Impact Factor (SJIF): 6.126 E-ISSN: 2583-1615, P-ISSN: 3049-3498

International Journal of Research in Academic World

Received: 02/September/2025 **IJRAW:** 2025; 4(10):547-551 **Accepted:** 14/October/2025

Tele-counselling as a Mental Health Tool in Social Work Practice: A Narrative Review

[*1]Subi K Varghese and [2]Abhijith Roy

[*1]Assistant Professor, Department of Social Work, Kristu Jyoti College of Management and Technology, Changanassery, Kottayam, Kerala, India.

[2]Recreational Aid, Sienna Senior Living, Toronto, Canada.

Abstract

The Covid-19 pandemic prompted a significant shift in the delivery of psychosocial and mental health services, with tele-counselling emerging as a critical mode of intervention. This article explores the relevance, benefits, challenges, and ethical considerations of tele-counselling within social work practice. Drawing on a narrative review of existing literature, the study highlights how tele-counselling has enabled social workers to address specific mental health issues while ensuring continuity of care in times of crisis. However, barriers such as digital divide, communication limitations, and ethical concerns underscore the complexities of its implementation. The article concludes with implications for enhancing the effectiveness of tele-counselling through training, ethical guidelines, infrastructure development, and the promotion of blended care models. These insights have significant implications for the future of mental health services and the evolving role of social work in digital contexts.

Keywords: Tele-counselling, social work, Covid-19, mental health, ethical challenges, blended care.

Introduction

The global burden of mental health issues coupled with the Covid-19 pandemic called for a timely, effective and accessible mental health service models all over the world. One of such accepted model is tele-counselling. Tele-counselling is the practice of counselling through telephone, video conferencing or internet. Any application or platform involving video conferencing (e.g.: Skype, GoogleMeet or Zoom) can be used if it is secured so that no one else other than the client and the therapist can log in to the session. It is a platform used by therapists, psychologists and social workers to provide web based mental health support. Tele-counselling could be an affordable and scalable model for psychological support in spite of some ethical challenges (Gupta *et al*., 2021) [1].

Tele therapy can be effective as traditional face to face therapy, especially for adults. The effectiveness of tele-counselling was evident in the context of Covid-19 pandemic. The significant disruptions in the healthcare system during the pandemic called for accessible mental health service. The major consequence of the pandemic was the global rise in psychological distress among individuals irrespective of the ages. In this context, providing counselling services through digital platform emerged as a tool to bridge the gap in mental health delivery (Tajan *et al*., 2023) [2]. This modality has been especially beneficial to people in India, particularly in rural and remote areas, may have limited access to in-person counselling services.

Even though tele-counselling was initiated as a response to crisis such as Covid-19, it has evolved into an effective mental health strategy among professionals. Psychologists across India adapted to this change by using digital platforms to continue providing mental health support. This transition was crucial in maintaining continuity of care during lockdowns and social distancing measures (Manickam, 2021) [3]. Telehealth is expected to continue beyond Covid-19 suggesting its wider acceptance for delivering mental health services (Reay *et al*., 2021; Whaibeh *et al*., 2020) [4, 5].

Social work, being a profession that highlights its importance for human connectedness, also adopted a significant shift by incorporating tele-counselling in practice. Social workers provide tele-counselling in diverse settings such as schools, psychiatric hospitals, NGO's and different crisis response settings. The adoption of tele counselling in social work practice is important to evaluate as it is having significant positive and negative effects. Merits include it helps in managing traffic of service demands and give accessibility for specific populations. On the other hand, many clients prefer in person support rather than web based service delivery. Also, it is not suitable for chronic mental health patients (Gilson *et al*., 2024) [6].

Despite global use of tele-counselling services by social

***Corresponding Author:** Subi K Varghese

workers, there is a lack of literature that explores the benefits, challenges and ethical considerations within social work practice, especially in the context of India. This narrative review aims to explore the use of tele-counselling as a mental health tool in social work practice, focusing on its advantages, challenges, and ethical considerations. By examining recent literature, this narrative review provides insights into how tele-counselling can be effectively used by social workers to address mental health concerns, enhance accessibility, and reduce service gaps.

