

Digital Mental Health Interventions (DHMIS) for Youth: A Systematic Review of Online Counselling Effectiveness

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DOI Link: <http://dx.doi.org/10.6007/IJARBSS/v15-i9/26422>

Published Date: 03 September 2025

Abstract

Digital mental health interventions (DMHIs) are increasingly recognized as viable and scalable solutions to address rising mental health concerns among youth. With adolescents and young adults facing heightened psychological challenges such as anxiety, depression, and emotional deregulation there is an urgent need for accessible, flexible alternatives to traditional face-to-face counselling. This systematic literature review explores the effectiveness of online counselling interventions specifically targeted at youth populations. Guided by the PRISMA protocol, we conducted a comprehensive search of two major academic databases Web of Science (WoS) and Scopus focusing on peer-reviewed articles published between 2023 and 2025. After rigorous screening, a total of 25 primary studies were selected for in-depth review and synthesis. The analysis yielded three overarching themes: (1) Effectiveness of Digital Interventions in Supporting Mental Health, where most studies reported positive psychological outcomes including reductions in depression and anxiety symptoms; (2) Challenges in Implementing Digital Mental Health Interventions, highlighting barriers such as user engagement, cultural adaptability, and professional resistance; and (3) Accessibility and Equity in Digital Mental Health Services, emphasizing disparities in digital access, literacy, and the need for inclusive, culturally sensitive interventions. Despite diverse methodologies and digital formats across the reviewed studies, the findings consistently support the potential of online counselling as a complementary approach to youth mental health care. However, the long-term success of such interventions depends on addressing engagement, equity, and integration into existing healthcare systems. This review underscores the need for continued innovation and policy support to optimize the reach, quality, and sustainability of digital counselling services for young populations.

Keywords: Digital Mental, Health Interventions (DHMIS), Systematic Review, Counselling Effectiveness

Introduction

The prevalence of mental health challenges among youth has become an escalating concern in contemporary society. Adolescents and young adults face a wide range of psychological difficulties such as anxiety, depression, self-esteem issues, and emotional deregulation, often stemming from academic pressures, social media exposure, family conflicts, and the developmental complexities of adolescence (Hébert et al., 2024; Zolopa et al., 2022). Despite the increasing need for psychological support, many young individuals encounter significant barriers to accessing traditional, in-person counselling services. These include stigma surrounding mental health, lack of availability of qualified professionals, financial constraints, and limited services in rural or underserved areas (Brahmansyah & Safitri, 2019; Pont et al., 2017). In recent years, digital mental health interventions (DMHIs) have emerged as innovative and accessible solutions to address these barriers. These interventions leverage technology to provide therapeutic support through various platforms, including mobile applications, websites, chat-bots, and telecommunication-based counselling (Cameron et al., 2017; Paalimäki-Paakki et al., 2022). Among these, online counselling delivered via video calls, text messaging, email, or other internet-based platforms has gained substantial attention as a youth-friendly and flexible alternative to face-to-face therapy (Keum et al., 2022).

A growing body of research suggests that online counselling can lead to improvements in mental health outcomes for youth, such as reductions in depressive symptoms, enhanced coping strategies, and increased engagement in help-seeking behaviours (Lazuras & Dokou, 2016; Moudatsou et al., 2024). Online counselling also offers potential benefits including anonymity, convenience, lower costs, and reduced stigma, making it particularly attractive to adolescents who are digitally native and often prefer online interaction (Li et al., 2023). However, the effectiveness of these interventions varies considerably across studies, depending on factors such as counsellor qualifications, session frequency, intervention duration, digital modality used, and cultural context. Despite the expanding literature, there remains a lack of systematic synthesis focused exclusively on the effectiveness of online counseling for youth mental health. Existing reviews tend to either group youth with adult populations or evaluate broader digital interventions without isolating the unique contributions of online counselling (Baños et al., 2022). This systematic literature review (SLR) aims to evaluate the effectiveness of online counselling interventions targeting youth, with attention to psychological outcomes, delivery formats, and moderating factors influencing intervention success. The findings will inform future practice, research directions, and the development of evidence-informed digital mental health strategies tailored to youth populations.

