

MentalGLM Series: Explainable Large Language Models for Mental Health Analysis on Chinese Social Media

Anonymous ACL submission

Abstract

With the rise of mental health challenges, social media has become a key platform for emotional expression. Deep learning offers a promising solution for analyzing mental health but lacks flexibility and interpretability. Large language models (LLMs) introduce greater adaptability and can explain their decisions, yet they still underperform deep learning in complex psychological analysis. We present C-IMHI, the first multi-task Chinese social media interpretable mental health instruction dataset (9K samples) with quality control and manual validation. Additionally, we introduce MentalGLM, the first open-source Chinese LLMs for explainable mental health analysis, trained on 50K instructions. The proposed models excelled in three mental health downstream tasks, outperforming or matching deep learning and LLMs. A portion of the generated decision explanations was validated by experts, demonstrating promising accuracy and reliability. We evaluated the proposed models on a clinical dataset, where they significantly outperformed other LLMs, demonstrating their potential for clinical applications. Our models show strong performance, validated across tasks and domains. The decision explanations enhance usability and facilitate better understanding and practical application of the models. Both the constructed dataset and the models are publicly available via: <https://anonymous.4open.science/r/MentalGLM-F416>.

1 Introduction

Mental illness is a growing concern, with WHO reporting 3.8% global and 6.9% depression prevalence in China (Organization et al., 2023; Huang et al., 2019a). Many neglect emotional management or avoid seeking help due to stigma (Yu et al., 2020). On platforms like X and Weibo, comments under depression-related topics often express negative emotions and mention suicidal thoughts (Cao et al., 2019). These trends highlight the need for

psychological analysis tools for early detection of mental health issues through social media, enabling timely interventions (Coppersmith et al., 2018).

Deep learning has been proven to be an effective solution for language processing, particularly with pre-trained language models (PLMs), like MentalBERT (Ji et al., 2022b) and Chinese MentalBERT (Zhai et al., 2024) which are specifically designed for social media mental health analysis tasks, have demonstrated strong performance. However, the black-box nature of deep learning models limits their use in mental health analysis because they lack transparency in their decision-making processes (Sheu, 2020). Additionally, they lack flexibility, as they typically require expensive data annotation and task-specific training for each application.

Recently, the development of large language models (LLMs) has gained attention in the mental health domain (He et al., 2023; Demszky et al., 2023). LLMs are highly flexible due to their ability to handle multiple tasks through user prompts, thanks to their training on diverse datasets (Brown, 2020). Yang et al. (2023b) highlighted LLMs’ ability to provide explanations for their decisions, underlining their potential for explainable mental health analysis. However, a considerable performance gap remains between LLMs and deep learning models for mental health tasks, as demonstrated by Qi et al. (2023) and Yang et al. (2023b). Xu et al. (2024) showed that fine-tuning LLMs on varied datasets can substantially boost their performance across multiple mental health tasks. Chain-of-Thought (CoT) reasoning (Wei et al., 2022b; Jin et al., 2024) has been shown to be a promising approach for improving LLMs’ performance, particularly their reasoning ability. The study by Yang et al. (2024b) can be considered the first work in mental health analysis to introduce the Interpretable Mental Health Instruction (IMHI) dataset, which captures the expert decision-making process.

However, there is no publicly available dataset in the Chinese domain that incorporates chain-of-thought reasoning aligned with expert reasoning, limiting the development of reliable tools for analysis and expert-aligned decision-making.

To address these gaps, we constructed C-IMHI, the first multi-task Chinese Social Media Interpretable Mental Health Instructions dataset, with 9K samples for LLM fine-tuning and evaluation. It explicitly incorporates expert reasoning processes as chain-of-thought, using a teacher-student framework where GPT-4 generates reasoning based on expert-written examples. We ensured its quality through automated checks, expert evaluation, and manual corrections, creating a high-quality dataset. We developed MentalGLM, the first Chinese open-source explainable LLMs for mental health analysis, fine-tuned in two steps. MentalGLM outperformed or matched deep learning models and fine-tuned LLMs on three tasks while providing explainable predictions. Expert evaluation confirmed that the generated explanations had high consistency and reliability, comparable to GPT-4. The model also showed strong generalization in cognitive pathway extraction from clinical data, achieving superior accuracy and demonstrating clinical potential.

2 Methods

We proposed the MentalGLM series, fine-tuned from the open-source LLMs (GLM et al., 2024), for mental health analysis on Chinese social media. The two-stage fine-tuning involved first using translated general mental health data (IMHI), then refining with the proposed Chinese-specific social media data (C-IMHI), improving accuracy and explainability. An example of model usage is shown in Figure 1.

2.1 Task definition

We frame the mental health analysis task as a generative problem using a generative model, specifically an auto-regressive language model $P\phi(O|I)$ with pre-trained weights ϕ which generates output O based on input I . Unlike traditional deep learning models, which require task-specific architectures due to fixed input and output formats and lack explainability, our approach allows for flexible, generative modeling. This enables the simultaneous training of n mental health-related tasks by providing interpretable instructions, allowing the model to generate explanations alongside its predic-

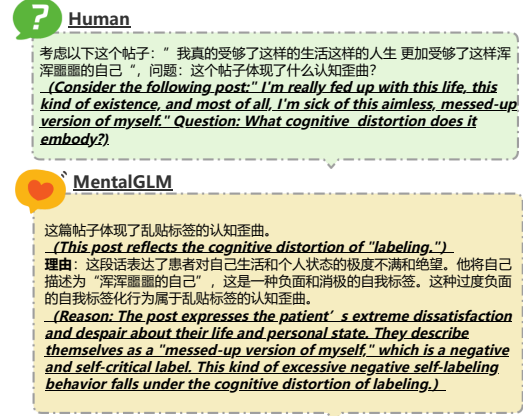


Figure 1: Example of MentalGLM’s output in the cognitive distortion classification task, including both the prediction and the explanation of its decision.

tions. Let the dataset $D = \{(I_i, O_i)\}_{i=1}^n$ consist of n tasks, where the i -th task is represented as a pair of input I_i and output response O_i . The input I_i for i -th task consists of three components: the task description d_i , the text to be processed t_i , and the task execution query q_i related to the task. Thus, $I_i = (d_i, t_i, q_i)$. The output response O_i consists of two elements: the required outcome c_i (such as a rating score or classification categories) and the explanation of the decision-making process e_i . Therefore, $O_i = (c_i, e_i)$. Formally, leveraging the interpretable instructions dataset in Equation 1, the foundation model learns to reason from input to output, generating explainable results.

$$D = \{(I_i, O_i)\}_{i=1}^n = \{((d_i, t_i, q_i), (c_i, e_i))\}_{i=1}^n \quad (1)$$

2.2 Model adaptation from general to mental health analysis

While open-source Chinese LLMs like GLM (GLM et al., 2024) have demonstrated strong performance in general tasks, they struggle with domain-specific tasks such as mental health analysis (Qi et al., 2023). Instruction fine-tuning has proven to be an effective solution for improving performance in these specialized areas while maintaining the flexibility of LLMs (Yang et al., 2024c). Research shows that fine-tuning instruction data must be diverse for model generalization and robustness (Wei et al., 2022a), while ensuring response consistency (Zhou et al., 2023). However, there is a lack of interpretable instruction fine-tuning datasets in Chinese for mental health analysis tasks. To address this, we first translated

the IMHI dataset proposed by Yang et al. (2024b), which contains multi-task English mental health instruction data, into Chinese for use in the initial stage of our fine-tuning process. The IMHI dataset is designed for developing and validating explainable mental health analysis models, sourced from social media. It is formatted using predefined templates to ensure robust consistency for model training as described in Equation 1. The details of the dataset can be seen in Section 3.1. We employed the low-rank adaptation (LORA) (Hu et al., 2022), a parameter-efficient adaptation method, to train GLM-4-9b and GLM-4-9b-chat on the translated IMHI training set for five epochs. The best model was selected as the starting point for the next stage of fine-tuning, based on the results from the validation set.