Materials and Methods

This research has followed a narrative review approach aimed at exploring the role of tele-counselling as a mental health intervention in social work practice. Relevant literature was identified through searches conducted on electronic databases such as Google Scholar, PubMed, ScienceDirect, and ResearchGate. The search was carried out using a combination of keywords, including "tele-counseling," "social work," "mental health," "COVID-19," "India," and "healthcare workers." Articles published between 2019 and 2024 were included, with an emphasis on English-language publications related to mental health interventions, social work practice, and tele-counseling applications during health emergencies.

The selection criteria included:

- Peer-reviewed journal articles, conceptual papers, and government/NGO reports
- Studies focused on the Indian context, especially during the COVID-19 pandemic
- Literature highlighting the use of tele-counseling in social work or among healthcare workers

Articles that did not focus on mental health, were not accessible in full text, or lacked relevance to social work or the Indian context were excluded. The selected studies were analyzed and organized thematically based on recurring themes such as feasibility, accessibility, benefits, challenges, ethical considerations, and implications for social work practice. This narrative synthesis allowed for a contextualized understanding of the applicability and future scope of tele-counseling in enhancing mental health services within social work, especially in times of public health crises.

Results

The extensive literature review revealed multiple dimensions of tele-counselling as a mental health tool in in social work, especially during Covid-19 pandemic. The results are presented under the following major themes:

- Types of issues addressed through tele-counselling
- Effectiveness in addressing mental health challenges
- Challenges and limitations and
- Ethical considerations

Types of Issues Addressed through Tele-counselling

Social workers through tele-counselling have been addresses a broad range of psychosocial and mental health issues.

Suicidal Ideation: Tele-counselling has been proven effective in managing chronic condition like suicidal ideation. The study by Pangngay (2024) [7] portrays tele-counseling's applicability in managing high-risk situations, particularly suicide prevention. Psychologists provided crisis intervention to clients exhibiting suicidal ideation, demonstrating tele-counseling's potential in addressing severe mental health crises when traditional in-person services were not accessible.

Social Phobia: Tele-counselling has also been used to support individuals with social phobia. Virtual connections enabled clients to open up without the fear of being criticized or judged, which is associated with face-to face encounters, thereby reducing the symptoms of social anxiety (Gilson *et al*., 2024) [6].

Anxiety: Anxiety is one of the most frequently treated issue through tele-counselling. Social workers employed video technology to assist clients in managing daily activities, adhering to medication schedules, and coping with episodes of anxiety (Oestergaard & Dinesen, 2019). Social workers provided emotional regulation strategies, psychoeducation, and cognitive-behavioral interventions via phone or video calls. The rise in anxiety-related concerns during the Covid-19 pandemic led to an upsurge in tele-counselling interventions among students, older adults, and frontline workers (The Times of India, 2025) [9].

Grief and Loss: Social workers also employed tele-counselling to help individuals cope with bereavement, especially during the pandemic when in-person support systems were disrupted. Literature documents the usefulness of narrative therapy and grief-focused counselling delivered through telephonic or virtual platforms (Manikappa *et al*., 2024) [10].

Social Isolation: Tele-counselling also addressed the concern of social isolation. The availability of 24/7 video support provided clients with a sense of security, reducing feelings of isolation and promoting autonomy in their recovery journey (Oestergaard & Dinesen, 2019).

Substance Abuse: Tele-counselling was utilized to offer motivational interviewing, relapse prevention strategies and emotional support to clients with substance use disorders. Lin *et al*. (2019) [11] emphasize the role of social workers in these interventions, highlighting their ability to maintain therapeutic engagement and continuity of care through digital platforms.

Academic and Career-Related Stress: Tele-counselling was utilized extensively to support adolescents and young adults in managing academic pressure and making career-related decisions. School social workers played a critical role during the remote learning period, offering emotional support, guidance, and counselling to students experiencing stress and uncertainty (Oestergaard & Dinesen, 2019).

Effectiveness in Addressing Mental Health Challenges

Tele-counselling has emerged as a highly effective modality for addressing diverse mental health challenges, particularly in contexts marked by limited accessibility, public health emergencies, and system-level constraints.