Literature Review

Effectiveness of Online Counselling Interventions for Youth

Digital counselling interventions have increasingly gained traction as effective alternatives to conventional mental health services, particularly for the youth population (Peart et al., 2023). Numerous empirical studies have documented their impact in reducing depressive symptoms, anxiety, stress, and behavioral issues among adolescents and young adults (Cameron et al., 2017; Semo & Frissa, 2020). Interventions delivered through text-based platforms, video calls, or mobile applications often integrate principles of cognitive-behavioral therapy (CBT), solution-focused therapy, and psych education (Venkatesan et al.,

2020, 2022). These platforms typically include features such as self-monitoring tools, interactive exercises, and asynchronous messaging with professionals, which collectively contribute to psychological improvements and increased user autonomy. The literature consistently emphasizes the customizability and accessibility of digital counselling. Young people, who are digital natives, tend to feel more comfortable communicating through familiar technological interfaces, reducing stigma associated with traditional therapy. This format also encourages earlier intervention, as youth are more likely to seek help online than face-to-face. For instance, studies such as those by Dowling and Rickwood (2013), Hoermann et al. (2017) and Szlamka et al. (2021) reported significant reductions in depression and anxiety symptoms among youth engaged with digital counselling platforms. Similarly, AI-assisted Chabot's and automated CBT programs showed promising results in facilitating emotional regulation and help-seeking behaviors (Bennion et al., 2020; Cameron et al., 2017; Hoermann et al., 2017). However, the effectiveness of these interventions varies based on several moderating factors. These include therapist involvement, duration of intervention, digital literacy, and cultural congruence (Moudatsou et al., 2024; Szlamka et al., 2021). Personalized interventions that allow two-way interaction with a mental health professional often outperform generic self-guided modules. Moreover, digital counselling outcomes appear more favorable when interventions are designed specifically for youth populations, considering their developmental needs, language preferences, and behavioral patterns. While the literature broadly supports the efficacy of digital interventions, the lack of longitudinal studies and variability in outcome measurement tools limits generalizability.

Barriers and Determinants in Implementing Digital Youth Counselling

Despite their promise, digital mental health interventions encounter several challenges that influence both adoption and long-term effectiveness. A major barrier lies in user engagement and adherence. Youth may lose interest or fail to complete digital programs due to lack of motivation, limited personalization, or competing distractions. Studies by Polycarp Oyoo et al. (2024) and Sumual (2023) highlight a consistent pattern of declining engagement over time, calling for the integration of motivational features such as gamification, real-time feedback, or hybrid human support. Cultural relevance and equity of access are also significant determinants. Digital tools developed in high-income settings often struggle to translate effectively across diverse cultural contexts without appropriate localization (Philippe et al., 2022; Wright et al., 2023). Language, values, and social norms all affect the acceptability and uptake of interventions. Additionally, the "digital divide" disproportionately affects marginalized groups those in rural areas, low-income families, or with disabilities who may lack stable internet access, appropriate devices, or privacy (Murray et al., 2022; Otokiti et al., 2020). Without systemic support, digital interventions risk exacerbating existing mental health disparities.

Professional acceptance and integration into healthcare systems further determine implementation success. Mental health professionals may resist digital tools due to concerns about clinical validity, ethical risks, or fears of displacement (Gentili et al., 2022; Thomas Craig et al., 2021). Consequently, training and policy frameworks are necessary to ensure these tools are viewed as complements to traditional care, not substitutes. Ethical concerns including data privacy, informed consent, and safeguarding confidentiality are frequently raised in the literature and must be addressed to maintain public trust. In sum, while digital youth counselling interventions demonstrate strong potential, their sustainable impact

hinges on designing inclusive, adaptive, and ethically sound systems (Barros & Bossetti, 2021; Diller, 2024). The literature calls for a holistic approach that integrates technological innovation with human-centered design, policy support, and continuous evaluation.