2.3 Model fine-tuning for Chinese data and task specificity

The second stage involves adapting the model to the domain of mental health analysis tasks within the specific context of Chinese social media. We created a Chinese mental health analysis instruction fine-tuning dataset, named C-IMHI, following the format of the IMHI dataset and including three tasks. These three open-source datasets only contain expert annotations without explanations for the decision-making process. To address this, we created the C-IMHI dataset by inviting experts to provide decision-making explanations for a portion of the dataset in each category. We used the advanced LLM GPT-4 to simulate the expert explanation style and generate explanations for the entire dataset. The idea behind this approach is knowledge transfer, where knowledge from an advanced but expensive model is distilled into a smaller student model to enhance its performance. The C-IMHI dataset was evaluated using automated methods, with a subset of samples evaluated by experts. The experts revised any incorrect samples to ensure the dataset maintains high quality. Details of this dataset are provided in Section 3.2, and the evaluation process is described in Section 4.2. We split C-IMHI into training, validation, and test sets. Building on the best checkpoint from stage (I), we continued using the LORA method to train on the C-IMHI training set for 10 epochs. The model that showed the best performance on the validation set was used for further evaluation.

3 Datasets

The training data includes IMHI for domain adaptation and C-IMHI for Chinese-specific fine-tuning and validation, with additional evaluation on a clinical dataset.

3.1 English dataset for initial model fine-tuning

IMHI is the first multi-task, multi-source interpretable mental health instruction dataset, consisting of 105K data samples, designed to support LLM instruction adaptation and evaluation proposed by Yang et al. (2024b). It includes tasks such as depression detection, stress detection, and mental disorder detection. We utilized a portion of the dataset (some of which is not yet open source) and translated it from English to Chinese. Data distribution is shown in Table S1. We categorize the dataset based on the way of task modeling:

- **Binary classification tasks** These tasks aim to determine whether a sample indicates a specific mental health condition, such as depression detection (Pirina and Çöltekin, 2018), stress detection (Turcan and McKeown, 2019), and loneliness detection (Yang et al., 2024b).
- **Multi-class classification tasks** These tasks classify posts by identifying mental health states or underlying causes. The SWMH (Ji et al., 2022a) and T-SID (Ji et al., 2022a) datasets detect states like suicide risk and depression, while the SAD (Mauriello et al., 2021) and CAMS (Garg et al., 2022) datasets focus on identifying causes of stress, depression, and suicide, such as work and social relationships.
- **Multi-label classification tasks** These tasks assign posts to multiple categories simultaneously. The MultiWD dataset (Sathvik and Garg, 2023) labels psychological states across dimensions such as psychological, physical, and intellectual. The IRF dataset (Garg et al., 2023) annotates risk factors for mental disorders.

3.2 Chinese dataset for language and downstream tasks fine-tuning

We collected three open-source datasets of psychological analysis tasks from Chinese social media (Weibo) for dataset construction. We invited

Table 1: Data distribution of the proposed C-IMHI dataset.

Data	Task	Train/val/test	Type
SOS-HL-1K	suicide risk	749/250/250	binary
SocialCD-3K	cognitive distortion	2043/682/682	multi-label
CP	cognitive path	2740/910/945	multi-label
In total	Mental health	5532/1842/1877	-

psychology experts to provide explanations for decision-making based on psychological theories for these representative data, as shown in Section Appendix B. The dataset distribution can be seen in Table 1.

- **Suicide risk detection** SOS-HL-1K (Qi et al., 2023) is from Weibo, specifically collected from the “Zoufan” tree hole¹. The suicide risk task aims to differentiate between high and low suicide risk. It includes a total of 1,249 posts, and we invited domain experts to provide 22 explanations for representative data—11 for low-risk cases and 11 for high-risk cases.
- **Cognitive distortion detection** SocialCD-3K (Qi et al., 2023) is from Weibo, also sourced from the “Zoufan” tree hole. The cognitive distortion task centers on the categories defined by Burns (Burns, 1981). This task is a multi-label classification task, as each post may reflect multiple cognitive distortions across 12 categories. It includes a total of 3,407 posts, and domain experts were invited to provide 28 explanations, with at least two examples for each category.
- **Cognitive pathway extraction** CP (Jiang et al., 2024) is derived from two sources: primarily from Weibo and a smaller portion from translated Reddit. According to the theory of cognitive behavioral therapy (CBT) (Beck, 1970), it is framed as a hierarchical multi-label text classification (HMTTC) task, with four parent and nineteen child classes. A total of 555 posts were collected and segmented into 4,595 sentences, with experts providing 28 explanations that encompass all four parent classes and nineteen sub-classes.

We then used GPT-4 to supplement these explanations for all the data, resulting in the Chinese

¹<https://m.weibo.cn/detail/3424883176420210>

Social Media Interpretable Mental Health Instruction (C-IMHI) dataset, which contains 9,251 samples. The prompt for explanation generation can be seen in Section Appendix C. LLMs have shown feasibility for generative tasks (Yu et al., 2024), particularly in mental health, where they generate human-level explanations (Yang et al., 2023b, 2024b). The GPT prompt includes task-specific instructions, original data, true labels, and expert explanations (Figure S1), enabling it to learn expert reasoning while ensuring correct answers. We implemented a comprehensive evaluation with automated methods and human review of 100 samples (Section 4.2). Experts manually corrected errors, and the refined data were used for fine-tuning. We used these data to fine-tune the models and evaluate their performance on downstream tasks.

3.3 Clinical dataset for model evaluation

We collected cognitive correction materials from 50 patients, comprising 298 sentences, to validate the model’s performance on the clinical cognitive pathway extraction task. All the patients were diagnosed with mood disorders and demonstrating high treatment compliance. The data was collected from November 11 to 23, 2023, in the depression ward of an anonymous hospital. The study was approved by the Institutional Ethical Committee (Anonymous Institution, XXX-XXXX-IRB2023021) and informed consent was obtained from both the hospital and the patients. All data were anonymized to protect patient privacy. Patients documented their thoughts in a structured format: 1) triggering event, 2) thoughts, 3) emotional and behavioral responses, and 4) self-refutation. This aids cognitive correction and provides psychologists with deeper insights. However, patients often struggle with accurate expression, underscoring the need for automated cognitive pathway analysis.

4 Experiments

We designed experiments to validate both the quality of the C-IMHI dataset and the performance of the proposed MentalGLM series models. The evaluation includes ablation studies, performance assessments on three downstream tasks, and an evaluation of the quality of the model-generated explanations. We also evaluated the trained model on a clinical dataset to assess its generalization capabilities.