Increased Accessibility: One of the most consistently noted benefits of tele-counselling is enhanced accessibility to mental health care. Tele-counselling helps overcome geographical barriers, especially in rural or underserved areas where mental health services are scarce. It facilitated increased accessibility, allowing clients to receive support without the need for travel, which was particularly beneficial for those with mobility issues or residing in remote areas (Gilson *et al*., 2024; Gbadamosi & Ajewumi, 2024) [6, 12]. Additionally, Novo and Knezevic (2019) [13] emphasize how tele-counselling reduces costs for both providers and clients, particularly those in remote or underserved areas. This feature makes mental health support more accessible, aligning with social work's core principle of equitable service delivery.

Maintaining Continuity of Care: Another benefit of online service delivery is its role in maintaining continuity of care during disruptions like the pandemic. Tele-counselling

facilitated the continuity of therapeutic relationships during lockdowns and crises. Social workers were able to maintain regular contact with clients, preventing relapse or deterioration in mental health (Gilson *et al*., 2024) [6].

Support for Vulnerable Populations: The study by Simiyu, Paul, and Mutavi (2021) [14] highlights the critical role of tele-counseling in addressing the mental health needs of incarcerated individuals during pandemic situations, such as COVID-19. The authors emphasize that incarcerated persons are particularly vulnerable during pandemics due to factors like isolation, limited access to healthcare, and heightened anxiety about the health crisis.

Challenges and Limitations

While tele-counselling has significantly expanded the reach of psychosocial support services, various challenges and limitations have been documented in the literature. These span across communication dynamics, assessment limitations, technological proficiency, safety concerns, and institutional preparedness.

Communication Barriers: A major limitation in tele-counselling is the difficulty in building therapeutic rapport due to the absence of non-verbal cues. This affects the emotional quality of interactions and may limit the depth of engagement (Gilson *et al*., 2024; Novo & Knezevic, 2019; Manickam, 2021) [6, 13, 3]. Technological literacy issues among clients—particularly older adults and individuals in low-resource settings—further hinder effective communication, alongside frequent disruptions due to unstable internet connectivity.

Assessment Limitations: Conducting comprehensive bio-psycho-social assessments through virtual platforms poses significant challenges. Social workers are often unable to observe clients' non-verbal behavior, living conditions, or family dynamics, all of which are crucial for accurate diagnosis and intervention planning (Gilson *et al*., 2024) [6]. This limitation may reduce the overall effectiveness of intervention strategies, especially in complex or high-risk cases.

Technological Proficiency: Both clients and practitioners often lack adequate technological proficiency. Social workers had to adapt to tele-counselling with minimal prior experience or institutional support, leading to inconsistent service delivery (Gbadamosi & Ajewumi, 2024; Simiyu *et al*., 2021) [12, 14]. Novo *et al*. (2021) [13] found that 85% of professionals involved in their study emphasized the urgent need for continuous training programs to enhance their capability in delivering virtual mental health services. This highlights the necessity for structured digital literacy and tele-practice training within the social work profession.

Safety Concerns: Ensuring client safety in virtual environments is a persistent concern, especially when dealing with individuals in crisis. The physical absence of the social worker limits immediate intervention possibilities in high-risk situations such as suicide ideation or domestic violence (Gilson *et al*., 2024) [6]. Furthermore, maintaining client confidentiality and managing emotional nuance in remote settings remains difficult (Manickam, 2021) [3].

Lack of Suitability for Chronic Clients: Tele-counselling may not be equally effective for clients with chronic or severe mental health conditions. These populations often require intensive, in-person care that virtual platforms cannot sufficiently provide (Novo & Knezevic, 2019; Manickam, 2021; Gbadamosi & Ajewumi, 2024 [13, 3, 12]). Tailored, hybrid models of intervention may be more appropriate for such clients.

Lack of Infrastructure and Institutional Support: Another significant barrier is the lack of institutional readiness and infrastructure for implementing tele-counselling. Novo *et al*. (2021) [15] reported that fewer than 10% of mental health institutions had appropriate ICT support or digital monitoring tools in place during the pandemic. This lack of preparedness hindered the scalability and effectiveness of remote service delivery, especially at a time of heightened demand for mental health care.

