

**The Effectiveness of Telehealth Counseling Services for Children and Adolescents on the
Autism Spectrum: A Literature Review**

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The onset of the COVID-19 pandemic caused the rapid expansion of telehealth services across diverse communities. This shift underscored the urgent need for widespread systemic improvements in telehealth delivery to ensure both continuity of care and quality of care, particularly for autistic children and adolescents. According to Chen et al. (2022), “Autism, clinically known as ASD (Autism Spectrum Disorder), is a neuro-developmental disability that impairs the way patients interact, communicate and behave.” Spectrum refers to a wide range of functionality often associated with varying degrees of severity by which patients and their parents are impacted (Chen et al., 2022; Ellison et al., 2021). Autism is typically supported through applied behavioral analysis (ABA), functional communication training (FCT), dialectical behavior therapy (DBT), and cognitive-behavioral therapy (CBT) (Ellison et al., 2021; Hepburn, et al., 2015; Lindgren, et al., 2020; McCrae et al., 2021). In the five years since the pandemic, major strides have been made, which have positioned telehealth services as efficacious, effective delivery models for many (Andersson et al., 2019; Pham and Charles, 2023). However, there are significant barriers to telehealth access for families of autistic children (Pham and Charles, 2023). This literature review will examine effective telehealth counseling services in supporting the mental health and wellbeing of children and adolescents on the autism spectrum, and in what ways issues of accessibility, cultural responsiveness, and systemic inequality influence outcomes for marginalized populations within these interventions.

Efficacy, Adaptability, and Accessibility of Telehealth for ASD Children and Adolescents

Telehealth platforms in ASD treatment offer promising avenues for expanding services access and continuity, especially for families marginalized by geographic, linguistic, and socioeconomic barriers. Delivery models such as video-conferencing, web-based portals, and mobile apps have become normalized, yet there are ethical concerns surrounding the confrontation of digital inequities and literacy, accessibility of care, and the prioritization of culturally responsive care for ASD children and training for parents. Questions surrounding the effectiveness of traditional delivery of therapies in telehealth models also weigh heavily on the mental health community.

Evidence of Effectiveness

There have been notable improvements documented across modalities like CBT, DBT, and parental training in telehealth (Hepburn et al., 2015; Schieltz et al., 2022). High clinical fidelity has been reported in telehealth-delivered parent training and functional communication training with Schieltz et al., (2022) citing 97.4% reduction in challenging behaviors post-intervention and Lindgren et al. (2020) reporting a mean reduction of 98% compared to treatment-as-usual (TAU). Stavropoulos et al., (2022) reports ASD diagnosis and treatment has shown an accuracy of 80%-91% compared to traditional in-person assessments with Ellison et al. (2021) reporting 100% reduction in maladaptive behaviors by the 7th session.

User Satisfaction and Engagement

Hepburn et al. (2015) and McCrae et al. (2021) cite scores of 92% or more satisfaction rates between parents as rated by parent-reported SCARED (Screen for Child Anxiety Related Emotional Disorders) scores. Telehealth has shown promise for co-occurring conditions like anxiety and insomnia, which has functionally equipped families and ASD children with tools for managing symptoms. Integrating extended reality platforms and mobile apps has only further

enhanced adaptability and client engagement, especially for families experiencing marginalization, and has enabled more inclusive, accessible, and flexible care (Chen et al., 2022). Most notably, applications like Emotionary, Social Express, and Zac's Monster, helped children with ASD better manage anxiety and dysregulation and enhanced social skills. Overall, parental satisfaction in the reduction of challenging behaviors of ASD children was high across all studies, Hepburn et al. (2015) noting 88.8% satisfaction in youth.

Methods and Tools

Studies collected employed methodologically rigorous and equitable data collection and analysis to evaluate telehealth interventions for ASD youth and their parents. Researchers used quantitative measures like randomized controlled trials and intention-to-treat methods and linear mixed models to evaluate differences between the Immediate FCT group and the Delay group (Lindgren et al., 2020; Schieltz et al., 2022). Other data collection was done through literature research, qualitative assessments, clinical interviews, and caregiver feedback, quantitative measures such as surveys Parenting Sense of Competence Scale (PSOC), SCARED, and actigraphy (Hepburn et al. 2015; McCrae et al. 2021; Chen et al., 2022). Fidelity checks for intervention delivery and independent dual review process and quality appraisals ensured validity and reliability (Chen et al., 2022; Hepburn et al., 2015; Lindgren et al., 2020; Stavropoulos et al., 2022; McCrae et al., 2020).