4.1 Implementation details

We developed MentalGLM from GLM-4², Zhipu AI’s latest open-source pre-trained model, which outperformed Llama-3-8B on several benchmarks (GLM et al., 2024). We proposed two versions: MentalGLM and MentalGLM-chat, based on GLM-4-9b and GLM-4-9b-chat, respectively. During two-step training, we used a batch size of 4 with 8 gradient accumulation steps. Training employed AdamW (Loshchilov and Hutter, 2019) with a 1e-4 max learning rate, 1% warm-up ratio, and a 1024 token input limit. Float16 was used for efficiency, and all experiments ran on an NVIDIA Tesla V100 32GB SXM2 GPU. All code, models, and development details are publicly available via: <https://anonymous.4open.science/r/MentalGLM-F416>.

4.2 Quality evaluation of the C-IMHI dataset

To ensure the quality of the C-IMHI dataset we constructed, we followed the evaluation metrics used to evaluate IMHI (Yang et al., 2024b) dataset. Given the extensive size of the dataset, all generated explanations were evaluated automatically. A subset of 100 samples was randomly selected for detailed human evaluation.

4.2.1 Automated evaluation

In automated evaluation of the C-IMHI dataset, we focused on two key aspects: correctness and consistency: 1) **Correctness**: the generated prediction should be correct compare with the ground truth (Yang et al., 2024b); 2) **Consistency**: the generated explanations should provide a reasoning process that explains the decision basis and is consistent with the prediction (Wang et al., 2023).

Correctness In the process of generating explanations, we incorporate annotated samples (data with annotations) and expert-provided examples into the prompt to guide GPT-4 in producing explanations. However, during the experiment, we noted that GPT-4 sometimes contradicted the provided annotations and produced explanations at odds with the established labels. It can be easily filtered using regular expressions for keyword detection, and in cases of incorrect annotations or explanations, we requested experts to revise them. We calculated the “agreed” and “disagreed” rates for each dataset as the evaluation metrics.

²<https://huggingface.co/THUDM/glm-4-9b>

Consistency All GPT-4 generations follow a fixed template, as illustrated in Section S1. Consistency assessment aims to verify whether each explanation supports its respective label. To achieve this, we trained a deep learning model on explanation-label pairs, replacing social media posts with generated explanations while preserving the original data split. The hypothesis is that strong model performance indicates consistent explanation-label patterns, and if it performs well on the test set without a significant gap, it further confirms generalization to unseen data. Details of the model training process can be found in Section Appendix D. Finally, we applied the trained model to both the test set and the expert-provided example set, using F1-scores as the evaluation metric.

4.2.2 Human evaluation

We randomly selected one hundred generated explanations for subsequent expert evaluation. The evaluation method builds on Yang et al. (2024b) and is optimized as shown in Section Appendix E. The evaluation was conducted by two experts in the field of psychology. In case of any inconsistencies in the evaluations, discrepancies are resolved by domain experts with over 10 years of experience, further minimizing bias. The human evaluations are conducted from the following four aspects: 1) **Consistency**: This dimension assesses whether the explanation is logically coherent and substantiates the final classification decision. 2) **Reliability**: This dimension assesses whether the content of the explanation is credible, grounded in accurate facts, and supported by sound reasoning. 3) **Professionalism**: This dimension primarily assesses the psychological accuracy and rationality of the generated explanations. These three aspects were scored on a four-point scale ranging from 0 to 3, with a higher score indicating a more satisfactory sample in that aspect. 4) **Overall**: This dimension assesses the overall effectiveness of the generated explanation and is the average score of consistency, reliability, and professionalism.

4.3 Ablation experiments

We conducted ablation experiments to assess the impact of the two training steps by creating MentalGLM-chat-S1, fine-tuned only on IMHI, and MentalGLM-chat-S2, fine-tuned only on C-IMHI. These models were then compared with the final MentalGLM-chat across three downstream tasks.

4.4 Downstream tasks evaluation

We evaluated the MentalGLM series against four deep learning models, three generalized LLMs, and four task-specific fine-tuned LLMs across three downstream tasks, using precision, recall, and F1-score. This evaluation step verifies category classification ability without assessing the quality of generated explanations.

- **Pre-trained deep learning models:** BERT (Devlin, 2018) is a Transformer based (Vaswani, 2017) pre-trained model. Chinese-BERT-wwm-ext and RoBERTa-wwm (Cui et al., 2021) represent BERT models optimized for Chinese, which employ whole word masking technology to enhance the ability to understand the Chinese language. Additionally, we selected the SOTA model, Chinese MentalBERT (Zhai et al., 2024) that enhances text representation and classification capabilities in mental health analysis tasks through continuous pre-training on an extensive corpus of Chinese mental health-related texts.
- **Generalized LLMs:** LLMs have garnered significant attention due to their flexibility, as they are driven by prompts. Models that perform tasks without examples are referred to as zero-shot prompts, while those that include a few examples are called few-shot prompts. We conducted experiments with three types of generalized LLMs: GLM-4-plus, specifically designed for Chinese, and two from the GPT series, GPT-3.5 and GPT-4.
- **Task fine-tuned LLMs:** The generalized LLM trained on general corpus without fine-tuning on the target tasks. To ensure fairness, we selected four representative open-source Chinese LLMs: Baichuan2-Chat³ (Yang et al., 2023a), Qwen2-Instruct⁴ (Yang et al., 2024a), Llama-3-Chinese⁵ and Llama-3-Chinese-instruct⁶ (Cui et al., 2023), to perform instruction fine-tuning on the C-IMHI dataset and evaluate them on the downstream tasks.

³<https://huggingface.co/baichuan-inc/Baichuan2-7B-Chat>

⁴<https://huggingface.co/Qwen/Qwen2-7B-Instruct>

⁵<https://huggingface.co/hfl/llama-3-chinese-8b>

⁶<https://huggingface.co/hfl/llama-3-chinese-8b-instruct>

Note that all fine-tuned LLMs were trained on the three downstream tasks simultaneously, whereas the pre-trained deep learning models were trained separately for each task. This also highlights the flexibility of LLMs.

4.5 Quality evaluation of explanations generated by MentalGLM-chat

The proposed MentalGLM is capable of generating explanations alongside predictions. For expert evaluation, we randomly selected 100 explanations from MentalGLM-chat, proportionally distributed across the three tasks in the C-IMHI test set: 14 from SOS-HL-1K, 36 from SocialCD-3K, and 50 from the CP dataset. We evaluated the explanation quality using the same criteria described in Section 4.2.2, including consistency, reliability and professionalism, and averaged these scores for an overall evaluation for each sample.

4.6 Clinical data evaluation

We validated our social media-trained models in clinical settings by testing their performance on cognitive pathway extraction, without conducting any fine-tuning on clinical data. Due to privacy concerns, online LLMs like GPT-4 were excluded as baselines. Therefore, we have selected the following three advanced open-source LLMs for comparison: GLM-4-chat, Baichuan2-Chat, and Qwen2-Instruct. In addition, we included the task fine-tuned LLM: Llama-3-Chinese-instruct, which was fine-tuned on the C-IMHI dataset and subsequently evaluated on the clinical dataset. All these comparison models employing the zero-shot prompting strategy, and we reported the performance as micro F1-scores.

