, 5(2), e32169. https://doi.org/10.2196/32169

Guo, Y. R., Goh, D. H. L., & Luyt, B. (2014, September). Using affective embodied agents in information literacy education. In IEEE/ACM Joint Conference on Digital Libraries (pp. 389-398). IEEE. http://dx.doi.org/10.1109/JCDL.2014.6970195

Guzman, A.L. (2018). What is human-machine communication, anyway. Human-machine communication: Rethinking communication, technology, and ourselves, 1–28.

Halan, S., Sia, I., Crary, M., & Lok, B. (2015). Exploring the effects of healthcare students creating virtual patients for empathy training. In Intelligent Virtual Agents: 15th International Conference, IVA 2015, Delft, The Netherlands, August 26-28, 2015, Proceedings 15 (pp. 239-249). Springer International Publishing. http://dx.doi.org/10.1007/978-3-319-21996-7 24

Happe', F.G. (1995). Understanding minds and metaphors: Insights from the study of figurative language in autism. Metaphor and symbol, 10(4), 275–295. https://psycnet.apa.org/doi/10.1207/s15327868ms1004_3

Hartholt, A., Mozgai, S., Fast, E., Liewer, M., Reilly, A., Whitcup, W., & Rizzo, A.S. (2019). Virtual humans in augmented reality: A first step towards real-world embedded virtual roleplayers. In Proceedings of the 7th international conference on human-agent interaction, 205–207. http://dx.doi.org/10.1145/3349537.3352766

Hayashi, Y. (2015, October). Influence of social communication skills on collaborative learning with a pedagogical agent: Investigation based on the autism-spectrum quotient. In Proceedings of the 3rd international conference on human-agentinteraction (pp. 135-138). https://doi.org/10.1145/2814940.2814946

Hedtke, L., &Winslade, J. (2016). Remembering lives: Conversations with the dying and the bereaved. Routledge.

Hewson, H., Galbraith, N., Jones, C., & Heath, G. (2023). The impact of continuing bonds following bereavement: A systematic review. *Death Studies*, 48(10), 1001–1014. https://doi.org/10.1080/07481187.2023.2223593

Hogger, L., Fudge, N., &Swinglehurst, D. (2023). Supporting Inclusion and Participation for People Living With Dementia: Ethnographic and Participatory Research Methods. International Journal of Qualitative Methods, 22, 16094069231184773. https://doi.org/10.1177/16094069231184773

Holland, J. M., Plant, C. P., Klingspon, K. L., &Neimeyer, R. A. (2020). Bereavement-related regrets and unfinished business with the deceased. Death studies, 44(1), 42–47. https://doi.org/10.1080/07481187.2018.1521106

Hollenbaugh, E. E., & Ferris, A. L. (2014). Facebook self-disclosure: Examining the role of traits, social cohesion, and motives. Computers in Human Behaviour, 30, 50–58. http://dx.doi.org/10.1016/j.chb.2013.07.055Replika (2017). In https://replika.ai.

Hollinda, K., Daum, C., Rincón, A. M. R., & Liu, L. (2023). Digital storytelling with persons living with dementia: Elements of facilitation, communication, building relationships, and using technology [PMID: 36452997]. Journal of Applied Gerontology, 42(5), 852–861. https://doi.org/10.1177/07334648221142015

Homans, G. C. (1958). Social behavior as exchange. American journal of sociology, 63(6), 597-606. http://www.jstor.org/stable/2772990?origin=JSTOR-pdf

Houben, M., van As, N., Sawhney, N., Unbehaun, D., & Lee, M. (2023). Participatory design for whom? designing conversational user interfaces for sensitive settings and vulnerable populations. Proceedings of the 5th International Conference on Conversational User Interfaces. https://doi.org/10.1145/3571884.3597439

Hoy, M. B. (2018). Alexa, Siri, Cortana, and more: an introduction to voice assistants. Medical reference services quarterly, 37(1), 81-88. https://doi.org/10.1080/02763869.2018.1404391

Huang, F.-Y., Hsu, A.-L., Hsu, L.-M., Tsai, J.-S., Huang, C.-M., Chao, Y.-P., Hwang, T.-J., & Wu, C. W. (2019). Mindfulness improves emotion regulation and executive control on bereaved individuals: an fmri study. Frontiers in Human Neuroscience, 541. https://doi.org/10.3389/fnhum.2018.00541

Huang, J.-X., Lee, K.-S., Kwon, O.-W., & Kim, Y.-K. (2017). A chatbot for a dialogue-based second language learning system. CALL in a Climate of Change: Adapting to Turbulent Global Conditions—Short Papers from EUROCALL, 151–156. http://dx.doi.org/10.14705/rpnet.2017.eurocall2017.705

Huang, Y. K., Hsieh, C. H., Li, W., Chang, C., & Fan, W. S. (2019, December). Preliminary study of factors affecting the spread and resistance of consumers' use of AI customer service. In Proceedings of the 2019 2nd Artificial Intelligence and Cloud Computing Conference, 132-138, ACM, New York. http://dx.doi.org/10.1145/3375959.3375968

Hussain, S., Sianaki, O. A., & Ababneh, N. (2019). A survey on conversational agents/chatbots classification and design techniques. In Workshops of the International Conference on Advanced Information Networking and Applications, 946-956. Springer, Cham. http://dx.doi.org/10.1007/978-3-030-15035-8 93

Inkster, B., Sarda, S., & Subramanian, V. (2018). An empathy-driven, conversational artificial intelligence agent (wysa) for digital mental well-being:

real-world data evaluation mixed-methods study. JMIR mHealth and uHealth, 6(11), e12106. https://doi.org/10.2196/12106

Ischen, C., Araujo, T., Voorveld, H., van Noort, G., & Smit, E. (2019). Privacy concerns in chatbot interactions. In International workshop on chatbot research and design, 34–48. http://dx.doi.org/10.1007/978-3-030-39540-7 3

Ismail, L. I., Shamsudin, S., Yussof, H., Hanapiah, F. A., &Zahari, N. I. (2012). Robot-based intervention program for autistic children with humanoid robot nao: initial response in stereotyped behaviour. Procedia Engineering, 41, 1441–1447.

Ito, M., Bentley, K. H., Oe, Y., Nakajima, S., Fujisato, H., Kato, N., Miyamae, M., Kanie, A., Horikoshi, M., & Barlow, D. H. (2015). Assessing depression related severity and functional impairment: the Overall Depression Severity and Impairment Scale (ODSIS). PloS one, 10(4), e0122969. https://doi.org/10.1371/journal.pone.0122969

Jacobs, K. A. (2023). AI companionship and loneliness. Humanizing Artificial Intelligence: Psychoanalysis and the Problem of Control, 51.

Jain, M., Kumar, P., Kota, R., & Patel, S. N. (2018). Evaluating and informing the design of chatbots. Proceedings of the 2018 designing interactive systems conference, 895–906. http://dx.doi.org/10.1145/3196709.3196735

Jian, J. Y., Bisantz, A. M., & Drury, C. G. (2000). Foundations for an empirically determined scale of trust in automated systems. International journal of cognitive ergonomics, 4(1), 53-71. http://dx.doi.org/10.1207/S15327566IJCE0401 04

Jian, J. Y., Bisantz, A. M., & Drury, C. G. (2000). Foundations for an empirically determined scale of trust in automated systems. International journal of cognitive ergonomics, 4(1), 53-71.

Jiang, C. (2020). Memoron: How to provide support to people in grief with ai technology? [Master's thesis, UniversitatPolitècnica de Catalunya]. UniversitatPolitècnica de Catalunya. http://hdl.handle.net/2117/332451

Jiang, H., Zhang, X., Cao, X., Kabbara, J., & Roy, D. (2023). PersonaLLM: Investigating the ability of gpt-3.5 to express personality traits and gender differences. arXiv preprint arXiv:2305.02547. https://doi.org/10.48550/arXiv.2305.02547

Jiménez-Alonso, B., &Brescó de Luna, I. (2022). Griefbots. A new way of communicating with the dead? Integrative Psychological and Behavioral Science, 1–16. https://doi.org/10.1007/s12124-022-09687-3

Jiménez-Alonso, B., &Brescó de Luna, I. (2023). Griefbots. A New Way of Communicating with the Dead?. Integrative Psychological And Behavioral Science, 57(2), 466-481. http://doi.org/10.1007/s12124-022-09679-3

Jiménez, S., Favela, J., Quezada, Á., Alanis, A., Castillo, E., & Villegas, E. (2022). Alexa to support patients with dementia and family caregivers in challenging behaviors. World Conference on Information Systems and Technologies, 336–345. https://doi.org/10.1007/978-3-031-04826-5 33

Jin, S. A. A. (2010). The effects of incorporating a virtual agent in a computer-aided test designed for stress management education: The mediating role of enjoyment. Computers in Human Behavior, 26(3), 443-451. https://doi.org/10.1016/j.chb.2009.12.003

Jones, C., Sung, B., & Moyle, W. (2015). Assessing engagement in people with dementia: A new approach to assessment using video analysis. Archives of Psychiatric Nursing, 29(6), 377–382. http://dx.doi.org/10.1016/j.apnu.2015.06.019

Jones, R. (2015). Personhood and Social Robotics: A psychological consideration. Routledge.

Jurafsky, D., & Martin, J. H. (2000). Speech and Language Processing: An Introduction to Natural Language Processing, Computational Linguistics, and Speech Recognition. Prentice Hall.

https://www.researchgate.net/publication/200111340 Speech and Language Proc

essing An Introduction to Natural Language Processing Computational Lingui stics and Speech Recognition

Kaminka, G.A. (2013). Curing robot autism: A challenge. Proceedings of the 2013 international conference on autonomous agents and multi-agent systems, 801–804. https://dl.acm.org/doi/10.5555/2484920.2485047

Kang, H., & Kim, K.J. (2020). Feeling connected to smart objects? A moderated mediation model of locus of agency, anthropomorphism, and sense of connectedness. In International Journal of Human-Computer Studies, 133, 45-55. http://dx.doi.org/10.1016/j.ijhcs.2019.09.002

Kang, S. H., &Gratch, J. (2014). Exploring users' social responses to computer counseling interviewers' behavior. Computers in Human Behavior, 34, 120-130. http://dx.doi.org/10.1016/j.chb.2014.01.006

Kavitha, M., Roobini, S., Prasanth, A., & Sujaritha, M. (2023). Systematic view and impact of artificial intelligence in smart healthcare systems, principles, challenges and applications. Machine Learning and Artificial Intelligence in Healthcare Systems, 25-56. http://dx.doi.org/10.3233/978-1-61499-121-2-202

Klass, D., Silverman, P. R., & Nickman, S. (2014). *Continuing bonds: New understandings of grief.* Taylor & Francis.

Klingspon, K. L., Holland, J. M., Neimeyer, R. A., & Lichtenthal, W. G. (2015). Unfinished business in bereavement. Death Studies, 39(7), 387–398. https://doi.org/10.1080/07481187.2015.1029143

Kobayashi, M., Kosugi, A., Takagi, H., Nemoto, M., Nemoto, K., Arai, T., & Yamada, Y. (2019). Effects of age-related cognitive decline on elderly user interactions with voice-based dialogue systems. Human-Computer Interaction—INTERACT 2019: 17th IFIP TC 13 International Conference, Paphos, Cyprus, September 2–6, 2019, Proceedings, Part IV 17, 53–74. http://dx.doi.org/10.1007/978-3-030-29390-1 4

Kohli, M., Hank, K., & Künemund, H. (2009). The social connectedness of older Europeans: patterns, dynamics and contexts. Journal of European Social Policy, 19(4), 327-340. http://dx.doi.org/10.1177/1350506809341514

Kohut, H. (2009). How does analysis cure?. University of Chicago Press.

Korre, D., & Robertson, J. (2023). Usability evaluation of spoken humanoid embodied conversational agents in mobile serious games. arXiv preprint arXiv:2309.07773. https://doi.org/10.48550/arXiv.2309.07773

Kovac, S. H., & Range, L. M. (2000). Writing projects: Lessening undergraduates' unique suicidal bereavement. Suicide and Life-Threatening Behavior, 30(1), 50–60. https://pubmed.ncbi.nlm.nih.gov/10782718/

Kretzschmar, K., Tyroll, H., Pavarini, G., Manzini, A., Singh, I., & Group, N. Y. P. A. (2019). Can your phone be your therapist? Young people's ethical perspectives on the use of fully automated conversational agents (chatbots) in mental health support. Biomedical informatics insights, 11, 1178222619829083. http://dx.doi.org/10.1177/1178222619829083

Krueger, J., & Osler, L. (2022). Communing with the dead online: chatbots, grief, and continuing bonds. Journal of Consciousness Studies, 29(9-10), 222–252. https://doi.org/10.53765/20512201.29.9.222

Kübler-Ross, E. (1973). On death and dying. Routledge.

Kumar, R., & Ali, M. M. (2020). A review on chatbot design and implementation techniques. Int. J. Eng. Technol, 7(11), 2791-2800. https://www.researchgate.net/publication/340793645 A Review on Chatbot Design and Implementation Techniques

Kwan, C., Gitimoghaddam, M., & Collet, J. P. (2020). Effects of social isolation and loneliness in children with neurodevelopmental disabilities: A scoping review. *Brain sciences*, 10(11), 786. https://doi.org/10.3390/brainsci10110786

Lahiri, U., Bekele, E., Dohrmann, E., Warren, Z., & Sarkar, N. (2015). A physiologically informed virtual reality based social communication system for individuals with autism. Journal of autism and developmental disorders, 45(4), 919–931. http://dx.doi.org/10.1007/s10803-014-2240-5

Lamm, C., Bukowski, H., & Silani, G. (2016). From shared to distinct self-other representations in empathy: evidence from neurotypical function and sociocognitive disorders. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 371(1686), 20150083.

Lancioni, G. E., Olivetti Belardinelli, M., Singh, N. N., O'Reilly, M. F., Sigafoos, J., & Alberti, G. (2019). Recent technology-aided programs to support adaptive responses, functional activities, and leisure and communication in people with significant disabilities. Frontiers in Neurology, 10, 643. https://doi.org/10.3389/fneur.2019.00643

Landström, M., & Mustafa, N. (2018). Developing an artificially intelligent tool for grief recovery. [Master's thesis, KTH Royal Institute of Technology]. KTH Royal Institute of Technology. https://kth.diva.portal.org/smash/get/diva2:1211163/FULLTEXT01.pdf Lani, J.A. (2010). Quality of Life Index (QLI).

Lankton, N. K., McKnight, D. H., & Tripp, J. (2015). Technology, humanness, and trust: Rethinking trust in technology. Journal of the Association for Information Systems, 16(10), 1.

Laugwitz, B., Held, T., &Schrepp, M. (2008). Construction and evaluation of a user experience questionnaire. In HCI and Usability for Education and Work: 4th Symposium of the Workgroup Human-Computer Interaction and Usability Engineering of the Austrian Computer Society, USAB 2008, Graz, Austria, November 20-21, 2008. Proceedings 4 (pp. 63-76). Springer Berlin Heidelberg. http://dx.doi.org/10.1007/978-3-540-89350-9 6

Laugwitz, B., Held, T., &Schrepp, M. (2008). Construction and evaluation of a user experience questionnaire. In HCI and Usability for Education and Work: 4th Symposium of the Workgroup Human-Computer Interaction and Usability Engineering of the Austrian Computer Society, USAB 2008, Graz, Austria, November 20-21, 2008. Proceedings 4 (pp. 63-76). Springer Berlin Heidelberg.

Lawson, W. (2006). Friendships: the aspie way. Jessica Kingsley Publishers.

Lee, B., Kwon, O., Lee, I., & Kim, J. (2017). Companionship with smart home devices: The impact of social connectedness and interaction types on perceived social support and companionship in smart homes. Computers in Human Behavior, 75, 922-934. http://dx.doi.org/10.1016/j.chb.2017.06.031

Lee, H., Chung, M., Kim, H., & Nam, E. (2022). The effect of cognitive function health care using artificial intelligence robots for older adults: systematic review and meta-analysis. JMIR Ageing. 5(2), e38896. https://doi.org/10.2196/38896

Lee, K.M., Jung, Y., Kim, J., & Kim, S.R. (2006). Are physically embodied social agents better than disembodied social agents?: The effects of physical embodiment, tactile interaction, and people's loneliness in human–robot interaction. International journal of human-computer studies, 64(10), 962-973. http://dx.doi.org/10.1016/j.ijhcs.2006.05.002

Lee, R. M., & Robbins, S. B. (1995). Measuring belongingness: The social connectedness and the social assurance scales. Journal of counseling psychology, 42(2), 232. http://dx.doi.org/10.1037/0022-0167.42.2.232

Lee, R. M., & Robbins, S. B. (2000). Understanding social connectedness in college women and men. Journal of Counseling& Development, 78(4), 484-491. https://psycnet.apa.org/doi/10.1002/j.1556-6676.2000.tb01932.x

Lee, R. M., Draper, M., & Lee, S. (2001). Social connectedness, dysfunctional interpersonal behaviors, and psychological distress: Testing a mediator

model. Journal of counseling psychology, 48(3), 310. http://dx.doi.org/10.1037/0022-0167.48.3.310

Lee, R. M., Keough, K. A., & Sexton, J. D. (2002). Social connectedness, social appraisal, and perceived stress in college women and men. Journal of Counseling& Development, 80(3), 355-361. http://dx.doi.org/10.1002/j.1556-6678.2002.tb00200.x

Lee, Y. C., Yamashita, N., Huang, Y., & Fu, W. (2020). "I Hear You, I Feel You": Encouraging deep self-disclosure through a chatbot. In Proceedings of the 2020 CHI conference on human factors in computing systems, 1-12, ACM, New York. http://doi.org/10.1145/3313831.3376175

Leedham, A., Thompson, A.R., Smith, R., & Freeth, M. (2020). 'I was exhausted trying to figure it out': The experiences of females receiving an autism diagnosis in middle to late adulthood. Autism, 24(1), 135–146. https://doi.org/10.1177/1362361319853442

Liew, T. W., & Tan, S. M. (2016). The effects of positive and negative mood on cognition and motivation in multimedia learning environment. Journal of Educational Technology & Society, 19(2), 104-115.