Digital Mental Health Interventions: Broader Trends and Innovations

Beyond online counselling, digital mental health interventions (DMHIs) encompass a broad range of innovations, including AI-powered Chatbots, mobile health applications, virtual reality therapy, and digital CBT platforms. These tools aim to deliver psycho-education, self-monitoring, behavior modification, and emotional support across a range of clinical and subclinical conditions. Research by Pote et al.(2021) and Villarreal-Zegarra et al. (2022) outlines comprehensive frameworks for developing effective digital mental health tools, emphasizing principles such as user-centered design, ethical transparency, and modular flexibility. Meanwhile, studies Dhingra and Dabas (2020) and Holly et al. (2022) like showcase the success of country-level digital health strategies in reaching at-risk youth through mobile guidance and psycho-educational support. Furthermore, meta-analyses such as those by Axford et al. (2023) and Holly et al.(2022)confirm the significant impact of DMHIs on treatment adherence, symptom reduction, and recovery in diverse populations. These interventions are especially impactful in settings with limited access to traditional care, where they fill systemic gaps and enhance the reach of mental health services. However, the rise of automation in mental health also raises ethical dilemmas. Research from Lustgarten et al. (2020) and Parker et al. (2019) discuss that issues surrounding data privacy, AI biases, emotional safety, and lack of human oversight require rigorous governance. Digital interventions must be accompanied by robust privacy protections, clear consent mechanisms, and fallback options involving trained professionals. Without this, the therapeutic value of digital tools may be compromised. Overall, the literature indicates that while DMHIs are not panaceas, they hold significant potential when integrated thoughtfully into mental healthcare ecosystems. Their role is most impactful when viewed not as replacements for human care, but as augmentative tools that enhance engagement, personalize support, and bridge systemic gaps in youth mental health services.

Material and Methods

Identification

In conducting this study, a systematic and rigorous approach was employed to identify and gather a substantial body of relevant literature. The review process commenced with the meticulous selection of key terms central to the research topic. To ensure comprehensiveness, related terms were systematically explored using dictionaries, thesauri, encyclopedias, and prior scholarly works. All pertinent terms were compiled to construct robust search strings tailored for querying the Web of Science and Scopus databases (as outlined in Table 1). This exhaustive search strategy resulted in the identification of 305 publications deemed relevant to the study's objectives, serving as the foundation for subsequent analysis.

Table 1

*The search string**Screening*

Scopus	TITLE-ABS-KEY (Digital AND Mental Health AND Counseling AND Adult) AND PUBYEAR > 2023 AND PUBYEAR < 2025 AND (LIMIT-TO (DOCTYPE , "ar")) AND (LIMIT-TO (LANGUAGE , "English"))
Date of Access: August 2025	
WoS	Digital AND Mental Health AND Counseling AND Adult and 2023 or 2024 or 2025 (Publication Years) and Article (Document Types) and English (Languages)
Date of Access: August 2025	

During the screening phase, potentially relevant research items were meticulously evaluated to ensure alignment with the predefined research question(s). This critical step involved assessing studies related to counseling, families at risk, and intervention processes. A primary objective of this phase was to remove duplicate records and focus on studies meeting the established inclusion and exclusion criteria.

Initially, a total of 97 publications were excluded after a preliminary review, leaving 207 studies for further examination. These remaining publications were screened using specific criteria designed to identify the most relevant and high-quality research. The first criterion prioritized literature that served as a source of practical and theoretical recommendations, encompassing reviews, meta-syntheses, meta-analyses, books, book series, book chapters, and conference proceedings not included in prior studies.

To ensure the review's relevance and rigor, only English-language publications published between 2023 and 2025 were included. Additionally, nine publications were excluded during this phase due to duplication, ensuring the dataset remained focused and free from redundancy. This rigorous screening process ensured that the final selection of studies provided a robust foundation for subsequent analysis and synthesis.

Table 2

The Selection Criterion Is Searching

Criterion	Inclusion	Exclusion
Language	English	Non-English
Time line	2023-2025	< 2022
Literature type	Journal (Article)	Conference, Book, Review
Publication Stage	Final	In Press

Eligibility

In the third step, known as the eligibility phase, 95 articles were prepared for review. During this stage, the titles and key content of all articles were carefully examined to ensure they met the inclusion criteria and aligned with the current research objectives. Consequently, 70 data/paper/article were excluded as they did not qualify as due to the out of field, title not

significantly, abstract not related on the objective of the study and no full text access founded on empirical evidence. As a result, a total of 25 articles remain for the upcoming review.