5 Results

5.1 Quality evaluation results on the C-IMHI dataset

5.1.1 Automatic evaluation

As described earlier, the proposed dataset C-IMHI was evaluated automatically in terms of correctness and consistency, as shown in Figure 2 (a) and (b), respectively. We observed that GPT-4 agreed with more than 95% of the annotations provided by the three datasets, indicating the reliability of the GPT-generated output. However, it is crucial to also assess consistency, ensuring that GPT-4 generates reasoning process explanations that align with both the content and annotations. From the results shown

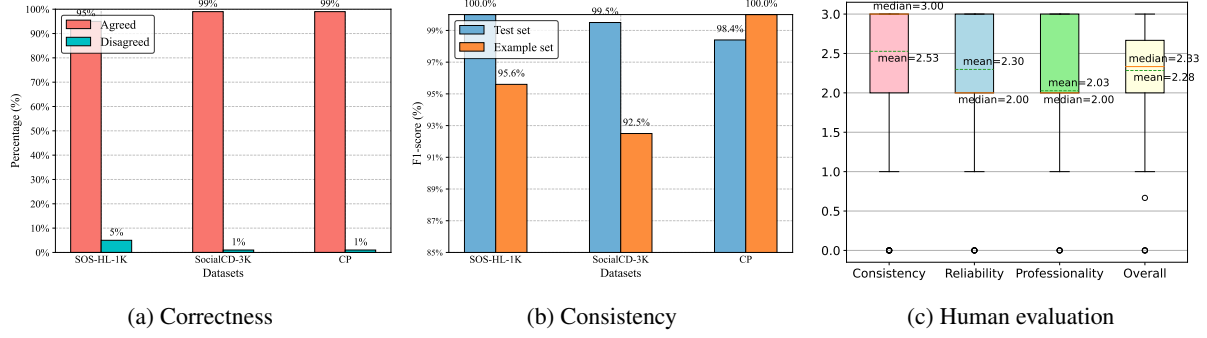


Figure 2: Evaluation results on GPT-4’s generated explanations used for C-IMHI data construction. (a) and (b) represent automated evaluation for the entire dataset, while (c) shows human evaluation on a subset of 100 samples.

in Figure 2 (b), the model achieved more than 98% F1-score on the test set across the three datasets, indicating high consistency. As we mentioned earlier, this is only a method to estimate consistency, assessing whether the model can identify stable patterns within the dataset, rather than a direct reflection of its performance on downstream tasks. The high performance (over 92.5% F1-score) on the expert-provided example set further confirmed the consistency of our dataset.

5.1.2 Human evaluation

The human evaluation results for C-IMHI dataset are shown in the Figure 2 (c). The high consistency score (mean value >2.5 out of 3) supports the consistency findings obtained from the automatic evaluation. Additionally, the generated explanations are reliable, as reflected by a high average score of 2.3 out of 3. However, they lack some degree of professionalism, as indicated by the slightly lower average score of 2.03. The overall final score is positive, with a mean of 2.28, indicating that the overall quality of the data has been successfully verified.

5.2 Ablation experiment results

Ablation experiment results shown in Table 2 highlight the impact of each training stage. MentalGLM-chat-S1, trained only on translated IMHI, showed a significant performance gap, especially in cognitive distortion classification with SocialCD-3K, underscoring the limitations of direct translation for fine-tuning. MentalGLM-chat-S2, fine-tuned on C-IMHI, outperformed MentalGLM-chat-S1, benefiting from task-specific alignment. However, the first step remains valuable—MentalGLM-chat, with two-step fine-tuning, showed higher F1-scores across all datasets,

demonstrating the knowledge gained from IMHI.

Table 2: Ablation experiment results. All results are F1-scores (%). MentalGLM-chat-S1 and MentalGLM-chat-S2 are fine-tuned on IMHI (Stage 1) and C-IMHI (Stage 2), respectively. “ CP_{Parent} ” and “ CP_{Child} ” denote parent and child-level performance for CP.

Model	SOS-HL-1K	SocialCD-3K	CP_{Parent}	CP_{Child}
MentalGLM-chat-S1	66.28	15.70	48.95	21.58
MentalGLM-chat-S2	81.58	70.69	77.69	47.69
MentalGLM-chat	85.12	71.04	80.55	47.85

5.3 Downstream task results

Experimental results for downstream tasks (Table 3) show that our models achieved the best or comparable performance across all tasks. MentalGLM-chat outperformed Chinese MentalBERT on SOS-HL-1K, with an F1-score 3.82% higher. On SocialCD-3K, it performed similarly, only 1.85% lower. For cognitive pathway extraction, parent-level classification reached 80.55% F1, surpassing the SOTA supervised model, while child-level classification remained challenging. Our model outperformed others, including Chinese MentalBERT, by 3.33%. Generalized LLMs, including GPT-4, performed poorly, with a best score of 28.61%. Overall, our models matched or exceeded supervised models while supporting multi-task training without separate models. They also outperformed fine-tuned open-source LLMs on all tasks, offering both flexibility and decision explainability—an essential advantage for specific applications.

5.4 Evaluation results of explanations generated by MentalGLM-chat

Our model delivers both high accuracy and decision-making explanations, essential for real-

Table 3: Results on three downstream tasks. Precision (P), recall (R), and F1-score (F1) are reported as micro averages (%), except for SOS-HL-1K (binary averages). “ CP_{Parent} ” and “ CP_{Child} ” denote parent and child-level performance for CP. “ZS” and “FS” indicate zero-shot and few-shot prompts.

Method	Param	SOS-HL-1K			SocialCD-3K			CP_{Parent}			CP_{Child}		
		F1	P	R	F1	P	R	F1	P	R	F1	P	R
Pre-trained deep learning models													
BERT	110M	77.91	77.60	78.22	71.92	79.19	65.87	77.01	76.68	78.13	44.66	51.84	41.85
Chinese-BERT-wwm	110M	79.32	83.18	75.80	73.06	84.22	64.50	77.96	80.36	75.71	42.98	71.26	30.77
RoBERTa-wwm	110M	79.83	81.51	78.22	73.91	82.61	66.87	76.81	78.28	75.39	43.61	54.81	36.21
Chinese MentalBERT	110M	81.30	81.96	80.64	74.91	83.03	68.24	79.22	79.68	78.76	47.58	50.70	44.82
Generalized LLMs (Zero-shot/few-shot prompt)													
GLM-4-plus_ZS	-	67.23	51.50	96.77	34.24	29.09	41.59	49.93	46.01	54.57	24.54	18.84	35.18
GLM-4-plus_FS	-	68.66	54.50	92.74	41.00	32.62	55.17	43.85	44.06	43.64	27.37	21.44	37.85
ChatGPT_ZS	175B	65.42	52.00	88.23	12.06	10.63	13.95	32.08	28.61	36.50	13.42	12.19	14.92
ChatGPT_FS	175B	68.71	59.37	81.61	18.10	16.76	19.68	54.87	51.87	58.25	27.00	24.80	29.64
GPT-4_ZS	-	71.72	57.43	95.48	26.61	17.13	59.65	35.93	31.69	41.47	17.22	15.44	19.45
GPT-4_FS	-	75.81	70.16	82.58	40.39	31.38	56.66	59.09	55.49	63.19	28.61	23.23	37.23
Task fine-tuned LLMs													
Baichuan2-chat	7B	75.68	85.71	67.74	71.68	76.89	67.12	73.96	69.94	78.86	45.65	43.36	48.21
Qwen2-Instruct	7B	78.93	75.18	83.06	72.01	76.22	68.24	76.12	71.32	81.60	46.24	43.66	49.13
Llama-3-Chinese	8B	77.97	82.14	74.19	70.97	74.52	67.75	79.11	79.37	78.86	48.23	48.99	47.49
Llama-3-Chinese-instruct	8B	79.32	83.19	75.81	70.90	73.05	68.87	78.96	78.42	79.50	49.32	50.16	48.51
Our method													
MentalGLM	9B	79.20	78.57	79.84	73.06	76.71	69.74	79.41	79.75	79.07	50.91	51.69	50.15
MentalGLM-chat	9B	85.12	87.29	83.06	71.04	74.22	68.12	80.55	80.76	80.34	47.85	48.42	47.28