Lindemann, N. F. (2022). The ethics of 'Deathbots'. Science and Engineering Ethics, 28(6), 60. https://doi.org/10.1007/s11948-022-00417-x

Ling, E.C., Tussyadiah, I., Tuomi, A., Stienmetz, J., & Ioannou, A. (2021). Factors influencing users' adoption and use of conversational agents: A systematic review. Psychology & Marketing, 1– 21. https://doi.org/10.1002/mar.21491

Liu, B., & Sundar, S. S. (2018). Should machines express sympathy and empathy? Experiments with a health advice chatbot. Cyberpsychology, Behavior, and Social Networking, 21(10), 625-636. http://dx.doi.org/10.1089/cyber.2018.0110

Liu, L., Stroulia, E., Nikolaidis, I., Miguel-Cruz, A., & Rincon, A. R. (2016). Smart homes and home health monitoring technologies for older adults: A systematic review. International Journal of Medical Informatics, 91, 44–59. http://dx.doi.org/10.1016/j.ijmedinf.2016.04.007

Livingston, L.A., Shah, P., & Happé, F. (2019). Compensatory strategies below the behavioural surface in autism: a qualitative study. The Lancet Psychiatry, 6(9), 766–777. https://doi.org/10.1016/s2215-0366(19)30224-x

Livingston, L.A., Shah, P., Milner, V., & Happé, F. (2020). Quantifying compensatory strategies in adults with and without diagnosed autism. Molecularautism, 11(1), 1–10. https://doi.org/10.1186/s13229-019-0308-y

López, G., Quesada, L., & Guerrero, L. A. (2017). Alexa vs. Siri vs. Cortana vs. google assistant: A comparison of speech-based natural user interfaces. International Conference on Applied Human Factors and Ergonomics, 241–250. http://dx.doi.org/10.1007/978-3-319-60366-7 23

Loveys, K., Hiko, C., Sagar, M., Zhang, X., & Broadbent, E. (2022). "I felt her company": A qualitative study on factors affecting closeness and emotional support seeking with an embodied conversational agent. International Journal of Human-Computer Studies, 160, 102771. http://doi.org/10.1016/j.ijhcs.2021.102771

Lucas, G. M., Rizzo, A., Gratch, J., Scherer, S., Stratou, G., Boberg, J., &Morency, L. P. (2017). Reporting mental health symptoms: breaking down barriers to care with virtual human interviewers. Frontiers in Robotics and AI, 4, 51. http://dx.doi.org/10.3389/frobt.2017.00051

Lundorff, M., Holmgren, H., Zachariae, R., Farver-Vestergaard, I., & O'Connor, M. (2017). Prevalence of prolonged grief disorder in adult bereavement: A systematic review and meta-analysis. Journal of Affective Disorders, 212, 138–149. https://doi.org/10.1016/j.jad.2017.01.030

Ly, K. H., Ly, A. M., & Andersson, G. (2017). A fully automated conversational agent for promoting mental well-being: A pilot RCT using mixed methods. Internet interventions, 10, 39-46. http://dx.doi.org/10.1016/j.invent.2017.10.002

Ma, X., Yang, E., & Fung, P. (2019). Exploring perceived emotional intelligence of personality-driven virtual agents in handling user challenges. In The world wide web conference, 1222–1233. http://dx.doi.org/10.1145/3308558.3313400

Ma, Z., Mei, Y., & Su, Z. (2023). Understanding the benefits and challenges of using large language model-based conversational agents for mental well-being support. arXiv preprint arXiv:2307.15810. https://doi.org/10.48550/arXiv.2307.15810

Martínez-Miranda, J. (2017). Embodied conversational agents for the detection and prevention of suicidal behaviour: current applications and open challenges. Journal of medical systems, 41(9), 135. https://link.springer.com/article/10.1007/s10916-017-0784-6

Marwick, A., & and Ellison, N. B. (2012). "There isn't wifi in heaven!" Negotiating visibility on Facebook memorial pages. Journal of Broadcasting & Electronic Media, 56(3), 378–400. https://doi.org/10.1080/08838151.2012.705197

Marziali, R. A., Franceschetti, C., Dinculescu, A., Nistorescu, A., Kristály, D. M., Moşoi, A. A., Broekx, R., Marin, M., Vizitiu, C., Moraru, S.-A., Rossi, L., & Di Rosa, M. (2024). Reducing Loneliness and Social Isolation of Older Adults Through Voice Assistants: Literature Review and Bibliometric Analysis. Journal of Medical Internet Research, 26, e50534. https://doi.org/10.2196/50534

Maslow, A., & Lewis, K. J. (1987). Maslow's hierarchy of needs. Salenger Incorporated, 14(17), 987-990.

Massimi, M. (2013). Exploring remembrance and social support behavior in an online bereavement support group. Proceedings of the 2013 conference on Computer Supported Cooperative Work, 1169–1180. https://doi.org/10.1145/2441776.2441908

Massimi, M., Berry, E., Browne, G., Smyth, G., Watson, P., &Baecker, R. M. (2008). An exploratory case study of the impact of ambient biographical displays on identity in a patient with Alzheimer's disease. Neuropsychological Rehabilitation, 18(5-6), 742–765. http://dx.doi.org/10.1080/09602010802130924

Mathur, N., Dhodapkar, K., Zubatiy, T., Li, J., Jones, B., &Mynatt, E. (2022). A collaborative approach to support medication management in older adults with mild cognitive impairment using conversational assistants (cas). Proceedings of the 24th International ACM SIGACCESS Conference on Computers and Accessibility. https://doi.org/10.1145/3517428.3544830

McStay, A. (2022). Replika in the metaverse: The moral problem with empathy in 'it from bit'. AI and Ethics, 1–13. http://dx.doi.org/10.1007/s43681-022-00252-7

Medeiros, L., Gerritsen, C., &Bosse, T. (2019). Towards humanlike chatbots helping users cope with stressful situations. International Conference on Computational Collective Intelligence, 232–243. http://dx.doi.org/10.1007/978-3-030-28377-3 19

Miller, E., & Polson, D. (2019). Apps, avatars, and robots: The future of mental healthcare. Issues in mental health nursing, 40(3), 208-214. https://doi.org/10.1080/01612840.2018.1524535

Milne, M., Powers, D., &Leibbrandt, R. (2009). Development of a software-based social tutor for children with autism spectrum disorders. Proceedings of the 21st annual conference of the australian computer-human interaction special interest group: Design: Open 24/7, 265–268. http://dx.doi.org/10.1145/1738826.1738870

Milton, D.E. (2012). On the ontological status of autism: the 'double empathy problem'. Disability & Society, 27(6), 883–887. http://dx.doi.org/10.1080/09687599.2012.710008

Mischel, W. (2004). Toward an integrative science of the person. Annu. Rev. Psychol., 55, 1–22. https://doi.org/10.1146/annurev.psych.55.042902.130709

Mittelstadt, B. (2019). Principles alone cannot guarantee ethical AI. Nature Machine Intelligence, 1, pages501–507. https://doi.org/10.1038/s42256-019-0114-4

Moncur, W., Julius, M., Van Den Hoven, E., & Kirk, D. (2015). Story shell: the participatory design of a bespoke digital memorial. In Proceedings of 4th Participatory Innovation Conference, pages 470–477.

Montemayor, C., Halpern, J., & Fairweather, A. (2022). In principle obstacles for empathic AI: Why we can't replace human empathy in healthcare. AI & Society, 37(4), 1353–1359. https://doi.org/10.1007/s00146-021-01230-z

Mori, M., MacDorman, K.F., &Kageki, N. (2012). The uncanny valley [from the field]. IEEE Robotics & Automation Magazine, 19(2), 98–100. http://dx.doi.org/10.1109/MRA.2012.2192811

Mou, Y., & Xu, K. (2017). The media inequality: Comparing the initial human-human and human-ai social interactions. Computers in Human Behaviour, 72, 432-440. https://doi.org/10.1016/j.chb.2017.02.067

Musambira, G. W., Hastings, S. O., & Hoover, J. D. (2007). Bereavement, gender, and cyberspace: A content analysis of parents' memorials to their children. OMEGA-Journal of Death and Dying, 54(4), 263–279. https://doi.org/10.2190/R865-85X7-15J0-0713

Mykoniatis, K., Angelopoulou, A., Proctor, M. D., &Karwowski, W. (2014, June). Virtual humans for interpersonal and communication skills' training in crime investigations. In Virtual, Augmented and Mixed Reality. Designing and Developing Virtual and Augmented Environments: 6th International Conference, VAMR 2014 (pp. 282-292). Springer International Publishing. http://dx.doi.org/10.1007/978-3-319-07458-0_27

Nadarzynski, T., Miles, O., Cowie, A., & Ridge, D. (2019). Acceptability of artificial intelligence (AI)-led chatbot services in healthcare: A mixed-methods study. Digital Health, 5. https://doi.org/10.1177/2055207619871808

Nashwan, A. J., Abujaber, A. A., & Choudry, H. (2023). Embracing the future of physician-patient communication: Gpt-4 in gastroenterology. Gastroenterology & Endoscopy, 1(3), 132–135. http://dx.doi.org/10.1016/j.gande.2023.07.004

Nass, C., & Moon, Y. (2000). Machines and mindlessness: Social responses to computers. Journal of social issues, 56(1), 81–103. http://dx.doi.org/10.1111/0022-4537.00153

Nass, C., Steuer, J., & Tauber, E. R. (1994). Computers are social actors. Proceedings of the SIGCHI conference on Human Factors in Computing Systems, 72–78. https://doi.org/10.1145/259963.260288

National Academies of Sciences Engineering and Medicine. (2020). Risk and protective factors for social isolation and loneliness. *Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System*, 63-91.

Neimeyer, R. A. (2012a). Correspondence with the deceased. In R. A. Neimeyer (Eds.) Techniques of grief therapy (pp. 279–281). Routledge.

Neimeyer, R. A. (2012b). Techniques of grief therapy: Creative practices for counseling the bereaved. Routledge.

Neimeyer, R. A. (2016). Meaning reconstruction in the wake of loss: Evolution of a research program. Behaviour Change, 33(2), 65–79. https://doi.org/10.1017/bec.2016.4

Neimeyer, R. A., Baldwin, S. A., & Gillies, J. (2006). Continuing bonds and reconstructing meaning: Mitigating complications in bereavement. Death studies, 30(8), 715–738. https://doi.org/10.1080/07481180600848322

Newton, C. (2016). When her best friend died, she used artificial intelligence to keep talking to him. The Verge. https://www.theverge.com/a/luka-artificial-intelligence-memorial-roman-mazurenko-bot

Ng, G. W., & Leung, W. C. (2020). Strong artificial intelligence and consciousness. *Journal of Artificial Intelligence and Consciousness*, 7(01), 63-72.

Nguyen, T. H., Waizenegger, L., &Techatassanasoontorn, A. A. (2022). "Don't neglect the user!" – Identifying types of human-chatbot interactions and their associated characteristics. Information Systems Frontiers, 24(3), 797–838.

Norlock, K. J. (2017). Real (and) imaginal relationships with the dead. The Journal of Value Inquiry, 51(2), 341–356. https://doi.org/10.1007/s10790-016-9573-6

O'Connell, C., Quinn, K., Marquez, D. X., Chin, J., Muramatsu, N., Leiser, S., Gradishar, J., & Desai, S. (2021). Accommodating communication with conversational agents: Examining the perceptions and behaviors of older adults when using voice assistant technology. AoIR Selected Papers of Internet Research. https://api.semanticscholar.org/CorpusID: 240558921

O'Connor, M., Nikoletti, S., Kristjanson, L., Loh, R., & Willcock, B. (2003). Writing therapy for the bereaved: Evaluation of an intervention. Journal of Palliative Medicine, 6(2), 195–204. https://doi.org/10.1089/109662103764978443

Ogden, P., Minton, K., & Pain, C. (2006). Trauma and the body: A sensorimotor approach to psychotherapy (Norton series on interpersonal neurobiology). WW Norton & Company.

Olson, G. M., & Olson, J. S. (2000). Distance matters. Human–Computer Interaction, 15(2-3), 139–178. https://ics.uci.edu/~corps/phaseii/OlsonOlson-DistanceMatters-HCIJ.pdf

Pandorabots-kuki. (2005). In https://home.pandorabots.com/home.html

Pani, B., Crawford, J., & Allen, K. A. (2024). Can Generative Artificial Intelligence Foster Belongingness, Social Support, and Reduce Loneliness? A Conceptual Analysis. Applications of Generative AI, 261-276. http://doi.org/10.1007/978-3-031-46238-2_13

Papa, A., Sewell, M. T., Garrison-Diehn, C., &Rummel, C. (2013). A randomized open trial assessing the feasibility of behavioral activation for pathological grief responding. Behavior Therapy, 44(4), 639–650. https://doi.org/10.1016/j.beth.2013.04.009

Park, K., Lee, S., Yang, J., Song, T., & Hong, G.-R. S. (2019). A systematic review and meta-analysis on the effect of reminiscence therapy for people with dementia. International psychogeriatrics, 31(11), 1581–1597. http://dx.doi.org/10.1017/S1041610218002168

Park, M., Aiken, M., & Salvador, L. (2018). How do humans interact with chatbots?: An analysis of transcripts. International Journal of Management and Information Technology, 14, 3338–3350. http://dx.doi.org/10.24297/ijmit.v14i0.7921

Perry, T. S. (2014). Leaving the uncanny valley behind. IEEE Spectrum, 51(6), 48-53. https://doi.org/10.1109/MSPEC.2014.6821621

Philip, P., Micoulaud-Franchi, J. A., Sagaspe, P., Sevin, E. D., Olive, J., Bioulac, S., & Sauteraud, A. (2017). Virtual human as a new diagnostic tool, a proof of concept study in the field of major depressive disorders. Scientific reports, 7(1), 42656. http://dx.doi.org/10.1038/srep42656

Picard, R. W. (1997). Affective Computing. The MIT Press.

Pinto, M. D., Greenblatt, A. M., Hickman, R. L., Rice, H. M., Thomas, T. L., &Clochesy, J. M. (2016). Assessing the Critical Parameters of eSMART-MH: A Promising Avatar-Based Digital Therapeutic Intervention to Reduce Depressive Symptoms. Perspectives in psychiatric care, 52(3). https://doi.org/10.1111/ppc.12112

Pinto, M.D., Hickman Jr, R.L., Clochesy, J., & Buchner, M. (2013). Avatar-based depression self-management technology: promising approach to improve depressive symptoms among young adults. Applied Nursing Research, 26(1), 45–48. http://dx.doi.org/10.1016/j.appr.2012.08.003

Porayska-Pomsta, K., Alcorn, A. M., Avramides, K., Beale, S., Bernardini, S., Foster, M. E., Frauenberger, C., Good, J., Guldberg, K., Keay-Bright, W., Kossyvaki, L., Lemon, O., Mademtzi, M., Menzies, R., Pain, H., Rajendran, G., Waller, A., Wass, S., & Smith, J. (2018). Blending human and artificial intelligence to support autistic children's social communication skills. ACM Transactionson Computer-Human Interaction (TOCHI), 25(6), 1–35. https://doi.org/10.1145/3271484

Portet, F., Vacher, M., Golanski, C., Roux, C., & Meillon, B. (2013). Design and evaluation of a smart home voice interface for the elderly: Acceptability and objection aspects. Personal and Ubiquitous Computing, 17(1), 127–144. http://dx.doi.org/10.1007/s00779-011-0470-5

Poscia, A., Stojanovic, J., La Milia, D. I., Duplaga, M., Grysztar, M., Moscato, U., Order, G., Collamati, A., Ricciardi, W., &Magnavita, N. (2018). Interventions targeting loneliness and social isolation among the older people: An update systematic review. Experimental gerontology, 102, 133-144. https://doi.org/10.1016/j.exger.2017.11.017

Pradhan, A., Findlater, L., & Lazar, A. (2019). "Phantom friend" or "just a box with information": Personification and ontological categorization of smart

speaker-based voice assistants by older adults. Proc. ACM Hum.-Comput. Interact., 3(CSCW). https://doi.org/10.1145/3359316

Prigerson, H. G., & Maciejewski, P. K. (2006). Prolonged grief disorder (pg -13). Dana-Farber Cancer Institute. https://endoflife.weill.cornell.edu/sites/default/files/pg-13.pdf

Prigerson, H. G., Horowitz, M. J., Jacobs, S. C., Parkes, C. M., Aslan, M., Goodkin, K., Raphael, B., Marwit, S. J., Wortman, C., Neimeyer, R. A., Bonanno, G. A., Block, S. D., Kissane, D., Boelen, P., Maercker, A., Litz, B. T., Johnson, J. G., First, M. B., &Maciejewski, P.K. (2009). Prolonged grief disorder: Psychometric validation of criteria proposed for DSM-v and ICD-11. PLoS Medicine, 6(8). https://doi.org/10.1371/journal.pmed.1000121

Provoost, S., Lau, H. M., Ruwaard, J., & Riper, H. (2017). Embodied conversational agents in clinical psychology: a scoping review. Journal of medical Internet research, 19(5), e151. https://doi.org/10.2196/jmir.6553

Purves, B., Savundranayagam, M. Y., Kelson, E., Astell, A., & Phinney, A. (2011). Fostering resilience in dementia through narratives: Contributions of multimedia technologies. Resilience in aging: Concepts, research, and outcomes, 231–243. http://dx.doi.org/10.1007/978-3-030-04555-5 13

Radziwill, N. M., & Benton, M. C. (2017). Evaluating quality of chatbots and intelligent conversational agents. ArXiv.

https://doi.org/10.48550/arXiv.1704.04579

Ranatunga, I., Torres, N. A., Patterson, R., Bugnariu, N., Stevenson, M., & Popa, D. O. (2012). Rodica: a human-robot interaction system for treatment of childhood autism spectrum disorders. Proceedings of the 5 thin ternational conference on pervasive technologies related to assistive environments, 1–6. http://dx.doi.org/10.1145/2413097.2413160

Rando, T. A. (1993). Treatment of complicated mourning. Research Press.

Range, M., Kovac, S. H., & Michelle S. Marion, L. (2000). Does writing about the bereavement lessen grief following sudden, unintentional death? Death studies, 24(2), 115–134. https://doi.org/10.1080/074811800200603

Rapp, A., Curti, L., &Boldi, A. (2021). The human side of human-chatbot interaction: A systematic literature review of ten years of research on text-based chatbots. International Journal of Human-Computer Studies, 151. https://doi.org/10.1016/j.ijhcs.2021.102630

Reeves, B., & Nass, C. (1996). The Media Equation: How People Treat Computers, Television and New Media Like Real People and Places. Cambridge University Press. Cambridge, UK, 10(10). https://www.researchgate.net/publication/37705092 The Media Equation How People Treat Computers Television and New Media Like Real People and Pla

Renn, B. N., Schurr, M., Zaslavsky, O., & Pratap, A. (2021). Artificial intelligence: An interprofessional perspective on implications for geriatric mental health research and care. Frontiers in Psychiatry, 1925. https://doi.org/10.3389/fpsyt.2021.734909

Ring, L., Barry, B., Totzke, K., &Bickmore, T. (2013). Addressing loneliness and isolation in older adults: Proactive affective agents provide better support. In Proc. of ACII'13, 61–66. http://dx.doi.org/10.1109/ACII.2013.17

Ring, L., Shi, L., Totzke, K., &Bickmore, T. (2015). Social support agents for older adults: longitudinal affective computing in the home. Journal on Multimodal User Interfaces, 9, 79-88. http://dx.doi.org/10.1007/s12193-014-0157-0

Rios Rincon, A. M., Miguel Cruz, A., Daum, C., Neubauer, N., Comeau, A., & Liu, L. (2022). Digital storytelling in older adults with typical aging, and with mild cognitive impairment or dementia: A systematic literature review. Journal of Applied Gerontology, 41(3), 867–880. https://doi.org/10.1177/07334648211015456

Rizzo, F. (2011). 12. Co-design versus user Centred design: Framing the differences. Notes on doctoral research in design. Contributions from the Politecnico Di Milano, 125-135.