Data Abstraction and Analysis

An integrative analysis was used as one of the assessment strategies in this study to examine and synthesize a variety of research designs (quantitative methods). The goal of the competent study was to identify relevant topics and subtopics. The stage of data collection was the first step in the development of the theme. Figure 1 shows how the authors meticulously analyzed a compilation of 25 publications for assertions or material relevant to the topics of the current study. The authors then evaluated the current significant studies related to counseling, digital counseling and family. The methodology used in all studies, as well as the research results, are being investigated. Next, the author collaborated with other co-authors to develop themes based on the evidence in this study's context. A log was kept throughout the data analysis process to record any analyses, viewpoints, riddles, or other thoughts relevant to the data interpretation. Finally, the authors compared the results to see if there were any inconsistencies in the theme design process. It is worth noting that, if there are any disagreements between the concepts, the authors discuss them amongst themselves. The produced themes were eventually tweaked to ensure consistency. The analysis selection was carried out by two experts, one in Counseling and one from Mental Health Counseling to determine and determine the validity of the problems. The expert review phase ensures the clarity, importance, and suitability of each subtheme by establishing the domain validity. The authors also compared the findings to resolve any discrepancies in the theme creation process. Finally, the developed themes were tweaked to ensure their consistency. To ensure the validity of the problems, the examinations were performed by two experts. The expert review phase helped ensure each sub-theme's clarity, importance, and adequacy by establishing domain validity. Adjustments based on the discretion of the author based on feedback and comments by experts have been made.

The questions are as follows below:

- i. To evaluate the effectiveness of online counselling in improving mental health outcomes among youth?
- ii. To identify key challenges, implementation factors, and accessibility issues related to digital mental health services for youth?