Ethical Considerations

The integration of tele-counselling in social work practice introduces unique ethical challenges that require careful consideration.

Confidentiality and Privacy: Ensuring confidentiality in virtual environments is one of the foremost ethical concerns in tele-counselling. Sessions conducted in shared spaces or on unsecured networks may risk breaches of privacy. Social workers must safeguard both verbal and digital information transmitted during sessions (Gilson *et al*., 2024; Simiyu *et al*., 2021; Singh & Garaya, 2022; Gbadamosi & Ajewumi, 2024; Oestergaard & Dinesen, 2019) [6, 14, 16, 12]. Ensuring encryption, secure platforms, and client privacy at both ends of the session is essential, though not always feasible in low-resource settings.

Informed Consent: Ensuring informed consent and respecting the rights of incarcerated individuals were identified as essential ethical considerations in the delivery of tele-counselling services (Simiyu, *et al*., 2021; Singh & Garaya, 2022) [14, 16]. Clients should be made aware of the nature of the therapy, potential risks, and limitations inherent in online platforms. This ensures that clients can make autonomous decisions regarding their participation in tele-therapy sessions (Singh & Garaya, 2022; Gbadamosi & Ajewumi, 2024) [16, 12].

Equity and Access: The reliance on technology for service delivery highlighted disparities in access, as not all clients had the necessary resources or digital literacy to engage effectively in tele-counselling. Moreover, there was a need for culturally sensitive approaches to address the diverse populations in India. Psychologists emphasized the importance of adapting interventions to align with cultural values and norms to ensure effectiveness and acceptance (Manickam, Ed., 2021; Singh & Garaya, 2022; Gilson *et al*., 2024; Gbadamosi & Ajewumi, 2024) [3, 16, 6, 12]

Professional Boundaries: The informal nature of virtual interactions sometimes blurred professional boundaries, necessitating clear guidelines to maintain the integrity of the therapeutic relationship (Gilson *et al*., 2024) [6]. For instance, clients may attempt to contact counsellors outside of working hours or through personal platforms. Upholding professional boundaries is essential to maintain ethical standards.

Alignment with Social Work Ethics: Tele-counselling practices must align with core social work values, such as respect for persons, social justice, and professional integrity. This includes providing clients with choices, ensuring equitable access to services, and maintaining high standards of practice (Gilson *et al*., 2024) [6]

Discussion

The findings from the review highlight the relevance of tele-counselling in major helping professions, especially social work. Tele-counselling had a major impact especially during the time of the pandemic. It was emerged as an alternative,

where in person service was not possible. It was undoubtedly a transformative tool that expanded the limit and scope of psychosocial support services. The major objectives of the study were to identify the problems addressed through tele-counselling, its effectiveness, challenges and ethical considerations.

One of the major outcomes of the review is the varied range of mental health issues addressed through tele-counselling. It ranged from suicidal ideation, anxiety, and grief to substance abuse and academic stress. Practitioners were able to reach clients across demographic boundaries and address stressors specific to a given context because of the flexibility of virtual platforms (Gilson *et al*., 2024 [6]; Oestergaard & Dinesen, 2019). The use of narrative therapy for grief**,** motivational interviewing for substance abuse and CBT techniques for anxiety management through virtual platforms shows that tele-counselling is not limited to basic emotional support**.** However, the client's and practitioners technological proficiency greatly influences the quality and scope of the intervention, highlighting the digital divide in mental health care access.

In terms of improving accessibility and preserving continuity of care, tele-counselling has shown exceptional efficacy. This modality benefited clients in underserved or remote areas, which aligns with the ethical principle of equity in service delivery. Additionally, maintaining therapeutic alliances during times of crisis promoted psychological resilience and prevented relapse in high-risk groups (Simiyu *et al*., 2021) [14]. Although these results support the value of tele-counselling, organisational support, digital literacy, and infrastructure are also necessary for its success. Without formal framework, tele-counselling has the risk of being implemented in an inconsistent manner. This necessitates the integration of digital training and supervision systems into social work practice and education.