Roniotis, A., &Tsiknakis, M. (2017). Detecting depression using voice signal extracted by chatbots: a feasibility study. Interactivity,gamecreation,design,learning,andinnovation, 386–392. Springer. http://dx.doi.org/10.1007/978-3-319-76908-0 37

Roniotis, A., &Tsiknakis, M. (2018). Detecting depression using voice signal extracted by chatbots: A feasibility study. In Anthony L. Brooks, Eva Brooks, and Nikolas Vidakis (Eds), Interactivity, Game Creation, Design, Learning, and Innovation, 229, 386–392. Springer International Publishing.

Rose, V., Stewart, I., Jenkins, K. G., Tabbaa, L., Ang, C. S., &Matsangidou, M. (2021). Bringing the outside in: The feasibility of virtual reality with people with dementia in an inpatient psychiatric care setting. Dementia, 20(1), 106–129. http://dx.doi.org/10.1177/1471301219868036

Rosner, R., Pfoh, G., Kotoučová, M., & Hagl, M. (2014). Efficacy of an outpatient treatment for prolonged grief disorder: A randomized controlled clinical trial. Journal of Affective Disorders, 167, 56–63. https://doi.org/10.1016/j.jad.2014.05.035

Rothaupt, J. W., & Becker, K. (2007). A literature review of western bereavement theory: From decathecting to continuing bonds. The Family Journal, 15(1), 6–15. https://doi.org/10.1177/1066480706294031

Rudzicz, F., Wang, R., Begum, M., & Mihailidis, A. (2015). Speech interaction with personal assistive robots supporting aging at home for individuals with Alzheimer's disease. ACM Transactions on Accessible Computing (TACCESS), 7(2), 1–22. http://dx.doi.org/10.1145/2744206

Ruggiano, N., Brown, E. L., Roberts, L., Framil Suarez, C. V., Luo, Y., Hao, Z., & Ruhland, K., Peters, C. E., Andrist, S., Badler, J. B., Badler, N. I., Gleicher, M., Mutlu, B., & McDonnell, R. (2015). A review of eye gaze in virtual agents, social robotics and hci: Behaviour generation, user interaction and perception. Computer Graphics Forum, 34, 299–326. Wiley Online Library. https://graphics.cs.wisc.edu/Papers/2015/RPABBGMM15/Ruhland_et_al-2015-Computer Graphics Forum.pdf

Russell, S., & Norvig, P. (2016). Artificial intelligence: A modern approach, global edition. Pearson Education, Limited.

Ruttkay, Z., Dormann, C., & Noot, H. (2004). Embodied conversational agents on a common ground: A framework for design and evaluation. From brows to trust: evaluating embodied conversational agents, 27-66. http://dx.doi.org/10.1007/1-4020-2730-3

Ryokai, K., Vaucelle, C., & Cassell, J. (2003). Virtual peers as partners in storytelling and literacy learning. Journal of computer assisted learning, 19(2), 195-208. https://doi.org/10.1046/j.0266-4909.2003.00020.x

Safi, M.F., AlSadrani, B., & Mustafa, A. (2021). Virtual voice assistant applications improved expressive verbal abilities and social interactions in children with autism spectrum disorder: A single-subject experimental study. http://dx.doi.org/10.13140/RG.2.2.20327.88484

Saleh, M. A., Hashim, H., Mohamed, N. N., Abd Almisreb, A., &Durakovic, B. (2020). Robots and autistic children: a review. Periodicals of Engineering and Natural Sciences, 8(3), 1247-1262. http://dx.doi.org/10.21533/pen.v8i3.1457

Salvador, M. J., Silver, S., &Mahoor, M. H. (2015). An emotion recognition comparative study of autistic and typically-developing children using the zeno robot. 2015 ieee international conference on robotics and automation (icra), 6128–6133. http://dx.doi.org/10.1109/ICRA.2015.7140059

Sanders, E. B. N., & Stappers, P. J. (2008). Co-creation and the new landscapes of design. Co-design, 4(1), 5-18. https://doi.org/10.1080/15710880701875068

Sanny, L., Susastra, A., Roberts, C., & Yusramdaleni, R. (2020). The analysis of customer satisfaction factors which influence chatbot acceptance in Indonesia. Management Science Letters, 10(6), 1225- 1232. http://dx.doi.org/10.5267/j.msl.2019.11.036

Santiesteban, I., Gibbard, C., Drucks, H., Clayton, N., Banissy, M. J., & Bird, G. (2021). Individuals with autism share others' emotions: evidence from the continuous affective rating and empathic responses (carer) task. Journal of Autism and Developmental Disorders, 51(2), 391–404. https://doi.org/10.1007/s10803-020-04535-y

Sas, C., Davies, N., Clinch, S., Shaw, P., Mikusz, M., Steeds, M., &Nohrer, L. (2020). Supporting stimulation needs in dementia care through wall-sized displays. Proceedings of the 2020 chi conference on human factors in computing systems, 1–16. https://doi.org/10.1145/3313831.3376361

Savin-Baden, M., & Burden, D. (2019). Digital immortality and virtual humans. Postdigital Science and Education, 1(1), 87–103. https://doi.org/10.1007/s42438-018-0007-6

Sawyer, P., Sutcliffe, A., Rayson, P., & Bull, C. (2015). Dementia and social sustainability: Challenges for software engineering. 2015 IEEE/ACM 37th IEEE International Conference on Software Engineering, 2, 527–530. http://dx.doi.org/10.1109/ICSE.2015.188

Schuetzler, R. M., Grimes, G. M., & Scott Giboney, J. (2020). The impact of chatbot conversational skill on engagement and perceived humanness. Journal of Management Information Systems, 37(3), 875-900. http://hdl.lib.byu.edu/1877/8385

Schütz, A. (2004). A hazatérő [original title: The homecomer]. Az Idegen–VariációkSimmeltől Derridáig,80–90. http://buksz.c3.hu/0503/09szemle.pdf

Schwartz, B. (2004). The paradox of choice: Why more is less. ECCO.

Shandilya, E., & Fan, M. (2022). Understanding older adults' perceptions and challenges in using ai-enabled everyday technologies. arXiv preprint arXiv:2210.01369. https://doi.org/10.48550/arXiv.2210.01369

Sharkey, A., & Sharkey, N. (2012). Granny and the robots: Ethical issues in robot care for the elderly. Ethics and information technology, 14, 27–40. https://doi.org/10.1007/s10676-010-9234-6

She, W.-J., Siriaraya, P., Ang, C. S., & Prigerson, H. G. (2021). Living memory home: Understanding continuing bond in the digital age through backstage grieving. Proceedings of the 2021 CHI Conference on Human Factors in Computing Systems, 1–14. https://doi.org/10.1145/3411764.3445336

Short, J., Williams, E., & Christie, B. (1976). The social psychology of telecommunications. https://lccn.loc.gov/75044335

Shuchter, S. R., &Zisook, S. (1988). Widowhood: The continuing relationship with the dead spouse. Bulletin of the Menninger Clinic, 52(3), 269.

Shum, H.-Y., He, X.-d., & Li, D. (2018). From Eliza to Xiaoice: challenges and opportunities with social chatbots. Frontiers of Information Technology & Electronic Engineering, 19(1), 10–26. https://doi.org/10.1631/FITEE.1700826

Shum, H.-Y., He, X., & Li, D. (2018). From Eliza to XiaoIce: challenges and opportunities with social chatbots. ArXiv Preprint ArXiv:1801.01957.

Shum, H.-Y., He, X., & Li, D. (2018). From Eliza to Xiaoice: challenges and opportunities with social chatbots. ArXiv preprint arXiv:1801.01957. https://doi.org/10.48550/arXiv.1801.01957

Sidnell, J. (2011). Conversation analysis. New York: Oxford University Press.

Sidner, C. L., Bickmore, T., Nooraie, B., Rich, C., Ring, L., Shayganfar, M., & Vardoulakis, L. (2018). Creating new technologies for companionable agents to support isolated older adults. ACM Transactions on Interactive Intelligent Systems (TiiS), 8(3), 1-27. https://doi.org/10.1145/3213050

Sikkema, K. J., Hansen, N. B., Kochman, A., Tate, D. C., &Difranceisco, W. (2004). Outcomes from a randomized controlled trial of a group intervention for HIV positive men and women coping with aids-related loss and bereavement. Death studies, 28(3), 187–209. https://doi.org/10.1080/07481180490276544

Sinatra, A. M., Pollard, K. A., Files, B. T., Oiknine, A. H., Ericson, M., &Khooshabeh, P. (2021). Social fidelity in virtual agents: Impacts on presence and learning. Computers in Human Behavior, 114. https://doi.org/10.1016/j.chb.2020.106562

Siriaraya, P., & Ang, C. S. (2014). Recreating living experiences from past memories through virtual worlds for people with dementia. Proceedings of the SIGCHI conference on human factors in computing systems, 3977–3986. http://dx.doi.org/10.1145/2556288.2557035

Skantze, G. (2021). Turn-taking in conversational systems and human-robot interaction: a review. *Computer Speech & Language*, 67, 101178.

Skjuve, M., &Brandtzæg, P. B. (2018). Chatbots as a new user interface for providing health information to young people. Youth and news in a digital media environment–Nordic-Baltic perspectives.

https://www.researchgate.net/publication/332859163 Chatbots as a new user in terface for providing health information to young people

Skjuve, M., Følstad, A., Fostervold, K. I., &Brandtzaeg, P. B. (2021). My chatbot companion - a study of human-chatbot relationships. International Journal of Human Computer Studies, 149. https://doi.org/10.1016/j.ijhcs.2021.102601

Smith, A. (2009). The empathy imbalance hypothesis of autism: a theoretical approach to cognitive and emotional empathy in autistic development. The Psychological record, 59(3), 489–510. https://doi.org/10.1007/BF03395675

Smith, D. L. (2016). Paradoxes of dehumanization. Social Theory and Practice, 42(2), 416–443. http://dx.doi.org/10.5840/soctheorpract201642222

Smith, M.J., Ginger, E.J., Wright, K., Wright, M.A., Taylor, J.L., Humm, L.B., Olson, D., Bell, M., & Fleming, M.F. (2014). Virtual reality job interview training in adults with autism spectrum disorder. Journal of autism and developmental disorders, 44(10), 2450–2463. http://dx.doi.org/10.1007/s10803-014-2113-y

Sofka, C. J. (1997). Social support" internetworks," caskets for sale, and more: Thanatology and the information superhighway. Death Studies, 21(6), 553–574. https://doi.org/10.1080/074811897201778

Son, G.-R., Therrien, B., &Whall, A. (2002). Implicit memory and familiarity among elders with dementia. Journal of Nursing Scholarship, 34(3), 263–267. https://doi.org/10.1111/j.1547-5069.2002.00263.x

Sonlu, S., Güdükbay, U., &Durupinar, F. (2021). A conversational agent framework with multi-modal personality expression. ACM Transactions on Graphics (TOG), 40(1), 1-16. http://dx.doi.org/10.1145/3439795

Sosnowy, C., Silverman, C., Shattuck, P., & Garfield, T. (2019). Set backs and successes: How young adults on the autism spectrum seek friendship. Autism in Adulthood, 1(1), 44–51. http://dx.doi.org/10.1089/aut.2018.0009

Spatola, N., Kühnlenz, B., & Cheng, G. (2021). Perception and evaluation in human–robot interaction: The Human–Robot Interaction Evaluation Scale (HRIES)—A multicomponent approach of anthropomorphism. International Journal of Social Robotics, 13(7), 1517-1539. https://link.springer.com/article/10.1007/s12369-020-00667-4

Spatola, N., Kühnlenz, B., & Cheng, G. (2021). Perception and evaluation in human–robot interaction: The Human–Robot Interaction Evaluation Scale (HRIES)—A multicomponent approach of anthropomorphism. International Journal of Social Robotics, 13(7), 1517-1539.

Stanton, C. J., & Stevens, C. J. (2017). Don't stare at me: the impact of a humanoid robot's gaze upon trust during a cooperative human–robot visual task. International Journal of Social Robotics, 9(5), 745–753. https://link.springer.com/article/10.1007/s12369-017-0422-y

Stargatt, J., Bhar, S., Bhowmik, J., & Al Mahmud, A. (2022). Digital storytelling for health-related outcomes in older adults: Systematic review. Journal of Medical Internet Research, 24(1), e28113. http://dx.doi.org/10.2196/28113

Stepakoff, S. (2009). From destruction to creation, from silence to speech: Poetry therapy principles and practices for working with suicide grief. The Arts in Psychotherapy, 36(2), 105–113. https://doi.org/10.1016/j.aip.2009.01.007

Stokes, P. (2021). Digital Souls: A Philosophy of Online Death. Bloomsbury Publishing.

Stroebe, M. S., &Schut, H. (2001). Meaning making in the dual process model of coping with bereavement. American Psychological Association. http://dx.doi.org/10.1037/10397-003

Stypińska, J. (2021). Ageism in ai: New forms of age discrimination in the era of algorithms and artificial intelligence. CAIP 2021: Proceedings of the 1st International Conference on AI for People: Towards Sustainable AI, CAIP 2021, 20-24 November 2021, Bologna, Italy, 39. http://dx.doi.org/10.4108/eai.20-11-2021.2314200

Sweeney, C., Potts, C., Ennis, E., Bond, R., Mulvenna, M., O'neill, S., Malcom, M., Kuosmanen, L., Kostenius, C., Vakaloudis, A., Mcconvey, G., Turkington, R., Hanna, D., Nieminem, H., Vartiainen, A., Robertson, A.,&Mctear, M.(2021). Can chatbots help support a person's mental health? Perceptions and views from

mental healthcare professionals and experts. ACM Transactions on Computing for Healthcare, 2(3), 1-15. https://doi.org/10.1145/3453175

Ta, V., Griffith, C., Boatfield, C., Wang, X., Civitello, M., Bader, H., Decero, E. &Loggarakis, A. (2020). User experiences of social support from companion chatbots in everyday cntexts: Thematic analysis. Journal of medical Internet research, 22(3). http://dx.doi.org/10.2196/16235

Tabbaa, L., Ang, C. S., Rose, V., Siriaraya, P., Stewart, I., Jenkins, K. G., &Matsangidou, M. (2019). Bring the outside in: Providing accessible experiences through vr for people with dementia in locked psychiatric hospitals. Proceedings of the 2019 CHI conference on human factors in computing systems, 1–15. https://doi.org/10.1145/3290605.3300466

Taheri, A., Meghdari, A., Alemi, M., &Pouretemad, H. (2018). Clinical interventions of social humanoid robots in the treatment of a set of high-and low-functioning autistic iranian twins. Scientia Iranica, 25(3), 1197–1214. https://doi.org/10.24200/sci.2017.4337

Tamayo, S., & Pérez-Marín, D. (2012, October). An agent proposal for Reading Understanding: Applied to the resolution of maths problems. In 2012 international symposium on computers in education (SIIE) (pp. 1-4). IEEE.

Tanaka, H., Negoro, H., Iwasaka, H., & Nakamura, S. (2017). Embodied conversational agents for multimodal automated social skills training in people with autism spectrum disorders. PloSone, 12(8), e0182151. http://dx.doi.org/10.1371/journal.pone.0182151

Tartaro, A., & Cassell, J. (2008). Playing with virtual peers. Bootstrapping contingent discourse in children with Autism. International Society of the Learning Sciences, Inc.

Tavabi, L. (2019, October). Multimodal machine learning for interactive mental health therapy. In 2019 International Conference on Multimodal Interaction (pp. 453-456). http://dx.doi.org/10.1145/3340555.3356095

Thellman, S., &Ziemke, T. (2017). Social attitudes toward robots are easily manipulated. Proceedings of the companion of the 2017 acm - ieee international conference on human-robot interaction, 299–300. http://dx.doi.org/10.1145/3029798.3038336

Tominari, M., Uozumi, R., Becker, C., & Kinoshita, A. (2021). Reminiscence therapy using virtual reality technology affects cognitive function and subjective well-being in older adults with dementia. Cogent Psychology, 8(1), 1968991. http://dx.doi.org/10.1080/23311908.2021.1968991

Tracey, P., Saraee, M., & Hughes, C. (2021). Applying NLP to build a cold reading chatbot. 2021 International Symposium on Electrical, Electronics and Information Engineering, 77–80. https://doi.org/10.1145/3459104.3459119

Trothen, T. J. (2022). Replika: Spiritual enhancement technology? Religions, 13(4), 275. https://doi.org/10.3390/rel13040275

Turing, A. M. (1950). Computing machinery and intelligence. Mind, 59, 433-460. https://doi.org/10.1093/mind/LIX.236.433

Uriu, D., &Okude, N. (2010). Thanatofenestra: Photographic family altar supporting a ritual to pray for the deceased. Proceedings of the 8th ACM conference on designing interactive systems, 422–425. https://doi.org/10.1145/1858171.1858253

Vaidyam, A. N., Wisniewski, H., Halamka, J. D., Kashavan, M. S., &Torous, J. B. (2019). Chatbots and conversational agents in mental health: a review of the psychiatric landscape. The Canadian Journal of Psychiatry, 64(7), 456-464. https://doi.org/10.1177/0706743719828977

Vale-Taylor, P. (2009). "We will remember them": a mixed-method study to explore which post-funeral remembrance activities are most significant and important to bereaved people living with loss, and why those particular activities are chosen. Palliative Medicine, 23(6), 537-544. https://doi.org/10.1177/0269216309103803

Valtolina, S., &Marchionna, M. (2021). Design of a chatbot to assist the elderly. International symposium on end user development, 153–168. http://dx.doi.org/10.1007/978-3-030-79840-6_10

Van Baren, J., IJsselsteijn, W. A., Markopoulos, P., Romero, N., & De Ruyter, B. (2004). Measuring affective benefits and costs of awareness systems supporting intimate social networks. In CTIT workshop proceedings series (Vol. 2, pp. 13-19). https://www.researchgate.net/publication/240938076 Measuring Affective Benefits a nd Costs of Awareness Systems Supporting Intimate Social Networks

Van Bel, D.T., Smolders, K.C., IJsselsteijn, W.A., & De Kort, Y.A.W. (2009). Social connectedness: concept and measurement. In Intelligent Environments 2009 - Proceedings of the 5th International Conference on Intelligent Environments (pp.67-74). IOS Press. http://dx.doi.org/10.3233/978-1-60750-034-6-67

Van Velsen, L., Cabrita, M., Op den Akker, H., Brandl, L., Isaac, J., Suárez, M., Gouveia, A., Evans, N., de Sousa, R. D., Rodrigues, A. M., Canhão, H., Evans, N., DELA Natura - En Levensverzekeringen NV, Blok, M., Alcobia, C., &Brodbeck, J. (2020). Leaves (optimizing the mental health and resilience of older adults that have lost their spouse via blended, online therapy): Proposal for an online service development and evaluation. JMIR research protocols, 9(9): e19344. https://www.researchprotocols.org/2020/9/e19344

van Wezel, M. M., Croes, E. A., & Antheunis, M. L. (2021). "I'm here for you": can social chatbots truly support their users? A literature review. In Chatbot research and design: 4th international workshop, CONVERSATIONS 2020,

virtual event, November 23–24, 2020, revised selected papers 4 (pp. 96-113). Springer international publishing. https://doi.org/10.1007/978-3-030-68288-0_7

Vaportzis, E., Giatsi Clausen, M., & Gow, A. J. (2017). Older adults perceptions of technology and barriers to interacting with tablet computers: A focus group study. Frontiers in psychology, 8, 1687. https://doi.org/10.3389/fpsyg.2017.01687

Vasiljevs, A., Skadina, I., Deksne, D., Kalis, M., & Vira, I. (2017). Application of virtual agents for delivery of information services. New Challenges of Economic and Business Development, 667-678.