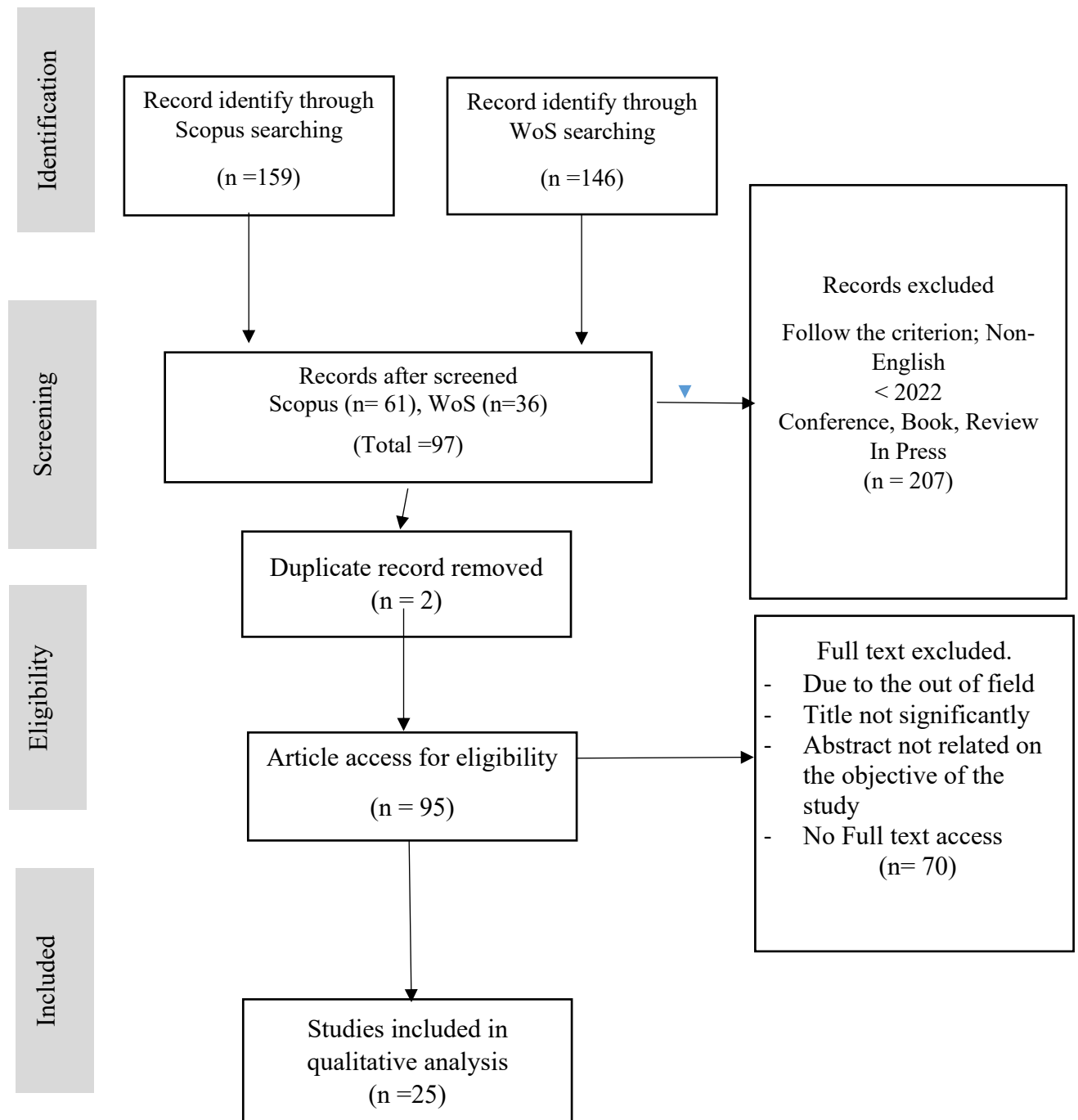


Figure 1. Flow diagram of the proposed searching study

Table 3

Number and details of Primary Studies (PS) Database

Authors	Title	Year	Scopus	WoS
(Hofer et al., 2023)	Professional Digital Counselling for Eating Disorders in Germany: Results of the DigiBEsst Project Survey on the Perspectives and Experiences of Health Professionals, Individuals With Eating Disorders, and Careers.	2025	/	/
(LaMonica et al., 2025)	Providing digital mental health support and guidance across Colombia: An observational study	2025	/	/
(Wong et al., 2023)	Automated Digital Counseling Program (ODYSSEE-Kidney Health): A Pilot Study on Health-Related Quality of Life	2023	/	/
(Che et al., 2023)	Digital Health in Enhancing Antiretroviral Therapy Adherence: A Systematic Review and Meta-Analysis	2023	/	/
(Leah et al., 2024)	Feasibility of online psychosocial interventions to promote mental health recovery and well-being	2024	/	/
(Rabbani et al., 2025)	Home-based digital counselling by frontline community workers for anxiety and depression symptoms in rural Sindh, Pakistan: the mPareshan intervention	2025	/	/
(Hood et al., 2025)	Use of e-Mental Health Tools for Suicide Prevention in Clinical Practice by Mental Health Professionals in NSW, Australia: Cross-Sectional Survey	2025	/	
(Obama et al., 2023)	Effectiveness of a facilitation programmed using a mobile application for initiating advance care planning discussions between patients with advanced cancer and healthcare providers: Protocol for a randomized controlled trial (J-SUPPORT 2104)	2023	/	
(Ruini et al., 2025)	Positive mental health, depression and burnout in healthcare workers during the second wave of COVID-19 pandemic	2025	/	
(Andreasen et al., 2024)	The effect of a digital intervention on symptoms of depression in pregnant women exposed to Intimate partner violence in Denmark and Spain (STOP study)	2024	/	
(Laza et al., 2023)	Untangling the Professional Web: Understanding the Impact of Work-Related Factors on the Mental Health of Healthcare Professionals During the Late Stages of Covid-19 Pandemic	2023	/	
(Berger et al., 2023)	The Experiences of Australian School Mental Health Professionals during COVID-19 Lockdowns	2023	/	