Despite its advantages, tele-counselling has a number of drawbacks that affect practice. The first is the difficulty in establishing rapport and performing comprehensive evaluations. Key elements of social work assessments, such as interpersonal dynamics, home environments, and nonverbal cues, are frequently unavailable through virtual means. This may have an impact on cultural sensitivity and individualization of interventions in addition to compromising diagnostic accuracy. Another critical concern is the limited suitability for clients with chronic or severe mental health conditions. These clients often require in-person, intensive, and multi-disciplinary interventions, which virtual platforms cannot provide. So, future models must consider hybrid approaches.

Furthermore, institutional technological readiness is still low. The fact that less than 10% of mental health organizations were adequately supported by ICT during the pandemic (Novo *et al*., 2021) [15] indicates a systemic gap that needs to be addressed as a matter of high priority through policy change, funding, and workforce training.

Ethical concerns are still at the forefront of tele-counselling implementation in social work. The confidentiality, informed consent, and professional boundary issues are amplified in online settings. Specifically, the vulnerability of the population living in shared accommodations requires more stringent ethical standards, such as the use of encrypted interfaces, privacy-protective options, and explicit boundary establishment guidelines (Simiyu *et al*., 2021; Singh & Garaya, 2022) [14, 16].

Further, the ethical question of equity in access arises strongly. As tele-counselling opens up access for others, it also bars those with restricted technological access, e.g., rural, poor, or older individuals. This raises questions regarding the justice aspect of social work practice and implies that electronic mental health treatments should be complemented with initiatives that bridge infrastructural and socioeconomic divides. Lastly, upholding social work values in a digital age cannot be emphasized enough. Respect for persons, integrity of practice, and adherence to the dignity of clients should inform every move in tele-counselling.

Conclusion

Tele-counselling has proved to be an asset and a creative resource in social work, particularly during the Covid-19 when direct interventions were limited. The review illustrates that tele-counselling has facilitated social workers to tackle numerous psychosocial and mental health problems—like anxiety, bereavement, suicidal thoughts, drug dependency, and social isolation—by providing flexible, accessible, and frequently immediate support.

Concurrently, difficulties like technological constraints, illiteracy in the digital age, communication difficulties, as well as ethical issues of confidentiality and informed consent underscore the necessity for cautious incorporation of tele-counselling into standard social work routine. The inequalities in access and the delimitations in support of complicated or long-term mental health issues indicate that tele-counselling ought to supplement, not substitute, standard face-to-face services.

Implications

Social Work Practice: Protocols and best-practice guidelines for tele-counselling in social work need to be established. Such requirements cover case selection criteria, risk assessment measures, and technology use frameworks.

Social Work Education: Social work education programs need to incorporate digital competency and tele-practice modules to prepare future professionals with the competencies necessary for virtual service delivery.

Policy: Policymakers will need to acknowledge tele-counselling as a valid and necessary part of mental health care delivery systems. Investment in infrastructure, training, and data protection legislation will be imperative to the mainstreaming of tele-counselling.

Research: Additional empirical studies are required to determine long-term effects of tele-counselling, particularly for vulnerable and diverse populations. Mixed-methods studies can provide light on not just what works, but also how and for whom most effectively.

Recommendations

- Social workers must be trained in tele-counselling, including digital tools, online communication techniques, and crisis intervention in virtual environments. Curricula in social work education should include modules on tele-counselling.
- Government and mental health institutions should invest in the technological infrastructure required for high-quality tele-counselling services, particularly in rural and underserved areas.
- Professional bodies need to create transparent ethical guidelines and tele-counselling protocols applicable to online counselling, emphasizing confidentiality, informed consent, information security, and boundaries in virtual interactions.

- A blended model integrating web-based and face-to-face interventions must be encouraged, especially for clients presenting with multifaceted or chronic mental health needs.
- Services must be made accessible to fit the particular requirements of vulnerable groups—such as the elderly, offenders, disabled persons, and low digital literacy people—to promote universal access.
- Tele-counselling has to be part of national mental health policy and social work service plans and recognized, funded, and regulated accordingly.
- Empirical studies are needed to compare the effectiveness of tele-counselling in the long run, user satisfaction, and outcomes among various populations and cultural settings.