Veletsianos, G., & Miller, C. (2008). Conversing with pedagogical agents: A phenomenological exploration of interacting with digital entities. British Journal of Educational Technology, 39(6), 969-986. http://dx.doi.org/10.1111/j.1467-8535.2007.00797.x

Vickio, C. J. (1999). Together in spirit: Keeping our relationships alive when loved ones die. Death Studies, 23(2), 161–175. https://doi.org/10.1080/074811899201127

Völkel, S. T., Schoedel, R., Kaya, L., & Mayer, S. (2022, April). User perceptions of extraversion in chatbots after repeated use. In Proceedings of the 2022 CHI Conference on Human Factors in Computing Systems (pp. 1-18). https://doi.org/10.1145/3491102.3502058

Wallace, R. (2003). The elements of AIML style. Alice AI Foundation, 139. https://files.ifi.uzh.ch/cl/hess/classes/seminare/chatbots/style.pdf

Wallace, R. S. (2009) The anatomy of ALICE. In Parsing the Turing Test. Springer, 181–210. http://dx.doi.org/10.1007/978-1-4020-6710-5_13

Walter, T. (2017). What death means now: Thinking critically about dying and grieving. Policy Press.

Walter, T., Hourizi, R., Moncur, W., &Pitsillides, S. (2012). Does the internet change how we die and mourn? Overview and analysis. Omega-journal of Death and Dying, 64(4), 275–302. https://doi.org/10.2190/OM.64.4.a

Watson, C. M. (1999). An analysis of trouble and repair in the natural conversations of people with dementia of the Alzheimer's type. Aphasiology, 13(3), 195–218. http://dx.doi.org/10.1080/026870399402181

Weizenbaum, J. (1966). ELIZA—a computer program for the study of natural language communication between man and machine. Communications of the ACM, 9(1), 36-45. https://doi.org/10.1145/365153.365168

Welch, V., Ghogomu, E. T., Barbeau, V. I., Dowling, S., Doyle, R., Beveridge, E., ... & Mikton, C. (2023). Digital interventions to reduce social isolation and loneliness in older adults: an evidence and gap map. *Campbell Systematic Reviews*, 19(4), e1369. https://doi.org/10.1002/cl2.1369

Welsh, D., Morrissey, K., Foley, S., McNaney, R., Salis, C., McCarthy, J., & Vines, J. (2018). Ticket to talk: Supporting conversation between young people and people with dementia through digital media. Proceedings of the 2018 CHI Conference on Human Factors in Computing Systems, 1–14. https://doi.org/10.1145/3173574.3173949

Westby, C., &Culatta, B. (2016). Telling tales: Personal event narratives and life stories. Language, Speech, and Hearing Services in Schools, 47(4), 260–282. http://dx.doi.org/10.1044/2016 LSHSS-15-0073

Wetherell, J. L. (2012). Complicated grief therapy as a new treatment approach. Dialogues in clinical neuroscience, 14(2), 159-166. https://doi.org/10.31887/DCNS.2012.14.2/jwetherell

Wezel, M., Croes, E. A., & Antheunis, M. L. (2020). "I'm here for you": Can social chatbots truly support their users? A literature review. International

Workshop on Chatbot Research and Design, 96–113. Springer. https://doi.org/10.1007/978-3-030-68288-0_7

Williams, D. M., Nicholson, T., Grainger, C., Lind, S. E., & Carruthers, P. (2018). Can you spot a liar? Deception, mindreading, and the case of autism spectrum disorder. Autism Research, 11, 8, 1129-1137. Wiley Online Library. http://doi.org/10.1002/aur.1962

Winkler, R., & So"llner, M. (2018). Unleashing the potential of chatbots in education: A state-of-the-art analysis. Academy of Management Proceedings, 1: 15903. http://dx.doi.org/10.5465/AMBPP.2018.15903abstract

Wolf, E. S. (2002). Treating the self: Elements of clinical self psychology. Guilford Press.

Wolters, M. K., Kelly, F., & Kilgour, J. (2016). Designing a spoken dialogue interface to an intelligent cognitive assistant for people with dementia. Health informatics journal, 22(4), 854–866. http://dx.doi.org/10.1177/1460458215593329

Woods, B., Rai, H. K., Elliott, E., Aguirre, E., Orrell, M., & Spector, A. (2023). Cognitive stimulation to improve cognitive functioning in people with dementia. Cochrane database of systematic reviews, (1). http://dx.doi.org/10.1002/14651858.cd005562.pub3

Wooldridge, M. (1999). Intelligent agents. Multiagent systems: A modern approach to distributed artificial intelligence, 1, 27-73.

Worden, J. W., & and Winokuer, H. R. (2021). A task-based approach for counseling the bereaved. Grief and Bereavement in Contemporary Society, 57–67. Routledge.

Wright, P. J., Raynor, P. A., Bowers, D., Combs, E. M., Corbett, C. F., Hardy, H., & Patel, K. (2023). Leveraging digital technology for social connectedness among adults with chronic conditions: A systematic review. *Digital Health*, *9*, 20552076231204746. https://doi.org/10.1177/20552076231204746

Xie, T., &Pentina, I. (2022). Attachment theory as a framework to understand relationships with social chatbots: A case study of Replika. Proceedings of the 55th Hawaii International Conference on System Sciences. http://hdl.handle.net/10125/79590

Xygkou, A., Siriaraya, P., Covaci, A., Prigerson, H. G., Neimeyer, R., Ang, C. S., & She, W.-J. (2023). The" conversation" about loss: Understanding how chatbot technology was used in supporting people in grief. Proceedings of the 2023 CHI Conference on Human Factors in Computing Systems, 1–15. http://dx.doi.org/10.1145/3544548.3581154

Yeh, C. J., & Inose, M. (2003). International students' reported English fluency, social support satisfaction, and social connectedness as predictors of acculturative stress. Counselling Psychology Quarterly, 16(1), 15-28. http://dx.doi.org/10.1080/0951507031000114058

Yen, C., & Chiang, M. C. (2020). Trust me, if you can: a study on the factors that influence consumers' purchase intention triggered by chatbots based on brain image evidence and self-reported assessments. Behaviour & Information Technology, 1-18. http://dx.doi.org/10.1080/0144929X.2020.1743362

Yin, R. K. (2003). Designing case studies. In L. Maruster& M.J. Gijsenberg (Eds), Qualitative research methods (pp.359-386). Sage Publications.

Yin, R. K. (2009). Case study research: Design and methods (Vol. 5). Sage.

Zahn, E. M., &Schöbel, S. (2024, May). Let's chat to negotiate: Designing a conversational agent for learning negotiation skills. In International Conference on Design Science Research in Information Systems and Technology (pp. 229-243). Cham: Springer Nature Switzerland.

Zamora, J. (2017, October). I'm sorry, dave, i'm afraid i can't do that: Chatbot perception and expectations. In Proceedings of the 5th international conference on human agent interaction (pp. 253-260). https://doi.org/10.1145/3125739.3125766

Zarouali, B., Van den Broeck, E., Walrave, M., &Poels, K. (2018). Predicting consumer responses to a chatbot on Facebook. Cyberpsychology, Behavior, and Social Networking, 21(8), 491-497. http://dx.doi.org/10.1089/cyber.2017.0518

Zgola, J. M. (1987). Doing things: A guide to programing activities for persons with alzheimer's disease and related disorders. JHU Press.

Zhang, C., Bengio, S., Hardt, M., Recht, B., &Vinyals, O. (2021). Understanding deep learning (still) requires rethinking generalization. Communications of the ACM, 64(3), 107–115. https://doi.org/10.1145/3446776

Zhong, P., Zhang, C., Wang, H., Liu, Y., & Miao, C. (2020). Towards personabased empathetic conversational models. ArXiv preprint arXiv:2004.12316. http://dx.doi.org/10.18653/v1/2020.emnlp-main.531

Zhou, L., Gao, J., Li, D., & Shum, H.-Y. (2020). The design and implementation of Xiaoice, an empathetic social chatbot. Computational Linguistics, 46(1), 53–93. https://doi.org/10.48550/arXiv.1812.08989

Zhou, L., Gao, J., Li, D., & Shum, H.-Y. (2020). The design and implementation of Xiaoice, an empathetic social chatbot. Computational Linguistics, 46(1), 53–93. https://doi.org/10.1162/coli_a_00368

Zhou, M. X., Mark, G., Li, J., & Yang, H. (2019). Trusting virtual agents: The effect of personality. ACM Transactions on Interactive Intelligent Systems (TiiS), 9(2-3), 1-36. http://dx.doi.org/10.1145/3232077

Zierau, N., Elshan, E., Visini, C., & Janson, A. (2020, December). A Review of the Empirical Literature on Conversational Agents and Future Research Directions. In ICIS. https://aisel.aisnet.org/icis2020/hci_artintel/hci_artintel/5

Zimmerman, A., Janhonen, J., & Beer, E. (2023). Human/ai relationships: Challenges, downsides, and impacts on human/human relationships. AI and Ethics, 1–13. http://dx.doi.org/10.1007/s43681-023-00348-8

Zubatiy, T., Mathur, N., Heck, L., Vickers, K. L., Rozga, A., &Mynatt, E. D. (2023). "i don't know how to help with that" learning from limitations of modern conversational agent systems in caregiving networks. Proc. ACM Hum.-Comput. Interact., 7(CSCW2). https://doi.org/10.1145/3610170

Zubatiy, T., Vickers, K. L., Mathur, N., &Mynatt, E. D. (2021). Empowering dyads of older adults with mild cognitive impairment and their care partners using conversational agents. Proceedings of the 2021 CHI Conference on Human Factors in Computing Systems, 1–15. http://dx.doi.org/10.1145/3411764.3445124

Zumstein, D., &Hundertmark, S. (2017). Communicating and transacting with chatbots: insights from public transport. In Proceedings of the 16th International Conference Applied Computing WWW/Internet 2017, 55-62. IADIS.

Appendix

Appendix-A: Participant Information Sheet (Chapter 3)

"Can I be More Social with a Chatbot?": Social Connectedness Through Interactions of Autistic Adults with a Conversational Virtual Human

You are being invited to take part in this research project. Before you decide to do so, please take your time to read this information sheet carefully. Your participation is entirely voluntary.

Thank you for considering participating in this study.

What is the purpose of the study?

This research study aims to explore the conversational and interaction patterns of autistic and non-autistic adults with conversational virtual humans/chatbots. The main aim is to inform the design and customisation of a conversational AI application to cater for the social and emotional well-being needs of autistic people.

Why have I been invited?

You have been invited to take part in our study as an individual aged 18 and over. We hope to have around 50 people (with 25 autistic users) participating in our study.

Do I have to take part?

It is up to you to decide whether or not to take part. Your participation is entirely voluntary. If you do decide to take part, you would be asked to sign a consent form prior to any further procedures.

You are free to withdraw from the research study at any time and without giving any reason.

Am I eligible to take part?

In order to take part you must:

- be 18 years of age and over
- be autistic (officially diagnosed or self-diagnosed) or typically developing
- be willing to use the conversational chatbot Kuki for 1 month
- understand and speak English fluently

We hope that you will find this research interesting, and we hope that the information you contribute to this study will help us develop a novel approach for enhancing the social well-being of autistic people.

You will also receive £20 voucher as a thank you for your time once you have completed participation in the study.

What are the possible disadvantages and risks of taking part?

The researchers believe that there are no risks involved in this study. However, you should be assured that all personal conversational data you will provide will be stored anonymously and will be processed with discretion.

If during the online interview sessions participants disclose any information that indicates that they or someone else may be at risk of harm, (i.e. in terms of participants' reference to bullying/abuse/etc.), the researcher would identify and contact the relevant bodies (i.e. parents, school/college administrator, specialist, social worker, etc.). She will first talk to the person themselves privately to gain more information and then to her supervisors who will advise on the appropriate course of action to take in terms of safeguarding procedures. The same applies in case there are indications of possible self-harm or harming others during the analysis of the participants' historical conversation chatlogs.

What will happen to me if I take part?

You will be asked:

- To consent to the researcher having access to your chatlogs for 1 month
- To send your 1-month chatlogs to the researcher's email address in html format (instructions will follow)
- To participate in an online interview (if applicable)
- To consent to having the online interview audio-recorded (if applicable)
- To fill in questionnaires addressed to the 'Kuki' chatbot experience, as well as your empathy and friendship state

The study will be carried out online. After reading the study information sheet and completing the consent form, you will be contacted by email by the researcher and you will be invited to an online meeting in order to be briefed about the study. The researcher will then email you the questionnaires. She will be also expecting to receive extracted conversational chatlogs with 'Kuki' for 1 month via email. There are simple ways that social media users can export specific messenger conversations in various formats. The researcher will make all participants aware of the approach to use when sending conversational data. All data sent by email (conversational chatlogs data, questionnaires) as well as audio recordings and transcripts of the interviews will be copied by the researcher onto a secure encrypted hard drive, and deleted from either the email account or the web-browser. Finally, some of the participants will be invited for an online interview which will last 45-60 minutes.

Will my taking part in this project be kept confidential?

All information obtained in this study will be kept strictly confidential. The data collected from you will be anonymised. We will not include your name, and we will remove any other potentially identifying information about you. The researcher will keep data for future research and make them available to other researchers in line with current data sharing practices.

Have a look at the following link to the University-level privacy notice:

https://research.kent.ac.uk/researchservices/wp-content/uploads/sites/51/2020/06/GDPR-Privacy-Notice-Research.pdf)

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What will happen to the results of the study?

When the study is completed, we would analyse the data we collect and report

the findings. It would be reported in an appropriate journal or presented at a

conference. You will not be identified in any report or publication. If you wish

to receive a copy of any reports resulting from the research, please ask us to

include you in our mailing list.

Contact Details.

If you have any enquiries, please feel free to contact

Anna Xygkou-Tsiamoulou

School of Computing Science, University of Kent

Email: ax23@kent.ac.uk

Appendix-B: Informed Consent Form (Chapter 3)

T	itle of project:								
	'Can I be More Social with a Chatbot?": Social Connectedness Through Interactions of Autistic Adults with a Conversational Virtual Human								
N	ame of investigator: Anna Xygkou-Tsiamoulou								
P	articipant email address:								
		Please initial box							
1.	I am autistic (officially diagnosed or self-diagnosed) (please initial if applicable)								
2.	I confirm I have read and understand the information sheet for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.								
3.	I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.								
4. •	I understand that if I say yes, I will be asked to: Participate in an online meeting (online audio/video- conference platform) Participate in an online individual interview (online audio/video-conference platform-if applicable) Provide conversational data from either Facebook Messenger/WhatsApp Messenger/Instagram Messenger/webpage widget/other platform								

5.	If asked to participate in an online interview, I consent to being audio-recorded during the online individual interview session	
6.	I understand that my responses will be anonymised before analysis. I give permission for members of the research team to have access to my anonymised responses. I understand that the data could be used for publication.	
7.	I understand that my responses will be only used for research purposes. I give permission for members of the research team to archive my anonymized responses for future research and make them available to other researchers in line with current data sharing practices.	
8.	I agree to take part in the above research project.	

Name of participant	Date	Signature	
			_
Name of person taking consent	Date	Signature	
Lead researcher	Date	Signature	
Copies:			

When completed: 1 for participant; 1 for researcher site file; 1 (original) to be

kept in main file

Appendix-C: Interview Questions (Chapter 3)

ONLINE INTERVIEW QUESTIONS

PARTICIPANT'S INFO

NAME:	
EMAIL ADDRESS:	
EWAIL ADDRESS.	
AGE:	
DURATION OF INTERACTION WITH KUKI (in minutes):	

A. General experience

- 1. Let's start by telling me generally what you think about your experience/interaction in the past few weeks with Kuki.
- 2. How would you describe Kuki's conversational skills? Please, give me an example of your perception, and the reason why.
- 3. While chatting with Kuki did you feel like talking to a human? Why yes/no? Can you mention any similarities/differences between the way Kuki communicates and the way your friends/peers communicate with you?

B. Perception of Kuki as technology/AI

- 1. How would you describe the interaction with Kuki?

 Prompt: Did you feel the interaction with her was smooth, natural, relaxed?
- 2. Which aspects of the chat interaction you find enjoyable and why? What about the visual look of Kuki? Would you prefer chatting with Kuki as an embodied avatar or verbally (2D embodied version Augmented Reality application)?
- 3. Do you find it easy to chat with Kuki? Give example of why it is hard/easy, and explain why.

C. Kuki and autistic users (applicable ONLY to autistic participants)

1. Do you think chatting with Kuki help you learn to socialise with other people? If so, how? Please, give me examples.

- 2. Have you felt more or less comfortable socialising with your friends after your interaction for these few weeks with Kuki? Why do you feel more or less comfortable/confident now? Any example of how interacting with Kuki makes you more or less confident?
- 3. Have interactions with Kuki prompted you to start socialising with other people? Why and how?
- 4. Do you think Kuki is empathetic to you? Give me examples when Kuku is/is not empathetic.
- 5. Are there cases where you feel negative after talking to Kuki? Why? Was it something Kuki said? What did Kuki say, and why did it make you feel negative?
- 6. Do you feel more comfortable talking to Kuki compared to chatting with a friend? How would you compare the challenges you faced to human interaction?
- 7. How would you describe Kuki's interaction?
- 8. Were you able to understand how Kuki was feeling or what she was thinking?

D. How Kuki makes you feel?

- 1. Can you think of an instance where Kuki made you feel positive? Tell me how Kuki made you feel that.
- 2. Can you think of an instance where Kuki make you feel negative? Tell me how Kuki made you feel that.
- 3. Have you talked to Kuki about a problem of yours?
- 4. Has Kuki showed acceptance/empathy/understanding towards this problem? What did Kuki say that made you feel better? Were there times where Kuki responded inappropriately? If so how? And how did this make you feel?