Intersectional Barriers to Telehealth Accessibility and Functionality

Accessibility and functionality of autism services are rooted in complex overlapping systems of oppression, including race, socioeconomic status, language, and geographic location. Black and Latinx families, particularly those in low-income or rural settings frequently encounter

compounded disadvantages in the diagnosis and treatment of ASD for their children (Ellison et al., 2021; Pham and Charles, 2023; Rivera-Figueroa et al., 2022). Further implicit biases within healthcare systems also contributed to disparities across marginalized groups.

Access Barriers and Functional Limitations

Issues such as resource limitations, internet access, digital literacy, and cultural divides were noted in all studies reviewed. Technological limitations restrict fair participation in treatments and worsen health inequalities in underserved groups (Pham and Charles, 2023). Black and Latinx, as delineated by Rivera-Figueroa et al. and Pham and Charles, magnifies how under-resourced families experience delayed diagnoses and miss opportunities for care because of limited bilingual resources and counselors being ill-informed regarding cultural perceptions and acceptance of ASD. Researchers across studies highlight data limitations stemming from unreliable internet access, which further perpetuates inequitable access for rural communities and hinders effective communication (Ellison et al., 2021). Some families may encounter difficulties with insurance coverage for telehealth services, further complicating access to care.

Practical and Ethical Issues

Telehealth delivery also raised ethical concerns regarding informed consent, confidentiality, and data security. Compliance with regulations like HIPAA is essential to safeguard personal health information. These issues could be resolved through secure practice management platforms like SimplePractice or TherapyAppointment. Schieltz et al. noted difficulties in conducting functional analyses for behaviors as these require specific conditions that are hard to replicate in a telehealth setting (2020). This raises questions about the appropriateness of telehealth for many overtly challenging behaviors. The lack of nuance in conducting behavioral assessments paired with the absence of in-person rapport forces heavy

reliance on qualitative interviewing in order to confirm diagnoses and treatment plans. This is problematic for non-English-speaking communities, who experience exacerbated compounding restraints on delivery of interventions.

Racial and Sociocultural Disparities

Entrenched cultural misunderstandings and insufficient clinician training undermine culturally competent autism assessment, yielding inaccurate diagnoses and less effective interventions. Inequalities within the system persist in restricting access to autism services in a timely and equitable way. This disproportionately burdens families in marginalized communities. Social justice must advance within healthcare in order to effectively advocate for intentional engagement with families and recognition of intersecting identities and community dynamics through building trust and partnership within historically excluded populations.

Objective Analysis of the Literature

Studies such as Lindgren et al., Hepburn et al., and McCrae et al., employed rigorous methodologies to substantiate the positive impact of telehealth modalities regarding interventions for behavioral challenges. The literature shows high parental and child satisfaction and maintained treatment fidelity in 6-and 12-month follow-ups. This reinforces the efficacy of telehealth services for autism care, while studies such as Pham and Charles and Rivera-Figueroa highlight the need to better incorporate client cultural perceptions in telehealth services for marginalized communities. Disparities discussed in the literature are marked by critical self-awareness regarding research limitations and the acknowledgement of gaps in research regarding older adolescents, adults, and significantly minoritized populations. The findings reported within the literature serve not only to validate telehealth's potential but to galvanize the counselling profession toward more transformative and culturally humble care.

Conclusion

Telehealth services for ASD youth are effective, with mutual rates of satisfaction within family units. Strong clinical fidelity shows the efficacy of interventions used by providers and promotes positive changes in family units. Despite this, there are persistent gaps in the research, showing a need for greater cultural responsiveness and tailored interventions for older youth and diverse populations. As such, systemic reform is necessary and should include: enhanced provider training centered on cultural humility; comprehensive, free healthcare; and improvements to internet access and technology literacy. In doing so, mental health professionals may mitigate barriers and ensure equal access to families who may benefit from telehealth care.

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