References

1. Gupta S, Kumar M, Rozatkar AR, Basera D, Purwar S, Gautam D & Jahan R. Feasibility and effectiveness of telecounseling on the psychological problems of frontline healthcare workers amidst COVID-19: A randomized controlled trial from Central India. *Indian Journal of Psychological Medicine.* 2021; 43(4):343–350. https://doi.org/10.1177/02537176211024537
2. Tajan N, Devès M & Potier R. Tele-psychotherapy during the COVID-19 pandemic: A mini-review. *Frontiers in Psychiatry,* 2023, 14, 1060961. https://doi.org/10.3389/fpsyt.2023.1060961
3. Manickam LS (Ed.). *COVID-19 pandemic: Challenges and responses of psychologists from India*. Wiley, 2021.
4. Reay R, Kisely SR & Looi JCL. Better access: Substantial shift to telehealth for allied mental health services during COVID-19 in Australia. *Australian Health Review*. 2021; 45(6):675–682. https://doi.org/10.1071/AH21162
5. Whaibeh E, Mahmoud H & Naal H. Telemental health in the context of a pandemic: The COVID-19 experience. *Current Treatment Options in Psychiatry*. 2020; 7(2):198–202. https://doi.org/10.1007/s40501-020-00210-2
6. Gilson T, Stewart C & Hodgson D. Telehealth in Mental Health Social Work: Benefits and Limitations within Practice. *Australian Social Work*, 2024, 1–13. https://doi.org/10.1080/0312407X.2024.2380350
7. Pangngay JJ. *Virtual lifelines: Filipino psychologists' experiences with tele-counseling for suicide prevention,* 2024. [Article]. https://doi.org/10.13140/RG.2.2.36512.74248
8. Østergaard CU & Dinesen C. *Video communication as a tool for psychosocial support for people recovering from severe mental disorder: Social workers' experiences*. *M Health*, 2019, *5*, 39. https://doi.org/10.21037/mhealth.2019.08.08
9. Students applying for admission on SAMS can now seek help for mental health issues. (2025, May 8). *The Times of India*. https://timesofindia.indiatimes.com/city/bhubaneswar/students-applying-for-admission-on-sams-can-now-seek-help-for-mental-health-issues/articleshow/120907968.cms
10. Manikappa SK, Shetty KV, Ashalatha K, Bamney U & Sachetha GM. Tele-counseling services for COVID-19 patients: Experiences from a state mental health institute in South India. *Journal of Education and Health Promotion.* 2024; 13:505. https://doi.org/10.4103/jehp.jehp_292_23
11. Lin LA, Casteel D, Shigekawa E, Weyrich MS, Roby DH & McMenamin SB. Telemedicine-delivered treatment interventions for substance use disorders: A systematic review. *Journal of Substance Abuse Treatment.* 2019; 101:38–49. https://doi.org/10.1016/j.jsat.2019.03.007
12. Gbadamosi OA & Ajewumi OE. *Telehealth and digital platforms in social work: Enhancing client access and care delivery*. *International Journal of Research Publication and Reviews.* 2024; 5(9):1260–1267. https://doi.org/10.55248/gengpi.2024.5925
13. Novo A & Knezevic B. Mental health and tele-health counselling. *International Journal on Biomedicine and Healthcare.* 2019; 7(2):67–70. https://doi.org/10.5455/ijbh.2019.7.67a-70a
14. Simiyu V, Paul N & Mutavi T. *Need-based social work intervention among incarcerated persons during pandemics: A tele-counselling perspective,* 2021. Retrieved from https://www.researchgate.net/publication/350631125_need-based_social_work_intervention_among_incarcerated_persons_during_pandemics_a_tele-counselling_perspective
15. Novo A, Pandza H, Kulasin I & Knezevic B. COVID-19 pandemic and psycho-social tele-counselling. *International Journal on Biomedicine and Healthcare.* 2021; 9(2):108–113. https://doi.org/10.5937/IJBMH9-31247
16. Singh S & Garaya AS. Tele-psychotherapy practice in India: Ethical and professional concerns. *Odisha Journal of Psychiatry.* 2022; 18(1):49–51. https://doi.org/10.4103/OJP.OJP_12_22.