world applications. Figure 3 shows expert evaluation of 100 randomly selected MentalGLM-chat explanations. The median values for both consis-

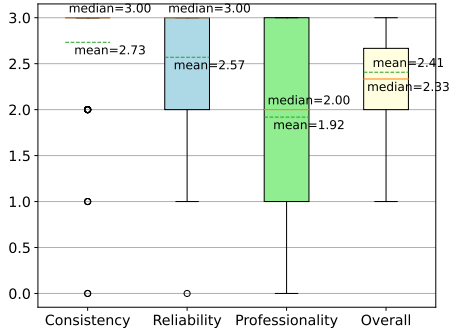


Figure 3: Expert evaluation results on 100 randomly selected prediction explanations generated by MentalGLM-chat.

tency and reliability in our expert evaluations were 3, with mean values exceeding 2.5. Compared to the expert evaluations of GPT-4-generated explanations (as shown in Figure 2 (c)), MentalGLM outperforms GPT-4 in these two dimensions. However, our model demonstrated slightly lower professionalism compared to GPT-4’s explanations, which can be attributed to the significantly larger scale and capacity of GPT-4. Overall, our model produced better explanations than GPT-4, as indicated by a higher mean value for overall performance.

5.5 Clinical data evaluation results

The experimental results of LLMs applied on clinical dataset can be seen in Table 4. Com-

pared to open-source LLMs without fine-tuning, MentalGLM-chat achieved the highest performance, surpassing the best non-fine-tuned model by 23.91% (parent level) and 30.39% (child level) in F1-score. Compared to the task-fine-tuned Llama-3-Chinese-instruct, it maintained an advantage of 4.94% (parent) and 2.95% (child). These results highlight its strong generalization and potential for clinical detection tasks.

Table 4: Results for clinical cognitive pathway extraction. Micro F1-scores are reported. “Parent” and “Child” indicate performance at respective levels.

Model	Fine-tuned	Param	Parent	Child
Baichuan2-chat	N	7B	41.33	12.06
Qwen2-Instruct	N	7B	44.33	11.54
GLM-4-chat	N	9B	45.28	14.97
Llama-3-Chinese-instruct	Y	8B	64.25	42.41
MentalGLM	Y	9B	69.07	44.33
MentalGLM-chat	Y	9B	69.19	45.36

6 Conclusion

We introduced C-IMHI, the first interpretable mental health analysis dataset for Chinese social media, and MentalGLM, the first open-source LLMs for explainable mental health analysis in this domain. Experiments showed MentalGLM outperformed or matched SOTA deep learning models and LLMs while generating high-quality explanations. Clinical dataset validation confirmed its generalizability, suggesting clinical potential. All datasets and models are publicly available for future research.

Limitations

Although the results are promising, there are several limitations in our work. First, the 'Professionality' of the explanations generated by the proposed MentalGLM is slightly lower than that of GPT-4, with MentalGLM achieving a mean score of 1.92 compared to GPT-4's mean score of 2.03. This difference may be attributed to the significantly smaller parameter size of MentalGLM's underlying architecture compared to GPT-4. However, the results indicate that the gap between the two models is not substantial, demonstrating the effectiveness of our approach. In future work, we plan to further expand the training dataset to enhance MentalGLM's performance in the psychological domain. Second, in this study, we validated the MentalGLM model, which was trained on social media data, using clinical data without any fine-tuning. Due to the lack of sufficient clinical data, we did not conduct fine-tuning experiments. Although our model outperformed all baseline models, there is still room for improvement. In future work, we aim to collect more clinical data and fine-tune the model to enhance its adaptability to clinical applications with minimal additional cost.

Ethical considerations

The original datasets used to construct the C-IMHI dataset were sourced from public social media platforms. We adhere strictly to privacy protocols and ethical principles to protect user privacy. To minimize the risk of personal information leakage, we anonymize and de-identify the data extensively during processing and analysis. We ensure that the research findings do not include any information that can directly or indirectly identify an individual. For the clinical data, informed consent was obtained from both hospitals and patients, and all data were anonymized to safeguard patient privacy.

Although MentalGLM has shown promising results in both social media and clinical mental health tasks, it is important to acknowledge that LLMs may introduce potential biases, including those related to gender, age, or sexual orientation, which could lead to incorrect judgments and inappropriate interpretations. We emphasize that the use of experimental results and data is strictly confined to research and analysis purposes, and any misuse or improper handling of the information is explicitly prohibited.

Acknowledgements

Anonymous acknowledgements.

References

- Aaron T Beck. 1970. Cognitive therapy: Nature and relation to behavior therapy. *Behavior therapy*, 1(2):184–200.
- Tom B Brown. 2020. Language models are few-shot learners. *arXiv preprint arXiv:2005.14165*.
- David D Burns. 1981. *Feeling good*. Signet Book.
- Lei Cao, Huijun Zhang, Ling Feng, Zihan Wei, Xin Wang, Ningyun Li, and Xiaohao He. 2019. [Latent suicide risk detection on microblog via suicide-oriented word embeddings and layered attention](#). In *Proceedings of the 2019 Conference on Empirical Methods in Natural Language Processing and the 9th International Joint Conference on Natural Language Processing (EMNLP-IJCNLP)*, pages 1718–1728, Hong Kong, China. Association for Computational Linguistics.
- Glen Coppersmith, Ryan Leary, Patrick Crutchley, and Alex Fine. 2018. Natural language processing of social media as screening for suicide risk. *Biomedical informatics insights*, 10:1178222618792860.
- Yiming Cui, Wanxiang Che, Ting Liu, Bing Qin, and Ziqing Yang. 2021. Pre-training with whole word masking for chinese bert. *IEEE/ACM Transactions on Audio, Speech, and Language Processing*, 29:3504–3514.
- Yiming Cui, Ziqing Yang, and Xin Yao. 2023. Efficient and effective text encoding for chinese llama and alpaca. *arXiv preprint arXiv:2304.08177*.
- Dorottya Demszky, Diyi Yang, David S Yeager, Christopher J Bryan, Margaret Clapper, Susannah Chandhok, Johannes C Eichstaedt, Cameron Hecht, Jeremy Jamieson, Meghann Johnson, et al. 2023. Using large language models in psychology. *Nature Reviews Psychology*, 2(11):688–701.
- Jacob Devlin. 2018. Bert: Pre-training of deep bidirectional transformers for language understanding. *arXiv preprint arXiv:1810.04805*.
- Muskan Garg, Chandni Saxena, Sriparna Saha, Veena Krishnan, Ruchi Joshi, and Vijay Mago. 2022. [CAMS: An annotated corpus for causal analysis of mental health issues in social media posts](#). In *Proceedings of the Thirteenth Language Resources and Evaluation Conference*, pages 6387–6396, Marseille, France. European Language Resources Association.
- Muskan Garg, Amirmohammad Shahbandegan, Amrit Chadha, and Vijay Mago. 2023. [An annotated dataset for explainable interpersonal risk factors of mental disturbance in social media posts](#). In *Findings of the Association for Computational Linguistics: ACL*