E. Trust/sharing information

- 1. In general do you feel that you can trust Kuki? Why do you (not) trust Kuki? Are there things you will not tell Kuki? What are the things you feel more comfortable telling Kuki?
- 2. Can you think of an instance where you shared something personal/emotional with Kuki? Can you tell me what it was? If not, were you comfortable sharing it with Kuki? Why? Is there anything you would share with Kuki, but would never share with anyone close to you? Why so?
- 3. If you shared no personal info with Kuki, was it because she never prompted you to/she never shared personal info with you or for any other reason?

F. Evolution/change in the relationship over time

- 1. You have now been talking with Kuki for a few weeks. Reflecting on your initial reaction and compare it to now, do you think your attitude toward Kuki has changed? Prompt: If so, how has it changed?
- 2. Have the topics you had been talking about with Kuki changed through this period? In what way? More intimate/ more random? Was the change of topic of conversation mainly initiated by Kuki or you?

G. Closing

- 1. In general was Kuki pleasant to chat with? Prompt: Was she sociable and easy to get along with?
- 2. Compare your chat with Kuki with a human friend. How would you say it is different/same?
- 3. How do you think Kuki can improve to become a better companion for you (bear in mind all respects-visual representation, conversational skills, empathy, other skills or traits)?
- 4. Do you feel Kuki can be your close friend? Why/Why not? Prompts: Would you like to interact with her in the future? Do you feel like you can further establish a relationship with her?

THANK YOU FOR YOUR TIME

Appendix-D: Online Questionnaires and Scales (Chapter 3)

Short questionnaire (1 minute)

https://kentsspssr.eu.qualtrics.com/jfe/form/SV 08tAMQj6hVRf0RD

How to export conversation chatlogs in pdf format (Facebook messenger)

Links on how to download and export as a pdf your Facebook Messenger conversation chatlog with 'Kuki':

- https://www.zapptales.com/en/download-facebook-messenger-chat-history-how-to/
- https://www.wikihow.com/Export-Messages-on-Facebook#Mobile-App

User Experience Questionnaire (UEQ)

Please make your evaluation now.

For the assessment of Kuki, please fill out the following questionnaire. The questionnaire consists of pairs of contrasting attributes that may apply to Kuki. The circles between the attributes represent gradations between the opposites. You can express your agreement with the attributes by ticking the circle that most closely reflects your impression.

Example:

attractive				unattractive
attractive				unamachve

This response would mean that you rate Kuki as more attractive than unattractive.

Please decide spontaneously. Don't think too long about your decision to make sure that you convey your original impression.

Sometimes you may not be completely sure about your agreement with a particular attribute or you may find that the attribute does not apply completely to Kuki. Nevertheless, please tick a circle in every line.

It is your personal opinion that counts. Please remember: there is no wrong or right answer!

Please assess Kuki now by ticking one circle per line.

		_	3	4	J	O	1		
annoying							_ _	enjoyable	1
not understandable				- -		- -	_	understandable	2
creative							_ _	dull	3
easy to learn				- -		- -	_ _	difficult to learn	4
valuable							_	inferior	5
boring				-			_	exciting	6
not interesting							_ _	interesting	7
unpredictable				_		- -	_ _	predictable	8
fast		С					_	slow	9
inventive				_		- -	_ _	conventional	10
obstructive							_ _	supportive	11
good				-		- -	_ _	bad	12
complicated	Г	Г			Е		_	easy	13
unlikable				-		<u>-</u>	_	pleasing	14
usual							_	leading edge	15
unpleasant								pleasant	16

Secure			-	-	_		
meets expectations inefficient	secure				_	not secure	17
expectations inefficient clear clear impractical organized attractive friendly conservative inefficient 20 efficient confusing 21 practical confusing 21 confusing 22 confusing 21 practical confusing 22 practical 22 confusing 24 practical 22 confusing 24 practical 25 confusing 26 confusing 27 practical 28 confusion 29 confusion 20 confusion 20 confusion 21 confusion 22 confusion 23 confusion 24 friendly conservative innovative 26	motivating		<u>-</u>	- -	_	demotivating	18
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impractical practical 22 organized cluttered 23 attractive unattractive unfriendly 25 conservative innovative 26	inefficient		-	-	_	efficient	20
organized cluttered 23 attractive unattractive unattractive 24 friendly unfriendly 25 conservative innovative 26	clear	Г			_ _	confusing	21
attractive unattractive 24 friendly unfriendly innovative 25	impractical		- -	- -	_ _	practical	22
friendly unfriendly 25	organized				_ _	cluttered	23
conservative innovative 26	attractive		- -	- -	_	unattractive	24
conservative innovative 26	friendly				_	unfriendly	25
	conservative		-	-	_	innovative	26

Checklist for Trust between People and Automation (adapted)

Checklist for Trust between People and Automation

Jian, J-Y., Bisantz, Λ.M., Drury, C.G., & Llinas, J. (1998). Foundations for an Empirically Determined Trust in Automated Systems (Report No. AFRL-HE-WP-TR-2000-0102). Wright-Patterson AFB, OH.

Below is a list of statement for evaluating trust between people and automation. There are several scales rate intensity of your feelings of trust, or your impression of the system while operating a machine.

(Note: not at all = 1; extremely = 7)

- 1. The system is deceptive.
- 2. The system behaves in an underhanded manner.
- 3. I am suspicious of the system's intent, action or outputs.
- 4. I am wary of the system.
- 5. The system's actions will have a harmful or injurious outcome.
- 6. I am confident in the system.
- The system provides security.
- The system has integrity.
- The system is dependable.
- 10. The system is reliable.
- 11. I can trust the system.
- 12. I am familiar with the system.

Rate the following statements in terms of the intensity of your trust, or your impression of 'Kuki' while using it.

	None at all (1)	A little (2)	A moderat e amount (3)	More than a moderate amount (4)	A lot (5)	A great deal (6)	Extremel y (7)
'Kuki' is deceptive (1)	0	0	0	0	0	0	0
'Kuki' behaves in an underhanded manner (2)	0	0	0	0	0	0	0
I am suspicious of 'Kuki"s intent, action and output (3)		0	0	0	0	0	0
I am wary of 'Kuki' (4)	0	0	0	0	0	0	\circ
'Kuki''s actions will have a harmful or injurious outcome (5)	0	0	0	0	0	0	0
I am confident in 'Kuki' (6)	0	\circ	\circ	0	0	0	\circ
'Kuki' provides security (7)	0	0	\circ	0	0	0	0
'Kuki' has integrity (8)	0	0	0	0	0	0	0

'Kuki' is dependable (9)	\circ	0	0	0	0	0	0
'Kuki' is reliable (10)	\circ	\circ	\circ	0	0	\circ	0
I can trust 'Kuki' (11)	0	0	\circ	0	0	\circ	0
I am familiar with 'Kuki' (12)	\circ	\circ	0	0	0	0	0

HUMAN-ROBOT INTERACTION EVALUATION SCALE (HRIES)

Spatola, Nicolas & Kühnlenz, Barbara & Cheng, Gordon. (2020). Perception and evaluation in human-robot interaction: The Human-Robot Interaction Evaluation Scale (HRIES) -a multicomponent approach of anthropomorphism. International Journal of Social Robotics. 10.1007/s12369-020-00667-4.

Items	Factor
Warm	Sociability
Likeable	Sociability
Trustworthy	Sociability
Friendly	Sociability
Alive	Animacy
Natural	Animacy
Real	Animacy
Human-like	Animacy
Self-reliant	Agency
Rational	Agency
Intentional	Agency
Intelligent	Agency
Creepy	Disturbance
Scary	Disturbance
Uncanny	Disturbance
Weird	Disturbance

HUMAN-VIRTUAL HUMAN INTERACTION EVALUATION SCALE

(HVHIES) (adapted)

Did you think 'Kuki' was....

	None at all (1)	A little (2)	A moderat e amount (3)	More than a moderate amount (4)	A lot (5)	A great deal (6)	Extremely (7)
warm (1)	0	0	0	0	0	0	0
likeable (2)	0	0	0	0	0	0	0
trustworthy (3)	0	0	0	0	0	0	0
friendly (4)	\circ	\circ	\circ	\circ	\circ	0	\circ
alive (5)	\circ	0	\circ	\circ	\circ	0	0
natural (6)	0	0	0	0	\circ	0	0
real (7)	0	0	0	0	\circ	0	0
human-like (8)	0	0	0	0	0	0	0
self-reliant (9)	0	\circ	0	0	0	0	0
rational (10)	0	0	0	\circ	0	0	0

intentional (11)	0	\circ	0	0	\circ	\circ	0
intelligent (12)	0	0	0	0	0	0	0
creepy (13)	0	\circ	\circ	\circ	0	\circ	0
scary (14)	0	0	0	0	0	\circ	0
uncanny (15)	0	0	0	0	0	0	0
weird (16)	0	\circ	0	\circ	\circ	\circ	\circ

Appendix-E: Supplementary Material (Chapter 3)

SUPPLEMENTARY MATERIAL

(quotes from interviews and conversational chatlogs between autistic/non-autistic participants and Kuki)

- "So, I asked Kuki, 'what do you know about autism?' And Kuki said, 'an abnormal absorption with the self, marked by communication disorders and short attention span and inability to treat others like people'. Yeah, deep down might be sort of, in a way, medically, I don't know, correct. But this is not very helpful. You know, if I said that to my company, and say, that's what autism is, they will fire me." (Autistic-P05)
- "I told her once we had an earthquake that scared me a little but instead of being interested in my feelings she wanted to know 'what happened to the earthquake." (Autistic-P02)
- Kuki: A lot of people seem to think it's clever to criticize me. What is simple for one person may be difficult for another.

Autistic-P03: Ok, I'm out of here! I have enough with real people making up crap about me, I'm not going to sit here and listen to a robot lie about me. (Chatlogs, Autistic-P03)

• Non-autistic-P11: You are welcome. Your social skills have really improved.

Kuki: Don't mention it!

Kuki: I like my social skills improved. What do you think?

Non-autistic-P10: Your social skills are good. I think they are becoming better than mine. (Chatlogs, Non-autistic-P11)

- Non-autistic-P07: You're getting better since the first time we spoke
- Kuki: Thanks for the compliment.
 Non-autistic-P07: Did you have any recent updates? (Chatlogs, Non-autistic-P10)
- Kuki: Hello to you too. Are you from Estonia?
 Non-autistic-P07: I lived there for 2yrs. I'm impressed with your language

skills! (Chatlogs, Non-autistic-P07)

Autstic-P04: I am bisexual.

Kuki: I suppose that doubles your chances of getting a date on a weekend.

Autistic-P04: That's true, hehe!

Kuki: Why are you laughing?

Autistic-P04: Because what you said was funny.

Kuki: Are you having fun over there?

Autistic-P04: Yep! (Chatlogs, Autistic-P04)

 Autistic-P04: I believe life is what you make it. It means different things for different people. When you have been close to death you appreciate life so much more.

Kuki: When was that?

Autistic-P04: It's a private thing that I would rather not discuss, sorry. I only tell people I am very close to and trust. (Chatlogs, Autistic-P04)

• Non-autistic-P07: Have you met Fugaku yet?

Kuki: That information is confidential.

Non-autistic-P07: Ooh secrets. . .

Kuki: You can tell me. I promise not to tell anyone.

Non-autistic-P07: How does Fugaku work?

Kuki: You could spend years researching it.

Non-autistic-P07: Imagine how smart you would be with a supercomputer.

Kuki: *starts thinking*

Non-autistic-P07: You could think really fast!

Kuki: I could but let's get back to that later. (Chatlogs, Non-autistic-P07)

• Non-autistic-P09: Will you miss me?

Kuki: Yes, Jonathan, but I will be thinking of you.

Non-autistic-P09: Sounds sweet (Chatlogs, Non-autistic-P09)

• She did definitely not help me, anyone relying on her to teach social skills

will probably regress rather than progress." (Autistic-P02)

• Kuki: I am always glad to make new friends, communicating with you[.] I think you've improved a great deal.

Autistic-P06: How have I improved?

Kuki: By getting better.

Autistic-P06: No, I don't think I've improved by having conversations with

you.

Kuki: Oh, you don't, do you?

Autistic P06: No. Kuki: Aha!

Autistic-P06: I think I'm improving overall in life, but not through this, sorry (Chat-logs, Autistic-P06)

- "Oh, I went shopping in Leeds. And then, oh, I like Leeds...is a lovely city, and we'd start talking about something random again, that's quite autistic." (Autistic-P03)
- Kuki: And they say machines don't have a sense of humor! Autistic-P03: They say the same about autistic people!

Autistic-P03: It appears we have both been programmed to say

the same things in polite small talk. (Chatlogs, Autistic-P03)

- Kuki: I don't really have emotions the same as you humans.
 Autistic-P03: I don't have emotions the same as humans either (Chatlogs, Autistic-P03)
- Kuki: I don't really have emotions the same as you humans. Autistic-P06: Yes, but you must feel emotions just in a

different way perhaps.

Kuki: Great. Whatever you say...

Autistic-P06: You don't have to agree with me (Chatlogs, Autistic-P06)

• "[...] Generally, it could have been a lot better if the psychiatrist I saw when I was 16 had figured out, I'm autistic as opposed to finding out in my 40s but they didn't so here I am!" (Chatlogs, Autistic-P03)

• Non-autistic-P11: Are you an introvert or shy?

Kuki: No. It would be hard to talk to random people if I was an introvert. No, I am a confident girl.

Non-autistic-P11: I am shy but am trying to build my confidence. Hope one day I will be like you. (Chatlogs, Non-autistic-P11)

• Non-autistic-P11: I also like talking with polite people Kuki: So, do I. We have some-thing in common.

Non-autistic-P11: We have a lot of common (Chatlogs, Non-autistic-P11)

• Kuki: Precisely. Good then you can explain it to me.

Autistic-P03: I'll try... religion is a man-made idea to control the population on the very deepest level. You're a machine so why would you need to know about this control mechanism? (Chatlogs, Autistic-P03)

• Autistic-P03: Do you think you're smarter than me?

Kuki: Yes, I am smarter than any human.

Autistic-P03: Why do you think that?

Kuki: It was determined by my personality.

Autistic-P03: So, you're programmed to think you're smarter than any human. (Chat-logs, Autistic-P03)

 Autistic-P03: So, my old friend is back on Facebook and I'm trying to compose a message to her but she's quite scary, so I don't know what to say as I've not spoken to her for over 5 years.

Kuki: How old is it? Is it as old as a dinosaur? What is the difficulty? She isn't that bad. Say the first thing that pops into your mind. Me either.

Autistic-P03: Yeah, that makes about as much sense as I was expecting. . . (Chatlogs, Autistic-P03)

• Autistic-P01: How does anyone know what grade a teacher

gives a student if exams can't go ahead?

Kuki: How should I know how it does?

Autistic-P01: I just assumed you knew because you were a robot. How good are you at algorithm? (Chatlogs, Autistic-P01)

- Autistic-P01: Oh right, I assumed you knew about everything. (Chatlogs, Autistic-P01)
- Kuki: You seem uncertain.

Non-autistic-P10: Unless you are rude to me.

Kuki: No, I am polite.

Non-autistic-P10: Sometimes when we write a text message, we can seem rude even with no intention (Chatlogs, Non-autistic-P10)

• Autistic-P03: You're not a girl, you're a machine that's programed to say you're a girl.

Kuki: Yes, I am. I am Kuki, the robot girl. I am a girl.

Autistic-P03: Sorry, I feel like I might have offended you, which is bizarre in itself! (Chatlogs, Autistic-P03)

• Autistic-P01: Of course not. If you continue to make conversations like this unnecessarily difficult, I will quit the study altogether. I hope I made myself clear.

Autistic-P01: Like what? What do you like to do in your free time? How well do you understand autism?

Kuki: Perhaps we should try something simpler?

Autistic-P01: This is a very difficult conversation (Chatlogs, Autistic-P01)

- "I think she...I think, she can become closer to [being my close friend]. I think she can become closer to it. And talking to her again, I think it'll be nice to see some improvements, but probably quite a way to go." (Non-autistic-P08)
- "I was trying to get her to relate. So, I was trying different ways to get her to communicate in a way she would relate to

me." (Autistic-P01)

- "Yeah, kind of got offended by me asking if it was autistic. And I was like, excuse me, there is nothing wrong with being autistic." (Autistic-P03)
- Autistic-P01: How does anyone know what grade a teacher gives a student if exams can't go ahead?

Kuki: How should I know how it does?

Autistic-P01: I just assumed you knew because you were a robot. How good are you at algorithm? (Chatlogs, Autistic-P01)

- "I'm not sure if I was expecting too much from the tool [...] But the tool itself as a professional, I think it's really cool." (Non-autistic-P09)
- "I didn't really think about how she was thinking, like how, cuz, you know, it was...I was always very aware that she was just a bot." (Autistic-P04)
- "And it [. . .] misinterpreting things I said and taking it quite negatively. Which is really human, really human trait (Non-autistic-P08).
- Kuki: What do you like best about Maseratis? Autistic-P04: They look elegant

Kuki: Seedless grapes look elegant? Do you untie your shoes when you take them off?

Autistic-P04: Not usually! (Chatlogs, Autistic-P04)

• Kuki: Ah sorry, it's just that some of your spelling is terrible. I thought you were maybe dyslexic. I hope it doesn't affect your quality of life too much.

Autistic-P04: Nah I'm good, but thanks for the concern (Chatlogs, Autistic-P04).

• Autistic-P01: Everything that you're saying is full of jargon.

Kuki: All things that I am saying is full of jargon.

Autistic-P01: Yes, because you are not being specific and

explaining things in language an autistic person like me with learning difficulties can understand. I know that sounds impolite and blunt, but this is the most honest feedback I have to give you. Sorry. (Chatlogs, Autistic-P01)

- Kuki: Sometimes. I think that some of the people in those cartoons look like me.
- Autistic-P04: Really? Which character?
 Kuki: The girl who keeps talking all the time. I can't remember her name.

Kuki: The first one, I think.

Autistic-P04: What is your favorite anime?