(Mittmann et al., 2025)	Attitudes of the general population and mental health practitioners towards blended therapy in Austria	2025	/
(Morgenstern et al., 2024)	Improving Access and Quality of Behavioral Health Services for Health Care Employees	2024	/
(Blackshaw et al., 2023)	Digital mental health outcome monitoring for a structured text-based youth counselling intervention: Demographic profile and outcome change	2023	/
(Rai et al., 2023)	Effects of mobile technology-based interventions for promoting mental health and psychosocial well-being among young people in low- and middle-income countries: A systematic review protocol	2023	/
(Akhtar et al., 2025)	A qualitative study assessing acceptability and appropriateness of a technology-assisted mental health intervention by community frontline workers: mPareshan implementation research in rural Pakistan	2025	/
(Rifkin-Zybutz et al., 2023)	Digital Technology Use and Mental Health Consultations: Survey of the Views and Experiences of Clinicians and Young People	2023	/
(Harty et al., 2023)	Implementing digital mental health interventions at scale: one-year evaluation of a national digital CBT service in Ireland	2023	/
(Dzubur et al., 2023)	The Effect of a Digital Mental Health Program on Anxiety and Depression Symptoms: Retrospective Analysis of Clinical Severity	2025	/
(Spadaro et al., 2023)	Opportunities for the Implementation of a Digital Mental Health Assessment Tool in the United Kingdom: Exploratory Survey Study	2023	/
(van der Schyff et al., 2023)	Providing Self-Led Mental Health Support Through an Artificial Intelligence-Powered Chat Bot (Leora) to Meet the Demand of Mental Health Care	2023	/
(LaMonica et al., 2025)	Providing digital mental health support and guidance across Colombia: An observational study	2025	/
Mertens & Van Gelder (2024)	The DID-guide: A guide to developing digital mental health interventions	2025	/

Result and Finding

Digital Interventions in Supporting Mental Health

Digital interventions have increasingly demonstrated their potential to enhance mental health outcomes by offering accessible, scalable, and evidence-based approaches to care. Research findings consistently show that interventions such as mobile health applications, automated counselling platforms, and web-based CBT programs lead to significant reductions in symptoms of depression, anxiety, stress, and burnout across different populations. For instance, the ODYSSEE-Kidney Health program revealed improvements in health-related quality of life for patients with chronic kidney disease (Wong et al., 2023), while the

intervention in Pakistan showed notable declines in anxiety and depression when delivered by trained community health workers. These examples illustrate the adaptability of digital tools to diverse clinical and socio-cultural contexts, suggesting that technology can bridge traditional service gaps. A critical strength of digital interventions lies in their capacity for personalization and flexibility (Bantjes & Slabbert, 2021). Many platforms incorporate interactive features such as psycho-education, self-monitoring, and real-time feedback, which empower users to take active roles in managing their mental health. Moreover, these tools are often cost-effective, making them particularly valuable for low-resource settings where access to trained mental health professionals is limited (Cameron et al., 2017; Litchfield et al., 2023). The integration of digital platforms into existing healthcare systems also expands opportunities for hybrid or blended models of care, combining human support with technological efficiency (Olson et al., 2008).

However, effectiveness cannot be interpreted in isolation from contextual and structural factors. Studies highlight that levels of user engagement strongly predict outcomes, suggesting that digital programs are most effective when participants actively interact with the platform (Wang et al., 2022). This raises questions about digital literacy, sustained motivation, and equity of access (Mulungu et al., 2024; Suryahadikusumah & Nadya, 2020). While the evidence supports digital interventions as effective supplements or alternatives to traditional counselling, there is also a risk of over-reliance on technology without addressing underlying systemic barriers such as workforce shortages and stigma (Adeane & Gibson, 2023). Furthermore, ethical considerations around privacy, data security, and the therapeutic alliance remain central to evaluating their overall effectiveness. In conclusion, the effectiveness of digital interventions in supporting mental health is promising and well-documented, yet their success depends on ensuring accessibility, engagement, and ethical implementation. Rather than replacing traditional care, digital interventions should be critically positioned as complementary strategies that extend the reach and impact of mental health services while adapting to the diverse needs of users.