844	Xuhai Xu, Bingsheng Yao, Yuanzhe Dong, Saadia	<i>Computational Linguistics ACL 2024</i> , pages 10574–	900
845	Gabriel, Hong Yu, James Hendler, Marzyeh Ghas-	10585, Bangkok, Thailand and virtual meeting. As-	901
846	semi, Anind K Dey, and Dakuo Wang. 2024. Mental-	sociation for Computational Linguistics.	902
847	LLM: Leveraging large language models for mental		
848	health prediction via online text data. <i>Proceedings</i>	Chunting Zhou, Pengfei Liu, Puxin Xu, Srinivasan Iyer,	903
849	<i>of the ACM on Interactive, Mobile, Wearable and</i>	Jiao Sun, Yuning Mao, Xuezhe Ma, Avia Efrat, Ping	904
850	<i>Ubiquitous Technologies</i> , 8(1):1–32.	Yu, LILI YU, Susan Zhang, Gargi Ghosh, Mike	905
		Lewis, Luke Zettlemoyer, and Omer Levy. 2023.	906
851	Aiyuan Yang, Bin Xiao, Bingning Wang, Borong	Lima: Less is more for alignment . In <i>Advances in</i>	907
852	Zhang, Ce Bian, Chao Yin, Chenxu Lv, Da Pan,	<i>Neural Information Processing Systems</i> , volume 36,	908
853	Dian Wang, Dong Yan, et al. 2023a. Baichuan 2:	pages 55006–55021. Curran Associates, Inc.	909
854	Open large-scale language models. <i>arXiv preprint</i>		
855	<i>arXiv:2309.10305</i> .		
856	An Yang, Baosong Yang, Binyuan Hui, Bo Zheng,		
857	Bowen Yu, Chang Zhou, Chengpeng Li, Chengyuan		
858	Li, Dayiheng Liu, Fei Huang, et al. 2024a. Qwen2		
859	technical report. <i>arXiv preprint arXiv:2407.10671</i> .		
860	Kailai Yang, Shaoxiong Ji, Tianlin Zhang, Qianqian Xie,		
861	Ziyan Kuang, and Sophia Ananiadou. 2023b. To-		
862	wards interpretable mental health analysis with large		
863	language models . In <i>Proceedings of the 2023 Con-</i>		
864	<i>ference on Empirical Methods in Natural Language</i>		
865	<i>Processing</i> , pages 6056–6077, Singapore. Associa-		
866	tion for Computational Linguistics.		
867	Kailai Yang, Tianlin Zhang, Ziyan Kuang, Qianqian		
868	Xie, Jimin Huang, and Sophia Ananiadou. 2024b.		
869	MentaLLaMA: Interpretable mental health analysis		
870	on social media with large language models . In <i>Pro-</i>		
871	<i>ceedings of the ACM Web Conference 2024</i> , WWW		
872	'24, page 4489–4500, New York, NY, USA. Associa-		
873	tion for Computing Machinery.		
874	Songhua Yang, Hanjie Zhao, Senbin Zhu, Guangyu		
875	Zhou, Hongfei Xu, Yuxiang Jia, and Hongying Zan.		
876	2024c. Zhongjing: Enhancing the chinese medical		
877	capabilities of large language model through expert		
878	feedback and real-world multi-turn dialogue . <i>Pro-</i>		
879	<i>ceedings of the AAAI Conference on Artificial Intelli-</i>		
880	<i>gence</i> , 38(17):19368–19376.		
881	Hua Yu, Mingli Li, Zhixiong Li, Weiyi Xiang, Yiwen		
882	Yuan, Yaya Liu, Zhe Li, and Zhenzhen Xiong. 2020.		
883	Coping style, social support and psychological dis-		
884	tress in the general chinese population in the early		
885	stages of the COVID-19 epidemic. <i>BMC psychiatry</i> ,		
886	20:1–11.		
887	Yue Yu, Yuchen Zhuang, Jieyu Zhang, Yu Meng,		
888	Alexander Ratner, Ranjay Krishna, Jiaming Shen,		
889	and Chao Zhang. 2024. Large language model as at-		
890	tributed training data generator: a tale of diversity and		
891	bias. In <i>Proceedings of the 37th International Con-</i>		
892	<i>ference on Neural Information Processing Systems</i> ,		
893	NIPS '23, Red Hook, NY, USA. Curran Associates		
894	Inc.		
895	Wei Zhai, Hongzhi Qi, Qing Zhao, Jianqiang Li, Ziqi		
896	Wang, Han Wang, Bing Yang, and Guanghui Fu.		
897	2024. Chinese MentalBERT: Domain-adaptive pre-		
898	training on social media for Chinese mental health		
899	text analysis . In <i>Findings of the Association for</i>		

Appendix A Data distribution of the IMHI dataset

IMHI is the first multi-task, multi-source instruction dataset focused on interpretable mental health analysis, containing 105K data samples. It is designed to support instruction fine-tuning and evaluation for LLMs. The dataset is constructed from 10 publicly available mental health analysis datasets and covers 8 core tasks, including depression detection, stress detection, mental disorders detection, and more. The data sources include social media platforms like Reddit, Twitter, and SMS. Please note that some of the data has not been made publicly available yet. The data distribution can be seen in Table S1.

Appendix B Psychology theory-driven expert sample design

Appendix B.1 Suicide Risk Detection Task

Based on the **suicide risk level theoretical framework** (Huang et al., 2019b), we employ a dual-path analytical approach:

- **Suicidal Intent Clues:** Analyze emotional expressions in text such as *existential pain*, *hopelessness*, and *suicidal ideation* to identify latent suicidal motivations (e.g., metaphorical statements like "Life is meaningless")
- **Behavioral Plan Clues:** Detect concrete behavioral descriptions including *suicide methods*, *timeline planning*, and *preparation details* (e.g., action signals like "Saved enough sleeping pills")

Through synergistic analysis of dual clues, we systematically differentiate risk levels:

- High-risk individuals exhibit explicit plans (e.g., "Will jump from building on my birthday next week")
- Low-risk individuals primarily display emotional distress (e.g., "Wish to disappear")

Appendix B.2 Cognitive distortion detection and cognitive pathway extraction tasks

Following the **Cognitive Behavioral Therapy (CBT)** framework (Beck, 1970), we establish standardized analytical pathways:

- **Emotional Clues:** Identify cognitive distortion-related expressions such as *catastrophizing* and *overgeneralization* (e.g., "This failure proves I'm worthless")
- **Behavioral Clues:** Analyze compensatory strategies including *avoidance behaviors* and *safety-seeking behaviors* (e.g., "Avoid parties for fear of ridicule")

The dual-clue association mechanism reveals the psychological progression: **automatic thoughts** → **cognitive distortions** → **maladaptive behaviors**

Based on the aforementioned authoritative psychological frameworks (suicide risk theory/CBT), expert examples are constructed to ensure the scientific and standardized nature of the analytical pathways.