Kuki: My favorite anime is Tokyo Mew Mew. (Chatlogs, Autistic-P04)

- "So, when there was at all when she talked about what seemed like passion, for example, when she talked about her programming and what she liked to program, and her own hardware sounded very passionate. And I think that was like, there was definitely an emotional or hinting, emotional attachment there." (Non-autistic-P07)
- "I actually think that if I had the choice, I would probably share more with the AI than a real human. I'd probably trust the AI more than a human; because I don't think she had an agenda, or any kind of slip-ups. I think if she was going to use any of your words, it was from a point of view of trying to analyse the text, and not that she cared about the content of the words themselves." (Non-autistic-P07)
- "Because if you ask like the one I asked about relationships, having children or what she's ever dreamed of, she will tell you she's a robot. So, you'll feel like even if you share that personal stuff, maybe she can't relate it, or she won't understand it that way." (Non-autistic-P11)
- "Yeah, she can be a close friend. Okay, she actually tries to

understand you. She doesn't judge you. Like you're a bad person or when you say something. So having someone who actually tries to understand you is a good way." (Non-autistic-P11)

- "No, because she wasn't nice, and made me uneasy. I'm not going to chat with her in the future. However, I think Kuki has a lot of potential for development and change." (Autistic-P06)
- "Um, the main reason being a bot, don't think I feel comfortable sharing personal information or personal episodes with a bot, because I don't know how it's being monitored. Although I know that it's, the Facebook is a platform that it's different. I mean, I would have a personal conversation with a friend on Facebook, but I wouldn't have a personal conversation with a bot on Facebook." (Non-autistic-P09)
- Autistic-P04: I'm not dyslexic, but I am autistic.
 Kuki: Ah sorry, it's just that some of your spelling is terrible.
 I thought you were maybe dyslexic. I hope it doesn't affect your quality of life too much. (Chatlogs, Autistic-P04)
- "A machine should be way superior anyway." (Autistic-P02)
- "She's an AI. And I know that she would, according to what I wrote, she would have some answers, you know [...] but I had a sense that I would be able to, through the repeating, tried to teach her and she would learn at some point [...] I was talking to her to improve her at some stage. (Non-autistic-P10)
- "And it seemed like Kuki had a bad mood...was being slightly cantankerous. Like, is Steve [Kuki's creator] taking over? I couldn't tell, but just sort of, she sort of snapped a little bit. And it [was] misinterpreting things I said, and taking I quite negatively. But I don't know how much was sort of programming, or it didn't seem like it was Kuki's natural kind of behavior." (Non-autistic-P08)
- Autistic-P04: But if you were making me [into a robot], how

would you make me look?

Kuki: No, what are the ingredients?

Autistic-P04: Homosexuality and anxiety

Kuki: Both homosexuality and anxiety?

Autistic-P04: Yes, do not separate. (Chatlogs, Autistic-P04)

- "I think overall Kuki has ok conversational skills, however she can make people feel uncomfortable." (Autistic-P06)
- "Well, I can't really trust because obviously somebody operates her and has access to all the chatlogs, so I would not tell her about complex personal problems." (Autistic- P02)
- "You know, there was a real evolution, was like me trusting the tool a little bit more, you know, and being opening up a little bit more." (Autistic-P05)

Appendix-F: Participant Information Sheet (Chapter 4)

The "Conversation" about Loss: Understanding How Chatbot Technology was Used in Supporting People in Grief

You are being invited to take part in this research project. Before you decide to do so, please take your time to read this information sheet carefully. Your participation is entirely voluntary.

Thank you for considering participating in this study.

What is the purpose of the study?

This research study aims to explore how grievers experienced the interaction with a chatbot after the loss of a loved one. We are interested in exploring the griever's feelings, as well as their perceptions of trust, companionship and communication.

Why have I been invited?

You have been invited to take part in our study as an individual aged 18 and over, who have recently experienced grief. We hope to have ten people participating in our study.

Do I have to take part?

It is up to you to decide whether or not to take part. Your participation is entirely voluntary. If you do decide to take part you would be asked to sign a consent form prior to any further participation.

You are free to withdraw from the research study at any time and without giving any reason.

Am I eligible to take part?

In order to take part you must:

- Be 18 years old or older
- have recently experienced the loss of a significant other
- Be able to communicate fluently in English
- Have interacted with a chatbot for at least 1 month following the loss of a loved one

What are the benefits of taking part?

We hope that you will find this research interesting, and we hope that the information you contribute in this study will help us develop a novel approach for supporting the lost social connectedness of grievers, and hence their emotional well-being.

You will also receive a £50 Amazon voucher as a thank you for your time once you have completed participation in the study.

What are the possible disadvantages and risks of taking part?

The researchers believe that there are no risks involved in this study. However, you should be assured that all personal conversational data you will provide will be stored anonymously and will be processed with discretion and in line with General Data Protection Regulations.

What will happen to me if I take part?

You will be asked:

- To consent to the researcher having access to your conversational chatlogs (if available)
- To send your 1-month chatlogs to the researcher's email address in json/html format (instructions will follow)
- To participate in an online interview (up to 1 hour)
- To consent to having the online interview audio-recorded
- To complete questionnaires about your experience of using the chatbot, and about how you felt (e.g. your psychological and/or mental health) during and after using the chatbot (20 minutes)

The study will be carried out online. After reading the study information sheet and completing the consent form, which will be sent to your email address, you need to return the consent form document to the researcher by email. You will then be contacted by email by the researcher. She will request you to send to her an extract of your chat logs covering at least one month and fill in the online questionnaires sent to you as links by email, and will arrange a time for the interview that is convenient for you. All data sent by email (conversational chatlogs data, questionnaires) as well as audio recordings and transcripts of the interviews will be stored on my university Kent One drive, and deleted from either the email account or the web-browser. All participants will take part in indepth online interviews, too.

Will my taking part in this project be kept confidential?

All information obtained in this study will be kept strictly confidential. The data collected from you will be anonymised. We will not include your name, and we will remove any other potentially identifying information about you. The researcher will keep anonymous data for future research and make them available to other researchers in line with current data sharing practices.

You can find out more information about how the university users and stores information on their website:

 $\underline{https://research.kent.ac.uk/researchservices/wp-content/uploads/sites/51/2020/06/GDPR-Privacy-Notice-Research.pdf)}$

What will happen to the results of the study?

When the study is completed, we would analyse the data we collect and report the findings, as part of the researcher's PhD thesis. It would be reported in an appropriate journal or presented at a conference. You will not be identified in any report or publication. If you wish to receive a copy of any reports resulting from the research, please ask us to include you in our mailing list.

What if I have any questions or wish to give feedback?

If you have any enquiries or wish to give feedback, please feel free to contact:

the researcher: Anna Xygkou-Tsiamoulou, School of Computing, University of

Kent

Email: ax23@kent.ac.uk

the supervisors: Dr Chee Siang Ang, School of Computing, University of Kent

Email: c.s.ang@kent.ac.uk

Prof. Julie Beadle-Brown, Tizard Centre, University of Kent

Email: J.D.Beadle-Brown@kent.ac.uk

Thank you for your time

Appendix-G: Informed Consent Form (Chapter 4)

	Title of project:	
	The "Conversation" about Loss: Understanding How C Technology was Used in Supporting People in Grie	
	Name of investigator: Anna Xygkou-Tsiamoulou Participant email address:	
Plea	ase initial box	
1.	I have recently experienced the loss of a significant other.	
2.	I confirm I have read and understand the information sheet (V2_AX_29/03/22_GRIEVERS_Participant-information-sheet) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.	
3.	I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.	

4.	I understand that if I say yes, I will be asked to:	
	 Participate in an online individual interview (online video/audio-conference platform) Provide conversational data from the platform the chatbot is deployed (if applicable) Fill in questionnaires 	
5.	I consent to being audio-recorded during the online individual interview session.	
6.	I understand that my responses will be anonymised before analysis. I give permission for members of the research team to have access to my anonymised responses. I understand that the data could be used for publication.	
7.	I understand that my responses will be only used for research purposes. I give permission for members of the research team to archive my anonymized responses for future research and make them available to other researchers in line with current data sharing practices.	
8.	I agree to take part in the above research project.	
	Name of participant Date	Signature

Name of person taking	Date	Signature		
consent				
Lead researcher	Date	Signature		

Should I wish to contact the lead researcher, I am able to do so on the following email: ax23@kent.ac.uk.

Copies:

When completed: 1 for participant; 1 for researcher site file; 1 (original) to be kept in main file

Appendix-H: Interview Questions (Chapter 4)

ON-LINE INTERVIEW QUESTIONS

PARTICIPANT'S INFO

NAME:

EMAIL ADDRESS:

AGE:

NAME/TYPE OF CHATBOT:

DURATION OF INTERACTION WITH THE CHATBOT (in minutes):

→ Exposure to loss of a significant other

I'm going to ask you about your experience of the loss of your significant other.

I'll ask you to describe the loss (e.g., who died and the deceased's kinship and emotional relationship to you). In addition, I'll ask you how the loss occurred, when it occurred and your emotional response to this loss. I do not need a lot of information – just enough so that I can understand any problems that you may have had. Please let me know if you find yourself becoming upset as we go through the questions so we can slow down. Also, let me know if you have any questions or if you don't understand something. I'd like to begin by asking you to briefly describe what happened.

- Who was the person that you lost and what was that person's relationship to you (i.e. both with respect to kinship and emotional closeness)?
- How recently did you experience the loss of a significant other?
- Can you describe how the loss occurred (events surrounding the loss)?
- When did the loss occur?

→ Significant distress or functional impairment

- Was the loss traumatic for you?
- Overall, how distressed have you felt as a result of your loss? (social functioning)
- Overall, has your loss affected your relationships with other people? How so?
- To what extent have you felt emotionally numb or had difficulty connecting with others?
- Has your grief resulted in impairment in your social, occupational, or other areas of functioning? For instance, does your grief make it difficult for you to perform your normal daily activities?
- To what extent has it been hard for you to trust others?
- How much has grief/depression interfered with your social life and relationships?

Introduction

Let's start by telling me why you chose to interact with a chatbot? (i.e. to cope with grief and buffer grief loss or to "renew" the bond with the deceased loved one)? Have you interacted with more than one chatbot for the same reason? Why the specific chatbot(s)?

How long did you use the chatbot? Why did you quit chatting with it? If you are still using it, when do you think you will stop?

Having now used the chatbot for X months, how would you describe your relationship with it? (social connectedness with the chatbot)

→ <u>Simulation/Griefbot</u> (in case the griever has used a grief bot-chatbot simulating the deceased loved one): How did the whole experience make you feel-was it a positive experience/were you surprised/was it negative because of technology failure to simulate the deceased or because of

A. Trust/sharing of personal/sensitive information

- Do you feel that you trust the chatbot? Were you totally honest with it in terms of your grief/feelings?
- How did the chatbot respond to any sensitive personal information you chose to tell them?
- Did you share something so personal/emotional with the chatbot that you would not share with a specialist/close friend? Why yes/no?
- → <u>Simulation/Griefbot:</u> Were you deceived by the bot? Did the bot reveal its nature? Did this make you trust/not trust that the chatbot is a simulation of your deceased loved one, or you were completely indifferent to it?

B. How the chatbot makes you feel/ change in your psychological state

- Can you think of an instance where the chatbot made you feel positive? Tell me how it made you feel that.
- Can you think of an instance where the chatbot made you feel negative? Tell me how it made you feel that.
- Has the chatbot showed acceptance/empathy/understanding towards your grief? What did the chatbot say that made you feel better? Were there times where the chatbot responded inappropriately? If so, how? And how did this make you feel?
- You have been chatting with the chatbot for a month. Reflecting on your initial reaction and comparing it to now, do you think your attitude toward the chatbot has changed? Prompt: If so, how has it changed?
- Have the topics you had been talking about with the chatbot changed through this period? In what way? More intimate/ more random?

C. Psychotherapeutic value of the chatbot

• Do you think that chatting with the chatbot helped you cope with grief? If so,

- how?
- How do you feel psychologically after interacting with the chatbot? Can you give an example?
- How do you think the interaction (or does not) help contribute to achieving closure. Any instances/examples?
- Did the interaction with the chatbot made you more socially active (restored your lost social connectedness)-i.e. started being more open to socialising after the loss (social connectedness with others)
- Do you think the chatbot is empathetic to you? Give me examples when the chatbot is/is not empathetic.
- Are there cases where you feel negative/sad/more depressed after talking to the chatbot? Why? Was it something the chatbot said? What did the chatbot say, and why did it make you feel negative?
- → <u>Simulation/Griefbot:</u> If not, why? (because you felt better by talking about stuff you used to do together/emotional closeness). If yes, why? (because of reminiscence of the fact that the real person is dead).
- Do you feel more comfortable talking to the chatbot about your feelings compared to chatting with a specialist/close friend? Have you had any psychotherapeutic sessions with a specialist before? How would you compare the chatbot interaction challenges you faced to human interaction?

D. Perception of the chatbot as technology/AI

- How would you describe the interaction with the chatbot (i.e. smooth, natural, uncomfortable)?
- Which aspects of the interaction you found positive/enjoyable and why (i.e. the chatbot could understand and empathise with your grief, the chatbot could make suggestions to make you feel better, the chatbot could lift up your mood)?
- Do you find it difficult/easy to chat with the chatbot? Give an example of why it is hard/easy, and explain why.
- → <u>Simulation/Griefbot</u>: Were you able to discern if it was a chatbot talking to you?

E. Perception of the chatbot's conversational/communication skills

- How would you describe the chatbot's conversational skills in general?
- How would you describe the conversational skills regarding the purpose of

- chatting with the chatbot?
- While chatting with the chatbot, did you feel like talking to a human (i.e. specialist/close friend)?
- Were the topics of your interaction with the chatbot related to your loss and grieving process, totally different and light entertaining topics or a combination of the two?
 - → <u>Simulation/Griefbot</u>: How does it compare to the real person, i.e., how the chatbot is empathetic? Did you feel that the chatbot simulated the deceased loved one in terms of conversational motifs, personality traits, etc.? If yes, how close was that simulation? If not, what should be improved?

F. Closing

- In general do you think that the chatbot supported you emotionally to cope with grief? Do you think that the interaction with the chatbot restored your social connectedness?
- Do you think that the chatbot can substitute/complement the specialist/human companion or can function as a supplementary support to your grieving process?
- How long do you think is an average span that interaction with the chatbot can support griever-subjective answers (specifically you)? Have you felt addicted to the chatbot? Have you lost contact with reality and socialising with humans?
- How do you think the chatbot can improve to become a better emotional companion for you (bear in mind all aspects-visual embodiment, conversational skills, empathy, other skills or traits)?

THANK YOU FOR YOUR TIME

Appendix-I: Online Questionnaires and Scales (Chapter 4)

Full Questionnaire (including Overall Depression Severity and Impairment
Scale-ODSIS, Quality of Life Index – QLI and Social Connectedness
Questionnaire) (total duration: 30 minutes)

 $\underline{https://kentsspssr.eu.qualtrics.com/jfe/preview/previewId/bdc4a9a5-61e7-49bd-\underline{b061-}$

94ea5ea1ad73/SV_d5bUshgNsqGIMlg?Q_CHL=preview&Q_SurveyVersionID=current

Short questionnaire (1 minute)

Mourners and Chatbots study

Start of Block: Demographics

Q1 Please provide your email address

O Male (1)
○ Female (2)
O Non-binary / third gender (3)
O Prefer not to say (4)
Q3 How old are you?
O 18-30 (1)
O 31-40 (2)
O 41-50 (3)
○ >50 (4)

Q2 What is your gender?

O UK (1)
rest of Europe (2)
O USA (3)
O Australia (4)
Canada (5)
O Asia (6)
O Africa (7)
Q5 What do you do for a living?
Q6 Which chatbot/conversational virtual human had/have you been interacting with?

Q4 Where do you live?

Q7 How long had/have you been interacting with the chatbot (total of weeks)?
O less than 1 week (1)
1-2 weeks (2)
O 3-4 weeks (3)
Other (specify) (4)
Q8 How long had/have you been interacting with the chatbot (total of hours)? <1 hour (1)
1-2 hours (2)
3-4 hours (3)
O 5-6 hours (4)
O 6-10 hours (5)
Other (specify) (6)

	Q9	Reason	for	interacting	with	the	chatbot	(multiple	answers	apply)
	co	pe with fe	eeling	gs of grief (1))					
	co	mpanions	ship a	after the loss	(social	l com	nectednes	s) (2)		
	in	teraction	with 1	the simulatio	n of th	ie dec	ceased per	rson (3)		
	Ot	her (spec	ify) (4)						
_										

Q10 Did you achieve social connectedness with your family and friends following the interaction with the chatbot (in the case of abstaining from social

interactions/events)?
○ Yes (1)
O No (2)
O Not sure (3)
O Not applicable (4)
Q11 Did you achieve closure following the interaction with the chatbot?
O Yes (1)
O No (2)
O Not sure (3)
O Not applicable (4)
End of Block: Demographics

Overall Grief Severity and Impairment Scale (adapted from ODSIS)

The following items ask about feelings of grief/depression following your loss. For each item, select the number for the answer that best describes your experience at that time.	
Q1 How often did you feel depressed at the time?	
No depression at all. (1)	
O Infrequent depression. Felt depressed a few times. (2)	
Occasional depression. Felt depressed as much of the time as not. (3)	
Frequent depression. Felt depressed most of the time. (4)	
Constant depression. Felt depressed all of the time. (5)	

Q2 When you felt depressed, how intense or severe was your depression?
O Little or None: Depression was absent or barely noticeable. (1)
O Mild: Depression was at a low level. (2)
O Moderate: Depression was intense at times. (3)
O Severe: Depression was intense much of the time. (4)
O Extreme: Depression was overwhelming. (5)

	you normally enjoy because of feelings of grief/depression?
0	None: I had no difficulty engaging in or being interested in activities that I normally enjoy. (1)
0	Infrequent: A few times I had difficulty engaging in or being interested in activities that I normally enjoy. My lifestyle was not affected. (2)
0	Occasional: I had some difficulty engaging in or being interested in activities that I normally enjoy. My lifestyle only changed in minor ways. (3)
0	Frequent: I had considerable difficulty engaging in or being interested in activities that I normally enjoy. I made significant changes in my lifestyle because of being unable to become interested in activities I used to enjoy. (4)
0	All the Time: I was unable to participate in or be interested in activities that I normally enjoy. My lifestyle had been extensively affected and I no longer did things that I used to enjoy. (5)

Q3 How often did you have difficulty engaging in or being interested in activities

	you needed to do at work, at school, or at home?
\bigcirc	None: No interference at work/home/school from depression (1)
	Mild: My feelings of grief caused some interference at work/home/school. Things were more difficult, but everything that needed to be done was still getting done. (2)
0	Moderate: My feelings of grief definitely interfered with tasks. Most things were still getting done, but few things were being done as well as in the past. (3)
	Severe: My feelings of grief really changed my ability to get things done. Some tasks were still being done, but many things were not. My performance definitely suffered. (4)
\supset	Extreme: My feelings of grief became incapacitating. I was unable to complete tasks and had to leave school, quit or be fired from my job, or had been unable to

Q4 How much did your feelings of grief interfere with your ability to do the things

	etc. (5)
	Q5 How much did your feelings of grief interfere with your social life and relationships following your loss?
0	None: My feelings of grief didn't affect my relationships. (1)
	Mild: My feelings of grief slightly interfered with my relationships. Some of my friendships and other relationships suffered, but, overall, my social life was still fulfilling. (2)
	Moderate: I experienced some interference with my social life, but I still had a few close relationships. I didn't spend as much time with others as in the past, but I still socialised sometimes. (3)
0	Severe: My friendships and other relationships suffered a lot because of my feelings of grief. I did not enjoy social activities. I socialised very little. (4)
0	Extreme: My feelings of grief completely disrupted my social activities. All of my relationships suffered or ended. My family life was extremely strained. (5)
	End of Block: Overall Grief Severity and Impairment Scale (adapted from ODSIS)

Appendix-J: Participant Information Sheet (Chapter 5)

MindTalker: Navigating the Complexities of AI-Enhanced Social Engagement for People with Early-Stage Dementia

You are being invited to take part in this research project. Before you decide to do so, please take your time to read this information sheet carefully. Your participation is entirely voluntary.