Implementing Digital Mental Health Interventions

The implementation of digital mental health interventions faces numerous challenges that shape both their acceptance and sustainability across healthcare systems. While the evidence highlights their potential effectiveness, a critical examination of barriers reveals complex issues that extend beyond technological design. One key determinant is user engagement and adherence. Many interventions show a sharp decline in usage after initial sessions, with participants reporting fatigue, lack of motivation, or limited perceived usefulness (Riboldi et al., 2023). This trend raises questions about whether digital platforms can maintain long-term behavioral change without adequate human support. Moreover, adherence is influenced by individual factors such as self-efficacy, prior digital literacy, and perceived stigma, making it clear that interventions must be designed to accommodate diverse user needs (Kurki et al., 2021; Peyton et al., 2022; Yeo et al., 2024). Another challenge lies in cultural sensitivity and contextual adaptation. Studies indicate that interventions developed in high-income countries often struggle when applied in low- and middle-income contexts without localization. For example, linguistic barriers, differing health beliefs, and variations in technological infrastructure can hinder successful implementation. To ensure digital mental health interventions truly make an impact, it is not enough for them to be effective on paper; they must also fit the social and cultural contexts of the people they aim to serve. This

highlights the need to co-design these tools with real voices from the ground, including young people, families, caregivers, and community health workers, so that the interventions reflect everyday realities and values. For digital tools to be fully embraced, they must be seen not as optional add-ons, but as meaningful parts of the broader mental health system. Unfortunately, without proper training and support, some healthcare professionals may view these tools as burdens or even threats to their roles. Building confidence and capacity among practitioners is therefore crucial. Equally important is policy and financial support—without long-term investment and institutional commitment, many promising projects remain stuck at the pilot stage. Ethical and access issues must also be taken seriously. Concerns about privacy, consent, and fairness are still unresolved, especially for vulnerable communities. Many young people still lack internet access, appropriate devices, or even a safe space to engage in online counselling. If these barriers aren't addressed, the digital shift may widen, rather than reduce, the gap in mental health care.

Accessibility and Equity in Digital Mental Health Services

Accessibility and equity are not just technical considerations in digital mental health they are moral imperatives that speak to the kind of care systems we want to build. Around the world, there is growing recognition that mental health support must be inclusive and fair, especially for young people in marginalized or underserved communities. Digital platforms such as online counselling, mobile apps, and telepsychiatry are often celebrated for their ability to reach people in remote areas, reduce waiting times, and ease the burden on overstretched healthcare systems. They offer a vision of mental health support that is immediate, affordable, and widely available. However, the reality is more complex. The same technologies that promise inclusion can unintentionally exclude those who need help the most. Many low-income families, rural youth, and individuals with limited digital skills still face barriers such as poor internet access, lack of suitable devices, or even the absence of a private space to engage safely. This digital divide risks deepening existing inequalities if left unaddressed. Language and culture also matter deeply. When digital interventions are designed without considering diverse experiences such as those of indigenous, migrant, or differently-abled youth they may feel irrelevant, uncomfortable, or even alienating. Culturally blind tools cannot build trust or foster engagement. That is why co-creation is essential. When interventions are developed with input from those they aim to serve young people, caregivers, community leaders they become more relevant, respectful, and effective. Likewise, true accessibility means ensuring platforms are usable by individuals with visual, auditory, or cognitive impairments, and that support systems are in place, such as live guidance or helplines. Ethical concerns also shape how accessible a platform truly is. Without strong protections for privacy and data security, vulnerable users may be hesitant or fearful to seek help online. In short, digital tools can be powerful equalizers but only if designed and deployed with empathy, awareness, and fairness. Accessibility must go beyond availability; it must mean safety, dignity, and respect for all users, especially those who are often overlooked. If grounded in principles of justice and participation, digital mental health services can become truly transformative tools for equity and care.