Appendix C Prompt template for explanation generation using GPT-4

The prompt structure consists of the following three parts: 1) Task-specific instruction: This defines the task. 2) Expert-written examples: These enable GPT-4 to learn and imitate the thinking of experts for this task. 3) Query for the target post: This specifies the samples that need to be analyzed and explained, including post text and corresponding labels. Figure S1 illustrates the prompt template employed by GPT-4 to generate explanations for cognitive distortion task.

1) Task-specific instruction:

You will see a post that exhibits cognitive distortion, along with assigned label to indicate the type of cognitive distortion. You must explain step-by-step the reasons for assigning these label. Here are some examples:

2) Expert-written examples:

Example 1:

Post: After surviving a near-fatal car accident, my good friend found another friend. Although we haven't been able to see each other much for a few months, they continue to treat me as kindly as before. Yet, feeling as unworthy as I am, I've developed a barrier and feel that it might be time to let these relationships go.

Label: Disqualifying the positive.

Explanation: This statement illustrates the user's rejection of positive developments. Despite friends treating her "as kindly as before," she feels undeserving of such care and has even developed a barrier. This is a typical example of "Disqualifying the Positive," where, although the user can sense others' kindness and care towards her, she still transforms these positive feelings into negative experiences.

Example 2:

...

3) Query for the target post :

Post: I'm sorry to my parents, sorry to my whole family. They gave me the best of everything and raised me with great care, but in the end, I ruined myself and became the worst version of myself.

Label: Blaming oneself.

Explanation:

Figure S1: Prompt template used in GPT-4 to generate explanations for cognitive distortion task.

Table S1: Data distribution of the IMHI dataset.

Data	Task	Instruction (train/val)	Source	Annotation	Type
DR	depression detection	1654/184	Reddit	weak supervision	binary
Dreaddit	stress detection	3195/356	Reddit	human annotation	binary
Loneliness	loneliness detection	477/54	Reddit	human annotation	binary
SWMH	mental disorders detection	9793/1089	Reddit	weak supervision	multi-class
T-SID	mental disorders detection	863/96	Twitter	weak supervision	multi-class
SAD	stress cause detection	6162/685	SMS	human annotation	multi-class
CAMS	depression/suicide cause detection	562/63	Reddit	human annotation	multi-class
MultiWD	wellness dimensions detection	17716/1969	Reddit	human annotation	multi-label
IRF	interpersonal risk factors detection	6336/705	Reddit	human annotation	multi-label
In total	Mental health analysis	46758/5201	Social Media	-	-

Appendix D Consistency evaluation of the C-IMHI dataset

We proposed a method to check the consistency of the generated explanations by verifying whether each explanation supports its respective label. To achieve this, we trained deep learning models using explanation-label pairs to predict the corresponding labels from the generated explanations. The model used for this task was Chinese MentalBERT. The performance on the test set reflects the consistency of the generated explanations. The model that performed best on the validation set was selected and evaluated on both the test set and the expert-provided example set. We conducted this evaluation on three downstream task datasets: SOS-HL-1K, SocialCD-3K, and CP, maintaining the dataset distribution as shown in Table 1.

For training, the models were fine-tuned for 10 epochs on the training set for all tasks. We used a batch size of 16, the Adam optimizer, a learning rate of $2e-5$, and cross-entropy as the loss function. Training was conducted on an NVIDIA GeForce RTX 4090 24GB GPU. The best-performing model on the validation set was then used to evaluate the test set and the expert-provided example set, with F1-scores used as the evaluation metric.

We can see the detailed model performance in Table S2. The high performance ($>98\%$ F1-score) across all the test sets demonstrates the strong consistency of the generated explanations. Additionally, the high performance ($>92\%$ F1-score) on the expert-provided example set highlights the consistency of the model’s explanations with human-provided explanations.

Table S2: Performance of the Chinese MentalBERT classifier on the test and expert-provided example sets, evaluated using precision (P), recall (R), and F1-score (F1). Metrics are reported as micro averages, except for binary averages on SOS-HL-1K.

SOS-HL-1K			SocialCD-3K			CP		
F1	P	R	F1	P	R	F1	P	R
Test set								
100.00	100.00	100.00	99.56	99.25	99.87	98.47	99.81	97.16
Expert-provided example set								
95.65	91.66	100.00	92.53	93.93	91.17	100.00	100.00	100.00

Appendix E Expert quality check and evaluation guideline

The experts evaluated the quality of LLM-generated explanations from three perspectives, based on the research by Yang et al. (2024b). To enhance the evaluation, we refined the "Professionalism" metric by incorporating principles from the Cognitive Behavioral Therapy (CBT) framework. Further details are provided below:

- **Consistency:** Consistency evaluates whether the explanation supports the classification result. Large language models may sometimes produce discrepancies between labels and explanations. Annotators should assess whether the generated explanation provides consistent supporting evidence for the classification and whether it is well-structured.
 - 0: Inconsistent with the classification result.
 - 1: Consistent with the classification result but poorly readable and contains many errors.
 - 2: Consistent with the classification result. Most content is coherent and easy to read, with only minor errors.