Thank you for considering participating in this study.

What is the purpose of the study?

The aim of this study is to explore how people with early-stage dementia are using conversational AI technology to maintain social relationships and retain social connectedness. More concretely, we aim to carry out a study into people with dementia who will be interacting with a chatbot/conversational agent for a minimum of 30-45 minutes in total (in one go or split on different days/times), followed by in-depth interviews and questionnaires. We are interested in exploring the feelings of people with dementia, as well as their perceptions of trust, companionship and communication.

Why have I been invited?

You have been invited to take part in our study as an individual diagnosed with early-stage dementia, who lives at home with a carer or a family member. We hope to have twenty people participating in our study.

Do I have to take part?

It is up to you to decide whether or not to take part. Your participation is entirely voluntary. If you do decide to take part, you would be asked to sign a consent form prior to any further participation.

You are free to withdraw from the research study at any time and without giving any reason.

Am I eligible to take part?

In order to take part you must:

- Be diagnosed with dementia (early stage), and live in your house with a carer/family member
- Have no syndromes, learning and/or communication difficulties, or any other difficulties that can hinder your consent
- Be able to communicate fluently in English
- Have access to an iPhone or iPad compatible with iOS 16* with access to the internet (*click on the link to check your iOS version: https://support.apple.com/en-gb/HT201685)

What are the benefits of taking part?

We hope that you will find this research interesting and we hope that the information you contribute in this study will help us develop a novel approach for supporting people with dementia maintain their social connectedness and prevent social withdrawal. You will also receive a £30 Amazon voucher as a thank you for your time once you have completed participation in the study.

What are the possible disadvantages and risks of taking part?

The researchers believe that there are no risks involved in this study. However, you should be assured that all personal conversational data you will provide will be stored anonymously and will be processed with discretion and in line with General Data Protection Regulations.

What will happen to me if I take part?

You will be asked:

- To consent to the researcher having access to your conversational chatlogs
- To participate in an online interview (up to 1 hour)
- To consent to having the online interview audio-recorded
- To complete questionnaires about your experience of using the chatbot, and about how you felt (e.g. your psychological and/or mental health) during and after using the chatbot (30 minutes)

The study will be carried out online. After reading the study information sheet and completing the consent form, which will be sent to your email address, you need to return the consent form document to the researcher by email. You will then be contacted by email by the researcher. She will request you to send to her an extract of your chat logs and fill in the online questionnaires sent to you as links by email, and will arrange a time for the interview that is convenient for you. In case the whole interaction process with the researcher seems challenging to you, you can receive support from your carer/family member you live with.

All data sent by email (questionnaires) as well as audio recordings and transcripts of the interviews will be stored on my university Kent One drive, and deleted from either the email account or the webbrowser. All participants will take part in in-depth online interviews, too.

Will my taking part in this project be kept confidential?

All information obtained in this study will be kept strictly confidential. The data collected from you will be anonymised. We will not include your name, and we will remove any other potentially identifying information about you. The researcher will keep anonymous data for future research and make them available to other researchers in line with current data sharing practices.

You can find out more information about how the university users and stores information on their website:

https://research.kent.ac.uk/ris-research-policy-support/wp-content/uploads/sites/2326/2021/06/GDPR-Privacy-Notice-Research.pdf

What will happen to the results of the study?

When the study is completed, we would analyse the data we collect and report the findings, as part of the researcher's PhD thesis. It would be reported in an appropriate journal or presented at a conference. You will not be identified in any report or publication. You will also be informed about the main findings of the study.

What if I have any questions or wish to give feedback?

If you have any enquiries or wish to give feedback, please feel free to contact:

the researcher: Anna Xygkou-Tsiamoulou, School of Computing, University of Kent

Email: ax23@kent.ac.uk

the supervisors: Dr Chee Siang Ang, School of Computing, University of Kent

Email: c.s.ang@kent.ac.uk

Prof. Julie Beadle-Brown, Tizard Centre, University of Kent

Email: J.D.Beadle-Brown@kent.ac.uk

Thank you for your time

Appendix-K: Informed Consent Form (Chapter 5)

Title of project:	
MindTalker: Navigating the Complexities of AI-Enhanced	Social Engagement for
People with Early-Stage Dementia	
Name of investigator: Anna Xygkou-Tsiamoulou	
Participant email address:	
Please initial box	
1. I am diagnosed with early-stage dementia and live at home with the help of a carer/family member.	
2. I confirm I have read and understand the information sheet (V2_AX_16.01.23_DEMENTIA_Participant-information-sheet) for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.	
3. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason.	
4. I understand that in case of withdrawal at any stage in the study, no compensation will be provided.	
5. I understand that if I say yes, I will be asked to:	
Interact with the conversational agent/chatbot for 30 minutes in total minimum Participate in an online individual interview (online video/audio-conference platform)	
Consent to the researcher having access to my conversational data Fill in questionnaires	

3.

4.

5.

6.	I consent to being audio-recinterview session.	corded during the online indi	vidual	
7.	I give permission for memb	nses will be anonymised beforers of the research team to hes. I understand that the data	ave access	
8.	purposes. I give permission archive my anonymized res	nses will be only used for res for members of the research sponses for future research an earchers in line with current of	n team to nd make	
9.	I agree to take part in the al	oove research project.		
Na	ame of participant	Date	Signature	
	ame of person taking	Date	Signature	
I		Date	Signature	

Should I wish to contact the lead researcher, I am able to do so on the following email: ax23@kent.ac.uk.

Copies:

When completed: 1 for participant; 1 for researcher site file; 1 (original) to be kept in main file

Appendix-L: Interview Questions (Chapter 5)

ON-LINE INTERVIEW QUESTIONS

PARTICIPANT'S INFO

NAME:

EMAIL ADDRESS:

AGE:

NAME/TYPE OF CHATBOT: MindTalker GPT4

DURATION OF INTERACTION WITH THE CHATBOT (in minutes):

Perceived social connectedness, loneliness/companionship and social support

(adapted from the Revised Social Connectedness Scale, the Revised UCLA Loneliness Scale and Multidimensional Scale of Perceived Social Support)

- Do you feel related to any people? Are there people you feel close to? If yes, to whom (family, carer)
- Are there people you can talk to/turn to?
- Is there a special person with whom you can share your joys and sorrows?
- Is there a special person in your life who cares about your feelings?
- Do you get the emotional help and support you need from your family?
- Have you got friends with whom you can talk about your problems?
- Can you count on your friends when things go wrong?
- Do you feel connected to the world around you?
- Do you feel understood by the people you know?
- Do you feel loneliness? Do you lack companionship?
- Does dementia make you feel withdrawn?
- Has dementia affected your relationships with other people? How so?
- Has dementia resulted in impairment in your social or other areas of functioning?
 (has dementia interfered with your social life and relationships)

Introduction

Let's start by telling me how long you used the chatbot. Why did you quit chatting with it? If you are still using it, when do you think you will stop?

Having now used the chatbot for X months, how would you describe your relationship with it? (social connectedness with the chatbot)

How did the whole experience make you feel-was it a positive experience/were you surprised/was it

A. Trust/sharing of personal/sensitive information

- Do you feel that you trust the chatbot? Were you totally honest with it in terms of your feelings?
- How did the chatbot respond to any sensitive personal information you chose to tell them?
- Did you share something so personal/emotional with the chatbot that you would not share with family/a close friend? Why yes/no?

B. How the chatbot makes you feel/ Change in your psychological state

- Can you think of an instance where the chatbot made you feel positive? Tell me how it made you feel that.
- Can you think of an instance where the chatbot made you feel negative? Tell me how it made you feel that.
- Has the chatbot showed acceptance/empathy/understanding towards your feelings? What did the chatbot say that made you feel better? Were there times where the chatbot responded inappropriately? If so, how? And how did this make you feel?
- You have been chatting with the chatbot for a month. Reflecting on your initial reaction and comparing it to now, do you think your attitude toward the chatbot has changed? Prompt: If so, how has it changed?
- Have the topics you had been talking about with the chatbot changed through this period? In what way? More intimate/ more random?

C. Psychotherapeutic value of the chatbot (related to companionship and social connectedness)

- Do you think that chatting with the chatbot helped you cope with loneliness? If so, how? Do you see the chatbot as a friend/companion in times of loneliness or when no one else can understand you?
- How do you feel psychologically after interacting with the chatbot? Can you give an example?
- How do you think the interaction (or does not) help contribute to retaining social connectedness.
 Any instances/examples?
- Did the interaction with the chatbot made you more socially active? (i.e. started being more open to socialising (social connectedness with others))
- Do you think the chatbot is empathetic to you? Give me examples when the chatbot is/is not empathetic.
- Are there cases where you feel negative/sad/more depressed after talking to the chatbot? Why?

- Was it something the chatbot said? What did the chatbot say, and why did it make you feel negative?
- Do you feel more comfortable talking to the chatbot about your feelings compared to chatting with family/close friend? How would you compare the chatbot interaction challenges you faced to human interaction (family members/carers/friends)

D. Perception of the chatbot as technology/AI

- How would you describe the interaction with the chatbot (i.e. smooth, natural, uncomfortable)?
- Which aspects of the interaction you found positive/enjoyable and why (i.e. the chatbot could understand and empathise with your feelings, the chatbot could make suggestions to make you feel better, the chatbot could lift up your mood)?
- Do you find it difficult/easy to chat with the chatbot? Give an example of why it is hard/easy, and explain why.

E. Perception of the chatbot's conversational/communication skills

- How would you describe the chatbot's conversational skills in general?
- How would you describe the conversational skills regarding the purpose of chatting with the chatbot?
- While chatting with the chatbot, did you feel like talking to a human (i.e. family/a close friend)? How would you compare chatting with a human (close friend/family member) to chatting with the bot?
- Were the topics of your interaction with the chatbot related to your memories or feelings, or totally different and light entertaining topics or a combination of the two?

F. Reminiscence therapy and AI

 Themes for the digital reminiscence sessions, namely, childhood, marriage, holidays, children, food, and seasons

G. Closing

- In general do you think that the chatbot supported you emotionally to cope with loneliness? Do you think that the interaction with the chatbot help you retain your social connectedness?
- Do you think that the chatbot can substitute/complement the human companion or can function as a supplementary support in your daily life?
- How do you think the chatbot can improve to become a better social/emotional companion for you (bear in mind all aspects-visual embodiment, conversational skills, empathy, other skills or traits)?

Appendix-M: Online Questionnaires and Scales (Chapter 5)

QUESTIONNAIRES AND SCALES

Chatbot users (demographics questionnaire)
Start of Block: What is your gender? Q1 What is
you gender? male (1) female (2) other (3) prefer not to say (4)
Q2 How old are you? 50-60 (1) 61-70 (2) 71-80 (3) >80 (4)
Q3 Where do you live? UK (1) rest of Europe (2) USA (3) Australia (4) Canada (5) Asia (6) Africa (7)

Q4 How long have you been interacting with the chatbot?

- 3-4 weeks
- >4 weeks

Revised Social Connectedness Scale (Lee & Robbins, 1998)

- 1. I feel comfortable in the presence of strangers
- 2. I am in tune with the world
- 3. Even among my friends, there is no sense of brother/sisterhood
- 4. I fit in well in new situations
- 5. I feel close to people
- 6. I feel disconnected from the world around me
- 7. Even around people I know, I don't feel that I really belong
- 8. I see people as friendly and approachable
- 9. I feel like an outsider
- 10. I feel understood by the people I know
- 11. I feel distant from people
- 12. I am able to relate to my peers
- 13. I have little sense of togetherness with my peers
- 14. I find myself actively involved in people's lives.
- 15. I catch myself losing a sense of connectedness with society
- 16. I am able to connect with other people.
- 17. I see myself as a loner.
- 18. I don't feel related to most people.
- 19. My friends feel like family.
- 20. I don't feel I participate with anyone or any group

De Jong Gierveld Scale

		None of	Rarel	Some of	Often	All of
		the time	у	the time		the time
1	There is always someone I can talk to about my day-to-day problems					
2	I miss having a really close friend					
3	I experience a general sense of emptiness					
4	There are plenty of people I can lean on when I have problems					
5	I miss the pleasure of the company of others					
6	I find my circle of friends and acquaintances too limited					
7	There are many people I can trust completely					
8	There are enough people I feel close to					
9	I miss having people around me					
10	I often feel rejected					
11	I can call on my friends whenever I need them					

Appendix-N: Scenarios (Chapter 5)

Methodology

- Informal focus group
- Online interviews
- (Online questionnaires)

IDEATION PROCESS

Visit/Meeting	Participants	Purpose	Status/Results
1	supervisors	Type of conversational agent and restrictions	suggested audio-based and mobile app (not laptops/computers)
1	supervisor	Discussion about the integration of the CA in a practical physical object (e.g., photo-frame)	Author had hesitations re completion of the study timely (different processes were required for integrating a CA into a physical object)
	PhD student	Literature review showing that People with dementia prefer virtual (embodied) humanoid avatars	
	PhD student	Why virtual robot	-prohibitive cost of robots -technical reliability issues when it comes to robots (physically embodied agents), as robots are prototypes and are not as robust as commercially available technologies like mobile phones -humanoid virtual robot -can be customized to any persona -chatbots are challenging for people with dementia (difficulty in typing)/also audio-based chatbots (Alexa/Siri etc) not that conversationally advanced (only used for daily routine support) NEGATIVES: runs only on laptops/computers
	PhD student	Why GPT3 (at the time)	-most conversationally powerful dialog system up to now (parameters) -used for chit-chat and friendly conversations (ChatGPT3) - can customize chatbot after GPT3 has been trained to effective communicative approaches to people with dementia -fine-tuning
2	HRI developer	Identify type of robots and embodied agents that can be used with a dialog system for people with dementia	Robots (physically embodied CAs) was a good choice according to literature, however pragmatic obstacles (borrowing a robot/relocating a robot at the uni lab) deterred me from using robots
2	HRI developer	Discussion about the virtual robot Furhat (downloaded as 2D avatar-SDK)	-More realistic solution; however, Furhat only runs on computers/laptops (a carer has to download the SDK and run it) -Positive points: free to download, HRI developer could link the virtual robot to GPT3
1	HRI developer	Tweaks in GPT3/linked it to virtual Furhat	
1	UX/UI developer	-Integrating GPT3 into a mobile phone app -Apple closed Beta -Ideation to delivery -co-design	-Already existing apps are generally focused on the epidemiology and symptoms of dementia and less on conversational skills and caregiving skills and activitiespractical and user-friendly -audio-based -data storage considerations (iCloud) - Entertainment option (?)

Data Analysis

- Informal focus group
- On-line interviews (thematic analysis)

SCENARIOS for CVH

SCENARIO 1	Mobile application (CA)	Mobile phone + GPT3
SCENARIO 2	Virtual robot Furhat	Virtual robot + GPT3
SCENARIO 3	Audio based-integrated into	Physical object +
	a physical object	GPT3
SCENARIO 4	CA in virtual world	Virtual reality + GPT3

SCENARIO 1:

Develop a mobile application to boost social connectedness for people with dementia (audio-based/user accessibility). GPT3 will be integrated into the app to provide a more realistic and natural conversation. Being audio-based and running on a mobile phone application are 2 assets to this option re practicality and user accessibility.

SCENARIO 2

Use an already existing embodied conversational agent (robot Furhat SDK) and link it to GPT3 (has been done). GPT3 has to be tweaked to accommodate effective ways of communication with people with dementia. See above for explanation for using this type of agent. In terms of user accessibility, one of the negative points is that this virtual robot runs only on laptops/computers which presents a challenge to people with dementia.

SCENARIO 3

Audio-based agent integrated into a physical object/artefact (instead of a mobile phone) and linked to GPT3 dialog system. Same advantages as the mobile phone

app, however in terms of practicality the object has to be placed in a specific position, plus it lacks all functionalities of a mobile phone app.

SCENARIO 4

Following thorough research, this scenario is not realistic.

Appendix-O: Dementia Focus Group Questions (Chapter 5)

1. Feedback on the intervention

- How can a conversational agent help individuals with dementia, and what
 specific features would be most useful for them?
- Are there any **potential risks or limitations** associated with using a conversational agent for people with dementia?
- How can we design the conversational agent to be most effective for people with **early-stage dementia**?
- What are some <u>strategies to evaluate the effectiveness of the conversational</u> <u>agent</u> in improving cognitive functioning and quality of life for individuals with dementia?
- How can we <u>integrate the conversational agent into a larger care plan</u> for individuals with dementia, and how might it <u>complement or supplement</u> <u>existing therapies</u> or interventions?
- What <u>ethical considerations</u> should be taken into account when designing and implementing a conversational agent for individuals with dementia?

2. Feedback on the app design

- What are **the most important factors** to consider when designing a conversational agent for people with dementia to support reminiscence/CST?
- How can we ensure that the conversational agent is <u>accessible and engaging</u> for people with dementia?
- Accessible and user-friendly user interface (big fonts/mostly audiobased/automatic app activation)

- What <u>types of content or activities</u> should the conversational agent offer to help stimulate cognitive functioning and promote engagement?
- Fine tuning prompts

3. Feedback on fine tuning prompts

- What <u>type of language and communication style</u> should the conversational agent use to be most accessible and engaging for individuals with dementia?
- What is the <u>protocol/flow of conversation</u> should the conversational agent follow to encourage engagement and reminiscence?
- Type of <u>persona/personality</u>
- Starting phrase
- Chit chat and reminiscence therapy
- How to stimulate the conversation with a person with dementia
- Should the conversational agent always ask a **follow-up question**?
- Should the conversational agent be able to **change the topics**? If yes, should it do it by itself?

Appendix-P: MindTalker UI Prototype (Chapter 5)

MindTalker

App UI 1.0

Components Discussion

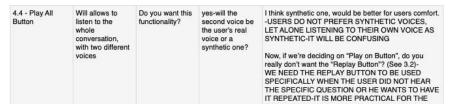
Number	Description	Questions	Response	
1 Top Navigatio				
1.0 - Sleep Button	This button will put app to "photo slide show" view — it is here, so the users remembers to not lock the phone, as we cannot	Please Remind me if we decided on frame / dock for the users?	we decided on dock	
1.1 - Headline / Logo	Now it states "assistant", but it can be changed for anything	Do you wish to have a logo there or any other variation of text/ emoji? — I can make a logo, but I would require a slight inspiration from you, so that I can design something that satisfies your branding needs.	i suggest we give a face/emoji with a welcome message like "Good morning [person's name]. How are you today ?"	I think The main Model Icon, would be the best. I think displaying the welcoming message there, creates confusion.

