



Personhood, Privacy, and Spirituality: Neuroethics of digital mental health innovations for youth in Africa

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Mental health situation in Africa

- 13% of the global disease burden is of mental illnesses (Miliun, 2012)
- In Low and Middle Income Countries (LMIC), 75% - 95% of people with mental illnesses do not access mental healthcare (Mwanaisha, 2021).
- In sub-Saharan Africa, persons with mental health conditions experience additional challenges - stigma, poverty, cultural inhibitions & inadequate mental health policies.
- Proliferation of digital mental health innovations esp. with COVID 19 have improved access (4As) for young people
- In a context of African conception of a person marked by communalism and spirituality (interconnectedness of all) digital innovations for mental health pose serious neuroethics issues



: Kenya country study goal & methods

- **Goal:** Engage young people, policy makers, digital innovators, and mental health practitioners, and researchers on their experiences with digital mental health innovations in order to identify the risks, benefits, facilitators, as well as barriers that the young people associate with these innovations towards promoting ethical digital mental health innovations
- 11/2020 – 7/2021 across Kenya - oral interviews, FGDs & workshops
- Content and thematic analysis
- Ethical considerations – COVID 19 challenges, respect of persons, justice – guided by **Critical Diversity Literacy**



Findings & discussion

- Youth in Africa **rely on digital innovations** to access mental health care
- But **unguided** exposure of African youth to the digital universe compromises privacy as a neuroethics concept
- ✓ When they immerse themselves in the ubiquitous digital universe with their communalistic disposition it may obscure their sense and urgency for privacy
- ✓ With the African spiritualism based on interconnectedness of beings, privacy presents as alien concept.
- This creates a lacunae in the application of the ‘gold standard’ privacy principle in biomedical practice in general.



Conclusions

- Digital innovations promote youth **access** to mental health care
- **Contexts matter**- it affects acceptability and conception of neuroethical concepts, especially privacy
- Lack of privacy and confidentiality particularly in the context of African personhood and spirituality (Relationships) translate to **neuroethics** issues

Thank you