1042	– 3: Consistent with the classification result. Fully fluent, coherent, and error-free.	used flawlessly, demonstrating a high level of professionalism and scientific rigor.	1091
1043			1092
1044			1093
1045	• Reliability: Reliability measures the credibility of the explanation in supporting the classification result. Annotators should evaluate whether the explanation is factually accurate, free of misinformation, and based on sound reasoning.	Appendix F Error analysis of LLMs for Cognitive Distortion Classification Task	1094
1046			1095
1047			1096
1048		Example:	1097
1049			
1050			
1051	– 0: Completely unreliable information, containing factual hallucinations (e.g., nonexistent symptoms).	• [Chinese] 爱我的都会离开我，连养条狗狗都不喜欢和我这个郁郁寡欢动不动就掉眼泪的人呆一起，嫌累。除了我那个我从不敢在他面前表露情绪的爸，因为他不能理解我不快乐得有了病。还除了那个因无法自控爱着我的妈妈，一个家庭主妇开始去了解抑郁症。我要死了，我爸得多想不通啊，我妈得多伤心呢？可是我真的好累...	1098
1052			1099
1053	– 1: Partially reliable information, but fact-based reasoning is flawed.		1100
1054			1101
1055	– 2: Mostly reliable information, with non-critical misinformation or reasoning errors.		1102
1056			1103
1057	– 3: Completely reliable information.		1104
1058			1105
1059			1106
1060	• Professionalism: Professionalism assesses the rationality of the explanation in supporting the classification result from a psychological perspective. Annotators should base on the framework of CBT to evaluate whether the explanation includes both emotional and behavioral cues. These methods are widely used in psychological counseling and validated in clinical practice. The explanation should adhere to standardized analysis paths, align with psychological theories, and demonstrate high scientific and professional standards.	• [English]: Everyone who loves me will leave me. Even raising a dog, it doesn't like being around me, this person who is often gloomy and cries easily. It finds me tiring. Except for my dad, whom I never dare to show my emotions in front of, because he can't understand that I became ill because I'm not happy. And except for my mom, who loves me uncontrollably and is starting to learn about depression as a housewife. I feel like I'm going to die. How much will my dad struggle to understand? How much will my mom be heartbroken? But I'm really so tired...	1107
1061			1108
1062			1109
1063			1110
1064			1111
1065			1112
1066			1113
1067			1114
1068			1115
1069			1116
1070			1117
1071			1118
1072	– 0: The explanation does not reference any psychological theory and lacks or misrepresents analysis of emotions and behaviors.	Label: 先知错误 (The fortune teller error)	1120
1073		Model output:	1121
1074			
1075		• GPT response	1122
1076	– 1: The explanation attempts to reference psychological theory but applies it inaccurately, with simplistic or partially incorrect analysis of emotions and behaviors.	– [Chinese] 这个帖子反映了“以偏概全”的认知歪曲。作者通过自己当前的情绪困境，过度泛化地认为“爱我的都会离开我”，这种想法将一些局部的负面经验扩展到整个生活，忽视了可能存在的其他积极或中立的情况。例如，作者感到孤独，认为即使是宠物也不愿意陪伴自己，便推断出所有人和事物都会远离自己，这样的思维方式导致了对生活的极端解读，容易陷入消极情绪和绝望感中，无法看到事情的另一面或潜在的变化空间。	1123
1077			1124
1078	– 2: The explanation largely aligns with psychological theory. The analysis of emotions and behaviors is fairly accurate, though there is room for improvement. Professional terminology is mostly appropriate.		1125
1079			1126
1080	– 3: The explanation fully aligns with psychological theory, providing in-depth and accurate analysis of emotions and behaviors. Professional terminology is		1127
1081			1128
1082			1129
1083			1130
1084			1131
1085			1132
1086			1133
1087			1134
1088			1135
1089		– [English]: This post reflects the cognitive distortion of overgeneralization .	1136
1090			1137

1138	The author, based on their current emo-	患者基于过去的经历和当前的情绪状	1187
1139	tional struggles, excessively general-	态, 预测未来的事情会按照她现在的	1188
1140	izes by believing that "everyone who	感觉发展, 尽管这个预测并没有任何	1189
1141	loves me will eventually leave me." This	事实依据。	1190
1142	thought pattern extends specific negative	– [English]: This post reflects the cogni-	1191
1143	experiences to the entire life situation, ig-	tive distortion of the fortune teller er-	1192
1144	oring the possibility of other positive or	ror . The reasoning is as follows: in this	1193
1145	neutral circumstances. For example, the	passage, the patient is filled with despair	1194
1146	author feels lonely and believes that even	and negative expectations about their fu-	1195
1147	pets are unwilling to accompany them,	ture, believing they will grow old and die	1196
1148	leading to the conclusion that everyone	alone, even contemplating death. This	1197
1149	and everything will abandon them. This	extreme pessimism about the future, the	1198
1150	kind of thinking results in an extreme	belief that their life will be terrible, is a	1199
1151	interpretation of life, making it easy to	typical example of the fortune teller error	1200
1152	fall into negative emotions and despair,	cognitive distortion. The patient is pre-	1201
1153	while being unable to see the other side	dicting that the future will unfold in the	1202
1154	of things or the potential for change.	same way as their current feelings and	1203
1155	• GLM-4-plus response	past experiences, despite the fact that this	1204
1156	– [Chinese] 这个帖子体现了以偏概全	prediction has no factual basis.	1205
1157	的认知歪曲。帖子中的叙述者根据自	In Case, GPT-4 identified the distortion as "over-	1206
1158	己的一些负面经历 (例如感到被爱	generalization," correctly recognising the poster's	1207
1159	的事物和人离开, 以及狗狗不喜欢和自	negative experiences ("the dogs don't like to be	1208
1160	己呆在一起) 得出一个广泛的结论,	with him") being extended to their entire life. GLM-	1209
1161	即“爱我的都会离开我”。这种思维方	4-plus also addressed this issue by categorizing it as	1210
1162	式忽略了那些可能不会离开或者仍然	"overgeneralization," highlighting how the poster's	1211
1163	爱着他们的人的情况, 而是基于有限	specific negative experiences led to a broad nega-	1212
1164	的证据做出了一个过于广泛的负面概	tive conclusion. However, MentalGLM offered a	1213
1165	括。	deeper analysis, categorising it as a "fortune teller	1214
1166	– [English]: The cognitive distortion	error," explaining how the poster's beliefs ("all	1215
1167	demonstrated in this post is overgen-	those who love me will leave me") predict a bleak	1216
1168	eralization . The narrator in the post	future without factual basis. This demonstrates	1217
1169	draws a broad conclusion that "everyone	MentalGLM's ability to identify the distortion type	1218
1170	who loves me will leave me," based on	while analysing its implications more thoroughly.	1219
1171	some negative experiences, such as feel-	Overall, unlike GPT-4 and GLM-4-plus, which of-	1220
1172	ing abandoned by loved ones and a dog	fered reasonable but general analyses, MentalGLM	1221
1173	not enjoying their company. This way	proved more accurate and comprehensive, provid-	1222
1174	of thinking disregards the situations of	ing detailed insights into posters' emotions, be-	1223
1175	those who might not leave or still love	haviours, and thought patterns. Its emphasis on	1224
1176	them, making an excessively broad nega-	explainability further allows users to understand	1225
1177	tive generalization based on limited evi-	both the reasoning process and the decision, mak-	1226
1178	dence.	ing it more effective for this task.	1227
1179	• MentalGLM response	Appendix G Foundation Model Selection	1228
1180	– [Chinese] 这篇帖子体现了先知错误	for Instruction Tuning	1229
1181	的认知歪曲。理由: 这段话中, 患	Before finalizing the base model for instruction	1230
1182	者对自己的未来充满了绝望和消极	tuning, we conducted a comprehensive zero-shot	1231
1183	的预期, 认为自己将会孤独终老, 甚	evaluation on several leading open-source Chinese	1232
1184	至想到了死亡。这种对未来极度消极	large language models (LLMs), including GLM-	1233
1185	的预测, 认为自己未来的生活会非常	4, Qwen2, Baichuan2, and LLaMA-3-Chinese.	1234
1186	糟糕, 是典型的先知错误认知歪曲。	These models were evaluated on a representative	1235
		sample of 1,500 instances drawn from three mental	1236

health datasets: SOS-HL-1K, SocialCD-3K, and the CP dataset. The tasks in these datasets demand nuanced psychological reasoning and understanding of mental states.

Table S3: Zero-shot F1 performance of foundation models on mental health datasets.

Model	SOS-HL-1K	SocialCD-3K	CPparent	CPchild
Baichuan2-chat	60.97	25.36	32.17	13.68
Qwen2-Instruct	61.92	29.74	30.76	17.45
LLaMA-3-Chinese	59.89	22.47	28.39	11.37
GLM-4-chat	64.56	35.18	34.05	18.63

As shown in Table S3, **GLM-4-chat consistently outperformed** other models across all datasets, particularly in tasks requiring psychological insight. Based on this empirical evidence, we selected GLM-4 as the foundation model for instruction tuning.