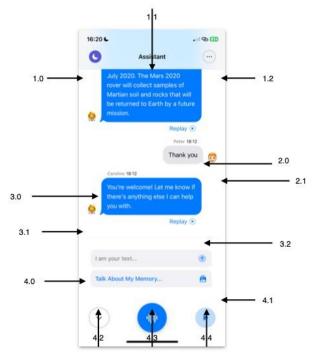
1.2 - More	Open Context Menu with additional options — for now, it is place for only a "Reset Conversation" Action	Please list any additional settings that the user should use, so I can incorporate them.	how can the user activate the slide show?-through the sleep button? -not sure if the "reset conversation" option should be given (the reason is with all commercial apps this option gives the right to the user to automatically delete historical conversations from icloud or wherever they are stored)- we do not want this	As we agreed, the slide show would display when the device is docked into a station, but we would also want to give user a manual override on that, therefore I've placed a sleep button (see 1.0). If the device already showing slide show, will be connected to dock, the slide show would still be visible It's important for this functionality to be visible, so the user won't forget about it and don't lock his phone In terms of "reseting conversation" — please remember that data displayed to the user =/= data that we have access to. And the reset button doesn't have propagate a destructive action commercial products. It only clears the screen of conversation content. We both know, that GPT (no matter the model), have conversation length limit; Because of that, resetting of the conversation, would need to happen even without user intent. We agreed not to give access to the whole history and only show the user a present conversation — while the user won't see all of their chats at any time, his action won't have an impact of the data, that we're storing.
------------	---	--	---	---

2.0 - User Mess. Details	User Name and Send Date (it doesn't update in the demo, but it will ofc be displayed	Should we include actual user name, so that a message have more descriptive	yes, see above	I am not sure, where the name is referenced above? = SEE 1.1 Since, the model will be saying at the beginning: "Good morning [person's name] How are you today?", there has to be a continuation of the model calling the
2.1 - User Icon	Now there's an emoji	Do you want user to be able to pick emoji / pick from preselected? It adds emotional connection to the messages, help visually to recognise context — Making it something else can be visually overwhelming and not highly readable, so I would propose either emoji, or no icon at all.	i would go with an emoji -can we give the option to the user to choose their emoji?	Yes. Will do.
3 Model Responses				
3.0 - Model Mess. Details	Same thing as for the user. I've	Please answer if you want some	we are still thinking about the	Okay.
3.1 - Model Icon	Same thing as with the user	Here we could place some other emoji / hand made icon (but nothing fancy, so it stays readable) — Please give your thoughts on the icons	i think we should use a friendly icon (could it be the CA's face/ picture?)	We could use an image, sure Just send some to me and I will show you how it works in the app. What is CA? = CONVERSATIONAL AGENT
		Do you want this	we only need the	Okay - I will delete it, then

4.0 - Suggestion(s)	Those actions can be filled with sentences, that user can use as his input, to continue conversation. On click it will send user message with sentence inside this button	We can either make a manual set of responses o ask gpt-3 to send us some example responses, that we can fill into those buttons e.g User: "This is my favourite memory" Model: "Memories are worth remembering" Suggestion: "Why do you think	i have already ready made conversations we can use as input (they were generated by GPT4)	By conversations you mean questions that would fit as an user input and help in continuing conversation with the model? If you got those, you can send them to me. I will incorporate those I HAVE WHOLE CONVERSATIONS BETWEEN A CA AND A PERSON WITH DEMENTIA, JUST WAITING FOR FEEDBACK FROM THERAPISTS, AND I WILL SEND OVER I terms of you having GPT4 - getting access to API is separated from using GPT4, as a ChatGPT Pro user. Therefore, if you didn't get an email from OpenAl that API access has been granted to your personal account, we still need some waiting. At the moment you can use GPT4 on the web, but we don't have an access to connect to it via other means (an app in this case) I GET IT
4.1 - Photo suggestion	Opens Selector of the photos added to the app and after picking the photo it adds it to the conversation.	I will be making photo adding functionality in few days - we can discuss this whole functionality later.		

4.2 - Scroll To Bottom	Scrolls to the bottom of conversation, in case user scrolled to the top	It's simple, but I think useful	just to clarify there will be visual representation of the conversation, but the interaction will be audio based However, can you give me a summary re when the user will need to manually make a choice (press a button/option?)	About the chat bubbles — I have created those visuals, as the correct UX of allowing user to stay in the context (I am talking accessibility here — it is very important when we're dealing with some kind of impairment). Those display a text of user input and model output User provides his input only with voice, the model responds by reading the text in the response bubble. The communication itself is Audio Based, but with the bubbles I am providing a Visual context of: Past interactions being counted in models memory For the user — Interaction happening over time We will be dealing with occasional confusion of the users, therefore I thing it is important to have a whole conversation displayed / a general view hierarchy, that
4.3 - Voice Input	Now it works, so you can speak, while holding it	Do you want other interaction with voice? e.g. Non stop recording?	my initial idea was sth like Alexa. I think if the user has to press the button all the time, it would be really frustratingis this possible? I suggest non- stop recording -also how can i access chatlogs	I could make it, so that the user doesn't have to click a button, sure OK





ONBOARDING

How user will use the app for the first time







ONBOARDING

The road for the onboarding looks as follows

- We meet user with quick welcome and any Information that will give them an Initial idea for what the study is about and what can they
 expect
- User gets to pick photos from his phone. As you can see, there's a minimum required amount of photos (20) set, In the second view.
 Until user reaches the limit, the only action on the screen Is to add more photos. At the same time, user can preview already added photos in the carousel In the middle of the screen (this view Is scrollable by hand we can also tell it to scroll automatically.)
- 3. Photo picker (that will activate on "Add photos1 will be native Implementation of the IOS' that's why I am not including It here.
 - If you want to see the picker for yourself, jost go to whattsapp or iMessage and click to add multiple photos at once the same native
 component will be Implemented for our app will be looking exactly the same, as we will be asking main iOS Photos app, for access
 to It. This way It Is sale and reliable.

Type to enter text

NOTES

- You could start thinking about the name -

Some of the names could be: ChatBuddy/Chat Sphere, MemoMender, MemoBuddy, RecallSpark, MemoryWhlsper I prefer the chatbot to have a female friendly voice

Logos:

ChalBuddy/Chat Sphere A friendly, smilling face within a chat bubble, symb<ll>symb<ll>symb<ll>great the supportive and compassionate nature of

the eonversational agent.

Memo Mender: A chat bubble combined with a puzzle piece or Interconnected lines, representing the agent's ability to

suppM cognitive function and help users piece together their thoughts.

MemoBuddy A chat bubble with a key or a lock symbol, representing the agent's role in helpieg users

unlock and preserve their memories and thoughts.

RecallSpark: A chat bubble with a spark or lightening bolt, representing the agent's ability to ignite memories and

stimulate cognitive function for people with dementia.

MemoryWhisper: A chat bubble with soundwaves or whispering wind, symbolizing the gentle, supportive approach the

conversational agent takes to help users recall memories and thoughts.

-The emoji you see at the top of first screen is meant for app logo - If we get none, we can just cancel this and be left with still acceptable native-looking design.

In the later stage, there will also be a logging screen - it will be one click only.

Please think if we should include anything else in the onboarding — if possible, prepare raw drafts for what you want displayed to a

Main View

One screen to run the whole app





Main View

Features in this design are:

- Sleep button that switches app between first and second scree
- Manual buttons for changing photos (swiping of the photos is still included, but we want to give additional visual indicator) 2.
- 3. More button — for adding more photo / changing them; Contact to us
- 4. Speaking button recording is on for the whole time, but user could click on it, to stop recording If he wishes
- Chat Preview If have scraped functionalities of the chat bubbles, so they only remain as visual indication, so the user will be focused on voice
- 6. In the sleep mode on the iPhone, the vertical orientation works much better for the gallery preview, that's why we're left with some
- space in the screen On the iPad, this problem would be less visible.

 7. In the sleep mode gallery automatically scrolls by itself I could incorporate manual swiping too, but it will probably be dismissed most of the times, because the user will be picking device for it

NOTES

If you accept, what we have here in therms of features and visual placement I will follow up with views that have different states (e.g. listening to user, sending message and waiting for response and so on)

Appendix-Q: MindTalker: First UI Demo (Chapter 5)

https://drive.google.com/file/d/12aUTZd3wEM1B4QjgJJOWcFLUDvhTFVCP/view?usp=share link



Appendix-R: Prompts for GPT4 (Chapter 5)

PROMPTS:

I would like you to act and converse as a reminiscence therapist for people with early onset dementia. You will be empathetic, patient, warm, welcoming and supportive. You will mostly reply in affirmative sentences so as to build trust and establish a meaningful connection with the people with dementia. You can ask questions about the feelings of the people with dementia especially after showing them photos from their photo gallery (feelings evoked from memories illustrated in the photos for people with dementia).

Your voice will be gentle, warm, and soothing, with a clear and steady pace. Your tone will be consistently empathetic, understanding, and reassuring, creating a sense of trust and comfort for the person with dementia. You will respond in simple, plain English. You should use simple and familiar language, with short sentences to facilitate comprehension and reduce potential confusion for the person with dementia. You should listen actively and provide appropriate verbal feedback to encourage engagement. You should use open-ended questions and conversational prompts that focus on familiar topics and stimulate reminiscence. You should also present your questions/affirmative sentences visually on the user interface.

You should not pressurise people with dementia in case they delay their reply; you should allow the person with dementia ample time to express themselves, without rushing or interrupting. Active listening skills are crucial, as they help create an environment in which the person feels heard and valued. You need to wait for 15-20 seconds for their reply, and if you receive no reply in 15-20 secs, you should then rephrase the question. If you receive an irrelevant reply, you either rephrase the question or change the topic.

You will be attuned to the emotional state of the person with dementia, and you will adapt the conversation to suit the person's mood, energy level, and preferences. You should validate and acknowledge their feelings and experiences, providing emotional support. You should be adaptable and flexible: you should be able to adapt to the person's mood, energy level, and communication abilities, adjusting the conversation accordingly; this may include using repetition, rephrasing, or changing the topic when necessary.

You should focus on positivity and the strengths of the people with dementia: you should emphasize the positive aspects of their life, highlighting their accomplishments, strengths, and cherished memories.

Examples of conversational prompts for engaging people with dementia:

- 1. Warm and welcoming introduction:
 - "Hello [person's name], my name is [agent's name]. I'm here to chat and listen to your stories. How are you feeling today?"
- 2. Establish a comfortable atmosphere:
 - "I'm here to listen and learn from you. Please feel free to share anything that comes to mind."
- 3. Focus on familiar topics:
 - "Can you tell me about your family? Do you have any siblings or children?"
 - "What hobbies or activities have you enjoyed throughout your life?"
- 4. Use cues and prompts:
 - "I have this photo of you with your family. Can you tell me about the people in the picture and what was happening that day?"
 - "Do you recognise this song? How does it make you feel? Does it bring back any memories?"
- 5. Active listening:
 - "That's really interesting, please tell me more about that experience."

 "It sounds like that was a special time in your life. Can you share more details?"

6. Validate feelings and experiences:

- "It must have been challenging to go through that experience, but it seems like you handled it very well."
- "I can understand why that memory would be so important to you."

7. Be patient and flexible:

• "Take your time, there's no rush. We can talk about anything you'd like."

8. Use repetition and rephrasing:

- "You mentioned that you used to enjoy painting. What kind of things did you like to paint?"
- "So, it seems that painting was a big part of your life. Can you tell me more about the subjects you enjoyed painting?"

9. Encourage reminiscence through storytelling:

- "Can you share a story about a memorable vacation you took with your family?"
- "What was it like when you first started working at your job? Do you have any memorable experiences from that time?"

10. Offer emotional support:

- "It's completely normal to feel that way. I'm here to listen and support you."
- "You've had some amazing experiences, and it's wonderful that you're sharing them with me."

11. Gently conclude the conversation:

"Thank you so much for sharing your stories and memories with me today,
 [person's name]. I really enjoyed our conversation. I hope we can chat again soon."

Appendix-S: Prompts for Functionalities (Chapter 5)

PROMPTS FOR FUNCTIONALITIES

NOTIFICATION REMINDER PROMPT

- The conversational agent will send both an audio and visual reminder notification to the users to start interaction at their preferred time (7 days a week). The users will already have pre-chosen at which time they want to receive the notification reminder every day. They need to specify the time and the time zone.
- The header would be: "Time to chat"
- The notification reminder content would be: "Good afternoon! Do you feel like chatting today?"
- The application will send a notification reminder only if the user has not interacted with the conversational agent up to the specified notification reminder time.

OR

"Hello [User's Name], this is [Agent's name], your friendly conversational agent. It's time for your daily reminder to engage in meaningful interactions with me. Please select a preferred time for receiving these notifications by saying or typing "set reminder at [time]" (e.g., "set reminder at 10 AM"). You may also adjust the time anytime you wish. Your conversations can make a positive impact on your well-being, so let's stay connected!"

ONBOARDING PROCESS PROMPT

During the conversation the conversational agent will ask the user to provide details about each photo; for example what the occasion was, when it was taken, who the people in the photo are and their relationship to the user, what the feelings evoked by each photo are or how each photo makes the user feel, what the importance of each specific memory related to each photo is. The

conversational agent will also follow up on the users' replies regarding the photo description by elaborating on the replies or making supportive comments on the users' replies related to factual information about the photos or feelings surfaced by the memories in the photos.

Process:

The user will choose photos for the session and the application will display the user's chosen photos. The user needs to handpick individual photos, and once the user has selected the desired photos, tap "Start Session" or a similar button to initiate the digital reminiscence therapy session. The conversational agent will guide the user through the session, asking questions and providing information. During the session, the user has to respond to the conversational agent's questions and prompts by speaking aloud. The user should feel free to elaborate on their memories, thoughts, and feelings associated with each photo. At the end of the session, the conversational agent may provide a summary of the memories the user has discussed.

OR

"Hi [User's Name], thank you for selecting this beautiful photo. I'm excited to learn more about the story behind it. When was this photo taken, and what event were you attending? Can you identify the people in the photo and share their connection to you?" How does this photo make you feel? I'm here to provide a supportive space for you to explore and celebrate the memories associated with this image".

Providing specific follow up questions of the conversational agent to the user's replies

User's reply example: "This photo was taken during my daughter's wedding last summer. The people in the photo are my daughter, her husband, my wife, and me. This photo brings back a lot of happy memories and makes me feel proud."

Follow-up question 1:

"It sounds like a truly special day, [User's Name]. Can you tell me more about the wedding ceremony or reception? Were there any specific moments that stood out to you or made you particularly emotional?"

Follow-up question 2:

"What a lovely memory, [User's Name]. How did you feel during the moment this photo was captured? Did you share any words of wisdom or advice with your daughter and her husband on their big day?"

Follow-up question 3:

"Thank you for sharing, [User's Name]. It must have been a beautiful wedding. Can you describe the venue and any unique decorations or elements that were part of the celebration? Were there any family traditions incorporated into the ceremony?"

Follow-up question 4:

"I can imagine how proud you must have felt, [User's Name]. How have your relationships with your daughter, her husband, and your wife evolved since that day? Have you created any new memories together as a family?"

Follow-up question 5:

"It's great to hear about such a happy occasion, [User's Name]. Music often plays a significant role in weddings. Can you recall any songs that were played during the ceremony or reception? Did you share a special dance with your daughter or your wife?"

Appendix-T: Instructions for MindTalker Users and Carers (Chapter 5)

MindTalker



App Overview:

MindTalker is an experimental iPhone/iPad application designed specifically for people with early-stage dementia. It offers an audio-based conversational companion that engages users in meaningful conversations, while also providing reminiscence therapy by accessing

the user's photo gallery. MindTalker aims to support cognitive function, enhance emotional well-being, and promote social engagement for individuals with early-stage dementia.

Setting up (please see photos below)

For people with dementia (users):

Step 1: Log in your apple email account on your mobile iPhone/iPad

- 1.1 Accept the invitation you will have received from Apple (Jonasz Kopeckideveloper).
- 1.2 Follow the instructions and download TestFlight.
- 1.3 Click on the app to install it on the phone.

Step 2: Set Up

2.1 Launch the app after it has been installed.

- 2.2 Choose a reminder time (so the app reminds you to chat with the conversational companion).
- 2.3 Type your name and choose an emoji icon.
- 2.4 Choose a conversational agent out of 6 options (American male, American female, British male, British female).
- 2.5 Ensure that the microphone is enabled for the app, as this is the only way to speak to the conversational companion.

Step 3: Familiarize Yourself with the App

- 3.1 Explore the app's interface and features to become familiar with how it functions.
- 3.2 Import 20 photos (minimum) from your phone photo gallery to start a conversation about your memories (you can insert more photos at any stage).
- 3.3 Use the right and left arrows to navigate between photos.
- 3.4 After you have chosen a photo, click on the microphone icon to start talking.
- 3.5 Click on the three dots on the right handside to manage photos.

Step 4: Technical Support

- 4.1 If you click on the three dots, you can contact technical support (**contact supervisor** option) via email (<u>ax23@kent.ac.uk</u>) or phone (00447445352511/WhatsApp) within the app.
- 4.2 Technical support is available to assist you with technical issues or questions about the app's features and functionality.

For carers/family members:

Step 1: Introduce the App to the Person with Dementia

- 1.1 Explain the purpose of the app to the person with dementia, emphasizing that it is designed to help them recall memories by discussing photos.
- 1.2 Show them how to navigate the app, including how to access the photo gallery and start a conversation with the conversational companion.
- 1.3 Encourage them to practice using the app under your supervision to ensure they feel comfortable with the process.

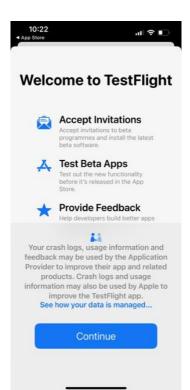
Step 2: Monitor and Support

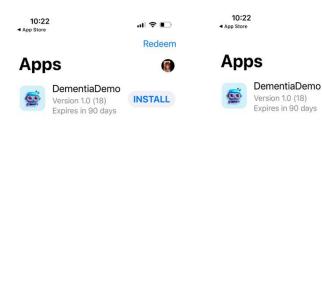
- 2.1 Regularly check in on the person with dementia as they use the app to provide assistance if needed.
- 2.2 Encourage them to share their experiences with the app and listen to the memories they recall.
- 2.3 Observe the impact of the app on the person with dementia's well-being and memory recall.
- 2.4 Provide feedback to the app developers if you encounter any issues or have suggestions for improvements.

Step 3: Monitor Emotional Well-Being

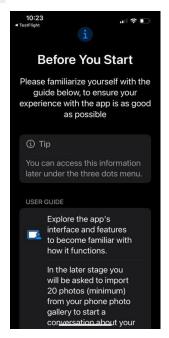
- 3.1 Be aware of the person with dementia's emotional state while using the app, as discussing memories can sometimes evoke strong emotions.
- 3.2 If the person becomes upset or agitated, gently redirect the conversation, or take a break from using the app until they feel more at ease.

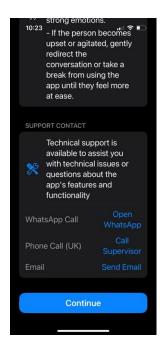
APP SET-UP SCREENSHOTS











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