Discussion and Conclusion

The findings of this review highlight three key themes: effectiveness, implementation challenges, and accessibility, each interwoven with factors that shape the true potential of digital counselling in youth mental health care. Together, they offer a deeper understanding

of how these interventions can evolve from promising innovations into sustainable models of support. Effectiveness remains at the heart of digital interventions. Numerous studies have reported measurable improvements in anxiety, depression, and overall psychological well-being among youth engaged in digital counselling platforms. For example, (Wong et al., 2023) demonstrated the impact of an automated digital counselling program on quality of life indicators, while (Dzubur et al., 2023) found reductions in clinical symptoms through a structured digital mental health program. These outcomes reflect how digital tools can empower youth to better regulate their emotions and seek support more confidently. However, the success of such interventions depends heavily on sustained engagement and therapeutic interaction. As seen in the work of Dzubur et al. (2023), users who actively participate in digital counselling tend to show stronger improvements, underscoring the need for personalized and interactive features. For practitioners, this points to the importance of designing interventions that maintain client involvement over time, not merely offering access but fostering commitment.

Turning to implementation, the path from digital concept to real world practice is rarely straightforward. Barriers such as digital literacy, cultural fit, and practitioner readiness continue to challenge the scalability of these tools. Rabbani et al. (2025) and Akhtar et al. (2025) highlighted the importance of community-based delivery models, especially in low resource settings, where the integration of frontline workers helped ensure both accessibility and trust. Yet, even in well-resourced contexts, professionals may express hesitation toward digital counselling, often perceiving it as disruptive or secondary to traditional care (Mittmann et al., 2025). Training and capacity building are thus vital, not only to develop technical skills but to cultivate confidence and openness among mental health practitioners. Furthermore, (LaMonica et al., 2025) stress the necessity of institutional backing and long term policy support. Without sustainable funding and structural integration, many digital initiatives risk remaining temporary or underutilized. Finally, accessibility and equity remain ethical cornerstones of digital mental health delivery. While digital platforms offer remarkable reach, they can also deepen existing inequalities if not designed inclusively. (Leah et al., 2024) emphasized that feasibility depends on more than just technology, it also requires cultural sensitivity, linguistic adaptation, and support for users with disabilities. Meanwhile, van der Schyff et al. (2023) illustrate how AI driven self-led tools can scale services but may also overlook users with low digital literacy or privacy concerns. The so called digital divide persists, particularly among youth in rural or marginalized communities, where limited internet access, device availability, and private spaces continue to be significant barriers (Rai et al., 2023).

In light of these findings, the implications for counselling practice are clear. First, digital tools must not replace human connection but rather enhance it. Second, the field must prioritize equity and inclusion, ensuring that no youth is left behind due to socio-economic, cultural, or technological constraints. Third, ethical safeguards around privacy, data use, and client autonomy must remain central. As Mertens and Van Gelder (2025) advocate, designing digital mental health tools requires an approach rooted in participation, justice, and contextual understanding. In conclusion, digital counselling offers not just a technological shift but a transformational opportunity to reimagine how we care for youth. By addressing the interrelated dimensions of effectiveness, implementation, and equity, we can move toward digital interventions that are not only clinically impactful but also ethically grounded and truly

inclusive. This systematic literature review reveals that digital counselling holds significant promise in supporting youth mental health by reducing symptoms of anxiety, depression, and emotional distress. However, its effectiveness is closely linked to sustained user engagement, therapist involvement, and culturally sensitive design. Implementation challenges such as limited digital literacy, practitioner resistance, and lack of policy support remain critical barriers. Additionally, accessibility issues, including socio-economic inequality and the digital divide, risk excluding the most vulnerable youth. To ensure long-term impact, digital mental health interventions must be ethically grounded, inclusive, and integrated within existing healthcare systems with adequate support and training.

Acknowledgment

The authors gratefully acknowledge the Universiti Pertahanan Nasional Malaysia (UPNM) for the financial support provided under the FRGS-EC Grant in facilitating the publication of this article. The authors also wish to extend their sincere appreciation to the reviewers for their valuable feedback on the themes developed in this systematic literature review. Special thanks are due to colleagues whose support contributed to the completion of this work. The authors hope that the insights presented in this article will be of benefit to scholars, practitioners, and the wider community.

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